



**GLOBAL
HEALTH**
SUPPLY CHAIN SUMMIT



Ethiopia's low cost, high impact quick-win intervention to improve stock availability

Fekadu Abebe

USAID Global Health Supply Chain Program

Procurement and Supply Management

Health Supply Chain Operations Director



USAID
FROM THE AMERICAN PEOPLE



PEPFAR
U.S. President's Emergency Plan for AIDS Relief



USAID
FROM THE AMERICAN PEOPLE



U.S. President's Malaria Initiative

2018 Global Health Supply Chain Summit
Lusaka, Zambia



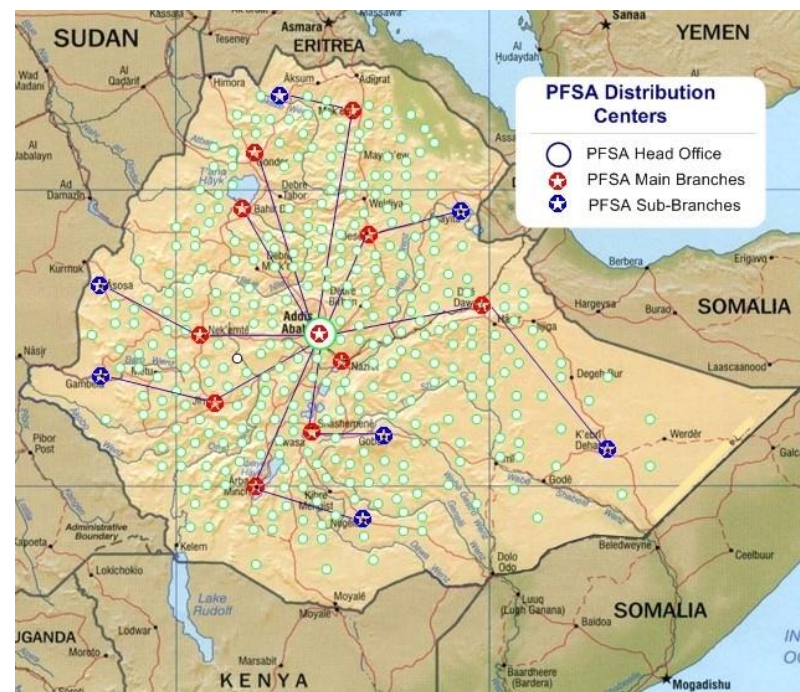
Introduction

- Introduction
- Objectives
- The Quick-Win Approach
- Analysis and Results
- Recommendations



Introduction

- Significant progress has been made to improve the availability of essential medicines.
- Federal Ministry of Health (FMOH) integrated the management of essential medicine and established the Pharmaceuticals Fund and Supply Agency (PFSA).
- GHSC-PSM works with FMOH and PFSA on multiple initiatives — including “**Quick-Win**” — to ensure continuous availability of essential medicine in Ethiopia.





Introduction

- Challenges remain, including an inadequate supply of quality and affordable essential pharmaceuticals.
 - Poor storage conditions and inventory management have resulted in a high rate of wastage and stockouts (24%)*
- FMOH, PFSA and partners launched the “**Quick-Win**” initiative in May 2018 to support and improve the availability of pharmaceuticals at 11 public hospitals in Addis Ababa.

* FMOH Ethiopia, Special Bulletin, 20th Annual meeting 2018, “Quick Win Initiative, Improving the availability of pharmaceutical in public Hospitals of Addis Ababa, Ethiopia”



Introduction

- The selected hospitals serve large populations and manage a high volume of interactions.
- The lessons learned from this initiative will be shared with all regional PFSA hubs to improve availability of pharmaceuticals at health facilities.



