

WHAT DOES IT TAKE TO RESPOND TO A PUBLIC HEALTH EMERGENCY?



“Implementation of the Emergency Supply Chain Framework will put in place a system ahead of an emergency to manage the commodities required to control and contain the outbreak. This may mean procuring or leveraging partner resources, such as national or regional stockpiles of commodities, for a rapid and timely response.”

- Dr. Rashid Aman - Chief Administrative Secretary, Ministry of Health.



PEPFAR
U.S. President's Emergency Plan for AIDS Relief



U.S. President's Malaria Initiative



Jayne Waweru
Chief of Party, Afya Ugavi

We are excited to share with you Issue 4 of the Afya Ugavi News, a publication that shares contribution of United States Agency for International Development (USAID) to the strengthening of health supply chain management system in Kenya. Afya Ugavi Activity is a five-year health system strengthening activity funded by USAID under the Global Health Supply Chain – Procurement and Supply Management contract implemented by Chemonics International.

In this issue, we share our privilege to lead USAID support to strengthen Kenya’s supply chain management in 10 counties, as we contribute toward achieving the goals of the global health agenda. Our efforts in the development of the emergency supply chain framework, and technical support in areas of HIV/AIDS, malaria, and reproductive, maternal, neonatal, and child health are bearing fruits.

We are steadily contributing to build a stronger health supply chain system at the national and counties levels to sustain government efforts in Universal Health Coverage (UHC) and withstand the shocks of future diseases breakouts and pandemics as we have witnessed with COVID-19.

We invite you to enjoy the read, and share your feedback as well as your stories for publishing (womanya@ghsc-psm.org) in subsequent editions.

Belief in Kenya’s possibilities...

In Kenya, USAID’s investment covers areas of Agriculture and Food Security, Democracy, Governance and Conflict, Economic Growth, Education and Youth, Environment, Global Health, and Water, Sanitation and Hygiene programs.

Every year, USAID provides support to Kenya’s government valued at more than USD 3Billion. USAID’s work demonstrates American generosity, and promotes a path to Kenya’s self-reliance and resilience.

A report *Investing in Kenya’s People: Valuing the US-Kenya Relationship* that breaks down the investment is available online at <https://www.aiddata.org/blog/investing-in-kenyas-people>

\$ 3Billion

Annual Investment in Kenya

#USAMarafiki!



Mark Meassick, USAID Mission Director

1.1 MILLION KENYANS on ARVs daily thanks to over Ksh 700 billion in US assistance



USAID
FROM THE AMERICAN PEOPLE

In Kenya, USAID is providing **Ksh 5 billion** in additional assistance to boost Kenya’s COVID-19 response.

Building a sustainable public health emergency supply chain toward efficient and effective response

Climate change risks, population increase and migration, and technology, have not only expanded the scope of man's exploratory nature but have also hastened the exposure and spread of infectious diseases. The 21st century has particularly experienced rising trends in disease outbreaks and their capacity to spread to becoming epidemics.

No doubt, these threats negatively affect social and economic capacities of individuals, communities and even countries to adequately cope when emergency strikes. However, stronger surveillance systems, early preparedness and advance response mechanisms can minimize the greater risks of disease outbreaks and avert loss of lives.

Kenya Context

Kenya is prone to and has experienced different types of emergencies over the years such as disease outbreaks, floods, droughts and famine, to inter-tribal clashes and terrorism. Social unrest and mass casualty incidents threaten the lives, public health and social and economic status of populations. The need to prepare and quickly respond to disasters in order to control and contain spread of disease and negate or minimize their impact on the population is critical and urgent. Kenya has shown strong commitment to manage disasters by setting up agencies and developing policies that support disaster preparedness and response. However, reports from several assessments of Kenya's preparedness for disasters indicated that preparedness was not optimal for an efficient, time sensitive response. The World Health Organization (WHO)-led Joint External Evaluation (JEE 2017) report noted in its situation analysis of current practices in emergency supply chain management that Kenya lacked a plan to deploy medical countermeasures in an emergency, had weak coordination and involvement of non-state stakeholders, inadequate financing for preparedness, and mechanisms which delayed release of funds.

System Strengthening

The evaluation report among others singled out the need to develop an Emergency Supply Chain (ESC) Framework that would guide and support the deployment of medical countermeasures and medical personnel during public health emergencies.

