



# Retreat Report: SIAPS and Directorate of Drugs and Medical Supplies Activity Plan

2016



**USAID**  
FROM THE AMERICAN PEOPLE

**SIAPS**   
Systems for Improved Access  
to Pharmaceuticals and Services



## **Retreat Report: SIAPS and Directorate of Drugs and Medical Supplies Activity Plan**

---

2016







This report is made possible by the generous support of the American people through the US Agency for International Development (USAID), under the terms of cooperative agreement number AID-OAA-A-11-00021. The contents are the responsibility of Management Sciences for Health and do not necessarily reflect the views of USAID or the United States Government.

## **About SIAPS**

The goal of the Systems for Improved Access to Pharmaceuticals and Services (SIAPS) Program is to ensure the availability of quality pharmaceutical products and effective pharmaceutical services to achieve desired health outcomes. Toward this end, the SIAPS result areas include improving governance, building capacity for pharmaceutical management and services, addressing information needed for decision-making in the pharmaceutical sector, strengthening financing strategies and mechanisms to improve access to medicines, and increasing quality pharmaceutical services.

## **Recommended Citation**

This report may be reproduced if credit is given to SIAPS. Please use the following citation.

SIAPS. 2016. *Retreat Report: SIAPS and Directorate of Drugs and Medical Supplies Activity Plan*. Submitted to the US Agency for International Development by the Systems for Improved Access to Pharmaceuticals and Services (SIAPS) Program. Arlington, VA: Management Sciences for Health.

Systems for Improved Access to Pharmaceuticals and Services  
Pharmaceutical & Health Technologies Group  
Management Sciences for Health  
4301 North Fairfax Drive, Suite 400  
Arlington, VA 22203 USA  
Telephone: 703.524.6575  
Fax: 703.524.7898  
E-mail: [siaps@msh.org](mailto:siaps@msh.org)  
Website: [www.siapsprogram.org](http://www.siapsprogram.org)

## CONTENTS

Abbreviations and Acronyms .....	iv
Executive Summary .....	v
Background and Problem Statement.....	1
Objective .....	2
Finalization of DDMS Organogram .....	3
Overview .....	3
Inputs from Presentations .....	3
Formation of National Quantification Unit.....	5
Inputs from Presentations .....	5
Overview of CRMS activities and progress update .....	6
Reverse Logistics Guidelines.....	7
Overview of Pharmaceutical Policy Documents.....	8
Inputs from Presentations .....	8
DDMS and SIAPS Activity Work Plan .....	8
Challenges and Lessons Learned .....	9
Overall .....	9
Retreat Evaluation.....	10
Future Plan.....	11
SIAPS-DDMS Future Work Plan .....	12
Annexes .....	14

## ABBREVIATIONS AND ACRONYMS

CRMS	Continuous Result Monitoring System
DDMS	Directorate of Drugs and Medical Supplies
M& E	monitoring and evaluation
MSH	Management Science for Health
NPPU	National Pharmaceutical Procurement Unit
NQC	National Quantification Committee
PMIS	pharmaceutical management information system
PSS	pharmaceutical systems strengthening
RMU	rational medicine use
SDP	service delivery point
TOR	terms of reference
TWG	Technical Working Group



## EXECUTIVE SUMMARY

The goal of the Systems for Improved Access to Pharmaceuticals and Services (SIAPS) Program is to ensure the availability of quality pharmaceutical products and effective pharmaceutical services to achieve desired health outcomes. Towards this end, SIAPS' result areas include improving governance, building capacity for pharmaceutical management and services, and addressing information needs.

As part of strengthening the pharmaceutical supply chain through improving structural functioning ability, SIAPS has provided support for the final input into a number of products the program has been working on (e.g., national essential medicines list, National Quantification Committee [NQC]/Technical Working Group [TWG], organogram, Continuous Result Monitoring System [CRMS] report, and activity work plan) in the form of a three-day working session held in Freetown with pharmacy professionals from the Directorate of Drugs and Medical Supplies (DDMS), Pharmacy Board, and regional districts.



