



**Medicines Management Supervisors being trained in basic computer applications to improve electronic collection and submission**

### National Drug Authority

UHSC assists NDA in improving wholesalers' performance and implement the new guidelines on good distribution practices. Our support includes strengthening the inspection tool, migrating to electronic systems to improve data quality and facilitate reporting, and training NDA inspectors. We support NDA, MOH, district managers, and implementing partners to carry out good pharmacy practices (GPP) certification in the public sector, so that all facilities can meet the GPP standards currently required in the private sector. We also assist NDA with conducting the Sawa Sawa campaign (Kiswahili for "everything is okay") to increase public awareness of GPP certification of public sector health facility pharmacies.

### Central warehouses

The program works with NMS and JMS to increase efficiency and effectiveness in procurement, storage, order handling, and distribution. Areas of support include process review, quality assurance practices, computerization, costing studies, electronic ordering, unified coding, and to-the-door distribution. Together with NMS we are piloting the shift from a push to a pull-based supply system and striving to increase adherence to the national health referral system.

## Support to MoH:

### Pharmacy Division

UHSC participates in regular meetings where the Pharmacy Division, MoH technical programs, USAID, US Centers for Disease Control and Prevention, and key pharmaceutical sector partners develop strategies, take coordinated actions to address issues, and review progress on activities.

We are also helping the Pharmacy Division's monitoring and evaluation unit align their framework with the PIP and take ownership of PIP data and its use. We

work closely with Pharmacy Division staff to create documentation systems that will ensure ongoing information sharing within the pharmaceutical sector, including a Pharmacy Division website.

UHSC supports the Quantification Procurement Planning Unit (QPPU) work with the MOH technical programs to plan, forecast, and quantify national EMHS needs and produce bimonthly stock status reports. The program provides additional staff and other resources to analyze data from facility-level sources such as RxSolution, the web-based antiretroviral ordering and reporting system, and SPARS to increase their forecasting and supply planning accuracy.

### AIDS Control Program

We support the web-based antiretroviral ordering and reporting system along with building capacity in the AIDS Control Program staff to use the resulting data.

### National Tuberculosis and Leprosy Program

In health facilities, the program supports integration of tuberculosis commodities into the mainstream EMHS management system, as well as building capacity to manage tuberculosis commodities through a TB supervision and performance strategy.

### Central Public Health Laboratory (CPHL)

UHSC is strengthening management skills at health facility laboratories by piloting Lab SPARS with CPHL and implementing partners. Lab SPARS data is also being integrated into the PIP. Support includes training CPHL staff in information systems management and data utilization.

### National Malaria Control Program (NMCP)

We collaborate with the national malaria program to monitor stock status, track the supply pipeline, and report on malaria commodities for JMS's faith-based PNPf facility customers. UHSC supports NMCP to



**A health worker is mentored in good stores management at Katoogo Health Center III in Mukono District**

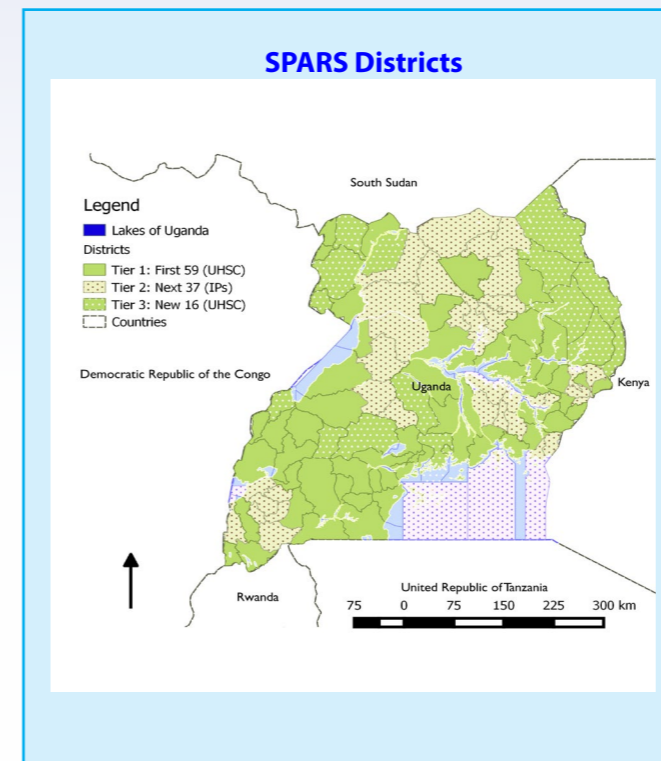
conduct the end user verification survey that assesses malaria management at facility level.

