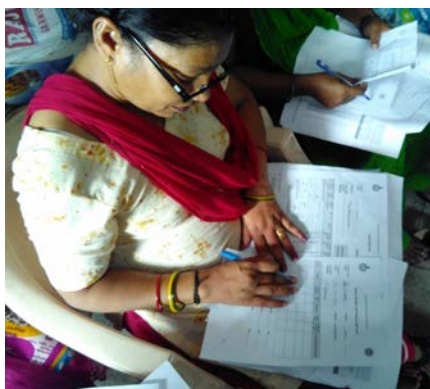




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# DELIVER PROJECT

## Applying Private-Sector Best-Practices to Public Health Supply Chains



Multipurpose health worker Ms. Aruna completes LMIS forms during the SOP roll-out training at the Samlehri primary health center.

**"SOPs are very helpful in the current situation of Jharkhand... the logistics management information system forms are very useful."**

— Jharkhand State Cold Chain Officer Mr. Neelranjan

### JULY 2015

This publication was produced for review by the U.S. Agency for International Development. It was prepared by the USAID | DELIVER PROJECT, Task Order 4. HIV-related activities of Task Order 4 are supported by the President's Emergency Plan for AIDS Relief.

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Well-functioning public health supply chains improve program outcomes, quality of care, and cost-efficiency. Each component of the supply chain process requires that standard operating procedures (SOPs) are developed and adhered to.

Supply chain management core functions—procurement, distribution, storage, reporting—require staff to follow certain procedures for the system to work. SOPs must be outlined in a document that provides detailed instructions on how to perform tasks so that employees can complete them correctly and consistently.

Appropriately designed and continuously reviewed SOPs are the backbone of highly functional private-sector supply chains. Consider the automobile and fast-food industries: shortages and stock-outs are virtually unknown. Yet public health commodities (vaccines, vitamins, family planning supplies, etc.) are far more important than an endless supply of junk food or a fleet of luxury cars. Recognizing this, the USAID | DELIVER PROJECT has taken a private-sector approach to document existing supply chain processes in the four Indian states of Haryana, Himachal Pradesh, Jharkhand, and Uttarakhand. The project worked with each state health mission to design SOP manuals to ensure that correct forms, records, and operations would be used to improve last-mile availability of essential medicines, particularly reproductive, maternal, newborn, child, and adolescent health (RMNCH+A) 5x5 commodities.

Before it could make recommendations about how the public health supply chain could improve, the project needed to understand what was working—and how, why, and who made it work—at each level.



