



Schweizerische Eidgenossenschaft  
Confédération suisse  
Confederazione Svizzera  
Confederaziun svizra



# Swiss TPH



## Strengthening the pharmaceutical sector

A key building block to achieve access to  
health care in Tanzania

Karin Wiedenmayer



# Introduction



- The Government of Tanzania aims to improve the **health of all Tanzanians**, especially those at risk, and to increase life expectancy by providing health services to meet their needs
- **Medicines** and other health commodities are a critical building block of the health system and should always be available
- Access to safe, effective, quality and affordable essential medicines for all is a central component of **Primary Health Care (PHC)**, hence **Universal Health Coverage (UHC)**



Swiss TPH



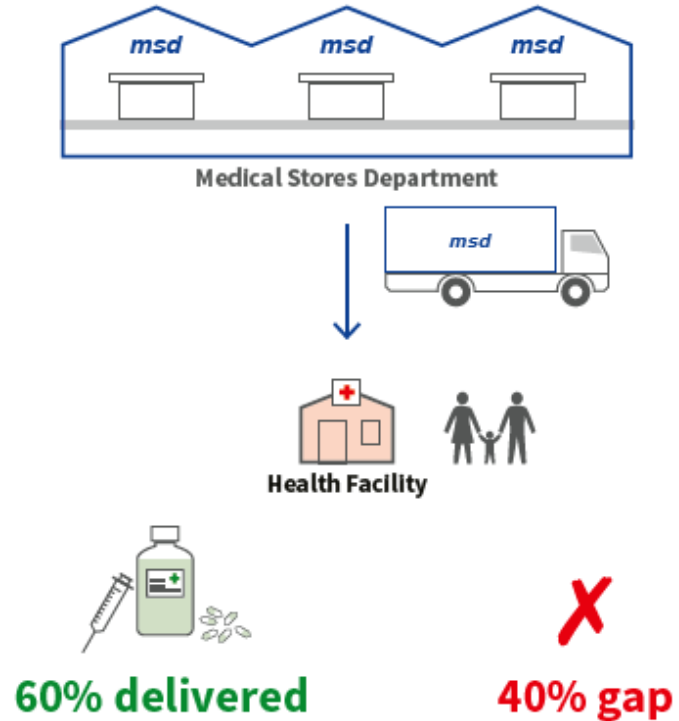
What did we find in 2011?

Situation analysis

# Situation analysis in 2011- health supply chain

Public health facilities in Tanzania faced **shortages** of health commodities due to low performance of the national supply chain and Medical Stores Department (MSD)

→ **stock-outs**



# Situation analysis in 2011- pharmaceutical sector

## Weaknesses in pharmaceutical sector:

- Pharmaceutical workforce
- Accountability
- Supply chain management capacity
- Pharmaceutical prescribing and use
- Supportive supervision
- Health supply gap



Swiss TPH



What did we build on?

Policies and principles



Schweizerische Eidgenossenschaft  
Confédération suisse  
Confederazione Svizzera  
Confederaziun svizra

