

**West Africa Regional
Training on
Pharmaceutical
Management of
Malaria, Dakar,
Senegal, March 2006
and Participation in
the Global Fund/Roll
Back Malaria Meeting
for West African GF
Recipient Countries:**

Trip Report

Management Sciences for Health
is a nonprofit organization
strengthening health programs worldwide.



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Rational Pharmaceutical Management Plus West Africa Regional Training on Pharmaceutical Management of Malaria, Dakar, Senegal, March 2006 and Participation in the Global Fund/Roll Back Malaria Meeting for West African GF Recipient Countries: Trip Report

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Strategic Objective 5

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About RPM Plus

RPM Plus works in more than 20 developing and transitional countries to provide technical assistance to strengthen drug and health commodity management systems. The program offers technical guidance and assists in strategy development and program implementation both in improving the availability of health commodities—pharmaceuticals, vaccines, supplies, and basic medical equipment—of assured quality for maternal and child health, HIV/AIDS, infectious diseases, and family planning and in promoting the appropriate use of health commodities in the public and private sectors.

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Contents

Acronyms	iv
Background	1
Purpose of Trip.....	2
Scope of Work.....	2
Activities	3
Next Steps	11
Immediate Follow-up Activities.....	11
Annex 1: Agenda for PMM Training Course	12
Annex 2. Draft Agenda - Harmonization (Methodology Tool Kit) Task Force Meeting.....	15
Annex 3. TGF/RBM Meeting Agenda.....	17
Annex 4. Letter from TGF to MSH	22
Annex 5. Photographs taken during PMM course.....	23

Acronyms

ACT	Artemisinin based Combination Therapies
ADR	Adverse Drug Reaction
AIDS	Acquired Immune Deficiency Syndrome
CDC	Centers for Disease Control and Prevention
CS	Centre de Santé
GFATM	Global Fund to Fight AIDS, Tuberculosis & Malaria
LNCM	Laboratoire Nationale de Contrôle de Médicaments
MAC	Malaria Action Coalition
M&E	Monitoring and Evaluation
MMSS	Malaria Medicines and Supply Service
MoH	Ministry of Health
MSH	Management Sciences for Health
NMCP	National Malaria Control Program
PNA	Pharmacie Nationale d'Approvisionnement
PNLP	Programme Nationale la Lutte contre le Paludisme
PS	Poste de Santé
RBM	Roll Back Malaria
RPM Plus	Rational Pharmaceutical Management Plus
TGF	The Global Fund
USAID	United States Agency for International Development
WHO	World Health Organization

Background

More than 90% of the clinical cases of malaria each year occur in Africa with much of the burden in children under five years of age. Strategies to address these challenges must be implemented in collaboration with programs aimed at integrated approaches to childhood illness and reproductive health.

Management Sciences for Health's (MSH) Rational Pharmaceutical Management Plus (RPM Plus) Program has received funds from USAID to develop strategies to implement malaria policies and to provide technical assistance in pharmaceutical management issues for malaria. RPM Plus is a key technical partner in the USAID Malaria Action Coalition (MAC), a partnership among four technical partners: The World Health Organization (WHO), working primarily through its Africa Regional Office (AFRO), the US Centers for Disease Control and Prevention (CDC), the ACCESS Program of JHPIEGO, and RPM Plus.

RPM Plus in partnership with the Ministry of Health of Senegal, the *<Programme Nationale de Lutte contre le Paludisme>* and MAC conducted a regional training course on pharmaceutical management for malaria from March 27-31, 2006 in Dakar, Senegal. The course was funded by the United States Agency for International Development.

The Pharmaceutical Management for Malaria workshop focused on developing capacity at the national and regional levels to manage medicines and supplies for national malaria control programs. It provided information and hands-on practice to facilitate participants' understanding and implementation of basic pharmaceutical management concepts and methods as well as the process of monitoring of the implementation process with respect to pharmaceutical management. Participants included National Malaria Control Program representatives, and Central Medical Stores representatives.

At the same time, RPM Plus/MSH worked with the RBM Partnership Secretariat, Global Fund (GF) and USAID partners to organize and to participate in two other meetings held in the same facility for increased synergies among RBM partners. First, a meeting was held on Sunday, March 26th by the RBM Partnership Secretariat for the Harmonization Task Force to work on a methodology or tool kit which could be used by countries to scale up their efforts to fight malaria. Second, a meeting was held from March 27th to 29th, targeting GF country recipients in West and Central Africa to identify implementation bottlenecks and to facilitate access to necessary technical assistance for the resolution of these problems.

Purpose of Trip

Willy Kabuya-Mutshipayi, Kathy Webb and Rima Shretta from RPM Plus traveled to Dakar to facilitate a pharmaceutical management for malaria training course. There were 38 participants traveling from Mali, Cameroon, Burkina Faso, Ghana, Nigeria, The Gambia, Côte d'Ivoire, Liberia, Togo, Benin, Guinea, Niger and Senegal.

Malick Diara and Evan Lee from RPM Plus and Catherine Severo from Leadership, Management and Sustainability (LMS) were in Dakar to contribute to the Global Fund/Roll Back Malaria meeting. Rima Shretta also contributed to this meeting.

