



Human Resources for Health Supply Chain Transformation: Exploring Common Best Practices in the African Health Supply Chain

Case Studies from Ethiopia, Kenya, Malawi,
Sudan, Tanzania, and Uganda

Acknowledgements

The authors wish to thank everyone who has contributed to this research. We are grateful to the key informants, who kindly gave their time to be interviewed and shared their knowledge and expertise. Thank you also to the survey respondents, including the IAPHL and SoSoKE communities, who enriched this research, and to the participants of the PSA webinar *Human Resources for Health Supply Chain Transformation*, who provided invaluable feedback on an early version of this research. We wish to extend our thanks to the PSA team who provided feedback, including Sintayehu Beyene Tiruneh, Jean Blackstock, Geleta Beyene Tiruneh, Sophia Iosue, Yukabeth Otieno, and Solomon Tekle.

AUTHORS

Pamela Steele

Andrey Levitskiy

Joanna Nayler

Dr Lakshmy Subramanian

SUGGESTED CITATION

Steele, P., Levitskiy, A., Nayler, J., and Subramanian, L. (2020) *Human Resources for Health Supply Chain Transformation: Exploring Common Best Practices in the African Health Supply Chain*. Pamela Steele Associates.

Executive summary

Introduction

Human resource management (HRM) is a critical component of an effective health supply chain. Human resource (HR) and supply chain practitioners emphasise the importance of human capital for successful Supply Chain Management (SCM) and customer satisfaction, citing the positive impact of strategic HRM on organisational performance. In low- and middle-income countries (LMICs), which experience significant shortages of qualified and skilled health and supply chain workers, this impact is particularly relevant. Over the past several years, the governments of many countries in Sub-Saharan Africa have successfully implemented various HRM strategies to improve their public health workforce. The present study aims to identify best practices in HRM, and to understand if and how these are applied across health supply chain organisations in Sub-Saharan Africa. The goal is to highlight approaches that can inform and support effective SCM and Supply Chain Transformation (SCT) in the region.

Methodology

The methodology of this study is informed by the HRM theoretical framework and the People that Deliver (PtD) Human Resources for Supply Chain Management Theory of Change. The latter identifies four pathways of change (staffing, skill, work conditions, and motivation) for improving supply chain workforce performance. The study uses these four pathways to organise its findings regarding best practices in HRM for the health supply chain, and the practices currently being applied in Sub-Saharan Africa.

The study involved three components:

1. *A desk review of literature* on HR practices and health SCM, which was used to identify international best practices.
2. *An online survey* that collected responses across five groups of stakeholders in health supply chain on the practices applied in the organisations of which they have knowledge. This included officials from ministries of health; representatives from parastatal and central procurement agencies and from the district level; representatives from state-level health facilities; and representatives from the donor community and private charitable organisations.
3. *Key informant interviews (KIIs)* with key HR professionals in six case study parastatal health supply chain organisations in Africa, which have each undergone some form of SCT in recent years, to provide a snapshot of the HRM mechanisms and practices they are currently applying. The case study organisations are: the Ethiopian Pharmaceutical Supply Agency (EPSA); the Kenya Medical Supplies Agency (KEMSA); the Central Medical Stores Trust (CMST) of Malawi; the National Medical Supplies Fund (NMSF) of Sudan; the Medical Stores Department (MSD) of Tanzania; and the National Medical Stores (NMS) of Uganda.

Key findings

Pathway 1. Staffing

Best practices

Best practice recruitment processes for supply chain personnel are rigorous, transparent, fair, and competitive. Efficient recruitment systems are characterised by competency-based candidate assessments that focus on valuable skills, qualifications, trainings, and relevant experiences. Another best practice in this area is job descriptions that are developed based on a competency framework. Finally, there are various best practice means of attracting and retaining employees, including employee compensation which follows clear and competitive pay scales (which requires salary benchmarking and comparisons between private and public institutions).

Findings from the survey and the case studies

The six case study parastatal supply chain organisations conduct internal or external recruitment (or both), in some cases outsourcing the hiring of top management positions to professional services firms. Most of the organisations conduct written or oral technical tests as part of recruitment.

Among the survey respondents, qualifications and the length of professional experience were found to be more important for the final recruitment decision than a candidate's performance in an interview: reported by 42% of the survey respondents, as against 35%, respectively. This was mirrored in the six case study parastatal organisations: for the majority of these, qualifications and the length of professional experience play a pivotal role in the selection process.

Only two out of the six case study organisations apply job descriptions based on a competency framework.

Employee compensation was found to be instrumental in attracting and retaining employees. However, despite this importance, most survey respondents (59%) acknowledged that their organisations lack benchmarked salary ranges, and 69% indicated that salary market analysis is not conducted in their organisations. The six case study organisations reported facing limitations in their ability to offer competitive salaries and benefits due to constraints imposed by state regulations on salaries and remuneration. To this is added a lack of benchmarking of salary ranges, and salary market analyses. Together, this has a negative impact on staff turnover at the organisations.

Pathway 2. Skills

Best practices

A supply chain workforce's continuous learning, training, and professionalisation are crucial for enhancing supply chain performance. Best practices in this area can be broken down into a variety of initiatives:

Training needs analysis (TNA): TNA aims to identify knowledge and skills gaps, to identify training and development requirements. TNA allows organisations to develop informed decisions on what learning is needed at individual and organisational levels, and to draft a training plan and an organisational training strategy to ensure sufficient capacity for sustaining current and future business performance.

Professional appraisals, training, and continual professional development (CPD): CPD of supply chain specialists occurs through running training and learning courses, tailored to address specific skills needs; helping staff to obtain certifications and higher degrees; and helping staff to obtain memberships in professional associations.

Professionalisation and communities of practice: Professionalisation of SCM specialists is gaining increasing attention from health supply chain organisations in Africa. Its task is to prepare and support highly competent managers and practitioners through training and career management by establishing global standards for health SCM job functions, skills needs analysis, harmonised learning curricula, and accreditation of supply chain workers. Communities of practice promote professionalisation by creating a shared domain for learning, networking, and the sharing of ideas, methods, and experiences.

Findings from the survey and the case studies

Although TNA is commonly perceived as an integral part of HR development and transformation, only 50% of survey respondents indicated that their organisations conduct TNA, and 35% of respondents highlighted that TNA in their organisations does not lead to the development of a training strategy or plan. All of the six case study health supply chain organisations were found to conduct TNA, mostly annually. Of the six case study organisations, five currently provide training, either in-house or externally, while the sixth is developing its training strategy. NMSF has a dedicated training centre, and EPSA is developing one. Two of the organisations (NMS and MSD) support staff membership of professional bodies by paying their fees. Mentoring also occurs in these organisations, but not as consistently across the organisations. The study found that supporting communities of practice is considered an important stimulus for continuous professional and leadership development of employees.

Pathway 3. Work conditions

Best practices

Organisational culture is an important component of creating a supportive work environment, providing a way for employees to voice their views and develop connections and purpose. There are numerous ways to strengthen organisational culture, including: (i) implementing policies that support a positive organisational culture (an overarching code of conduct or ethics, anti-harassment policies, anti-discrimination or equal opportunity policies, and policies that create a good working environment for women) and reviewing them regularly; (ii) implementing whistleblowing mechanisms; and (iii) ensuring a positive physical environment, including by establishing an occupational safety and health (OSH) management system.

Findings from the survey and the case studies

Policies to support a positive organisational culture: Having an overarching code of conduct or ethics in place was the most commonly reported policy intervention among the survey respondents (63%), and such codes were also found to be in place at all of the six case study organisations. Other policies indicated by the case study organisation informants as being in place include policies on anti-corruption, anti-fraud, anti-discrimination, HIV and chronic diseases, sexual harassment, and health and safety. Some of the six case study organisations promote women or minority groups through specific groups or departments (e.g. a Gender Mainstreaming Committee and a Disability Mainstreaming Committee at KEMSA, and a Gender and Youth Directorate at EPSA). Other procedures include using affirmative action in either recruitment or promotion, having a clear policy on attracting and maintaining an equal workforce, and

examining disaggregated data on the gender split at different levels. Key informants also mentioned how their organisations sensitise employees on, and disseminate, their policies by means of consultation, regular reviews, and circulating hard and soft copies across the organisation. NMS in Uganda is in the process of designing online modules covering its policies.

A whistleblowing mechanism: Such a mechanism was reported to be in place by 41% of survey respondents. Four out of the six case study organisations also stated they have a whistleblowing policy mechanism. The survey respondents and the KIIs reported best practices in creating a whistleblowing policy mechanism as including an independently managed anonymous hotline and the use of specific email systems to ensure anonymity.

Ensuring a positive physical environment and OSH: The most implemented intervention reported by survey respondents was the improvement of the workplace conditions and providing staff with the necessary tools and equipment to perform their jobs (81%). Other practices mentioned by key informants include carrying out tests (e.g. measuring lighting levels and air quality), providing medical cover and free health checks, registering near incidents, and providing personal protective equipment to staff. Many of the six case study organisations mentioned that they comply with national-level health and safety legislation.

Pathway 4. Motivation

Best practices

Employee motivation is a key HR strategy and plays a crucial role in achieving an organisation's vision. Best practices that can promote good employee motivation include: (i) performance management, including appraisals; (ii) incentives (financial and non-financial, e.g. financial support for CPDs, performance-based incentives, recognition, and exposure to stakeholder meetings); (iii) good supervision and management; (iv) promotions (particularly if competency-based); (v) employee engagement and retention through development opportunities, communication channels, rewards and recognition, and employer's support (as well as conducting a staff satisfaction survey to get employee feedback); and (vi) a clear disciplinary policy and practice.

Findings from the survey and the case studies

Performance management: 73% of the survey respondents confirmed the presence of performance management systems in their health supply chain organisations **Error! Reference source not found.**, while 68% of the survey respondents also indicated that their organisations have a performance management process for identifying and documenting poor performance. Some of the best practices identified by the respondents in this area include the use of performance indicators, annual appraisals to reinforce performance through a balanced scorecard (BSC), conducting review meetings, and continual investment in HR development and management. Regarding the case study organisations, each identified its unique combination of intrinsic and extrinsic motivators: performance management is supported using key performance indicators (KPIs) at EPSA, KEMSA, and NMSF; MSD uses its internal appraisal system, called DRIVE; while NMS seeks to motivate employees through changes to the work environment and organisational culture. Performance appraisals are central to motivation across all of the six case study organisations.

Incentives: The survey respondents identified a range of tools that are currently being used to incentivise the health Supply Chain workforce, including financial support for CPD, paid study leave, approval for the acquisition of relevant certifications, and performance-based incentives.

In regard to the six case study organisations, incentives used to motivate their staff include: tools to induce recognition; exposure to stakeholder meetings; rewarding employee performance with a recognition letter and a dinner with the CEO (KEMSA); providing hardship allowances, honoraria, and transport allowances (MSD); and providing an entertainment allowance for client-facing job roles, fuel allowances for middle and top management, and transport for staff (NMS).

Good supervision and management: The survey findings revealed that monitoring and supportive visits, mentoring and coaching programmes, systematic supervision, and moderated discussions were conducted in the respondents' organisations. The six case study parastatal organisations have different approaches to supervisory support: KEMSA encourages systematic supervision, while NMS aims to boost inter-departmental coaching and mentoring, especially for junior staff, and MSD also encourage staff to seek mentoring opportunities outside their organisation through participation in workshops and seminars.

Promotions: According to the survey results, 59% of the respondents felt that there are not enough promotion opportunities for the workforce. Promotions were reported to be based on the number of years in the job position and to follow a chain of supervisory and hierarchical flow. Such forms of promotion result in a fragmented system and lower levels of motivation. In terms of the six case study organisations, promotions are guided by the Career Progression Plan at KEMSA, the Condition of Service handbook at CMST, and the Civil Service Chamber at NMSF. MSD follows a competence-based promotion system, while NMS does not exercise promotions at all, instead inviting employees to apply for available internal positions at various levels after the expiration of their fixed-term four-year contract.

Employee engagement and retention: Only 44% of the survey respondents indicated the existence of employee engagement and retention policies in their organisation. 59% reported that their organisation does not conduct a staff satisfaction survey. At the six case study organisations employee engagement and retention policies are applied, with the aim of retaining highly skilled staff and enhancing motivation at the six organisations. A few of the case study organisations have developed structured retention schemes and policies (e.g. KEMSA's Talent Management Manual), while others rely on the variety of monetary and non-monetary incentives, work benefits, and organisational changes, which include private health insurance and free health checks, subsidised meals, staff transportation, and trade union support.

Disciplinary procedures and rules: 91% of the survey respondents said that their organisation has a standard disciplinary policy and practice in place. In terms of the six case study organisations, disciplinary policies and practices were found to be well documented, and regulated by either specific disciplinary policies, codes of conduct, or governmental regulations and acts. Staff satisfaction surveys are conducted annually or biennially in all the case study parastatal organisations, except for NMS (which plans to introduce one in 2020).

Contents

Acknowledgements	2
Executive summary	3
Contents	8
Table of acronyms	10
1. Introduction and rationale	11
2. Methodology	12
3. Desk review and online survey	14
3.1 Pathway 1: Staffing	14
3.2 Pathway 2: Skills	19
3.3 Pathway 3: Working conditions.....	22
3.4 Pathway 4: Motivation.....	26
4. Organisational case studies	30
4.1 ETHIOPIA: Ethiopian Pharmaceutical Supply Agency (EPSA)	30
4.1.1 Pathway 1. Staffing	30
4.1.2 Pathway 2. Skills.....	31
4.1.3 Pathway 3. Work environment.....	31
4.1.4 Pathway 4. Motivation	32
4.2 KENYA: Kenya Medical Supplies Authority (KEMSA)	33
4.2.1 Pathway 1. Staffing	33
4.2.2 Pathway 2. Skills.....	35
4.2.3 Pathway 3. Work environment.....	36
4.2.4 Pathway 4. Motivation	37
4.3 MALAWI: Central Medical Stores Trust (CMST)	39
4.3.1 Pathway 1. Staffing	39
4.3.2 Pathway 2. Skills.....	40
4.3.3 Pathway 3. Work environment.....	41
4.3.4 Pathway 4. Motivation	42
4.4 SUDAN: National Medical Supplies Fund (NMSF).....	43
4.4.1 Pathway 1. Staffing	43
4.4.2 Pathway 2. Skills.....	44
4.4.3 Pathway 3: Work environment.....	44
4.4.4 Pathway 4. Motivation	45
4.5 Tanzania: Medical Stores Department (MSD)	46
4.5.1 Pathway 1: Staffing	47

4.5.2	Pathway 2. Skills.....	48
4.5.3	Pathway 3. Work environment.....	49
4.5.4	Pathway 4. Motivation	50
4.6	Uganda: National Medical Stores (NMS).....	51
4.6.1	Pathway 1. Staffing	51
4.6.2	Pathway 2. Skills.....	53
4.6.3	Pathway 3. Work environment.....	54
4.6.4	Pathway 4. Motivation	55
5.	Conclusion	57
5.1	Pathway 1. Staffing	57
5.2	Pathway 2. Skills	57
5.3	Pathway 3. Working conditions.....	58
5.4	Pathway 4. Motivation.....	59
	Appendix 1. Comparative tables (case studies)	60
	Appendix 2. Bibliography	72

Table of acronyms

BMGF	Bill and Melinda Gates Foundation
BSC	Balanced scorecard
CEO	Chief executive officer
CMS	Central Medical Stores
CPD	Continuous professional development
CMST	Central Medical Stores Trust
DRIVE	Direction, review, improve, validate, and enjoy
EPSA	Ethiopian Pharmaceutical Supply Agency
GHSC-PSM	Global Health Supply Chain – Procurement Supply Management
HR	Human resources
HRM	Human resource management
IAPHL	International Association of Public Health Logisticians
KEMSA	Kenya Medical Supplies Authority
KII	Key informant interview
KPIs	Key performance indicators
LMICs	Low- and middle-income countries
MSD	Medical Stores Department
NMS	National Medical Stores
NMSF	National Medical Supplies Fund
OSH	Occupational safety and health
PtD	People that Deliver
PPE	Personal protective equipment
PSA	Pamela Steele Associates
PSPTB	Procurement and Supplies Professionals and Technicians Board (Tanzania)
SCM	Supply Chain Management
SOPs	Standard operating procedures
SoSoKE	South–South Knowledge Exchange
TNA	Training needs analysis
UN	United Nations
USAID	United States Agency for International Development
WHO	World Health Organization

1. Introduction and rationale

Many supply chain organisations have become increasingly aware that successful Supply Chain Management (SCM) rests on the performance of people. This view was previously overshadowed by organisations' focus on technology, information, and measurement systems. Recognising the importance of the people who manage supply chains—their skills, motivations, and capacities for development—is an essential step in any supply chain improvement initiative. Human capital is critical for supply chains' effective functioning, which has prompted human resource (HR) practitioners and scholars to explore the nexus between HR management (HRM) and SCM. Empirical research has demonstrated the positive impact of HRM on SCM implementation, organisational performance, and customer satisfaction through strategic management of people's knowledge, skills, and abilities (Gómez-Cedeño et al., 2015; Hohenstein, 2014).

The impact of HRM is particularly important in the context of low- and middle-income countries (LMICs), which often experience severe shortages in their supply chain workforces (WHO, 2010). Whilst there has been an increasing focus globally on HR for health, fewer initiatives explore HR in health supply chains (most notably, the People that Deliver (PtD) and United States Agency for International Development (USAID) Deliver project). Moreover, there are often gaps in data on supply chain personnel, particularly at the administrative level, leading to capacity gaps going unnoticed (Cometto et al., 2014). Multiple governmental initiatives in Sub-Saharan Africa have successfully implemented HRM practices and long-term strategies to increase the quantity and quality of health and supply chain professionals within countries. These approaches, which combine interactive and participatory training with the strengthening of health systems, demonstrate the potential to improve the performance of health and supply chain workforces.

In this context, the present study aims to broaden the HRM perspective and explore how traditional HRM practices, such as recruitment and employee selection, compensation and benefits, training and development, performance management, and cultural and diversity management can underpin supply chain transformation. The backdrop for the study is the ongoing implementation in Ethiopia of the supply chain transformation programme called 'Admas' ('Horizon' in Amharic), which is being executed by Pamela Steele Associates (PSA) for the Ethiopian Pharmaceutical Supplies Agency (EPSA). Supported by the Bill and Melinda Gates Foundation (BMGF), the programme in its current phase aims to ensure clear performance targets for all technical and administrative personnel at EPSA, sustainable capacity development initiatives, and a safe work environment. The present study aims to identify the best practices in HRM activities currently being implemented across a select group of six case study African supply chain organisations, in order to identify approaches that can inform and support effective SCM and transformation.

2. Methodology

The study adopts the traditional HRM framework of practices, such as selection, training, appraisal, and rewards, used for employee management in organisations (Wright and McMahan, 1992). It also follows the PtD Human Resources for Supply Chain Management Theory of Change, a framework that enables supply chain practitioners to trace the impact of investments and interventions in HR on health Supply Chain performance (PtD, 2018). This study looks at the four pathways of change proposed by Theory of Change and adapts some of its indicators to monitor the effects of HR interventions.

The methodology of this study included three components:

1. *A desk review of literature*

The study carried out a desk review of relevant literature on HR practices and health SCM, which includes peer-reviewed articles, and global project reports and studies.

