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ACKNOWLEDGMENTS

The Sierra Leone Directorate of Pharmaceutical Services (DPS) and the committee responsible for the terms of reference (TOR) of the new organogram structure were supported by the US Agency for International Development (USAID)-funded Systems for Improved Access to Pharmaceuticals and Services (SIAPS) Project, implemented by Management Sciences for Health, with input from the Directorate of Drugs and Medical Services, the Pharmacy Board, the Interim National Pharmaceutical Procurement Unit, district pharmacists, hospital pharmacists, and members of the Pharmaceutical Society.

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October 2016
# ACRONYMS

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>DPS</td>
<td>Directorate of Pharmaceutical Services</td>
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<tr>
<td>M&amp;E</td>
<td>monitoring and evaluation</td>
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<td>MoHS</td>
<td>Ministry of Health and Sanitation</td>
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<td>NHSSP</td>
<td>National Health Service Strategic Policy</td>
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<td>NPPU</td>
<td>National Pharmaceutical Procurement Unit</td>
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<tr>
<td>PHU</td>
<td>Peripheral Health Unit</td>
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<tr>
<td>PMIS</td>
<td>pharmaceutical management information system</td>
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<td>SIAPS</td>
<td>Systems for Improved Access to Pharmaceuticals and Services</td>
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<tr>
<td>TOR</td>
<td>terms of reference</td>
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<tr>
<td>USAID</td>
<td>US Agency for International Development</td>
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<td>WHO</td>
<td>World Health Organization</td>
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Leadership and governance of Sierra Leone’s DPS is a key pillar of the health care system. The DPS plays a key role in providing technical guidance and setting the strategic direction for policy formulation, service delivery, standards, laws and regulations, and objectives. It is also involved in stakeholder collaboration and coalition building, monitoring and oversight, resource mobilization, and resource deployment. The DPS is expected to provide leadership and manage the efforts of pharmaceutical health care providers, particularly pharmacy personnel, to ensure that strategic goals and objectives are accomplished at all levels.

It was therefore necessary to review the DPS structure at all levels, especially with regard to the ongoing decentralization process and capacity needs.

**Key Issues**

- Emerging challenges in Sierra Leone’s national pharmaceutical care services
- The National Pharmaceutical Procurement Unit (NPPU) Act of 2012 introduced a paradigm shift in the way pharmaceuticals are managed in the country and required new regulations to support the act’s implementation
- A need to have governance and coordination structures at all levels of the health system
- Stewardship/leadership in the implementation of the national medicines policy
- Structures for coordinated resource mobilization, selection, quantification, procurement, distribution, and financial management
- Structures for the promotion of essential medicines concept to ensure safety, efficacy, quality, availability, affordability, accessibility, and rational medicine use
- Public-private partnerships for the provision of comprehensive integrated health services
- Mechanisms for monitoring services

**Guiding Principle**

The guiding principle for the development of the DPS governance structure is based on the Ministry of Health and Sanitation’s (MoHS) objective of strengthening the functions of the National Health Service to improve the key performance criteria in the 2010–2015 National Health Sector Strategic Plan (NHSSP):
• Access to health services (availability, utilization, and timeliness)
• Quality of health services (safety, efficacy, and integration)
• Equity in health services (disadvantaged groups)
• Efficiency of service delivery (value for resources)
• Inclusiveness (partnerships)

The input required to influence these criteria conforms with the NHSSP and with the World Health Organization’s (WHO) six health systems building blocks that support access to high-quality health services and lead to positive health outcomes for clients and communities—especially the most vulnerable and underserved.

• Governance
• Service delivery
• Human resources
• Health financing
• Medical products and technologies
• Health information

Policy Objectives

Health care delivery has always been based on the principles and values of the 1978 Alma-Ata Declaration on primary health care. Medicines are an essential and integral part of quality health care delivery. In addition to saving lives and promoting health, medicines can also prevent epidemics and diseases. Accessibility to medicines is a fundamental right.

The DPS aligns with the primary health care concept of health as a contributor to national development and a shift toward innovative, evidence-based ways of coping with health challenges. Its governance structure was designed to provide new motivation, energy, leadership, and flexibility to help the Directorate achieving NHSSP’s goals of reducing inequalities and improving the health of the people, particularly mothers and children, by strengthening national health systems to enhance health-related outcomes and impact indicators.

