

Opportunities, innovations, needs and Challenges Ethiopia faces in human resources for supply chain management

Ribka Mekonnen

Logistics Management Information System Advisor, PFSA



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TICALS FUND AND SUPPLY AGENCY (PFSA)

🖀 011-275 17 70, 011-276 06 76, 011-75 06 74 🗦 011-155 32 77, 011 275 25 55 🖂 21904 E-mail: pfsa@ethionet.et



USAID DELIVER PROJECT

Country Background



- •Total population: 73.9 Million (CSA 2007)
- Least Urbanized: only16.4% of the population lives in Urban areas
- Average size of household: 4.7

Ethiopia is Decentralized country:

- -9 Administrative regional states
- -2 City Administrations







Health Administrative Structure

- •FMOH -RHB -ZHD -WoHO SDPs
- •Health problems are mainly preventable communicable diseases like malaria, TB
- -with high maternal and under five mortality
- Total number of existing SDP's
 - ✓ Health Post:14,192
 - ✓ Health Centers:2,689
 - ✓ Hospitals:195







Health Care Delivery System: three tier health system

Specialized Hospital 3.5-5 million

Tertiary Level Health Care

General Hospital
1-1.5 million

Secondary Level Health Care

Health Center 40,000

Primary Hospital 60,000-100,000

Health Center 15,000-25,000

Health Post 3000-5000

Primary Level Health Care

URBAN

RURAL









Purpose of the HR Capacity assessment

The assessment purpose is to effectively target capacity building and professionalization efforts for human resources strengthening in SCM.





Organization and Staffing: opportunities

- •The existence of PFSA, an agency that is solely responsible for SCM
- •Existing Standard Operating Procedure and guidelines for different function in SCM
- •FMoH has Human Resource for Health strategy in draft
- •Technical skill transfer through seconded Developmental Partner Staff
- •The Integrated Pharmaceutical Logistics System (IPLS) is currently being implemented



organization and staffing: challenges

- •Human resource for SCM is not included in the HR development strategy
- •SCM is not a recognized qualification in the health sector;
- •Significant proportion of professionals working in SCM are not adequately trained in the area





Policy and Plan: Opportunities

- •Availability of relevant policies, guidelines, protocols; FMoH has bodies in charge of standardizing polices related to human resource
- •Strategic Plan; GTP, HSDP, PFSA 5 years plan
- •Pharmaceuticals Logistics Master Plan developed to guide the SCM nationally





Policy and Plan: challenges

- •HRH strategy doesn't address SCM
- •Lack of retention mechanism for SCM public
 - •No incentive plans for staff involved in SCM
 - •No skills certificate that could be attached to promotion or increase of salaries
 - •No staff development plans
- •The team charter endow with collective /team role and responsibility- doesn't indicate individual job description





Work Force development: opportunities

- •Existence of Capacity Building Directorate at PFSA
- •Existence of standardized in-service training curriculum for SCM trainings supported by Government and by IPs
- •Few Health Science Colleges has integrated the SCM curricula into the existing curricula
- •Some level of SCM taught is provided to pharmacy students



Work force development: challenges

- •In-service trainings are expensive
- •High attrition; especially those who are trained
- •Technical Assistances are not strong on the transfer of knowledge and skill; rather engaged the implementation by themselves
- •Pre-service trainings in SCM integrated only in a few colleges
- Pre-service trainings mainly focused on theoretical knowledge/ lack practicality





Workforce effectiveness: opportunities

- •There is a standard check list for supervisors in SCM
- PFSA and IP's started implementing automated and manual LMIS: accurate and timely data
- •New initiative on M and E plan for SCM



Workforce effectiveness: Challenges

- •Lack of individual job description for the SCM staff
- Performance appraisal Scheme is not in alignment with rewarded scheme or incentive
- •Capacity building scheme/staff development plan
- No Performance improvement plan to a professional with low performance



Professionalization Efforts in Public Health SCM: opportunities

- •Ethiopian Pharmaceuticals Association (EPA) EPA Annual conference
- •Ethiopian public health association; mix of different professionals
- •Many Ethiopian are members International association for public health logistics (IAPHL)



Professionalization Efforts in Public Health SCM: Challenges

- •No formal SCM training with accredited qualification
- •Lack of clear requirement criteria to be recognized as SC Manager
- No strong private sector on SCM for the public health sector to learn with



Next Steps

- Advocate for inclusion of SCM HR requirement and needs in the existing national documents and strategies
- •Continue the efforts on in-service Training
- •Long Term plan to extend Pre-service trainings to more HS Colleges





AMESEGENALENE THANK YOU

