



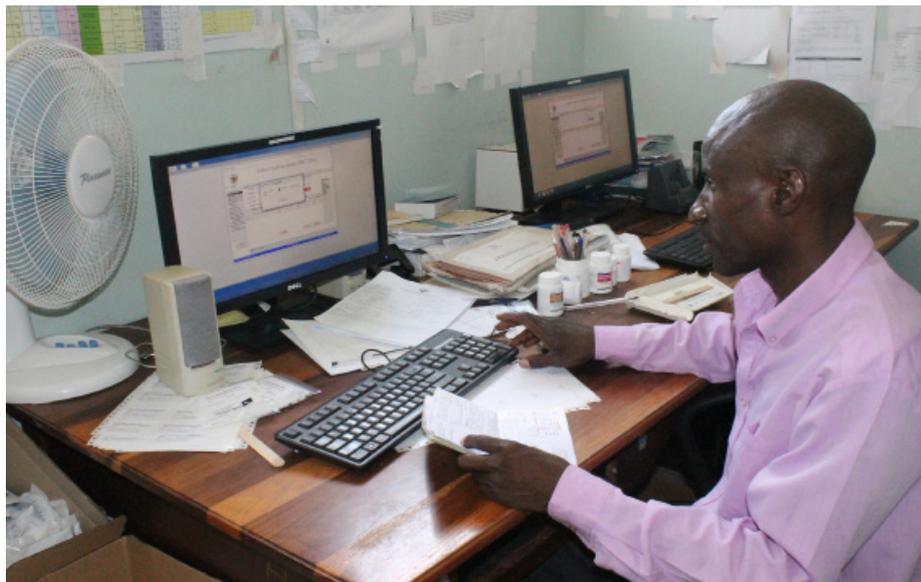
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ISSUE 39

The Electronic Dispensing Tool Hastens ARV Dispensing in Namibia's Public Health Facilities: Mr. George Lukonga's Experience

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Mr. George Lukonga, a Senior Pharmacist Assistant dispensing ARV's using the EDT at Katima Mulilo District Hospital. Photo Credit: SIAPS Namibia staff, February 2016.

Mr. George Lukonga has become accustomed to dealing with 200 to 300 patients on antiretroviral therapy (ART) on a daily basis. George is the senior pharmacist assistant at the Katima Mulilo Hospital, in the Zambezi Region of Namibia, a region with the highest HIV prevalence in the country at 23.7%.

Dispensing antiretroviral medicines (ARVs) to the hundreds of patients who visit the ART Pharmacy daily was a daunting task before the introduction of and training on the electronic dispensing tool (EDT). It took an average of 10-15 minutes per patient to dispense ARVs and resulted in long frustrating queues for the ART patients.

As was observed by the visiting team as well as reported by Lukonga, dispensing has since improved to an average of one to two minutes per patient as a result of the use of the EDT and technical support provided by the Systems

for Improved Access to Pharmaceuticals and Services. The project is funded by PEPFAR through USAID. SIAPS trained and has been providing on-the-job technical support to health workers using the EDT. George is one such health worker who has benefited from this intervention.

"The EDT has simplified our work of dispensing ARV medicines. We can now attend to more patients in a short period of time as opposed to before. With this tool, I can attend to one patient every two minutes. It is very simple to use and it has shortened pharmacy waiting time for the patients,"
Lukonga expressed.

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EDT in a Nutshell

The Electronic Dispensing Tool (EDT) is a database application that helps pharmacy staff to efficiently manage patients and antiretroviral medicines (ARVs). This includes monitoring of patients' adherence to antiretroviral therapy (ART), retention in care, dispensing history, regimen and status changes, appointments keeping, maintaining a good inventory of ARVs and monitoring early warning indicators of HIV drug resistance to ARVs.

There are currently 50 main EDT sites across the 14 regions of Namibia including hospitals, health centres and clinics. The Ministry of Health and Social Services (MoHSS) continues to decentralize ART services to primary health care (PHC) facilities through the nurse initiated and managed ART (NIMART) program to bring services closer to rural communities. To ensure that ART dispensing data continues to be available at district and national level, efficient data collection systems are needed at PHC facilities. The USAID-funded SIAPS project continues to support the MoHSS to rollout the mobile EDT (mEDT) data collection terminals to PHC level.