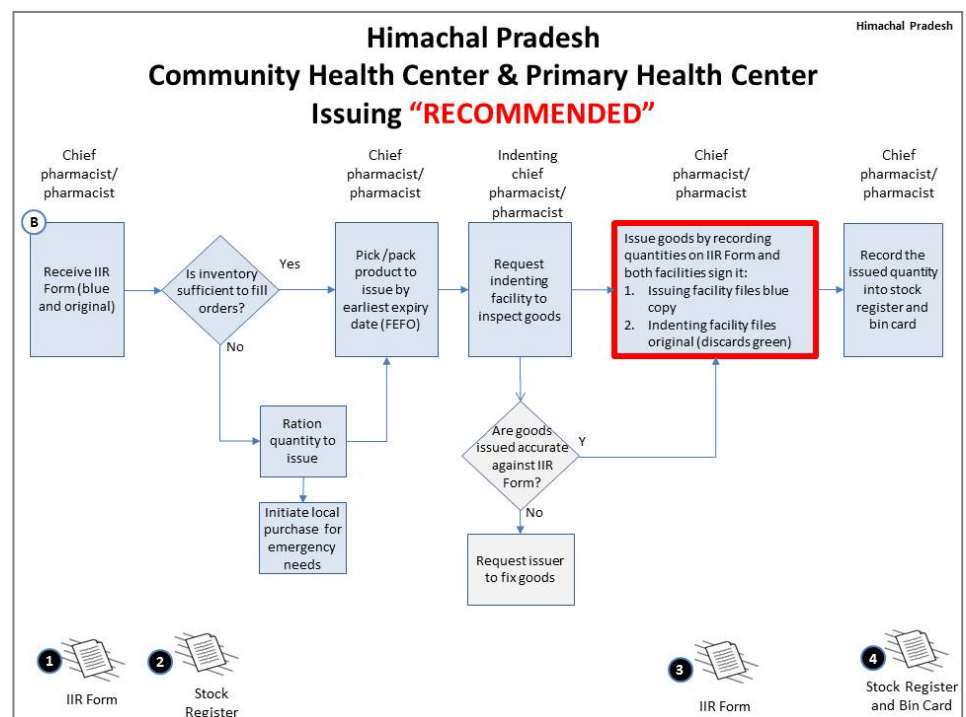
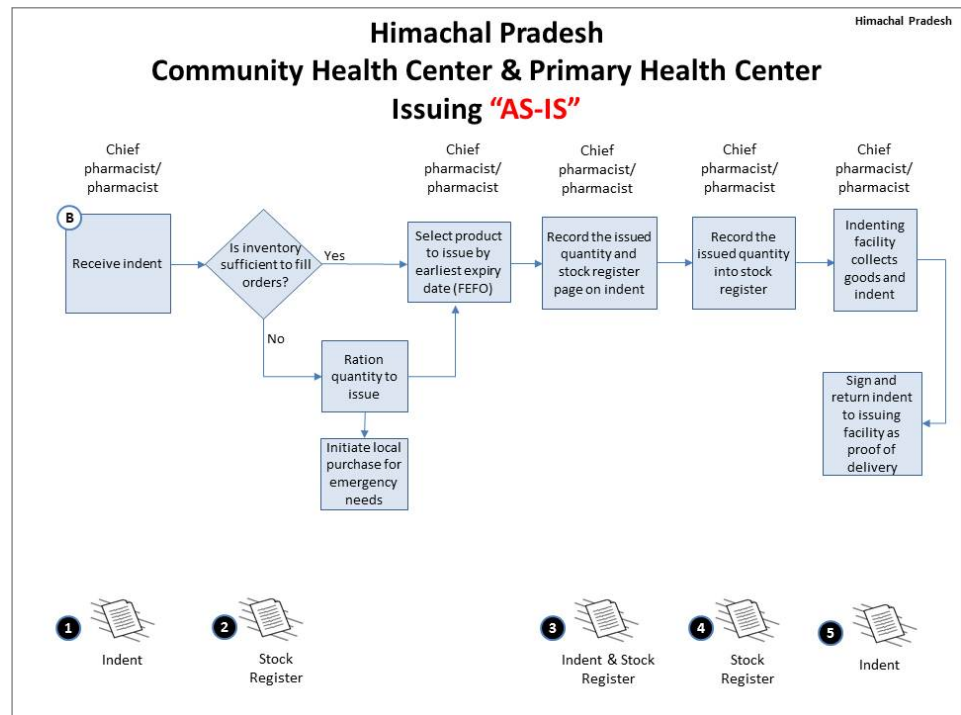
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The project visited health facilities (community health centers (CHC), primary health centers (PHC), and sub-centers) in selected districts of the four states to learn the distribution, ordering, and reporting mechanisms in place. The data they collected informed the creation of “as-is” supply chain process maps that record steps, timing, forms, and persons responsible for how the supply chain operated (see the ‘As-Is State’ chart at right).

After seeing what was in place, the project leveraged areas that were working well and noted areas that could be adjusted to make commodities flow more efficiently. Most changes were minor but effective. The project recommended, among other things, establishing an inventory control system and standardizing logistics forms (see the ‘Recommended’ chart at right).

The project and the state health missions codified these processes in SOPs that outlined the:

- **Policy:** What is the policy or standard this procedure must meet?
- **Purpose:** What is the rationale of this procedure?
- **Scope:** What supply chain functions are affected by this procedure?
- **Responsibility:** Who is responsible for this procedure and what is s/he they required to do?
- **Definitions:** Explanations for any procedure-related words or terms that readers may not understand.
- **Procedure:** Who performs the steps involved in this procedure and what are those steps?



- **References:** Which standards, laws, or regulations govern this procedure?
- **Forms/Records:** Which forms (name and number) are used to capture the various data?
- **Process Map:** What is the ordered visualization of the activities?
- **Revision History:** What are the dates and descriptions of changes, and who requests revisions?

The project also trained a cadre of state health mission staff to roll-out the SOPs. The newly developed SOPs now guide health providers and managers who dispense and manage RMNCH+A commodities and essential medicines at all levels of the public health care system. As the Jharkhand State Cold Chain Officer Mr. Neelranjan said, "SOPs are very helpful in the current situation of Jharkhand... the logistics management information system forms are very useful."

According to Madam Inoshi, Director-Admin for the National Health Mission in Haryana, "The development of standard operating procedures and logistics forms through technical assistance from the USAID | DELIVER PROJECT is going to help us standardize supply chain processes and maintain uniformity across levels. The inventory control system that has been incorporated in the SOPs will help maintain appropriate level of commodities, thereby ensuring commodity security."

*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.*

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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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