Objectives of Quick-Win Initiative

1. Facilitate stock transfer and ensure availability
2. Support and increase data visibility and use at all levels of the supply chain
3. Enhance communications, responsiveness, and ownership among different stakeholders, identify the root causes of stockouts, and implement interventions
4. Recognize performance appraisal and enhance transparency of supply schemes



The Quick-Win Initiative, Definition

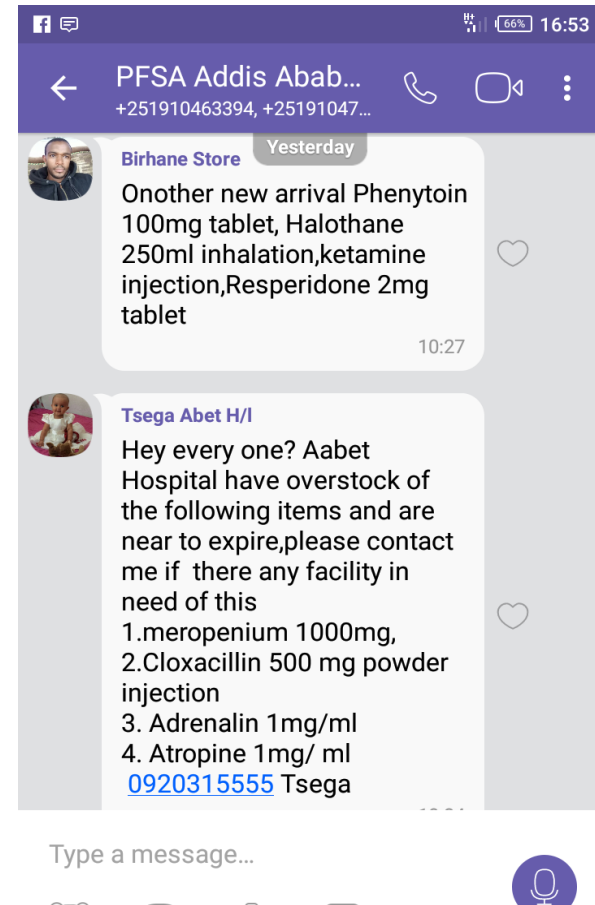
- Designed to improve the availability of pharmaceuticals and services by identifying and preventing risks in supply
- Led by a taskforce from PFSA, FMOH Addis Ababa Health Bureau and development partners
- Ideas for improvements are sourced from the existing workforce and can typically be realized in 90 days or less
- Automated tool used for bimonthly analysis and reporting from hospitals



