







## **People that Deliver Newsflash**

## In this issue:

- PtD 2017 highlights
- Call for feedback: Training impact for the Public Health Supply Chain
- In discussion at the GHSCS in Accra: how to build resilient supply chains
- PtD has a new Deputy Chair: Paul Lalvani
- TechNet highlights
- This week on LinkedIn
- The Fourth Global Forum on Human Resources for Health
- News from our partner organizations
- Upcoming events

## PtD 2017 highlights



Dear PtD colleagues,

Season's greetings! As the end of 2017 comes into sight, I would like to take a moment to reflect upon all

the progress and achievements we have made throughout the year. The path to sustainable workforce excellence in health supply chain management has been a winding journey of discovery. Together with our partners, we have tackled the twists and turns surrounding human resource professionalization with vigor and dedication and we have been pleased with the results.

The PtD 2017 road map started in Geneva in early January, establishing a new technical partnership with the Global Fund to Fight AIDS, Tuberculosis and Malaria, by implementing their strategic initiative on capacity building in Procurement and Supply Chain Management. The anticipated impact of this new program is increased procurement and supply chain management capacity in countries, and an increased pool of national and regional experts, including increased training opportunities on national and regional levels.

February brought PtD to Nigeria to support the Africa Resource Centre (ARC) in building a Centre of Excellence for Supply Chain Strengthening (COE) through the development of regional supply chain 'centres of excellence' in each of the ARC regions. The broad objectives of the COE are to build a long-term pipeline of supply chain talent and the professionalization of supply chain within the public and private sectors.

In early March PtD took a U-turn to Ethiopia, Rwanda and Jordan. In Ethiopia and Rwanda, we joined the Global Fund and other donors on a mission to build the Global Fund's new capacity building program. This included a visit to Makale University in Ethiopia to learn more about the Kühne Foundation's support to building a Bachelor's degree program in Supply Chain Management and the EAC Centre of Excellence at the University of Rwanda. PtD also visited Zipline, an innovative drone delivery system, to understand capacity requirements of future supply chains, and the African Network for Drugs and Diagnostics Innovation (ANDI), to learn more about their innovative technologies (mobile and cloud platforms) for tracking and tracing medicines.

In Jordan PtD joined UNICEF colleagues at the MENA regional immunization workshop, a four-day training workshop to strengthen the capacity of MOH, UNICEF, and WHO program staff in supply chain management and service delivery for improved coverage and equity. PtD lead the knowledge team on HR for immunization supply chains and shared best practices, methods and tools with participants.

At the end of March, PtD finally had the opportunity to make a stop and visit the National Medical Supplies Fund (NMSF) in Khartoum, Sudan. NMSF joined the PtD Board in 2013 and has been one of initiative's most adamant supporters. NMSF was the first organization to participate in PtD's country partnership program whereby PtD, with the help of experienced consultants, conducted a comprehensive study of NMSF's staff management and development practices. The consultants developed a competency framework for NMSF leadership and employees at state levels, updated job descriptions for 123 unique positions, developed a five-year training strategy and a costed and resourced annual training plan. Once in country, organizational design was added to the scope and a new organizational structure was developed, including a new performance management system.

During May, PtD traveled south to the shores of South Africa, with a visit to Cape Town for a meeting at the Africa Resource Centre (ARC). PtD was joined by the International Association of Public Health Logisticians (IAPHL), and the Global Fund and together the stakeholders produced a high-level action plan for the newly developed capacity building program.

In September, the PtD Board brought in new leadership and elected a new Chair, Dr. Lloyd Matowe from Pharmaceutical Systems Africa, who replaced outgoing Chair Kevin Etter from the UPS Foundation. The Board also elected a new Deputy Chair, Professor Paul Lalvani from the Empower School of Health. We look forward to working closely with them in 2018!

In September, PtD also embarked on its first ever scoping study in the central and eastern European region. The assessment took place in Ukraine and the objective was to identify the opportunities and challenges associated with building human resources capacity to develop and manage a new central procurement agency.