## BACKGROUND AND PROBLEM STATEMENT

The governance, management and service delivery of the pharmaceutical sector in Sierra Leone faces numerous challenges, coupled with a fragmented supply chain system, uncoordinated parallel procurement systems, and poor donation practices.

The supply chain system of the DDMS cannot consistently meet the medicine supply needs of the population, despite donors providing medical supplies through the Free Health Care Initiative. Essential medicines remain scarce, particularly at primary health care units, and stock-outs of essential medicines occur frequently. A survey noted that on average, only 4 (~28%) of 14 tracer medicines were available at the time of assessment, with just 1% of facilities having the full list in stock. When looking at the availability of the 5 national priority medicines, only 17% of health facilities had all 5 in stock, with an average availability of 71% (WHO 2012).<sup>1</sup> Currently, the selection and quantification process for medicines is not based on consumption or reflective of beneficiaries' actual needs, thus creating a prime environment for stock-outs, overstocking, emergency purchases, noncompetitive and nontransparent procurement, and easy diversion of supplies to unintended destinations. Furthermore, the absence or weakness of representative structures and mechanisms at different levels that should actively contribute to decision making on selection, quantification, procurement, and distribution of processes instead contributes to threats/risks along the pharmaceutical supply chain.

---

<sup>1</sup> World Health Organization. Sierra Leone Service Availability and Readiness Assessment 2012.  
<http://apps.who.int/healthinfo/systems/datacatalog/index.php/catalog/27/reports>

## OBJECTIVE

The DDMS plays a key role in providing technical guidance and setting strategic direction in policy formulation, service delivery, standards, laws and regulations, and objectives for the pharmaceutical sector in Sierra Leone. It is also involved in stakeholders' collaboration and coalition building, resource mobilization and deployment of resources, monitoring, and oversight.

It is therefore necessary to review and finalize the DDMS structure at all levels to reflect this expanded role, especially with regard to the ongoing decentralization process, the necessary capacity that needs to be developed, and aligning DDMS' work plan with SIAPS.

As part of SIAPS' system strengthening strategy and by way of addressing the challenges identified during implementation interventions for pharmaceutical supply chain management, SIAPS, in collaboration with DDMS, has identified those topics that would be most valuable for sustained, effective leadership and systems to drive the success of the pharmaceutical sector in Sierra Leone.

The retreat was held on August 24-26, 2016, with these objectives:

- Reflecting on the systems strengthening approach, e.g., CRMS, assembling the evidence for interventions that work, lessons learned as a program, and promising innovations and practices, for the pharmaceutical supply chain
- Finalizing the DDMS organogram
- Identifying and setting timelines to review policy documents related to pharmaceutical supply chain strengthening systems
- Setting a timeline for approval of NQC and TWG terms of reference (TOR)
- Identifying future pharmaceutical systems strengthening (PSS) priorities, activities, and challenges on the basis of SIAPS' activities, e.g., study tour
- Preparing and submitting the retreat report.

## **FINALIZATION OF DDMS ORGANOGRAM**

### **Overview**

The DDMS is accountable to the Ministry of Health and Sanitation (MOHS) and should function within MOHS' guiding principles to provide effective and efficient pharmaceutical service to the country. The sector abides by the MOHS' core values, which underlie the directorate's strategies, and work processes that create an environment that attracts an effective workforce. The adoption of the revised governance structure of DDMS will enable the leadership to achieve the National Health Sector Strategy

goals of reducing inequalities and improving health service delivery to the country.