The Quick-Win Approach

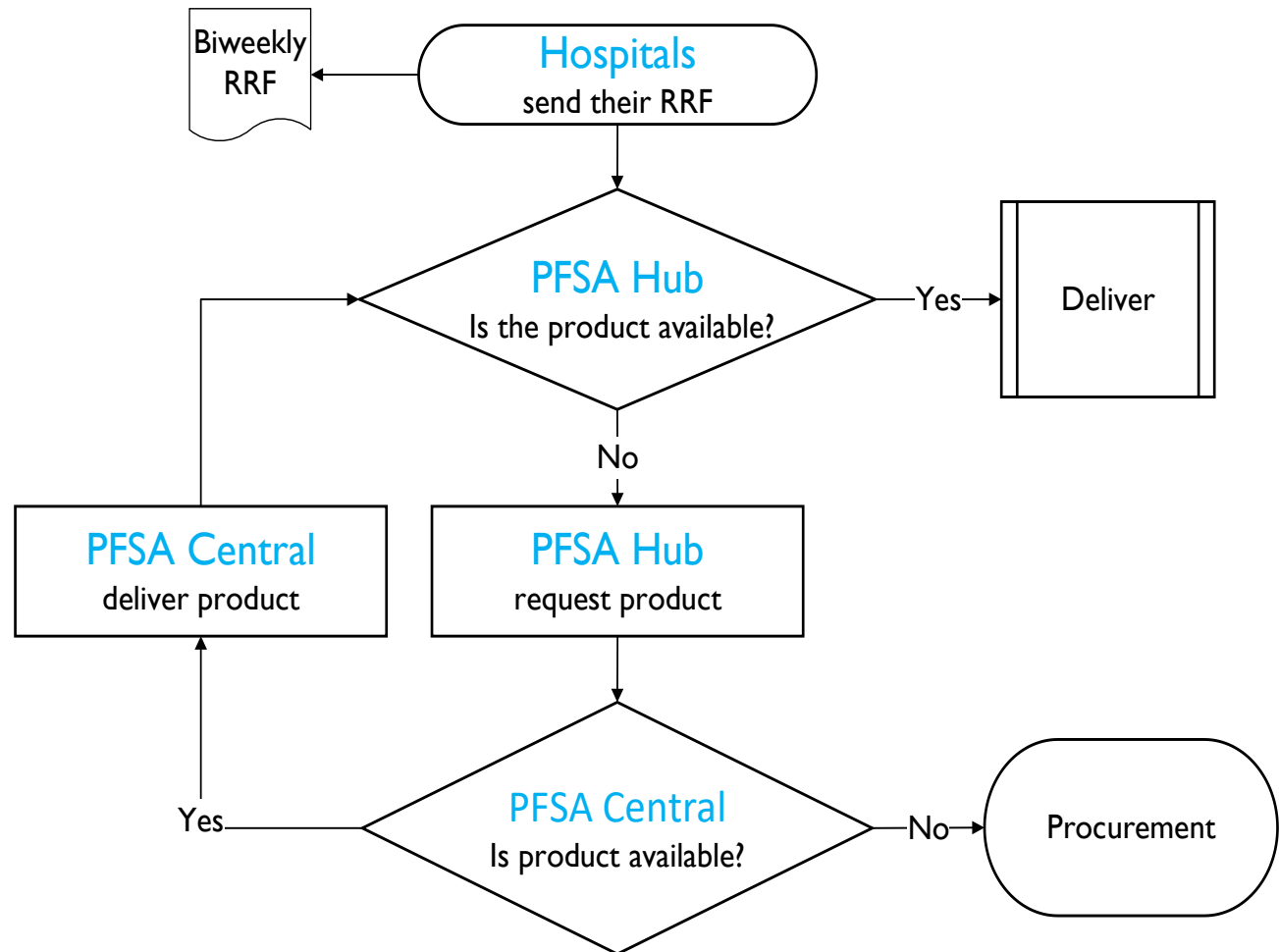
Key steps include

- “Quick- Win” taskforce meet every two weeks to review reports and fix challenges
- Established Viber communication platform and email group
- Implemented the process (see flowchart next slide)
- Evaluate and address challenges every two weeks