During the fall of 2017, PtD's path veered towards Portugal for the 15th Technet Conference. Please see more information on the panel sessions facilitated by PtD in the article below.

The final conference of the year, Global Health Supply Chain Summit, took place in November in Accra, Ghana. This year the focus was on the future of global health supply chain management through enhancing the role of the private sector, technology enablement, and workforce development and empowerment. PtD had the honor of facilitating a panel session on how to build resilience in the supply chain after the Ebola outbreak, with country examples from Guinea, Liberia and Sierra Leone. PtD also showcased its work during a lunch hour session, where participants learned more about the HR for SCM assessment, the PtD country partnership program, and joined in a live survey to answer questions such as "What is the most critical factor for optimizing the success of the supply chain workforce"?

In December, PtD found itself returning to NMSF Sudan to facilitate a joint planning meeting with NMSF's training partners to support the newly opened Abdulhameed Ibrahim Training Centre for supply chain management. Pictured below are the participants of this historic event, which included CIPS, Empower School of Health, Imperial Logistics Supply Chain Academy, i+ Solutions, Pamela Steele and Associates,

Pharmaceutical Systems Africa, and SAPICS.

Mozambique formed the final destination of PtD's 2017 journey where the challenges and efforts required to develop a new logistician cadre were explored.

Throughout 2017 PtD also worked many hours with colleagues from USAID and Chemonics to build a "Theory of Change in HR for supply chain management". Stay tuned for its roll-out in 2018.

As 2017 draws to a close, I want to thank you for your continued support and wish you all the best for 2018.

Sincerely,
Dominique Zwinkels
PtD Executive Manager

Pictured below: Participants at the NMSF Sudan planning meeting on December 3rd. These training providers are supporting the newly opened Abdulhameed Ibrahim Training Centre in Khartoum.



## Call for feedback: Training impact for the Public Health Supply Chain

As part of the People that Deliver's (PtD) mission to support capacity development in low to middle income countries, the PtD Board commissioned a study to improve the evaluation of training activities within public health supply chains, moving from a reliance on training process indicators (i.e. the number of individuals trained) towards evaluating the organizational impact of training activities (i.e. improvement in health service delivery). A set of high level indicators were developed which will be incorporated into PtD's approach to human resources capacity development in health supply chain management. This in turn will support the PtD Theory of Change which articulates optimization of work performance into increased supply chain performance.

A draft document; "Training Evaluation for the Public Health Supply Chain" has been developed, drawing on best practices in the supply chain, monitoring and evaluation and training sectors. The draft document can be viewed here: https://tinyurl.com/y8awoqob

As part of the development process, PtD is calling for feedback from all interested parties. We specifically ask you to comment on the following:

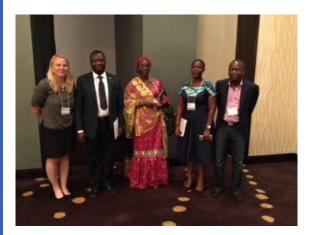
- Provide feedback on whether the indicators listed in section 7.4 can be applied across all public health supply chain models i.e. whether government, partially outsourced or fully outsourced/parastatal.
- 2. From the high level organizational indicators listed in section 7.4 provide feedback on which indicators should be used for training evaluation purposes.
- 3. Recommend specific countries which could form part of the evidence research process.

Please submit your comments to: info@peoplethatdeliver.org

We look forward to your valuable inputs!

## **Building resilient supply chains**

Building on lessons learned from the most recent West African Ebola crisis, PtD moderated a plenary session at the 10th Global Health Supply Chain Summit in Ghana to develop a framework for building resilient supply chain systems in Africa.



Pictured from left to right, Dominique Zwinkels, PtD Executive Manager, Mr. Tolbert Nyenswah, Deputy Minister of Health (Liberia), Dr. Nagnouma Sano, Chef Section Etablissements Pharmaceutiques Point Focal Securisation des produits de la Sante, Ministere Sante (Guinea), Ms. Jatu Abdulai, Senior Pharmacist at the MOH Directorate of Drugs and Medical Supplies (Sierra Leone) and Lloyd Matowe, PtD Chairperson and Director of Pharmaceutical Systems Africa (PSA).