2. *An online survey*

An online questionnaire was prepared to collect responses across a wide group of stakeholders, particularly logistics providers at the central, district, and state levels, as well as implementing partners and private sector participants in the health supply chain. Invitations to complete the survey were circulated through multiple channels, such as the International Association of Public Health Logisticians (IAPHL) platform and the South-South Knowledge Exchange network (SoSoKE).

In total, 33 complete responses were received from five groups of key stakeholders. The sample included:

- Officials from the ministries of health in Kenya, Malawi, Nigeria, Somalia, and South Sudan (19%);
- Representatives from parastatal and central procurement agencies in Ethiopia, Ghana, Liberia, Sudan, Nigeria, and Tanzania (35%);
- Representatives from district-level agencies in Ghana and Uganda (11%);
- Representatives from state-level health facilities in Nigeria (12%);
- Representatives from the donor community and private charitable organisations in Bangladesh, Burkina Faso, Eswatini, Nigeria, Switzerland, and Zambia (23%).

The semi-structured survey followed the Theory of Change framework, asking a mix of closed- and open-ended questions on the staffing, skills, work conditions, and motivation pathways. The study combines quantitative and qualitative survey data to illustrate the commonality of different HR practices and mechanisms discussed in the desk review (Section 1).

3. *Key informant interviews (KIIs)*

Six interviews were carried out online, via Zoom and Microsoft Teams, with key HR professionals in the six-case study parastatal health supply chain organisations in Africa, which have each undergone some form of supply chain transformation in recent years. The key informants were selected for their extensive knowledge of and experience in the HR processes within the organisation, either in the capacity of director or senior officer. The interviews were guided by the PSA policy of confidentiality and anonymity. The following table provides a breakdown of the countries and organisations selected for interviews.

<i>Country</i>	<i>Name of the organisation</i>
<i>Ethiopia</i>	Ethiopian Pharmaceutical Supply Agency (EPSA)
<i>Kenya</i>	Kenya Medical Supplies Agency (KEMSA)
<i>Malawi</i>	Central Medical Stores Trust (CMST)
<i>Sudan</i>	National Medical Supplies Fund (NMSF)
<i>Tanzania</i>	Medical Stores Department (MSD)
<i>Uganda</i>	National Medical Stores (NMS)

Table 1. Countries and supply chain organisations that were the focus of the KIIs

The interviews form the central part of the case studies, providing a snapshot of the HRM mechanisms and practices currently being implemented across the case study parastatal supply chain organisations in Africa (Section 2). The detailed findings from the case studies are organised by the four pathways of change of the PtD Human Resources for Supply Chain Management Theory of Change. A comparative summary of the findings of the case studies is presented in Annex 1.

Due to severe restrictions, imposed by the global pandemic of COVID-19 and time considerations, these case studies do not seek to present an exhaustive picture of HRM mechanisms in these supply chain organisations. Their task is to help address the paucity of detailed information about HR policies and practices in these organisations, as well as inform and encourages knowledge sharing and knowledge transfer on trajectories for HR interventions that seek to improve health supply chains on the continent.

3. Desk review and online survey

3.1 Pathway 1: Staffing

Successful recruitment is often described as finding the right people for the right roles at the right time. Achieving these 'rights' is paramount for ensuring effective supply chain performance. The recruitment process needs to ensure that selected candidates possess the relevant skills and abilities in supply chain functions that are essential for the organisation to manage supply chain operations and to achieve its current and future goals. Recruitment is a critical activity for the HR team and line managers and requires everyone involved to have sufficient knowledge and skills to make effective recruitment decisions.

The global shortage of health workers, revealed by the WHO in 2006, continues (WHO, 2006). In 2016, the International Labour Office study analysed the employment potential of the health supply chain workforce, particularly in relation to the development of universal health coverage. It demonstrated that 91% of the shortfall in supply chain personnel occurs in LMICs, and even more critically in Africa (Scheil-Adlung, 2016). This has put additional pressure on recruitment systems and processes in African health organisations to select the most qualified health workers and to ensure employee retention in a situation in which there is an insufficient number of skilled cadres, and fierce competition with the private sector, which is more successful in attracting highly trained workforce.

(i) Recruitment process

Recruitment, as an HRM process, includes several stages, beginning with the analysis of HR requirements and ending with an offer of employment to selected candidates. The USAID Deliver Project developed a detailed reference guide for recruiting supply chain professionals, providing templates and samples to support strategic HR management in health supply chain organisations (USAID Deliver, 2013). The standard six-step process, demonstrated in Figure 1, aims to provide a flexible approach to recruiting in order to attract the right people who can propel supply chain performance. The overwhelming majority of our online survey respondents (92%) indicated that their respective organisations have put in place similar procedures to secure efficient, transparent, fair, and competitive recruitment.

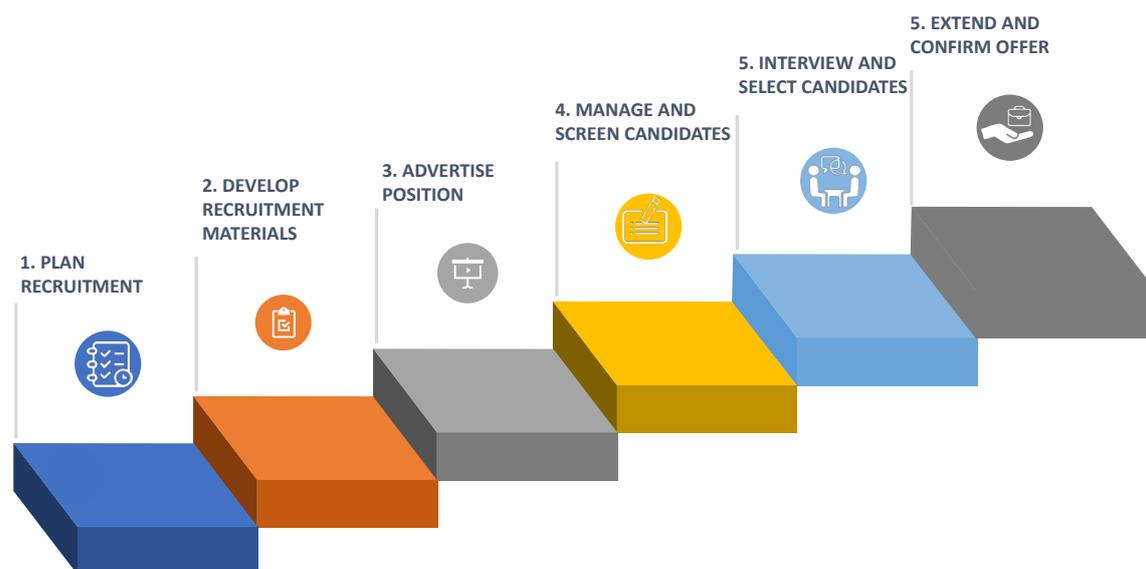


Figure 1. Standard recruiting process

Source: Adapted from USAID Deliver, 2013.

Step 1: Planning recruitment

The first step of the recruitment process aims to identify the hiring needs. Key decisions should be made about what staff positions are required to effectively run the supply chain, where, and at what level. This includes identifying the existing vacancies, and analysing job specifications and relevant competency requirements. The analysis of supply chain needs depends on the structure (regional/zonal or district/sub-district), design (departments/units), and the management type (in-house or outsourcing) of the supply chain organisation. Setting up a strong recruiting team or committee is crucial for guiding the recruitment process. This can include a recruiting manager, unit director, job supervisor, and technical specialist in the vacant job position.

Recruiting managers closely monitor the sourcing, interviewing, and employment process. They supervise the recruiting committee, update current and design new recruiting procedures, and coordinate the hiring needs with departments. The managers approve recruitment request forms used by department to communicate to the HR team the need to recruit new or additional members of the workforce.

Step 2: Review/develop job descriptions

An important starting point for a Supply Chain organisation is to draft a list of crucial supply chain positions and identify staffing requirements for these roles. Most of our survey respondents (94%) indicated that their respective organisations had prepared such lists. However, 21% of them highlighted that these lists did not specify the number of employees required to fill supply chain roles.

Defining the required jobs involves gathering information from a variety of sources about specific outputs of the job, as well as skills and resources that will enable them. This information is documented in a job description, which specifies the purpose of the role, the scope of duties and

responsibilities, qualifications and skills, working conditions and location, compensation and benefits, etc. Most of the survey respondents (91%) highlighted that the job descriptions developed by their organisations included such key elements as:

- Clearly defined and detailed job objectives (93%);
- Essential professional qualifications (90%);
- A range of decision-making responsibilities (71%);
- Clear reporting relationships (84%).

The task of reviewing job descriptions falls within the remit of the recruiting committee, which also

- Decides on how the proposed jobs fit into the workforce plan of the organisation;
- Plans the whole recruiting process;
- Develops selection criteria (including interview evaluation);
- Makes decisions on job advertising;
- Reviews applications for employment;
- Interviews select candidates;
- Extends and confirms offers.

An important feature of recruitment is a competency-based focus. This means that the selection process is aimed at identifying candidates who possess valuable knowledge, skills, training, and experience that underpin their successful performance in supply chain roles. A competency framework sets out and defines competency areas and attributes that serve as key performance indicators for employees in their expected roles and levels of performance. Competency frameworks and compendia are now widely used components of HRM for SCM: 75% of the online survey respondents indicated that their organisations follow a competency framework in the process of developing or reviewing job descriptions.

Step 3: Preparing recruitment materials

The recruiting committee is also entrusted with developing materials that will guide the recruitment process. These can include:

- A reference and employee background check questionnaire;
- An interview guide, detailing the roles of committee members and featuring a list of questions to be used when interviewing the select group of candidates (including general HR questions and special technical interview questions);
- Interview selection criteria – a checklist form for selecting candidates for an interview, which specifies essential components for determining the best qualifying candidates (e.g. the level of education, professional certificates, years of experience, relevant skills, etc., as well as criteria specific to the position);
- Interview evaluation criteria – a form for assessing candidates' performance at an interview and ranking candidates for the final employment offer (often using a rating sheet or a more complex candidate comparison scorecard).

Step 4: Advertising

It is important that job adverts give clear and accurate information about the organisation and the vacant position. They should normally cover:

- A job summary and outline of the core competencies (or a person specification);
- The job location;

- The type of employment (e.g. fixed-term or permanent role);
- The organisation's activities and values;
- The reward and benefits package, and possible flexible working opportunities;
- Application deadlines and instructions on how to apply.

Many supply chain organisations surveyed for the present study, including the six case study parastatal organisations (Section 2), adopt both internal and external methods of advertising. For certain roles, HR departments may decide to advertise positions internally. In this case, job adverts will be posted on notice boards in the organisation's headquarters and hubs or shared via corporate email and other forms of internal communications (e.g. company newsletters). If the position is advertised outside the organisation, the HR department can use several channels to reach potential applicants, such as:

- The organisational website;
- Commercial online job boards;
- Newspapers and local TV and/or radio stations;
- Recruitment agencies, careers portals, and professional networking sites;
- Publications of academic partner institutions.

The online survey results demonstrate that many (67%) of the organisations represented by the respondents understand job advertising: they use printed and online media, as well as local radio stations, as a necessary precondition for ensuring the transparency of the recruitment process.

Step 5: Interviewing and selecting candidates

Managing job applications and screening candidates is a multi-step process that includes:

- a) Reviewing all candidate applications to ensure they meet minimum required qualifications and submitting them to the recruiting committee;
- b) Selecting candidates to be interviewed by the recruiting committee based on required competencies, featured in job descriptions and interview selection criteria;
- c) Scheduling candidates for an interview (which includes informing candidates about the interview process and requesting references).

Respondents to our online survey provided examples of recruitment procedures that aim to ensure that the competencies of recruited individuals match the requirements of crucial supply chain positions.

To establish a competency-based approach to recruitment, the respondents highlighted that the following measures were employed by their respective organisations:

- Assessing candidates' relevant educational background, past work experience (especially in previous SCM projects and public health institutions), and professional qualifications and certifications;
- Conducting specialised tests (written and oral) to verify the level of technical skills and field experience of a candidate before the interview, or asking a range of technical questions specific to the position during the interview;
- Including problem-solving simulations and leadership skills tests as part of the interview.

35% of the online survey respondents pointed to performance during interviews as being among the most decisive factors for a successful job application. At the same time, 42% of respondents indicated that the recruitment process in their organisations concentrated more on the assessment of relevant education and the length of field experience than on technical expertise.

The respondents highlighted the following measures taken within their organisations to ensure transparency of the recruitment process:

- Open and extensive advertising of vacant positions;
- Communicating job requirements and interview procedures to candidates;
- Employing a multidisciplinary and multi-stakeholder interview panel;
- Carefully following through all the steps of the standard recruitment procedure without cutting corners.

The respondents also indicated the variety of steps undertaken by their respective organisations to secure a fair and competitive process of recruitment, such as:

- Establishing equal opportunities in employment (especially on the grounds of sex, race, and age);
- Taking all applicants, both internal and external, through the same selection process to ensure a level playing field;
- Granting all candidates who meet the minimum job requirements a chance to be interviewed;
- Selecting the best-performing candidate, taking into consideration the results of the written test and performance at the interview, as well as relevant qualifications.

Step 6: Extending and confirming an offer of employment

After the recruiting committee has selected the top candidate to fill the vacant position and notified the HR department, a formal letter of employment is issued. It normally states:

- The job title;
- Salary;
- Employee benefits;
- Start date and probation period (if applicable).

In our cases studies it was found that at this stage organisations may enter negotiations over the terms of employment with candidates whose skills are in high demand, to reach a mutually beneficial agreement. If negotiations fail or a candidate declines the offer outright, then the next candidate on the recruitment committee's selection list is made an employment offer. Finally, the HR department prepares for and confirms the employment contract with the new employee, notifies other candidates that the job has been filled, and communicates to the job manager the new employee's start date.

(ii) Budget for supply chain staff and pay scale

Clear pay and grading scales provide a framework for administering employee compensation programmes that help balance internal and external equity. This is instrumental in attracting and retaining employees who can contribute to the achievement of better health outcomes in health supply chains. A well-designed salary structure also allows supply chain managers to reward performance and skills development. In our online survey 59% of respondents acknowledged that their organisations did not have clear pay and grading scales linked to supply chain careers. This is a challenge that can have a negative impact on the recruitment process and level of job satisfaction. Also, 69% of respondents highlighted that the lack of salary benchmarks often becomes a source of frustration for employees. Among the best practices within the organisations that help avoid this situation and present clear and competitive pay scales to employees, the survey respondents indicated:

- Government salary benchmarking schemes;
- Salary comparisons between private and public institutions, as well as multinational and local companies;
- Salary benchmarking for related job roles and functions within the industry.

3.2 Pathway 2: Skills

(i) Training needs analysis (TNA)

The purpose of a TNA is to identify the training and development requirements of the supply chain specialists by assessing their levels of skills and knowledge. A TNA helps to establish competency gaps that impede performance in the specialists' respective roles and that hinder the overall efficiency of the supply chain. TNA allows organisations to develop informed decisions on what learning is needed at individual and organisational levels, and to draft a training plan and an organisational training strategy to ensure sufficient capacity for sustaining current and future business performance. A TNA is a multi-step process, which can be divided into three stages: pre-assessment, TNA, and post-assessment strategy and planning.

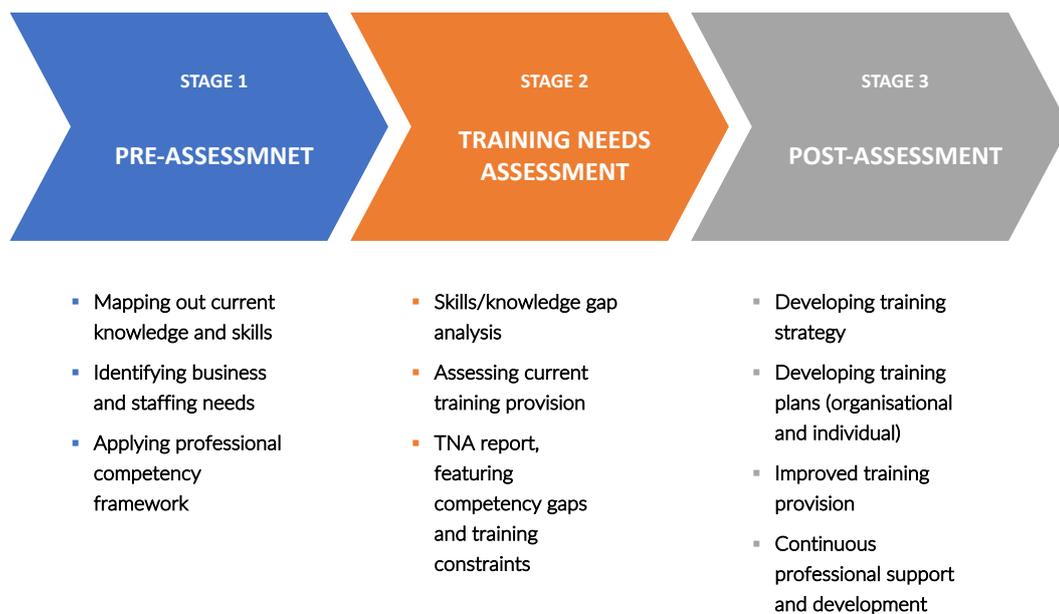


Figure 2. Stages of TNA

Although TNAs are becoming more common across supply chain organisations, they are still less far from universal. Only half of our survey respondents indicated that their respective organisations conduct a needs analysis. In most cases, TNAs are performed at the end of the financial year and coincide with traditional employee performance appraisals.

DOES YOUR ORGANISATION
CONDUCT TNA?

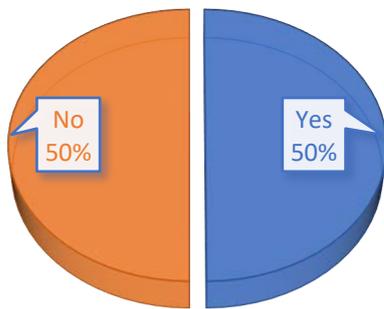


Figure 3. Survey results on conducting a TNA

HOW OFTEN DOES YOUR
ORGANISATION CONDUCT
TNA?

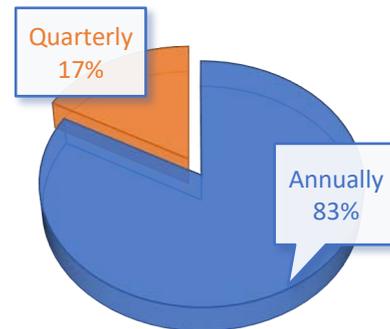


Figure 4. Survey results on the frequency of conducting a TNA

The survey results indicate that in most cases the TNA is conducted at departmental level (82%) and organisation-wide (70%), while individual training needs of employees receive less attention (65%). The connection between TNA, planning, and training strategy is also becoming more evident: 65% of the survey respondents indicated that their organisations have a strategy or plan that is informed by TNAs.

Numerous HR for health development and transformation programmes, implemented over the past decade, have attempted to correct this skewed focus on organisational requirements and achieve a more integrated and harmonised approach to HR by aligning organisational business objectives with the personal training and development needs of employees. This is reflected in individual development plans, which help supervisors better understand employees' professional goals and development needs, assist organisations in identifying and planning training activities, and give employees more control and responsibility over their career development.