Version zero of the revised organogram was presented, followed by group discussions and presentations with key objectives that addressed issues related to department, unit, and job positions to:

- Manage emerging challenges in the collaboration with the National Pharmaceutical Procurement Unit (NPPU) and the Pharmacy Board of Sierra Leone
- Formulate, review, and regulate policies and guidelines that support implementation of PSS mechanisms
- Manage the governance and coordination structures at all levels to provide comprehensive, integrated health services
- Coordinate resource mobilization, selection, quantification, procurement, and distribution of medical supplies nationwide
- Manage human resources, administration, and finance
- Manage structures that promote medicine policies and guidelines that ensure safety, efficacy, quality, availability, affordability, accessibility, and rational medicine use (RMU)
- Manage monitoring and evaluation (M&E) and research mechanisms for improved service delivery in the pharmaceutical sector

### **Inputs from Presentations**

The governance department of DDMS is responsible for establishing appropriate governance structures to manage the Policy, Planning, and Coordination Unit; the unit should provide technical advice to the chief pharmacist for medicines and medical supplies, policy formulation, implementation, and M&E.

It was agreed that the Human Resource Management Department will be responsible for DDMS staff recruitment, deployment, matching remuneration, and mobilizing others around a shared vision. This department will serve as a steward for the development of required pharmaceutical services and capacity building of staff to provide pharmaceutical services in the country.

The M&E Unit will evaluate programs under the directorate and will conduct and manage research projects.

The Quality Assurance Unit should be separated from the M& E Unit and stand alone with the responsibility for conducting quality in-process and out-process checks for all pharmaceutical service functions.

The Product & Technology Department will be responsible for managing pharmaceutical product selection, quantification, in-country distribution, and inventory management. In addition, they will promote the use of essential policy documents on medical supplies, pharmaceutical management information systems (PMIS), and pharmaceutical care, thereby linking the DDMS with the district.

The Finance & Admin Department will be responsible for managing DDMS' financial and administrative transactions.

A conclusion on setting the time lines for approval and implementation of the new DDMS structure, together with the required needs, was reached; the new structure was expected to start functioning by the end of 2016.

## **FORMATION OF NATIONAL QUANTIFICATION UNIT**

The NQC and the program-specific quantification TWGs ensure that appropriate quantities of essential health commodities are available in a sustainable, timely, and efficient manner. This is achieved by providing a validated demand and procurement plans to the responsible procurement unit within Government of Sierra Leone and to all other partners undertaking procurement of health commodities for the public sector.

### **Inputs from Presentations**

The presentation took into consideration the importance of the unit in terms of personnel's responsibilities. Discussions on the use and challenges of the Channel tool for informing decisions related to procurement and quantification were held, and the option of rolling out mSupply as a better option instead of Channel was further discussed.

A consensus agreement in setting out processes and timelines for approval and implementation of National Quantification Unit documents was reached, and further deliberation on the use of Channel or mSupply was requested by the participant.

It was agreed that a meeting with relevant stakeholders immediately after the retreat will assist in concluding the matter on the use of these electronic tools.

## OVERVIEW OF CRMS ACTIVITIES AND PROGRESS UPDATE

CRMS is a comprehensive, indicator-based tracking system that measures performance and results on a continuous basis. The process is used to monitor inventory management and the use of medical supplies at the facility level nationwide with the following objectives:

- Ensure an uninterrupted supply of quality medicines and related products used rationally at service delivery points (SDPs)
- Regularly monitor selected indicators to demonstrate improvement in the pharmaceutical management system
- Strengthen PMIS including improved data quality and reporting
- Facilitate smooth distribution/redistribution of commodities to SDPs
- Build capacity by training, supervision, and implementation of the last mile of pharmaceutical management
- Use group activities to troubleshoot potential issues that may arise at various points of the supply chain
- Support the district health management team and health facilities in their effort to maintain a transparent, accountable, and efficient inventory management and control system

Overall, training and implementation have been conducted in 11 districts accounting for 90% of activity implementation, 80% completion of data collation, and 15% of data analysis.