Swiss Agency for Development  
and Cooperation SDC



National Health Policy

National Pharmaceutical Policy

Human Resources for Health Strategic Plan

Tanzanian Health Sector Strategic Plan

CCM Manifesto

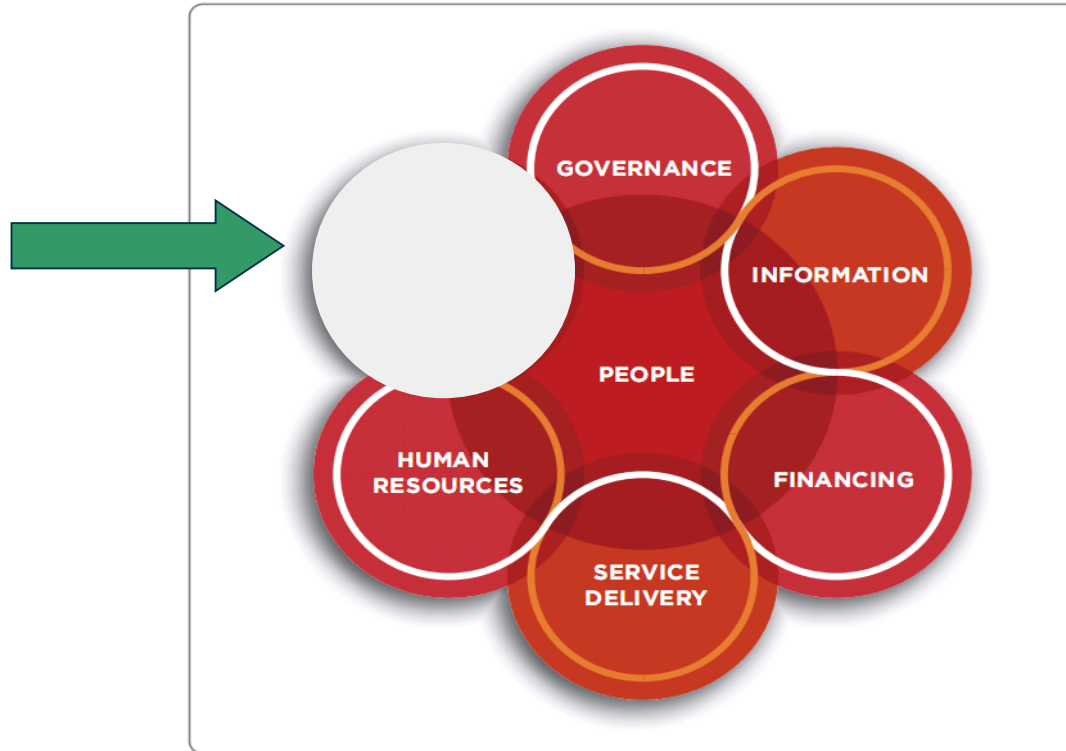
PPRA Act



uhc2030



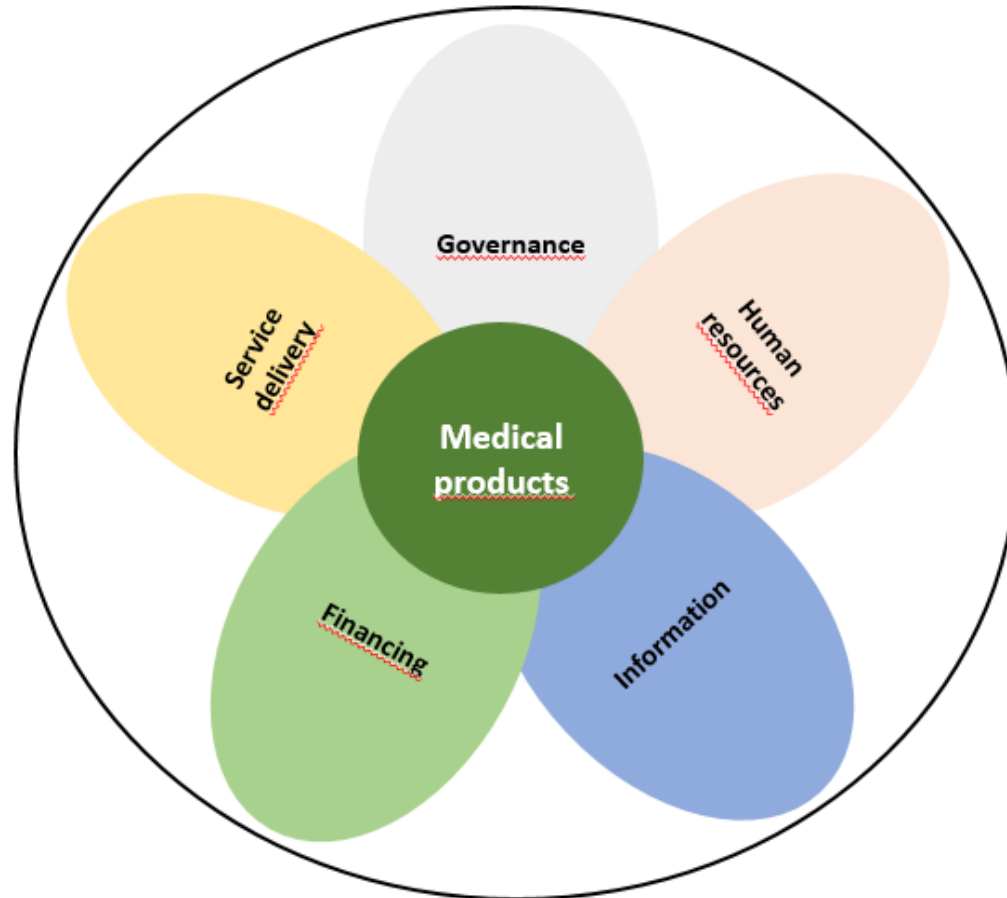