Individual development plans are sometimes used as performance appraisal tools, but their real power lies in supporting employees' professional development. Individual development plans lead employees to reflect on their competencies, strengths and weaknesses, and to undertake learning and capacity development activities (Smith and Tillema, 2013). The effectiveness of individual development plans depends on their design and how explicit their focus is on learning and development purposes.

(ii) Professionalisation framework

In general terms, professionalisation means the process by which an occupation turns into a profession. SCM specialists have been working in the public and private sectors for decades, but only relatively recently has SCM come to be a distinct and complex professional field. Professionalisation has become particularly important in the context of strengthening health supply chain systems in Africa, which require stronger professional expertise and necessitate a more formalised approach to activities, skills, and understanding the effective management of supply chains. The main task of professionalisation is to prepare highly competent managers and practitioners through training and career management. This means introducing standards of education and certification of employees, and creating partnerships between key stakeholders

(i.e. government, private sector, academia, business and professional associations, etc.) to establish SCM as a professional discipline.

In 2019, USAID Global Health Supply Chain – Procurement Supply Management (GHSC-PSM), in conjunction with PtD and South African Production and Inventory Control Society (SAPICS), began preparing a professionalisation framework for SCM, combining material on supply chain competencies with the goal of generating what they described as ‘a paradigm shift’ for HR systems. The project stipulates that the problem with the current approach stems from the fact that health supply chain organisations do not incorporate supply chain activities within their strategic operating models, and HR development is not aligned with their strategic objectives. This creates a situation where supply chain activities are performed by staff members who do not have the essential skills or knowledge to ensure optimal supply chain performance.

Professionalisation framework seeks to address a lack of:

- Global standards for public and private healthcare SCM;
- Role-based definitions with competency-based descriptions for SCM job functions;
- Standards for skills needs analysis, targeting competency gaps in the public and private healthcare workforce;
- A fit-for-purpose and harmonised learning curriculum that prepares individuals for work within a health supply chain environment;
- An industry body that is responsible for professional recognition of supply chain workers;
- Ethical and accountable SCM standards, which go beyond those of the organisations’ own policies (dos Santos et al., 2019).

The core of the professionalisation framework will consist of an agreed-upon competency framework, which is expected to align the private and public sectors. This will allow for the development of a range of roles, with associated job descriptions to capture the framework and the potential career progression within SCM, from ‘processor’ to ‘chartered professional’. Qualification and certification will help cement professional education pathways for suggested job roles and descriptions. Finally, a country implementation methodology will provide practical steps, with supporting tools on how to engage all relevant stakeholders in various country contexts in relation to their professionalisation strategies.

KIIs, conducted by PtD in 2019 as part of the USAID GHSC-PSM project, confirmed strong interest of the health SCM community in the professionalisation framework, which has already been evident in some previous initiatives. For example, in 2017, the South African Capacity Building Chief Directorate in the Office of the Accountant General established the interim Supply Chain Council to coordinate the interests of various SCM stakeholders in the country, and to establish SCM as a professional discipline within South Africa. Furthermore, the National Treasury has developed a SCM Master Learning Curriculum and SCM Qualification Design standard that define the knowledge and skills requirement for public procurement (CBI News, 2017).

The respondents to our online survey also demonstrated significant interest in the concept of a professionalisation framework: 35% of respondents stated that their organisations are planning to apply a form of professionalisation framework, and a further 18% indicated that they were exploring the USAID GHSC-PSM project and other professionalisation initiatives.

(iii) Communities of practice

One way of promoting the professionalisation of supply chain workers is by creating a community of practice. This can be best described as a shared domain of interest where committed

professionals come together to help and support each other, share information and ideas, learn, and improve their skills. ‘Community’ implies a broad network of members building relationships that enable them to interact and learn from each other. However, this is not merely an interest group: the engaged members are practitioners and their goal is to share a range of experiences, techniques, tools, methods, and ways of addressing recurring problems in their professional roles. Therefore, a community of practice can take various forms, such as mentoring, on-the-job training, moderated discussions, webinars, publications etc. (Wenger-Trayner, 2015). The diagram below demonstrates the popularity of various forms of community of practice, as indicated by our survey respondents.



Figure 5. Forms of community of practice

Among other forms of community of practice, the respondents highlighted supportive supervision, workshops, and field meetings.

3.3 Pathway 3: Working conditions

Organisational culture refers to the shared characteristics among people within the same organisation, including their values, behaviours, routines, traditions, and perspectives. Organisational culture is an important component of creating a supportive work environment, providing a way for employees to voice their views and develop connections and purpose. In a survey of more than 2,000 people in 50 countries, 65% of respondents stated that culture was more important than strategy or operating model for an organisation’s performance (PricewaterhouseCoopers, 2018). Within the health sector, perceived injustice contributes to worker demotivation and has been shown to negatively impact patient care and the overall organisational climate (Abrese-Ako et al., 2014; Manafa et al, 2009). Conversely, a positive work climate positively impacts organisational behaviour (Jayasuriya et al., 2014).

There are numerous ways to strengthen organisational culture, including identifying the current culture and how it can be improved, as well as implementing policies to create a fair and safe working environment. Key policies to promote a positive organisational culture are outlined below, as well as broader ways of strengthening the overall working conditions and culture. This is followed by information on whistleblowing policies and establishing a safe physical environment.

(i) Social and emotional environment: Implementing policies to support a positive organisational culture

Drawing on a combination of a literature review and guidance from the PtD Human Resources for Supply Chain Management Theory of Change, the below policy areas (an overarching code of conduct, anti-harassment policies, anti-discrimination policies, and policies that create a good working environment for women) were identified as critical in creating a strong organisational culture or supportive working environment.

An overarching code of conduct or ethics. A code of conduct is a tool that can help ensure workers at an organisation are working in a supportive and fair environment with the highest professionalism. 61% of survey respondents stated that they had one in place. A code of conduct helps to establish ethical standards, principles, and a professional work culture. Several health supply chain organisations – including NMSF in Sudan, KEMSA in Kenya, and EPSA in Ethiopia – have their own specific Code of Conduct, which cover a range of areas, including corruption, harassment, dress codes, and fairness (KEMSA, 2015; NMSF, 2015).



Figure 6. Survey results on the implementation of codes of conduct

Anti-harassment policies. The United Nations (UN) defines harassment as ‘any unwelcome conduct that might reasonably be expected or be perceived to cause offence or humiliation to another person, when such conduct interferes with work or creates an intimidating, hostile or offensive work environment’, and defines sexual harassment similarly, but includes unwelcome contact of a sexual nature (UN, 2019). 42% of survey respondents stated that their organisation has such policies in place.

Anti-discrimination or equal opportunity policies. The UN defines discrimination as ‘any unfair treatment or arbitrary distinction’ based on several characteristics, including (but not limited to) race, sex, gender, age and ethnic origin (UN, 2019). 48% of survey respondents stated that their organisation has such policies in place. Certain large international organisations highlight the importance of reporting any suspicions of misconduct, offering a ‘speak up’ helpline which provides anonymous and confidential advice, as well as a hotline for reporting misconduct (UN). It is not the responsibility of the reporter to decide whether misconduct has occurred (Oxfam). Some organisations, such as EPSA, also employ dedicated gender and youth equality officers.

Policies that create a good working environment for women, including recruitment. Policies that create a good working environment for women can include: hiring and promotion, challenging everyday discrimination (for example, mistakenly assuming a colleague is more

junior than they are), and creating a zero tolerance environment and clear procedures around sexual harassment (Krivkovich et al., 2018). 52% of survey respondents stated that their organisation has policies in this area in place, though did not list many details of these. However, one respondent in Burkina Faso noted that their organisation promoted gender and embraced the ideals of sexual and reproductive health (including family planning).

Other factors to create a good working environment. Policies should be regularly reviewed (the UN reviews its anti-discrimination and harassment policy every two years at a minimum). Further, there is a need to differentiate between having a policy in place, and the policy being well implemented and with staff having full awareness of it. In the survey responses, staff from the same organisation would occasionally provide different accounts of the policies in place, implying a lack of organisational clarity. Additionally, one respondent noted that, whilst they thought there were environment and occupational safety and health (OSH) policies at their organisation, they were not sure if these were in place.

Training can also be a helpful way to create awareness of the details and importance of the above-mentioned policies. 52% of survey respondents said they worked at organisations that conduct training to create an optimal work environment. Examples of this training that were given include online training related to anti-discrimination and anti-harassment, and training related to health safety, security, and the environment. One respondent commented that training is done quarterly and another commented that that they are required to do training and become certified in relation to the organisation's Code of Ethics.

A 2014 TNA for NMSF in Sudan emphasised the difficulty in influencing staff attitudes through short training courses alone (NMSF, 2017). Greater impact is obtained from having a positive organisational culture, with clear values, principles, attitudes, and beliefs, as well as leaders setting clear examples of how this culture can be put into practice (NCIHD, 2014).

There are numerous ways, beyond policies, to strengthen organisational culture, and a rich literature is available detailing how organisations have strengthened or changed their organisational culture. EPSA has recently focused on transforming its organisational culture as part of its overall transformation programme, working with PSA as part of the Admas Programme. This has included conducting a detailed culture assessment to investigate the current organisational culture in EPSA, and the gap between the organisation's lived culture and its desired culture. This culture change is also being facilitated by interventions such as the use of cultural ambassadors to cascade the vision and shared values of the Agency and to act as catalysts and advocates for change.

However, the literature specifically relating to health supply chain, or even the general health workforce, and organisational culture change is more limited. More broadly, companies that have successfully changed their organisational culture have done so through taking the time to understand employees' perspectives and involve them in planning, emphasising the importance of employee pride and highlighting exemplary behaviour. The Harvard Business Review identified five principles to facilitate organisational change: matching strategy and culture, focusing on a few critical shifts in behaviour, honouring the strength of the existing culture, integrating formal and informal interventions, and measuring and monitoring cultural evolution (Katzenbach et al., 2012).

(ii) Whistleblowing mechanisms

A whistleblower is a person who reports or discloses information of any wrongdoing in a work context, to prevent harm or to protect the public interest (European Council definition). Several

African countries have recently introduced legislation to protect whistleblowers, including Cote d'Ivoire (2009), Ghana (2006), Morocco (2011), Mozambique (2011), and Zambia (2010), though laws are only one part of the solution (Moy, 2018).

Most survey respondents reported that their organisation does not have a whistleblowing mechanism in place (though 39% do have one in place). For those who do, this occurs via an email or a hotline. Other mechanisms mentioned by survey respondents include a specific email system to ensure anonymity, complaints boxes, and a hotline with anonymous IDs, managed by a partner. Other recommendations for best practices in creating whistleblowing channels include:

- Certain protections should be given to whistleblowers to avoid retribution (including legal protection);
- There is a need to overcome cultural barriers (whistleblowers may be seen as disgruntled employees or as motivated by seeking monetary rewards);
- Strong internal reporting systems (independent and third-party);
- Committing to a 'speak-up' organisational culture.

(iii) Physical environment: Establishing a safety and health management system, including developing standard operating procedures (SOPs)

Effective OSH measures are widely recognised as essential components of workforce health and productivity (International Labour Office, 2001). Workplace safety includes not only physical threats, but also psychosocial (including stress) and gender-based violence or discrimination and can be veiled underneath cultural norms (Deussom et al., 2012).

Effective OSH procedures are highly important. Failure by management to maintain safety standards is demotivating and can show a lack of appreciation of employee's work (Abrese-Ako et al., 2014). Workplace safety is also a key non-financial incentive (Ministry of Health and Social Services, 2015) and a positive practice environment can help to increase worker motivation and reduce OSH risks (Deussom et al., 2012; Shumba et al; 2017).

From a combination of a literature review and the PtD framework, the following critical factors were identified for creating a strong OSH environment (the figures in brackets are the percentage of surveyed respondents whose organisation implements these):

- Have a system in place to document health and safety issues in the workplace (42%);
- Have a regular budget available to ensure maintenance and repair of workplace items (58%);
- Ensure staff have the necessary tools and equipment to do their jobs (84%);
- Ensure checklists are completed to ensure compliance with safety standards in the work area (45%);
- Have health and safety policies and procedures for the organisation (58%);
- Conduct health and safety risk assessments or evaluations (52%).

Staff having the necessary tools and equipment to do their jobs was the most common policy identified by respondents as being implemented in their organisation. Respondents outlined how they implement training in this area, including on safety and keeping the organisation clean (one organisation trains 125 staff in each topic), and training on infection prevention and control. One respondent noted that challenges in this area are numerous, which creates obstacles to how the organisation works. Another highlighted that OSH is applied only when workers go into the field (e.g. when drivers assess roads, terrain, and risk), implying that it is not applied evenly across the whole country / organisation.

Other ways that an effective safety and health management system can be created include by initially collecting data on what occupational injuries occur and finding out from health workers their greatest occupational health concerns, and creating legislation or regulatory standards to provide a policy framework which empowers health workers to improve their operational environment.

3.4 Pathway 4: Motivation

Employee motivation is a key HR strategy and plays a crucial role in achieving an organisation's vision. Motivation in health supply chains can be achieved when quality performance is supported within the system, the workforce is adequately incentivised, there is good supervision and management support employees, competency-based promotion is followed, the organisation designs a strong employee engagement and retention policy, and there exist disciplinary guidelines.

Employee motivation is a key HR strategy and plays a crucial role in achieving the organisation's vision. Motivation in health supply chains can be achieved when quality performance is supported within the system, the workforce is adequately incentivised, there is good supervision and management support employees, competency-based promotion is followed, the organisation designs a strong employee engagement and retention policy, and there exist disciplinary guidelines.

(i) Performance management

An effective performance management system is able to align individual employee goals with the organisational goals to positively impact supply chain performance and improve health outcomes. Key Performance Indicators (KPIs) support supply chain managers to understand the workforce situation and are effective when applied consistently and comprehensively (Bean and Geraghty, 2003). A good KPI is one that is sparse, drillable, actionable, owned, referenced, correlated, balanced, aligned, and validated (Eckerson, 2009).

The survey revealed that 73% of the respondents confirmed the presence of performance management systems in their health supply chain organisations (Figure 7). Some of the best practices in this area indicated by the respondents include the use of performance indicators, annual appraisals to reinforce performance through a balanced scorecard (BSC), conducting review meetings, and continual investment in HR development and management, thereby improving employee motivation and performance.

DOES YOUR ORGANISATION HAVE A
PERFORMANCE MANAGEMENT SYSTEM?

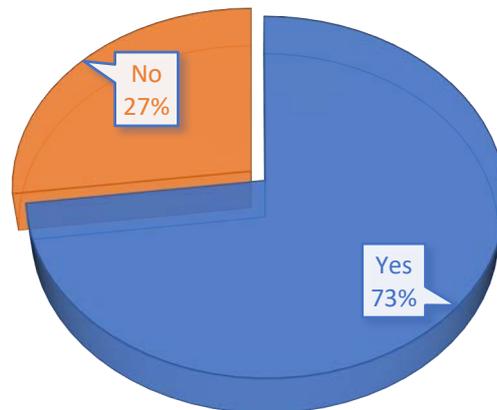


Figure 7: Survey results on the implementation of performance management systems

68% of the survey respondents also indicated that their organisations have a performance management process for identifying and documenting poor performance. Additionally, KPIs are in place to strengthen performance management and ensure alignment with the strategic plan. However, this is not a standard practice and differences exist between practices in the public and in the private sector.

(ii) Incentives

Financial and non-financial incentives can improve supply chain practices through improved staff motivation, enhanced collaboration, and increased investment in health supply chain infrastructure (Spisak and Morgan, 2014). Proper use of incentives can improve teamwork and adherence to SOPs, and can strengthen accountability (Vujicic et al., 2004). Financial incentives are an important motivating factor for health workers, especially in countries where government salaries and wages are insufficient to meet the basic needs of health workers and their families (Dieleman et al., 2003; Martinez and Lindsay, 2007). Non-financial incentives are needed to complete a package that will attract health workers – especially to rural and remote areas – and encourage them to stay in the workforce. The lack of professional development has, likewise, been cited as a reason for job dissatisfaction (Bolger et al., 2005).

The survey identified a range of tools that are currently being used to incentivise the health supply chain workforce. Financial support for continuing professional development, partnership with local universities, paid study leave, funder-based certification, approval for the acquisition of relevant certifications aligned to the PtD theory of change, and performance-based incentives are all used to incentivise the workforce. Donor support for incentives is considered an 'exceptional measure' that might otherwise be deemed unsustainable (Palmer, 2006). The utilisation of performance-based contracts to improve workforce participatory spaces for information and feedback sharing has been encouraged (WHO, 2017). Rewards and incentives like payment of membership fees to some supply chain professional bodies are used to promote a culture of performance. However, a robust incentive policy should also be supported by leadership at all levels. Without this support it will not be possible to motivate the supply chain workforce.

(iii) Good supervision and management

Supervision, including adequate technical support and feedback, can improve the motivation of health supply chain professionals. The survey revealed that monitoring and supportive visits, mentoring and coaching programmes, systematic supervision, and moderated discussions are all implemented by the respondents' organisations. Similarly, the survey results highlighted that orientation programmes for new recruits have proved effective to maintain supportive line management.

(iv) Promotions

Promotions are an effective tool to identify, develop, and manage work performance (Schippmann et al., 2010; Posthuma and Campion, 2008; Campion et al., 2011). McClelland (1973) is often credited with launching the competency movement, which is at the core of all personnel management activities. Designing competency-based promotion systems can foster an environment of improved performance and can help an organisation to outperform its competitors (Audenaert et al., 2009; Morgeson et al., 2009).

According to the survey results, 59% of the respondents felt that there are not enough promotion opportunities for the workforce. Promotions are either linked to the number of years in the job role, or tied to the state civil service scheme, or follow a chain of the organisational hierarchy. The limitations imposed by the over-bureaucratisation of promotions result in a fragmented system and lower levels of staff motivation. The literature suggests that improved performance-oriented management practices and stronger links between competencies and promotions can help resolve some issues in this area (Chimwaza et al., 2014).

(v) Employee engagement and retention

Employee engagement is seen as an important motivator to improve work efficiency and job satisfaction (Schaufeli et al., 2002). Scholarship suggests that development opportunities, communication channels, rewards and recognition, and employer's support improve employee engagement (Khalifeh and Som, 2013; Macey and Schneider, 2008). Autonomy, clarity in roles, decision-making freedom, and unity of direction are closely linked with employee engagement (Kwenin et al., 2013; Rich et al., 2010). Training and development opportunities, financial perks and a competitive pay structure, an enabling organisational culture, positive feedback, and the style of leadership can influence employee engagement and retention (Guo et al., 2015; Paul and Anantharaman, 2003; Zingheim et al., 2009).

Only 44% of the survey respondents indicated the existence of employee engagement and retention policies in their organisation (Figure 10). Retention allowances like housing facilities, transportation, and health insurance coverage were found to be currently in place to retain employees. A democratic leadership style was found to influence employee performance and support the retention of high-skilled employees.

DOES YOUR ORGANISATION HAVE AN EMPLOYEE ENGAGEMENT AND RETENTION POLICY?

