

## Rich Owens Visits Tanzania

### *Inside this Issue*

- ☞ Rich Owens Jr. visits Tanzania
- ☞ After ARVs SCMS is now onto laboratories
- ☞ PFSCM receives excellence awards
- ☞ Quality Assurance : Innovative program launches in Tanzania



*Rich Owens proposes a toast to all the staff for their continued commendable work in Tanzania*

**G**lobal collaboration is a component of SCMS's mission and focuses on ensuring that skills and knowledge are shared among all key players in the HIV/AIDS field. In August, a delegation of staff from SCMS's field offices worldwide visited Tanzania to attend the USG Supply Chain Advisors Workshop. During this workshop, strategic issues were discussed with activity managers from the countries along with key staff from USAID headquarters and the Office of the Global AIDS coordinator as well as partner organizations.

SCMS Project Director Richard C. Owens Jr. welcomed the

opportunity to accompany this delegation to Tanzania by not only attending the meeting, but observing first-hand the developments that SCMS has been instrumental in accomplishing during the more than four years in Tanzania.

Owens toured the state-of-the-art prefabricated warehouse at Medical Stores Department (MSD) in Mwanza. He also held meetings with key national stakeholders with whom we work closely.

Through individual chats with staff, Owens praised the groundbreaking support that SCMS is providing to improve

the treatment of people living with HIV/AIDS in Tanzania. Amongst other crucial values that we were reminded during his discussion with staff was the culture of teamwork and workplace family that has grown and flourished over the years at SCMS. According to Owens, "At SCMS, we take care of each other".

Over the years, SCMS has achieved a number of milestones. These accomplishments are not only due to the collaboration with national and international stakeholders, but also due to the opportunity for growth that has been instilled in all staff at SCMS.

# Computer equipment secured to support procurement unit at MOH



*Dr. Deo Mtasiwa, the Chief Medical Officer (CMO), thanks SCMS with his team for the continuous support that the project has provided to the MOHSW during the ceremony.*

operations.

Procurement unit staff productivity cannot be overlooked because it is critical to meeting the needs of people living with and affected by HIV/AIDS. The productivity at the PMU was hindered by antiquated equipment which impacted the staff's ability to draft, develop and adopt major policies for diseases including HIV/AIDS, and make critical decisions including those related to funding and establishing funding sources.

During the official handover ceremony for the equipment to MOHSW, Ssanyu Nyinondi, SCMS Deputy Country Director for Public Health Procurement and Global Collaboration, stressed the critical role that the PMU plays in ensuring effective delivery of health services in Tanzania and the importance of SCMS's continued commitment to strengthening PMU operations.

**O**rganizations need sufficient staffing, supportive work environment and equally important, a modernized computing system in order to provide reliable, quality services. Through technical support provided to the procurement

management unit (PMU) at the Ministry of Health and Social Welfare (MOHSW), SCMS identified lacking computer equipment as a key operational barrier to efficient PMU operations and procured essential workstation equipment including laptops and printers to support the unit's routine

## Vendors assessed for GMP compliance

**T**o improve and facilitate local procurement of laboratory supplies, our field office in South Africa visited two potential local suppliers and conducted an assessment on their compliance to good manufacturing practices (GMP). This was critical in ensuring that SCMS procured

solely from vendors who would not jeopardize the quality standards that have been set by SCMS. Recommendations have been brought forward to further improve their procedures and it is expected that in the near future SCMS will start procuring certain commodities from local manufacturers. This

initiative is not only expected to improve overall lead time in processing orders and delivering commodities to care and treatment partners but also to improve capacity of local manufacturers which is in line with our mission of creating sustainability in the systems we create.

# After ARV drugs: SCMS mandate extends to laboratories

**I**t is an undeniable fact that the management of ARV drugs and HIV test kits has improved over the past few years in Tanzania. From the launch of the ARV and HIV test kits logistics system in 2004 to its redesign in 2008, health care workers at the facilities nationwide have experienced greater ease in placing orders and capturing their daily consumptions and usages.