These terminals, referred to as mobile EDT (mEDT), are used to collect dispensing data at outreach and PHC facilities, and automatically merge it into the main site's EDT database. The EDT has a stock management module that allows inventory management parameters such as ordering of ARVs to be automated to improve their management and avoid stock outs that may compromise ART outcomes.

The mobile EDT is a battery-powered hand held device used to dispense ARVs and collect ART data at remote facilities such as outreach sites and PHC facilities implementing NIMART services. Efficient use of the EDT and mEDT reduces waiting times for clients, eliminates the burden of managing a paper based system, improves stock management by public facilities and improves data quality for the ART programme.

Mr. George Lukonga's experience

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He received EDT training in September and October 2014, a refresher in June 2015, and receives technical support from the SIAPS project on a need basis. He has been instrumental in training nurses from outreach facilities in Zambezi region on the use of the EDT to enable them to accurately capture ARVs and patients' data using EDT. With support from Ms. Grace Adeniyi, the regional the Regional Pharmacist, George took an innovative approach of conducting EDT refresher trainings during the nurses' monthly meetings held in Katima Mulilo district hospital.

Contributed by: Harriet Kagoya (Senior M&E Advisor) and Chipso Chirefu-Toto (Senior Finance and Operations Manager - SIAPS Project in Namibia)

UPCOMING ACTIVITIES

MARCH - APRIL 2016

- Implement the newly developed electronic stock card in selected health facilities for managing medicines and medical supplies developed electronic stock card in selected health facilities
- Assist the CMS to develop supply plans for ARVs and HIV rapid test kits
- Advise the MoHSS' Essential Medicines List Committee on applications for addition of new ARVs and anti-TB medicines to the Nemlist
- Support the MoHSS to consolidate and disseminate results of HIV drug resistance early warning indicators
- Mentor staff at the two medical depots to improve warehousing, inventory control and distribution in support of stepped-up HIV epidemic control
- Work with the Kunene region to improve the use of medicines for HIV and related infections
- Support the MoHSS to compile main findings and recommendations of 2016 country-wide pharmaceutical supportive supervisory visits to health facilities
- Conduct a refresher training on supply chain data analysis and quantification tools for the MoHSS Quantification TWG; and forecast anti-TB medicines
- Orient and train district health managers and frontline health professionals on SOPs of HEW's

Capacitating Pharmacist Assistant Students in Using the EDT to Manage Stock of ARV Medicines and Dispense to ART Patients

Pharmacist assistant (PA) students attached to health facilities as part of their training need to be oriented in the tools and standard operating procedures used by pharmacy staff to manage pharmaceuticals and dispense medicines to patients.

The main tool used at ART pharmacies for ARVs inventory and patient management is the Electronic

Dispensing Tool (EDT). The USAID-funded Systems for Improved Access to Pharmaceuticals and Services (SIAPS) project contributed in preparing the student PAs for their rural attachment through providing technical assistance to Namibia's National Health Training Center (NHTC) to train 40 student PAs on the use of the EDT and the mobile EDT device.

The training was conducted in Windhoek from 25th to 26th November 2015. It consisted of presentations and practical sessions on EDT virtual machines installed at the NHTC with support from the SIAPS project.

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Capacitating Pharmacist Assistant Students in Using the EDT

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Improving Access to and the Availability of Essential Pharmaceutical Supplies for Health Extension Work in Namibia

A joint supportive supervisory visit that was conducted by Ministry of Health and Social Services (MoHSS) and partners in Zambezi region, Namibia, in November 2015 reported more than 90% availability of essential pharmaceutical products that are included in the health extension workers' (HEWs) kit.

The good access to and the high stock availability of essential pharmaceuticals in the HEWs kit is attributed to the seamless system of replenishing the HEWs kit contents by the health facilities according to the Standard Operating Procedures (SOPs) that were developed by MoHSS with the technical assistance of the USAID-funded Supply Chain Management System (SCMS) project. The SOPs outline the roles and responsibilities of the different players in the supply chain, basics of inventory control and good storage practices, and the procedure for replenishing the contents of the HEWs kit.

Based on these SOPs, a MoHSS circular was issued to all public sector health facilities, in this regard. At the time of the visit, all visited health facilities in the Zambezi region were aware of their roles and responsibility in issuing and replenishing pharmaceutical supplies to HEWs assigned to them. Nurses at the clinics and health centres supervised the HEWs, which contributed to the good availability of the pharmaceutical products used by the HEWs.