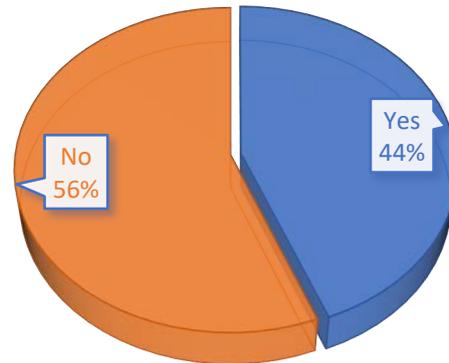


Figure 10: Survey results on the implementation of employee engagement and retention policies

It is also important for organisations to conduct a staff satisfaction survey to understand employee motivation and retain employees. 59% of respondents to our online survey reported that no such survey is conducted in their organisation.

(vi) Disciplinary policy and practice

91% of the survey respondents said that their organisation has a standard disciplinary policy and practice in place (Figure 11). This is guided by disciplinary procedures providing a range of possibilities, from warnings through to dismissal, depending on the severity and frequency of responses. Disciplinary control also involves promoting and removing persons from services and providing guidelines to all staff.

DOES YOUR ORGANISATION HAVE A CLEAR DISCIPLINARY POLICY AND PRACTICE?

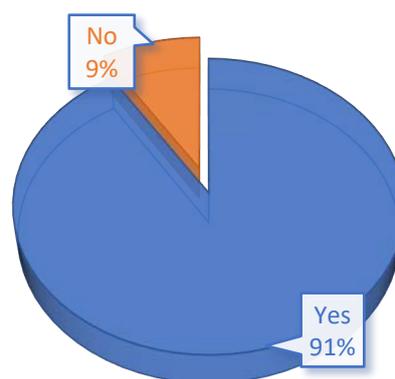


Figure 11: Survey results on whether a standard disciplinary policy and practice is in place

4. Organisational case studies

4.1 ETHIOPIA: Ethiopian Pharmaceutical Supply Agency (EPSA)

EPSA was established in 2007 (under the name the Pharmaceuticals Fund and Supply Agency) as a government organisation under the Ethiopian Ministry of Health with the following three objectives: to enable public health institutions to supply quality assured essential pharmaceuticals at affordable prices in a sustainable manner; to play a complementary role in developing health service expansion; and to create the enabling conditions for the accumulation of funds in its revolving and cost-recovery practice.

4.1.1 Pathway 1. Staffing

Job descriptions for supply chain positions

Job descriptions for positions in supply chain operations are drafted primarily by EPSA's technical committee and submitted to the Civil Service Commission to assign and approve the job grade and the salary scale. For supporting positions, such as HR, finance, and general services, job descriptions and the grading system are prepared by the Civil Service Commission and aligned with other civil service organisations in the country. In drafting job descriptions, the Commission applies the formal criteria, such as qualification (diploma, bachelor's degree, master's degree, or PhD), and years of experience. The Commission does not utilise the competency framework developed by the Admas Programme in 2019, or the TNA which was conducted at EPSA by PSA in the same year. Instead, the competency framework is employed in the development of capacity development activities, employee promotion, and transfer. Effectively, this means that the competency framework is not yet fully integrated into the HR management at EPSA, and it comes into play only when the Agency seeks to bridge the skills gaps of its employees and to design sustainable capacity development interventions.

Recruitment process: advertising vacancies and selecting candidates

Job vacancies in EPSA are advertised in the government newspaper and posted on noticeboards in EPSA's headquarters and hubs. Salaries for advertised positions are decided on by the Civil Service Commission according to job grades and pay scales established for institutions under the auspices of the Ministry of Health. No special market salary analysis is normally conducted before recruitment as EPSA adheres to the governmental salary structure.

The Civil Service Commission Recruitment and Promotion Guideline stipulates that priority should be given to filling vacancies within EPSA from its existing workforce. It is only in the absence of an internal candidate with the necessary qualifications and experience that the job can be advertised publicly. In practice, the decision on whether EPSA should conduct internal or external recruiting is made on a case-by-case basis by the hiring manager, in consultation with the HR department. However, preference is often given to internal recruiting.

As part of the recruitment process, the HR department usually conducts a written test, an interview, and an assessment of specific technical skills, if required by the job description. The Civil Service Commission Recruitments Guideline recommends that the test should be taken at a well-known higher educational institution with a testing centre. EPSA normally sends candidates

to sit the test at Addis Ababa University and the results are transferred back to EPSA's HR department.

The crucial phase of recruitment is the interview, which is conducted after the candidates have successfully passed the written test and have met the minimum education and qualification requirements. The interview panel (or committee) comprises the hiring manager, director, or team coordinator of the directorate where the vacancy has been announced, and a representative from the HR directorate. EPSA does not have a standing recruiting committee, and for each vacancy a new committee is formed on an ad hoc basis. Education, professional qualifications, and the length of experience are the most important criteria in the selection process of the recruiting committee. HR specialists meticulously count the length of experience, up to months and days, to distinguish between candidates with a similar level of education or professional certification.

4.1.2 Pathway 2. Skills

Training, and capacity building and development

The competency framework and TNA were developed/conducted by the Admas Programme in 2019. Following the TNA, PSA worked with the Capacity Building Directorate to draft an annual comprehensive training plan. This plan has now been endorsed by other EPSA partners, following a validation workshop, in which the EPSA Capacity Building Team collected feedback and incorporated input from EPSA partners. The Agency is currently implementing training activities based on this plan, and PSA has supported the development of the training strategy for EPSA, which is now being finalised. This strategy integrates all the deliverables of the Admas Programme, beginning with the competency framework, TNA, individual development plans, and a training curriculum.

Capacity development in EPSA is often organised in the form of traditional off-the-job classroom training. Trainers are invited from local academic institutions, although EPSA has not yet established formal partnerships with these institutions. The Capacity Building Team has organised research forums to engage and promote research through Addis Ababa University in a bid to improve the exposure to academia and research. PSA is also helping EPSA to expand the staff capacity development through the Training and Resource Centre, a dedicated learning and training hub that has been established in EPSA.

Professionalisation framework, mentoring, supervision, and on-the-job training

A professionalisation framework and community of practice, as well as coaching or supervision, are not common in EPSA, or in the Ethiopian supply chain sector more widely. The Admas Programme aims to institutionalise mentoring, supervision, and communities of practice under the Training and Resource Centre. Currently, PSA subject matter experts are the only ones who offer structured on-the-job training in the Agency.

4.1.3 Pathway 3. Work environment

Organisational culture and work environment

EPSA has recently focused on changing its organisational culture and has conducted an organisational culture diagnostic assessment (concluded in August 2019). EPSA has created a team from different directorates to focus on this area, as well as a team of cultural ambassadors, to help cascade the organisation's values and mission. However, the planned activities for cultural

change, such as rolling out the cultural ambassadors' programme to the regional hubs, have been slowed due to the COVID-19 pandemic and related restrictions in place.

Use of policies

EPSA has a recently updated its Code of Conduct. This Code is printed in hard copies and the Ethics Directorate has a plan to roll out the Code of Conduct and to support its implementation. Additionally, EPSA follows the Ethiopian civil service disciplinary policy. Whilst EPSA has no separate policies relating to anti-harassment, anti-discrimination, or health and safety etc., the Code of Conduct does include some information on these areas.

Supporting women and members of minority groups

EPSA has a Gender and Youth Directorate and follows affirmative action in recruitment, training, and other similar activities. The Agency recently conducted a job evaluation and grading activity, in which women were given a few more percentage points as an affirmative action. This action led to more women taking up leadership positions, including the director of the organisation. This will be followed by further affirmative action to provide women with an opportunity to assume higher positions in supply chain operational roles and supporting administrative roles. Additionally, as part of the Civil Service Commission regulations, EPSA practises affirmative action in recruitment.

Creating a safe workplace environment

EPSA has an OSH SOP (two to three pages in length), as part of its HR Manual SOPs. EPSA does not have an overarching systematic approach to health and safety, though it does conduct activities in this area as part of its quality management activities and different initiatives to improve operations. Various partners have also created initiatives regarding operational health and risk assessments.

Whistleblowing mechanism

EPSA does not currently have a whistleblowing policy but it plans to create one.

4.1.4 Pathway 4. Motivation

Performance management

To improve work performance, EPSA has established corporate and directorate-level KPIs governed by the Monitoring and Evaluation Framework, a policy document guiding EPSA's performance management. The KPIs have supported better understanding of team targets, thereby acting as an important tool to motivate employees. However, cascading departmental KPIs down to individual KPIs has been a challenge. As a result, performance appraisals currently lack objectivity, comprehensiveness, and linkages to the directorate or team goals.

Incentive policy

At present, EPSA has no performance-based incentives in place.

Performance appraisal

The BSC was imposed by the Civil Service Commission in Ethiopia as a performance management tool for governmental organisations. EPSA implements the BSC but has not yet standardised its use across all directorates. EPSA's Planning, Monitoring and Evaluation team is currently supporting the directorates to achieve uniformity in the application of the BSC.

Career paths and promotion opportunities

Strictly speaking, EPSA does not have a system of career pathways and structured career progression linked to vertical and horizontal development of expertise. What does exist is a straightforward promotion system based on available vacancies within directorates. Anyone who meets the minimum requirements for the vacant position is considered eligible for promotion. As a result of this system, an HR specialist can be transferred to a new job in the Ethics Department, or a specialist in the Ethics Department can be promoted to a position in General Services.

Retention and engagement practices

The apparent lack of career progression impacts the motivation and engagement of staff, increasing the staff turnover. At the individual level, employees do not have a career or professional development plan and the employee turnover is particularly high among technical experts and pharmacists. In the absence of employee retention policies at the institutional level, EPSA is gradually losing its highly skilled workforce to partner institutions and the private sector.

Supervisory support

Currently, there is no formal mentoring, coaching, and structured supervision at EPSA. In the absence of SOPs for mentoring across EPSA, PSA subject matter experts have been able to introduce mentoring support through a system of workshops. Promoting supervisory support is hindered by differences in leadership and management styles across EPSA directorates, resulting in the lack of a uniform mentoring, team support, and feedback mechanism, which often relies mainly on the director's or supervisor's initiative.

Disciplinary policy and practice

EPSA follows the Civil Service Disciplinary Code of Conduct.

Staff satisfaction survey

EPSA conducts a staff satisfaction survey annually. In the 2018/19 financial year, the staff satisfaction level was near 58%, as indicated in EPSA's annual report. Similar surveys are also conducted across different corporate levels and hubs.

4.2 KENYA: Kenya Medical Supplies Authority (KEMSA)

KEMSA was established as a state corporate organisation in 2005. Through an act of the Kenyan Parliament, KEMSA became an 'authority' in 2013, with the mandate to procure, warehouse, and distribute drugs and medical supplies for public health programmes and to fulfil other tasks related to the public health supply chain. KEMSA employs a not-for-profit, self-sustaining, commercial business model, which is aligned with Kenya's devolved governance system. Its supply system is demand-driven: the country's health facilities order and pay for medicines and acquired funds are put towards replenishing KEMSA's stock.

4.2.1 Pathway 1. Staffing

Job descriptions for supply chain positions

KEMSA has 12 job grades, ranging from the top management role in Grade 1 (chief executive officer (CEO) to the lowest position in Grade 12 (shop floor employees). Every position in each

grade has a job description and a clear career progression. To draft job descriptions, establish career progression, and produce the HR Manual KEMSA requested assistance from the State Corporation Advisory Committee. Job descriptions follow a competency framework, which details specific competency requirements for various job families in KEMSA, such as pharmacists, supply chain specialists, HR specialists, etc.

Recruitment process

The recruitment process for top managerial positions in Level 1 (CEO), Level 2 (directors), and Level 3 (managers) is completed by an external recruiter. For this task KEMSA normally approaches PricewaterhouseCoopers, Deloitte, or KPMG. Although the recruitment process and related arrangements are made by these professional services companies, the candidates applying for positions in these three levels are normally interviewed in KEMSA by the Board of Members, which includes the CEO, directors, and managers.

Recruitment for job roles beginning at Level 4 and down to Level 12 is conducted by KEMSA. The process begins with collecting recruitment requests from departments that complete requisition forms, which are then taken to the HR department and later submitted to the CEO for approval. For all new positions the HR department produces a job description and recruitment schedule. Depending on the level, certain positions will only be advertised on KEMSA's website, or in daily newspapers. Prospective applicants are normally given between 14 and 21 days to apply for vacancies. Subsequently, the HR department compiles the long list of eligible applicants and develops criteria for shortlisting candidates, who are called for an interview. The shortlisting is conducted by a special panel, appointed by the CEO.

The interview panel itself is also appointed by the CEO. It is not a standing committee and its structure varies depending on the job vacancy. For example, if the organisation recruits for positions in Level 4, which require a candidate to have a relevant degree and up to 10 years of experience in a similar job, the CEO will join the interview panel, together with a specialist in the same technical area as the interviewed candidate. If KEMSA is employing a procurement officer, a procurement specialist will be invited to join the panel to ask specific technical questions and determine the level of professional expertise of the candidate. The panel will also include: 1) an HR specialist, who will pose specific HR questions (e.g. education, certifications, past training, etc.); and 2) a representative of the department where the candidate will eventually work. Depending on the level of the advertised position, this will be either the head of the department or assistant head of the department.

After the interview and before issuing a formal offer the details of employment are finalised with the selected candidates. If successful candidates have questions or requests, the HR begins negotiations to come to a mutual agreement on all terms of employment before signing a contract. After recruitment is completed, new employees undergo a one-week induction programme. During orientation sessions KEMSA's operations are explained and the employees are introduced to every department within the organisation, as well as to their colleagues and line managers. New employees are put on a 90-day probation period, by the end of which KEMSA conducts a performance review.

KEMSA employs both internal and external types of recruitment. If the HR department identifies that the organisation may have suitable internal candidates for the vacancies, these positions are advertised internally. After reviewing the qualifications of internal applicants, the HR organises a panel for a suitability test, looking specifically into qualifications and skills, the length of work experience in KEMSA, past performance, and disciplinary records. For certain positions KEMSA

organises external recruitment, though also encouraging internal candidates to apply. In this case, both internal and external candidates go through the same recruitment process.

As a government institution, KEMSA is guided by state regulations on salaries and remuneration. The guidelines specify a salary range for positions within the organisation. KEMSA has a nine-band pay structure. This means that it takes an employee nine years to finish the band, if they begin their career in the current position at Band 1. While conducting a salary structure review, KEMSA looks at the recommendations provided by the Salaries and Remuneration Commission, and at payments offered by other parastatal organisations, and conducts salary market research for different job families. As the agency employs many pharmacists, lab technicians, and other technical personnel, it is necessary to research the salary market before advertising new positions. At the same time, KEMSA allows candidates to negotiate the salary, if they do not agree with the terms being offered.

4.2.2 Pathway 2. Skills

TNA

In KEMSA a TNA is conducted annually. The financial year begins on 1 July, and towards the end of the year every department drafts an annual work plan. This includes Section C, which specifies training needs. The information for the TNA is gathered through performance appraisals and employee requests for training, which are first reviewed by supervisors and then approved by heads of departments. Performance appraisals are conducted twice a year and help identify skills gaps. Employees also communicate their training needs to supervisors, which are reviewed by heads of departments.

Subsequently, training requests are submitted to the Training Committee in KEMSA, which synchronises training for the whole organisation. For example, if the Committee receives a request for training in customer service for a certain number of employees, it will consult the training calendar for the year, and the available budget, and will decide on how many employees can be trained during the current year and how many should be scheduled for the following year.

Capacity building and development

Employees in all managerial positions must undertake mandatory management training. According to Kenya's Public Service Commission Standards, employees in top management positions (Level 1 – CEO; Level 2 – directors) undergo a leadership training course in one of Kenya's government schools. Employees in Level 3 and 4 can undertake either a three- or four-month managerial training. The staff are offered a study leave for the duration of the training.

As far as technical personnel are concerned, KEMSA has a programme of continuous professional training. Technical professions have respective professional bodies, which normally offer specific types of training and professional development programmes. Every member of technical staff is expected to take a certain number of courses to collect enough points to be awarded a practising certificate for the following calendar year. For example, HR specialists can take courses at the Institute of HR Management, accountants are offered programmes by the Institute of Certified Public Accountants of Kenya, and procurement specialists also have their own professional body that provides certification.

At present, KEMSA outsources all the training and the agency does not have a dedicated training centre for members of staff.

Professionalisation framework, mentoring, supervision, and on-the-job training

KEMSA conducts coaching, mentorship, and on-the job training. The responsibility for conducting these activities lies with heads of departments. A decision on mentorship and supervision is taken jointly by heads of departments, supervisors, and individual members of staff.

KEMSA does not have a professionalisation framework. However, KEMSA supports professional development of the workforce by encouraging them to acquire diplomas, Master's degrees and PhDs, which add points to their overall score in performance appraisals. If KEMSA employees are enrolled in a course, they can leave work early to attend evening classes and they are offered days of leave to sit examinations. However, no additional monetary support is provided.

4.2.3 Pathway 3. Work environment

Organisational culture and work environment

The key informant interviewed about the work environment in KEMSA stated that the organisation has a very dynamic culture and a sense of belonging, which motivates staff. Additionally, relationships between staff and supervisors, heads of departments, and the rest of the management are very important to the organisation.

KEMSA has an OSH section and workplaces are registered by the Directorate of Occupational Safety and Health. The organisation has a dress code, included in the Code of Ethics, which guides staff on creating a good work environment. KEMSA provides a conflict of interest form for staff to sign in situations of potential conflicts of interest.

At present, KEMSA does not have a staff canteen on its premises, but there are plans to construct one by 2021. The organisation also plans to build a dedicated staff recreation area, with sports facilities. There are other non-financial incentives in place, such as guest dinners with the CEO.

Use of policies

KEMSA implements the following policies:

- An OSH policy implemented with the Directorate of Occupational Safety and Health (within Kenyan the Ministry of Labour).
- A Code of Ethics created jointly with the Electronic Industry Citizenship Coalition, the Commission in charge of issues relating to ethics and integrity. New staff must sign this to commit themselves to upholding integrity and applying ethics at KEMSA. Suppliers that are awarded a tender must also sign an agreement stating that they commit to legal and ethical practice whilst working with KEMSA.

Once a policy has been authorised (including being sanctioned by the Board and the CEO), it is then communicated to members of staff and launched on a start date. The new policy is put in a shared folder in KEMSA's intranet for staff members to access, print, and share. Most policies in KEMSA are reviewed every two years.

Supporting women and members of minority groups

KEMSA has a Gender Mainstreaming Committee (alongside other mainstreaming committees) which investigates how KEMSA can ensure that both women's and men's interests and concerns are not compromised in any way. KEMSA follows the 70:30 male/female composition principle and considers gender when recruiting, as well as looking at the ratio of women to men in KEMSA and the gender split at different levels. This includes questioning and using disaggregated data

on, for example, how many women occupy directorial and managerial positions or how many men are employed in the lower posts.

KEMSA supports minority groups in procurement (including youth, women, and people living with disability). KEMSA also has a Disability Mainstreaming Committee, which examines how the organisation can support employees with disabilities in their workplace, making KEMSA a disabled persons-compliant organisation. According to a national act of parliament, KEMSA is advised to recruit 5% of people living with disability.