The DPS abides by MoHS’ core values, which underlie the Directorate’s strategies and work and form the foundation on which staff perform their work and conduct themselves.

MoHS Core Values

• Right to health
• Equity
• Focused on services for the poor
• Cultural sensitivity
• Solidarity
• Friendliness
Working Principles

The DPS is accountable to the MoHS central governance and functions within these working principles to provide a comprehensive and integrated range of primary, secondary, and tertiary health care services, including effective and efficient pharmaceutical care services. This should result in a corresponding reduction in vertical, centrally driven individual programs.

- Active promotion of healthy lifestyles and health-seeking behavior among the population
- Prioritizing prevention and control of communicable and selected chronic and noncommunicable diseases, trauma and related injury, reproductive and child health, adolescent health, and vulnerable groups and the provision of a basic package of essential health services for mothers and children
- Special attention to the needs of all vulnerable groups, including children, women, the poor, the elderly, and those from rural and remote areas
- Capacity building, including human resource development
- Appropriate deployment and distribution of the health workforce
- A genuine desire to listen to what communities say and encourage their contribution
- Increased and more diverse public-private sector collaborations
- Evidence-based, quality interventions that are based on the informed use of reliable pharmaceutical information
- Implementation of health financing systems that promote equitable access to priority medicines and pharmaceutical services
DPS STRATEGIC OBJECTIVES, ACTIONS, AND TARGETS

Objective 1

- Provide a legal framework and necessary capacity for the implementation of pharmaceutical care services
- Provide a monitoring mechanism for progress on the enforcement of existing regulations
- Promote the safety, quality, efficacy, and sound use of traditional and complementary medicines
- Strengthen good governance in medicines management and the delivery of associated services

Objective 2

- Strengthen the capacity of pharmaceutical personnel at the district, regional, and national levels
- Develop and ensure the availability of a pharmaceutical operations manual and specify the roles and responsibilities of all pharmaceutical staff at all levels
- Provide training on leadership, management, and governance at all levels

Objective 3

- Ensure clear communications lines among the DPS, NPPU, Pharmacy Board, regions, districts, and peripheral health units (PHUs)
- Strengthen mechanisms to harmonize and align activities among stakeholders in the pharmaceutical sector within the framework of government priorities and procedures
- Strengthen the pharmaceutical management capacity of all hospitals through training and the provision of appropriate supporting environments
- Support the development of strategic and development plans for the DPS

Objective 4

- Provide a viable oversight, pharmaceutical sector planning, and monitoring and supervision system from the national to the district level
Objective 5

- Establish dynamic interactions between pharmaceutical care providers and consumers to improve the quality, accountability, and responsiveness of services

- Strengthen mechanisms for monitoring/addressing pharmacovigilance-related information

Objective 6

- Strengthen coordination, collaboration, alignment, and harmonization with development partners, implementing agencies, and statutory bodies (e.g., Pharmacy Board, NPPU)

- Strengthen the capacity of pharmaceutical personnel involved in the coordination structures at the district level, including the development of TOR and operational guidelines

- Develop and adopt resource allocation criteria to ensure equity of access and affordability to essential medicines

- Facilitate joint funding mechanisms for pharmaceuticals

- Develop a cohesive public-private partnership policy and guidelines for sustainable access to essential medicines based on the primary health care strategy

Objective 7

- Develop a pharmaceutical sector-wide coordination mechanism to ensure that all funding for the sector supports a single policy and expenditure program under government leadership and adopt a common approach across the sector

- Develop a common national joint coordination mechanism that is fully aligned with the national medicines policy and strategic plan

- Develop common management approaches across the sector by all partners that cover the selection, quantification procurement, disbursement, and accounting of funds and joint reviews of pharmaceutical-sector performance

Expected Outputs/Outcomes

- Stronger DPS stewardship/leadership role in pharmaceutical care services

- Improved coordination and partnership structures at all levels
• Effective pharmaceutical care services based on the essential medicines concept for effective selection, quantification, procurement, distribution, and rational medicine use

• Coordinated resource mobilization and financial management for pharmaceutical management systems

• Performance-based management system established

• Improved medicines laws and regulations

• Stronger mechanism for monitoring and evaluation (M&E)
ROLES AND RESPONSIBILITIES

Pharmaceutical Governance Unit

The Pharmaceutical Governance Unit is responsible for establishing appropriate governance structures for the DPS and providing an enabling environment in which legitimate action is taken to meet stakeholder needs. This includes designing organograms that can be used to manage pharmaceutical care services in Sierra Leone.