# The health system



WHO 2009: Systems thinking for health systems strengthening



# Pharmaceutical system





Swiss TPH



**What was our strategy?**

Strengthening the pharmaceutical system

# Strengthening the pharmaceutical system-Theory of Change

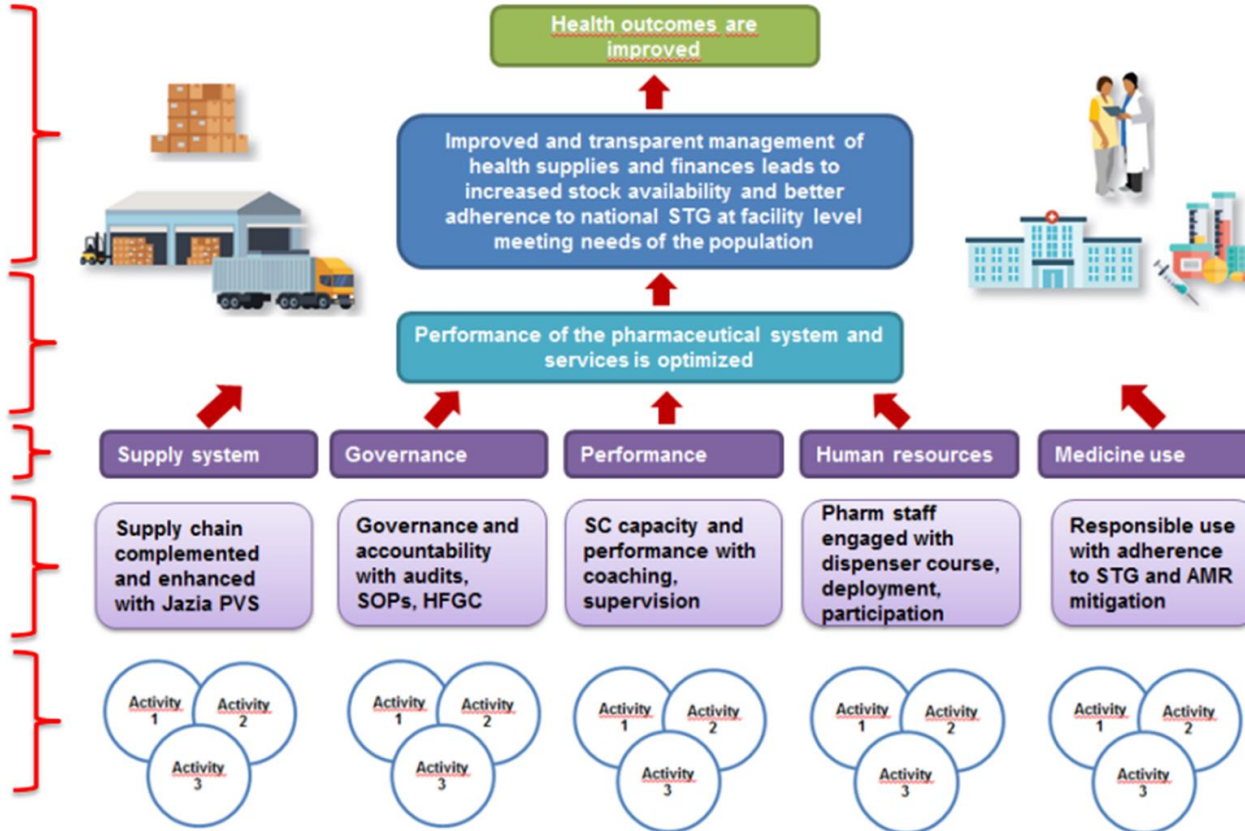
**Ultimate goal:**  
Improved SCM  
contributes to  
improved health  
outcomes

