Systems for Improved Access to Pharmaceuticals and Services: Strengthening Malaria Supply Chain in Niger

October 1 – December 31, 2015 Progress Report



Submitted to U.S. Government President's Malaria Initiative on January 15, 2016

This publication was produced for review by the U.S. Government President's Malaria Initiative (PMI).





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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

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Cover Photo: Validation of the results of SMC in the District of Madaoua . Health districts workers in a meeting on October 23, 2015 at Madaoua District office for the validation of the 3rd round of SMC campaign in this district. Pictures from Eric Coulibaly (SIAPS)

PROJECT ACTIVITY SUMMARY FORM

Project Name: Systems for Improved Access to Pharmaceuticals and Services (SIAPS)

Project Objectives Support the NMCP of Niger to strengthen the systems for malaria commodities management

Implementing Partner(s): MSH

Agreement/Contract No: Cooperative agreement AID-OAA-A-11-00021

Life of Project (start and end dates): September 2016

Start Date of the Advisor: January 26, 2015

Advisor email contact: Erick Coulibaly ecoulibaly@msh.org

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SIAPS Technical Deputy Director: Sameh Saleeb (ssaleeb@msh.org)

Reporting Period (start and end dates): October 1, 2015 to December 31, 2015

Total Estimated Contract/Agreement Amount:

Obligations to Date, (last day of reporting period) (SF425):

Project Expenditures through (last month of last reporting period):

(first two months of reporting period) Expenses:

Estimated (last month of reporting period) Expenses:

Accrued Expenditures for the Reporting Period:

Total Estimated Expenditures for Reporting Period:

Total Estimated Project Expenditures to Date (as of last day of reporting period):

Obligated Funds Remaining (as of last day of reporting period):

Estimated Expenditures for Next Reporting Period:

Report Submitted by: Seydou Doumbia, Principal Technical Advisor

Report Submission Date: January 15, 2016

The views expressed in this publication do not necessarily reflect the views of the United States Agency for International Development or the United States Government.

ACRONYMS

ACCESS-SMC Achieving Catalytic Expansion of Seasonal Malaria Chemotherapy

Prevention in the Sahel

CRS Catholic Relief Services

DPHMT Direction de la Pharmacie et Médecine Traditionnelle (National Drug

Authority)

Global Fund Global Fund to Fight Aids, Tuberculosis and Malaria

MOH Ministry of Health

MSF Médecins Sans Frontières (Doctors without Borders)

NMCP National Malaria Control Program PMI US President's Malaria Initiative

SIAPS Systems for Improved Access to Pharmaceuticals and Services Program

SMC seasonal malaria chemoprevention

SPAQ sulfadoxine/pyrimethamine + amodiaquine

UNICEF United Nations Children's Fund

USAID US Agency for International Development

INTRODUCTION

The Systems for Improved Access to Pharmaceuticals and Services (SIAPS) Program, funded by the US Agency for International Development, aims to ensure the availability of quality pharmaceuticals products and effective services to achieve desired health outcomes. The SIAPS objective is to promote and utilize a systems strengthening approach consistent with the Global Health Initiative that will result in improved and sustainable health impact.

The SIAPS program provides support to the US President's Malaria Initiative (PMI) country programs to address challenges to ensuring an uninterrupted supply of high-quality medicines and commodities as well as their appropriate use. The SIAPS program collaborates with PMI and field programs to strengthen pharmaceutical management systems for the benefit of national malaria control programs (NMCP). In Niger, SIAPS is supporting the NMCP to strengthen the systems for malaria commodities management. To accomplish that, technical assistance is provided by a SIAPS senior technical advisor who is seconded to the NMCP in Niger.

The following report summarizes activities carried out in Niger from October 1, 2015, to December 30, 2015.

Highlights of these activities include:

- Complete of the third and fourth rounds of seasonal malaria chemoprevention (SMC) distribution campaign in the selected 11 districts
- Hold first national quantification of malaria commodities
- Hold regional quantification workshop to estimate the needs of SMC commodities for next year

As results of these and other activities, the following have been achieved:

- The Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund) approved emergency procurement of malaria commodities (for an approximate amount of 4.5 million euros) to avoid stock-out and treatment interruption.
- About 75% of children aged 3 to 59 months in Niger received sulfadoxine/pyrimethamine and amodiaquine (SP + AQ) during the 2015 SMC distribution campaign.

