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Snapshot

Health Post Resupply Initiative to Address Commodity Management Skills of Health Extension Workers



Andualem Tessema, storekeeper at Bussa Health Center, provides on-the-job training for Megertu Birhanu, a health extension worker at Yebu Health Post in Ethiopia.

“Since starting to use inventory control system to record and report the consumption, we never face stockout.”

—Megertu Birhanu, health extension worker at Yebu Health Post

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Megertu Birhanu, a health extension worker (HEW) at Yebu Health Post, 115 km southwest of Ethiopia’s capital Addis Ababa, receives medical supplies and contraceptives from Bussa Health Center. In the past, Megertu requested supplies only when the health post faced a stockout. No one ever asked her to monitor the health post’s stock situation, and she had no training on how to keep track of supplies.

According to Megertu, these practices created a lot of problems, including shortages of drugs and medical supplies, waste because of expiries, and client dissatisfaction and frustration when supplies ran out. As Yebu Health Post is one of about 12,000 existing health posts, and soon to be one of 15,000 when the Ministry of Health completes its health post building program, the lack of supply management clearly presents a significant problem.

In early 2011, the USAID | DELIVER PROJECT (the project), in collaboration with Pharmaceutical Fund and Supply Agency (PFSA)—the government entity responsible for the supply of health commodities to the public sector and regional health bureaus (RHBs)—began teaching health post workers to manage drugs and medical supplies and to work with the nearby health centers to get the needed products a regular basis. HEWs are a key component of the government’s strategy to improve access to essential health services, including family planning, through a comprehensive health extension program.

In a series of carefully designed and tested interventions, collectively called the Health Post Resupply Program, the project is improving inventory management by introducing bin cards and designated storage areas, monthly recording of stock on hand, and a simple reporting format to share with the health center for monthly resupply.

By introducing simple storage and stock management practices, the new program enables health posts to get the drugs and medical supplies they need every month. An HEW brings the monthly

report to the storekeeper at the nearest health center, who then calculates how many supplies are needed and gives those supplies to the HEW to bring back to the health post. At the health post, the supplies are recorded into the inventory, ready for use.

The Health Post Resupply Program was pilot tested at the Dire Dawa City and the Harari RHBs, as well as in selected health posts in West Oromia, like Yebu. The project trained 216 health extension supervisors and storekeepers to provide on-the-job training to HEWs who work under their guidance. With the help of the trainers and job aids in three languages, the HEWs learned basic supply management tasks; three posters, displayed at each health post, reinforce the basic tasks.

At Yebu Health Post, Megertu said, “after receiving on-the-job training from the health center storekeeper, I have started using bin cards and can prepare the monthly report for the health center. Since starting to use these forms to record and update the consumption, we never face stockout.” Andualem Tessema, the storekeeper at Bussa Health Center, which provides supplies to Yebu Health Post, had these comments on the new program, “Previously we had big problems with how to supply and monitor the [health post] supplies, as we didn’t have reports on the consumption. HEWs requested [supplies] without having consumption data. However, after the initiative, they regularly monitor their stock status and use updated bin cards to prepare their reports for resupply.”

This new initiative has achieved considerable success in a short time, and rapid scale-up is being planned with PFSA and RHBs for 2011–2012. The Tigray region began its training roll-out in June 2011, and the project and other RHBs are currently negotiating joint plans to initiate the new Health Post Resupply program. With improved commodity management and resupply procedures for health posts, HEWs and community health workers will have greater access to drugs and medical supplies and will be able to offer more effective family planning, prevention, and related services to their communities.

The USAID | DELIVER PROJECT, in collaboration with PFSA, helps to improve the logistics system that supplies drugs and medical supplies to Ministry of Health facilities in Ethiopia. Key elements include the information-focused Integrated Pharmaceutical Logistics System and a new approach to distribution, which focuses on direct delivery by PFSA to hospitals and health centers. These efforts are bringing significant changes and steady improvements to the health care supply chain.

The USAID | DELIVER PROJECT, Task Order 4, is funded by the U.S. Agency for International Development, and implemented by John Snow, Inc. The project improves essential health commodity supply chains by strengthening logistics management information systems, streamlining distribution systems, identifying financial resources for procurement and supply chain operations, and enhancing forecasting and procurement planning. The project also encourages policymakers and donors to support logistics as a critical factor in the overall success of their health care mandates.

The authors’ views expressed in this publication do not necessarily reflect the views of the U.S. Agency for International Development or the United States Government.

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