The overall impact of CRMS includes but is not limited to:

- Addressing issues related to overstock of products
- Removing expired products from storage facilities and shipping them to DDMS for safe disposal
- Improving inventory management of supplies at the facility level
- Assisting with informed decision making for subsequent procurement and distribution of medical supplies
- Identifying needs and capacity building of supply chain strengthening systems



## **Reverse Logistics Guidelines**

Reverse logistics is the process of planning, implementation, and control of the flow of supplies from the facility point-of-use back to the point of origin for the purpose of redistribution or proper disposal.

The presentation was conducted to share the concept of the guidelines and the importance of implementing them at the facility level; the presentation addressed the following issues:

- Health facilities experiencing stock-outs while others are overcrowded with excess stock in danger of expiry
- Economic value, wastage
- Recirculation of expired products in the market place
- Emergence of resistance to antimicrobial products and toxicity
- SOPs on disposal methods

## **OVERVIEW OF PHARMACEUTICAL POLICY DOCUMENTS**

To strengthen DDMS, policy documents related to governance at the strategic and functional levels are critical.

The presentation highlighted the contents of each policy document. Issues discussed included outdated policies and setting timelines to review, validate, print, and disseminate documents.

### **Inputs from Presentations**

It was observed that there is no clear procedure or a strategic plan on when policy documents should be revised.

For the already revised Essential Medicine List Policy, the annexes for non-medicines and consumables should be separated from the medicines list.

A consensus agreement on drafting a clear procedure for policy revision was reached, setting out timelines for the planned dates for revising the document.

### **DDMS and SIAPS Activity Work Plan**

The plan was presented and discussions on alignment of activity to reflect SIAPS and DDMS were captured, setting out timelines to roll out proposals and implementation.

## CHALLENGES AND LESSONS LEARNED

The time for planning the retreat was short, thus affecting organizing the logistics aspects.

### **Overall**

Though improvements have been made in supply chain management, personnel at the central and district levels still experience challenges in governance, planning, organizing, procuring, inventory management, PMIS.

The retreat emphasized the need to approve the organogram and set timelines for supportive supervision and training at all levels of the supply chain to ensure better quality of inventory, warehousing operations, and reporting.

In addition, continuous collaboration and communication with the directorate is needed to implement activities that strengthen supply chain management nationwide.

## RETREAT EVALUATION

Out of the 17 pharmacists who participated in the retreat's evaluation process:

- 59% “strongly agree” and 41% “agree” that the presentation on groundbreaking issues and reflection on SIAPS’ systems strengthening demonstrated the possible achievements of PSS through SIAPS’ approach
- 65% strongly agree and 35% agree on using CRMS as evidence to show results and that the approach has contributed to achieving supply chain strengthening and related health outcomes
- 59% strongly agree and 35% agree that finalizing the organogram is vital to DDMS management and 6% did not understand the significance of the concept
- 53% strongly agree and 35% agree that the presentation demonstrated a clear understanding of TOR for quantification committees addressing future challenges and priorities for PSS and 12% did not understand the significance of the concept
- 59% strongly agree and 41% agree that using reverse logistics as a guideline in inventory management will contribute to achieving supply chain strengthening and related health outcomes
- 41% strongly agree and 47% agree that the presentation demonstrated a clear understanding on use of policy, addressing the need to revise documents for PSS and 12% did not understand the significance of the concept
- 59% strongly agree and 41% agree using the activity work plan as a guide to implementing DDMS and achieving supply chain strengthening and related health outcomes.

## **FUTURE PLAN**

SIAPS will continue to support the directorate in supply chain strengthening systems by:

- Adapting the organogram with clear roles, responsibilities, and job specifications for the proposed staff members
- Assisting in the identification of training needs and building staff capacity
- Enhancing carrier development in pharmaceutical service delivery
- Supporting the review and update of pharmaceutical policies
- Developing policies, guidelines, and strategic and investment plans for effective implementation of supply chain management
- Strengthening the coordination, coherence, governance, planning, and accountability of DDMS
- Continuing to support the implementation of integrated CRMS

