



SUPPLY CHAIN PRIORITIES FOR POLICY INTERVENTION

PRESENTED AT PEPFAR UGANDA 2020
STRATEGIC PLANNING RETREAT
BY

OKUNA NEVILLE OTEBA
(CHS-PHARMACEUTICALS AND NATURAL
MEDICINES)
JANUARY 2020



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Introduction

i. Background

- Priorities informed by the vision 2040, National Development Plan II, National Health Policy, & Health Sector Development Plan, all of which define the National and Health Sector Development agenda over Short, Medium and Long-Term.
- The aspiration is articulated in the National Medicines Policy (NMP)

ii. Guiding Principles for the NMP

- Universal Health Coverage – Ensure the medicines and Health supplies required are defined, quantified and multiple financing strategies put in place
- Equity and Efficiency- EMHS available based on need and priority use of the limited resources available
- Quality of care – to increase effectiveness of services delivery and improved patient safety.



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Performance: Increased Access and Availability of EMHS

Percentage availability for a basket of 41 tracer medicines and supplies in the last 3 months (April-June 2019) at central

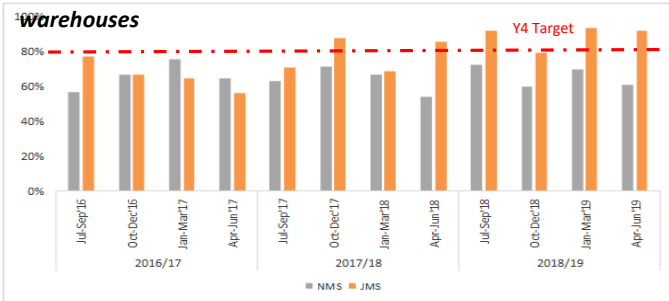
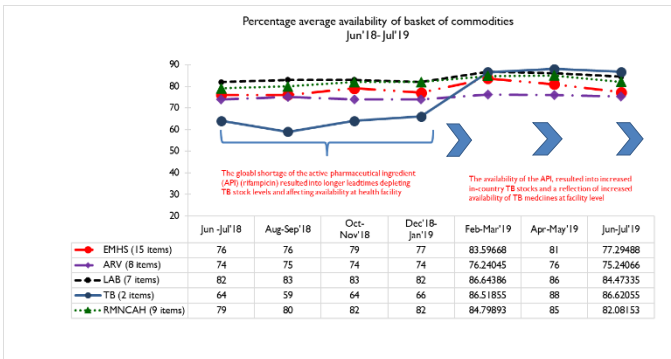


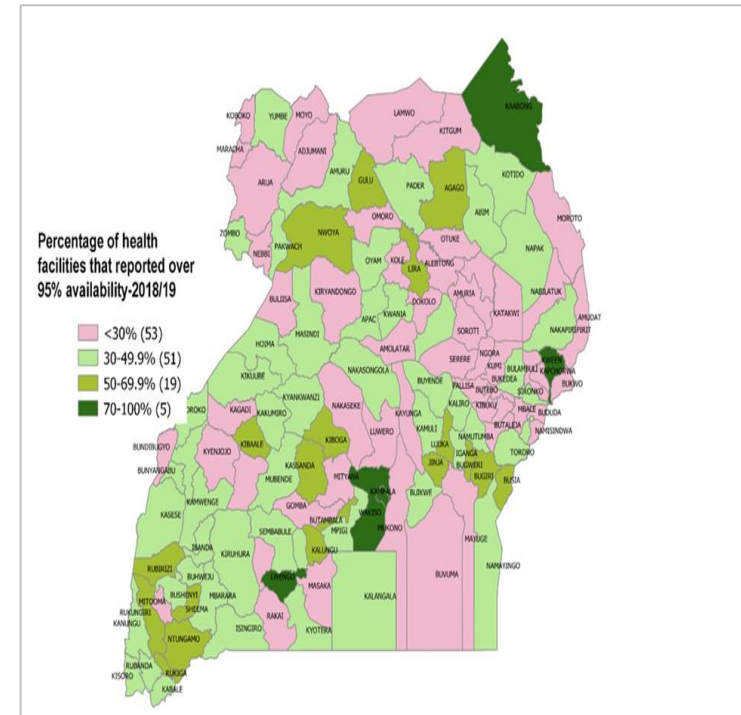
Figure 2: Average percent availability of commodity basket items in reporting facilities, in the previous quarter, April-June, 2019



✓ 57% of reporting facilities had over 95% availability of all the 41 commodities

