



Global Health

Supply Chain Summit

[ABSTRACT #4]

Ladi Stephen, Roberto J.
Gomes, Ulika Kupatia, Jane
Souza, Manuel Masamba

November 17, 2020

Thanks to our generous sponsors





Supply chain preparedness and response through approach redesign and partnership in Angola COVID-19 pandemic experience

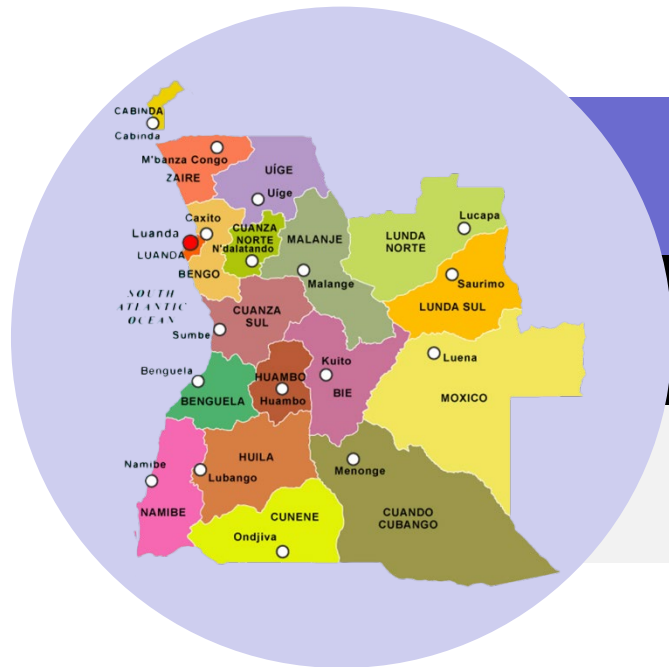
Ladi Stephen

USAID GLOBAL HEALTH SUPPLY CHAIN PROGRAM
Procurement and Supply Management

Country Director, Angola



GHSC-PSM in Angola



10%

PEPFAR priority - PMTCT supply chain system strengthening TA and commodity support (next FY) central level & 4 provinces

80%

President's Malaria Initiative (PMI) commodity support for diagnosis, treatment, prophylaxis and vector control TA to NMCP & 6 provinces

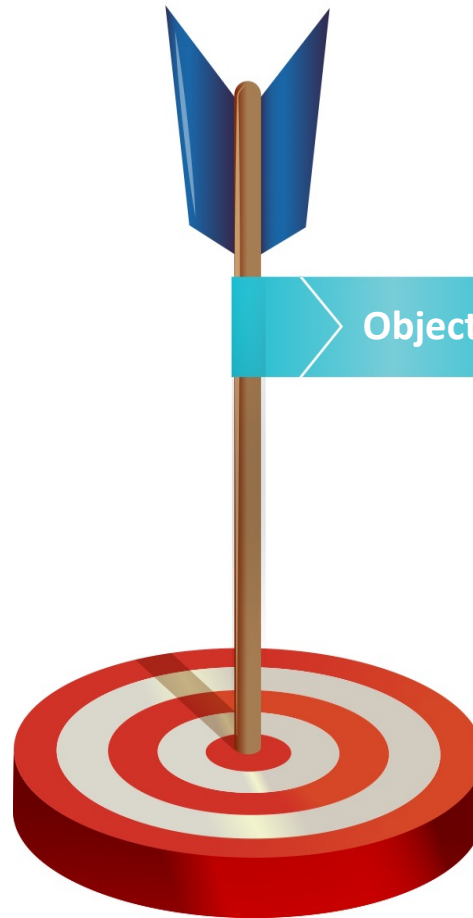
10%

USAID priority in line with FP2020 commodity support for FP/RH technical assistance and contraceptive security to the Reproductive Health Dept. & partners (central & provincial levels)

Keeping focused in a crisis

Problem Statement

- How to rapidly respond during a crisis to minimize supply chain disruption.
- How to use project funds so that more can be done with the same amount.
- How to distribute commodities in the face of COVID-19 restrictions and amid constrained resources.



Ensure business continuity and staff protection by **seeking new ways of doing old things**, all without compromising service quality.

COVID-19 increased the need to rapidly innovate and to take strategic decisions and actions using available project funds and maintaining project performance management.

We expected a higher burden on limited project funding and no current increase in these funds planned. Plans included:

- Mitigate impact of supply chain disruption, including product shortages
- Get commodities closer to the end user
- Stand ready to assist government with ad-hoc requests for distribution to reduce stockouts
- Establish early warning signals and KPIs to monitor performance and track anomalies



A methodology for success



- Reviewed workplan, budget and implementation approaches to identify risks and propose mitigation plans
- Communicated widely and adopted collaborative approach to planning, implementation, monitoring and supportive supervision
- Implement activities to continue to get work done efficiently while ensuring staff safety and security

Redesigning distribution approach



Inter-provincial travel restrictions limited distribution to malaria-affected communities.