Since procedures for collecting logistics data have been in place, the focus of key players in HIV/AIDS has shifted from availability of logistics data to ensuring commodities are delivered at the right quantities to the facilities ready for consumption on time. This shift has been accompanied by an increased rate of scheduled ordering compared to the ad hoc approach of the past. Due to SCMS's innovation,

the Supply Chain Monitoring Advisors (SCMAs) are now on the frontlines to ensure that all system parameters are maintained.

Laboratories also play a very crucial role in the treatment of patients living with HIV/AIDS. However until the MOHSW granted SCMS the mandate to design a logistics system for laboratory supplies, facilities, partners and all stakeholders supporting laboratories were frustrated that commodities were out of stock and a system was not in place to track the usage.

To lay the groundwork for the system design, SCMS conducted an assessment of approximately 46 laboratories countrywide. The assessment was reviewed at the system design workshop which was held this past June and attended by representatives from MOHSW and care and

treatment partners including EGPAF, CDC and USAID.

Key components of the design include:

- \* Two pipelines to better accommodate commodities with both long and short shelf life.
- \* Tools to be used in recording usages and placing orders and
- \* An Inventory Control System (ICS) for laboratory supplies and reagents

The design groundwork has been successfully completed in the Morogoro region and currently technical advisors are finalizing the tools to be printed and piloted for the entire country.

## USG partners required to procure all laboratory supplies through SCMS

**I**n June, SCMS organized and facilitated a meeting on our current procurement processes for laboratory supplies with potential customers and representatives from partner organizations including EGPAF, Pharmaccess, CDC and Pathfinder. This meeting was held in response to a USG

directive requiring all partners to procure laboratory supplies through SCMS.

The importance of clearly specifying laboratory supply needs in exact detail was addressed as well as the proper use of SCMS's e-catalog, located on the Internet at <http://scms.pfscm.org/scms/ecatalog>, as a crucial tool to

place orders. In August, we conducted an orientation session for the partners on procurement intake tools for laboratory supplies which were developed by SCMS. All these initiatives are directed at reducing the lead time in processing orders and delivering commodities.

# PFSCM wins two awards for supply chain excellence

The Partnership for Supply Chain Management (PFSCM) won two prestigious awards - the supply chain innovation awards and best value chain solutions provider - for groundbreaking work to provide a safe and reliable



supply of HIV/AIDS commodities to countries most in need through the SCMS Project. PFSCM received the awards during the European Supply Chain and Logistics Summit held in Prague. PFSCM competed with well-known organization in the supply chain industry including Pitney Bowes, Pfizer UK and Procter & Gamble.

During the presentation ceremony the award organizers noted, "Just a few years ago many doubted that HIV/AIDS commodities could be reliably delivered in sufficient quantities to the world's poorest nations. Since 2005, PFSCM has been ensuring the reliable availability of essential products to programs in the developing world and



strengthening national supply chains to become sustainable mechanisms delivering these products to clients who need them." Everyone working on SCMS, including our staff and colleagues in the US government, can take pride in this recognition.

## SCMS's first ever procurement of home based care kits for partners

In 2010, the SCMS procured and distributed home based care kits (HBC) to more than 100 care and treatment sites managed by partners including Family Health International (FHI), Pathfinder and Africare.

Before 2009, all USG funded partners procured HBC kits individually. Due to the vital nature of this commodity, SCMS was asked by the United States Agency for International Aid (USAID) to take responsibility for pooled

procurement to ensure timely availability of the kits. SCMS is now documenting partner requirements and creating a supply plan to establish when each consignment will be delivered into the country.

# Staff Profile

**P**avel Mtango is a regional logistics coordinator at SCMS. He coordinates supply chain monitoring activities in five MSD zones and offers technical support to supply chain monitoring advisors (SCMAs) in Moshi, Tanga, Mtwara, Iringa and Mbeya MSD zones. His major task is to link SCMAs to MSD central and assist SCMAs on improving system performance.

According to Pavel, the one and a half years spent in the field has been a critical opportunity to develop his skills in various areas, especially through on-the-job training, and establish good working relationships with counterparts. He has contributed

to strengthening data visibility and product availability at facilities by helping health care workers understand the use of logistics tools and good commodity management practices.