PROJECT MANAGEMENT

Project management priorities addressed during the reporting period and those for the coming quarter are addressed in tables 1 and 2.

Table 1. Management priorities addressed during this reporting period

Management priorities	Status	Comments
Run the last 2 round of SMC campaign and	Completed	Fourth round of SMC campaign completed November 11–15, 2015
Conduct a quantification and gap analysis to define the malaria program needs for at least the next year 2016	On-going	First national quantification of malaria commodities done October 7–10, 2015
Complete registration of MSH in Niger	Completed	MSH is officially registered in Niger since November 26, 2015, and may officially operate as a nongovernmental organization.

Table 2. Management priorities for next reporting period

Management priorities for next reporting period	Comments
Finalize the malaria commodities supply plan for 2016	In progress. Data from all partners need to be collected.
Finalize quantification and planning of SMC activities for 2016	
Negotiation of the next Global Fund grant covering the period 2016 to 2018	

PROJECT ACTIVITIES

Country: Niger

Senior Technical Advisor: Eric Coulibaly Length of time in country: 11 months

Global Fund grant rating at time of arrival: B1

Current Global Fund grant rating: B1

Seasonal Malaria Chemoprevention

The NMCP is implementing SMC in 11 districts in Niger with funding from the Achieving Catalytic Expansion of Seasonal Malaria Chemoprevention in the Sahel (ACCESS-SMC) project. The project implementation is led by Malaria Consortium in partnership with Catholic Relief Services (CRS). The senior technical advisor participated in a meeting held on November 03 2015, at which the second and third rounds of SMC distribution campaigns were evaluated and plans for the fourth round of distribution discussed. The second, third, and fourth rounds of SMC distribution campaign were held from September to November 2015.

At the end of the 2015 SMC campaign, a total of 620,647 out of 823,031 children (75.4%) aged 3 to 59 months received treatment of SP + AQ. SMC coverage rate increased from 64% in the first round to 81% in the fourth round (figure 1). This is a result of commitments and efforts made by all stakeholders. A meeting to present results and lessons learned from the 2015 campaign is planned for January 2016.

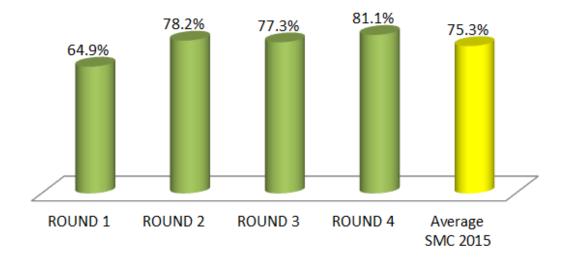


Figure 1. National SMC Coverage Rate

To ensure a better implementation of the SMC in 2016, the SIAPS technical advisor advised the NMCP manager and the SMC focal point to hold a planning meeting in December to discuss 2016 targets, coverage area, and funding gaps. The country has targeted covering 3,880,590

eligible children (aged from 3 to 59 months) in 2016. This is a threefold increase from year 2015 target; therefore, better quantification and planning are needed. The targets, funding levels, and gaps are summarized in table 1 below.

Table 1. Estimation of 2016 SMC Targets

	Children 3-11 Months	Children 12– 59 Months	Total
Estimated Targets for 2016	835,949	3,044,640	3,880,590
Targets by partners/Funding Source			
MSF Suisse	31,270	124,584	155,854
ACCESS-SMC UNITAID/CRS	265,101	975,197	1,240,298
World Bank	169,240	584,425	753,665
UNICEF	41,343	186,264	227,607
Islamic Relief Service	22,187	80,945	103,132
Befen (Bien-Être de la Femme et de l'Enfant au Niger)	5,471	25,029	30,500
Total	534,612	1,976,443	2,511,055
Funding Gap for 2016	301,337	1,068,197	1,369,534

The NMCP stock manager, CRS supply chain person, and the SIAPS technical advisor participated in a regional quantification workshop for the seven ACCESS-SMC countries December 8 to 11 in Accra. The workshop was an opportunity for country teams to better understand the quantification process and strengthen their capacity. SIAPS is also working closely with NMCP to revise quantification figures and adjust orders made by partners.