### Reproductive and Child Health Division

In collaboration with the QPPU, UHSC supports the MoH's Child Health Division to quantify and monitor national supply of RMNCH commodities; for example, RMNCH life-saving commodities are being incorporated into the QPPU's stock status reporting system. We are also improving the availability of RMNCH commodities for village health teams and increasing the teams' medicines management skills. To increase the use of RMNCH commodities, we are looking for innovative supply channels.

## Where we work:

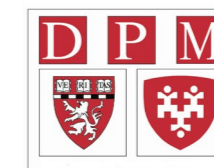
UHSC ensures that all 112 districts in the country receive a comprehensive package of support activities. We implement directly in 75 districts, while working through implementing partners in the remaining 37 districts.



# USAID/Uganda Health Supply Chain Briefer



**A client receives counseling on her medications during dispensing at Nyendo Health Center II in Masaka District**



For further information, please contact us

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A health worker is mentored in good dispensing practices at Kitovu Hospital, Masaka District

## Background:

The US Agency for International Development (USAID) grant for the Uganda Health Supply Chain (UHSC) program started in August 2014 and runs through August 2019. It is led by Management Sciences for Health (MSH) with its partners: Coalition for Health Promotion and Social Development; Harvard Pilgrim Health Care Institute; Euro Health Group; Imperial Health Sciences; and Makerere University College of Health Sciences.

## Mission:

Our mission is to contribute to the Ministry of Health's (MOH) medicines policy objective of improving the health status of the Ugandan population by increasing the availability, accessibility, affordability, and appropriate use of essential medicines and health supplies (EMHS), including reproductive, maternal, neonatal, and child health (RMNCH) commodities.

## Program result areas:

UHSC focuses on three result areas:

- National policies and strategies that support cost-effective, equitable, and transparent use of available EMHS resources.
- Strengthening country capacity to manage and use EMHS effectively.
- Increasing availability and access to EMHS for priority populations.

## Program Technical Approach:



Achieving these results depends on close collaboration among every pharmaceutical sector stakeholder, including the MOH technical programs, National Medical Stores (NMS), Joint Medical Store (JMS), National Drug Authority (NDA), private sector providers, US government implementing partners, United Nations organizations, and other development partners.

## Program activities:

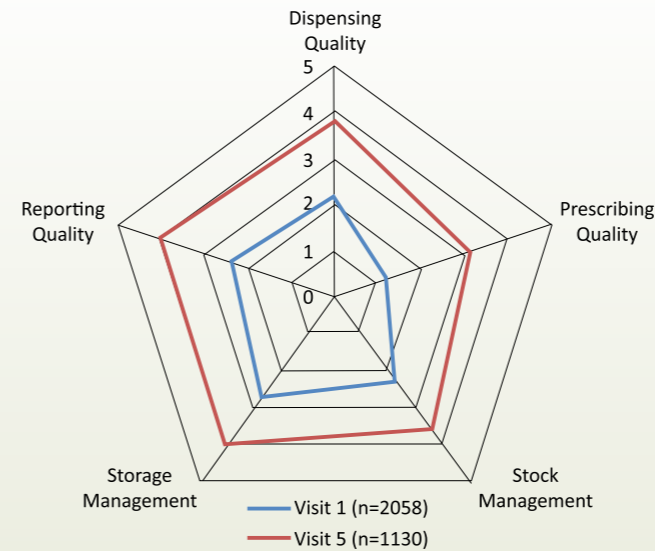
### Supervision, performance assessment, and recognition strategy (SPARS)

Based on the USAID/Securing Ugandans' Right to Essential Medicines program's success, UHSC program continues to roll out SPARS country wide and develop a complementary peer supervision model in collaboration with Makerere University and Harvard Pilgrim Health Care Institute. The peer support mechanism empowers regional pharmacists to monitor and support SPARS to assure its effectiveness.