The Building Blocks

Afya Ugavi through multi-stakeholder and multi-sector coordination, supported, Kenya to adopt a "One Health" approach to Public Health Emergency Supply Chain

(PHESC). This approach promotes the management of all the commodities necessary in response to an outbreak, ensuring they effectively and efficiently get to the site of the emergency. *One Health* is a collaborative, multisectoral, and transdisciplinary approach — working at the local, regional, national, and global levels to achieving optimal health outcomes recognizing the interconnection between people, animals, plants, and their shared environment.

USAID's Afya Ugavi Activity in collaboration with Ministry of Health - Division of Health Products and Technology (DHPT), Kenya Medical Supplies Authority (KEMSA), and HealthIT, have co-created the national Covid-19 work plan for co-implementation and co-monitoring; formed a technical working group (TWG) that meets every week to review Covid-19 support implementation progress. The Activity is working with the DHPT at national level to review Covid-19 related guidelines and develop standard operation procedures, including medical waste management and donations guidelines.

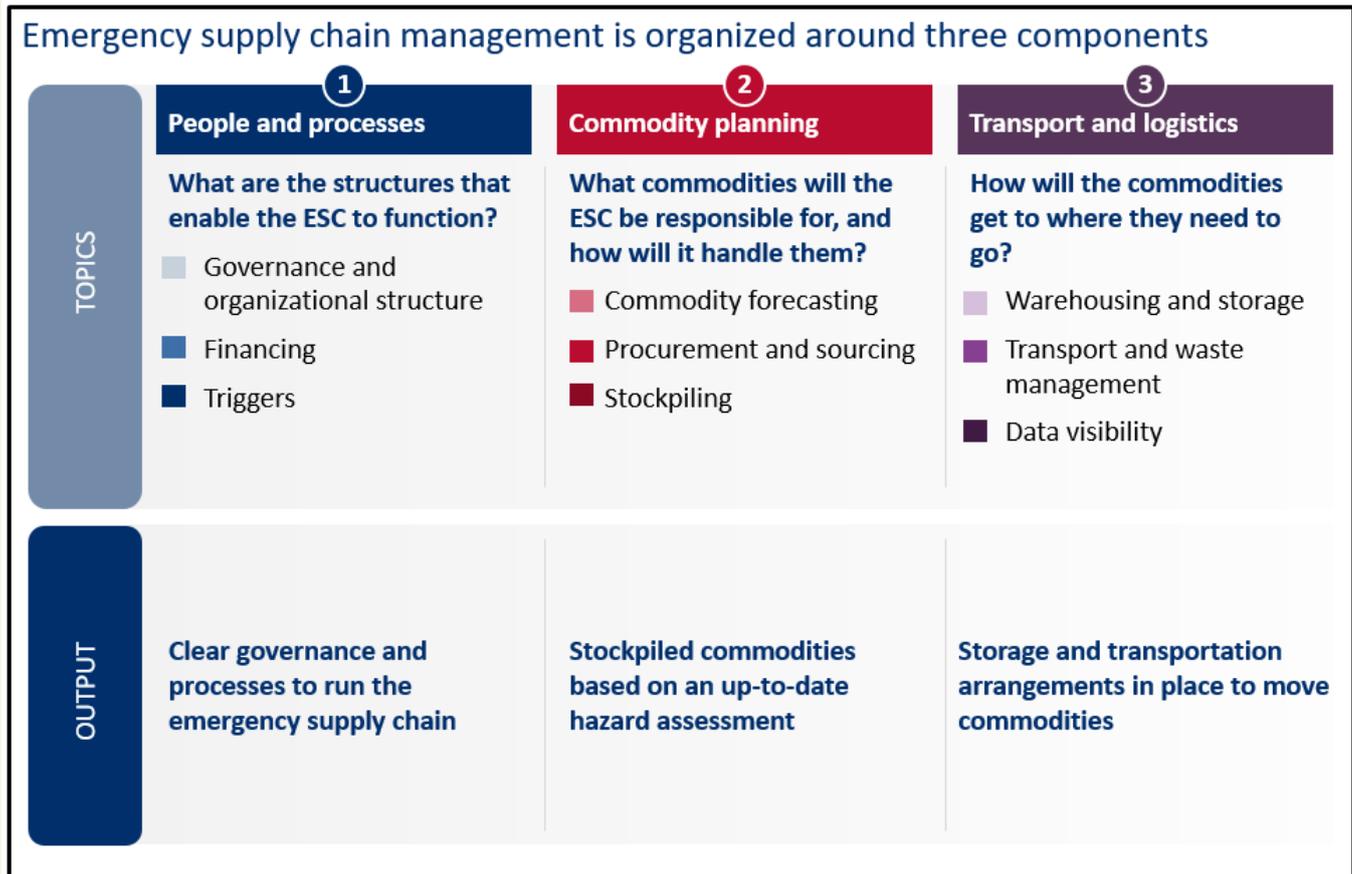
Afya Ugavi Covid-19 is supporting Uasin Gishu and Migori Counties to conduct baseline assessment in the Covid-19 treatment and isolation health facilities - this data will be used to determine Covid-19 commodities requirements.