Creating a safe workplace environment

The Directorate of Occupational Safety and Health carries out tests, including measuring air quality and lighting quality, and checking ventilation systems, and provides recommendations for KEMSA to implement.

KEMSA supports staff welfare through providing medical cover to its employees, including free annual health checks. KEMSA also organises a free 'Health Day', a family fun day during which staff are encouraged to attend with their families and are tested for lifestyles diseases, such as high blood pressure, diabetic blood sugar levels, eye health, etc.

KEMSA also supports OSH in the following ways:

- Carrying out annual audits to mitigate risks;
- Registering 'near incidents', where an incident may have caused an injury;
- Insuring staff against workplace injuries;
- Ensuring that staff wear personal protective equipment (PPE) in the workplace and checking the recommended illumination levels for health and safety;
- Assessing whether the overall workplace environment meets required conditions (e.g. workrooms are well ventilated and clean, have enough floor area, a suitable seat, etc.);
- Providing annual health checks to employees working in areas of higher occupational risk (e.g. in loading/unloading or distribution) to identify ailments acquired as a result of occupational activity. KEMSA investigates potential sources of occupational hazards and mitigates against them.

Whistleblowing mechanism

KEMSA has a whistleblowing policy mechanism that allows employees to raise concerns about malpractice or impropriety. Employees who raise such concerns are protected by a special commission that ensures whistleblowers' anonymity.

4.2.4 Pathway 4. Motivation

Performance management

The key informant for KEMSA highlighted that the organisation seeks to foster a sense of belonging, to establish strong relationships between staff and supervisors, to provide a safe and secure work environment, and to instil a sense of career security to motivate KEMSA personnel. The organisation employs KPIs to strengthening the performance management process and improving staff motivation.

Incentive policy

Employee performance at KEMSA is appreciated in several ways, including through a recognition letter signed by the CEO, being given an opportunity to dine with the CEO, etc. These forms of recognition and awards are presented at annual staff parties and can act as sources of motivation

for other employees. KEMSA is among the best-paying parastatal agencies in Kenya and staff are given annual salary increments as they move through different pay bands.

Performance appraisal

KEMSA conducts two major performance appraisals throughout the year: the mid-year review (December–January) and end-of-year appraisals (June–July). Currently, the organisation employs two methods of appraisal:

- A 90-degree performance appraisal, where the manager gives their evaluation to the employee on one-to-one basis;
- A 180-degree appraisal process, which involves a self-assessment by an employee (assigning marks or a score to their individual performance), which is then discussed with their supervisor and finally ratified by the head of the department.

KEMSA plans to roll out 360-degree appraisals in the future.

Career paths and promotion opportunities

KEMSA has a Career Progression Plan. The HR department informs employees that after a certain period their jobs need to be reviewed in relation to a potential promotion based on the following criteria:

- Skills;
- Experience;
- Performance;
- Discipline;
- Competencies; and
- Job vacancies (for promotions to the next level).

Suitability tests are conducted to inform promotion decisions. In the Career Progression Plan there is also a special clause that guarantees employees the right to move up the career ladder after three years, subject to receiving good performance appraisals and evidence of having the required competencies.

Supervisory support and retention policy

KEMSA provides supervisory support through coaching and mentoring. The head of department and employees jointly identify and decide on the professional support to be provided to KEMSA staff. The organisational retention policy is guided by the Talent Management Manual.

Disciplinary policy and practice

Disciplinary policies are monitored by a special committee at KEMSA, which intervenes in the case of serious grievances. In other circumstances, disciplinary issues can be solved by the management staff and head of the department.

Staff satisfaction survey

A staff satisfaction survey is conducted every two years to allow KEMSA sufficient time to act on the feedback from the survey. The results are summarised in a report, which is then shared with all KEMSA staff.

4.3 MALAWI: Central Medical Stores Trust (CMST)

CMST was established in 2010 by the Government of Malawi and was registered as a public trust in 2011, becoming fully functional in 2012. CMST's vision is to improve health in Malawi by ensuring a reliable and continuous access to high quality medicines and medical supplies through efficient procurement, warehousing and distribution services at affordable cost.

4.3.1 Pathway 1. Staffing

Job descriptions

CMST has a list of crucial supply chain positions and has developed job descriptions for its organisational roles. The development of job descriptions did not follow a specific competency framework: they were drafted according to CMST's assessment of skills and responsibilities required for job positions. Job descriptions are normally reviewed every four to five years as part of organisational functional reviews, which are outsourced to a consultancy firm. The most recent functional review was completed in 2014 and changes were implemented in 2015. As at the time of writing in 2020, another functional review is currently being conducted.

Recruitment process

At CMST, the recruitment process depends on the grade of the vacant position. Interview panels are open to external experts depending on the nature of the job role. For example, if CMST is recruiting an accountant, representatives of the Institute of Chartered Accountants in Malawi, and also of the Accountant General's Department, will be a part of the interview board. The internal CMST committee will include the head of the relevant department. For all job interviews, from officer to director level, CMST invites external panellists to take part. In general terms, the recruitment approach remains the same for both technical and managerial positions. For example, an HR manager would undergo the same recruitment process as a pharmacist. The only difference is in the technical expertise of interview panellists, which depends on the nature of the job vacancy.

CMST's job grading system consists of 11 grades, from the top-level manager (Grade 1) to the lowest job grade (Grade 11). The leading managerial positions include CEO (Grade 1), director (Grade 2), line manager (Grade 3), and middle manager (Grade 4).

In making a recruitment decision CMST pays special attention to the candidate's qualifications and years of experience. The minimum requirements are highlighted in the job advertisement and followed through in the process of shortlisting candidates. Before inviting candidates to an interview, CMST normally prepares a set of questions and, depending on the grade of the vacant position, also creates a case study task, which is sent at least a week in advance to the candidates, requiring them to prepare a presentation as part of their assessment.

According to CMST's Terms and Conditions of Service handbook, vacancies for certain junior positions are first advertised internally. Other professional positions, from officer level and above, are advertised both internally and externally. If an internal candidate is recommended by the interview panel, CMST will select an internal candidate, particularly because the conditions of service stipulate a guarantee of career progression within the organisation.

Career progression

The Terms and Conditions of Service handbook, received by every new employee upon joining the organisation, has a section that specifies the mechanism and criteria for promotion. After the annual performance appraisal, a director of the department can issue recommendations for promotion. These are submitted to the senior management and reviewed by the HR Director, who can support the recommendations.

4.3.2 Pathway 2. Skills

TNA

At the beginning of the financial year, CMST finalises the annual planning and requests heads of departments to submit their training needs. The HR department consolidates these requests into a training plan, which is cost assessed and matched to the training budget. As a young organisation, CMST has found it difficult to match the departmental training needs to available resources. The training budget is limited and CMST attempts to prioritise as much as possible those training needs that can help address gaps in employee performance identified during annual appraisal.

Capacity building and development

CMST conducts a certain amount of on-the-job training and the HR team handles the induction training for new employees, including departmental managers. Technical training is outsourced to external service providers. For example, for purposes of training in finance and accounting CMST sends employees to the Institute of Chartered Accountants in Malawi, which has an annual calendar of training programmes. Similarly, pharmacists will be referred to the Pharmacist, Medicines, and Poisons Board, which coordinates the training of pharmacists. There are also two management institutes in the country: the Malawi Institute of Management and the Staff Development Institute. Both organisations are governmental institutions that publish annual training calendars, which CMST follows in structuring its training plan. The Trust also liaises with the Institute of Procurement and Supply to plan training for personnel working in procurement and supply chain.

CMST normally develops annual training plans. At the corporate level, the Trust creates a five-year strategic plan. The most recent plan finished on 30 June 2020. One of the objectives of the new strategic plan for financial year 2020–2025 is human capital development. The plan still needs to be approved by the Board. After approval, CMST will develop the staff development and training strategy for the next five years.

CMST has benefited from support from the Global Fund and is currently implementing the National Supply Chain Integration Project, which also focuses on HR and organisational development. This project is being managed by organisational development consultants at Chemonics International, who are helping CMST to develop the five-year HR strategy. CMST's task is to ensure that the organisation has the right skills and the right human capacity to implement the new strategic plan, as well as the supply chain integration strategy that CMST has been developing.

Community of practice

CMST has not created a community of practice. Instead, it relies on more formal training: for example, the Government of Malawi partnership with India in training public servants. The Trust has participated in this training with the assistance of the HR department of the Government of Malawi. The key informant for CMST highlighted that this is an area in which the Trust should

undertake more collaboration with other institutions, and that in the future it will participate in adopting a professionalisation framework.

4.3.3 Pathway 3. Work environment

Organisational culture and work environment

CMST's Terms and Conditions of Service are the organisation's primary framework relating to creating a good work environment. The document has been reviewed and the final consultation for the new services was completed in the summer of 2020. The final draft will be presented at the next Board meeting, to be approved and adopted, and will then replace the previous version of the Terms and Conditions of Service dating from 2015. The Terms and Conditions of Service include a Code of Conduct, which outlines the norms, rules, and responsibilities of staff in the workplace.

Internally, CMST intends to enhance corporate communication to better inform staff of the organisation's objectives and mission. Externally, the Trust is reviewing its brand and aims to reposition the institution through the new strategic plan to improve its public image.

Use of policies

CMST has the following policies in place (included as annexes to the Terms and Conditions of Service):

- HIV and AIDS workplace policy;
- Fraud and Corruption Prevention Policy; activities are coordinated by the Institutional Integrity Committee. When a report is received from Deloitte (which manages this area), the Committee investigates and then submits its own report to the CEO. Depending on the nature of the report, the CEO will institute disciplinary measures and, if applicable, refer the case to the relevant law enforcement agencies;
- Code of Conduct (outlines core values, mission, rules, and practices of staff conduct in the workplace);
- Staff Training and Development Manual (and the relevant committee).

The development of policies at CMST follows a consultative process. This begins with choosing representatives from different departments and sections. If consultants are engaged, the consultants will work with the internal and external team to develop the policy. As part of the development, various stakeholders are consulted. Once the draft is ready, it is sent to the Board for approval.

Once a policy is approved, printed copies are disseminated to staff for engagement and explanation. This helps to make staff aware of the contents of the final document and to give them the opportunity to raise any questions with the implementing department.

Supporting women or members of minority groups

CMST aims to develop specific policies in these areas in the future.

Creating a safe workplace environment

CMST follows the Labour Act for Health and Safety and conducts regular trainings and fire drills. The organisation ensures there is a clean environment and, if required, staff are provided with PPE (this is not limited to staff working in warehouses, it also includes those working in cleaning, the security team, delivery services etc.)

Whistleblowing mechanism

CMST has a whistleblowing policy, which is part of its Fraud and Corruption Prevention policy and is outsourced to Deloitte. This involves anonymous reporting. Deloitte generates reports, which are then submitted to the relevant authority.

4.3.4 Pathway 4. Motivation

Performance management

CMST uses the BSC for managing the performance of Board members, while employee performance is managed by a special tool developed by consultants. In financial year 2020/21, CMST will begin to use the BSC uniformly across all organisational levels.

Incentive policy

Non-financial incentives include recognition for good performance during annual appraisals. Staff exchange programmes help motivate employees to explore skills and work environments. Staff also take part in meetings with stakeholders, which help them better understand the stakeholder perspective and increases their sense of belonging. Annual assessments focus on performance and include a system of rewards and sanctions based on the overall job progress. Rewards at CMST include salary increments, promotions, grade changes, training opportunities, etc. Sanctions can include oral and written reprimands, and recommendations for more on-the-job training.

Performance appraisals

Appraisals at CMST are guided by clear job descriptions and staff objectives. The system involves an open appraisal, whereby an employee fills the BSC and indicates their level of individual performance. This is followed by the supervisor's input and assessment. Following this, an employee and supervisor come together to discuss the appraisal based on KPIs.

Promotions

At CMST, no universal competency-based promotion framework is followed. Promotions are also governed by the Terms and Conditions of Service handbook. There is a criterion for promotions based on annual staff performance assessments. Performance over the years is key to promotions. Other key factors for promotions at CMST include qualifications, experience, etc.

Supervisory support

CMST encourages open discussions amongst staff and line managers to motivate employees and improve performance.

Retention and engagement practices

The key informant for CMST highlighted that a transparent communication and feedback policy encourages more engagement by staff in the organisation. Every two years a staff team-building exercise is conducted, which acts as a forum wherein staff share individual experiences. This initiative is well appreciated by the staff at CMST.

In terms of staff retention, the Terms and Conditions of Service indicate the need to recruit well-qualified staff. To achieve this, CMST offers a competitive remuneration package, which has resulted in low staff turnover.

Staff satisfaction survey

A staff satisfaction survey is conducted annually at CMST to understand staff satisfaction, identify gaps, and design policies to improve staff satisfaction.

4.4 SUDAN: National Medical Supplies Fund (NMSF)

NMSF is the successor of the Central Medical Supplies public corporation (established as a semi-autonomous organisation in Sudan in 1991). The organisation implemented a comprehensive reform programme in 2011 and in 2015 was transformed into NMSF after the approval of a new act by the Sudanese National Assembly. In 2015, NMSF was given more flexibility regarding commercial operations and in the purchase and sale of medical products. NMSF's key objective is to ensure that essential medicines and medical supplies of proven safety, efficacy, and quality are available to the population at reasonable prices. Since the 1990s it has employed a cost-recovery system.

4.4.1 Pathway 1. Staffing

Job descriptions

Until 2017 NMSF did not have well-defined and structured job descriptions and approached PtD to help develop them for the entire organisation. The structure of job descriptions includes:

- Job title;
- Superior-subordinate relationships and the management level (Director General, or departmental director, etc.);
- Job purpose;
- Key responsibilities;
- Qualifications and experience requirements;
- Skills and knowledge requirements.

Recruitment process

HR recruitment at NMSF is guided by the Civil Service Act 2007. The requirements and procedures of recruitment follow the recommendations of the National Civil Service Commission – the Sudan national commission for recruitment in the civil service.

In the Sudan civil service, there are two categories of workforce: skilled employees (generally university graduates, such as accountants, doctors, engineers, pharmacists, etc.) and unskilled labour (workers with high school diploma or less, such as drivers, cleaners, messengers, etc.). Skilled employees begin their civil service career at Scale 9 (also called entry scale) and move up to the highest position in Scale 1. The scale for unskilled labour begins at Scale 16 and goes up to Scale 10 (the highest scale for this group of staff).

It is the sole responsibility of NMSF to recruit low-level labourers (up to Scale 10). The mid-level employees (Scale 9 to Scale 6) are recruited by the National Civil Service Commission. In order to recruit for these positions, NMSF submits a request to the Commission, which assembles a recruiting committee that includes an NMSF representative and that carries out the advertising and recruitment process. After recruitment is completed, the Commission sends a formal request to NMSF to appoint the selected candidate.

A separate recruiting committee is assembled to select candidates for leadership positions (Scale 5 to Scale 1). After the selection is completed, the Director General requests the Board of

Administration, chaired by the Minister of Health, to approve candidates. After that, the Minister of Health submits a formal request of appointment to the Council of Ministers, through the Ministry of Labour.

The key informant for NMSF highlighted that during recruitment, the recruiting committee ensures that candidates meet the job description requirements and checks their references, but special attention is paid to experience, including supply chain experience and postgraduate studies.

4.4.2 Pathway 2. Skills

Training, and capacity building and development

Training programmes at NMSF are informed by TNA at the departmental, rather than individual, level. TNA is more group-based, and is carried out for procurement, distribution, and quality assurance. NMSF finds it difficult to tailor training to the individual needs of its more than 400 members of staff and to train them on an individual basis.

NMSF began developing training programmes in 2011 but until 2014 it did not have any training governance in place. Originally, the programmes offered mostly traditional classroom training in public health supply chain and supporting services, such as finance and IT. NMSF also encouraged self-learning among its employees, providing access to e-journals, e-books, and setting up a library. Additionally, NMSF began sending staff to conferences relevant to their work, and to regional workshops.

NMSF has its own workshop for checking, calibrating, and repairing medical equipment, which provides on-the-job training and apprenticeships to biomedical engineers. However, mentoring, coaching, and training for pharmacists was introduced only in 2018.

TNA informs the training curriculum at NMSF and the HR department has a well-developed enterprise resource planning (ERP) module that holds comprehensive information on every member of staff, including their training and professional development, which can be accessed via a mobile app.

As part of the capacity development initiative, the Director General of NMSF made online training courses on good governance in the management of medicine, hosted by the Global Health eLearning Centre, mandatory for all NMSF pharmacists and part of their performance evaluation. NMSF also hosted continuous professional development (CPD) programmes in collaboration with the Sudanese Pharmacists Professional Union to ensure that pharmacists improve their knowledge, skills, and competencies, and enhance their career progression. NMSF has become the national centre for continuing education and the CPD of pharmacists in Sudan. The organisation covers the annual subscription fees for accessing specialised software developed by CoAcS Ltd, for 1,000 pharmacists. Similar initiatives have been implemented for procurement and supply chain specialists. In 2019, 24 employees in these positions completed the CIPS Level 4 (Diploma in Procurement and Supply) modules.

4.4.3 Pathway 3: Work environment

Organisational culture and work environment

NMSF initiated changes to its organisational culture, first by completely changing its physical environment. This included refurbishing staff offices, providing new desks and computers, and installing email systems. Second, NMSF then moved to change the culture itself, focusing on how to adopt a Code of Conduct and how to maintain the physical environment. NMSF staff came

together to finalise and agree upon the Code of Conduct, which was then signed and placed in every employee's file. Third, NMSF moved on to applying the Code of Conduct, which included the following activities:

- Maintaining the cleanliness of the environment (including contracting a specialist to teach hygiene practices).
- Changing the culture by encouraging staff to focus on their work and teaching effective time management techniques.
- Established a small football pitch for staff to play on.
- Created a cafeteria with subsidised meals, and a mini supermarket.
- Installed a cash machine.
- Put in place infrastructure providing the highest internet speed in Sudan.

Changing the work environment had a positive impact on the overall culture, creating a strong sense of loyalty and belonging. The key informant for NMSF emphasised that during an eight-month period after the transformation, only 8% of staff resigned (largely due to personal reasons, such as moving abroad).

Use of policies

NMSF has an extensive set of policies, including anti-corruption and anti-fraud policies, and email policy, and a policy on good governance for medicine. NMSF also follows the disciplinary code for civil service staff. However, there is no policy on harassment.

Supporting women and members of minority groups

There are no formal policies to support women, though the NMSF respondent stated that 38% of staff at NMSF are women. They also stated that if manual labourer staff (of whom none are women) are discounted, women form most of the workforce. The current Director General is a woman.

Creating a safe workplace environment

NMSF provides emergency kits for minor injuries.

Whistleblowing mechanism

NMSF has a whistleblowing policy which is included in its anti-corruption policy. The whistleblowing mechanism takes the form of an anonymous email address, to which staff can provide information concerning any wrongdoing.

4.4.4 Pathway 4. Motivation

Performance management

At NMSF, KPIs are in place to support staff to understand their individual roles better and to contribute towards NMSF's goals. The HR department has supported and led the way in the transformation of NMSF by clearly aligning the KPIs to the overall organisational goals.