Scope of Work

- Willy Kabuya-Mutshipayi, Kathy Webb, Malick Diara and Rima Shretta provided technical assistance to the regional workshop participants in pharmaceutical management for malaria.
- Kathy Webb and Rima Shretta also coordinated workshop logistics with assistance from local RPM Plus staff.
- Malick Diara, Evan Lee and Catherine Severo facilitated sessions and working groups during the RBM/GF workshop and contributed to the development of a workshop module and a workshop report addressing process issues that will facilitate its replication in other GF regions. Rima Shretta and Catherine Severo gave presentations on Procurement and Supply Management and Managing Sub-recipients.
- Malick Diara also worked with Thidiane Ndoye, Regional Technical Advisor based in Senegal, to review country and regional activity implementation and to visit relevant partners that will be available before and after the workshop.

Activities

1. Facilitate the Regional Training Course on Pharmaceutical Management for Malaria

The Regional Training Course on Pharmaceutical Management for Malaria (PMM) for the West African region was carried out from March 27-31, 2006 at Le Meridien President Hotel, Dakar, Senegal. 38 participants attended the training course from malaria programs, essential medicines programs, pharmacy departments, procurement departments and central medical stores from thirteen malaria endemic countries of the West African region. Participants came from Senegal, Mali, Burkina Faso, Benin, Niger, Cameroon, Cote d'Ivoire, Togo, Guinea, Nigeria, Ghana, Gambia and Liberia. Additional organizations represented included the WHO/Guinea, UNDP/Guinea, the Malaria Medicines and Supply Service (MMSS) of the Roll Back Malaria Partnership, AWARE/RH and the USAID Mission to Senegal. Holding this training concurrently with the Global Fund/RBM meetings enabled PMM participants to benefit from presentations made by representatives from the Global Fund and Dr. Awa Marie Coll-Seck, Executive Secretary of the RBM Partnership, presentations by PMM facilitators to the GF/RBM meeting participants and joint action plans for the 10 countries who were invited to both meetings.

The overall goal of the course was to increase the knowledge and awareness of the elements of pharmaceutical management that impact on access and rational use of antimalarial medicines. The workshop was conducted mainly in French with simultaneous interpretation to English and vice versa. Presentations were projected in English and French. Materials for the Training Course were developed by RPM Plus and were provided in both languages to the participants.

An official opening ceremony was held on the first day of the workshop. This was carried out by Hon. Farba Lamine Sall, Chief of Staff (<*Directeur de Cabinet*>) of the Ministry of Health and Medical Prevention and Mr. Bradley Barker, Population Health and Nutrition Officer, USAID/Senegal. Other opening remarks were made by Management Sciences for Health's RPM Plus program. During the opening, the importance of this training workshop, which was aimed at capacity building for ensuring an uninterrupted supply and rational use of effective antimalarials, was stressed. The timeliness of the workshop was also commended as it came at a time when many countries in the region were preparing to implement revised first-line treatment policies using Artemisinin-based Combination Therapy (ACT). The opportunity for countries to share experiences amongst themselves was seen as an added advantage to enable them to apply lessons learned in overcoming challenges in the implementation process.

The objectives of the training course were to:

1. Apply appropriate criteria and select necessary first- and second-line medicines and supplies for national programs, taking into consideration the World Health Organization (WHO) recommendations
2. Apply good procurement practices to antimalarial medicines
3. Select an appropriate method for quantification, identify appropriate sources for data, and carry out an estimation of antimalarial medicine needs using the method selected
4. Establish technical specifications and appropriate mechanisms of supply, so that the quality of medications and commodities procured and used in national programs can be assured

5. Establish the appropriate mechanisms to guarantee that medicines and supplies are distributed to health services at the right moment and in adequate quantities
6. Establish appropriate mechanisms for ensuring rational use of antimalarial medicines
7. Establish monitoring mechanisms for availability and use of antimalarials

The expected outcomes of the training course were to have:

1. Appropriate criteria in the selection of first- and second-line medicines and supplies applied
2. Good practices for the procurement of antimalarial medicines applied
3. Capacity for conducting an estimation of antimalarial medicine needs using appropriate methods and sources of data increased
4. Appropriate mechanisms for assuring quality of antimalarial medications applied
5. Appropriate mechanisms to ensure the effective distribution and uninterrupted supply of antimalarial medicines to health facilities established
6. Appropriate mechanisms for ensuring rational use of antimalarial medicines established
7. Mechanisms for monitoring the availability, quality and appropriate use of antimalarials established

The Training Course consisted of eight sessions:

Session 1: Introduction

Session 2: Selection

Session 3: Procurement

Session 4: Quantification

Session 5: Storage, Distribution, and Inventory Management

Session 6: Quality Assurance

Session 7: Rational Medicine Use

Session 8: Monitoring and Evaluation

The workshop sessions consisted of a combination of the following methods:

- Presentations
- Discussions
- Group Exercises
- Field visits

Participants made presentations to share experiences on particular aspects of implementation of their programs. Field visits were organized on the last day of the workshop to the <Pharmacie Nationale d'Approvisionnement> (PNA), <Laboratoire Nationale du Contrôle des Médicaments> and Mbao Health Center and Health Post respectively. Participants took the opportunity to apply the knowledge gained during the course to develop and apply indicators for monitoring and evaluation of various aspects of pharmaceutical management for malaria.