National Quantification Workshop for Malaria Commodities

During the quarter, the SIAPS technical advisor collaborated with the NMCP and CRS (Global Fund's principal recipient) to organize the first national quantification workshop for malaria commodities. Other participants included the National Drug Authority, CRS, World Health Organization, UNICEF, World Vision, Save the Children, Médicins sans Frontières (MSF) Belgium, SOLTHIS, and other partners. This is the first time that all malaria partners in Niger have met to conduct this exercise. Results of this joint effort were presented to the Global Fund and resulted in the Global Fund agreeing to procure malaria commodities to cover the country's needs until September 2016. It is expected that the order will be delivered by February 2016 once forward funding is approved. The commitment by the Global Fund is particularly important as the 2016–2018 malaria grants have not been signed yet.

The SIAPS technical advisor was fully involved in the discussions, provided needed explanations, and coordinated the communication between Global Fund, the principal recipient (CRS), and the NMCP.



Malaria Quantification workshop participants October 7-9, 2015, at Africa Hall, Niamey Picture by M. Soumana Maiga, NMCP)

Global Fund Concept Note Development and Grant Approval

Since July 17, 2015, the Global Fund notified Niger that the technical review panel approved the concept note for an amount of 36,735,493 US dollars (USD) and an additional USD 2,449,465. Additional clarification has been asked by the Global Fund and responses were provided in December 2015. CRS has been officially designed as principal recipient for this new grant and negotiation with Global Fund will start in January 2016.

Coordination with Partners

During this quarter, we have supported the NMCP in conducting meetings with partners involved in malaria management.

Coordination meetings with CRS mitigated the risk of stock-out of malaria commodities during the two first quarters of 2016. Working together, NMCP and CRS provided explanation and clarification after the quantification for the possible risk and obtained Global Fund's approval to place an emergency order in a situation where the government order would not be available before the June of 2016.

Table 2 summarizes some coordination meetings held during this quarter.

Table 4. Coordination Meetings held during October to December 2015

Partners	Dates	Purpose
CRS, NMCP	October and November 2015	Response to Global Fund clarification regarding quantification and the need of an emergency order to be placed.
CRS, MSF Spain, MSF France, MSF Belgium	December 3, 2015	Planning of SMC intervention in 2016

Challenges and Lessons Learned

- If not addressed, lack of supply chain stock analysis, supply planning, and proper stock management could result in repeated stock-outs of malaria commodities next year. .
- The NMCP lacks essential staff members to properly manage medicines including malaria commodities. Also, the NMCP lacks the organizational capacity to effectively manage the program and achieve desired results. To better achieve its objectives, the NMCP management team needs more leadership and management training. The supply chain team should receive basic training in forecasting and supply planning.
- Current funding is insufficient to cover all 2016 SMC targets.
- Improving coordination and communication between NMCP and CRS helped to alleviate challenges and obtain results.
- The quantification exercise organized with the involvement of most of the partners was a great experience; this activity has been included now in the malaria operation plan for 2016.
- The coordination meeting with SMC partners in December 2015 helped to identify the gaps and advocate for additional funding from the Global Fund and Niger's government.
- To ensure that the proper quantity of SMC products will be delivered on time in 2016, quantification is ongoing and supply chain timelines have been developed. Bottlenecks will be identified and, if needed, action will be taken to avoid any issues.

Next Steps and Priorities for Next Quarter

For the next quarter, the following activities are planned:

- Finalize SMC quantification and follow up on ordered commodities
- Support the ACCESS-SMC project to conduct a costing analysis of implementing SMC.
- Provide input on the negotiation of the next New Funding Model grant.

QUARTERLY TRAVEL PLAN

No travel scheduled during the first quarter of 2016.

Global Fund Malaria Grant Support, October–December 2015					
Country	Advisor	Global Fund Grant	Performance Issues	Advisor's Role	Results
NIGER	Eric Coulibaly	NGR- 708-G07-M			