**Long term  
outcome**

**5 pathways**

**Strategies**

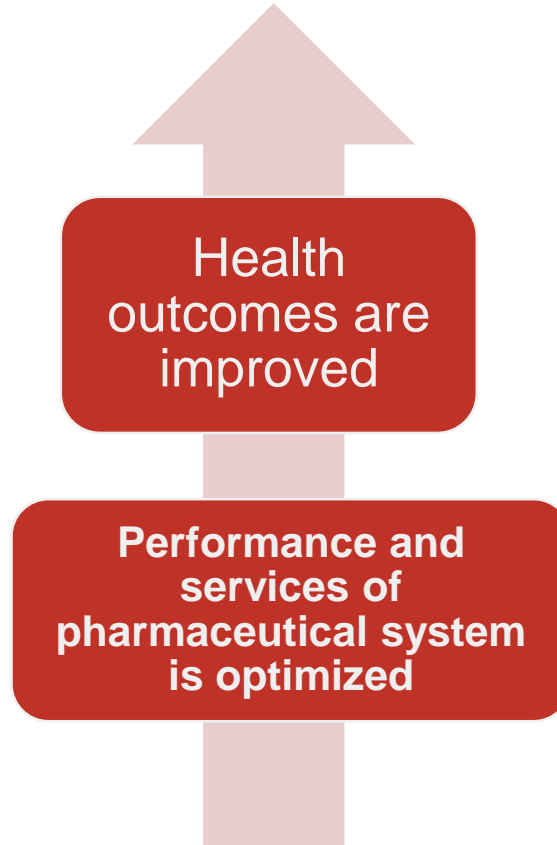
**Activities**



# Strengthening the pharmaceutical system-5 pathways



# Improved supply chain management contributes to improved health outcomes





Swiss TPH



Main complaint - Main focus:  
out of stock!

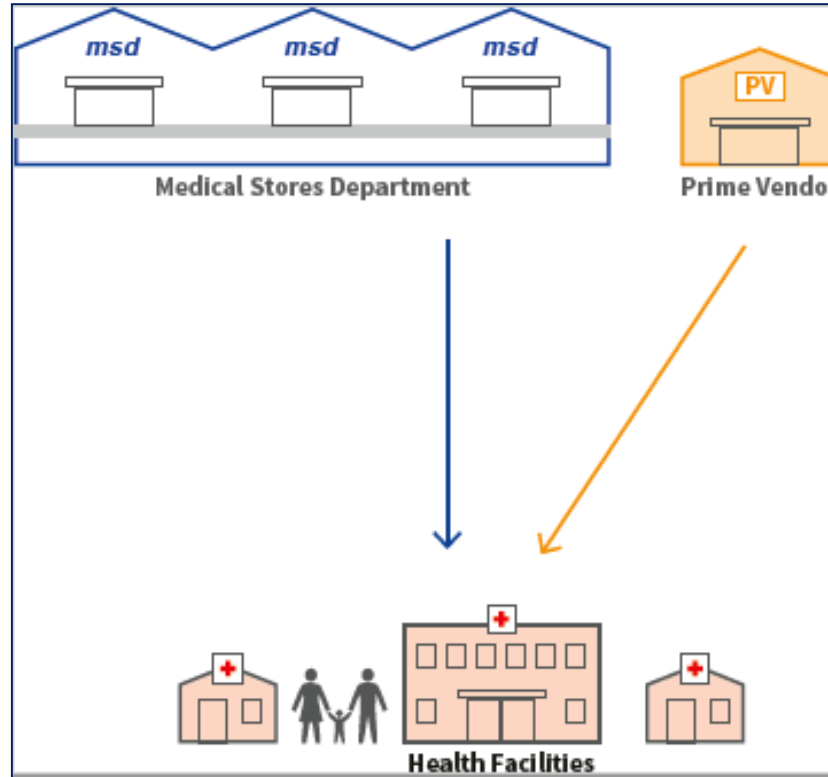
Improving medicines availability

# An innovative intervention for the supply chain

- An innovative **Prime Vendor System** (Jazia PVS) was successfully piloted
- The **Public-Private-Partnership** (PPP) complements MSD with supplies from contracted private vendors
- The approach entails regional **pooled procurement**
- Very stringent **tendering and contracting** procedures