In general, members of the joint supportive supervisory visit learned that the SOPs together with the additional guidance in the MoHSS circular on replenishing the HEWs kit at the facility provided valuable guidance to the key players and ensured good availability of kit contents so that HEWs may be effective in providing health extension services to their communities, including serving people living with HIV and AIDS.



A SIAPS project facilitator, Bayobuya Phulu, introduces the EDT to a group of student PAs during a session of the EDT training in November 2015. The MoHSS ART logistics pharmacist, Mr. Wuletaw Zeleke (center-left) and PA tutor, Mr Mavu Daniel (center-right) participated in the training. Photo by SIAPS Namibia Staff.

Trainees were also given training materials to assist them in passing on the acquired skills to other health professionals during their attachment to rural district hospitals throughout the country. The EDT also facilitates the capturing of key data on patients' ART adherence and other early warning indicators of resistance to antiretroviral (ARV) medicines.

This training contributed to SIAPS' objective of supporting local institutions in producing pharmacy personnel with the capacity to take leading roles in improving ART service delivery to manage the HIV epidemic in Namibia.

Training on the mobile EDT will capacitate the Ministry of Health and Social Services (MoHSS) in the decentralization of ART services to NIMART sites without reducing the quality of service delivered to patients at these sites.

The participants who were being prepared for their attachment to rural district hospitals will be able to optimally use the EDT, especially the mobile devices that were recently distributed to ART sites by the MoHSS, with the support of USAID and other partners.

Optimum use of the EDT provides the ART program with access to reliable patient and ARV medicines data in

a timely manner for informing the management of the ART program at site level and nationally.

Effective implementation and use of the EDT also enables access by regional pharmacists to region-specific profiles on the existing national database to facilitate their participation in the monitoring of ART data quality, ART-related activities in their regions and the local use of ART data.

At the end of the workshop participants jointly developed an action plan to guide them on applying the knowledge gained to improve the delivery of ART services in the health facilities to which they would be attached. For more information on the EDT, refer to the article "EDT in a Nutshell" on page 2.



A photo of the mobile EDT.

Contributed by:
Bayobuya Phulu (Senior Technical Advisor, SIAPS) and Stanley Stephanus (Senior IT specialist)

Training and Mentoring Improves the Efficiency of the Rundu Regional Medical Depot in Namibia

The USAID-funded Supply Chain Management System (SCMS) project has learned from a recent technical support visit that the Rundu Multi Regional Medical Depot (MRMD) in Namibia improved its medicines receiving and stock control processes.

This is a result of the depot's staff compliance with Standard Operating Procedures (SOPs) after SCMS trained and provided on-the-job mentoring and support to 11 staffs on the SOPs, the SYSPRO inventory control software and on pharmaceutical good storage and distribution practices for ARVs, anti-TB medicines and other clinical supplies. The technical support visit focussed on the implementation of the SOPs, inventory control, stock card use, stock count accuracy, and on improvements made in medicines availability at the Rundu MRMD.

Notably, the Rundu MRMD staffs are now better at receiving, recording and generating the goods receiving notes, processing orders made by health facilities and inspecting pharmaceuticals as a quality assurance step before they are dispatched to health facilities.

The MRMD now uses logbooks to capture the order processing time and order picking errors, which makes it possible to generate reports for the pharmaceutical management information system (PMIS).

The MRMD was unable to generate the PMIS reports for the whole of 2014. According to the PMIS report for the April to June 2015 period, the average order processing time for the depot was 5.8 days per main order, which was very close to the set standard of five working days as stated in the PMIS guideline.

For the first time ever, the MRMD was able to estimate its order picking errors to be 10.9%, which was double the acceptable PMIS standard of 5%. The high rate of picking errors underscores the need for further mentoring, monitoring of the warehouse clerks at the MRMD. The Rundu MRMD serves 37 health facilities in Kavango East and Kavango West, two of Namibia's 14 regions with the highest HIV prevalence of 17% - higher than the national average of 14%.

SCMS project will continue providing technical assistance to the depot to further improve and sustain these positive changes to ensure uninterrupted availability of ARVs and other essential health commodities for the prevention and management of HIV and AIDS.