Policy Planning Unit

The Policy Planning Unit is responsible for developing and reviewing the national medicines policy, which provides a vision for medicine delivery in Sierra Leone. It lays the groundwork for planning implementation strategies, creates uniformity and a focus on pharmaceutical development, and enhances processes for monitoring and evaluating strategies to meet policy goals.

The unit serves as the technical advisor to the chief pharmacist for medicines and medical supplies policy formulation, implementation, and M&E. The unit is responsible for improving pharmaceutical services and formulating policy guidance to improve access and ensure the safe use of appropriate, cost effective, and quality medicines. It is aligned with all other health-related policies and laws that affect the pharmaceutical sector, such as the National Health Policy.

The unit’s key roles and responsibilities include:

- Developing, reviewing, implementing, and monitoring and evaluating the National Health Policy
- Developing strategies to strengthen staff’s values and work principles
- Providing technical advice to the chief pharmacist on international and national pharmaceutical policies, laws, protocols, and conventions on narcotics and psychotropic substances and their chemical precursors and implementing those policies to ensure compliance
- Planning for pharmacy staffing needs at all levels
- Providing in-service professional development as a licensure requirement
- Promoting collaborative linkages among MoHS departments and programs, statutory bodies, development partners, and other ministries implementing pharmaceutical activities at all levels. The unit assists stakeholder groups to understand how they contribute their unique strengths, expertise, experience, and position to support successful pharmaceutical service.
Human Resource Management

The Directorate is responsible for planning for human resources for pharmaceutical services to implement the health policy and related services. The DPS’ role is to plan, create, align, and facilitate recruitment, training, and remuneration for the pharmacy profession to build a shared vision. It serves as a steward for the development of required pharmaceutical services and capacity building of appropriate staff to ensure these services in the country. Key tasks include:

- Defining leadership to influence health policy
- Defining human resources needs to improve the scope of pharmaceutical care service
- Defining the role of pharmacy human resources
- Identifying education needs and creating training/development plans
- Reviewing and contributing to the design of organograms to facilitate teamwork
- Ensuring that staff provide integrated services
- Influencing preservice curricula as a basis for national development
- Developing recruitment, supervision, motivation, and retention mechanisms for pharmacy staff
- Establishing a results-based management system for management contracting, performance reviews, staff evaluation, and system improvement initiatives
- Developing and designing job descriptions; performance appraisals; and discipline, conflict resolution, and delegation forms
- Developing a work culture around a shared vision to work with integrity that is consistent with the chosen approach and values
- Creating a climate that rewards staff for their effort and commitment, including trying new ways of doing things, and holds them accountable
- Creating systems to process personnel information for promotions, leave time, and other benefits

Products and Technologies

The DPS is responsible for promoting the concept of essential medicines to ensure that medicines are selected with regard to public health relevance, evidence on efficacy and safety, and comparative cost-effectiveness to meet the priority health care needs of the population. The
DPS is also responsible for ensuring the availability of essential medicines within the context of functioning health systems at all times, in adequate amounts, in the appropriate dosage forms, with assured quality and adequate information, and at a price the individual and the community can afford.