"We have supported Uasin Gishu County Emergency Response Taskforce (ERT) and CHMT to form the County and sub-County Commodity Emergency Response Committee (CCERC) to manage Covid-19 supply chain activities. We provide CCERC with technical and logistical support."

- Ezekiel Chepkuyeng, Afya Ugavi County Coordinator, Uasin Gishu.

Benefits

The ESC Framework provides evidence-based protocols for utilizing existing supply chains in the public health system; as well as modalities for leveraging the private not-for-profit supply chains and engaging the private sector, particularly, for animal health products. The Framework has tools and templates to facilitate continuous reviews and update of the protocols and processes. It calls for capacity building of the Public Health Emergency Operations Centre (PHEOC) staff and development of standard operating procedures for consistent application. Also included are simulation packages to test it and make it adequately versatile to respond to new diseases and other hazards.



The Kenya Public Health Emergency Supply Chain Framework.

“Implementation of the Framework will put in place a system ahead of an emergency to manage the commodities required to control and contain the outbreak. This may mean procuring or leveraging partner resources, such as national or regional stockpiles of commodities, for a rapid and timely response.”

- Dr. Rashid Aman, Chief Administrative Secretary, Ministry of Health

The Kenya Public Health ESC Framework is structured to address three key areas of:

- 1. Governance** - includes establishing and strengthening organization structures, which are not necessarily hierarchical but for purposes of communication; map of the stakeholders, defined coordination mechanisms and means of effective communication. The management functions of staff training, financing, data visibility and description of what constitutes hazards for the country are defined.
- 2. Commodity Planning** - commodity identification and forecasting, costing, stockpiling decisions and procurement processes (i.e. plan what to get, how to get it).
- 3. Logistics and Transport** – addresses warehousing needs and locations are determined, consider-

ation of customs and transport arrangements and waste disposal requirements are made (i.e. storage, movement and tracking of commodities).

“As Afya Ugavi supports the Ministry of Health to roll out its implementation, the ESC framework will address the unique supply chain challenges posed by emergencies. The focused investments will pay off in increased cost-effectiveness and improved speed of response during disasters, thus saving lives.”

- James Riungu, Supply Chain Director, USAID Afya Ugavi Activity in Kenya.

Sustainability

The framework marks the beginning of other initiatives contained in the National Action Plan for Health Security (NAPHS) and the Kenya Global Health Security Agenda 5-year Road map. It will raise the profile the PHEOC in preparedness and place the Government firmly at the forefront in coordinating partners in emergency response. It equally gives credence to the government as the duty bearer to commit financial resources and enables it to make specific and informed requests for support. The framework has an inbuilt accountability mechanism through the inventory management system that can track commodities and other resources while also motivating staff to serve.

Essential medicine reporting transforms stock tracking in Kakamega County

Essential medicines and medical supplies (EMMS) satisfy the priority health care needs of the targeted population, and are selected based on public health needs, evidence on effectiveness and safety, and cost-effectiveness. These medicines provide holistic management of reproductive, maternal, neonatal, and child health and emergencies. Their absence in a health facility is an indicator of an ailing health system.

Dr Rashid Aman, the Chief Administrative Secretary of Ministry of Health notes that “national and county governments have a duty to ensure that essential medicines under universal health coverage (UHC) are available at all times in adequate amounts, in the appropriate dosage forms, with assured quality and adequate information, and at affordable price to the community.”

However like many, Kakamega County has struggled with stocks availability for EMMS at time leading to complaints from members of county assembly despite allocating adequate budget. While these complaints may be valid, often there are underlying supply chain inefficiencies that contribute to this problem even with budgetary provisions.

When a County Pharmacist has no basis to authoritatively determine the stock levels in the county, approximation is used. In Kakamega County, chains of phone calls with sub-county, and respective facilities to determine the stock available and need, characterized the process. When the supply chain is not predictable, mistrust is created between members of the public, the healthcare workers, and members of the County Assembly, often putting the healthcare workers at greater risk.