## SIAPS-DDMS FUTURE WORK PLAN

No	Activity	Actions	Results/expected outcome	Duration	2016				2017											
					S	O	N	D	J	F	M	A	M	J	J	A	S			
1	Train supply chain staff on PMIS	Review and finalize treatment register	Approved treatment register	2 months																
		Organize a meeting with DDPI, DDMS, and program concerns in the implementation process	Proposal of printing budget to cover all health facilities in the country		x	x														
		Set out a review meeting for CRMS first cycle report using Bombali and BO data as a sample presentation	Showcased the impact of CRMS as process for informed decision making on quantification and procurement of medical supplies	2 days	x															
2	Support pharmaceutical and logistic data collection, validation, analysis, reporting, and presentation at central level	Conduct training on CRMS data collation and validation	80% of pharmacists, district information and logistics officers, and M&Es at facility levels knowledgeable on data collation and validation.	4 months	x	x		x	x											
		Provide on-the-job coaching and mentoring on CRMS																		
3	Train health staff on supply management and RMU at all levels	Organize in-house TWG for review of policy document	Version zero policy document	4 months		x														
		Organize seminar with stakeholders on validation of document	Approved policy document				x													
		Facilitate setting of drug therapeutic committees at national level	50% of health facilities with a drugs and therapeutics committee					x												
		Roll out printing, training, and dissemination of policy document	50% of health facilities knowledgeable on RMU; guideline available in 80% of health facilities nationwide							X										
4	Monitor PMIS activities through CRMS supportive supervision of supply chain staff at all levels	Continuous supportive supervision CRMS activities and effective use of PMIS tools	Improved inventory management and RMU	12 months		x		x		x		x		x		x				
5	Review and print standard operation procedures manual	Set out a review meeting for reverse logistics guidelines document	Approved policy document			x														
		Roll out printing, training, and dissemination of policy document	50% of health facilities knowledgeable on RMU; guideline available in 80% of health facilities nationwide				x													
6	Train health personnel at SDPs on effective use of the essential medicines list, standard treatment guidelines, national formulary, and other policy documents	Organize in-house TWG for review of donation guidelines and medicine policy	Version zero policy document	4 months		x														
		Organize seminar/retreat with stakeholders on validation of document	Approved policy document				x													
		Roll out printing, training, and dissemination of policy document	50% of health facilities knowledgeable on RMU; guideline available in 80% of health facilities nationwide					x	x											

**SIAPS-DDMS Future Work Plan**

No	Activity	Actions	Results/expected outcome	Duration	2016				2017											
					S	O	N	D	J	F	M	A	M	J	J	A	S			
7	Review and validate draft organizational structure/organogram for DDMS	Set out timelines for approval of document	Approved document	4 Months	x															
		Set out timelines for implementation	Postings, recruitment of staff on the new organogram		x	x	x	x												
8	Quantify medicine requirements for procurement of Free Health Care and cost-recovery drugs and medical supplies	Set out timelines for approval of the National Quantification Unit's TOR document	Approved document	3Months	x															
			All TWGs becomes functional to carry out duties			x	x	x												
9	Provide management support	Identify office needs	Approved office supplies	4 months	x															
		Initiate the procurement process and lead times	Procurement and delivery of supplies		x			x												
10	Review and print PMIS tools (manual forms and records)																			
11	Distribute health commodities																			
12	Relaunch revised pharmaceutical policy documents at regional level (national medicines policy, essential medicines list, standard treatment guidelines, national formulary etc.)																			
13	Print revised pharmaceutical policy documents																			
14	Strengthen coordination mechanism between the DDMS, Pharmacy Board, NPPU, and key pharmaceutical partners																			
15	Support collection, validation, analysis, reporting, and presentation of pharmaceutical logistic data at central level																			

ANNEXES

1



SIAPS DDMS staff  
retreat agenda.docx

2



Revise ToR and  
organogram of DPS (

3



National  
Quantification Unit TC

4



SIAPS DDMS activity  
work plan.xlsx

5



SIAPS DDMS retreat  
evaluation.xlsx