Contributed by: Alemayehu Wolde
(Senior Technical Advisor, SCMS)

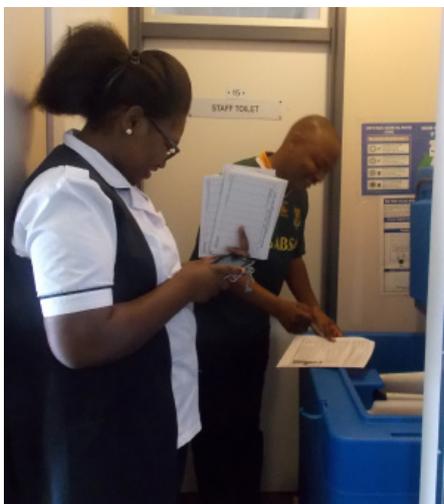
Improving Inventory Management Skills of Nurses for Decentralized ART Service Delivery: The Case of Rosh Pinah Clinic

The USAID funded SIAPS and SCMS projects support the MoHSS to assess and improve the performance of health facilities in the delivery of pharmaceutical services through support supervisory visits (SSVs) for mentoring pharmacy staff on inventory management of ARVs and pharmaceutical service delivery.

The relevant sections of the SSV checklist have been used by the regional and district pharmacists to supervise their frontline health facilities during regular site visits. This maintains the year round mentoring and continuous improvement at the facility level.

Sr. Nakale Rosaline, a registered nurse at Rosh Pinah clinic in Karas region, appreciates the regular SSVs that the clinic receives from the pharmacist, Mr. Johnson Alao and his team at the Luderitz district hospital.

Following a recommendation of the 2015 annual SSVs, conducted by MoHSS - Division of Pharmaceutical Services, SIAPS and SCMS projects, the district pharmacist developed and implemented a schedule for regular monthly SSVs to all clinics in the region.



Support supervision visit (SSV) team member, Mr. Bayobuya Phulu, SIAPS Senior Technical Advisor (right), guides Sr. Nakale Rosaline, a registered nurse, through vaccines stock card management at Rosh Pinah clinic during SSVs on 25 February 2016. Photo credit: SCMS Namibia staff.

Nakale, a beneficiary of the newly scheduled SSVs from Luderitz district hospital pharmacy staff did not participate in any formal training workshop on pharmaceutical inventory management. She says the on-the-job technical assistance provided to her and other nurses during SSVs enabled her and fellow nurses to improve inventory man-

A key lesson learnt by the team conducting the SSVs at Rosh Pinah clinic is that even in the absence of or limited opportunities for formal training on pharmaceutical management there are opportunities to improve the management of pharmaceuticals and ART services with regular on-the-job training and mentoring.

agement at the clinic. The SSVs team observed improved stock card usage for all pharmaceuticals stocked at the clinic, including ARVs and vaccines.

Nakale's feedback about the benefits of on-the-job support during SSVs resonates with that of other nurses at primary healthcare clinics in the Karas region, which was obtained during the 2016 national pharmaceutical SSVs.

Collectively, the support provided to the region's three hospitals and one clinic in 2016 will impact over 4,000 patients on antiretroviral therapy (ART).

Contributed by
Harriet Kagoya, Bayobuya Phulu and
Chipo Chirefu-Toto (SIAPS and SCMS)

SIAPS Assists Namibia's School of Pharmacy to Introduce Pre-service Medicines Regulation Training



A cross section of stakeholders who participated in the review of the medicines regulation training at UNAM. First on the right is Mr Johannes #Gaeseb, Registrar of NMRC and Ms Nardia Coetzee, of the PCN listening to Mr. Seth Nowaseb, Lecturer at UNAM's School of Pharmacy. Photo credit: SIAPS Namibia, February 2016.

The USAID-funded SIAPS project provided technical assistance to the University of Namibia's (UNAM) School of Pharmacy (SoP) to develop course materials for a pre-service training in medicines regulation, as outlined in the curriculum of the UNAM Bachelor of Pharmacy degree.

In February 2016, SIAPS facilitated a consultative stakeholder review of the draft learning outcomes and course content. The reviewed training materials were drafted in FY2015 through technical assistance provided by the SIAPS project.

The 17 stakeholders who participated included the:

- Pharmaceutical Society of Namibia (PSN)
- Namibia Medicines Regulatory Council (NMRC)
- Health Professions Council of Namibia (HPCNa)
- Pharmaceutical manufactures, importers and distributors of medicines in Namibia.

Ms. Nardia Coetzee, a member of the Pharmacy Council of Namibia (PCN) acknowledged the relevance and utility of the regulatory affairs training materials in building the capacity of local pharmaceutical personnel in medicines regulation.