In order to initiate discussion on how to build a resilient supply chain, the above pictured panel members were invited to present an overview of the challenges and lessons learned in their respective countries during the Ebola crisis.

West African countries had never experienced an Ebola outbreak and were poorly prepared for this unfamiliar and unexpected disease at every level, from early detection of the first cases to orchestrating an appropriate response. Under the weight of Ebola, health systems in Guinea, Liberia and Sierra Leone collapsed. By January 13, 2016, 11, 315 Ebola-related deaths had been confirmed in the region. What began as a health crisis snowballed into a humanitarian, social, economic and security crisis.

#### **Defining resilience**

A resilient supply chain is fundamental to delivering core products and services over long periods in times of stress. Resilience can relatively easily be built into a system to manage short-term local disasters. However, as society becomes more interconnected and complex, dependencies can lie unseen and untested, only to become apparent when a key link in the supply chain becomes broken and alternatives have not been identified. This is when supply chain resilience becomes critical.

Why build a resilient supply chain? At least 22 African countries have the ecological conditions and social behaviors that put them at risk of future

- Trained local responders, adequately staffed personnel at village health facilities, and a well-informed and engaged community are required.
- Local governments need to strengthen local leadership.
- Central government needs to reform the Supply Chain through the management of donations and policies and improvement of communication and accountability systems.

According to Dennis, R et al\*, resilience can be achieved by increasing awareness of external environments and internal capabilities and resources, developing diverse sources of capability and redundancy, embracing an integrated culture and sharing ideas, self-regulating in times of stress and adjusting quickly to changes in circumstances.

The authors suggest and outline the following nine action model which can be embed into a system to help build and maintain resilience:

1. Probe
I. Prope
2. Scan
3. Rehearse
4. Inform
5. Respond
6. Strategize
7. Plan
8. Review
9. Govern

#### Nine action points:

- 1. **Probe**: explore scenarios. Instead of reacting to an event, respond to a system.
- 2. **Scan**: watch emerging events as they unfold. Instead of relying on one set of eyes, use many.
- 3. **Rehearse**: trial possible disruptions. Instead of thinking about events, test out what happens in practice.
- 4. **Inform**: produce and communicate timely and accurate information. Instead of focusing on what the public 'needs to know', be clear about what the public 'does not need to know'. Open and timely information is critical for building public trust.
- 5. **Respond**: work with the community and act swiftly. Instead of being reactive, be proactive and apply the precautionary approach.
- 6. **Strategize**: develop and communicate a strategic response. Instead of reacting to the

outbreaks of Ebola and there is a relatively low level of awareness and preparedness for supply chain impacts and not much systematic effort to increasing resilience. Moreover, there is a need to disrupt chains of transmission while maintaining supply chains of core goods and services and creating new supply chains of vaccines, protection equipment, epidemiologists and medically trained staff. All three are supply chain issues. The challenge is to manage all three simultaneously.

#### Recommendations from the panel:

- An integrated drug and commodities listing needs to be aligned with an emergency preparedness and response agenda. This creates a flexible health supply chain management system with the capacity to provide essential support for the establishment of emergency supply chains during outbreaks.
- Pre-positioning of stock at every level is critical to ensure timely response.
- Continuous coordination amongst partners, private sector and government is necessary.
- An emergency tests the strength of an existing health care system, processes and the skills of personnel. A robust, efficient supply chain system which is ready to respond to emergencies is therefore needed in ordinary times.

event, react in accordance to the desired outcome.

- 7. **Plan**: prepare and implement a tentative operational plan then monitor and adjust. Instead of sticking to the plan, plan to be agile.
- 8. **Review**: actively review and assess progress. Instead of making assumptions, learn from our mistakes/successes and those of others.
- 9. **Govern**: design the structure to empower good strategy. Instead of reacting, be proactive and open.

