

Management Sciences for Health  
Rational Pharmaceutical Management Plus  
Program (RPM Plus)

Support to Malaria Control in Angola  
US President's Malaria Initiative  
FY07 funding

Scope of Work

**Draft for Discussion with  
USAID/Angola**

**Revision: March 2007**

## **Background**

Malaria is a major cause of morbidity and mortality in Angola and the government considers control of the disease a very high priority. According to NMCP data, the reported number of malaria cases was about 2.5 million per year between 2001 and 2005 with a peak of 3.24 million cases in 2003. Two-thirds of the cases occur in children under 5 years of age, and about 38,000 malaria-related deaths. The disease accounts for 35% of the overall mortality in children, 25% of the maternal mortality and is the cause of 60% of hospital admissions for children under five and 10% for pregnant women. Anemia due to malaria is a major cause of morbidity and mortality in both children and pregnant women and malaria is a leading cause of low birth weight in the newborn.

Angola was selected as one of three countries to receive funding during the first year of the President's Initiative on Malaria (PMI). The objective of this initiative is promote the rapid scale up of malaria programs and increase coverage of vulnerable groups primarily through four highly effective interventions: artemisinin-based combination therapy (ACT), intermittent preventive treatment (IPT) for malaria in pregnancy, insecticide-treated mosquito nets (ITNs), and indoor spraying with residual insecticides (IRS). It is expected that the activities funded by PMI will support the existing strategies and plans of the National Malaria Control Program (NMCP) and will complement the funding and efforts of other donors.

In August 2005 USAID/PMI conducted an assessment to identify appropriate areas for PMI investment in Angola. An important consideration was the Global Fund grant obtained by Angola to support the national malaria control program and procure and distribute 1.1 million ACTs. The treatments were distributed in 9 of the 18 provinces in Angola but preparations to appropriately receive, distribute, manage and use the ACTs at the health facility level and in the distribution system were never completed. RPM Plus recommended the integration of ACT management into the Essential Drug Program (EDP) system with the subsequent adaptation of their procedures and tools to train the health agents. RPM Plus also drafted an ACT distribution plan and proposed strategic approaches to finalize the plan with PMI partners, including a coordinated procurement and distribution system, the consolidation of the pharmaceutical information system and support to the national medical stores, Angomedica. These recommendations and efforts provided by RPM Plus have laid the ground for the appropriate receipt and distribution of ACTs procured through PMI in 2007.

### **RPM Plus Technical Objective and Rationale**

The overall strategic objective for malaria under RPM Plus “*Strengthened health systems for the appropriate management of malaria*” supports the USAID/Bureau for Global Health (BGH) SO5 “*Increased use of effective interventions to reduce the threat of infectious diseases of major public health importance*”. RPM Plus aims to support the foreign assistance framework and several malaria indicators (IIP 1.3) .

### **Objective 1: Improve the management and use of antimalarials**

The appropriate management and use of antimalarials are essential to ensure continuous availability and to curb malaria morbidity and mortality while reducing the development of resistance. Good pharmaceutical management practices have been defined for all major components of the supply cycle, from selection of medicines, quantification of needs, procurement, storage and transportation, prescribing and dispensing. In Angola, RPM Plus will support on-going activities to improve public sector management of essential medicines while ensuring that the specific requirements for the management of ACTs under the PMI program are accommodated.

## **Proposed Activities**

### **1. Technical Activity Coordination and Monitoring**

This activity includes technical activity coordination, work plan development, budget monitoring, progress monitoring, reporting, meetings, and communications with partners and collaborators. RPM Plus will support PMI activities in Angola through a local staff member supported by short term technical assistance provided by the RPM Plus staff based in the region as well as in RPM Plus headquarters from Arlington, Virginia, USA.

### **2. Port clearance of PMI procured ACTs for Angola**

PMI ordered 1 million USD of ACTs in 2006 and requested RPM Plus support for port clearance of the shipment. The ACTs were ordered through the Malaria Medicines Supplies and Services and delivered in Luanda Airport. RPM Plus will subsequently insure the clearance of the shipment from the airport with a local company and insure its delivery at Angomedica in coordination with the National Committee for Reception of medicines and commodities.