✓ Percentage availability for a basket of 41 tracer medicines and supplies in the last 3 months (April – June 2018) at central warehouses was 54% NMS and 85% JMS

Map showing districts that had over 95% availability of all 41 commodities

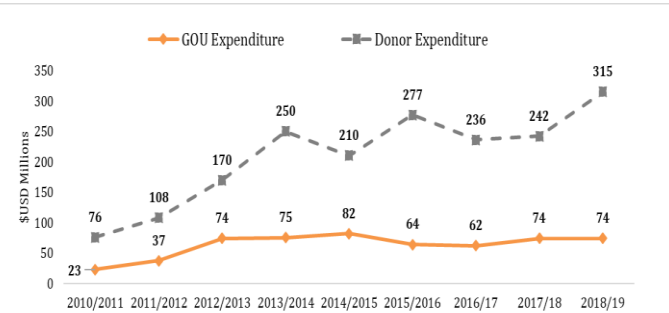




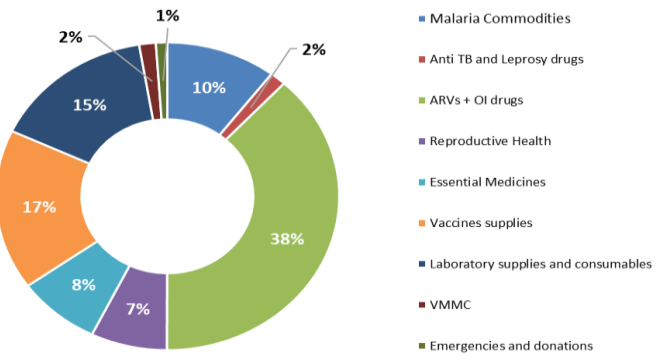
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Increased Affordability and Financing of EMHS

Donor vs GoU percapita expenditure from 2010 to 2018 (US\$)



Percentage of total funding, by commodity area, in 2018/2019



- ✓ \$ 315m translates to \$ 8.1 per capita and \$74m translates to \$1.9 per capita.
- ✓ Government financing for all EMHS increased in nominal terms from UGX 202 billion in 2010/11 to UGX 274 billion in 2018/19 which is 15% of the health sector budget.
- ✓ ARV's + OI's, Vaccines, Lab and Malaria commodities take 80% of total funding.

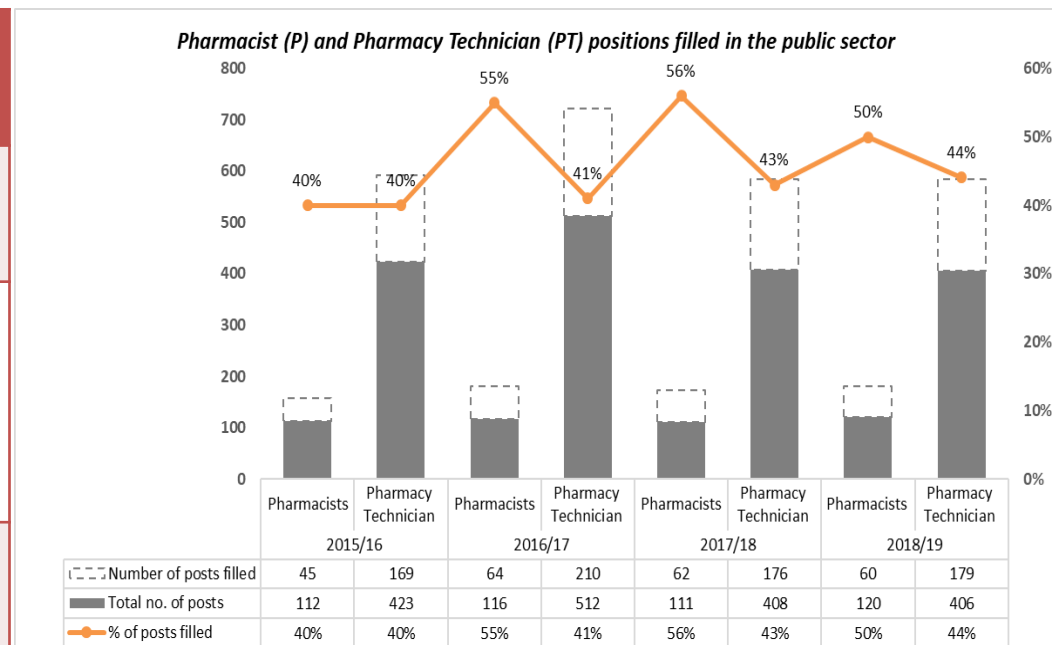
Indicator	FY 18/19 Achieved
Per capita expenditure on EMHS*	1.9
Percentage of GoU funds released for EMHS out of the total health sector funds*	15%
Horizontal equity ratio to measure difference in allocation per patient among government owned facilities at the same level of care	HC4 – 0.19 HC3 – 0.32 HC2 – 0.33
Percent of average international price by NMS and JMS for procured basket of EMHS	NMS- 58% JMS- 62%
Percent of order-based facility with a PFM score of 80% and above	HOSP-40% (19/48) HC IV -49% (62/126) ordering facilities
Percent of PHC funds NGO non-wage recurrent funds spent on procurement of EMHS for PNFP sector	99.9% 7.8bn