Pavel is married to Dr. Lulu - a resident pediatrician - and is a father to two-year-old Enoch-Fariji. Apart from work, Pavel spends his free time at the beach with his family, and also enjoys listening to his son as he learns



*Pavel Mtango: Regional coordinator for Supply Chain Monitoring Team (SCMT)*

new words.

Reflecting on his job satisfaction, Pavel says, "I love the friendly and family hood environment that SCMS has created. The friendly environment at the work place, team spirit and charming faces of my co-workers are what keep me motivated".

## We bid farewell to Abdou Diallo; Country Director for SCMS since September 2007



*Haji Mbarouk presenting a gift to Abdou Diallo on behalf of SCMS*

**I**n an organized farewell party to bid farewell to Abdou Diallo, various stakeholders

that SCMS has worked with in the past few years under his leadership were invited to attend. In her farewell note, Emma Msuya from NACP expressed how great an opportunity it was for the program to work with him and commended Abdou for the

good leadership through which a number of milestones were achieved.

In his farewell speech, Abdou expressed his sincere gratitude of the opportunity to work in Tanzania and to him Tanzania is a place he can call home. He said, "The milestones I have achieved are thanks to the support that I have gotten from the MOHSW officials, USAID, PEPFAR implementing partners and the home office.

# An assessment of Zanzibar's ARV logistics system

**Z**anzibar, an island off the Tanzania mainland, operates their central medical stores (CMS) using an antiquated system compared to the mainland's MSD which operates a newly redesigned logistics system. The differences between these two systems have resulted in challenges for the management of HIV/AIDS commodities.

To address this issue, SCMS conducted an assessment of the current ARV and HIV test kits logistics system used in Zanzibar. This assessment was critical to determine how certain parameters are functioning in the current Zanzibar system, and to decide on how to reconcile both systems - whether a new system should be designed for Zanzibar or a customization of the current system should take place.



*During the assessment, SCMS conducted physical inventory and stressed on the importance of adhering to proper storage principles*

The assessment consisted of interviews with key stakeholders managing HIV/AIDS commodities. During this process, SCMS collected crucial data and conducted on-the-job training on proper record keeping

mechanisms in some facilities where these skills were found to be lacking. This assessment was widely received by the Health Care Workers (HCWs) and the Zanzibari's are looking forward to its outcome.

## Mentoring toolkit

**T**he mentoring toolkit developed by SCMS in collaboration with the MOSW is an important mechanism for both our staff and members of the Health Management Teams to ensure and facilitate the continuous supervision support

given to the facilities in management of HIV/AIDS commodities. It is targeted at creating a consistent set of solutions to be provided to the various problems facing health care workers in the facilities during supervision visits. Following the mentoring toolkit pilot in October

2009, SCMS collected recommendations on how the tool can be further improved. The printing of the improved version of the tool is currently underway; plans are in place to roll it out to the facilities early next year.

# Quality assurance in resource-limited settings: Innovative program launches in Tanzania

Patients needing medical attention in countries with weak drug regulatory infrastructure are at particular risk of receiving substandard or counterfeit medicines. At best, such drugs are ineffective, but at worst; they can cause serious illness and death. For example, in the fall of 2008, an allegedly counterfeit batch of paracetamol, a commonly prescribed pain medication, was suspected in the deaths of more than 30 children in Nigeria.

As a first line of defense against substandard medicines, SCMS is required to procure pharmaceuticals only from manufacturers approved by the the food and drug

authority (FDA)

or other

stringent

regulatory

authorities. The result of this process is that most medicines we procure come from Asia, Europe or North America, where quality standards are generally higher.

But the time required to procure from afar means that in urgent situations we sometimes have to go outside normal processes to meet the needs of patients.

For example, in June 2009, Tanzania experienced an impending stockout of paracetamol syrup, similar to the drug that caused alarm in Nigeria.

There wasn't time, however, to procure the medicine on the international market from a

reputable supplier and in keeping with importation requirements.