She wrote, *"This module will give the students valuable exposure to sectors of pharmacy that not many pharmacists have any experience of. It will be valuable to the industry to have interns / young pharmacists who know how inspections are done. It will also hopefully create an interest with students to pursue their careers in Industry and regulatory affairs"*.

The pre-service training in medicine regulation will ensure that pharmacists graduating from UNAM are equipped with the essential knowledge and skills to assure the quality, safety and efficacy of medicines, including antiretroviral and related medicines.

They will also be conversant with pharmaceutical good regulatory practices. In addition, the training will be the basis for developing a continuing professional development (CPD) short course and a Master of Pharmacy degree (Industrial), to benefit those who are already practicing pharmacy and others who may want to learn more about pharmaceutical regulation.

**Contributed by
Nasser Mbaziira (Senior Technical Advisor, SIAPS) and Harriet Kagoya (Senior M&E Advisor, SIAPS)**

Routine Use of the Standard Pharmaceutical Order Book in Primary Healthcare Facilities of Kunene Region Leads to Improved Inventory Control

Mr. Ahmad Zaman, the Regional Pharmacist for the expansive Kunene region of Namibia, has earnestly embraced the new order book for primary health care (PHC) level and has overseen its routine use by nurses in the entire Opuwo district of the region.

The USAID-funded SCMS project provided technical assistance to the Ministry of Health and Social Services (MOHSS) Division of Pharmaceutical Services to develop the order book in April 2015 so that all PHC facilities across the country could use one standard order book. Previously, every region compiled its own version of the PHC order book, which had different data requirements that were often insufficient in assessing how rational the orders made were.

The new standard PHC order book now requires each facility to provide its average monthly consumption and minimum and maximum stock quantities for each product along with the ordered quantity.

Ahmad facilitated the adoption of the new PHC order book, by supporting all the 13 PHC facilities in Opuwo district to calculate and prepopulate the order book with min-max stock levels for each product, which then guided the nurses at the PHC sites to more appropriately determine the quantities to order.

Kunene is a vast region in North West Namibia with some PHC sites being located almost 200 km from the main district hospital; some having only one nurse. Therefore, the improvements in the order book and the support from the district hospital pharmacy have significantly eased the burden of order requisition for nurses at the PHC facilities, enabling them to provide better quality health care to their clients.

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Routine Use of the Standard Pharmaceutical Order Book in Primary Healthcare

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Mr. Ahmad Zaman, Regional Pharmacist for Kunene region inspects stock cards during a pharmaceutical support supervisory visit to the Outapi District Hospital in Omusati region of Namibia where he shared lessons from Kunene region. February 2016. Photo credit: SCMS staff in Namibia.

According to Ahmad, the impact of this intervention is already visible, with reductions in emergency orders and in the quantity of expired products coming from PHC sites. He is one of the 22 MoHSS staff jointly trained by SCMS and the Global Fund as trainers on inventory management and good storage practices in November 2014.

The knowledge and skills gained from this training, coupled with feedback from the annual MOHSS pharmaceutical support supervisory visits, motivated Ahmad to implement the interventions that are now driving improvements in stock management in Opuwo district. In the coming months, Ahmad plans to expand these successful interventions to Outjo and Khorixas, the other two districts within the region.

MINISTRY OF HEALTH AND SOCIAL SERVICES										PHC Ord			
CUSTOMER NAME		Orumana Clinic								CMS Ref No	Date of order	Order by	Approved by
PLEASE NOTE: For accurate quantification so as to determine the "Order Quantity", the Average Monthly Use (AMU) must be calculated and used to set the Minimum and Maximum stock levels at least twice per year. Thorough stocktaking must be conducted to establish the Stock on Hand" and this must be recorded in the appropriate column. Note: Order Quantity = Maximum minus Stock on Hand										Order by	Approved by		
VEN	LEVEL	STOCK CODE	DESCRIPTION	UNIT OF ISSUE	UNIT PRICE	Average Monthly Use	Minimum Level	Maximum Level	Stock on Hand	Order Quantity	Issued Quantity		
ARVs & TEST KITS													
V	IMAI-R	0120642	NEVIRAPINE 200MG TABS (HAART)	60	28.31								
V	AB	0120653	NEVIRAPINE SUSP 10MG/ML 240ML (HAART)	1	81.96								
V	IMAI-R	0120689	TENOFOVIR 300MG+EMTRICITABINE 200MG+EFAVIRENZ 600MG TABS	30	127.9								
V	IMAI-R	0120723	EFVIRENZ 600MG TABS	30	47.56								
V	IMAI-R	0120802	ZIDOVIDINE 300MG TABS	60	90.8								
V	IMAI-R	0120814	LAMIVUDINE 300MG + TENOFOVIR 300MG TABS	30	64.29								
E	ABC	0120831	DETERMINE TEST KIT	100	1163.06								
E	ABC	0120833	DETERMINE CHASE BUFFER	1	93.81								
E	ABC	0120841	UNIGOLD TEST KIT BUFFER INCLUDED	20	758								
E	ABC	0120842	UNIGOLD KIT PIPETTE	20	12.68								
E	ABC	0120851	CLEAR VIEW COMPLETE HIV 1/2 TEST KIT	25	2210.91								