### **3. Training of the health agents in Coartem Management in support of the appropriate use and availability of ACTs and other essential medicines.**

The Government of Angola adopted the RPM Plus recommendation of integrating ACT management into the Essential Drug Program (EDP) system. As a consequence, the ACT management responsibilities were transferred from the NMCP to the EDP. RPM Plus facilitated such transition by working with EDP to adapt their training materials, tools and procedures for ACT management integration into the EDP system. The target audience includes the health agents prescribing and managing ACTs in health centers as well as the personnel that are managing the provincial warehouse and supervising the health facilities. Training activities will start with a training of trainers activity followed by provincial level trainings to be implemented by PMI partners.

RPM Plus will work with the EDP and NMCP to finalize the training materials. RPM Plus will also coordinate with other USAID PMI partners, in particular MENTOR, and the bilateral project EHSP for implementation of the training activities.

#### **4. Develop, implement and monitor ACT storage and inventory management procedures at Angomedica.**

While integrating ACT management into the EDP system at the provincial level, the same process is needed at the national level. Initially ACTs were stored at Angomedica with limited involvement from EDP to support inventory management. The EDP is now fully responsible for the storage and distribution of the ACTs and have three persons based at Angomedica. However, the required procedures for appropriate ACT reception, storage, inventory and delivery at Angomedica are not in place. Such support will be jointly conducted with EHSP/Chemonics, the USAID bilateral responsible for providing support to the MOH for TB, Reproductive Health and malaria procurement and distribution.

Under this workplan RPM Plus will assess the current inventory and stock management procedures, tools and information system. Based on this, RPM Plus will develop the ACT procedures, tools and reporting mechanisms and on site train the EDP agents in charge of these tasks at Angomedica. The RPM Plus local staff person will conduct regular on-site support and monitoring at Angomedica of the ACT stocks.

#### **5 - Track ACT distribution and consumption from national to provincial and health facility levels**

In provinces supplied with ACTs, stocks-outs of ALU blister packs of 18 and 24 tablets have been reported while overstocks of ALU blister packs of 12 have occurred in several health facilities. Tracking ACT consumption at the health facility level with periodic information about the stock situation are key elements for adequate quantification for procurement and distribution, will help avoid wastages due to product expiration and overstocking. UNDP/GF has already developed a reporting form for such purpose and the adoption of the revised EDP materials that integrate ACT management procedures and reporting will provide the required information. RPM Plus will revise these forms to include ACTs and then support EDP to disseminate them as well as to ensure that they are correctly implemented. RPM Plus will also participate in provincial site visits with EDP, NMCP and partners

#### **6. Conduct ACT quantification and distribution planning for scale-up of PMI.**

A coordinated approach for procurement and distribution of ACT is key in Angola as growing numbers of donors and initiatives work with national governments to scale-up access to ACTs. A national coordination mechanism is being put in place through the

national malaria partners' forum with potentially a working group to facilitate effective procurement and distribution, including quantification.

Under this workplan, RPM Plus will support this effort by contributing to the collection and dissemination of information on the status of ACTs among partners and its use to adjust ACT distribution and procurement efforts. RPM Plus will help to organize and conduct a quantification exercise based on the MOH guidelines for health facility inclusion (hospitals, health centers, health units and community levels), geographic scale up (full coverage of the 9 focus provinces followed by the inclusion of the remaining ones) and requirements for biological diagnosis (microscopy and/or rapid diagnostic tests).