# The concept of Jazia PVS



**when MSD is out of stock**



# Results from pilots in Dodoma, Morogoro and Shinyanga



**Delivery time**



**Purchase value**



**Performance**



**Order fulfillment**



**Availability**



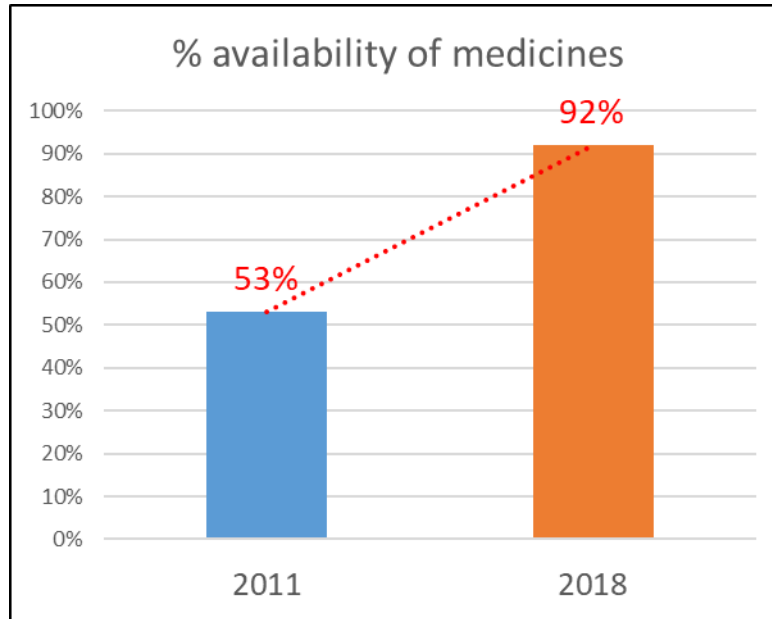
**Transparency**



**Accountability**

# Availability in 2018

The average **availability** of tracer medicines increased **by 74%**



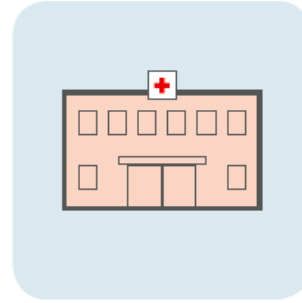
# National scaling to all regions of mainland Tanzania in 2018



**26**  
regions



**185**  
councils



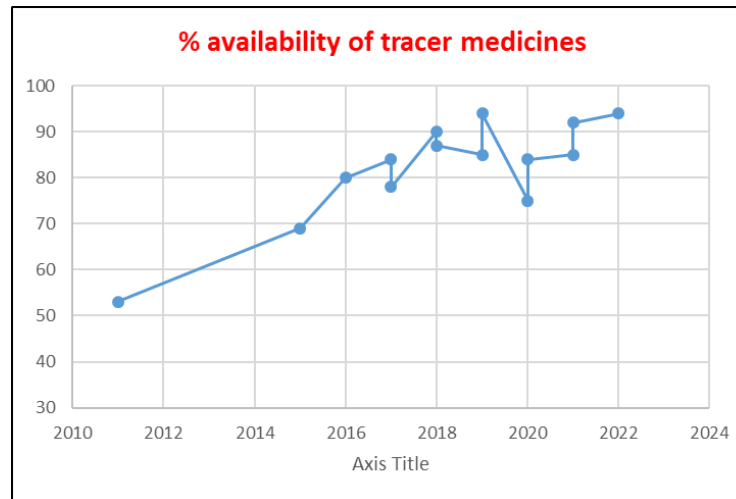
**5381**  
health facilities



**51'400'000**  
population

# Results in 2023

- 26 regions of mainland Tanzania covered
- 14 private vendors engaged
- Average availability of tracer medicines increased from **53% to 92%**
- Total procurement value for health commodities (2017-2022): **Tsh 96'801'725'420**
- Average monthly procurement value from PVs: **Tsh 2bio**



# Prime Vendor Management Information System- PVMIS

## IT system for managing Jazia PVS



*Hon. Angellah Kairuki, Former Minister of State at PORALG, unveiling the Jazia Prime Vendor Information Management System (PVMIS)*

- Web-based and integrated in the Government of Tanzania Health Operation Management Information System (GoTHOMIS).
- A digital service for public health facilities to order, receive, pay and report medical commodities from prime vendors.
- Accessible for multiple users: health facilities, prime vendors, council and regional authorities.