Incentive policy

In 2012, NMSF started giving incentives linked to performance. Simple criteria were set to send a signal for improved performance. By the end of 2018, the incentives were four times the gross salary, i.e. an employee earned five times the base salary every month. Every month all directors submitted evaluations of subordinates which were thoroughly reviewed by the senior leadership. A score of greater than 70 was needed monthly to be entitled to receive incentives. Since the

NMSF Act was approved staff now receive an additional benefit package (beyond than the civil servant package). According to the benefit package, pharmacists are entitled to receive 50% of their basic salary on top of the monthly salary; for biomedical engineers they receive 40% of their basic salary on top of the monthly salary; and for other staff a 20% top-up is provided. There are also cash allowances: married staff with children receive every year four months of their gross salary as a cash allowance, and married staff without children receive three months of their gross salary.

Performance appraisals

The Civil Service Chamber guides performance appraisals at NMSF. The supervisors are mandated to complete assessments anonymously and submit them to the HR department. A special committee then assesses the inputs to recommend candidates for a higher job scale. The committee meets on an ad hoc basis coincided with the cycles of employee performance appraisals (e.g. for pharmacists the appraisal is conducted every two years).

Promotions

At NMSF the Civil Service Chamber also guides the promotion of eligible candidates. However, promotions are not linked to a competence framework.

Supervisory support

Mentoring and coaching support are still lacking at NMSF. They were started late in 2018, based on the PtD framework.

Retention and engagement practices

Engagement policies include changing the physical ambience of NMSF offices, installing new equipment, and providing access to high-speed internet. NMSF has also undertaken other steps to offer a range of benefits to staff, including providing transport for employees, providing uniforms to all staff, and offering private medical insurance for staff and their families (NMSF pays the full insurance premium). Other incentives include subsidised meals, and a mini-market and cash machine in the premises. These strategies have helped to maintain a strong sense of loyalty and belongingness within the organisation and to keep staff turnover at 8% (2018). Overall, training opportunities, the work environment, incentives, and support from trade unions have contributed towards a robust retention policy.

Disciplinary policy and practice

NMSF follows the Disciplinary Act for the civil service.

Staff satisfaction survey

NMSF conducts a staff satisfaction survey every year, and the results are discussed with the employees.

4.5 Tanzania: Medical Stores Department (MSD)

MSD was established by a Tanzanian Act of Parliament in 1993 as an autonomous department within the Ministry of Health, Community Development, Gender, Elderly and Children. MSD's mission is to ensure medicines, medical supplies, and laboratory reagents of acceptable quality and affordable price are always available to Tanzanians. MSD collaborates with the private sector to create local manufacturing facilities (as per the Public Private Partnership Act, 2010) and from 2017, MSD started to procure its medical supplies directly from manufacturers, rather than from

suppliers. MSD's vision is to become a centre of excellence for health commodities supply chain in Africa.

4.5.1 Pathway 1: Staffing

Job descriptions

MSD was supported by the consulting firm Accenture and BMGF in developing a competency framework for supply chain. The organisation looked at the supply chain system from end to end to understand what level of skills and competencies was required for chain professionals. It conducted interviews, reviewed sets of qualifications, and came up with a list of competencies for supply chain roles. A few new positions were added to the existing list of crucial supply chain jobs, such as Demand and Supply Planning Officer for Quantification to quantify the medical commodities needs before submitting a request to the procurement team. MSD has also recognised the need for stock verifiers and some other positions, such as procurement and warehousing specialists. Previously, these warehousing positions were quite generic and had to be adjusted to reflect specific warehousing functions and processes, such as dispatching, receiving, or custodianship.

Recruitment process

Requests for hiring new employees are submitted by MSD departments to the HR department via job requisition forms. At present, the system of reviewing job requisitions is manual, with the prospect of its automation soon. The HR specialists check the requisition against the organisational list of job roles and the number of employees required for a specific department or area. The HR department can reject the requisition if it does not comply with organisational capacity. Upon receiving the requisition, HR specialists also look through the list of employees lined up for recategorisation to new positions, as these become vacant. Recategorisation of staff reflects the fact that employees acquire new skills, qualifications, and education (e.g. Master's degree or a diploma). The HR department attempts to match these employees to the positions featured in job requisitions. If the organisation does not have the right personnel that can be recategorised, these vacancies are advertised externally.

MSD is a public organisation and according to the amendments made to the Public Service Act in November 2016 all public organisations in Tanzania must conduct their external recruitment campaign through the government agency the Public Service Recruitment Secretariat. MSD sends job adverts to the agency for publication on the Secretariat portal (www.ajira.gov.tz), as well as on the MSD website and other media platforms. The advertisement will say that the Secretariat is recruiting on behalf of MSD. In certain cases, the state recruitment agency can bring staff from other organisations who have requested a transfer to MSD, if they match the required skills.

The MSD HR department deals with all of the practicalities of the recruitment process, which include performing various checks, shortlisting, conducting interviews, and issuing job offers to selected candidates. The department also follows the security vetting procedure, as the entire workforce employed in the public service is required to receive government security clearance.

The department has an interview matrix, and a questionnaire that includes the technical side, as well as a section on required competencies, job fitness, and qualifications. For example, if the organisation is seeking to employ a Quality Assurance Officer, the HR will ask the Quality Assurance Manager to draft a set of technical questions based on a specific job description (especially if the department seeks a trained biomedical engineer or a pharmacist to work in quality assurance). To this list of technical questions, the HR department adds a number of traditional HR questions to ensure that the candidates are fit for the roles. According to staff

regulations, the Director of Human Resources serves as Chair and the HR Manager as Secretary of the interview panel for all job positions at officer level and above. The panel also includes a key technical specialist from the relevant department.

If there is a large pool of qualified candidates, they are first asked to sit an assessment test. This is conducted for all technical and supporting positions, except from managerial roles and directors. For these job roles, the assessment is usually outsourced to a recruitment company. (Previously, the assessment of candidates applying for directorial positions was conducted by Deloitte). The key informant highlighted that when positions of acting directors become vacant in the future, MSD will not engage a consulting firm again, but rather search for suitable candidates internally.

Once the selection process is completed, the HR department takes new employees through the mandatory induction process. They are assigned to supervisors and enter a six-month probationary period. From the very beginning, new employees are communicated clear job targets and expectations, as well as the available support they might require in performing their jobs, especially if they came straight from university or school, or have only undertaken a short-term internship.

Career progression

To provide clear career structures for employees, MSD has developed a Scheme of Service. The outlook of the Government of Tanzania is decidedly pro-qualification, which means that if employees attain a certain qualification, they can move up to a different level, according to their experience, job output, and performance evaluation. The Scheme of Service has four to six steps in every job role before an employee can get to a managerial position, provided that it is vacant, offering a straight career path for all employees. For example, one can start as Warehouse Assistant and then grow to Principal Warehouse Assistant. The road to promotion involves acquiring sufficient experience, scoring at least 'B' or above in the performance evaluation, and obtaining certain qualifications after sitting an examination and undergoing professional evaluation regulated by the Procurement and Supplies Professionals and Technicians Board (PSPTB).

4.5.2 Pathway 2. Skills

TNA

TNA at MSD is conducted annually. Government institutions are required to follow the Open Performance Appraisal System (OPRAS), but MSD has requested permission to follow its own internal performance management system. This is called DRIVE and consists of five major components: know your direction, review where you are, improve on your performance, validate the results, and enjoy your rewards. A special section on the appraisal form is dedicated to professional development. This has to be completed and marked by both the supervisor and the employee, and they must agree on areas of development. The department will also add certain training needs and both assessments will be taken into consideration in the development of a training plan. The HR department critically reviews performance appraisal and training needs forms to ensure that they comply with real performance objectives and the needs of the organisation. For example, employees may request more training in project management, while the HR department may decide that due to changes their work, these employees actually require more exposure. To give one example: MSD hires a lot of pharmacists and places them in customer service, sales, and procurement. The organisation recognises that these employees, originally trained as pharmacists, required additional training to perform in new roles.

MSD looks at TNA from the perspective of employee performance and from the business point of view. For example, the organisation is embarking on manufacturing its own personal protective packs, which requires the Production/Manufacturing Team to undergo specialised training. The HR department is also engaged in developing a strategic plan for the new financial year (which begins on 1 July) that defines the business focus of the organisation.

Training and learning

The training process itself is a mixture of in-house and outsourced training. MSD does not have a selected group of institutions to outsource training to, but it often collaborates with PSPTB because of its special focus on the supply chain. In 2020, the COVID-19 pandemic has changed the way training is conducted at MSD: the budget for training has been significantly reduced and most of the training is conducted in-house using digital technology.

Continuing professional development

The Staff Regulations Manual stipulates that MSD will support the membership of all its staff in relevant professional associations, and will cover the associated membership costs, subscription to academic journals, etc. For example, the organisation encourages pharmacists to register and participate in seminars run by the Commonwealth Pharmacist Association. MSD pays the membership fees and the costs of participating in seminars, which provide employees with new knowledge, mentoring, and coaching. MSD lawyers are registered with the Tanganyika Law Society. Warehousing and procurement staff, pharmacists, doctors, and finance and audit personnel are members of their respective professional associations.

The key informant for MSD has indicated that the mentorship system within the organisation is not yet robust. Currently, it has only a small pool of on-the-job mentors and the HR department attempts to support some form of mentoring by organising a series of talks, delivered by the Director General, and meetings between MSD managers and CEOs of other organisations to share expertise.

4.5.3 Pathway 3. Work environment

Creating a strong organisational culture

The key informant for MSD stated that the organisation aims to ensure employees' voices are heard and encourages an organisational culture which values diversity and provides a conducive work environment. The organisation's values are respect, passion, integrity, courtesy, and innovation.

Use of policies

MSD has the following policies in place:

- An anti-harassment policy;
- A Code of Conduct (signed by staff when they join).

Additionally, its disciplinary process is governed by the Public Service Act 2002 and Public Service Regulations 2003. New staff regulations have been in place since 1 July 2020, which detail the disciplinary processes, including the legal process, addressing internal grievances, and the Code of Conduct.

Supporting women or members of minority groups

As mentioned above, MSD has an anti-harassment policy. Whilst MSD only employs Tanzanians, it employs staff of different ethnicities and does not discriminate based on religion or gender.

MSD also encourages people with disabilities to work for it and has conducted purposeful recruitment in this area. MSD has also recruited staff with total disabilities and has supported them by providing them with wheelchairs.

Creating a safe work environment

MSD ensures compliance with OSH standards (as governed by the Occupational Safety and Health Authority, OSHA), and ensures that all employees are working in a safe manner and have safety gear. MSD uses health inspectors who check conditions and ensure that the organisation operates in a safe environment that will not harm workers or their surroundings.

Specific measures MSD has in place include:

- Conducting quarterly medical tests (prior to COVID-19);
- Providing a hepatitis vaccine to workers;
- Conducting campaigns, such as encouraging employees to have HIV tests;
- Providing the right gowns and shoes for staff working in cold vaccine stores;
- Providing transport to those working at night;
- Providing other staff benefits, such as mobile airtime credit, transport allowance, and fuel.

4.5.4 Pathway 4. Motivation

Performance management

For performance management, MSD uses its own internal system, DRIVE. It is a system that is based on objectives being agreed in May–June every year and on the filing of the objectives to the HR department, which commences the performance year. Managers review the BSC objectives which have been assigned to their directorates. Managers choose relevant objectives for the employees and discuss these with them. The objectives must follow the SMART principles: i.e. be specific, measurable, achievable, realistic, and timely. Employees and the manager must both discuss and understand all the objectives as the manager will review progress against them throughout the year. Employees should know their own individual responsibilities regarding helping MSD to achieve its goals. This aims to enhance personal accountability and enables employees to write down actions to be taken to meet the objectives. The HR will finally review the objectives and check the quality.

Incentive policy

There is an internal incentive scheme which includes hardship allowances for employees who live in hard-to-reach areas, honoraria to reward desired results, providing phones, air fans, and transport allowances, etc.

Performance appraisal

At MSD, performance reviews are carried out twice a year, in December and May. Managers are required to clearly communicate an explanation for all ratings to the employee and to be clear in suggesting ways in which they can improve. This review is usually carried out in a private place, where both the parties feel comfortable and are not interrupted. Manager and employee agree on a time and place that gives enough time for the discussion. When the mid-year review is held, the 'what' objective is discussed, to identify any support that the employee might need, and the 'how' objective is discussed to improve the achievement of deliverables. The manager selects an agreed rating and writes comments on strengths and the scope of improvement. The annual appraisal is guided by the overall DRIVE score.

Promotion

MSD follows competence-based promotions: competencies for supply chain have been developed and supported by BMGF and Accenture. Like any public sector organisation in Tanzania, after having spent four years in service, employees are eligible for promotions as mandated by the Public Services Act. However, MSD ensures that such promotions always aligned to the competence. Promotions are also guided by the DRIVE score. If an employee's performance is not as desired, then they are put on a Performance Improvement Plan and it is clearly communicated that employees are not entitled to be promoted despite being eligible for the same.

Retention and engagement practices

The Staff Regulation Manual states that two professional memberships will be supported by MSD and the membership fees are covered by the employer. The memberships also provide access to specialised academic journals and other resources that help employees to engage in self-study and enhance their professional knowledge. MSD allows staff enrolled in higher degree courses to take long-term study leaves. The key informant for MSD emphasised that the organisation promotes an inclusive work environment and introduced a range of financial incentives. These include a gratuity scheme, which offers a pay-out to all staff every two years, as well as awards and cash incentives for innovation and creativity, initiated by the ICT directorate. Although MSD does not have a specific retention scheme, these engagement policies have resulted in low attrition rates.

Disciplinary policy and practice

Disciplinary policies and practices are governed by the Public Service Act 2002 and its regulations of 2003. They are also incorporated into the MSD Staff Regulation 2020.

Staff satisfaction survey

MSD conducts a staff satisfaction survey once every year through the HR department. This takes place in the Public Service Week. The feedback of employees is collected through Survey Monkey and guides a plan of actions.

4.6 Uganda: National Medical Stores (NMS)

NMS was established as a statutory corporation in Uganda in 1993. In 2009, NMS underwent significant changes, including receiving pre-financing and the centralisation of a large part of the drugs and medicines supplies budget. NMS's mandate is to procure, store, and distribute essential medicines and medical supplies to all public health facilities in Uganda, as well as serving government health facilities and distributing vaccines across the country.

4.6.1 Pathway 1. Staffing

Job descriptions

Job descriptions for positions within NMS are featured in the Job Description Manual, which defines the job holder's key roles, required qualifications, competencies and responsibilities, and which specifies the purpose of each job. The initiative to draft job descriptions came from heads of departments, and initially a consultant helped NMS to create job descriptions for the manual (in collaboration with heads of departments and in consultation with various stakeholders). Job holder accountabilities were discussed with the NMS management and approved by the Board of the organisation. Job descriptions are continually updated, to take account of new organisational needs.

The Job Description Manual is not speaking a competency framework, though there are some similarities between them.

Recruitment

NMS has an established organisational structure, which specifies all positions within each department. Every job role must have a minimum of five key accountabilities, key research areas, and qualifications required to perform each job.

When a position becomes vacant, the head of the respective department notifies the HR department by submitting a job requisition form. The HR department then places an internal advert to first try and find a suitable candidate internally. If the HR department can identify potential candidates, it will initiate the application and shortlisting process. The shortlist is approved by the top management of the organisation and the candidates are invited for an interview. If the HR department is unable to establish qualifying internal candidates, top management recommends that the position be advertised externally. The adverts are usually placed on the NMS website and social media, as well as in national print media, and are expected to run for a minimum of seven days.

Applications are sent to NMS by courier or online. The HR department collates these and submits a request to the top management to appoint a shortlisting committee. The task of the committee is to go through all the applications and check them against the specific requirements of the vacant job, i.e. qualifications, experiences, and desired competencies. Once the shortlisting is completed, the list is presented to the top management again for approval.

The next step depends on the overall number of applicants and vacancies. NMS either conducts oral interviews with shortlisted candidates or requires candidates to take an aptitude test or a technical test. Tests are often conducted when NMS receives many applications. If the number of candidates is low, then NMS proceeds straight to interviews. However, certain technical positions require a mandatory professional test to establish the competence level of the candidate. For example, when selecting a cold chain technician, NMS checks the candidate's knowledge of the cold chain and essential technical skills.

To conduct interviews, the top management appoints an interview committee that selects the best candidate for the job, who is later approved and appointed by the top management.

Interviews and appointments are different depending on the level of the job vacancy. Candidates for the positions of CEO and Board Secretary (who also doubles as Deputy CEO) are appointed by the Minister of Health. NMS's eight heads of departments are interviewed and appointed by the full Board of Directors. The middle management (e.g. the head of transport and logistics or an HR officer) and operational teams are interviewed by a committee consisting of top management, which includes heads of relevant departments (such as Stores and Operations, HR, Procurement, Quality Control, Internal Audit, ICT, etc.). All other technical personnel (e.g. engineers, pharmacists, etc.) are interviewed by heads of departments.

The key informant for NMS stated that in the process of selecting candidates the organisation places most emphasis on their behavioural assessment and ability to fit well with the rest of the team. Experience is an important part of the assessment, but NMS currently does not have a special score for experience or education. NMS takes all aspects into account during selection, though it identifies the person's character as the most important. In certain cases, to increase gender parity, the committee considers giving preference to a female candidate.

Career progression

Every employee signs a four-year fixed-term contract, which is renewable after the term period. Once a vacancy opens, individuals can apply for it and, if qualified, be appointed to that role. Before taking up a new role, the employee must resign from their previous post.

Previously, NMS's organisational structure was narrow, and it was not possible for employees to consider career progression within this system. NMS has since tried to expand its structure and now offers various levels through which employees can navigate various career paths and find internal opportunities. Whilst NMS does not have a traditional career ladder approach, the organisation does not impose restrictions on staff. If an opportunity arises and an employee feels that they have the necessary experience and qualifications, they can apply.

The respondent from NMS noted that conventional career ladders lock people in, forcing employees to go through several intermediary steps to progress to the next level or position. However, at NMS an assistant warehouse officer with the necessary skills and qualifications can apply for a senior warehouse officer position without needing to serve in intermediary positions for several years. The respondent noted that this approach is flexible and less restrictive, as it does not tie individuals to a path. If a career opportunity arises, and the candidate demonstrates all the necessary qualifications and skills, they can apply, even if the vacancy is not within the candidate's pathway. NMS therefore has many employees who cross departments: for example, moving from stores and operations, where they were performing stock control, to becoming senior procurement officers. This approach also supports skills transfer: that same person moving from stock control to procurement will be aware of the entire value chain in terms of procurement and logistics management, as they have been at the receiving end of the stock and now can bring this experience to contract initiation and procurement management. In this way, this approach helps staff to benefit from a wide range of experiences.

4.6.2 Pathway 2. Skills

TNA

NMS conducts TNA annually at the individual, departmental, and organisational level. The training needs of employees are identified from performance appraisals reports, and the top management prioritises training needs for the entire organisation. Each performance appraisal form contains a development needs section, where an employee is expected to indicate their individual development needs. Once those training and development needs are established, the HR department consolidates them into one general annual needs assessment.

Training and learning/capacity building and development

In certain cases, NMS relies on its own resources to conduct training. For example, if gaps are identified in the IT competencies of its employees, the ICT department will come up with a plan to help rectify those issues. However, NMS's training programmes are mostly facilitated by external organisations.

