

Identification and Reporting of Drug Stockouts at Country Level

A Technical Agency Perspective

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Outline

- Union approach in country
- Country example
- Challenges
- Suggested responses



Union Approach to TA

- Traditionally based on MOU with Government to visit program two times each year with remote support
- Visits include central program review and field visits to provincial/district/health centre level
- Review of all program aspects including drug supply/distribution issues – detail of review variable



Identification of drug supply/distribution issues

- During site visits
- Routine communication with program
- Through other projects/activities e.g. FIDELIS



Recent concerns

- Drug supply/distribution issues increasingly raised by Union consultants in reports and during technical meetings
- Drug supply/distribution issues identified during site visits with no prior notification by program



DRC

- Technical visit of Jan-Feb, 2010
- Stock outs of RH in several health centres for 2-3 months; health staff modifying regimen to prevent treatment interruption (RHE)
- Multiple causes (budget allocated through GF insufficient to cover needs, lack of coordination between local actors, no buffer stock, delivery delay, deficient distribution system at country level)
- Further shortages in mid-2010 likely



Union Response

- Recommendations to Minister of Health, NTP regarding future financing, drug management
- Communication with other partners, including GDF, Damien Foundation Belgium, GFATM Portfolio Manager
- Secure support through Union's TB CAP project to finance drug distribution costs



Zimbabwe

- Technical visit(s) during 2009
- Direct observation of stock outs of main first line drugs
- Very unbalanced supply at all levels visited
- Many expired drugs
- Multiple causes (lack of ordering, lack of supervision to detect near stock-out situation and lack of transport)



Union Response

- Recommendations to NTP regarding future drug management, program supervision
- Communication with other partners responsible for supply chain support in country
- Secure additional support through Union's TB CAP project for financing for increased program supervision



Uganda

- Technical visit(s) during 2009 and country office presence
- Direct observation of stock outs of main first line drugs at all levels in May- September 2009
- Multiple causes (TB drug orders integrated into general essential medicine orders every two months, quantification problem, GFATM financing issues resulting in delayed payment to GDF, lack of good distribution system in country, weak supervision)



Union Response

- Recommendations to NTP regarding future drug management, program supervision
- Communication with other partners (e.g. GDF)
- Provide support through Union's TB CAP project for increased program supervision and support
- Anticipate additional stockouts in 2010 - ?action



Challenges/unresolved issues

- Reliance on external (and often single) donor for drug supply, Timing for disbursement in the procurement cycle not always good.
- HR capacity/limitations at NTP to address all program components
- Lack of coordination among local stakeholders involved in TB procurement
- Reluctance of programs to flag drug shortages until too late
- Failure of partners to help countries to early detect near stock-out situations and follow up on crisis management



Challenges/unresolved issues

- How will programs manage SLDs?
- What is role of abandonment of drug orders based on quarterly case finding report?



Global Response

- Increased awareness - it is unacceptable to have drug stock outs at any level
- Mechanisms for early notification of drug supply issues – indicators should be put in place and analyzed
- Swift response to address immediate shortages or pending stock outs from all partners
- Follow-up country review of stock outs and causes and recommendations for actions to avoid similar situations in future



Global Response

- Global overview of common **potential** causes leading to drug supply issues and recommendations for future actions
- Watch list of 'fragile' countries receiving extra attention/support



Summary

- Drug supply issues/shortages are not exceptional occurrences
- There is no single cause or solution
- Collective responsibility
- More attention is warranted to rapid identification, immediate responses and comprehensive reviews of drug shortages