## In a nutshell

- Public-private partnership (PPP)
- Complements Medical Stores Department (MSD)
- Fixed prices and comparable to MSD
- Health commodities of assured quality, safety and efficacy
- Funds from health facility own sources, responding to fiscal decentralization
- A system and not just a vendor
- Transparency and accountability enhanced
- Sustainable and not a parallel system
- Based on government policies and within regional structures
- Web-based and integrated PVMIS
- Adoption growth confirms need for complementary supply chain
- Significant increase in availability of health commodities
- Improved access to health products for patients



Swiss TPH



Backbone of supply chain:  
pharmaceutical staff

Capacity, performance and voice

# Adapting pharmaceutical skills to the needs of PHC

- In 94% of health facilities, supply management was done by non-pharmaceutically trained staff in 2011
- Informal task shifting to clinical staff- reducing time for patient care
- **Pharmacy staff** shortage translates into gaps in pharmaceutical supply and services, causing risks to patients
- Competencies must be aligned with **local needs and priorities**





# Pharmacy dispenser course

- 1 year basic pharmaceutical science course
- Collaboration with St John's University
- Adapting pharmaceutical skills to the needs of PHC
- NACTE and Pharmacy Council accredited
- ICT and supply chain management integrated into curriculum



# Pharmacy capacity building- training, workshops

- Various training and coaching and planning activities
- Knowledge sharing and transfer in pharmaceutical management

**2012 to 2023: over 50'000 health staff**

- Involvement of pharmaceutical staff who has been given a voice and role
- Professional progress and promotion of health staff





Swiss TPH

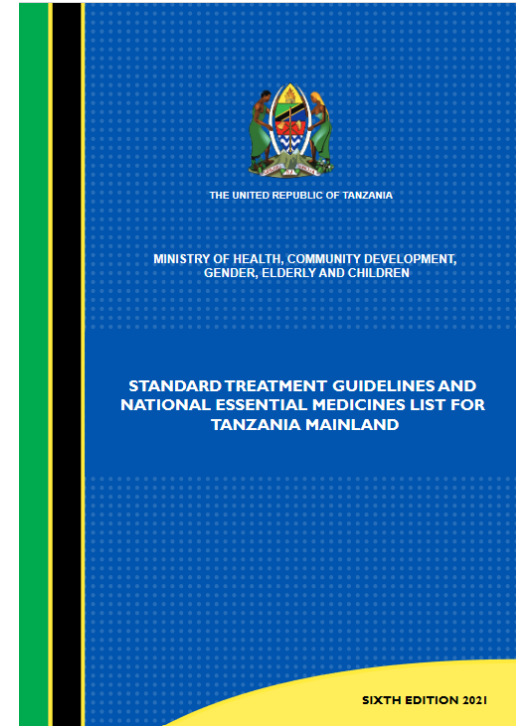
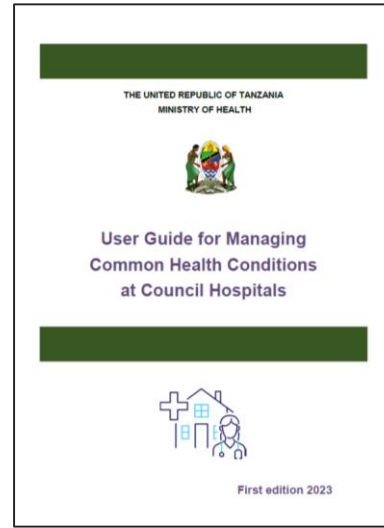
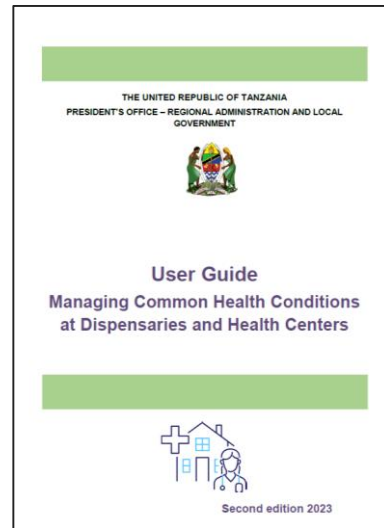


