

12/6/2018

IAPHL Report

Global Health Supply Chain Summit

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ESWATINI

IAPHL Scholarship Beneficiaries' Report

Background

Continuing professional development is essential to postgraduate career growth. It ensures that professionals stay ahead of the curve in terms of any new developments in their chosen paths and any changes that are made within the global workplace. It requires that there be a documented process that is solely self-driven and can be either formal or informal training. Above all, it should direct one towards their career goals and advance their knowledge in particular skills. IAPHL provided such an opportunity for growth at the recent Global Health Supply Chain (GHSC) Summit to five members from low income countries, that focused on the topic of accelerating global health supply chain excellence through better system design, innovative financing for health supply chain and deployment of new technologies.

In the Eswatini context, we still have a long way to go in the development of supply chain management. There are numerous challenges ranging from data quality and visibility, getting the health care products to the end user at facilities, human resource shortages and most importantly addressing the issues of expiries at health care facilities. We are fortunate to have partners that support us in our quest for improvement and believe that the situation can change. All of these factors lead me to seek out a conference like the GHSC summit and other training meeting and workshops – to try and learn as much as possible about supply chain management (SCM) and apply these solutions to the Eswatini context.

Purpose

The purpose of attending the summit was to gain insight on new developments within SCM and to network with industry experts while exchanging ideas of new ways to innovate health financing and data visibility.

Contacts made/Networking

<u>Name of Contact</u>	<u>Organization & Position</u>
Dr Guylene Feudjio	Subnational Responsible Procurement and Supply Management Unit
Akbar Rabbani	Program Officer, Punjab Information Technology Board
Pasi Sirewu	Central Stores Controller, Zimbabwe National Family Planning Council
Lameck Manda	Logistics, Malawi Ministry of Health
Elizabeth Igharo	Executive Director, IAPHL

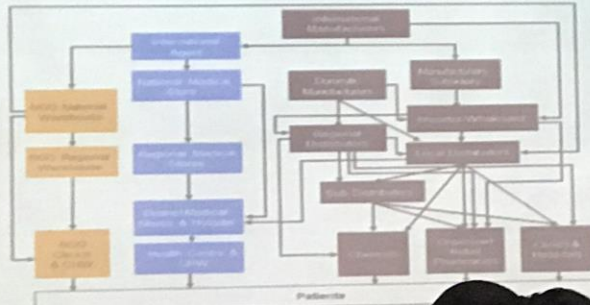
Dr Nekoye Otsyula	Vaccines Medical Manager, GlaxoSmithKline
Daudi Msasi	Chief Pharmacist, Tanzania MOH
Joel Simbeye	Principal Pharmacist-Logistics, Cancer Diseases Hospital
Jacob Kuutuome	Freelance Consultant for Procurement, Logistics and SCM Head of Procurement & Supplies at St Michael's Hospital
Walter Proper	JSI, Director
Rachel Msimuko	Inventory Manager, Zambia Medical Stores
Levison Ziwa	Program Manager, Chemonics GHSM PSM
Jan Van Rooyen	Lead for Strategic Solutions, Resolve

Lessons learned/Key takeaways

- One of the biggest challenge in Africa is the issue of counterfeit medicines especially antibiotics
- Harmonization and coordination of all aspects of a supply chain country will help with the rates of stock outs and expiries
- The 3PL approach is doing a lot to improve the distribution performance of central medical stores globally
- ePOD, a transportation management system for improved visibility, decision making, performance monitoring and record keeping is the future of end point delivery visibility
- A supply chain system can only be effective if the human resources within it are qualified
- Use of UAVs in hard to reach areas is a possibility if only there is proper community engagement, human resources and proper integration into existing systems
- Sustainability is still a long way to go for many African countries as it requires government to be fully self-funding
- In spite of all the innovations in supply chain, there are still many bottlenecks to system design uptake that are a hindrance to development. These are low government interest, resistance to change and inadequate funding sources

Participation/Photographs

The healthcare supply chain is extremely complex and suffers from many challenges



- We've seen examples of how complexity impacts visibility, price, availability, & quality
 - Disaggregated system leading to lack of transparency (*Visibility*)
 - Several middle-men taking a margin (*Price*)
 - Regulations, exclusive rights, & lack of last mile distribution (*Availability*)
 - Poor integrity leading to counterfeits/substandard meds (*Quality*)
- Not driven by consumer demand/need

ANTIMICROBIALS

ANTIBIOTICS/ ANTIBACTERIALS

against bacteria, e.g.
drugs for bacterial
pneumonia

ANTIVIRALS

against viruses, e.g.
drugs for herpes
and HIV

ANTIPARASITIC AGENTS

against parasites,
e.g. drugs for
malaria

ANTIFUNGALS

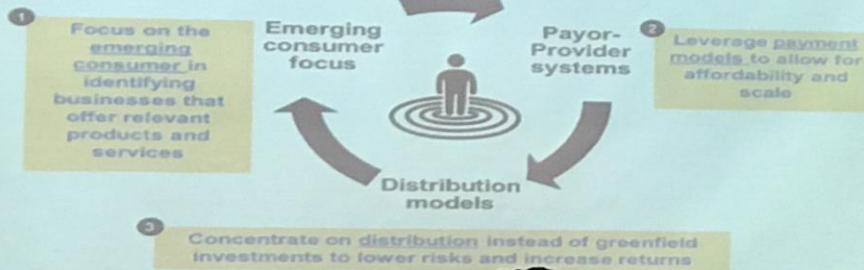
against fungi, e.g.
drugs for yeast
infections

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...which has led us to a 3-pronged healthcare investment strategy



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