The training courses themselves may take place at NMS facilities, run by external trainers, though NMS also selects employees to attend trainings, seminars, and conferences outside the organisation and abroad. NMS does not have contracted partnerships with these external organisations but invites employees to attend when they find a suitable training programme.

NMS encourages the long-term professional development of its employees. For example, if an employee is a member of a professional body, NMS will cover the cost of the annual subscription. Every employee is entitled to join two professional bodies and NMS will pay for up to two membership subscriptions every year, if the membership is relevant to the employee's role. NMS

encourages staff to attend training programmes and courses, and pays for CPD, such as CPD workshops, which it facilitates and sponsors.

In certain circumstances, NMS also covers the cost of acquiring a new qualification, if it is necessary for the employee's performance in the current role. Its preference, however, is that employees take long-distance or part-time courses that do not affect their daily work and do not require taking a long leave to complete the course. NMS can grant leave if the employee is scheduled to sit an exam but cannot offer long leaves of absence.

4.6.3 Pathway 3. Work environment

Creating a strong organisational culture

The key informant for NMS emphasised that the organisation seeks to communicate and instil the organisational culture in employees right from the induction period. NMS aims to create a non-discriminatory and safe environment that is conducive to work, for all staff.

NMS has its own specific HR manual – the National Medical Stores Human Resource Manual, which explains the duties and responsibilities of every employee, and organisational rules of conduct. Other steps NMS takes to create a good overall work environment include the following:

- Providing every employee with the necessary requirements for them to do their work (e.g. mobile airtime credit, internet access). Staff in client-facing roles have a small entertainment allowance for meeting with key clients. NMS also provides a fuel allowance to members of the middle management.
- Providing meals in the workplace. NMS offers breakfast and lunch, and provides dinner for staff working a night shift (this is not a common practice among organisations in Uganda).
- Providing transportation for staff (e.g. staff bus).

Use of policies

Policies NMS employs include the following:

- Policies to stop discrimination based on gender and other factors;
- A disciplinary code and procedure, available in the organisation's HR manual;
- An HIV and other chronic diseases workplace policy. This protects individuals with medical conditions;
- Health and safety policies – to protect individuals from injury and harm;
- Sexual harassment policy – to protect colleagues from sexual harassment;
- A Code of Conduct, as an annex to the HR manual, which every employee must read and sign;
- NMS follows the national policy of the Anti-Corruption Act. Corruption is also covered under the Disciplinary Code;
- A fraud policy and risk management;
- Legal and regulatory compliance to ensure behaviours and practices are conducted in accordance with national and local laws.

To help raise awareness of the policies, employees' induction includes a comprehensive review of HR policies. NMS also regularly conducts staff sensitisation and continuously reviews organisational policies.

NMS created its own training division in July 2020 and is currently designing a programme of modules relating to its different policies, involving staff studying or reading the policies and then

answering questions on the policies to earn points. Staff can then access rewards via these points (e.g. to receive a promotion or be assigned a senior role, staff must first earn a certain number of points, which can only be achieved by attempting specific modules). Modules can focus on topics such as leadership, NMS's policies (e.g. fraud policy, financial management etc.), innovation etc.

Supporting women or members of minority groups

NMS's recruitment policy and HR policy emphasise non-discrimination based on any characteristic. The organisation has a very clear policy regarding attracting, maintaining, and motivating an equal workforce that always meets the corporate goals of business needs.

Creating a safe work environment

NMS has focused on creating a safe work environment by introducing the following measures and policies. NMS has a specific section whose role is to ensure that employees are provided with the necessary protective equipment (including safety shoes, overalls, and helmets) and work in a safe environment (e.g. preventing exposure to high levels of noise).

NMS provides necessary and relevant insurance cover to staff at the workplace and provides health and safety training. Relating to fire safety, NMS installed fire alarms, marked fire assembly points, and organised fire safety training.

NMS also provides welfare packages through medical insurance cover for staff, their spouses, and up to four of their children.

Whistleblowing mechanism

NMS has a risk management policy, which comes under its risk management procedures. This policy emphasises that any means of whistleblowing is acceptable, and the policy highlights that the anonymity and identity of whistleblowers should be protected. The policy outlines how information received should be investigated and treated with confidentiality. If a culprit is found, it details how they are managed.

4.6.4 Pathway 4. Motivation

Performance management and engagement practices

Employee motivation is primarily achieved by highlighting KPIs and maintaining clarity regarding roles at NMS. This is reviewed every six months to ensure the staff have a clear understanding of individual targets. Motivation is also linked to opportunities to innovate and to staff participation in the decision-making process. Other measures to enhance motivation include a robust reward system and competitive salary packages (NMS's salaries are consistent with market rates), safe work environment, policies against discrimination, welfare packages (including insurance, family medical benefits), meals at the workplace (e.g. lunch and dinner depending on the work shifts), and a strong company branding.

Incentive policy

All NMS staff are paid an attractive salary that is consistent with the market rate. Incentives also include entertainment allowances for client-facing job roles, fuel allowances for staff at mid-level and for top-level management, transport facilities for employees (staff bus), etc. An annual leave allowance and a 25% gratuity is offered to NMS staff.

Performance appraisal

NMS conducts annual performance appraisals for the top and middle management and bi-annual appraisals for the lower-level staff (officers and assistants) during July (review for January to June) and January (review for July to December).

Promotion

NMS does not conduct promotions. Every employee receives a four-year contract. Initially, all vacant positions are advertised internally, and NMS tries to fill them through existing candidates. If the internal candidates fulfil all the performance-based eligibility criteria, they are offered a fresh contract, which is regarded as new recruitment and not a promotion.

Supervisory support

NMS encourages inter-department coaching and mentoring of employees, especially for junior-level staff who are supported through a general induction and attached to a senior staff member responsible for conducting mentoring activities.

Disciplinary policy and practice

The disciplinary code guides all disciplinary cases and a disciplinary procedure is also followed, as stipulated in the HR manual.

Staff satisfaction survey

NMS has not conducted a staff satisfaction survey in the past but there are plans to conduct such a survey this year, with the involvement of internal and external stakeholders.

5. Conclusion

5.1 Pathway 1. Staffing

Successful recruitment of the health supply chain workforce depends on how closely the competencies of the recruited individuals match the requirements of crucial supply chain positions. Job descriptions, developed based on a competency framework, have become a common best practice, as demonstrated by 75% of the survey respondents and two out of the six case study parastatal health supply chain organisations in Sub-Saharan Africa. Best recruitment practices apply a flexible step-by-step approach to ensure a fair, transparent, and competitive selection process. The study examined various mechanisms employed by organisations in the focus countries to conduct planning, advertise supply chain positions, and manage job applications, as well as assessing candidates' competencies and past performance through panel interviews and technical tests. The six-case study parastatal supply chain organisations conduct internal or external recruitment (or both), in some cases outsourcing the hiring of top management positions to professional services firms. Assessment of relevant education and the length of field experience, rather than technical expertise, was reported as the crucial component of recruitment process by 42% of the respondents, while performance during interview was seen as a decisive factor in hiring a candidate by 35% of survey respondents. Similarly, in most of the six case study parastatal organisations qualification and the length of professional experience play a pivotal role in the selection process, and most of the organisations conduct written or oral technical tests as part of recruitment.

Effective employee compensation is instrumental for attracting and retaining employees; therefore, a well-designed salary structure is considered imperative for effectively managing and rewarding the performance of supply chain personnel. Most survey respondents (59%) acknowledged that their organisations lack benchmarked salary ranges and 69% of respondents indicated that salary market analysis is not conducted in their organisations. Some of the health supply chain organisations examined in the case studies referred to limitations in their ability to offer competitive salaries and benefits, due to constraints imposed by state regulations on salaries and remuneration.

5.2 Pathway 2. Skills

Adequate technical, managerial, and leadership skills are essential for effective employee performance. TNA aims to identify knowledge and skills gaps depending on required competencies and the training objectives, both organisational and individual. It helps employees to bridge those gaps and ensure that their performance complies with the business needs of the organisation. Although TNA is commonly perceived as an integral part of HR development and transformation, 50% of survey respondents indicated that their organisations do not conduct training assessment, and 35% of respondents highlighted that TNA in their organisations does not lead to the development of a training strategy or plan. The study emphasised that best practices in the surveyed organisations aimed at supporting CPD of supply chain specialists are tailored to address specific skills needs through training and learning, provide certifications and encourage obtaining higher degrees, and support memberships in professional associations.

Professionalisation of SCM specialists, although a new area of HR development, is gaining increasing attention from health supply chain organisations in Africa. Its task is to prepare and

support highly competent managers and practitioners through training and career management by establishing global standards for health SCM job functions, skills needs analysis, harmonised learning curricula, and accreditation of supply chain workers.

Communities of practice promote the professionalisation of supply chain workers in different areas, creating a shared domain for learning, networking, and the sharing of ideas, methods and experiences. The survey respondents indicated that a community of practice can take various forms, such as on-the-job training, moderated discussions, webinars and workshops, etc. The study found that supporting communities of practice is considered as an important stimulus for continuous professional and leadership development of employees.

5.3 Pathway 3. Working conditions

Organisational culture is a key part of creating a supportive work environment. The study identified several key policy areas to support organisational culture, encompassing health and safety policies, anti-harassment policies, creating a good environment for women, codes of conduct, and equal opportunities. All six case study parastatal organisations stated that they have a code of conduct in place. Regarding overall organisational culture, one KII respondent emphasised the importance of changing the culture by first ensuring there is a good physical environment. Ways of creating a good physical environment for staff include creating sports teams, ensuring a clean environment, and providing subsidised meals at a workplace canteen.

Some of the six-case study parastatal health supply chain organisations promote women or minority groups through specific groups or departments (e.g. a Gender Mainstreaming Committee and a Disability Mainstreaming Committee at KEMSA, and a Gender and Youth Directorate at EPSA). Other procedures mentioned by KIIs include using affirmative action in either recruitment or promotion, having a clear policy on attracting and maintaining an equal workforce, and examining disaggregated data on the gender split at different levels.

Having an overarching code of conduct or ethics in place was the most common policy intervention listed by survey respondents (63% have one in place), and these were also found to be in place at all of the six case study parastatal organisations. Other policies mentioned in KIIs covered a range of areas: anti-corruption, anti-fraud, anti-discrimination, HIV and chronic diseases, sexual harassment, and health and safety. Policies alone are not sufficient to improve working conditions: policies should be regularly reviewed, and steps taken to ensure implementation. KIIs mentioned how their organisations sensitise employees on, and disseminate, their policies by means of consultation, regular reviews, printing out hard copies, and uploading soft copies to the intranet. NMS in Uganda is also in the process of designing online modules covering its policies.

The study also examined the use of whistleblowers to create a good working environment, a mechanism that was reported to be in place by 41% of survey respondents. Four out of the six KIIs also stated they have a whistleblowing policy mechanism. Key practices identified from the survey respondents and the KIIs in creating a whistleblowing policy mechanism include an independently managed anonymous hotline and the use of specific email systems to ensure anonymity.

Effective OSH, encompassing psychosocial threats and gender-based violence, as well as physical harm, is an important part of increasing worker motivation and the overall environment. The study identified six key policy areas or interventions that support OSH, including budgeting, checklists to ensure compliance, risk assessments, and overall policies and procedures in place. The most implemented intervention reported by survey respondents was the improvement of the

workplace conditions and providing staff with the necessary tools and equipment to perform their jobs (81%). Other important areas mentioned by key informants included carrying out tests (e.g. lighting conditions, air quality), providing medical cover and free health checks, registering near incidents, and providing protective equipment to staff. Multiple organisations mentioned that they comply with national-level health and safety legislation.

5.4 Pathway 4. Motivation

Motivating the health Supply Chain workforce is key to improving performance and commitment. The study concluded that every country has identified its unique combination of intrinsic and extrinsic motivators. For example, performance management is supported using KPIs at EPSA, KEMSA, and NMSF. MSD uses its internal appraisal system, called DRIVE, while NMS seeks to motivate employees through changes to the work environment and organisational culture.

A range of performance incentives and work benefits are utilised across the six case study parastatal organisations to enhance the motivation of staff. This includes rewarding employee performance with a recognition letter and a dinner with the CEO at KEMSA; providing hardship allowances, honoraria, and transport allowances at MSD; and providing an entertainment allowance for client-facing job roles, fuel allowances for middle and top management, and transport for staff at NMS.

Performance appraisals are central to motivation across the six case study parastatal organisations. These are conducted annually or bi-annually, using either the BSC tool or 90-degree or 180-degree appraisal methods.

Promotions also emerge as an important mechanism of employee motivation. They are guided by the Career Progression Plan at KEMSA, the Condition of Service handbook at CMST, and the Civil Service Chamber at NMSF. MSD follows a competence-based promotion system, whereas NMS does not exercise promotions at all, instead inviting employees to apply for available internal positions at various levels after the expiration of their fixed-term four-year contract. The study revealed that mentoring, coaching, and supervision activities are often limited at the six case study organisations. Some of the organisations are lacking SOPs for mentoring and coaching, others encourage staff to seek mentoring opportunities outside their organisation through participation in workshops and seminars.

The study identified a variety of tools that are used to improve employee engagement and staff retention. A few of the six case study organisations have developed structured retention schemes and policies (e.g. KEMSA's Talent Management Manual), while others resort to various monetary and non-monetary incentives, work benefits, and organisational changes. These range from private health insurance and free health checks, to various allowances, subsidised meals, staff transportation, and trade union support.

Disciplinary procedures and rules are well documented across the six-case study organisations and are regulated by either disciplinary policies, codes of conduct, or governmental regulations and acts. Staff satisfaction surveys are conducted annually or biennially in all the case study parastatal organisations, except for NMS. The latter has not conducted such a survey in the past but plans to introduce one in 2020, and to extend participation to internal and external stakeholders.

Appendix 1. Comparative tables (case studies)

The following four comparative tables summarise HRM practices at the six cases study parastatal organisations.

A.1 Pathway 1. Staffing

Sub-theme	KEMSA, Kenya	NMSF, Sudan	NMS, Uganda	EPSA, Ethiopia	MSD, Tanzania	CMST, Malawi
Recruitment process	<p>Has 12 job grades. Recruitment for top managerial positions (Grades 1–3) is outsourced, but candidates are interviewed by the KEMSA Board of Members.</p> <p>Recruitment for Grades 4–12 is conducted in-house. Advertising is both internal and external (depending on the position).</p> <p>Interview panel is appointed by CEO. Depending on the level of the job, the panel may include CEO; HR manager; a technical specialist in the relevant area;</p>	<p>Has 16 job scales: Skilled employees (Scales 1–9) and unskilled labour (Scales 10–16).</p> <p>Candidates for positions in Scales 1–5 selected by the special Recruiting Committee, approved by the Board of Administration and appointed by the Council of Ministers.</p> <p>Candidates for positions in Scales 6–9 are recruited by the National Civil Service Commission.</p> <p>Candidates for jobs in Scales 10–16 are recruited by NMSF.</p>	<p>Vacancies are first advertised internally, according to departmental job requisition forms. The HR department conducts the application and shortlisting process. Shortlists approved by the top management before candidates are invited for interview.</p> <p>If positions cannot be filled internally, HR department initiates external recruitment. Adverts are placed on the NMS website, social media, and in the national print media for a</p>	<p>Vacancies advertised in government newspaper and posted on EPSA noticeboards.</p> <p>According to the Civil Service Commission guideline, priority in filling vacancies is given to the existing workforce. Only in the absence of a suitable internal candidate is the job advertised externally.</p> <p>Written test (taken at Addis Ababa University) precedes the interview, which is</p>	<p>Employment requests are submitted by MSD departments to the HR via job requisition forms. Before initiating recruitment, the HR explores opportunities for staff re-categorisation. If not, all vacancies can be filled by recategorised staff, the HR advertises positions externally.</p> <p>According to the Public Service Act (2016), the MSD recruitment campaign is conducted through the Public Service</p>	<p>11 job grades, ranging from leading managerial positions (Grades 1–4) to middle and lower-level jobs (Grade 11).</p> <p>Recruitment is regulated by the Terms and Conditions of Service handbook.</p> <p>Certain junior positions advertised internally. Other positions, from officer level and above, are advertised both internally and externally.</p> <p>Recruiting committee drafts</p>

	head or assistant head of the department.		<p>minimum of seven days.</p> <p>Shortlisting committee is organised by the HR department and approved by the top management.</p> <p>NMS conducts aptitude tests or technical tests depending on the nature of the job and the volume of applications.</p> <p>Separate interview committees are organised for different levels of job position.</p>	the crucial phase of recruitment.	<p>Recruitment Secretariat.</p> <p>The MSD HR department performs checks and shortlisting, conducts interviews and makes job offers.</p> <p>An interview matrix is employed (including technical questionnaire, sections on required competencies, qualifications, and job fitness).</p> <p>Assessment tests are conducted for technical and supporting positions. Professional assessment of candidates for top managerial roles is outsourced to a recruitment company.</p>	interview questions and prepares a case study task to be completed by candidates in advance and presented as part of their assessment.
Job descriptions	Based on a competency framework; include clearly defined and	Based on competency framework and developed by PtD.	Developed according to the Job Description Manual.	Developed by Civil Service Commission, not based on a competency	Based on the competency framework developed by	Job descriptions do not follow a competency framework, but

	<p>detailed objectives, essential professional qualifications and competency requirements. Developed in assistance with the State Corporation Advisory Committee.</p>	<p>Include clear objectives, responsibilities, qualifications, skills, and experience requirements.</p>	<p>No separate competency framework available.</p> <p>Drafted with the assistance of a consultant and in collaboration with heads of departments.</p> <p>Contain clear job objectives, responsibilities, and essential professional qualifications.</p> <p>Approved by the Board of the organisation and regularly updated.</p>	<p>framework, and aligned with other civil service organisations in the country.</p>	<p>Accenture with support from BMGF. The crucial supply chain positions were reviewed, and job descriptions revised and expanded following the framework.</p>	<p>include job objectives, essential skills, qualifications, and responsibilities.</p>
<p>Pay scale and salaries</p>	<p>Guided by state regulations on salaries and remuneration. Nine-band pay structure for each job family. KEMSA conducts salary market analysis and can negotiate salaries with specialists in high demand.</p>	<p>Clear pay benchmarking linked to supply chain careers at NMSF and the job grading system.</p>	<p>Pay and grading scales are clear and tend to be aligned with supply chain careers and consistent with market rates.</p>	<p>Salaries are defined by the Civil Service Commission according to job grades and follow the pay scales established for institutions under the auspices of the Ministry of Health. Salary market analysis is not conducted.</p>	<p>Clear salary benchmarking linked to supply chain careers. Salary market analysis is also conducted.</p>	<p>Structured according to job grades, includes salary increments.</p>