Quick-Win Approach, Process Flow



Quick-Win Approach, Process

Pharmaceuticals Availability Status Bi-Weekly Reporting Format for Hospitals								
Hospital Name: St.paul's hospital MMC						Reported By :Gutema Misgana Date: Oct,17, 2018 Tele: 0912904904 Email: Gutimis@yahoo.com		
SN	Base Code	Generic Name of Pharmaceuticals (PFAS) (with Full Description)	UNIT	Managed at Hospital	VEN Class (at Hospital)	Availability of Stock at Hospital (Yes, No)	Amount of Quantity Requested by Hospital	Availability @ PFSA hub (Yes, No)
Regular Medicines								
1	Azol-11	Acetazolamide - 250mg – Tablet	10x10	YES	E	YES		
2	Sali-14	Acetylsalicylic Acid - 300mg - Tablet (Micro fined)	10x10	YES	E	YES		
3	Sali-11	Acetylsalicylic Acid - 81mg - Tablet(Enteric Coated)	20x10	YES	E	NO	200	NO
4	Acyc-10	Acyclovir - 200mg – Capsule	10x10	YES	E	YES		
5	Acyc-20	Acyclovir - 40mg/ml - Oral Suspension	125ml	YES	E	YES		
6	Acyc-50	Acyclovir - 5% - Topical Cream	10gm	YES	E	NO	100	YES
7	Acyc-32	Acyclovir - 500mg - Powder for injection	Each	YES	E	YES		
8	Adre-30	Adrenaline (Epinephrine) - 0.1% in 1ml ampoule –Injection	Each	YES	V	YES		
9	Albe-20	Albendazole - 100mg/5ml - Oral Suspension	20ml	YES	E	LS	100	
10	Allo-10	Allopurinol- 100mg – Tablet	10x5	YES	E	YES		
11	Alpr-11	Alprazolam - 0.5mg – Tablet*	10x3	NO				
12	Amin-30	Aminophylline - 250mg/10ml in 10ml Ampoule -Injection	5	YES	V	YES		
13	Aml-11	Amlodipine - 5mg – Tablet	10x10	YES	E	NO	1000	
14	Amox-10	Amoxicillin - 125mg - Tablet (Dispersible)	10x10	YES	N	YES		
15	Amox-20	Amoxicillin - 125mg/5ml - Oral Suspension	100ml	YES	E	YES		

Stock Out Rate



Quick-Win Approach, Process

S.NO	SUMMARY of the REPORT from PFSA DRF List	Stock Out Rate for Availability		
		#of stock-out items	Total No of items managed	% of Stock out items
1	% STOCK OUT FOR VITAL Regular Medicines	6	134	4.5%
2	% STOCK OUT FOR ESSENTIAL Regular Medicines	21	276	7.6%
3	% STOCK OUT FOR NON ESSENTIAL Regular Medicines	0	11	0.0%
<u>% STOCK OUT FOR ALL Regular Medicines</u>		27	421	6.4%
4	% STOCK OUT FOR VITAL Chemical and Laboratory Reagents	2	107	1.9%
5	% STOCK OUT FOR ESSENTIAL Chemical and Laboratory Reagents	0	38	0.0%
6	% STOCK OUT FOR NON ESSENTIAL Chemical and Laboratory Reagents	0	1	0.0%
<u>% STOCK OUT FOR ALL Regular Medicines</u>		2	146	1.4%
7	% STOCK OUT FOR VITAL MEDICAL SUPPLIES	10	137	7.3%
8	% STOCK OUT FOR ESSENTIAL MEDICAL SUPPLIES	0	66	0.0%
9	% STOCK OUT FOR NON ESSENTIAL MEDICAL SUPPLIES	0	1	0.0%
<u>% STOCK OUT FOR ALL Regular Medicines</u>		10	204	4.9%
Grand Total		39	771	5.1%