With support from USAID’s Afya Ugavi Activity focusing to provide technical assistance to strengthen Kenya’s supply chains for HIV/AIDS, malaria, family planning, and maternal and child health commodities, Kakamega County has received a boost in technical support. The county attributed stock challenge to lack of a reporting platform



Dr Kurgat, Kakamega County Pharmacovigilance Pharmacist

capable of showing facility stock levels of sub-counties and aggregating for the county.

Dr Emmanuel Kurgat, the pharmacovigilance pharmacist says that “there was no system to speak of what was available, consumed, or needed. Initially, the best way would be to call sub-county pharmacists for estimates.”

With the Afya Ugavi supported EMMS reporting platform, making informed decision is a lot easier. Although only in operation for less than four months, the March and April 2020 data analysis has already informed redistributions in eight (8) sub-counties that were either stocked out or overstocked.

At the click of a button, responsible staff are able to get the correct stock status thus saving on turnaround time for feedback. In addition, it has enhanced information sharing across sub-county and county level engagements.

As at April 2020, the EMMS reporting was at 91 percent for 216 facilities. This enables leadership to ensure that health facilities have essential medicines necessary for them to serve their communities.

Dr Kurgat also notes that the platform has created capacity to interrogate commodity orders received from sub-counties when they submit to the county pharmacist for rationalization before forwarding to Kenya Medical Supplies Authority.

“Kakamega County allocated 300 million for the procurement of pharmaceuticals and non-pharmaceuticals in fiscal year (FY) 2019/20. However, with the huge investment, there was minimal visibility of commodity data at the county level. This would have possibly led to expiry and pilferage of commodities. The EMMs dashboard has revolutionized decision-making due to ease in visibility of commodity data. The tool is robust and user friendly,” Dr Kurgat notes.

The EMMS reporting template ensures that medicine especially for maternal, neonatal, and child health are available at the facilities, and restores confidence of the community in the health system.



Dr. Patrick Kasina, the Likuyani Sub-County Pharmacist verifies commodity entries in the bin cards.

Strengthening commodity security in Kitui County



County staff carrying out data collection for quantification in Kitui Rural Sub-County.

Kitui County is working to strengthen its commodity security toward a stronger health supply chain management system for improved access to quality health services. Commodity security is a result of functioning logistical systems and aligned supportive national and county policies that lead to timely and adequate supply of commodities to health care workers and their clients.

The USAID's Afya Ugavi Activity is supporting the department of Health, Kitui County, to strengthen its health commodity management systems. As an initial step, Afya Ugavi has supported Kitui County to establish a commodity security technical working group - identified as a key element alongside quantification of health products. This has become even more critical as the County plans for its new financial year 2020/2021. The department of health needed evidence-based estimate of the needs and budgets for its health commodities.

To achieve this, the County Health Management Team, with technical and logistical support from Afya Ugavi, started the quantification exercise in November 2019. The teams organized capacity development workshops and data collection exercise to forecast the total health commodity requirements of the 287 public health sector facilities in Kitui County for the FY 2020/2021.

Following this exercise, Kitui County estimated the total value of health commodity requirements for FY 2020/2021 at Ksh 1.2 billion including a buffer of three

months. They also classified the products by high cost drivers as Pharmaceuticals (45.86%), Medical Supplies (29.25%) and Laboratory (15.50%) accounting for 90.61% of the total cost. Nutrition, Radiology, Dental, Eye and Renal products had a combined total of 9.39%.

Dr Beatrice Mwendu, the County Pharmacist, observes that "This is the first financial year we have proof of our commodity needs. With Afya Ugavi's institutional support, we are progressively moving towards a sustainable best practice in health commodity supply chain management, and we are excited."

Kitui County Department of Health now has a document that will provide guidance in identifying the funding gaps in health products and technologies. This will inform redirecting of funds to priority areas in curative, rehabilitative and preventive services.

"Afya Ugavi has developed an able team of county officers who can carry out future quantification exercises with support from the Ministry of Health."

– Dr Ndeti Mutisya, Senior Pharmacist, Kitui County.

The USAID's Afya Ugavi Activity is providing a comprehensive technical assistance to strengthen Kenya's supply chains for HIV/AIDS, malaria, family planning, and maternal and child health commodities at both the national and county levels of the health system.

