

USAID Hands Over EDT-Related Equipment to MoHSS

On the 15th of October 2012, all Electronic Dispensing Tool (EDT)-related equipment (computers, monitors, label printers, EDT mobile devices and 3G devices) were officially handed over to the Minister of Health and Social Services (MoHSS) by the Director of the United States Agency for International Development (USAID), Namibia Mission.

The Deputy Permanent of the MoHSS received the equipment on behalf of the Minister at a ceremony that took place at the Safari Court Hotel and Conference Center in Windhoek. Officials from MoHSS, USAID and Management Sciences for Health (MSH) witnessed the event. The EDT was developed and implemented to support scale-up of the MoHSS antiretroviral treatment (ART) program through technical and financial support from the USAID-funded Strengthening Pharmaceutical Systems (SPS) and Systems for Improved Access to Pharmaceuticals and Services (SIAPS) programs. As at August 2012, the EDT was in use in 49 ART sites in all the 13 health regions of the country. At least 45,000 patient transactions are captured on the system every month.

The system is able to automatically flag patients who are lost-to-follow up from the ART program and track patients' timeliness of medication pick-up and adherence to ART. This information is used to inform decisions regarding the clinical management of the patients. Data from the system has also been utilized for various operational researches in the country. The successful handover of the EDT-related equipment to the MoHSS will enable the respective regional directorates to include this equipment in their inventory and therefore plan and budget for the equipment's maintenance and replacement, thus ensuring sustainability of this important system.



The MoHSS Deputy Permanent Secretary, Dr Norbert Forster (left), being shown the EDT-related equipment that was handed over to the Ministry of Health and Social Services by the USAID / Namibia Mission Director, Ms Elzadia Washington (right). Looking on are the former Deputy Director: Pharmaceutical Services, Ms Jennie Lates and SIAPS staff.
Photo by MSH staff

“The EDT system has enabled my ministry to ensure maximum output with minimum resources,” Dr. Forster

Contributed by Victor Sumbi (Senior Technical Advisor/SIAPS)

Upcoming Events November - December 2012

- Health care quality standards interpretation training for Katutura and Windhoek hospitals
- Support the strategic plan review process of the Ministry of Regional Local Government and Housing & Rural development (MRLGHRD)
- Community Pharmacovigilance initiative
- e-TB Manager evaluation
- Supportive supervision and mentoring visits
- Refresher training on Syspro and Excel for Regional Medical Stores staff
- Evaluation of the NACS/ food by prescription program

IN THIS ISSUE

1. USAID Hands Over EDT-Related Equipment to MoHSS
2. Nemlist 5th Edition Launched by MoHSS
3. ART Safety Active Surveillance initiated in Namibia
4. MoHSS Stakeholder Meeting to Plan for QIL Implementation
5. Updating of the NMRC SOPs Completed
6. Supporting rollout of the Nutritional Assessment, Counseling and Support (NACS) programme
7. SCMS Supports MoHSS to Conduct a Comprehensive National Quantification Exercise for Health Commodities



Nemlist 5th Edition Launched by MoHSS



The MoHSS Deputy Permanent Secretary, Dr Norbert Forster (left), and the USAID / Namibia Mission Director, Ms Elzadia Washington (right) display copies of the Nemlist 5th Edition during the launch of this document. The former Deputy Director: Pharmaceutical Services, Ms Jennie Lates looks on.

Photo by MSH staff

The 5th Edition of the Namibia Essential Medicines List (Nemlist) was launched by the Deputy Permanent Secretary Dr. Norbert Forster of the MoHSS on behalf of the Honorable Minister of Health and Social Services, Dr Richard Kamwi, on the 15th of October 2012 at the Safari Court Hotel and Conference Center in Windhoek. Witnessing the event was the USAID Namibia Mission Director Ms. Elzadia Washington, senior officials from MoHSS and MSH, amongst others.

The Nemlist is a comprehensive list of carefully selected medicines recommended for the appropriate management of new, emerging and prevailing diseases in the country. It guides procurement of medicines at the Central Medical Store (CMS); specifies the level of availability and use of essential medicines at public sector health facilities, based on the training and skill levels of health workers; and guides the availability of diagnostic facilities at the various levels of the Namibia public sector healthcare system.