A representative from the Malaria Medicines Supply Service (MMSS) of the RBM Partnership in Geneva gave two presentations on 1) Availability and prices of ACTs and the role of MMSS in assisting countries through the procurement process and other procurement issues and 2) Rapid

Diagnostic Tests. He also answered questions and addressed the concerns of participants during the week.

Participants also developed a national improvement plan which they worked on throughout the week which will be used as the basis for follow up to evaluate the effectiveness of the course and to determine areas of technical assistance that may be needed to overcome any bottlenecks in the implementation process. To provide synergy between the GF/RBM workshop and the PMM workshop, the country plans were shared among the groups, particularly for countries that were represented at both meetings.

Mr. Mark Willis and Mr. Hans-Dieter Zweschper, Fund Portfolio Managers from the Global Fund, gave a presentation on relevant Global Fund issues and answered questions during this session.

Evaluations of the regional workshop showed a successful meeting, with great potential for investments in assistance across participating countries. Follow up among countries using the national improvement plans will allow for technical assistance to be provided in areas of need.

2. Participation in RBM Harmonization Meeting (Sunday 26th March, 2006)

Background

As more resources, such as the PMI, World Bank Booster Program, and Global Fund, are becoming available to help countries step up their efforts to control and prevent malaria, and as many countries move out of the stages of planning and small-scale pilot projects, there is a perceived need to harmonize efforts to achieve country-level scale-up and implementation of malaria-related activities. Colleagues and partners working in the HIV/AIDS area have accepted the principle of the “Three Ones”: One action framework; One national coordinating authority, and One agreed country-level monitoring and evaluation system. In this spirit, the RBM Partnership is undertaking efforts to mobilize partners around a similar set of concepts for malaria.

A Harmonization Task Force has been established to collect, compile, and where necessary, develop a “tool kit” of methodologies and strategies to help countries “scale-up for impact”. An electronic forum is already being used to help promote the exchange of ideas among interested partners, and The Global Fund’s planned workshop for West and Central African countries was felt to be an opportunity to bring partners together face-to-face for continued work in this area.

In this same time period, the Boston Consulting Group has been retained by the RBM Partnership to help in a “comprehensive re-engineering and re-commitment” process to help it reach its full potential.

Objectives

The efforts to combine this workshop with The Global Fund-led workshop resulted in a joint set of objectives:

“The meeting will generally provide countries/programs facing implementation challenges with a chance to discuss bottlenecks with

experts/members of the global partnership from various organizations/institutions involved in malaria control. The specific objectives are to:

- Enable recipient countries of the region to share successful experiences.
- Match operations for impact required?
- Facilitate access to necessary technical assistance to remove implementation bottlenecks.
- Create conditions for recipient countries to identify their needs and design responses (propose that countries arrive with an identification of their needs, given that it is only a 2-day meeting)
- Provide countries with an opportunity to discuss and harmonize available tools for scaling up for impact
- Explore harmonization niches and tools for greater impact and reduced transaction costs

RBM partners will use this meeting to plan for interventions aimed at responding to country identified needs.”

Activities

This one-day meeting was facilitated by the Boston Consulting Group (BCG), who led participants through a Strengths, Weaknesses, Opportunities and Threats (SWOT) analysis of 13 elements that have been identified as key areas to address in scaling up including Program Capacity; Health Structures; Diagnostic Issues; Global ACT subsidies; Taxes and Tariffs; etc.

The afternoon was devoted to work in groups, around the themes of program capacity; global subsidies and prequalification; and supply chain management and taxes and tariffs. RPM Plus participated in the last group. The topic of taxes and tariffs dominated the discussion that took place in this group. There was little time to discuss other issues around procurement.

During the plenary and wrap-up, it became clear that further work is needed to better define the role of the Taskforce and the deliverables.

In conclusion, the RBM Partnership Secretariat country support team will undertake to draft a set of terms of reference and to circulate among partners for feedback. Further work in this area is also linked with the ongoing consultancy by BCG and the re-definition of the role, structure, and organization of both the RBM Partnership and the Secretariat.

3. Participation in TGF/RBM Meeting (March 27-29, 2006)

Objectives and Outcomes

The global objectives and outcomes for this section of the combined workshop were as follows:

Objectives:

- To identify malaria programs' needs and formulate strategic plans to resolve implementation bottlenecks
- To facilitate countries' access to partners' assistance and discuss scaling up for impact
- To facilitate efficient allocation of resources to achieve scaling up for impact

Outcomes:

- Country specific activities to address bottlenecks are developed with RBM and other partners
- Mechanisms for provision of support are agreed between participating countries and RBM partners
- Recommendations to remove bottlenecks for impact are endorsed and adopted by participating countries and RBM partners

Activities

12 countries were represented: Benin; Central African Republic; DRC; Ghana; Guinea-Bissau; Guinea (Conakry); Liberia; Niger; Nigeria; Senegal; Sierra Leone; and Togo. National Malaria Program Managers, or their adjoints, from all of these countries were present, along with various representatives of either the Principal Recipient countries, Local Financial Agents (LFA) or the CCM.