**Availability and Access**

The DPS works to ensure availability of and access to medicines by:

- Providing pharmaceutical supply chain oversight and technical support services for the provision of essential medicines and medical supplies in the country

- Providing policy guidance for supply chain management of medicines in collaboration with stakeholders

- Collaborating with the NPPU to provide regular training, supervision, counseling, mentoring, and coaching of MoHS staff who are managing medicines selection, quantification, distribution, inventory control, storage, rational use, and logistic information in public hospitals, central and district stores, PHUs, and clinics

- Working with the NPPU to provide essential medicines (including priority orphan drugs) through the Free Health Care program to combat and prevent prevalent diseases in the country and provide oversight for procurement, storage, distribution, and inventory management

- Collaborating with the NPPU to coordinate and provide leadership and technical service to develop annual procurement plans for medicines and medical supplies

- Providing policy guidance to the MoHS and the pharmaceutical industry regarding essential medicines

- Collaborating with the Pharmacy Board and the pharmaceutical industry to promote the cost effective production of essential medicines in Sierra Leone in accordance with current Good Manufacturing Practices

- Providing policy guidance to ensure affordability (e.g., free health care, cost recovery, insurance, medicine benefits schemes, donor assistance)

- Providing general supervision of the pharmaceutical sector to ensure affordable essential medicines in the country

- Working with the Pharmacy Board to ensure the quality of the medicines supply, including monitoring and control of narcotic drugs in all private and public health institutions
Pharmaceutical Care Unit

The role and responsibility of this unit is to ensure that patients receive medications that are appropriate to their clinical needs, in doses that meet their individual requirements, for an adequate period of time, and at the lowest cost to them and their community.

**Rational Use**

To ensure rational medicine use, the Pharmaceutical Care Unit:

- Manages the review and updating of National Essential Medicines List in collaboration with the planning unit
- Ensures compliance with standard treatment guidelines, which comprise systematically developed statements that help prescribers make decisions about appropriate, evidence-based treatments for specific clinical conditions
- Collaborates with undergraduate training institutions to incorporate problem-based pharmacotherapy training
- Compiles independent information on medicines for prescribing and dispensing
- Promotes consumer awareness about appropriate medicine use
- Develops a mechanism for empowering communities to practice medicine rational use
- Provides policy guidance to avoid perverse financial incentives to prescribers and pharmacies
- Collaborates with the Pharmacy Board to enforce regulations that will ensure quality, safety, efficacy, and accountability for medicines and medical supplies
- Provides technical input for integrating pharmacoeconomics budgeting and ensuring sufficient government expenditure to for medicines and staffing

Drug and Therapeutics Committee Unit

The Drug and Therapeutics Committee Unit works to:

- Establish and mandate Drug and Therapeutics Committees, which are multidisciplinary national bodies that coordinate medicine use policies and implement and evaluate interventions to promote rational medicine use in districts and hospitals
- Provide continuous supervision, auditing, and feedback for all public and private health institutions on appropriate medicine use
Roles and Responsibilities

- Design and conduct operational research on matters relating to rational medicine use, affordability, and medicines benefits
- Ensure periodic updating of formularies, guidelines, policies, and other reference materials to promote rational medicine use
- Develop model pharmaceutical care tools (e.g., pharmaceutical chart, drug utilization chart, adverse drug reaction form, prescription template) for use in hospitals
- Establish a unit dose dispensing system

Pharmaceutical Information Unit

An effective pharmaceutical management information system (PMIS) can synthesize the large volume of data generated by pharmaceutical management operations. The Pharmaceutical Information Unit is responsible for processing the data into information for use in planning activities, estimating demand, allocating resources, and monitoring and evaluating pharmaceutical management operations. The information is often based on key indicators. Staff at all levels should use appropriate indicators to monitor both their own performance and that of the units for which they are responsible. An essential function of a PMIS is to improve accountability. Much of the recording and reporting in a PMIS is intended to create an audit trail for products as they enter or leave the pharmaceutical supply system. A PMIS should also have a mechanism to provide feedback to the reporting centers and to stakeholders. The Pharmaceutical Information Unit is responsible for:

- Integrating pharmaceutical data collection, processing, and presentation of overarching information on pharmacy personnel, outlets, laws, and facilities
- Keeping custody of, retrieving, and disseminating all pharmaceutical information to stakeholders and the general public periodically and on demand
- Developing, producing, and providing pharmaceutical bulletins, billboards, fliers, and other resources

Administrative and Finance Department

The Administrative and Finance Department oversees all financial and administrative services of the DPS to support the attainment of results.

