



Evaluation of the Essential Medicines Logistics System in Mali: Stakeholders Involved in Medicine Management Met in Sélingué

In strengthening the pharmaceutical system in Mali, the Ministry of Health, through the Direction de la Pharmacie et du Médicament (DPM), in collaboration with technical support from the Systems for Improved Access to Pharmaceuticals and Services (SIAPS) Program and with funding from the U.S. Agency for International Development (USAID) and the President's Malaria Initiative (PMI), an evaluation to improve the logistics system for management of essential medicines has launched.

All stakeholders involved in medicine management met at a workshop held October 15 to 17 in Sélingué. The following were present—

- General Director of the Direction de la Pharmacie et du Médicament (DPM)
- Chairman of the Pharmacie Populaire du Mali (PPM)
- A representative of USAID

Beforehand, a technical group composed of leaders from the DPM, the PPM, the National Malaria Control Program, and SIAPS was organized to perform this evaluation. The evaluation was carried out in two phases—

- An initial phase to establish the status of the existing system through a quantitative survey
- A second phase of qualitative evaluation carried out through key person interviews at the central level and a workshop including representatives of the organizations involved in the management of essential medicines in Mali

Objective of the Evaluation

- Highlight the strengths and weaknesses of the existing system
- Propose corrective measures with a view to define standard operating procedures for medicine management, especially for the peripheral and community levels



Photo of the workshop (opening ceremony)



Results

At the end of this workshop, the participants determined the shortcomings and strengths of the logistics system. An action plan was established for each section of the system, along with recommendations.

Strengths

1. Political and financial commitment of the State
2. Existence of pertinent policies and procedures for the management of essential medicines in Mali and the development of inventory management tools on all levels of the health pyramid
3. Existence of a list of essential medicines that is revised every two years
4. Existence of an organization responsible for oversight of the implementation of these management procedures and policies through an Essential Medicines Supply and Distribution Plan (Schéma Directeur d'Approvisionnement et de Distribution des Médicaments Essentiels, or SDADME)
5. Availability of staff responsible for logistics management on all levels of the health pyramid
6. Active community involvement in the management of health care facilities on the operational level, including in medicine management
7. Financial and technical support of development partners to achieve the health objectives established by the Malian government in its Ten-Year Social and Health Development Plan and its five-year component (PRODESS)

Shortcomings

1. Logistics data are generally collected by the staff responsible for inventory management but not transmitted to the higher level.
2. On average, health care facilities receive only about 26.6 percent of products they request.
3. Emergency orders are frequent at Referral Health Centers (Centres de Santé de Référence) and Community Health Centers (Centres de Santé Communautaire), reaching 50 percent and 45.8 percent, respectively, at these levels.
4. Stock-outs are frequent, and recommended inventory levels are not respected.
5. Storage guidelines are rarely respected. No center respects 80 percent of guidelines, and only 8 of 43 centers (18.6 percent) respect 70 percent of these guidelines.
6. Coordination/collaboration of stakeholders in the supply chain at the upper level of the system is needed as well as autonomy and authority in the unit responsible for logistics management.
7. Financial resources are insufficient to support supervision and training activities.
8. Equipment to ship products on the operational level is insufficient, and at times antiquated; financial means for maintaining the existing equipment is inadequate.

Recommendations

Section I – Organization, Infrastructure, Equipment, and Personnel

- Increase the budget allocated for SDADME monitoring.
- Strengthen the collaboration framework between the DPM and other organizations involved in managing the procurement supply chain for Essential Medicines.
- Review selection criteria for Dépôts de Vente (sales warehouse) managers and the requirements for Community Health Agents to better organize their work.
- Renovate existing sites to increase their storage capacity.
- Supply these sites with material and equipment for storage (pallets, fire extinguishers, shelves).
- Make cold-chain storage resources available.

Section II – Logistics Management Information System

- Revise training modules for logistics management to focus on data feedback up the management chain.
- Use the logistics information system to evaluate program performance at least once a year.
- Revitalize the information feedback system at operational level.

Section III – Product Selection

- Develop a national list of tests and reagents similar to the national essential medicines list (taking into account import structure).
- Revitalize hospital therapeutics committees with the goal of preparing an appropriate list for public hospitals.

Section IV – Forecasting of Needs

- Have the DPM retake the lead in national forecasting activities and revitalize the technical group in charge.
- Involve the private sector in the forecasting process.

Section V – Procurement

- Put in place a prequalification process (matching products with suppliers) by the PPM procurement committee for its tenders.
- Develop grievance registration procedures for suppliers.

Section VI – Stock Control Procedures

- Supply medicines to health care facilities in accordance with their expressed needs (requisition system).
- Develop written guidelines for redistribution of overstocked products.
- Develop clear guidelines for emergency orders.

Section VII – Storage

- Train personnel in best practices for storage.

Section VIII – Transport and Distribution

- Furnish facilities with rolling stock for transport.
- Improve the distribution schedule at all levels.

Section IX – Organizational Support

- Furnish personnel involved in logistics management with basic knowledge in health schools and universities, and organize refresher training workshops on logistics management at all levels.
- Make logistics management tools available at all levels.



Photo of workshop participants