This snapshot of the new standard order book used by PHC facilities across Namibia shows the key data elements required when making a requisition for all pharmaceuticals including anti-retroviral medicines from higher-level facilities.

Contributed by: Benjamin Ongeri, SCMS Senior Technical Manager

Practical Training and On-The-Job Support Improves ART Pharmaceutical Service Delivery in Namibia: Experiences of A Pharmacist Assistant at the Karasburg District Hospital

Inventory management training, technical support visits by the regional and district pharmacists, and the electronic dispensing tool (EDT) have improved inventory management and the delivery of antiretroviral treatment (ART) pharmaceutical services to patients in the Karas region of Namibia.

Mr. Davids Simasiku, a pharmacist assistant at Karasburg district hospital (DH) who participated in the USAID-funded and SCMS-facilitated inventory management training in Karas in October 2015 was appreciative of the knowledge and skills he gained from the training. He said "the (inventory management) training helped me a lot. I had only theory but the training turned it into practicals. The training was full of activities like calculating minimum-maximum stock, stock card use, good ordering practices. I have managed to calculate and record min-max on (Karasburg DH) stock cards. Before the training, only about 60% of the cards had min-max but this has improved to more than 80%. I started using stock cards for clinical supplies only after the training".

Simasiku is grateful for the practical nature of the training. He is applying the knowledge and skills as was visible from the hospital's improved inventory management practices. He is now able to train nurses from the clinics attached to the DH on inventory management especially during outreaches.

He appreciates how much the electronic dispensing tool (EDT) and its mobile version (mEDT) makes it easier for him to

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Capacity Building in Inventory Management Improves ART Pharmaceutical Service Delivery in Namibia

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routinely dispense life-saving antiretroviral medicines (ARVs) to patients. It would have been too tedious for him and other pharmacy staff to use a paper based record system for over 500 patients on ART at the hospital.

USAID's SIAPS project provides technical assistance for the EDT, nationally. For more information on the EDT, refer to the article "EDT in a Nutshell" on page 2.

Contributed by Harriet Kagoya, Bayobuya Phulu and Chipu Chirefu-Toto (SIAPS and SCMS Namibia)



Mr. Marimo Tafadzwa, the Karas Regional Pharmacist (right) provides on-the-job support on stock card use at Karasburg hospital pharmacy. Davids Simasiku (center), a pharmacist assistant at the hospital listens attentively while Anna Shimbulu, a pharmacist from the Namibia Medicines Regulatory Council (NMRC) takes notes. Photo credit; MSH Namibia staff 23 February 2016.

Feedback from Healthcare Providers on SIAPS and SCMS interventions in improving ART pharmaceutical services delivery in Namibia

"This module will give the students valuable exposure to sectors of pharmacy that not many pharmacists have any experience of. It will be valuable to the industry to have interns / young pharmacists who know how inspections are done. It will also hopefully create an interest with students to pursue their careers in Industry and regulatory affairs" Nardia Coetzee,

A member of the Pharmacy Council of Namibia during a stakeholders' meeting for review of medicines regulatory affairs module for B.Pharm training at University of Namibia's School of Pharmacy. February 2016

"Support supervisory visits (SSVs) keep us on our toes. They help us ensure that we adhere to the set standards and we also learn from the various processes of maintaining our (medicines and related supplies) stock",

said Mr. Muhloro Dziva, the pharmacist in charge at the Katima Mulilo district hospital during SSVs conducted in Zambezi region in February 2016. Zambezi region has the highest (23.7%) HIV prevalence in Namibia.

