FRAMEWORK FOR PROVISION OF ESSENTIAL MEDICINES FOR DISTRICT HEALTH SERVICES

UNISA
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Define tomorrow.

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No conflict of interest with regard to the content and presentation
INTRODUCTION

• On average, WHO Member States spend about half of their total health expenditure on medical products and up to 90% of the population in developing countries purchase health commodities through out-of-pocket payment (WHO 2014:2).

• Improving access to and regulation of the essential medicines is a prerequisite for universal health coverage and to the achievement of international goals relating to the unfinished agendas for maternal and child health, communicable diseases targeted by the SDGs through Goal 3 which seeks to ensure health and well-being for all, at every stage of life (UN2016:5).
PURPOSE OF THE STUDY

To determine the various provinces of the Republic of South Africa a developing country’s approach to the provision of essential medicines in order to develop a standardised framework for the country district health services with a view to improve essential medicines availability.
RESEARCH DESIGN

• This study was conducted in eight provinces through qualitative action research design with the involvement of the participants in reviewing and improving their practice environment with an intention to promote development and consideration of new strategies to ensure consistent medicine provisioning for the health facilities.

• There were 15 participants for this study, all of them were qualified Pharmacists 10 were operating within a medical depot setting which is responsible for procurement, warehousing and distribution components and the remaining 5 were from the directorates of pharmaceutical services which are generally responsible for overall administration of the medicine supply management chain from the depots right to the primary health facilities.
MSH MEDICINE SUPPLY MANAGEMENT THEORETICAL FRAMEWORK

Diagram:
- Management Support
  - Use
  - Selection
  - Distribution
  - Procurement

Policy, Law, & Regulation
RESULTS OF THE STUDY

• Confirmed there is no nationally approved standard framework for management of essential medicines provisioning in the Republic of South Africa.
• The nine provinces approaches provisioning of essential medicines differently with huge financial implication in terms of expired stock and quality of services.
• Medicine supply management is affected by limited availability of pharmacy personnel to manage medicine stock at the depot and facility level.
• The study proposed the framework for provisioning of essential medicine in line with the international framework.
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<th>COMPONENT</th>
<th>STANDARD OF MEASUREMENT</th>
<th>INDICATORS</th>
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<td>The selection process</td>
<td>• Each district shall have a district Pharmaceutical and Therapeutic Committee chaired by a senior district medical officer</td>
<td>• Number of districts with PTC meetings held at least once quarterly chaired by a senior medical officer.</td>
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<td>Procurement model</td>
<td>• The district shall procure essential medicines through the medical depots using the prescribed forms and approved catalogues which are updated at least quarterly.</td>
<td>• There should be service level agreement between the district and medical depot on the expected turnaround times and parties’ responsibilities for smooth procurement and provisioning</td>
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<td>Rational medicine use</td>
<td>• Health facilities conducting monthly prescription clinical audits using standards tools</td>
<td>• Number of health facilities within the district conducting prescription audits</td>
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<td>• Quarterly stock take and rotation</td>
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<td>Human resource development</td>
<td>• District based medicine supply management induction for professional nurses working in PHC setting</td>
<td>• Percentage of professional nurses inducted on medicine supply management</td>
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## PROPOSED FRAMEWORK COMPONENTS

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| Warehousing   | • One medical depot per province warehousing medicine stock for the whole province instead of all Districts having district warehouses  
• GPP compliant facility medicine store rooms                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | • MCC compliant provincial warehouse  
• Number of health facilities with the medicine store room and the dispensing room with temperature control mechanism and proper steel shelving within the district                                                                                                                                                                                                                                                                                                                                                        |
| Distribution  | • The districts should have an outsourced delivery schedule with at least one delivery within the 21 working days                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | • Number of districts with an outsourced distribution services for the distribution of medicines from the depot directly to the health facility at least once in 21 working days                                                                                                                                                                                                                                                                                                                                                     |
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| **Management support**                  | • The organisational structure should consist of pharmaceutical services functions and incumbents  
• District Pharmaceutical posts filled | • District Pharmacist post filled at a Manager level  
• Percentage of filled Pharmaceutical posts filled in line with the Good Pharmacy Practice standards |
| **Information Management System**       | • Pharmaceutical Information Management systems coupled with computer hardware operational within the district health facilities | • At least 90 percent of health facilities with functional information management system        |
CONCLUSION

It is believed that

If the proposed framework is implemented improved medicine availability and financial savings will be achieved.

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Thank you