The opening session was chaired by the Senegal Ministry of Health with speeches of representatives from USAID/Washington, RPM Plus, The Global Fund and The Roll Back Malaria Partnership Secretariat.

The intensive schedule for this workshop included a series of presentations in the morning, highlighting key theme areas in implementation that had been identified prior to the workshop through a series of discussions between The Global Fund, RBM, and RPM Plus, breakout group discussions focused on these areas and intensive work between partners and countries to better identify and articulate their needs, and to develop an action plan to address these needs.

The themes chosen included: managing policy shifts to ACTs; procurement and supply management; harmonizing reporting requirements; improving the performance of principal recipient organizations; and managing sub-recipients. RPM Plus and LMS had been scheduled to do two of the five presentations, and due to a last-minute request, ended up doing three out of the five presentations: ACTs; procurement and supply chain; and managing sub-recipients presented by Rima Shretta, Evan Lee and Catherine Severo.

RPM Plus inputs were related to:

- Recommendations for the RBM/GF agenda refinement and suggestions for having the RBM/GF meeting organized in the same facility as the RPM Plus Pharmaceutical Malaria management for increased synergies.
- RPM Plus speech for the opening session with the Senegal MOH, USAID/Washington, GF West and Central Team leader and the RBM Secretariat

- Presentations on ACT implementation and procurement and supply of malaria commodities with inputs for the subsequent working group sessions on the related subjects,
- Development of action plans for GF recipients: Senegal, Ghana and DRC
- Development of a framework for the meeting report with the design of “workshop tool kit” to guide the replication of the workshop in other regions and for the other technical domains (TB and HIV).

RPM Plus led the group work on procurement and supply management, and participated in the group discussion on management of sub-recipients, led by LMS. These were the two most “popular” groups, reflecting the importance and the difficulty that countries seem to be facing in these two areas. Many countries are still struggling with procurement of antimalarial drugs and related supplies, as well as identifying and managing sub-recipients.

It was clear during this workshop that participants welcomed the opportunity to work on both the issues related to pharmaceutical management as well as those related to organizational management.

The final action plans presented by countries (available separately) reflect the opportunities afforded by this workshop to formulate action plans that were both targeted and specific, yet inclusive of the broad range of areas that countries are facing in implementation of their Global Fund grants.

Major results of RPM Plus support in the GF/RBM meeting are related to the following elements:

- Consolidated action plans for PMM and RBM/GF meetings when appropriate with cross-meeting presentations and larger country partner interactions
- Direct information on TA to GF made available by the USG to remove GF implementation bottlenecks
- Direct interaction with GF LFAs, Principal Recipients and National Malaria Control Programs providing an opportunity to refine the RPM Plus action plans in Senegal, Ghana, Benin and DRC
- Suggestions obtained from GF to allow a potential successful submission by Mali who is still implementing its grant from Round One (prepare a letter presenting the solutions put in place to address the constraints identified by TGF and select a different Principal Recipient than the current implementer)
- Direct requests from Sierra Leone and Burkina Faso for the provision of technical assistance for pharmaceutical management
- Direct request from the UNILEVER Vice President for a joint intervention related to pharmaceutical distribution in Ghana building on their distribution system
- Direct request from the Global Fund to develop a case study on procurement and distribution issues in three countries (Nigeria, Guinea-Bissau and Ghana, to be confirmed)
- Development of formal and informal relations with the Global Fund portfolio managers, monitoring manager, EARS manager, operation manager and country support manager
- Extensive promotion of MSH/RPM Plus capabilities with the consolidation of its institutional image among country and global partners, including USAID/WARP and Washington/Africa Bureau

- Promotion of RPM Plus tools and approaches that can be made available for pharmaceutical management and leadership and management to address GF implementation bottlenecks

LMS, represented by Catherine Severo, contributed to promoting MSH expertise outside of pharmaceutical management, and had a direct influence in improving the organizational aspects of the meeting (development of guidelines and tools for presentations and work group sessions) with the opportunity to design a workshop tool kit that will help TGF for the organization of such meetings in other regions and for also TB and HIV.

An appreciation letter had been co-signed by the GF West and Central Africa team leader and Early Alert Response System Manager and sent to the MSH president with a copy to the different MSH staff members that were involved in the technical support. (attached in annex 4)

4. Review of country activities and MOU between PREMOMA and RPM Plus

Present: Jane Briggs, RPM Plus/MSH, Malick Diara, RPM Plus/MSH, Thidiane Ndoye, RPM Plus/MSH, Serigne Diagne, RPM Plus/MSH, Philippe Moreira, PREMOMA and Alioune Wade, PREMOMA

A meeting was held between RPM Plus and the PREMOMA to discuss the administrative and organizational arrangements for RPM Plus staff using the PREMOMA office and the results of the recent internal audit mission from Boston.

