

## Success Story

# Zambia: Provincial offices strengthen supply chain activities

---

*Since 2006, the USAID | DELIVER PROJECT and the Supply Chain Management System (SCMS) have worked to strengthen the health supply chain in Zambia by working in partnership with the Ministry of Health (MOH). As USAID | DELIVER PROJECT and SCMS became more successful in working with the Government of Zambia (GRZ) to implement and manage the logistics systems for medical commodities, the United States Government's expectations of the project grew—increasing the need for country-wide information, and where challenges arose, the projects were expected to address them at district and facility levels.*

---

The increased need for district and facility level assistance presented difficulties as both projects were based in Lusaka. To bring technical assistance closer to service delivery points (SDPs) SCMS and the USAID | DELIVER PROJECT established provincial offices, with one house in each provincial capital.

The first offices were established in 2009 to ensure that the projects were more responsive to the supply chain challenges at the Provincial Medical Office (PMO), District Community Medical Office (DCMO), and at

the health facility level. In addition, establishing the provincial offices helped the projects advance strategic management and planning for increased commodity security and to transfer supply chain skills to MOH district and provincial staff.

The provincial offices implement activities such as supportive supervision visits, IT support to health facilities for the electronic logistics management information system (eLMIS), training in the logistics systems, and provincial and district meetings. These interventions enable project staff to be available and present with MOH staff requiring support in managing the logistics systems—the result is a stronger health supply chain for the people of Zambia.

Supportive supervision visits undertaken by the projects and GRZ staff increase supply chain performance, improve data and commodity management, and ultimately increase confidence in the health system by assuring that commodities needed by the clients are available when needed. Supportive supervision visits can involve on-the-job training to refresh staff on the logistics systems and to impart new knowledge to those staff members that have not received in-house training. Project staff use these visits to ensure MOH staff at facilities and from the districts are able to manage the logistics systems well to ensure their continuity. IT support related to eLMIS ensures patient and

commodity management systems are operating well and that data required for informed decision-making is available from the SDPs, through the districts, up to the central level.

Provincial and district meetings function as a platform for the project and GRZ stakeholders to discuss logistics system performance and coordinate activities so that resources are well-utilized. At these meetings, participants share updates and challenges they encounter in managing the logistics systems and counterparts help resolve these challenges.

There is clear impact of the effectiveness of the provincial offices. Data from the ARV logistics system shows that reporting rates in Copperbelt and Central provinces, for example, have increased: Copperbelt: 89 percent before the office opened to 100 percent in 2015; Central: 84 percent before the office opened to 100 percent in 2015. On a sustainability continuum of zero to four, where four means provincial support activities are GRZ-led and funded, Copperbelt averaged 2.8 and Central averaged 3.1 over three years, indicating GRZ is taking a greater lead in organizing meetings and improving staff capacity. These results demonstrate that provincial offices contribute to increases in reporting rates at the facility level. Consistent reporting is a major contributing factor leading to the continuous resupply of commodities and improved reporting rates are leading to improved commodity availability. These results, coupled with the positive sustainability continuum score, also increase the likelihood of sustaining supply chain activities beyond the life of the project.

By working with MOH staff to effectively manage the logistics systems and provide

on-the-job training when needed, SCMS and USAID | DELIVER PROJECT staff can ensure consistent, accurate reporting that will result in sufficient stocks of commodities for health facilities.

### **Routine visit reveals challenges at the Chaamwe Rural Health Centre**

Chaamwe Rural Health Centre is a good example of how a stronger presence at the provincial level improved commodity management at the health facility level.

Andrew Tembo is the District Laboratory Technologist who works in Gwembe District in Southern Province to monitor how health facilities manage their logistics systems and maintain their commodity stores. He has worked closely with the Project staff for many years conducting supervisory visits to health facilities and has the skills to identify and resolve supply chain management gaps.

On a routine supervisory support visit with project staff, Andrew found an interesting situation at Chaamwe Rural Health Centre. This facility had a nurse in-charge running the facility's HIV test kits, PMTCT, ARV, and EMLIP Hybrid logistics systems.

This health facility also had two lay counselors—community members who conduct VCT as part of the activities implemented by a partner organization. Lay counselors use HIV test kits ordered through the logistics system. These counselors were not trained in the logistics system and had not been made aware of the importance of updating the daily activity register (DAR) with the number of test kits used on that day and the direct impact this lack of data has on the report to requisition more stocks. Furthermore, the lay counselors were not trained in conducting physical counts of the HIV test kits. When evaluating the DAR and the stock control cards, Andrew noticed large

discrepancies and noted that the monthly report was incomplete.

### **Addressing the challenges**

Mr. Tembo provided the lay counselors a brief, though comprehensive, on-the-job training in stock management by showing them how to complete the DAR and the implications of keeping these records. Andrew also oriented the lay counselors on updating the stock control cards and encouraged them to conduct regular physical counts to be accountable for the amount of stock they used. The facility staff appreciated this quick intervention; they were confident that they would continue working side-by-side with the lay counselors and manage their health commodities efficiently.

Small interventions, such as those implemented at Chaamwe Rural Health Centre, exhibit the strength of the project's provincial offices. Addressing challenges at the facility level averts larger problems at the district and provincial levels and ensures that commodities are available for clients in health facilities when they need them.