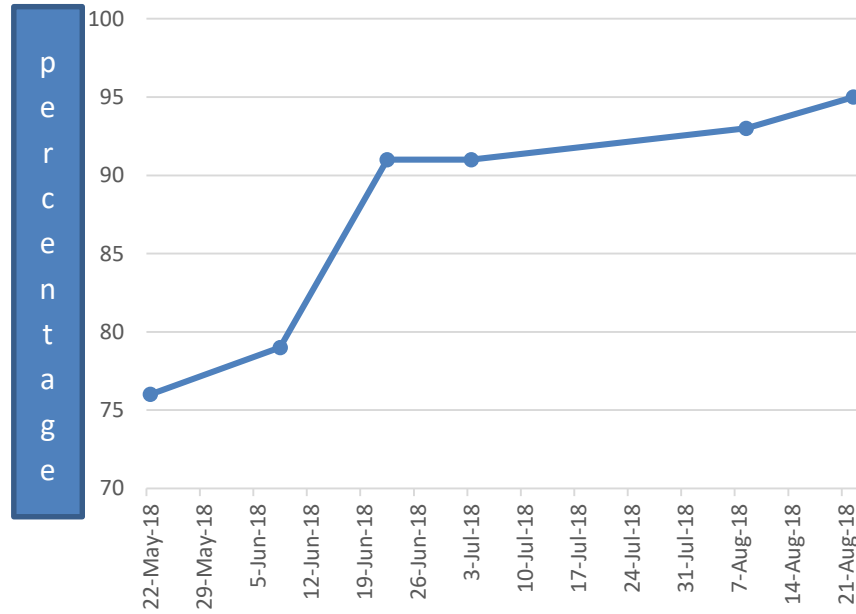
Analysis and Results

- Automated Excel reporting tool was used as a reporting and requisition template (RRF)
- Data for all commodities exported to SPPS and analyzed
- Key findings include
 - Average stockout reduction from 24% to 6%
 - Stockouts in some health facilities reduced from 24% to 1.9%
 - Wastage avoided on \$50,000 USD of products at risk of expiry by facilitating transfer from overstocked hospitals to understocked and stocked out facilities

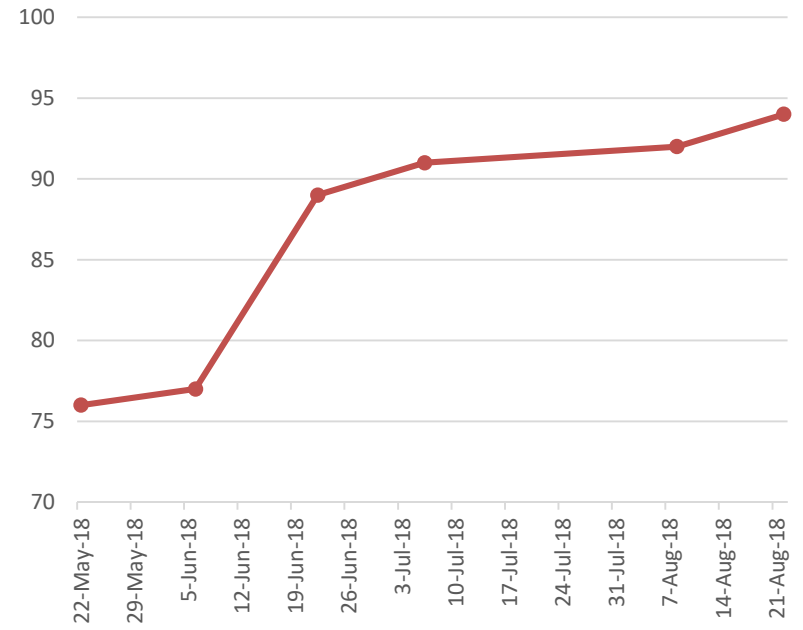


Result, Improved Availability

Percentage availability of vital commodities



Percentage availability of all commodities





Recommendations

- Improve culture of data sharing using technology solutions among hospitals and other supply chain actors.
- Expand on the experiences and lessons learned from the “Quick-Win” initiative with all the remaining hubs.
- Provide support to enable hospitals and other health facilities to do their own inventory analysis and use data for decision making.



Mr. Fekadu Abebe

USAID Global Health Supply Chain-Procurement and Supply Management

fabebe@ghsc-psm.org

Tel: +251 (0)929939798

The USAID Global Health Supply Chain Program-Procurement and Supply Management (GHSC-PSM) project is funded under USAID Contract No. AID-OAA-I-15-0004. GHSC-PSM connects technical solutions and proven commercial processes to promote efficient and cost-effective health supply chains worldwide. Our goal is to ensure uninterrupted supplies of health commodities to save lives and create a healthier future for all. The project purchases and delivers health commodities, offers comprehensive technical assistance to strengthen national supply chain systems, and provides global supply chain leadership. For more information, visit ghsupplychain.org.

The views expressed in this presentation do not necessarily reflect the views of USAID or the U.S. government.



Thanks to our generous sponsors



2018 Global Health Supply Chain Summit
Lusaka, Zambia