The different resolutions that will be adopted are to:

- Have more formal meetings between PREMOMA staff and RPM Plus staff to share information, exchange on activities and look for and synergy in their implementation
- Share monthly reports on both sides
- Share RPM Plus timesheets signed by supervisors with the PREMOMA Chief of Party for potential feedback and comments. Time sheets will need to have the activity codes included and will be submitted on a monthly basis.
- The RPM Plus staff will update their Human Resource files that will be held by PREMOMA administrative officer.
- Share the monthly action plans with planned expenses to have enough time for budget preparation and to mobilize funds as necessary by PREMOMA as they are insuring the financial support for RPM Plus local implementation costs.
- PREMOMA transportation means will be made available to RPM Plus staff as needed, depending on availability of vehicles and drivers.
- An office cell phone will be provided to Thidiane Ndoye and Serigne Diagne to allow continuous communication when they are traveling or after working hours. With a billing system, it will be easy to distinguish personal calls from those that are work-related.

During the discussion, the regional role of Thidiane Ndoye and the country focus of Serigne Diagne were reiterated with the latter being the point person for RPM Plus Senegal activities. Also, as Thidiane Ndoye is a member of CCM technical advisory group, a responsibility inherited from his previous organization and still maintained, he has the responsibility to update Dr. Diagne on the meetings and their contents.

Finally, the latest version of the Senegal workplan was reviewed for the activities being implemented or scheduled for implementation. Discussions were held on how to better support the already significant technical assistance provided by RPM Plus staff to the NMCP, knowing that both RPM staff had previous working relations or were class mates with the head of NMCP.

5. Provide an arrival briefing and/or departure debriefing to USAID upon request

Present: Elizabeth Benga-De, Mary Cobb/USAID/Senegal, Rima Shretta/ MSH/RPM Plus, Kathy Webb/MSH/RPM Plus, Thidiane Ndoye, MSH/RPM Plus, Serigne Diagne, MSH/RPM Plus, Malick Diara, MSH/RPM Plus, Jane Briggs, MSH/RPM Plus

An arrival briefing meeting was held with USAID/Senegal to brief USAID health team on the purpose of the RPM Plus mission. One of the main objectives of the visit was to facilitate the regional training course in pharmaceutical management for malaria which targeted 38 participants from the West African Region and to contribute to the GF/RBM meeting on implementation of malaria interventions. There was some discussion on the roles of Thidiane Ndoye and Serigne Diagne, ACT implementation bottlenecks in Senegal and other activities implemented by RPM Plus in the region.

6. Meeting with Dr Thior /PNLP Coordinator

Present: Dr Thior /PNLP Coordinator Senegal, Thidiane Ndoye, RPM Plus/MSH, Kathy Webb, RPM Plus/MSH, Malick Diara, RPM Plus/MSH and Rima Shretta/RPM Plus

A meeting was held with Dr Thior, PNLN Coordinator, to discuss RPM Plus technical assistance to ACT implementation in Senegal. A presentation was given on the activities the RPM Plus Malaria Team were implementing at the global level and particularly in West Africa. There was some discussion and clarification on the roles of Thidiane Ndoye as Regional Malaria Adviser and Serigne Diagne as Technical Adviser on Child Survival for Senegal, Dr. Diagne being the focal point for USAID mission.

There was some discussion on the recently received stock of ACTs, the concern of some parties about a possible excess stock which are due to expire in November 2007 and mechanisms to avoid wastage. RPM Plus suggested that it would try and facilitate discussions with TGF and explore the possibility of redistributing some of the ACTs to neighboring countries with an urgent need to use up this stock and avoid wastage. However, before this could be done, a detailed distribution plan that would outline the immediate needs of each region must be developed. There was also some discussion on the quantification methodology and the accuracy of the quantification that was completed prior to placing the ACT order.

The PNLN Coordinator expressed the need to be exposed to the experiences going on in East Africa on ACT implementation. He also asked for MSH/RPM Plus technical assistance on private sector training on new antimalarial treatment policies.

Next Steps

Immediate Follow-up Activities

PMM workshop

- Complete report
- Collect national improvement plans from countries
- Determine follow-up plan for selected countries for extended technical assistance, reflecting the needs that were identified in both the PMM and the GFATM/RBM workshops
- Continue discussions on in-country trainings using trainees from this course

GF/RBM meeting

- Explore response mechanisms to the GF requests for case studies in three countries: support to Senegal, Sierra Leone and Burkina Faso for GF implementation bottlenecks
- Finalize the RBM/GF report on behalf of The Global Fund
- Develop of a workshop tool kit to replicate the approach in other regions and for TB and HIV/AIDS

Senegal Program

- Formal meetings between PREMOMA staff and RPM Plus staff to share information, exchange on activities and look for and synergy in their implementation
- Sharing of the RPM Plus timesheets signed by their supervisors with the PREMOMA Chief of Party for potential feed back and comments
- Time sheets will have the activity codes included and will be submitted on a monthly basis.
- Update the RPM Plus staff on their Human Resource files which will be held by PREMOMA administrative officer.
- Sharing of the monthly planned expenses and reports to have enough time for budget preparation and mobilize funds as necessary by PREMOMA as they are insuring the financial support for RPM Plus local implementation costs.
- PREMOMA transportation means will be made available to RPM Plus staff as needed and depending on availability of vehicles and drivers.

