



# Supply Chain priorities

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28<sup>th</sup> Jan 2020



# GOU and PEPFAR priorities

## PEPFAR minimum package

1. Expanded use of decentralized distribution models for ARVs
2. Increased use of local private sector supply chain partners for procurement, warehousing and distribution
3. Procurement of all-inclusive laboratory reagents through Vendor Managed Inventory (VMI) solutions via newly executed PEPFAR VL RFP
4. Increased data visibility through implementation of ERP to SDP
5. Increase government procurement and monitoring of locally manufactured pharma
6. Operationalize Health Information Exchange for community, district and national levels



# Challenges and Solutions

Challenges	Solutions
<p>Supply chain data visibility</p> <ul style="list-style-type: none"><li>• Data quality</li><li>• SC data link with patient data</li><li>• Electronic supply chain data management</li><li>• Traceability of commodities</li></ul>	<ul style="list-style-type: none"><li>• Link EMR with eLMIS and the ERP</li><li>• Institute eLMIS in health facilities – with inventory management and dispensing modules</li><li>• Harmonize tools and messaging</li><li>• Interoperability of all available tools</li><li>• Smart paper technology – can scan paper tools into electronic system</li></ul>
<p>Commodity security</p> <ul style="list-style-type: none"><li>• Inadequate stock levels at facility level</li><li>• Stock outs and overstock</li><li>• Poor quality orders</li><li>• Global availability of medicines e.g. paed regimens, 2L, 3L</li></ul>	<ul style="list-style-type: none"><li>• Quantification, supply planning and stock status monitoring</li><li>• Address mal-distribution at facility level</li><li>• Update the redistribution guidelines</li><li>• Strengthen district supply chain support and capacity building</li><li>• Global Advocacy to manufacturers</li><li>• Roll out of new guidelines in tandem with global availability of commodities</li><li>• Synchronize guideline changes with local manufacturing capacity</li><li>• Governance and monitoring – HUMC</li></ul>



# Challenges and Solutions

Challenges	Solutions
Limited Storage at facility level	<ul style="list-style-type: none"><li>• Refurbish stores</li><li>• Construct stores where applicable</li></ul>
Commodity financing	<ul style="list-style-type: none"><li>• Lobby GOU for increased financing</li><li>• Optimal utilization of GOU funding</li><li>• Pass the bill for the HIV trust fund</li></ul>
HR for supply chain	<ul style="list-style-type: none"><li>• Fund the unfilled supply chain positions</li><li>• Recruit supply chain staff</li><li>• Consider involving expert clients to help with data entry</li><li>• Develop SC staff patterns as recommended by NSCA</li></ul>
Unique identifiers tied to national IDs <ul style="list-style-type: none"><li>• Could be a hindrance to access</li></ul>	<ul style="list-style-type: none"><li>• To be addressed by relevant authorities</li></ul>



# Sustainability

- ❑ Adequate funding for all commodities – ARV, lab commodities, HIV test kits and related commodities
  - HIV trust fund
  
- ❑ Human resource –
  - Adequate remuneration
  - Capacity and presence of HR
  - QPPU staff and structure
  
- ❑ Data visibility and system interoperability
  
- ❑ National health insurance