Administration

- Serve as a support department to the DPS for day-to-day office management
- Support other departmental activities within the DPS
- Assist with reception coverage and administrative work (e.g., photocopying and filing documents, coordinating meetings)

- Oversee the management of vehicles and drivers, cleaners, and messengers

- Facilitate external and in-country travel and workshops, manage the property of the DPS, and keep inventory

- Liaise with ministries, government department, and other ministry department agencies in sourcing for and collecting all establishments’ circular and relevant documents guiding the conduct of government business

**Finance**

- Manage all DPS financial transaction

- Ensure that all transactions are entered promptly and accurately into accounting software in accordance with DPS policies and procedures

- Budget for educational development of pharmaceutical care services

- Generate annual income and expenditure reports

**M&E Unit**

The M&E Unit is responsible for monitoring and evaluating results and impacts of interventions. This unit is vital for systems improvement within the Directorate. Functions include:

- Ongoing review of the degree to which planned activities are being completed and performance targets are being met

- Tracking inputs and outputs

- Analyzing progress toward meeting established pharmaceutical care services objectives, goals, and results

- Actively participating in program planning process and budgeting

- Supporting the Pharmaceutical Governance Department in developing regular reports

- Supporting other departments on other required tasks

- Providing feedback on the outcomes of interventions
Roles and Responsibilities

- Providing information on the outcome of plans with reasons for success and/or failure
- Supervising regular data collection and ensuring data quality through random verification and validation
- Recording, managing and preserve monitoring and evaluation data in a safe and accessible way
- Analyzing and discussing findings based on regular monitoring data
- Providing technical support on M&E and evidence-based recommendations to the head of the Pharmaceutical Governance Department
- Ensuring that implementation of field activities adheres to the DPS M&E system
- Supporting and/or collaborating with partners to conduct baseline and key performance indicator surveys
- Liaising with other departments within the DPS as well as district and hospital personnel for operational research
- Liaising with the Pharmacy Board on the quality of medicine procure by the NPPU or other donors along the supply chain pipeline

Chief Pharmacist of the DPS

The chief pharmacist serves as the chief executive officer of the DPS. His or her role is to assume the lead in putting long-term pharmaceutical care services strategy into operation. The chief pharmacist is responsible for:

- Developing the DPS’ strategic operating plans, which reflect the long-term objectives, vision, mission, values, and priorities
- Aligning and mobilizing stakeholder and staff time and energy and the material and financial resources to support the Directorate’s goals and priorities
- Motivating staff to be committed and continuously learn to adapt and do things better
- Maintaining an ongoing dialogue with the MoHS as a lead technical pharmaceutical policy advisor and implementer
- Implementing adequate operational strategic planning; management (structures, processes, and procedures); and financial control systems
• Ensuring that the operating objectives and standards of performance are understood and followed by the implementing DPS staff to achieve defined results

• Closely monitoring and evaluating achievements and results against plans; continuously updating information from M&E and the PMIS; and using feedback to adjust plans, structures, systems, and processes for future results

• Taking remedial action where necessary and informing the MoHS of significant changes

• Maintaining the operational performance of the DPS

• Providing guidance in formulating all pharmaceutical-related laws and regulations for the MoHS

• Participating in the development of all other health-related laws that have or may affect pharmacy (i.e., Sierra Leone Medical and Dental Council, Sierra Leone Nurses and Midwifery Board, the International Health Regulation (2005), Local Council Act (2004), the Hospital Boards Act (2003), Public Health Act, Pharmacy and Drugs Act, NPPU Act)

• Encouraging public-private partnerships to improve access to affordable medicines outside of free health care programs

**Deputy Chief Pharmacist of the DPS**

The deputy chief pharmacist supports the chief pharmacist to achieve organizational goals. In the absence of the chief pharmacist, the deputy act in that capacity.