## Responsible use of medicines and antibiotics

Quality of care and patient outcome

# NEMLIT and Standard Treatment Guidelines

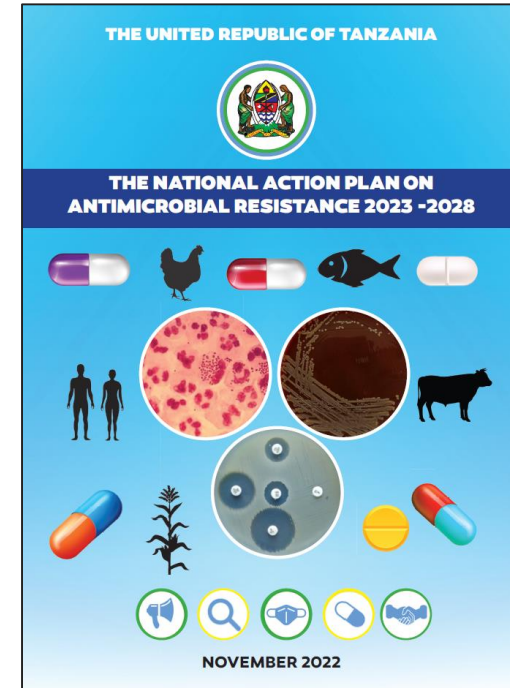
- Collaboration with MOH
- Supported the revision of **NEMLIT and national STGs**
- Clinical training in Dodoma region with TTCIH
- Development of **stratified STGs for PHC** as user guides



# Antimicrobial resistance

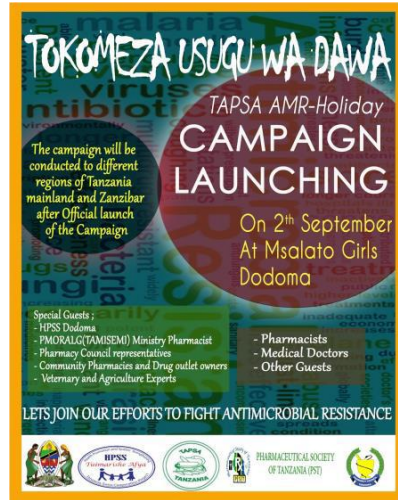
- In 2017 HPSS organized **the first AMR Symposium** in collaboration with the MOH and WHO, leading to the launch of first NAP-AMR (2017-2022).
- HPSS contributed to the **new NAP-AMR (2023-2028)**

*AMR is one of the top 10 global public health threats facing humanity (WHO)*



# Support to RBA Initiative

- School club projects: developing agents of change for containing AMR in Tanzania
- WAAW bajajii campaigns
- TAPSA events





Swiss TPH



Evidence to policy to practice

From operations to sustainability

# The importance of **evidence** and policy dialogue

The medicines component of HPSS harnessed evidence from operational research for visibility and policy dialogue:

- **Over 70 presentations** at various conferences and meetings
- **17 peer reviewed publications** (6 pending)
- 10 policy briefs
- 1 factsheet
- 2 videos



# Evidence of **sustainability** for Jazia PVS

- Based on government policies and anchored within existing structures (infrastructure, staff)
- PVMIS: digital solution, web-based and integrated in GoTHOMIS
- Dedicated coordinating teams at PORALG and MOH
- High acceptability and ownership
- Funding for roll-out of implementation manual in 26 regions in 2023:
  - total cost incurred: TSh 6.8 bio
  - majority financed by HFs, district and regional LGAs
  - **HPSS contributed only 4.5%.**



Swiss TPH



## Way forward

The world is constantly changing...

# The past and the future....

- **In 1993** the main complaint was **out of stock**  
CMS became MSD and multiple efforts to upgrade the supply chain system from push to indent to e-ILMS
  - **In 2011** the main complaint was **out of stock**
  - **In 2023** **availability** has significantly improved!
- 
- Take care of this innovation, it is a great foundation to improve access to health care!
  - No achievement is forever
  - Corruption and poor governance continue to be poison for health
  - Jazia PVS will have to be resilient and weather storms and changes in the health sector
  - Sustainability requires continued work and adaptation of any dynamic system



Schweizerische Eidgenossenschaft  
Confédération suisse  
Confederazione Svizzera  
Confederaziun svizra

Swiss Agency for Development  
and Cooperation SDC

# Asanteni!



JAZIA Prime Vendor



Filling the medicines supply gap in Tanzania with a complementary

**PRIME VENDOR SYSTEM**