## Angola Performance Monitoring Matrix

Activities	Products	Outputs	Outcomes	Primary HPSS IRs*	Secondary HPSS IRs*	BGH IRs* SO5	Foreign Assistance IIP
1. Technical activity coordination and monitoring	Work plan, activity report, partners, and team coordination minutes	Work plans, reports, and coordination minutes produced	Effective coordination and reporting with team and partners	IR1 IR3 IR5	IR 3.1 IR 3.2	5.2, 5.3 5.4	NA
2. PMI procured ACT port clearance	1. Contract with shipping agent 2. Delivery documents EDP/Angomedica 3. Reports	1. ACTs delivered at Angomedica	ACTs available for distribution	IR3	IR 3.1 IR 3.3 IR 3.5	5.1 5.2 5.3	1.3.4 1.3.8
3. Training of health agents in ACT management	1. Training modules 2. Training of trainers materials 3. Training reports	1. Trained pool of trainers 2. Health agents trained	Reduced risk of stock-out and overstocks at the HF and provincial levels.	IR 2, IR 3	IR 2.3, IR2.4 3.1, 3.5	5.1 5.2 5.4	1.3.3? 1.3.7
4. Improve ACT stock and inventory management at Angomedica	1. Assessment need report 2. Planning of the intervention with EDP 3. Procedures and tools	1. Inventory management needs identified 2. Improvements programmed with EDP 3. Procedures and tools implemented	Inventory available for distribution at Angomedica and availability improved at health facilities	IR 2, IR 3	2.3, 2.4 3.1, 3.5	5.1 5.2 5.4	1.3.3? 1.3.7 1.3.9
5. Tracking ACT distribution and consumption	1. ACT distribution and consumption reports 2. Supervision reports 3. Periodic analysis of stocks & distribution	1. EDP and provincial staff trained in ACT reporting & analysis 2. EDP staff supervised for ACT distribution 3. distribution and consumption reported	MOH, donors, and PMI partners have better information for making procurement and distribution decisions.	IR 2, IR 3 IR 5	IR 2.3, IR 2.4 IR 3.1, IR 3.5	5.1 5.2 5.4	1.3.3? 1.3.7 1.3.9

\* Refer to the M&E Reference Binder for a list of Health Policy and System Strengthening (HPSS) Intermediate Results (IRs), Bureau of Global Health (BGH) IRs, and Principle Areas of Work (PAWs)

<b>Activities</b>	<b>Products</b>	<b>Outputs</b>	<b>Outcomes</b>	<b>Primary HPSS IRs*</b>	<b>Secondary HPSS IRs*</b>	<b>BGH IRs* SO5</b>	<b>Foreign Assistance IIP</b>
6. Support national coordination and planning for ACT procurement and distribution	<ol style="list-style-type: none"> <li>1. ACT stock situation &amp; distribution reports</li> <li>2. ACT quantification</li> <li>3. ACT distribution plan</li> <li>4. meeting minutes</li> </ol>	<ol style="list-style-type: none"> <li>1. informed coordination committee on ACT</li> <li>2. ACT quantification done with partners</li> <li>3. ACT distribution plan updated with partners</li> </ol>	ACT procurement and distribution improved	IR 2, IR 3, IR 5	2.3, 2.4, 3.1, 3.5	5.1, 5.2, 5.4	1.3.7

**Rational Pharmaceutical Plus Program Support to Malaria Control in Tanzania under the US President's Malaria Initiative  
Program Activity Matrix.**

<b>Act. #</b>	<b>Activity</b>	<b>Partners and Collaborators</b>	<b>Staff</b>	<b>Travel (Per Diem Days)</b>	<b>Significant Expenses</b>	<b>Total Cost</b>
<b>1</b>	Technical activity coordination and monitoring	PMI and partners	M. Diara M. Miralles SPA	NA	Staff time	\$ 50,000
<b>2</b>	PMI procured ACT port clearance	USAID, EDP, Shipping agent	Alan Rogosch Malick Diara	NA	Clearance fees	\$ 50,000
<b>3.</b>	TOT and training of health agents in ACT management	NMCP, UNDP EDP, Chemonics, WHO, MENTOR, PMI and partners	Thomas Moore Gustavo Bastos SPA	2 trips of 15 days for two persons (\$40,000)	3 trainings with training materials (\$75,000)	\$ 140,000
<b>4</b>	Improve ACT store and inventory management procedures at Angomedica	NMCP, UNDP EDP, Chemonics, WHO, MENTOR, PMI and partners	TBD SPA	One trip of 15 days (\$10,000)	Inventory management tools	\$ 100,000
<b>5</b>	Support tracking ACT distribution and consumption	NMCP, UNDP EDP, Chemonics, WHO, MENTOR, PMI and partners	TBD SPA	Two trips of 20 days (\$24,000)	Site visits and tracking tools	\$ 100,000
<b>6.</b>	Coordination and planning for ACT procurement and distribution, including quantification	EDP, NMCP, PMI staff and National Forum for malaria partners	M. Diara M. Miralles SPA	one trip of 15 days (\$10,000)	Site visits, participation to meetings	60,000
<b>Grand Total Cost</b>						<b>\$500,000</b>