The USAID-funded SIAPS program provided the technical assistance so that the Nemlist was updated to incorporate updates of the World Health Organization (WHO) model list of essential medicines as well to include changes made based on motivations for changes received from health workers, therapeutic committees and health programs in the country. The updated edition of the Nemlist will ensure that Namibians continue accessing the most cost-effective medicines required to enhance the health of the nation.

Contributed by Victor Sumbi (Senior Technical Advisor/SIAPS)

ART Safety Active Surveillance initiated in Namibia

The Therapeutics Information and Pharmacovigilance Centre (TIPC) has recently initiated an active surveillance activity focusing on the adverse medication events in HIV patients initiated on first line HAART regimens. This MoHSS initiative is supported by the USAID's SIAPS project, with technical assistance from the University of Washington.

Two sentinel sites (Windhoek Central Hospital and Katutura State Hospital) are implementing the activity and as at the 31st of October 2012, 200 of the intended 600 patients had been recruited into the program for continuous follow-up.

In preparation, TIPC conducted a one day workshop for clinicians from the two hospitals on the approach and tools to be utilized. The workshop was conducted by Andy Stergachis, Professor of Epidemiology and Global Health at the University

of Washington. This active pharmacovigilance activity began with a brief pilot testing period from July 15-31, 2012 at the two ART sites located in Windhoek. Effectively, the active surveillance began on August 1, 2012. In this process, the two ART sites identify eligible HIV positive patients newly placed on first line antiretroviral therapy over a 6-month period and then actively follow them to record the presence or absence of adverse medicines reactions for a minimum period of 12 months.

The active surveillance of ARV medication safety will ensure timely identification of ADRs in patients and facilitate suitable patient-specific interventions. Aggregated data from the activity will also provide evidence for decision-making for the ART program in Namibia.

Contributed by Francis Kalemeera (Senior Technical Advisor/SIAPS)

MoHSS Stakeholder Meeting to Plan for QIL Implementation

After several months of planning and mobilizing of technical resources and support for the implementation of the *Quality Improvement and Leadership (QIL)* program, the Building Local Capacity (BLC) project supported the Ministry of Health and Social Services (MoHSS) through the MoHSS Quality Assurance Unit to orient the public and private sector and civil society partners on the program.

The meeting, held on the 26th of September 2012 and chaired by the MoHSS Deputy Permanent Secretary Dr. Norbert Forster, agreed that the QIL would build on current efforts to improve quality of health care services in Namibian health institutions. As part of the next steps, individuals from a multidisciplinary background will be selected to form a national steering committee for the QIL program. Implementation of the QIL is an opportunity to develop specific health care quality standards for Namibia.



Participants at the *QIL* stakeholders' meeting.

Photo by MSH staff

Updating of the NMRC SOPs Completed

In 2009, the Ministry of Health and Social Services' Namibia Medicines Regulatory Council (NMRC), with support from the Strengthening Pharmaceutical Systems (SPS) project, embarked on the review, development and updating of the standard operating procedures (SOPs) used within each of the NMRC units i.e. Inspection & Licensing, Quality Surveillance Laboratory, Registration and the TIPC (Therapeutics Information and Pharmacovigilance Centre).

As a result of this support, a total of 50 SOPs were successfully reviewed and approved for use in September 2012, and these were collectively bound in a book format. Current NMRC staff and new trainees will be required to undergo orientation on these approved procedures in order to maintain consistency in the quality of services provided. The NMRC is a statutory body established in terms of the Medicines and Related Substances Control Act, Act 13 of 2003, to regulate the use of medicines in Namibia.

Its mission is to serve the public interest by developing and maintaining internationally acceptable standards of medicines control. Namibia's Medicines and Related Substances Control Act 2003 mandates the NMRC to register and control medicines and

related substances in Namibia. The four units of the NMRC are all collectively performing their duties towards ensuring the availability of safe, efficacious and quality-assured medicines in Namibia. The SOPs guide the daily decision making processes of the Council and its secretariat.

As such, they are essential in ensuring consistency, transparency and accountability of actions performed by the NMRC and therefore they contribute to the establishment and maintenance of good governance, a key attribute of a functional pharmaceutical regulatory system.



Printed and bound copies of the NMRC SOPs, Checklists and Guidelines.

Photo by MSH staff

The office of the Registrar of Medicines serves as the NMRC Secretariat and provides administrative and technical support to the Council. The Registrar's office is currently supported by the subdivision: Pharmaceutical Control and Inspection (PC&I) within the Division of Pharmaceutical Services of the Ministry of Health and Social Services.

