1. A global perspective of HR for SCM

2. SC4CCM activity in Rwanda & Malawi

3. Interactive discussion

MEETING TOMORROW'S HEALTH CHALLENGES THROUGH
WORKFORCE EXCELLENCE IN SUPPLY CHAIN MANAGEMENT

PE·OPLE
that
DELIVER

A global perspective of HR for SCM

The People that Deliver Initiative

Improving health outcomes by promoting sustainable workforce excellence in health supply chain management

70+

member organizations

- country governments
- international agencies
- academic institutions
- implementing partners
- Non-governmental organizations
- private companies

The desired paradigm for HR in SCM

Characteristics

- Long term focus
- Requires reform of perceptions, policies and practices
- Converts existing expenditures into investment
- Capacity benefits accumulate over time
- Inherently sustainable and country-driven

National institutions provide relevant qualifications → Qualified staff hired/contracted for SCM positions

Elevated status for SCM and SCM workforce

SCM jobs desirable; qualifications sought

Appropriate career incentives provided

High staff satisfaction and retention

Significant PtD Milestones

- June 2011, PtD Global Harmonization and Positioning Conference, WHO Geneva

- July 2011 – Dec 12, PtD Board, focus countries, & working groups established. (Advocacy & Knowledge Management, Technical, & Research)

- June 2012, UNICEF offers to host the PtD Secretariat with core funding provided by UNICEF, UNFPA and USAID

- June 2013, Appointment of Executive Manager for PtD

- June - Aug 2013, Approval of PtD Strategic Plan and Operational Plan

- Jan 2014, PtD Board approves 2nd phase of PtD (2015-2016)

