



Success Story

Guidelines at the Primary Level of Care Help Strengthen Antimalarial Supply Management of the Malaria Diagnosis and Treatment Network in Chocó, Colombia

The Department of Chocó has Colombia's second-highest malaria burden. Malaria control is particularly difficult in this department as a result of its widely dispersed population, difficult geographical access, and frequent problems involving law and order.

A study conducted in Chocó by the Systems for Improved Access to Pharmaceuticals and Services (SIAPS) Program¹ in 2012 revealed the absence of procedures and mechanisms for ensuring adequate antimalarial supply management at the primary level of care. In 81 percent of the health posts visited, for example, staff lacked the knowledge required to properly estimate the amounts of antimalarial medicines required to replenish stock on hand.²

Based on the findings of that study and building on the experience and materials available from other Amazon Malaria Initiative (AMI)³ member countries, Colombia drew up a guide titled "What I Need to Know about Antimalarial Supply Management at the Primary Level of Care: Colombia – 2013." Development of the guide grew out of work sessions conducted with staff in technical areas, communications offices, and operations management units of the Ministry of Health and Social Protection (Ministerio de Salud y Protección Social; MSPS). The MSPS disseminated this tool and made its use official in October 2013. The MSPS director requested the Vector-Borne Disease Programs of the Health Secretariats to supervise the immediate and appropriate implementation of the guide.

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LO QUE DEBO SABER SOBRE SUMINISTRO DE ANTIMALÁRICOS EN EL PRIMER NIVEL DE ATENCIÓN COLOMBIA - 2013

1. ¿Cuál es la cantidad de medicamentos que debo mantener en el centro (puesto) de atención?
La cantidad necesaria para atender los casos que se pueden presentar en cuatro meses. (Se determina con el histórico de casos del año anterior en el mismo período)

En localidades donde no se diagnosticaron casos durante el año anterior se recomienda mantener 1 esquema completo.

EN LA INSTITUCIÓN PRESTADORA DE SERVICIOS DE SALUD - IPS:

- Póngalos en el lugar más fresco, menos húmedo y más seguro.
- Dile con qué con un termómetro higrometro para medir y luego registrar la temperatura y humedad relativa, dos veces por día (10 a.m. y 4 p.m., por ejemplo) indicando la fecha y hora de la medición.
- Si no cuenta con termómetro higrometro, coloque un termómetro ambiental y registre la temperatura diariamente en la mañana y en la tarde.
- Si las mediciones de temperatura y humedad son mayores a 25°C o 75%, informe inmediatamente al jefe del establecimiento para que gestione las medidas necesarias.

EN SU VIVIENDA:

- Póngalos en un lugar fresco, seco, seguro, lejos de la estufa y donde no los alcanzan los niños.
- No guarde los medicamentos en la nevera.
- Un lugar apropiado puede ser el cajón del ropero, con llave para la seguridad del medicamento o una caja plástica de pasta rígida, igualmente con seguridad o en el botiquín.

Ubíquelos en su lugar de almacenamiento, de tal forma que los primeros – los de la parte delantera, correspondan a los que tengan fecha vencimiento más cercano y en la parte de atrás los de fecha vencimiento más lejano.

See the complete guide at: <http://siapsprogram.org/?p=3785>

In December 2013, an assessment was conducted of the impact generated by implementation of the guide in 18 malaria diagnostic posts in Chocó that had participated in the baseline study. Figure 1 shows the results of the baseline study and of the evaluation.



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to Pharmaceuticals and Services

¹ Program implemented by Management Sciences for Health, financed by the US Agency for International Development (USAID).

² Hinestroza, Yenifer. 2012. *Evaluación de la gestión del suministro de medicamentos antimaláricos e insumos para diagnóstico de la malaria. Departamento del Chocó-Colombia-2012 – Línea de base*. Presentado a la Agencia de los Estados Unidos para el Desarrollo Internacional por el Programa Systems for Improved Access to Pharmaceuticals and Services (SIAPS). Arlington, VA: Management Sciences for Health.

³ USAID-financed regional initiative to support malaria control in the countries of the Amazon basin.

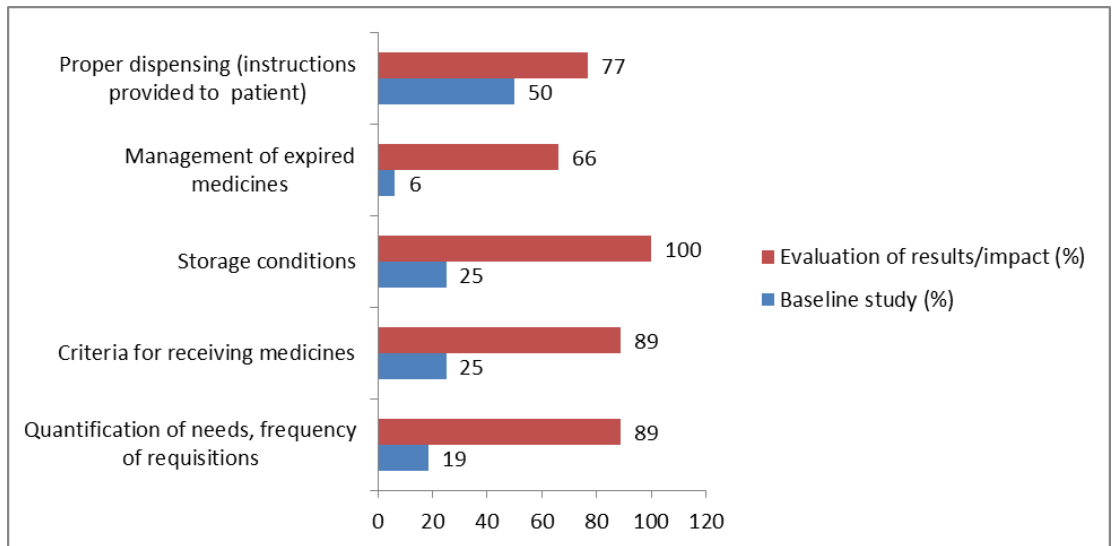


Figure 1. Percentage of health posts in which staff interviewed had the minimal knowledge necessary to perform antimalarial supply management tasks

The study reveals manifest improvements in knowledge in all of the aspects of supply management evaluated. Practices were also improved through the introduction of inventory control cards and standardized forms for requisitioning and dispatching medicines. The evaluation showed an increase in the availability of antimalarials from 55.5 percent⁴ to 100 percent⁵ during the same period.

Conclusion

Implementation in Chocó of the self-teaching guide “What I Need to Know about Antimalarial Supply Management at the Primary Level of Care” has increased staff knowledge of critical areas of the supply process and contributed to improving availability of medicines. Based on this evidence, it is recommended that use of this guide be extended to other areas of the country where malaria is endemic.



Informed distribution of the guidelines in the Alto Baudó municipal health center

⁴ Hinestroza, Yenifer. 2012. *Evaluación de la gestión del suministro de medicamentos antimaláricos e insumos para diagnóstico de la malaria. Departamento del Chocó-Colombia-2012 – Línea de base.*

⁵ Hinestroza, Yenifer. 2014. *Guía “Lo que debo saber sobre suministro de antimaláricos en el primer nivel de atención” – Informe de la evaluación de su introducción en Chocó, Colombia.* Presentado a la Agencia de los Estados Unidos para el Desarrollo Internacional por el Programa Systems for Improved Access to Pharmaceuticals and Services (SIAPS). Arlington, VA: Management Sciences for Health.