GHSC-PSM, clinical partners and the national program bypassed provincial levels and distributed antimalarial commodities from Luanda directly to municipalities.

- Up to **50% reduction** of overall delivery lead times
- Stockout rate for RDTs and other commodities reduced from **31% in March to <10%** in June across >80% of supported sites

Remote quantification of HIV/AIDS commodities

- MOH decided to transition to TLD in Q1 2020.
- COVID-19 increased the urgency for the quantification exercise to support multi-month dispensing (MMD) of TLD and other commodities and reduce patient trips to pharmacies.
- GHSC-PSM supported MOH and partners to conduct the first remote quantification exercise.
- All MMD benefits to patients and healthcare facilities will extend long after COVID-19.

Patient access to more optimized ARVs!



Quantification Committee on MS TEAMS

Alternative distribution option for contraceptives

USAID and World Bank contraceptive shipments cleared by GHSC-PSM and stored by WB at central storage facilities.

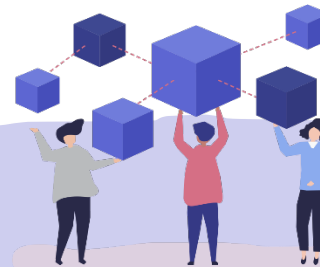
This effort led to improved contraceptive commodity security by decreasing by **more than 70%** the number of provinces stocked-out of all contraceptive presentations and expanded geographic coverage (access) **from 10 to all 18 provinces.**



DSR department & hospital ambulances heavily involved in COVID-19 response.



GHSC-PSM supported the DSR, CECOMA and partners to develop consolidated distribution plans.



Collaborative effort: GHSC-PSM solicited partners (donors and service delivery partner) support to distribute the products.



Partners & government supported product transportation; GHSC-PSM monitored distribution.

Improved contraceptive commodity security and expanded reach!

Revised 3PL contracts mechanism and pricing

- Storage contract awarded to one service provider.
 - Can change this strategy mid-stream. Glean lessons learned from distribution competitions, determine if second contract needed.
- Distribution through competitive bidding each time via RFTOPs for 2 finalists.
 - Cost build-up and standard invoice template
 - Modified and simplified RFTOP template
 - Modified and strengthened Lowest Price Technically Acceptable eval template
 - KPIs template used.
- GHSC-PSM manages and scores service provider performance on set KPIs (not tied to payment)

Virtual communication tools for distribution planning with government counterparts

Condoms arrived just as the state of emergency began. Travel restrictions prevented in-person coordination with stakeholders to develop distribution plans and deliveries.

Set up several virtual communication platforms – MS TEAMS, WhatsApp and group emails to coordinate with the MOH and central medical stores (CMS).

Facilitated access and trained MOH users on data capture, review, analysis and presentation using the preferred platforms.

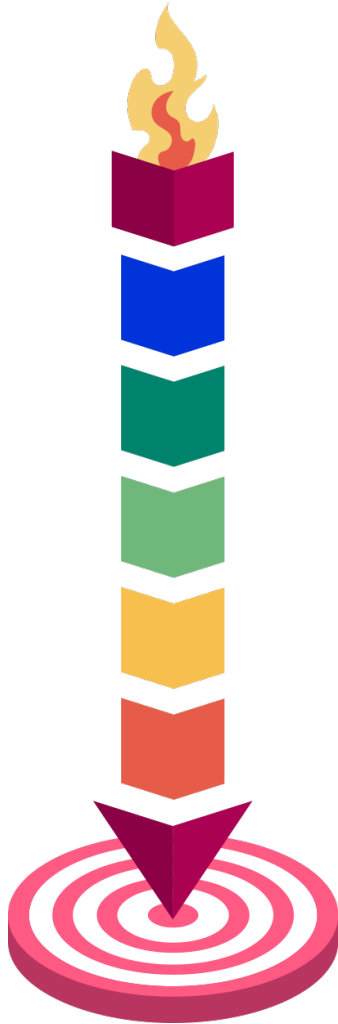
Distribution plans completed on time. CMS able to receive products and distribute accordingly; PODs all received virtually.

This quick shift brought efficiencies and country-wide availability of condoms.

Uninterrupted supply chains and cost savings!!



Key Messages



- Found new ways of doing old things that get better results.
- Supply chain agility enhanced by leveraging expertise, fast thinking and collaborative action.
- The crisis resulted in a change, not only to address the crisis, but also to change in the way to do things for the better, even post-crisis.
- Reduce supply chain costs during crisis to do more with the same funds.
- Track 3PLs and our own performance through a new way to monitor KPIs.

Thanks to our generous sponsors