Supporting rollout of the Nutritional Assessment, Counseling and Support (NACS) Programme

SCMS continued to support rollout of the National Assessment, Counseling and Support (NACS) Programme by co-facilitating the NACS commodity management training sessions for newly enrolled sites. The training was conducted from the 17-19th of September 2012.

A total of 25 health workers were trained from 5 districts namely Rundu, Nyangana, Nankudu, Tsandi and Okahao. The commodity management sessions included the inventory management of therapeutic and supplementary foods, NACS logistics management information system and waste management. The sites will commence with the implementation of the NACS program in October, 2012.

Contributed by Tsitsi Katungire
(Senior Technical Advisor/SCMS)

Contributed by Chris Ntege (Senior Technical Advisor/SIAPS)

SCMS Supports MoHSS to Conduct a Comprehensive National Quantification Exercise for Health Commodities

In September 2012, the Directorate of Special Programs (DSP) of the Ministry of Health and Social Services (MoHSS), with technical assistance from the USAID-funded SCMS project, conducted Namibia's first ever integrated quantification exercise for key public health programmes.

The scope of this quantification was national, covering all major public health programs under the DSP and the Primary Health Care (PHC) directorate.

Included in the quantification were commodities for:

- Antiretroviral Treatment (ART)
- Prevention of Mother-to-Child Transmission (PMTCT)
- HIV Counselling and Testing (HCT),
- Tuberculosis, Malaria, Male condoms,
- Therapeutic and Supplementary Foods (TSF)
- Childhood vaccines in Namibia's Expanded Programme on Immunization (EPI)

The forecasting was undertaken by a Technical Working Group (TWG) comprising of staff from the MoHSS Directorate of Special Programs, Central Medical Store and National Medicines Policy Coordination and SCMS Namibia, with support from a short term consultant from the SCMS head office.

The main tool adopted for the forecast was Quantimed, a Microsoft Access-based pharmaceutical cost estimation tool developed by the MSH Rational Pharmaceutical Management Plus (RPM Plus) Program, with funding from USAID. A total of 91 line items were quantified for



Participants on the first day of the Quantification workshop held on September 11, 2012 at Protea Hotel-Furstenhof in Windhoek engage in active discussion during the session on data and assumptions for forecasting commodity requirements for HIV Counseling and Testing. Photo by MSH staff

the three-year period from April 2013 to March 2016. Out of the nine item categories forecasted, ARV requirements constituted the largest proportion, accounting for almost 50% of the total value of NAD 1.3 billion projected for the three year period. Vaccine requirements for the EPI programme, driven mainly by the high cost of new vaccines planned for introduction starting April 2013, made up just over one-quarter of the total forecasted value. Over eight different public health programs were involved in the quantification exercise.

The Senior Pharmacy Coordinator at the DSP acted as a champion of the processes by coordinating communication with different program managers within MoHSS to build ownership and obtain their commitment to gather and share program data and participate in the quantification workshop.

The results of the quantification exercise have already been used by MoHSS to

Continuation Channel (RCC) Round 2 Phase 2 grant renewal application and will also be used to motivate for government budgetary expenditure allocation as part of the Medium Term Expenditure Framework.

EDITORIAL TEAM

The SIAPS/SCMS/BLC Namibia e-Newsletter is a monthly newsletter that keeps you abreast of activities funded by the USAID and implemented by MSH Namibia.

Key focus areas are strengthening:

- Health Systems
- Capacity Building
- Human Resource Development

Editorial Team:

- Lazarus Indongo (MoHSS)
- Evans Sagwa (MSH)
- Victor Sumbi (MSH)

Your contribution to this valuable communication medium would be highly appreciated and can be e-mailed to esagwa@msh.org.na

Contributed by Benjamin Ongeri and Alemayehu Wolde (Senior Technical Advisors/SCMS)

DISCLAIMER: This newsletter was made possible through support provided to Management Sciences for Health (MSH) by the U.S. Agency for International Development, under the terms of cooperative agreement number AID-OAA-A-11-0002, and contract numbers GPO-A00-05-00024-00 and GPO-I-00-05-00032-00. The opinions expressed herein are those of the author (s) and do not necessarily reflect the views of the U.S. Agency for International Development.