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Title of Presentation

Use of Supply Chain Data for Program Quality Monitoring:

Trends in Use of ALU in Malaria Case management- Morogoro Municipal Experience

Godbless Mariki^{1*}, Joseph Mugasa², John Gamaliel², Beatrice Christian¹ Emeka Okechukwu²
Patrick Swai³, Marina Njelekela⁴

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Introduction

- First line antimalarial treatment has been Artemether/Lumefantrine (ALU)
- Availability of ALU depends on;
 - Logistics data reported to the central level, for

Quantification, procurement, distribution and delivery schedules

- Supply chain data provides critical information to complement other program data points and monitor quality of care provided to patients.
- Commodity consumption data is useful in triangulating and making sense of other service delivery data.
- ALU consumption should be the same as the malaria cases data captured in DHIS2



Introduction..

- Tools/Systems;
 - Electronic system; **eLMIS** for reporting logistics data and requesting resupply of health commodities by all facilities
 - **DHIS2**
- **Aim:** Review ALU consumption and Malaria cases discrepancies in Morogoro Municipal; Establish Intervention plan



Introduction..

- Supply chain data provides critical information to complement other program data points and monitor quality of care provided to patients.
- Commodity consumption data is useful in triangulating and making sense of other service delivery data.
- **Aim:** Review differences between ACT consumption and Malaria cases in Morogoro Municipal; Establish Intervention plan



Methodology

- Convenience sampling,
 - **30** Public HF's in Morogoro MC
- Retrospective review
 - Consumption data for dispensed ALU doses reported in eLMIS
 - Malaria cases from DHIS2 (mRDT, BS and Clinical) April 2016 to June 2017
 - Review of ILS dispensing



Methodology

- Data was analysed using eLMIS dashboards and Microsoft Excel 2013

open LMIS Electronic Logistics Management Information Systems Logged in as G

Home Requisitions Orders Equipments Reports Administration ILS Gateway

Aggregate Consumption Report

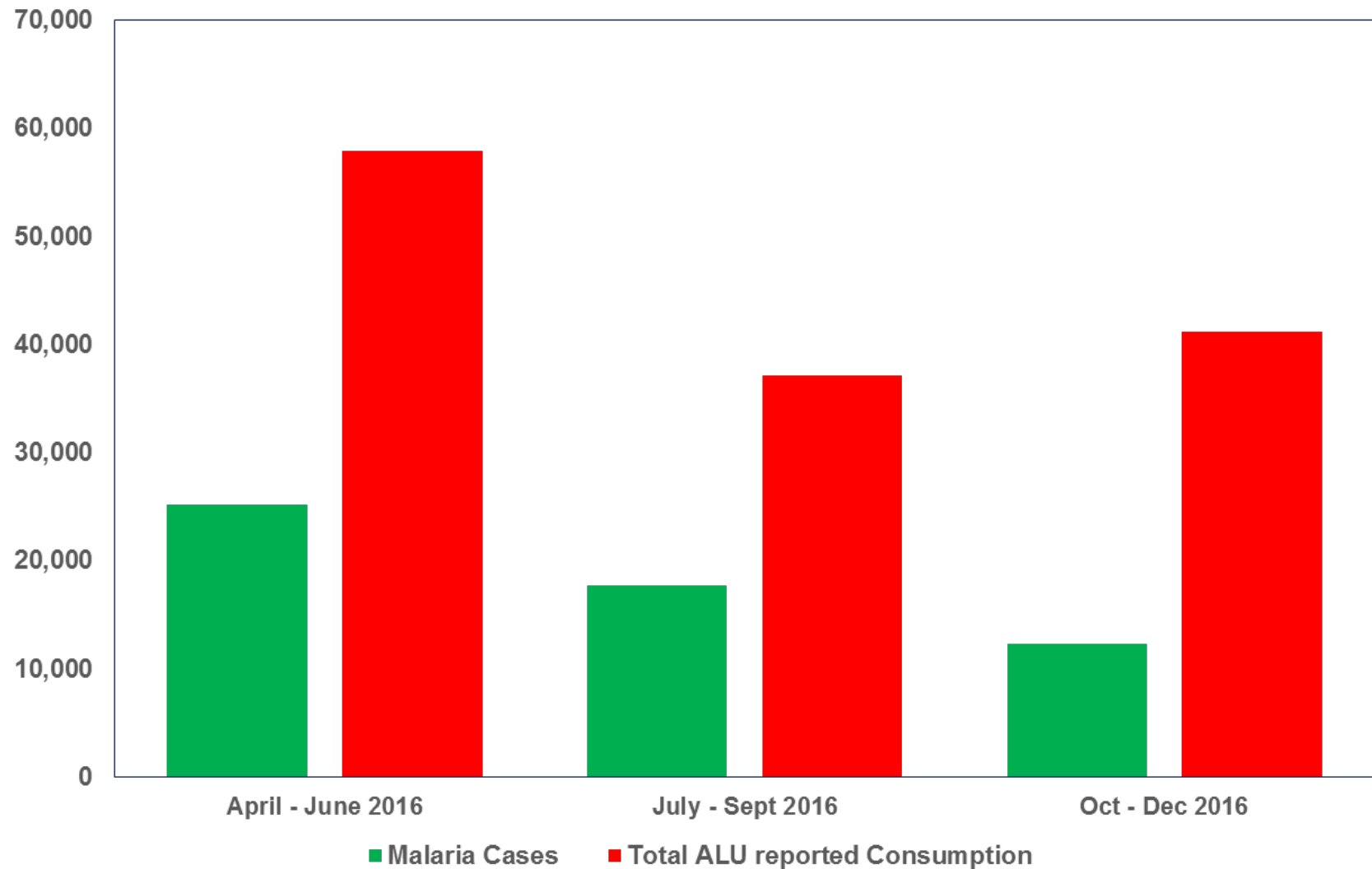
Program *
 ILS
 Schedule *
 Group A
 Year *
 2017
 Period *
 April - June
 Geographic Zone
 Morogoro MC - District
 Product Category