SCMS worked with the Ministry of Health and USAID to develop a Plan B. A local firm agreed to supply 10,000 units of the product under consignment, pending a quality assessment at the Laboratory of Pharmaceutical Analysis (LPA) at Muhimbili University of Health and Allied Sciences (MUHAS).

The goal was to ensure that the medicine contained the appropriate active pharmaceutical ingredient (API). SCMS reviewed the laboratory results and obtained a waiver from USAID

for Family Health International (FHI) to conduct a one-time procurement.

Quick thinking helped resolve an urgent situation, but the one-time waiver was a temporary fix. Potential stockouts occur fairly often in countries with limited resources and infrastructure, and having no medicine available for patients who need it is not a reasonable option. Public health programs are left with the uncomfortable choice of buying from local suppliers who may not meet international quality standards.

Our Quality Assurance team is working with the LPA to pilot a first-of-its kind program to

perform basic quality testing on pharmaceuticals. The first stage of the program involves a laboratory procedure known as high-performance thin layer chromatography (HPTLC). HPTLC assesses the APIs. As its name suggests, the procedure applies a test sample to a thin layer of material and, through capillary action over a short period of time, the active ingredients are separated for assessment and can be seen and compared to a control sample. As a baseline, this basic test indicates whether the medicine

contains the right ingredients in the right amounts, and whether the pill will dissolve properly when taken. [

To support country ownership of the program, our Quality Assurance team

identified a laboratory in Dar es Salaam to conduct the HPTLC tests, the LPA at the MUHAS. The laboratory has proved that it can meet international testing standards. In an assessment of its program, LPA's test results compared very favorably with those of CAMAG Laboratories, a world-class facility in Muttenz, Switzerland.

The HPTLC at a relatively low cost will provide a baseline of quality until further testing can be done. And that will mean all the difference to a patient who would otherwise go without a medicine they may desperately need.

*From SCMS – Supply Lines (Global SCMS's quarterly e-newsletter)*

**“The HPTLC at a relatively low cost will provide a baseline of quality... And that will mean all the difference to a patient who would otherwise go without a medicine they may desperately need”.**



# SCMS annual staff retreat - reviving the spirit of team work

May 2010 proved to be a memorable month for SCMS with new found friendships, learning experiences that will last a lifetime and most importantly, an opportunity to re-energize in order to maintain quality support to Tanzania. This year's annual retreat took us to the Blue Bay Resort in beautiful Zanzibar where the Indian Ocean is as blue and beautiful as the breeze is refreshing.

Team building activities were the highlight of the agenda,

the retreat also focused on administrative procedures and a reintroduction to the JSI corporate culture.. JSI encourages the exchange of information, technical expertise, and professional networking among all staff to strengthen our ability to respond creatively and effectively to the requirements of every project. These activities reinforce effective team setting principles: staff members must be self-aware but also take the behavioral styles of fellow staff members into consideration.

Each behavior style is as critical to our team success as the other.

The recap of the principles and procedures at the retreat was an effective mechanism to help us work more effectively and instill the value of ownership in the work that we do.

During the retreat, we also played football on the beach and danced under the stars to sensational music from Zanzibar's famous taarab to old audio clips of Whitney and Shania.



*So you think we don't have fun at SCMS; check this out!! Staff enjoying a tug-of-war*

## About SCMS

Since 2006, SCMS has supported Tanzania's antiretroviral treatment program by improving the existing supply chain and procuring a selected line of high quality antiretroviral (ARVs) and HIV test kits. Funded by the United States President's Emergency Plan for AIDS Relief (PEPFAR), SCMS brings

together 13 private sector, nongovernmental and faith-based organizations that are among the most trusted names in supply chain management and international public health and development. SCMS assists in efforts directed at reducing spread of HIV/AIDS by providing quality medicines for people living with and affected

by HIV/AIDS and providing technical support to the existing supply chains. The SCMS Project works in Botswana, Côte d'Ivoire, Ethiopia, Guyana, Haiti, Kenya, Mozambique, Namibia, Nigeria, Rwanda, South Africa, Tanzania, Uganda, Vietnam, Zambia, and Zimbabwe.

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