A client receives medication in privacy at Mukono Health Center IV in Mukono District

UHSC is also piloting the placement of a full-time district-employed pharmacist and measuring the pharmacist's ability to coordinate medicines management activities and boost the impact of SPARS visits.



SPARS spider graph shows improvements in medicines management scores from visit one to visit five

### Pharmaceutical financing

The program supports MoH and NMS to advance resource equity by revising facility allocations (Vote 116), reviewing the EMHS kit (push) distribution system, optimizing health referral system, and building financial management capacity of facility staff. For this, we are using our experience from a pilot implementation to roll out pharmaceutical financial management practices to all the health center IVs and hospitals in the country, as well as introduce the approach to private not-for-profit (PNFP) facilities. UHSC also supports the ministry to set up systems to track finances and commodities and investigate the feasibility of setting up prepayment schemes.

### Private not-for-profit facilities

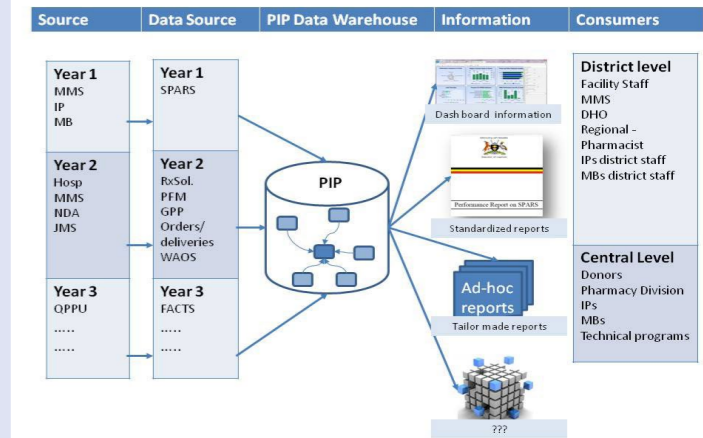
UHSC supports the four medical bureaus to implement SPARS in PNFP facilities. We are conducting a comprehensive costing study to examine the current strategies that PNFP facilities use to mobilize resources and will include options for increasing affordability of EMHS. We also build capacity of PNFP facilities pharmaceutical financial management and data usage, and implementation of RxSolution at higher-level facilities.

### Implementing partners

In close collaboration with the Pharmacy Division, UHSC coordinates with district health offices and implementing partners to ensure that a basic package of EMHS interventions is uniformly implemented within districts. The program assesses SPARS rollout and the capacity to manage logistics in all 112 districts, particularly in the 37 districts that are supported by other implementing partners.

### Pharmaceutical information portal (PIP)

PIP is being expanded to include more data such as good pharmacy practices (GPP) status and information from pharmaceutical financial management and central warehouse management systems. PIP triangulates data from multiple sources to give decision makers a one-stop shop for EMHS supply chain and management-related information.



Pharmaceutical information portal development in years 1-3 indicating data sources, products, and users

### Build capacity to improve medicines use

UHSC identifies best approaches to changing the behaviors that result in better use of limited resources and improved patient outcomes. The program is building capacity of health teams to understand appropriate medicines use, identify underlying causes of problems, and implement evidence-based interventions.

### Improve diagnosis and treatment for five priority conditions

With the Uganda National Appropriate Medicines Use Committee (UNAMU) and the Harvard Pilgrim Health Care Institute, we are investigating challenges to diagnosing and treating five priority conditions correctly in public and PNFP facilities, including malaria and diarrhea, to help them identify appropriate intervention strategies.

### Practical guidelines for dispensing

The program is developing and disseminating practical dispensing guidelines for the different levels of health facilities. We are working with medicines management supervisors to assure the guides are followed in the facilities.

### Medicines and therapeutic committees

In collaboration with hospitals' medicines and therapeutic committees, we aim to strengthen appropriate use of EMHS. We build the committees' ability to use data from SPARS, PIP, pharmaceutical financial management systems, and RxSolution to identify problems and devise ways to improve medicines use in their facilities.