Page: 1, S

#	Product code / name:	Product name	Reported Consumption	Reported Consumption per Packs	Adju
1	10010170BE	Artemether/Lumefantrine (Bluu 2 x 6) 20/120 mg (B/30)	493,234	16,442	
2	10010002BE	Artemether/Lumefantrine (Kahawia 3 x 6) 20/120 mg (B/30)	494,811	16,494	
3	10010171BE	Artemether/Lumefantrine (Kijani 4 x 6) 20/120 mg (B/30)	918,470	30,616	
4	10010169BE	Artemether/Lumefantrine (Njano 1 x 6) 20/120 mg (B/30)	494,281	16,477	

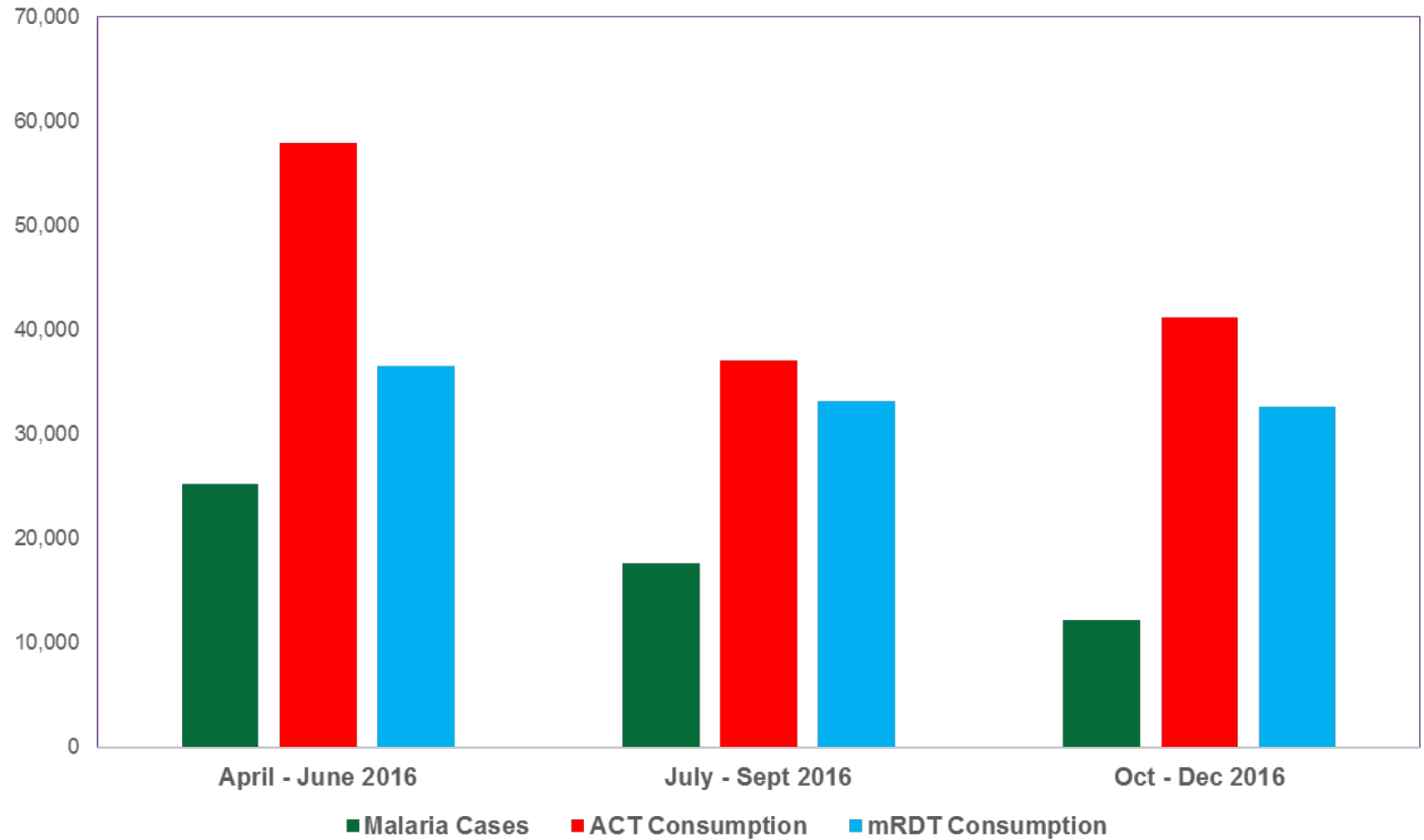
Results

Comparison of number of Malaria cases and ACT consumption

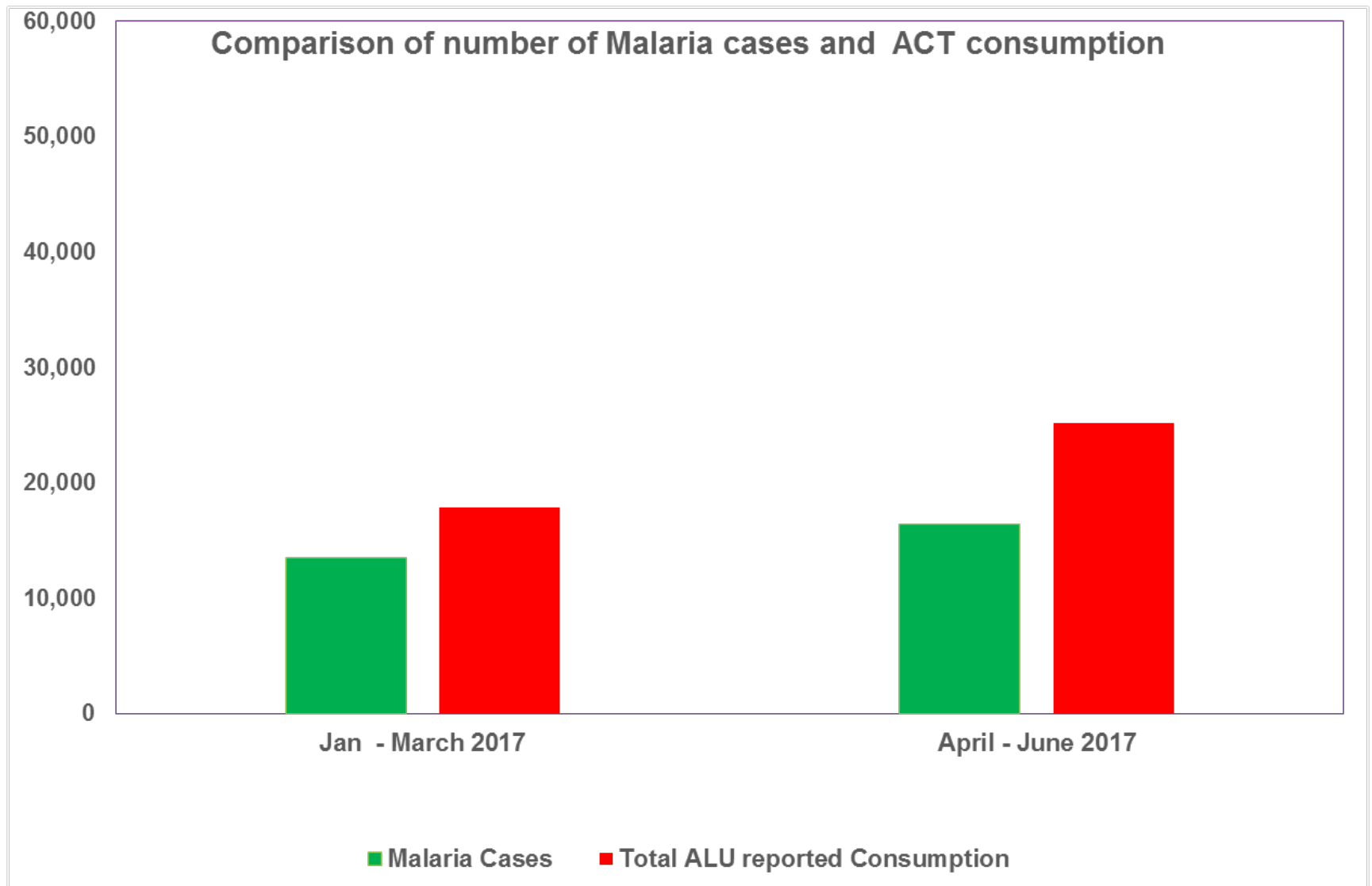


Results

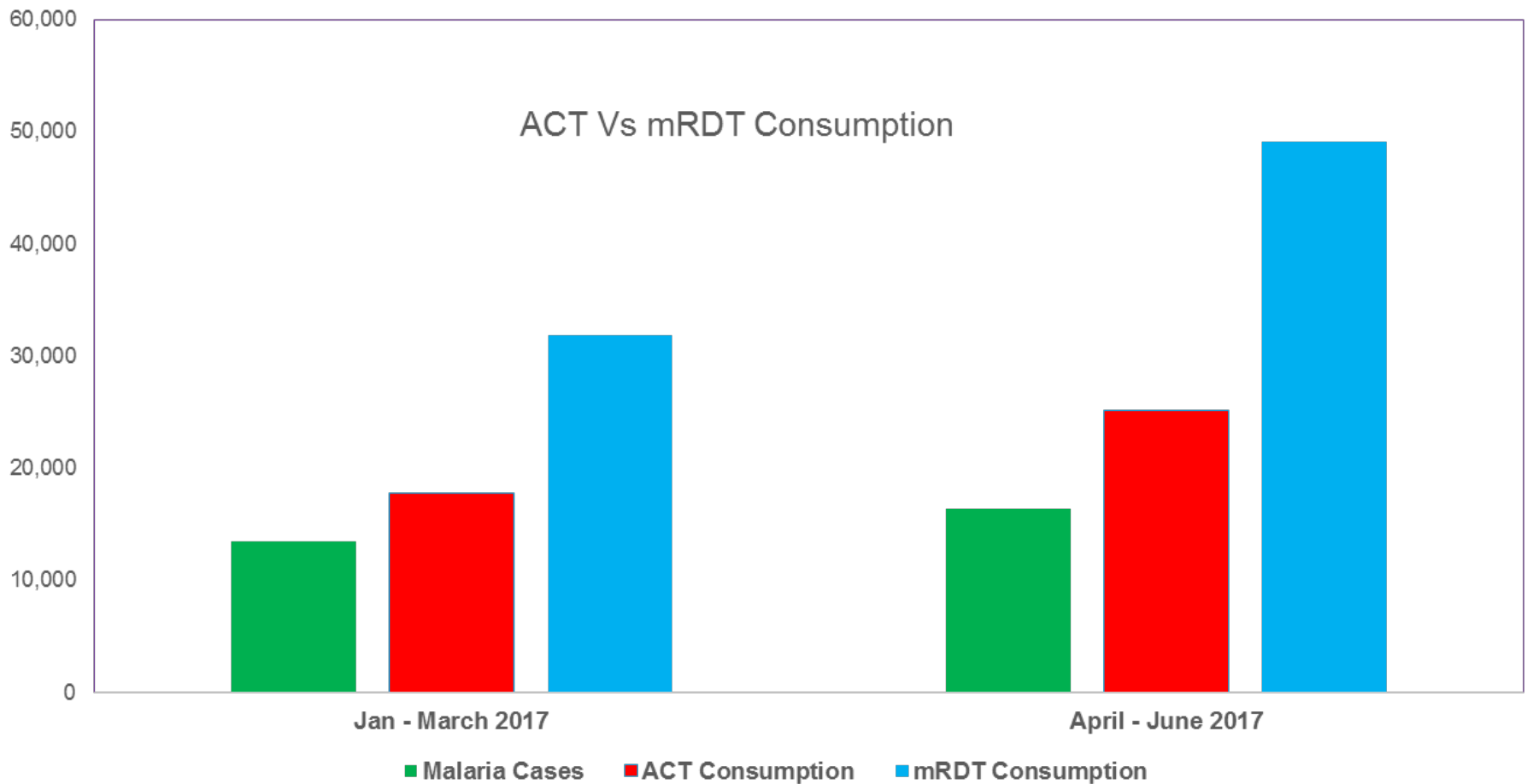
ACT Consumption Vs mRDT