- October 2014, 2nd PtD HR for SCM Conference, Copenhagen

PtD Focus Countries

Dominican Republic

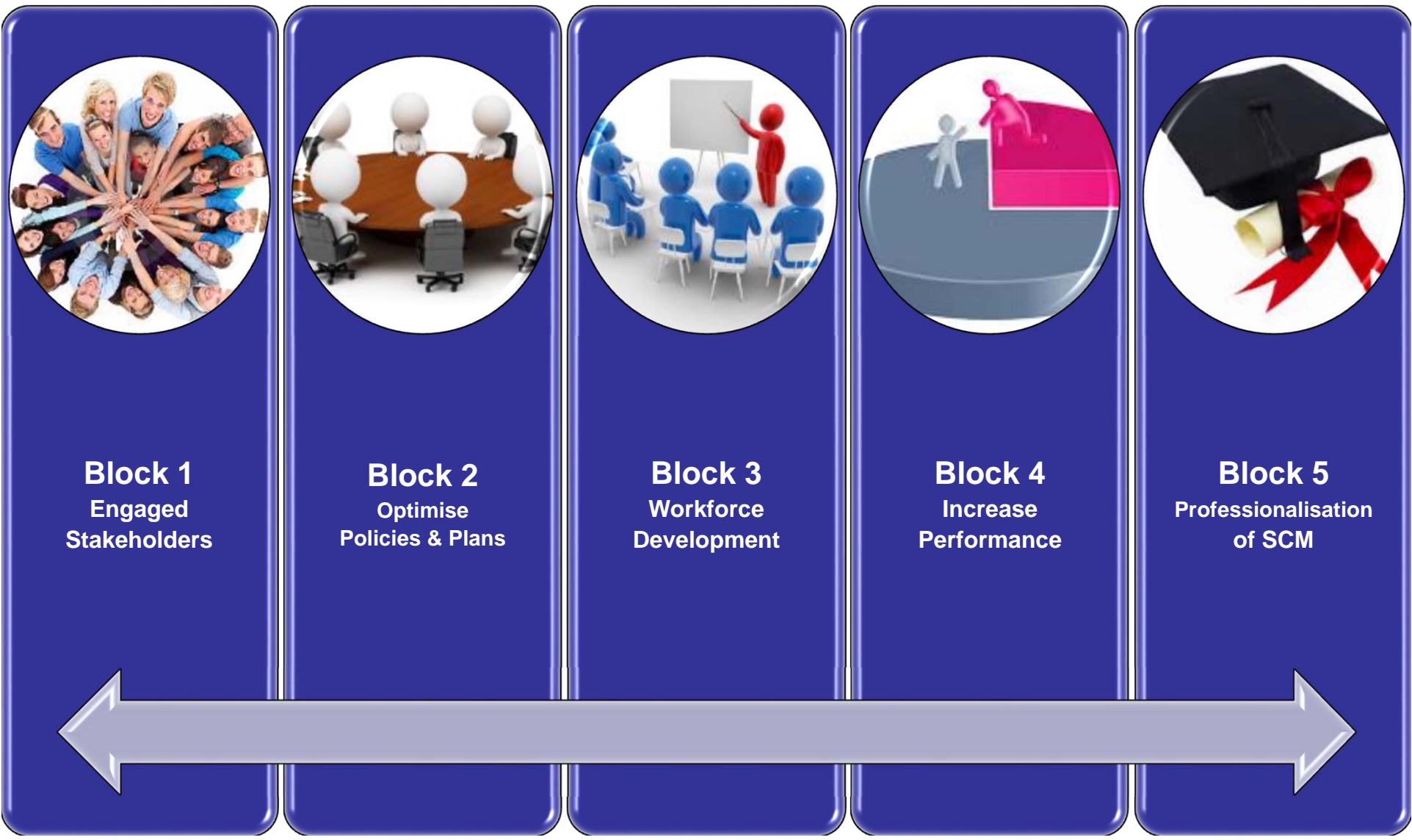**Ethiopia**

Indonesia

Burkina Faso

Liberia

Mozambique

Namibia

Five building blocks of HR in SCM

Block 1
Engaged
Stakeholders

Block 2
Optimise
Policies & Plans

Block 3
Workforce
Development

Block 4
Increase
Performance

Block 5
Professionalisation
of SCM

Four PtD Strategic Goals

I. **Global recognition** that strong supply chains are essential for positive health outcomes and require a competent, recognized and supported supply chain workforce with significant technical and managerial capacity.

II. **Government and national health institutions** demand, recruit and retain appropriately qualified personnel for positions with supply chain responsibilities.

III. **Adequate personnel from relevant cadres** with appropriate supply chain competencies and qualifications are available.

IV. **A repository of evidence-based resources** for HR for SCM is established, accessible, used and disseminated.

PtD Goal 1 – Global recognition

PtD, through its Secretariat and members has been active in:

✓ Direct contributions to global supply chain strengthening activities, including UN CO LSC promising practices brief, GAVI supply chain strategy, WHO/AMDS report to World Health Assembly (on Access to ART).

✓ Advocacy presentations to: DFID, Global Fund PSM, World Bank, UNFPA, UNICEF PD

PtD Goal 2 –
Country government action

PtD, through its members has been active in:

✓ HR for SCM assessments completed in 12 countries.

✓ **Burkina Faso -** Regulatory changes implemented to delineate SCM cadres, development of academic course & public service structural change. Health logisticians have been deployed in 17 districts.

✓ **Ethiopia** - Govt. HR planning process engaging SCM partners with a focus on: education and standards. Newly formed HR for SCM task force is accelerating momentum.

✓ **Indonesia -** PtD Indonesia national working group, one gate policy with engagement of SCM partners, professional grouping of provincial SCM leaders with national networking through WHO knowledge gateway link.

PtD Goal 3 –
Adequate personnel trained

PtD, through its members has been active in:

✓ **Benin -** LOGIVAC center at the L'Institut Régional de Santé Publique (IRSP), AMP (Rwanda proposed as 2nd site)

✓ **Burkina Faso -** University of Burkina Faso, Bioforce

✓ **Ethiopia -** Jimma University, Govt lead

✓ **Namibia -** University of Namibia, USAID

✓ **Pacific Island Countries -** University of Canberra, UNFPA

✓ **South Africa -** African Supply Chain Academy, HIS & Divinci UNI.

✓ **LAPTOP (Learning & Professional Training Opportunities) -** RHSC

PtD Goal 4 – Tools and resources

The following tools are now available:

- ✓ **Advocacy tools**. Who is PtD? Why focus on HR in SCM? and how to make smart investments in HR for SCM

- ✓ **Assessment and planning**. HR for SCM Assessment Guide and Tool (USAID|DELIVER), has been used in 12 countries: Burkina Faso, Dominican Republic, Ethiopia, Guatemala, Indonesia, Liberia, Namibia, Nicaragua, Rwanda, Senegal, Zimbabwe

- ✓ **Competency mapping**. The PtD Competency Compendium for Health Supply Chain Management (University of Canberra). This tool is currently being applied in Namibia through SCMS partners

- ✓ **Funding.** Country Guide: Applying for Public Health Supply Chain Management Development Funds

Points of engagement with PtD

- Consider using PtD tools and resources when engaging with countries.
- Become a PtD member (go to www.peoplethatdeliver.org)
- Join a PtD working group (e-mail *info@peoplethatdeliver.org*)
- Become a PtD Twitter follower (@PplthatDeliver)
- Tell us your HR for SCM stories or projects
- Advocate for HR for SCM within your organization
- Attend the upcoming 2nd PtD HR for SCM conference

- For more information please contact Andrew Brown at
  executivemanagerptd@unicef.org

- INSERT SS4CCM presentation here

i. How do you consider HR in SCM in your context?

ii. What are the barriers to increasing the focus on HR for SCM in your country.

iii. How could those barriers be overcome?

iv. What is your next step to improve HR in SCM in your context?

Muchas Gracias!

Working toward a vision of medicine availability for all….