Annex 1: Agenda for PMM Training Course

Day	Time	Activity	Presenter/Facilitator
Day 1	8:30–9:00	Registration	
	9:00–9:15	Welcome	MSH/RPM Plus
	9:15–9:45	Opening Ceremony	Senegal Ministry of Health representative; USAID Senegal Mission representative
	9:45–10:15	Introduction of presenters and participants	
	10:15–10:30	Break	
	10:30–11:00	Course overview	MSH/RPM Plus
	11:00–12:15	Session 1: Introduction to Management of Malaria Medicines and Supplies	MSH/RPM Plus
	12:15–13:00	Group Activity (Worksheet 1.1)	
	13:00–14:00	Lunch	
	14:00–14:30	Presentation of Group Activity (2 groups)	Group presentations
	14:30–15:45	Session 2: Selection	MSH/RPM Plus
	15:45–16:00	Break	
	16:00–17:00	Experiences with antimalarial medicine policy change and selection of first- and second-line treatment	Benin and Mali
Day 2	8:30–8:45	Plenary (questions and clarifications)	
	8:45–10:30	Session 3: Procurement	MSH/RPM Plus
	10:30–10:45	Break	
	10:45–11:00	Experience with GFATM procurement procedures	Senegal and Liberia
	11:00–13:00	Group Activity (Worksheet 3.1 Begin National Improvement Plan, country groupings)	
	13:00–14:00	Lunch	
	14:00–14:45	Procurement and availability of artemisinin-based combination therapies (ACTs)	Malaria Medicines and Supplies Service/Roll Back Malaria (RBM) Partnership
	14:45–16:15	Session 4: Quantification	MSH/RPM Plus
	16:15–16:30	Break	
	16:30–18:00	Group Activity (Worksheets 4.1 and 4.2)	

Day	Time	Activity	Presenter/Facilitator
Day 3	8:30–9:00	Plenary (questions and clarifications)	
	9:00–10:30	Session 5: Storage, Distribution, and Inventory Management	MSH/RPM Plus
	10:30–10:45	Break	
	10:45–11:00	Presentation by GFATM	GFATM representative
	11:00–11:15	Experience with implementation plan for ACTs	Ghana
	11:15–13:00	Group Activity (Worksheet 5.1)	
	13:00–14:00	Lunch	
	14:00–16:00	Session 6: Quality Assurance	MSH/RPM Plus
	16:00–16:15	Break	
	16:15–17:30	Group Activity (Worksheet 6.1)	
Day 4	8:30–8:45	Plenary (questions and clarifications)	
	8:45–10:00	Session 7: Rational Medicine Use	MSH/RPM Plus
	10:00–10:15	Break	
	10:15–11:15	Group Activity (Worksheet 7.1)	
	11:15–11:30	Experience with home-based management	Nigeria
	11:30–13:00	Continue to work on National Improvement Plan (country groupings)	
	13:00–14:00	Lunch	
	14:00–15:30	Session 8: Monitoring and Evaluation	MSH/RPM Plus
	15:30–16:00	Instructions for the monitoring and evaluation exercise (Worksheet 8.1)	
	16:00–16:15	Break	
	16:15–17:30	Group Activity (Worksheet 8.1, preparation for fieldwork)	

West Africa Regional Training on Pharmaceutical Management of Malaria, Dakar, Senegal, March 2006 and Participation in the Global Fund/Roll Back Malaria Meeting for West African GF Recipient Countries: Trip Report

Day	Time	Activity	Presenter/Facilitator
Day 5	8:30	Depart hotel for field visits (participants must be ready at 8:15 for a prompt 8:30 departure)	
	9:00–12:00	Fieldwork	
	12:30–13:30	Group Activity (Worksheet 8.1, preparation for presentation)	
	13:30–14:00	Lunch	
	14:00–15:00	Presentation of group activity	Group presentations
	15:00–15:15	Break	
	15:15–16:45	Continue to work on National Improvement Plan (country groupings-to be submitted to facilitators at the end of the day)	
	16:45–17:00	Closing Remarks and presentation of participant certificates	

Annex 2. Draft Agenda Harmonization (Methodology Tool Kit) Task Force Meeting

**Le Méridien President
Sunday 26 March, 2006**

Time	Subject	Presenter
9:00 - 9:15	Welcome, Self-Introduction of Participants, Meeting Objectives	RBM partnership Secretariat; partners
9:15 - 9:30	State of the RBM movement	RBM Executive Secretary
9:30 - 10:30	Brainstorming of major issues for the partnership work plan in 2006 to 2008 <ul style="list-style-type: none"> ▪ Completion of group SWOT analysis questionnaire ▪ Prioritizing issues for action 	Plenary discussion
10:30 - 11:00	Coffee/Tea	
11:00 - 12:30	Review of methodological approaches <ol style="list-style-type: none"> 1. Partnership global agenda <ul style="list-style-type: none"> • The global strategic plan • Yaoundé declaration • Global advocacy strategy/task force • Global subsidy • Support for procurement (PSM, forecasting) • Subregional joint work plan • Etc. 2. Partnership support to country partnership dialogue on strategic directions <ul style="list-style-type: none"> • Conceptual frameworks: <ul style="list-style-type: none"> ▪ AFRO- Strategic planning framework ▪ SUFI concept note • Opportunities <ul style="list-style-type: none"> ▪ Millennium project quick impact initiative ▪ Booster programme planning missions ▪ PMI planning missions ▪ MACEPA programming support programme 3. Good practice for effective country action- Tool Kit <ul style="list-style-type: none"> • Community response • Strategic communication • Private sector engagement • Costing tools • Human resource capacity assessment tools - etc 4. The challenge of harmonization <ul style="list-style-type: none"> • Resource envelope • SCM • M&E 	Plenary discussion
12:30 - 14:00	Lunch	
14:00 - 14:30	Building the framework for the partners work plan <ol style="list-style-type: none"> 1. Review of 2003, draft work plan framework 	Plenary discussion