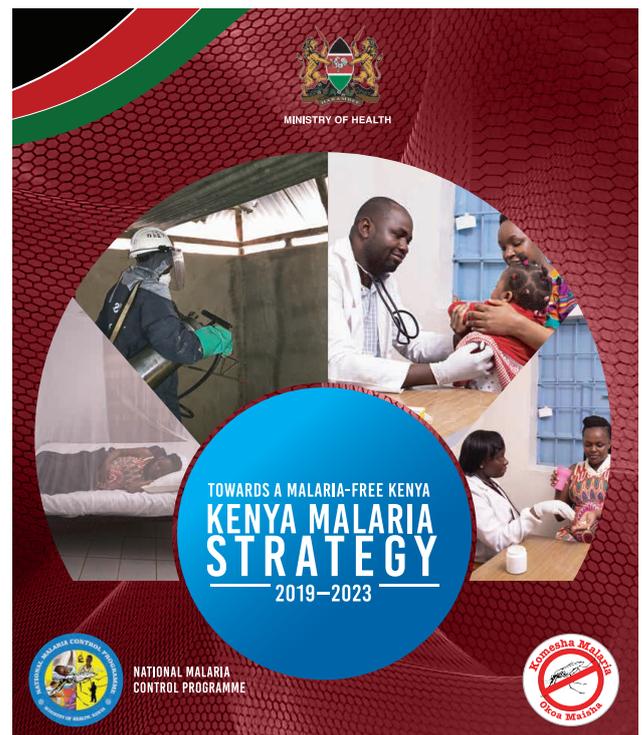
Achieving the new Kenya Malaria Strategy relies on strong supply chain management

Kenya has made great strides in malaria control over the years. However, the battle against malaria is far from over with nearly 70 percent of the population at risk, and 5 million people treated for malaria in 2019 alone (MOH 2019). For this reason, Kenya is charting a new strategic direction for the next five years to bring malaria deaths to zero.

The Kenya malaria strategy finalized in 2019 with support of USAID's Afya Ugavi Activity and other stakeholders, sets ambitious targets to continue scaling up of preventive measures, promote prompt diagnosis and effective treatment in both public and private health sectors to attain universal coverage.

The strategy highlights performance monitoring and availability of timely, accurate, and complete data from all sectors as critical. In addition, a stronger stakeholders coordination mechanism is envisioned as a pathway for synergy.

Critical to the implementation of achieving the strategy is leadership, partnerships, and coordination at all levels. This ensures that malaria governance and legislation is aligned with updated policies, stronger multisectoral approach, capacity development at national and county levels, resource mobilization, enhanced malaria commodity security at all Levels, and use of supply chain data for decision making.



Appropriate treatment of suspected malaria cases through confirmatory diagnosis and provision of malaria medicines requires a well-functioning supply chain system and a highly skilled health workforce to assure good stock management and appropriate use of malaria commodities at all levels of healthcare.

USAID's Afya Ugavi Activity will continue to support the Division of National Malaria Program to ensure uninterrupted availability of malaria commodities. In addition, the Activity provides technical support toward strengthened sustainable supply chain system for efficient quantification, timely procurement, and distribution of commodities.

The annual reviews of this strategy will be informed by data availability and subsequent use for informed decisions. This brings the integrated functional malaria dashboard that ensures quality malaria commodity data is available for decision making, its linkage with the District Health Information Software (DHIS2), and the national logistics management information system for the supplying authority into focus.



Malaria commodities at a health facility.



Rhoda Masila, the Kitui East Sub-County Commodity Nurse (r) provides commodity management on job training during a facility support supervision visit.

“

The technical support received from Afya Ugavi has enhanced our expertise as Sub-County managers on health supply chains and increased our capacity to provide commodity management on job training at facility level.

”

Rhoda Masila, Sub-County Commodity Nurse, Kitui East.

Our Voices

Community-based health care, including outreach and campaigns, in the context of the COVID-19 pandemic



Community-based health care, including outreach and campaigns, in the context of the COVID-19 pandemic

Interim guidance
May 2020



Community-based health care is an essential part of primary care at all times; in the context of the COVID-19 pandemic, the distinct capacity of trusted community members for social engagement and delivering care where it is needed is ever more critical. The joint World Health Organization (WHO), United Nations International Children’s Fund (UNICEF), and International Federation of Red Cross and Red Crescent (IFRC) guidance, addresses the role of community-based health care in the pandemic context. It includes practical recommendations for decision makers to help keep communities and health workers safe, to sustain essential services at the community level, and to ensure an effective response to COVID-19. Using the comprehensive and coordinated approach will help counties in Kenya strengthen the resilience of community-based health services throughout the pandemic, into early recovery and beyond. (Uploaded 06 May 2020)

Find the publication at: <https://apps.who.int/iris/rest/bitstreams/1277158/retrieve>