UN COMMISSION ON LIFE-SAVING COMMODITIES
Supply Chain Technical Resource Team

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IMPROVING ACCESS TO LIFE-SAVING COMMODITIES

SUPPLY CHAIN TECHNICAL RESOURCE TEAM (SC TRT)

Conveners: USAID and UNFPA

Supporting organizations:
Clinton Health Access Initiative (CHAI), Dimagi, Imperial Health Services, John Snow, Inc., Management Sciences for Health, the mHealth Alliance, PATH, Riders for Health, the United Nations Population Fund (UNFPA), the US Agency for International Development (USAID), the University of Oslo, Norway, VillageReach
UN Commission on Life-Saving Commodities

Commodity Groups

- Reproductive
- Maternal
- Newborn
- Child

Market Shaping, Regulation and Quality
- Focuses on strengthening markets to ensure availability of quality products

Supply Chain
- Works to ensure essential commodities are delivered efficiently and safely, and are available where and when they are needed

Demand, Access and Performance
- Focuses on removing barriers demand and utilization

ICT/m-Health

Advocacy
Outcomes 1: Good practices and success stories in supply chain management gathered and disseminated.

Outcome 2: Guidance for quantification and forecasting developed.

Outcome 3: Knowledge and good practices of private-public partnerships documented and disseminated.

Outcome 4: Logistics information systems improved.
Accomplishments to Date
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- Compendium of briefs on promising practices to address common supply chain barriers;
- Case studies documenting supply chain integration;
- Guidance for RMNCH supply management coordination committees;
- Supply chain management indicators;
- Inventory of ICT tools for supply chain management;
- Brief on integration of health management information and logistics management information systems;
- RMNCH forecasting guidance;
- Toolkit on private sector engagement in supply chain management.
- Increased functionality of existing electronic information systems:
  - Increased functionality of OpenLMIS
  - Pilot of LMIS version of DHIS2
  - CommTrack released
Highlights of Phase 2 Workplan
July 2014- December 2015
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Three basic areas of work proposed building on Phase 1:

- Validation and Finalization of Tools
- Dissemination
- Country support
Validation of tools

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• Finalization and translation of tools

• Validation of forecasting guidance in two countries
**Dissemination**
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- Develop interactive web site to facilitate availability and use of tools and resources
- Dissemination of guidance and tools through TRT members’ networks, Examples:
  - WHO PSM toolbox,
  - IAPHL distribution list,
  - RHSC distribution list
- South-to-south learning hands-on workshops (English and French) to share new tools and best practices
  - English workshop to follow Global Health Supply Chain Summit in November 2014
  - Will include tracks on quantification, data management, private sector engagement
Country Support
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- Provide targeted support to address supply chain barriers in a limited number of countries
  - Build on tools and resources developed
  - Focus on countries where there is an opportunity to build on on-going activities

All “Pathfinder” countries have included supply chain improvement in their country plans
- **Forecasting**: DRC, Ethiopia, Malawi, Sierra Leone, Tanzania, Uganda
- **Distribution**: in particular to last mile: DRC, Ethiopia, Nigeria, Senegal
- **Data Management**: strengthen/build LMIS: DRC, Ethiopia, Malawi
- **Human Resources**: capacity building: DRC, Senegal
- **Communication and coordination**: Sierra Leone, Uganda
Opportunities for Collaboration with SSWG

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- Many common members between RHSC and TRT
- Tools included in Supplies Information Database of RHSC
- Broad reach of RHSC members
- Common objectives with RHSC initiatives, particularly Reducing Stockouts
Questions for Discussion
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• How can the SSWG and Supply Chain TRT work together towards common objectives?

• How can the RHSC contribute to the country engagement process?

• Any other questions?
Staff from Sierra Leone CSO check supplies at Bo District Medical Store.
Muchas Gracias!

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