Results



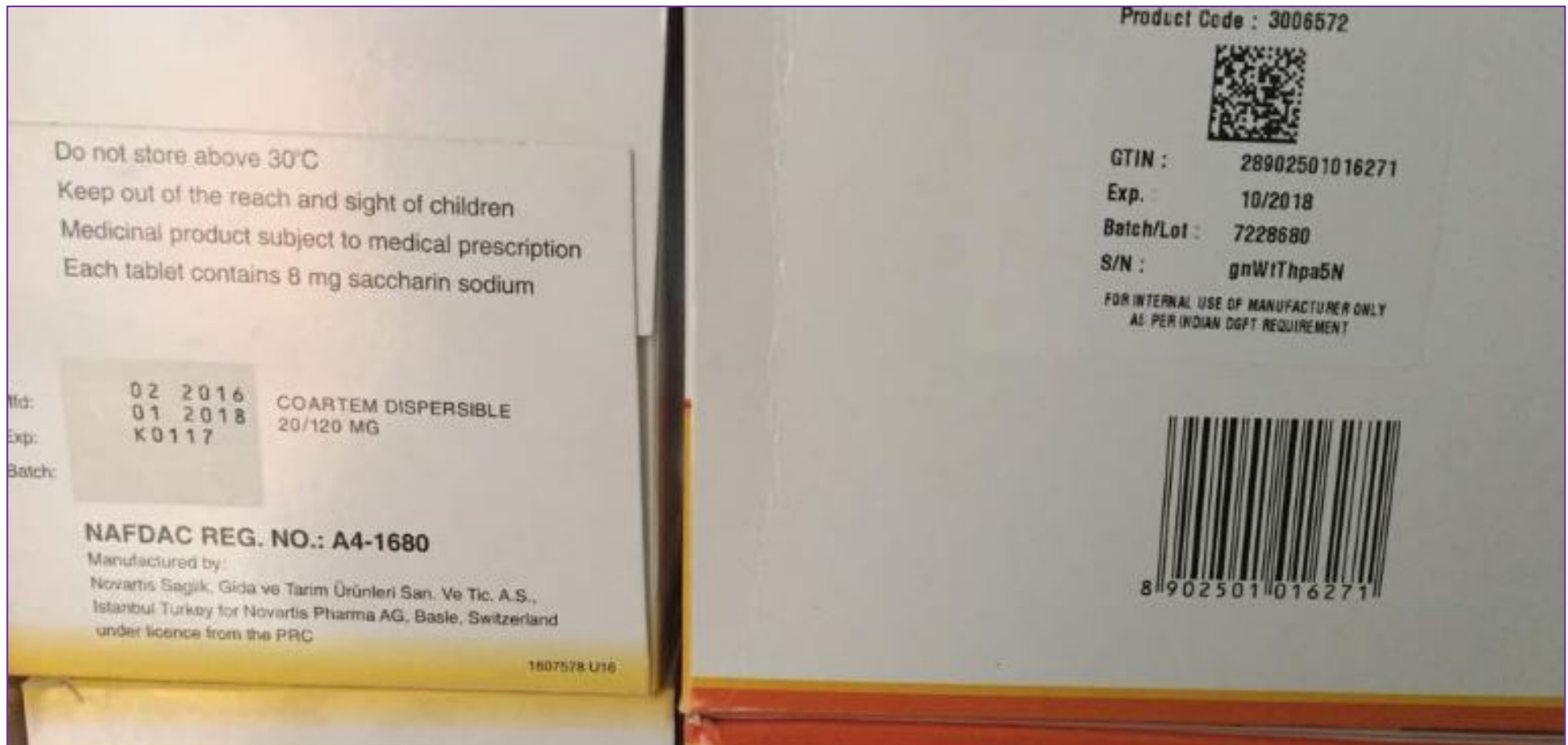
Results



- SS and mentorship to 30 reporting facilities in the municipality focus on compliance to the national malaria treatment guideline and data quality