**Hospital Pharmacist**

The hospital pharmacist is on the staff of the MoHS and is supported by the DPS. He or she is an expert in the field of medicines and knows the use and effect of medicines on the human system. The hospital pharmacist is tasked with:

• Ensuring adherence to the national medicines policy and guidelines in the hospital setting

• Reviewing prescriptions to ensure that the medicines are appropriate and safe for the patient and that there are no errors

• Advising medical staff on dosage, formulation, side effects, and medicine interactions with regard to the patient’s condition

• Counseling patients on their medication
• Working closely with doctors and nurses to ensure that patients receive appropriate treatment, promote rational prescribing and use of medicines, and recognize and report adverse drug reactions

• Establishing clinical pharmacy services, including ward rounds, to relay and document patient information (e.g., medicine history, patient compliance, therapeutic response to medicines)

• Serving on policy making committees within the hospital, such as the Drug and Therapeutics Committee, to influence the development and selection of the hospital medicines list, a subset of the national essential medicines list, or formulary

• Developing guidelines and standard operating procedures for medicine use within the hospital

• Supervising and building the capacity of pharmacy personnel to deliver pharmaceutical services

• Ensuring compliance with good pharmaceutical practices and with national policies, law, regulations, guidelines, and standard operating procedures

• Overseeing hospital manufacturing of therapeutic commodities

• Supporting procurement of health commodities for the hospital to ensure an adequate supply of quality products

• Ensuring that security and proper storage conditions are in place for all medicines and related products

• Ensuring that proper records, such as consumption data, stock status, procurement, and costs of medicines, are in place

• Staying up to date on current trends to conduct and/or participate in research

• Supervising the pharmacy technician

• Conducting training on the PMIS and drug supply management for health staff

**District Pharmacist**

Under the overall guidance and supervision of the district medical officer, the district pharmacist acts as a technical advisor to the district health management team for pharmaceutical-related issues. He or she is responsible for the successful implementation of the national medicines policy and performance of the supply chain for pharmaceuticals and health products to ensure efficient implementation of the free health care and cost recovery system to achieve a positive
health outcome. The pharmacist works with all PHUs and hospitals in the district, other district health management team units, the NPPU, and programs.

The district pharmacist has the following roles and responsibilities:

- Ensuring adherence to the national medicines policy and guidelines within the district
- Building the warehouse management capacity of the pharmacy technician, pharmaceutical logistics officer, and storekeeper and ensuring that inventory records in the warehouses are updated regularly
- Carrying out evidence-based quantification of pharmaceuticals and health products for the district and following national quantification guidelines for procurement decisions
- Coordinating the timely delivery and distribution of commodities to health facilities based on needs that are determined using health facility data
- Monitoring storage conditions for all commodities, visiting storages facilities in the districts, and formulating recommendations to create appropriate conditions for storage and distribution of pharmaceutical products
- Ensuring that the risk control management matrix is followed during distribution of health products and commodities to all PHUs
- Ensuring regular physical inventory at the warehouses and sharing reports with supervisors
- Conducting supportive supervision and mentoring to PHU staff on drug supply management and rational medicine use
- Serving on policy making committees within the district, such as the Drug and Therapeutics Committee, to influence rational medicine use within the district
- Supporting the Pharmacy Board on drug regulations and control
- Ensuring that security and proper storage conditions are in place for all medicines and related products
- Ensuring that proper records, such as consumption data, stock status, procurement, and costs of medicines, are in place
- Keeping up to date with current trends to conduct and/or participate in research
- Supervising the pharmacy technician, pharmaceutical information and logistics officers, and storekeeper
Roles and Responsibilities

- Conducting training on the PMIS and drug supply management for health staff within the district

- Building the warehouse management capacity of the pharmacy technician, pharmaceutical information and logistics officers, and storekeeper and ensuring that inventory records in the warehouses are updated regularly

Pharmacy Technician

Pharmacy technicians are posted as dispensing technicians at hospitals to ensure medicine quality and safety and are supervised by the pharmacist. The pharmacy technician:

- Receives and verifies prescription information and dosage, prepares labeling, calculates quantities, and dispenses medication, and counsels patients based on instructions from the pharmacist

- Maintains pharmacy inventory by checking stock to determine inventory level, anticipating needed medications and supplies, placing and expediting orders, verifying receipt, and segregating expired medicines

- Ensures that the pharmacy is safe and clean by complying with procedures, rules, and regulations

- Enters patient and treatment information into a manual/electronic system in the pharmacy

- Monitors the quality and safety of all pharmaceuticals received and ensures that the medicines are of good quality before they are distributed to PHUs or dispensed to patients

- Participates in supply chain supervision from districts to PHUs to help mentor personnel and ensure good storage practices, proper inventory, management, and good quality data