This nine-step action model can be utilized to strengthen health care infrastructure by building a stronger cohort of trained health professionals, improving hospitals, setting up better monitoring systems and sharing latest technological and medical outcomes.

What are your thoughts on building a more resilient supply chain to combat emergency outbreaks?

Become a part of the conversation by sending your suggestions to <a href="mailto:info@peoplethatdeliver.org">info@peoplethatdeliver.org</a>

- \* Dennis, R, McGuiness, W & Boven, R (2015) Lessons From the West African Ebola Outbreak in Relation to New Zealand's Supply Chain Resilience accessed November 2017
- <a href="https://www.foodstuffs.co.nz/media/134687/20150501-supply-chain-resilience-report-final-low-res.pdf">https://www.foodstuffs.co.nz/media/134687/20150501-supply-chain-resilience-report-final-low-res.pdf</a>

## **Meet PtD's new Deputy Chair**

PtD is pleased to announce that Paul Lalvani has been appointed as its new Deputy Chair.

Paul has over 25 years of experience in capacity building, procurement and supply chain, access to medicines and technology transfer.

Paul has conducted assessments and supported capacity building in the dusty roads and last-mile clinics of Kabul, Port Moresby and Sana'a.

On the other end of the spectrum, he has advised board members, ministers of health in more than 30 countries, heads of states, foundations, UN agencies and other donors on strategy, vision, advocacy and impact.

Paul is the Director and Founder of Empower School of Health, New Delhi. He has an MBA from Northwestern University, Kellogg Graduate School of Management and an undergraduate degree in Pharmacy.



Paul's vision is to create Public Health and PSM Super Heroes through a continuous learning environment. The PtD Secretariat looks forward to working with Paul to further implement PtD's vision, mission, and strategic goals to promote sustainable workforce excellence in health supply chain management.

**TechNet highlights** 





The 15th TechNet Conference themed *Building the Next Generation of Immunization Supply Chains* was recently held in Cascais, Portugual.

The conference looked at ensuring vaccine availability with better products and use of accurate data, safeguarding vaccine potency with optimized cold chain systems, improving supply chain efficiency with system design and enablers of supply chain improvements and change. Almost 400 participants from over 40 countries, representing over 80 organizations were in attendance.

The conference was divided into plenary sessions and complementary side events including an innovations café, project gallery and resource library.

PtD Executive Manager, Dominique Zwinkels co-moderated two panels, the first one was entitled *Know the way, show the way: immunization supply chain leadership in practice,* which saw country representatives discuss what supply chain leadership means to them, their preferred strategies and interventions to build sustainable capacity. The panel also addressed identifying change leaders and the challenges they are facing with their current architecture of leadership support. The second panel was entitled *Built to last: design approaches and institutional governance for sustainable, resilient immunization supply chain systems.* This session examined how countries in different capacity contexts are pursuing a range of approaches to improve ISC governance and ensure improvements are implemented. The characteristics of sustainable national systems (ISC and across health) in different capacity (fragile, low-, middle-, high-capacity) and program design contexts (centralized, integrated, etc.) were also discussed.

The recorded proceedings, posters and photographs can be found here: <a href="https://www.technet-21.org/en/conference/2017">https://www.technet-21.org/en/conference/2017</a>

#### This week on LinkedIn

As part of its activities at the Global Health Supply Chain Summit in Accra, PtD held a side meeting which examined moving from advocacy to country-based change within the field of supply chain human resource management.

Close to 50 conference participants joined the meeting representing NGOs (33%), ministries of health (23%), funding and aid agencies (17%), private sector (13%), and other government agencies (10%).

Participants learned about People that Deliver's mandate, operating model, and country interventions,

including the rapid and comprehensive human resources for supply chain management assessment. Last week we presented the results of a live survey conducted during the meeting on our LinkedIn page. Questions such as *What is the most critical factor for optimizing the success of the supply chain workforce* and what do you believe is the greatest challenge facing the supply chain workforce currentlywere posed to the audience.