Results

Differences Expiry dates affecting dispensing trends



Results

- Dispensing of Multiple paediatric formulations for Adults due to Shelf Life

F R E Q U E N T L Y U S E D D R U G S			
DATE:	PREScription No.	TYPE OF SUBSCRIBER	
		Acetylsalicylic Acid (ASPIRIN) tabs 100mg	
		Diclofenac tabs 50 mg	
		Paracetamol tabs 500 mg	
		Paracetamol Syrup 120mg/5mls 100mls	
		Lignocain 50ml Inj 2%	
		Chlorpheniramine tabs 4mg	
		Aspirin 100mg Inj 1mg/ml	
		Amoxicillin Caps 250mg	
		Co-trimoxazole tabs 400mg/80mg	
		Doxycycline tabs 100mg	
		Synergistic tabs 200mg Amoxycillin	
		Metronidazole tabs 200mg	
		Phenoxymethyl Penicillin tabs 250mg	
		Ciprofloxacin tabs 500mg	
		Erythromycin Granules 125mg/5ml	
		Amoxicillin Granules 125mg/5ml/100mls	
		Co-trimoxazole Suspension 200/40mg/5ml 100mls	
		Benzathine Penicillin Fortified Pdr F Inj 2.4 MU	
		Benzyl Penicillin Pdr F Inj 6 MU	
		Ceftriaxone Powder Inj 250 mg	
		Chloramphenicol Pdr F Inj 1 g	
		Procaine Penicillin Fortified Pdr F Inj 4 mu	
		Chloramphenicol Caps 250mg	
		Cloxacillin Caps 250mg	
		1G Ceftriaxone Pdr F Inj 1g	
		Spectinomycin Inj	
		Albendazole tabs 200mg	
		Mebendazole tabs 100mg	
		Clostrazole Cream/Ointment 1% 20mg	
		Benzoic Acid Compound (WHITEFIELD) Ointment	
		Arimether/Lumefantrine 20/120 mg (Mero - 1x6)	
		Arimether/Lumefantrine 20/120 mg (Blue - 2x6)	
		Arimether/Lumefantrine 20/120 mg (Piper - 4x6)	
		Arimether/Lumefantrine 20/120 mg (Nahasia-3x6)	
		Quinine 2ml Inj 300mg/ml	
		Sulphadoxine + Pyrimethamine 500mg/25mg	
		Quinine Sulphate 300mg	
		Artemisinin Inj 80mg	
		Artimochinine tabs 100 mg	
		Epi-adrine tabs 30 mg	
		Salbutamol	
		Chlorpromazine tabs 100 mg	
		Diazepam 2ml Inj 5 mg/ml	
		Phenobarbital tabs 30mg	
		Phenylephrine tabs 100mg	
		Ferrous Sulphate + Folic Acid tabs 200+0.25 mg	
		Folic Acid tabs 5 mg	
		Zinc Sulphate	
		Magnesium Trisilicate BPC Compound tabs	
		Oral Hydration salts (ORS) for 1 litre powder	
		Chloramphenicol Eye Ointment 1% 3.5mg	
		Oxytetracycline Eye Ointment 5gm	
		Hyoscine-N Butylbromide tabs 10mg	
		Ergometrine-methylnaloxonium CO-PACK	
		Oxytocin 1ml Inj 5iu/ml	
		Magnesium Sulphate Inj	
		Misoprostol tablets	
		Levonorgestrel 0.15mg + Ethynodiol 0.02 mg	
		+ Ferrous Fumarate 75 mg (MICROSYNCHON TABLETS)	

ERY	TEKELE	4	9		20
MA	GUMA	10	18		
MARY	NGELI	1	5	20	
SAB	SAMWAD	7	9	5	
NABU	KIHAYA	3	9	10	
SITA	OMARY	52	18	30	
AM	ABANLIA	2/2	5		
IA	ISSA	22	18		
erat	Richhiwa	4	9		
RIFA	SAIDI	3	5		
RGE	JONAS	22	18		
N	VICENT	4	9	10	
ASD	NWILI	10	5		20



Conclusions and Recommendations

- Poor data quality, underreporting in DHIS2 and lack of data ownership
- Dispensing of Multiple blisters due to shortage/short expiry of Paediatric formulations
- Calculated Vs Actual Consumption? Need to review tools
-
- Need for linking eLMIS consumption data and DHIS2 with auto check features



Acknowledgement

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- LMU





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