"The mobile EDT has helped us a lot when we go to our outreach sites. We see up to 60 patients on ART per day and we simply upload the data to the EDT when we return to our station. It also makes it easier for us to manage our appointments with patients and to compile our monthly reports as all the data is available at a click of a button," Mr Paavo Heita, a Pharmacy Assistant at the Outapi District Hospital. February 2016

A key lesson learnt by the team conducting the SSVs at Rosh Pinah clinic is that even in the absence of or limited opportunities for formal training on pharmaceutical management, there are opportunities to improve the management of pharmaceuticals and ART services with regular on-the-job training and mentoring

"During the visits, we always share the best ideas on how to organize the pharmacies and the best ways to store medicines. We have seen an overall improvement in stock management. Medicines are not expiring like before and good stock levels are maintained. Most of the (medical) facilities are performing well even if most of them are understaffed." Mr Ahmad Zaman, Regional Pharmacist for Kunene region on SSVs in Namibia. February 2016.

Compiled by :Harriet Rachel Kagoya & Chipu Chirefu-Toto (SIAPS & SCMS, Namibia)

Maintaining High Quality Pharmaceutical Standards in ART Service Delivery

Every year, the Ministry of Health and Social Services (MoHSS), supported by the USAID-funded Supply Chain Management System (SCMS) and the Systems for Improved Access to Pharmaceuticals and Services (SIAPS) projects conducts comprehensive pharmaceutical Support supervisory visits (SSVs) nationally.

A scored checklist is used to assess the quality of pharmaceutical service delivery at the visited health facilities.

The comprehensive checklist covers the:

- Storage of medicines and clinical supplies
- Human resources and status of implementation of previous SSV recommendations
- Inventory quantification and control and management
- Pharmaceutical management information system (PMIS)
- Functionality of Therapeutics Committees (TCs)
- Antiretroviral Therapy (ART) Services
- Therapeutic information and pharmacovigilance activities
- Quality of dispensing practices

A pharmacist in charge of the Katima Mulilo District Hospital in the Zambezi region, Mr. Muhloro Dziva commended the SSVs for helping pharmacy staff like him to maintain the high standards of managing their antiretroviral (ARV) and other medicines stock, as well as learning best practices for improving the delivery of ART services to patients. Zambezi region has the highest (23.7%) HIV prevalence in Namibia.

Mr. Ahmad Zaman, Regional Pharmacist for Kunene region said the SSVs have helped to ensure proper stock and inventory control at the health facilities visited. "During the visits, we always share the best ideas on how to organize the pharmacies and the best ways to store medicines. We have seen an overall improvement in stock management.



Mr Benjamin Onger, SCMS Senior Technical Manager (right) and Wuletaw Zeleke, MoHSS ART Logistics Pharmacist (second from right) discuss with Ms Grace Adeniyi, the Zambezi Regional Pharmacist (left) and Mr Muhloro Dziva, the Pharmacist-in-charge at Katima Mulilo District Hospital (second from left) the findings and recommendations of the 2016 pharmaceutical support supervision visit to Zambezi region. Photo taken on February 8, 2016 by MSH Namibia staff.

Medicines are not expiring like before and good stock levels are maintained. Most of the (health) facilities are performing well even if most of them are understaffed."

The annual pharmaceutical SSVs serve as a continuous quality improvement mechanism for the MoHSS. SSV teams share findings and discuss recommendations with the regional staff to facilitate action planning for implementation of recommendations.

"Support supervisory visits keep us on our toes. They help us ensure that we adhere to the set standards and we also learn from the various processes of maintaining our (medicines and related supplies) stock", said Mr. Dziva, a pharmacist in charge at the Katima Mulilo district hospital.

Contributed by: Harriet Kagoya (Senior M&E Advisor) and Chipo Chirefu-Toto (Senior Finance and Operations Manager - SIAPS, SCMS Projects in Namibia).

ABOUT THE NEWSLETTER

The SIAPS/SCMS Namibia e-Newsletter is a bi-monthly newsletter that keeps you abreast of activities funded by the United States Agency for International Development (USAID) and implemented by MSH Namibia.

Key focus areas are HIV /AIDS Management:

1. Strengthening Health Systems
2. Capacity Building
3. Human Resource Development
4. Service Delivery

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

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