Time	Subject	Presenter
	2. Develop planning time chart	
14:30 - 15:30	Commitment to SUFI - <ul style="list-style-type: none"> ▪ how to ensure adequate commitment to SUFI? Planning needs and processes for scaling up for impact <ul style="list-style-type: none"> ▪ Review existing tools and experience to date Implementation needs, obstacles and processes for resolving these issues <ul style="list-style-type: none"> ▪ Review existing tools and experience to date Supporting environment for scaling up for impact <ul style="list-style-type: none"> ▪ What is required for existing partners to support SUFI and the “Three Ones”? 	Group sessions
15:30 - 16:00	Coffee/Tea	
16:00 - 17:00	Groups report back to plenary, match needs and obstacles to existing tools, identify gaps What can be done with existing tools?	Groups + Plenary discussion
17:00 - 17:30	Review and agree TOR for the planning task team Geographic mapping of support and potential support to countries	Plenary discussion
17:30 - 18:00	Strategy for West and Central African Country Meeting, Next steps for the task force, follow-up actions What can we offer to countries at the RBM Partnership Secretariat/GFATM meeting? Develop a strategy for the meeting	Plenary discussion

Questions to be considered during this workshop

- What are the lessons from the past five years?
- What is needed for the next five years (especially considering the need for scaling up)?
- What is the Global Capacity to support countries?
- How many countries can be supported per year?
- How do we increase this capacity?
- Is there a broader role for the task force in providing on-going support to countries?
- What should a toolkit contain?
- How can we make it as useful as possible?
- What current structures can facilitate the provision of assistance to countries (subregional networks, ICP, country partnership advisers, others?)
- Identify partners that can assist countries

Annex 3. TGF/RBM Meeting Agenda

TGF/RBM West and Central Africa Regional Malaria Workshop

Dakar, Senegal 27-29 March 2006

Objectives:

- To identify malaria programs' needs and formulate strategic plans to resolve implementation bottlenecks specific to Global Fund grants
- To facilitate countries access to Technical Assistance and discuss scaling up for impact
- To facilitate the efficient allocation of resources to achieve scaling up for impact

Outcomes:

- Malaria implementation needs are identified and country specific activities to address bottlenecks are developed with RBM and other partners to allow GF milestones to be met
- Mechanisms for provision of support are agreed between participating countries and RBM partners
- Recommendations to remove bottlenecks for impact are endorsed by and adopted by participating countries and RBM partners

Day 1: Monday 27 March

Chairman of Session: _____

8:30 – 9:30

Welcome to Participants, Introduction, Meeting Objectives

Global Fund, Roll Back Malaria (RBM) and the United States Agency for International Development (USAID)

Welcome Address

Minister of Health Senegal

Presentation of Participants

Methodology and Meeting Overview

Overview of Global Fund Malaria Programs in West and Central Africa

Global Fund

09:30-10:00

Session 1: Achieving greater impact

Plenary Presentations:

- i. Thinking for impact: Managing policy shifts from current treatment to ACTs

Country: *Ghana*

Partner: *RBM Partnership Secretariat*

10:00 – 10:30:

Coffee break

10:30 – 11:15:

Plenary Presentations (continues)

- ii. Managing for impact: Procurement and supply management systems. Distributing to reach the poor

Country: *Niger*

Partner: RPM+

Plenary Presentations (continues)

- iii. Measuring impact: Harmonizing reporting requirements and systems

Country: Benin

Partner: Malaria Consortium

11:15 – 12:45:

Group Work

Referring to presentations and country experience, identify key challenges and responses.

Country and partner delegations to split into three Theme Groups.

12.45 – 13.45: Lunch

Chairman of Session: _____

13:45 – 14:15

Working Groups report to Plenary. Plenary discussion

Each Working Group will present a 5 minute summary of their group's findings.

14:15 – 14:45

Session 2: Managing for scaling up

Plenary Presentations:

- iv. Towards performing PR organizations. Managing programs that work

Country: Senegal

Partner: LFA: PWC Ghana

- v. Mobilizing local actors for scaling up. Developing capacities and managing national and local organizations to scale up malaria interventions

Country: Central African Republic

Partner: MSH

14:45-16:15

Group Work

Referring to presentations and country experience, identify key challenges and responses. Country and partner delegations to split into Theme Groups. There will be four working groups, two per each theme in French and English respectively.

16:15-16:30 Coffee Break

16:30 – 17:00

Groups Report to Plenary

Each Working Group will present a 5 minute summary of their group's findings.