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Performance: Strengthened Human Resources in the Pharmaceutical Sector

Indicator	FY 18/19 Achieved
Number of pharmacy students and pharmacy technicians enrolled and graduating per year	Enrolled: 117 Graduating: 81
Pharmacists/pharmacy technicians per 100,000 population ratio	4.79 per 100,000 Pharmacists – 2.9 Pharmacy technicians/Dispensers – 2.1
Percentage of pharmacist and pharmacy technician positions filled in the public sector	Pharmacist – 50% Pharmacy technician – 44%



✓ Only **50%** of pharmacist and **44%** pharmacy technical posts are filled in the public sector



Key SC Priorities

- ❖ Sustainable mobilization of resources for **financing** the procurement of EMHS and program commodities for public and private sector
- ❖ Adequate Pharmaceutical **Human Resource** to manage the supply chain system and EMHS, delivery of pharmaceutical services in support of HIV/Malaria/TB and other disease areas
- ❖ Establishment of an **Integrated e-LMIS** to track and account for EMHS from the warehouses to the users, information sharing, data visibility and Use
- ❖ Strengthen the **storage capacity** at lower health facilities



Key SC Priorities cont.

- ❖ Strengthen medical waste management at public health facilities
- ❖ Strengthen traceability and accountability of commodities at all levels
- ❖ Regulation of commodities and the pharmaceutical Sub-sector
- ❖ Strengthen Pharmacovigilance at all levels



Expected Impact/Outcome

- i. Increased availability of EMHS
- i. Increased financing for EMHS
- ii. Effective and efficient implementation of supply chain activities
- iii. Improved accountability and traceability for commodities
- iv. Increased patient safety and health care services utilization
- v. Increased data utilization for evidence based policy decision making



Projected HIV & TB Treatment and Testing Requirements & Gaps (Oct 2020 – Sep 2021)



Priority Commodities for COP20 Procurement Period

Priority commodities Include:

- ARVs
- Cotrimoxazole
- HIV Test Kits
- CD4, Chemistry, Haematology,
- VL, EID, Hep B Viral load testing
- Crag LFA
- HIV drug resistance testing
- HPV-cancer Screening
- GeneXpert Cartridges and TB LAM
- TPT Medicines and Supplies
- VMMC Kits
- Other OI Medicines



Key Assumptions

- Highly targeted HIV testing
- One Viral Load test annually (All stable patients)
- Exposed infants (3 PCRs)
- CD4 tests (All newly enrolled & non suppressed)
- HIVDR testing (prior exposure to a PI, failure on a DTG based regimen, 2L regimen, pregnant and lactating women, and 3L ART)
- HPV screening (WLHIV aged 25-49 years)

- Transition of Women to DTG

Phase 1 >> Jan – June 2020 (RRH)
Phase 2 >> June – Dec 2020 (other HFs)

- New ARV medicines

Product	Time of introduction
ABC/3TC/DTG 600/300/50mg	Jun-20
TDF/3TC/EFV 400/300/300mg	May-20
ABC/3TC/LPV/r 30/15/40/10mg	Jul-20

Product	Pack size
TDF/3TC/EFV 300/300/400mg	90 tablets
TDF/3TC/DTG 300/300/50mg	90 tablets
TDF/3TC/DTG 300/300/50mg	180 tablets

- Pediatric Regimen Optimization

0-3yrs	Transition timelines
Start of the transition	Aug-19
End of the transition	Aug-20
Duration (Months)	12

3-10yrs	Transition timelines
Start of the transition	Aug-19
End of the transition	Oct-20
Duration (Months)	14