Are you interested in learning more about the results of the survey? View all the questions and corresponding statistics directly on ourLinkedIn page: <a href="https://www.linkedin.com/company/people-that-deliver">https://www.linkedin.com/company/people-that-deliver</a>

Don't forget to follow us to engage further in supply chain workforce optimization discussions.

#### The Fourth Global Forum on Human Resources for Health

The Fourth Global Forum on Human Resources for Health was recently held in Dublin, Ireland. The objectives of the forum were to advance the implementation of the Global Strategy on Human Resources for Health and the Commission's recommendations towards achieving Universal Health Coverage and the Sustainable Development Goals, promote innovations in policy, practice and research and promote the engagement of HRH stakeholder groups in learning, knowledge sharing, networking and collaborative action.

The two major outcomes of the forum were the Dublin Declaration and Youth Declaration:

- The <u>Dublin Declaration</u>, sets out a series of actions to prevent a projected shortfall of 18 million health workers and to invest in the global health workforce. These actions have been agreed upon by representatives from over 70 countries who attended the forum.
- The Youth Declaration is a <u>Call for Action</u> for the commitment of youth to the human resources for health agenda to achieve better health for all and to support the path to universal health coverage.

For more information, visit: http://hrhforum2017.ie/

## **News from our partner organizations**

# International Pharmaceutical Federation (FIP) Pharmacy at a glance

FIP's latest in-depth report focusing on pharmacy around the world was released in September. The full report, which is exclusive to FIP member organisations, provides an overview of how the pharmacy profession is practiced, regulated and remunerated, what the global pharmacy workforce is, and how medicines are dispensed to patients. It is accompanied by a freely available summary document "Pharmacy at a glance".



### Launch of Master's course in Health Supply Chain Management at the University of Rwanda

Over the last couple of years, the Centre of Excellence for Vaccines, Immunization and Health Supply Chain Management at the University of Rwanda (RCE-VIHSCM) has worked hard to develop a master course in Health Supply Chain Management to address identified training needs among vaccines, immunization & health supply professionals across the EAC region. The EAC, the UR, the Centre and all of its collaborating partners, including KFW, GAVI and UNICEF were proud to launch the HSCM master course at the School of Public Health, Kicukiro Campus on Monday, October 23, 2017.

This first course comprises of over 30 students, from the EAC region and other African countries.

Among special guests who graced the launch, German Ambassador Dr. Peter Woeste said: "I



Launching the Master course on Vaccines, Immunization and Health Supply Chain Management at the University of Rwanda marks a milestone in that joint journey.

The face-to-face and online hybrid master's

welcome the EAC's strategy to strengthen the healthcare service sector in East Africa by establishing regional Centers of Excellence. program will last 24 months and another 2018-2019 intake will kick-off in October 2018.

Visit: <a href="https://www.hscm.ur.ac.rw">www.hscm.ur.ac.rw</a> for more information.

### **Upcoming events**

18th Reproductive Health Supplies Coalition Membership Meeting March 20 - 22, 2018 Brussels, Belgium

The rescheduled 18th RHSC General Membership Meeting will now take place March 20 - 22, 2018 at the <u>Radisson Blu Royal Hotel</u> in Brussels, Belgium. Entitled "Pour Elle" (For Her), the meeting will showcase the accomplishments of partners from across the world in meeting the RH needs of women, with a special focus on accomplishments in Francophone Africa.

Further information can be found here: https://tinyurl.com/y73g3gmg

SAPICS Conference June 10 - 13, 2018 Cape Town, South Africa

#### Raising the Impact of Supply Chain Management

Each year professionals with a passion for supply chain management convene at the SAPICS Conference to discuss various topics, explore resources relevant to the supply chain profession and benefit from valuable networking opportunities. Next year's event will take place June 10 to 13 at the Century City Conference Centre in Cape Town, South Africa. The call for speakers is still open until January 18, 2018. Find further information here: <a href="https://conference.sapics.org/call-speakers-2018/">https://conference.sapics.org/call-speakers-2018/</a>

#### Get in touch with PtD



Send us an <u>email</u>
Or connect with us and become a PtD member:

Visit our website