17:00-17:30

Plenary discussion

17:30 – 19:00

Meetings between Fund Portfolio Managers and Country delegations

Day 2: Tuesday 28 March

Chairman of Session: _____

- 09:00 – 09:15 **Report and feedback from Day 1, Summary of Tuesday Activities**
- 09:15 – 10:00 **Session 3: Partners Forum: Recent developments and resources for scaling up malaria interventions**
- RBM
TGF
USAID/WARP
WHO
WB booster
- 10:00-10:15 **Q&A**
- 10.15 – 10:45 Coffee Break**
- 10:45-11:30 **Partners Forum (continues) (Listed in alphabetical order. List not confirmed)**
- AFDB
DFID
MACEPA
Millennium quick impact project
RPM+/MSH
USG, PMI
- 11:30-11:45 **Q&A**
- 11:45- 12:15 **Harmonization for scaling up and QA** (*Harmonization task force chair*)
- Presentation:** Summary of results of the Harmonization Task force meeting. Update on the toolkit of Malaria tools for greater impact and reduced transaction costs.
- 12:15-12:30 Nigeria, 2006-2010 RBM Strategic Plan

12.30 – 14.00: Lunch

Chairman of session: _____

- 14:00 – 16:00 **Session 4: Development of Countries Activities/Work Plan for scaling up for impact**
- Group work** Identify bottlenecks to scaling up for impact and partners that assistance
- Each country works with its delegation and is assisted by a partner in developing a country action plan to:
- a. address bottlenecks and apply solutions identified in the workshop
 - b. consider options for scaling up and available assistance from partners
- Countries should prepare a plan of action for overcoming existing impediments to accelerated grant implementation and scaling up.
- Countries will be asked to prepare a short summary of their main action points that to be presented in the plenary of Day 3.

West Africa Regional Training on Pharmaceutical Management of Malaria, Dakar, Senegal, March 2006 and Participation in the Global Fund/Roll Back Malaria Meeting for West African GF Recipient Countries: Trip Report

16:00 – 16:30 **Coffee Break**

16:30 – 17:30 **Group work continues**

17:30 – 19:00 Meetings between Fund Portfolio Managers and Country delegations

Day 3: Wednesday 29 March

09:00-9:15	<i>Chairman of Session:</i> _____ Report and feedback from Day 2 Summary of Wednesday Activities
09:15-10:30	Group Work continues
10:30 – 11:00	Coffee Break
11:00-12:30	<i>Chairman of Session:</i> _____ Session 5: Open Session Brief country presentations of Plans of Action and discussion to identify shared challenges and solutions (9 countries, 5-7 minutes each)
12:30 – 14:00:	Lunch
14:00-15:00	Open Session (continues): Brief country presentations of Plans of Action and discussion to identify shared challenges and solutions (6 countries, 5-7 minutes each)
15:00-15:30	Session 6: Workshop Review and Emerging issues: Identify the key learning experiences from the workshop and agree on the way forward
15:30 - 16:00	Coffee Break
16:00 – 16:30	Official Closure of Workshop

Annex 4. Letter from TGF to MSH

Geneva, 13 April 2006

Dr. Jonathan Quick
Management Sciences for Health (MSH)

Dear Dr. Quick

We are writing to extend our sincere appreciation for all that MSH staff, especially colleagues of Rational Pharmaceutical Management (RPM) Plus and Leadership, Management, & Sustainability (LMS), did to help make the joint RBM and Global Fund Malaria Regional Workshop held in Dakar Senegal on 27-29 March such a success.

MSH's involvement and contribution from the early planning of the Regional Workshop and throughout its implementation is a good example of constructive collaboration among partners. MSH staff assisted Global Fund successfully on both technical issues regarding malaria program implementation as well as on the art of workshop facilitation and group dynamics.

As result of this collaboration, we are looking forward to develop a number of joint products including: Three case studies on implementation of malaria programs in Ghana, Nigeria and Guinea Bissau; Follow up of selected country action plans to accelerate malaria programs implementation and; A feedback report compiling lessons learned from this workshop and recommendations for improvements as we consider replication of this initiative in other regions.

Thank you again for your valuable involvement in our worldwide fight against malaria and we hope that we may continue similar collaborative efforts with your staff in the near future.

Sincerely,

Mabingue Ngom
West and Central Africa

Duncan Earle
Operations Partnership and Country Support

Annex 5. Photographs taken during the PMM course

PHARMACEUTICAL MANAGEMENT MALARIA (PMM) PARTICIPANTS VISITING THE SENEGAL CENTRAL MEDICAL STORES FOR PRACTICAL MONITORING EXERCISE



Deputy Chief Pharmacist of the Senegal Central Medical Store responding to queries from the PMM participants



Artemisinin Combination Therapy delivered by WHO to the Senegal MOH, using the GF grant resources



Translation of questions asked by the PMM participants (mainly Central Medical Store managers) to the Deputy Chief pharmacist



Working group session with the PMM participants for the compilation of the proposed CMS monitoring indicators

PHARMACEUTICAL MANAGEMENT MALARIA (PMM) PARTICIPANTS VISITING THE MBAO HEALTH CENTER FOR PRACTICAL MONITORING EXERCISE



Course participants at Mbao Health Center collecting information on inventory management



Patients waiting at Mbao Health Center



Participants at Mbao Health Center collecting information on malaria cases



Dispensary at Mbao Health Center