Projected ART & TB Patients

ART Population Group	Dec 2019	Dec 2020
Children (0-14years)	65,765	77,100
Adults (15years+)	1,221,558	1,312,458
Total	1,287,323	1,389,558

TB Patient Projections	2021
TB cases(New & Relapses)	76,300
TPT(New PLHIV, contacts + high risk groups)	250,000
MDR TB cases	1,600

Projected New ART Patients	
2020	101,453



National ARV/Cotrim/VMMC Requirement

ARV Funding Gap Analysis (USD)

Warehouse	COP 20 Funding need*	Available Funding** CY 2021 GF	COP 20 Funding Gap
NMS	86,250,376	65,000,000	21,250,376
JMS	13,764,987	0	13,764,987
MAUL	31,768,547	0	31,768,547

***GOU Funding of \$25m discounted from the funding need. (Total available is \$39m. About \$14m non-absorbable due to limited range of products from QCIL**

***Overflow of stock on hand from COP19, GF CY2020 and GOU FY19/20 discounted from the funding need**

***Funding need includes 3L ARVs**

**** Available funding from COP20 (\$88m) and Janssen donation (\$246,684) to be allocated to the funding gap. No funding gap anticipated in COP 20.**

**** GF CY 2021 allocation is tentative**



Cotrimoxazole and VMMC Funding Need

Cotrimoxazole Gap Analysis (USD)			
Warehouse	COP 20 Funding need	Available Funding COP 20 GF	Funding Gap COP 20
NMS	2,023,049	2,000,000	23,049
JMS	292,270	0	292,270
MAUL	838,473	0	838,473

➤ **VMMC COP 20 Funding need: MAUL (8,311,820), JMS (5,413,660)**



Funding Gap Analysis for HIV/TB Lab Commodities (USD)

Test Category	Public Sector Need	Private Sector Need	National Need	GF CY 2021*	COP 20 Funding Gap
HIV Test kits and Accessories	11,872,769	3,957,590	15,830,358	6,198,331	9,632,027
Hepatitis B screening for Pregnant Women	1,433,556	477,852	1,911,408	496,445	1,414,963
HIV Self Testing Kits	7,105,073	2,368,357.8	9,473,431		9,473,431
Viral Load	30,920,577		30,920,577	2,716,808	28,203,769
HIV Drug Resistance Testing	1,001,457		1,001,457	100,000	901,457
EID- Conventional	4,231,937		4,231,937	738,456	3,493,481
EID- POCT	2,975,719		2,975,719	1,241,916	1,733,803
CD4	3,876,464	1,020,143	4,896,607	2,001,254	2,895,353
Crag LFA	303,378	105,111	408,488	332,632	75,856
TB LAM	347,046	115,682	462,729		462,729
GeneXpert Catridges	13,654,311		13,654,311		13,654,311
TB Microscopy, & MDR -(Culture and LPA)	918,696		918,696		918,696
HPV - Cervical Cancer Screening	1,718,584	429,646	2,148,231	80,000	2,068,231
Chemistry	2,083,995	520,999	2,604,994	1,692,176	912,818
Hematology	1,517,915	379,479	1,897,393	910,749	986,644
Hepatitis B VL testing	568,071		568,071	342,147	225,924
Blood Sample Collection and other accessories	411,403	102,851	514,254		514,254



TB Medicines Requirements and Gap Analysis

First Line and Second Line anti-TB medicines (CY 2021/COP20)

	Need	GOU	GF	PEPFAR	Gap
FL	\$4,522,853	\$1,900,371	\$2,622,482		-
2L	\$2,629,998		\$2,629,998		-
Total	\$7,152,851	\$1,900,371	\$5,252,480		-

TB Infection control medicines and supplies (CY 2021/COP20)

	Need	GOU	GF	PEPFAR	Gap
3PH	\$2,954,862		\$940,815		\$2,014,047
INH	\$571,040				\$571,040
B6	\$593,800	\$198,423			\$395,377
Infection Control Supplies	\$1,325,060	301,653			\$1,023,407
Total	\$5,444,762	\$500,076	\$940,815		\$3,432,831



Key Programmatic Issues

- Challenges absorbing GOU funds given limited range of products that can be procured with those funds (\$14m potentially unabsorbed in CY 2021)
- Multi-month packs not to be procured from Global Fund in CY 2020
- Pediatric optimization challenges due to global LPV/r production challenges
- Risk of wastage of legacy formulations following adoption of optimized regimens (\$8.9M)
- GF funding allocation for CY 2021 subject to change

Thank You!!!



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