A.2 Pathway 2. Skills

Sub-theme	KEMSA, Kenya	NMSF, Sudan	NMS, Uganda	EPSA, Ethiopia	MSD, Tanzania	CMST, Malawi
TNA, and training strategy and planning	<p>TNA is conducted annually, informed by performance appraisals. Training requests are submitted to the Training Committee, which plans the training calendar.</p> <p>Mandatory leadership training in government school (for Grades 1 and 2 roles).</p> <p>Special professional training for technical personnel to obtain practising certificate at a relevant professional body/institute.</p> <p>All training is outsourced.</p>	<p>TNA is conducted annually. Training follows a comprehensive training strategy and plan. Training usually conducted at departmental level. Various training courses and CPD programmes provided at NMSF and the dedicated training centre (esp. for pharmacists).</p>	<p>TNA is conducted annually and informed by performance appraisal reports.</p> <p>Training is mostly outsourced to external organisations or conducted in-house by external trainers.</p>	<p>TNA has been conducted at the organisational, departmental, and individual level (supported by PSA). Training strategy and planning are being developed.</p>	<p>TNA is conducted annually, informed by performance appraisals.</p> <p>MSD has developed its own appraisal system (DRIVE).</p> <p>The HR department reviews training needs requests and drafts a training plan, depending on employee performance and organisational needs.</p> <p>MSD conducts a mixture of in-house and outsourced training, and partners with various institutions (e.g. PSPTB).</p>	<p>TNA is conducted as part of performance appraisal system. The HR department consolidates training requests, drafts the annual training plan, defines the budget (currently quite limited). CMST is currently planning the staff development and training strategy for financial year 2020/25 (as part of the National Supply Chain Integration Project).</p>

Professionalisation, mentoring, supervision, on-the-job training	Coaching, mentoring, and on-the-job training. Mentorship and supervision decisions are made jointly between heads of department, supervisors, and employees.	NMSF encourages networking with professionals (incl. Sudan Pharmacist Union), performing research related to medical supply chain, training and educating individuals at other organisations, and developing an ethic of continuous professional improvement.	NMS encourages staff to join relevant professional associations, covers incurred membership and subscription fees. NMSF supports staff in taking part-time qualification courses by covering the fees.	Measures for CPD, workshops, on-the-job training, self-sponsoring, and county sponsorship for training. PSA is supporting EPSA in establishing the dedicated Training and Resource Centre to conduct all training and CPD activities in-house.	Supports staff membership of professional bodies and covers associated costs. Mentorship is not yet robust: there is a small pool of on-the-job mentors and the HR organises various mentoring activities.	Conducts some on-the-job training. Technical training is outsourced to external institutions and professional bodies. CMST follows training calendar of these institutions to draft its training plan.
---	--	---	---	---	--	--

A.3 Pathway 3. Work environment

Sub-theme	KEMSA, Kenya	NMSF, Sudan	NMS, Uganda	EPSA, Ethiopia	MSD, Tanzania	CMST, Malawi
Overall organisational culture	A strong organisational culture that promotes excellence and change. Staff sign a conflict of interest form and suppliers sign an agreement that they commit to legal and ethical practice.	NMSF has changed organisational culture by first upgrading physical work environment (e.g. installing new desks, computers, email systems, high-speed internet, etc.). NMSF has taken steps to improve employee welfare (e.g. transportation to work, private medical insurance).	Organisational culture is communicated to employees during the induction process. NMS has a HR manual explaining employee conduct. Provides workplace meals, staff transport, fuel allowance for middle	EPSA has established a Supply Agency Ethics Unit in accordance with the Regulations of the Council of Ministers Regulation 144/2000. EPSA is introducing a pool of cultural ambassadors (following the Admas Programme organisational culture diagnostic).	MSD uses a KPI to ensure work environment is conducive to improved HR planning and management.	Terms and Conditions of Service are the primary framework in creating a good work environment (currently at final stage of being updated).

		<p>Other measures include developing staff recreational area, building a cafeteria, mini-market, cash point,</p> <p>Adopted a Code of Conduct and provides training on how to maintain a clean and safe working environment.</p>	<p>management, mobile airtime credit, small client entertainment budget (if applicable).</p>			
<p>Policies to promote women or members of minority groups</p>	<p>Gender Mainstreaming Committee ensures that interests and concerns of both women and men are not compromised.</p> <p>Examines gender ratio in the workplace at different levels.</p> <p>Disability Mainstreaming Committee focuses on supporting staff living with disabilities. Supports minority groups in procurement.</p>		<p>Recruitment and HR policies emphasise non-discrimination based on any characteristic.</p> <p>Clear policy on attracting, maintaining, and motivating equal opportunities workforce.</p>	<p>EPSA has a Gender and Youth Directorate and follows affirmative action in recruitment, training, and other similar activities.</p>	<p>Has an anti-harassment policy. Encourages recruitment of people with disabilities and has practised affirmative action in recruitment.</p>	

<p>Policies that promote organisational culture</p>	<p>KEMSA has a Code of Ethics, signed by new staff.</p> <p>New policies are shared at a meeting, on KEMSA's intranet, and in hard copies. Most policies are reviewed every two years.</p>	<p>Code of Conduct (applied following a joint discussion involving all employees).</p> <p>Extensive corpus of policies including:</p> <ul style="list-style-type: none"> • Anti-corruption policies; • Anti-fraud policies; • Email policy; • Good governance for medicines. 	<p>National Medical Stores Human Resource Manual.</p> <p>Policies to stop discrimination based on gender and other factors.</p> <p>HIV and other chronic diseases workplace policy.</p> <p>Code of Conduct (every employee must read and sign).</p> <p>Fraud policy and risk management.</p> <p>Sexual harassment policy.</p> <p>Health and safety policies.</p> <p>Follows national Anti-Corruption Act.</p> <p>Continuously reviews policies, conducts regular staff sensitisation.</p> <p>NMS in process of creating online modules dedicated to organisational</p>	<p>EPSA has a recently updated Code of Conduct, which includes information on health and safety, anti-harassment, and anti-discrimination.</p>	<p>Anti-harassment policy.</p> <p>Code of Conduct.</p>	<p>HIV workplace policy.</p> <p>Fraud and Corruption Prevention Policy.</p> <p>Code of Conduct (outlines core values, vision, and mission).</p> <p>Policies developed by a consultative process, and once finalised staff have opportunities to raise questions. Copy of each policy is given to staff.</p>
--	---	--	--	--	--	---

			policies (and other topics).			
OSH (including policies and procedures)	<p>Directorate of OSH helps to implement policies. Directorate of OSH carries out tests (e.g. air sampling, assessing lighting quality, sufficient minimum workspace) and provides recommendations.</p> <p>Provides medical cover to staff, annual free medical examinations, and a family fun day, which includes health testing.</p> <p>Carries out annual audits and registers near incidents, ensures the use of PPE.</p> <p>Insures staff against workplace injuries.</p>	<p>OSH regulations.</p> <p>First-aid kits.</p>	<p>Health and safety policy.</p> <p>Specific section to ensure employees are provided with necessary PPE and have a safe work environment. NMS provides safety wear to staff, including shoes, overalls, and helmets.</p> <p>Health and safety training, fire safety procedures for the workplace.</p> <p>Medical insurance cover for staff, their spouses, and up to four children.</p>	OSH SOPs.	<p>Ensures compliance with standards, governed by the Occupational Safety and Health Authority.</p> <p>This includes PPE for staff working in cold vaccine stores, transportation for staff working night shifts, mobile airtime credit, etc.</p> <p>Conducts quarterly medical tests (prior to COVID-19), hepatitis vaccine, and awareness campaigns (e.g. encourages employees to take HIV tests).</p>	<p>Follows Labour Act for Health and Safety.</p> <p>Conducts health and safety trainings and fire safety drills.</p> <p>Ensures there is a clean environment and staff use protective equipment (e.g. warehouse workers, cleaning team, security team, etc.).</p>
Details of whistleblowing mechanism (if applicable)	Special commission protects whistleblowers' identity.	The mechanism ensures whistleblower anonymity.	The mechanism emphasises that any form of whistleblowing is acceptable and anonymity of whistleblowers should be protected.	There is no mechanism currently in place, but plans to create one.		The mechanism ensures anonymity and is outsourced to Deloitte.

A.4 Pathway 4. Motivation

Sub-theme	KEMSA, Kenya	NMSF, Sudan	NMS, Uganda	CMST, Malawi	MSD, Tanzania	EPSA, Ethiopia
Performance management polices	KPIs strengthen the performance management process and improve staff motivation. KEMSA staff are encouraged by fostering a sense of belonging.	KPIs to support staff performance management and the understanding of individual tasks and organisational goals.	KPIs reviewed every six months to ensure staff have clear understanding of individual targets.	CMST uses the BSC to manage performance of Board members. The rest of the staff are assessed by different performance management tools, developed by consultants.	MSD uses its own internal appraisal system called DRIVE, based on agreed performance objectives submitted to the HR annually in May–June.	Corporate and directorate-level KPIs in place, which are governed by the monitoring and evaluation framework.
Incentives and benefits	Employee rewards and recognition system include annual salary increments, a recognition letter signed by the CEO, a dinner with the CEO, etc.	NMSF introduced performance-based rewards and incentives in 2012. The system applies if an employee scores above 70 points in performance appraisal. NMSF offers staff an additional benefits package.	NMS staff are paid attractive salary consistent with the market rate. Incentives and benefits also include entertainment allowance for client-facing job roles, fuel allowances for staff at mid- and top-level management, transport for staff (staff bus), etc.	Non-financial incentives, such as recognition for good performance during annual appraisals, staff exchange programmes, staff engagement in stakeholder meetings, etc.	An organisational incentive scheme includes hardship allowances for employees who reside in hard-to-reach areas, an honorarium in recognition for contribution to work, mobile airtime credit and transport allowances, etc.	No performance-based incentives are in place.
Appraisal	KEMSA conducts bi-annual performance appraisals; utilises 90-degree and 180 degree-performance appraisal methods.	The Civil Service Chamber guides performance appraisal. Supervisors are mandated to fill the assessment	NMS conducts performance appraisal by the top management twice a year: in July (review for January to June) and in	An open appraisal system whereby an employee fills the BSC and indicates the level of individual performance.	Performance review conducted twice a year (in December and May).	EPSA has been using the BSC as performance management tool, but not uniformly throughout the organisation.

		anonymously and submit it to the HR department.	January (review for July to December).			
Promotion	Promotions depend on skills, experience, performance, competence, disciplinary issues, availability of vacancy, etc.	Civil Service Chamber guides promotion of eligible candidates. However, promotions are not linked to competence framework.	NMS does not conduct promotions. Every employee receives a four-year contract. Initially, all vacant positions are advertised internally and tried to be filled through existing candidates.	Promotions are governed by the Condition of Service handbook and based on annual staff performance assessments. There is no competency-based promotion framework.	MSD follows competence-based promotions linked to the competency framework. Promotions are also guided by the DRIVE appraisal system score. To help underperforming employees, MSD has introduced a Performance Improvement Plan.	Promotions are not linked to competencies. Educational qualifications and years of experience are used as the main criteria for promotion.
Capacity building and development	Public Service Rule standards require CEOs and directors to undergo leadership training at government school. Managers in Grades 3 and 4 undergo special management training. Members of technical staff need to complete a number of professional training hours to collect points for a practising certificate at the end of every calendar year.	Capacity development can include self-learning (using learning facilities and resources of the NMSF Training Centre). Staff are encouraged to participate in conferences and workshops in the region, and other relevant training offered to the staff.	TNA identifies the training needs which support the development of an annual training program. The performance appraisal also guides training opportunities as the development of staff is central to NMS.	Training is mostly outsourced based on the area of work like accounting, management, pharmacy, etc. On-the job training and staff orientation are conducted in-house.	At MSD TNA is conducted annually as part of the performance management system called DRIVE. Training is aligned with the changing business needs, Supply Chain landscape, and MSD's need. A mix of in-house and external training opportunities are provided to the staff.	At present, there is a TNA and a training plan, which has been endorsed by other partners of EPSA. A training strategy is being developed and will be endorsed soon.

Supervision	KEMSA provides supervisory support through coaching and mentoring.	Mentoring and coaching activities began in 2018 but are still scarce at NMSF.	NMS encourages inter-departmental coaching and mentoring of employees, (especially for junior-level staff as part of general induction).	CMST encourages mentorship as open interaction between staff members and line managers to forge sense of guidance and support.	MSD provides mentorship support for employees. Staff are encouraged to participate in seminars and workshops, which include an element of mentoring and coaching. Participation fees are covered by MSD.	No mentoring, coaching, and structured supervision scheme available at an organisational level. PSA currently supports EPSA in the implementation of this scheme.
Engagement and retention strategies	KEMSA's retention policy is based on a Talent Management Manual. KEMSA provides a one-week induction programme, study leave for completing training or degree courses, etc. As a result of its retention strategies, KEMSA has been able to keep staff turnover at a low level.	Engagement policies included changing the ambience of the office, providing better access to computers, ERP system, providing transportation for employees (in air-conditioned mini-vans), introducing uniforms, providing private medical health insurance for staff and family members, subsidised meals, mini-market, cash points on the NMSF premises, etc.	NMS is focused on retaining the best-performing employees, conducting employee motivation programmes and prioritising internal recruitment to help retain the qualified workforce.	CMST offers competitive remuneration package, conducts team-building exercises (every two years), and commits to transparent communication and feedback policy. These efforts help keep staff turnover at low level.	MSD does not have a special retention scheme but offers a range of benefits and activities to sustain employee engagement. These include offering a clear career progression, paying for membership in up to two professional associations, offering a gratuity scheme with a payout to all staff every two years, etc. These benefits have contributed to very low attrition rates.	The lack of career paths and organisational retention policies has contributed to a decline in employee engagement and increased employee turnover.
Disciplinary policy and practice	The disciplinary policies are monitored by a	NMSF adheres to the Disciplinary Act for the Civil Service.	The disciplinary code guides All disciplinary cases follow a disciplinary	Disciplinary policies are a part of the Terms and	Disciplinary policies and practices are governed by the Public Service Act,	EPSA follows the civil service disciplinary code of conduct.

	special committee in KEMSA.		code and disciplinary procedures explained in the HR Manual.	Conditions of Service.	2002 and its regulations of 2003.	
Staff satisfaction survey	The survey is conducted every two years.	The survey is conducted every year and the results are discussed with employees.	The survey was not conducted in the past. There are plans to conduct the staff satisfaction survey in 2020 and extend it to internal and external stakeholders.	The survey is conducted annually.	The survey is conducted annually by the HR department.	The survey is conducted annually at the organisational and hub/location level.

Appendix 2. Bibliography

- Abrese-Ako, M., van Dijk, H., Arhinful, D. J., and Agyepong, I. A. (2014). "Your health our concern, our health whose concern?" Perceptions of injustice in organizational relationships and processes and frontline health worker motivation in Ghana'. *Health Policy and Planning*, 29(2), 5–28.
- Audenaert, M., Vanderstraeten, A., and D. Buyens (2009). 'Outcomes of competency management: matter of faith or backed by academic evidence? A state of the art of the rhetoric compared to available evidence'. Paper presented at the 6th International Conference of the Dutch HRM Network.
- Bean, C. and Geraghty, K. (2003). 'Navigating the road to KPI success'. *Focus*, 5(6), 37–41.
- Bolger, J., Mandie Filer, A., and Hauck, V. (2005). 'Papua New Guinea's health sector – a review of capacity, change and performance issues'. European Centre for Development Policy Management, Discussion Paper 57F 2005.
- Campion, M., Fink, A., Brian, J., Rugeberg, L. Carr, Phillips, G., and Odman, R. (2011). 'Doing Competencies Well: Best Practices in Competency Modelling'. *Personnel Psychology*, 64, 225– 262.
- CBI News (2017). 'New enthusiasm for education flows from SM learnership'. *CBI News*, 2 (January-March), 9.
- Chimwaza, W., Chipeta, E., Ngwira, A. et al. (2014). 'What makes staff consider leaving the health service in Malawi?' *Human Resources for Health* 12, 17.
- Cometto, G., Babar, Z., Brown, A., Hedman, L. and Campbell, J. (2014). 'Health supply chain personnel: an integral part of the health workforce'. *Journal of Pharmaceutical Policy and Practice*, 7(1).
- Deussom, R., Jaskiewicz, W., Adams, E. and Tulenko, K. (2012). 'Ensuring a positive practice environment: occupational safety and health for health worker productivity'. *USAID Capacity+ Technical Brief 4*.
- Dieleman, M., Cuong, P.V., Anh, L.V., and Martineau, T. (2003). 'Identifying factors for job motivation of rural health workers in North Viet Nam'. *Human Resources for Health* 1, 10.
- Eckerson, W.W. (2009) 'Performance Management Strategies'. *Business Intelligence Journal*, 14(1), 24–27.
- Guo, W. , Li, T. and Wu, N. (2015) 'Empirical Study on the Effects of Leader's Verbal Communication Style on Employee's Job Satisfaction'. *Journal of Human Resource and Sustainability Studies*, 3, 211–227.
- International Labour Office (2001). *Guidelines on Occupational Safety and Health Management Systems*. Geneva.
- Jayasuriya, R., Jayasinghe, U. W., and Wang, Q. (2014) 'Health worker performance in rural health organizations in low- and middle-income countries: do organizational factors predict non-task performance?' *Social Science & Medicine*, 113, 1-4.
- Katzenbach, J. R., Steffen, I., an Kronley, C. (2012) 'Cultural change that sticks'. *Harvard Business Review*, 90 (7-8), 110-117.
- Kenya Medical Supplies Authority (2015). *Code of Conduct on Leadership & Integrity*.
- Khalifeh, A., and Som. (2013). 'The antecedents affecting employee engagement and organizational performance'. *Asian Social Science*, 9(7), 41-46.
- Krivkovich, A., Nadeau, M., Robinson, K., Robinson, N., Starikova, I., and Yee, L. (2018). 'Women in the Workplace 2018', McKinsey.

- Kwenin, D.O., Muathe, S. and Nzulwa, R. (2013). 'The influence of employee rewards, human resource policies and job satisfaction on the retention of employees in Vodafone Ghana Limited'. *European Journal of Business and Management*, 5(12), 13-20.
- Lockwood N.R. (2007). 'Leveraging employee engagement for competitive advantage: HR's strategic role Society'. *Human Resource Management Quarterly* 1, 1-12.
- Macey, W.H., and Schneider. B. (2008). 'The meaning of employee engagement'. *Industrial and organizational psychology*, 1, 3-30.
- Manafa, O., McAuliffe, E., Maseko, F., Bowie, C., MacLachlan, M. and Normand, C. (2009). 'Retention of health workers in Malawi: perspectives of health workers and district management'. *Human Resources for Health* 7, 65.
- Martinez J, and Mangham, L. (2007). 'Addressing the Human Resource Crisis in Malawi's Health Sector: Employment preferences of public sector registered nurses'. ESAU Working Paper 18. Overseas Development Institute.
- McClelland, D.C. (1973). 'Testing for competence rather than for intelligence'. *American Psychologist*, 28, 1-14.
- Ministry of Health, Kenya (2016). *Kenya Reproductive, Maternal, Newborn, Child, and Adolescent Health (RMNCAH) Investment Framework*.
- Ministry of Health and Social Services (2015). 'Namibia incentives and retention study for remote, rural and hardship areas. Windhoek, Namibia'. Cited in Deussom, R., Titus, M., and Kazembe, L, 'Strengthening the supply chain management Workforce in Namibia: results of a rapid retention survey for pharmacists and pharmacist assistants'. USAID Capacity+.
- Morgeson, F.P., Campion, M.A., and Levashina, J. (2009) 'Why don't you just show me? Performance interviews for skill-based promotions'. *International Journal of Selection and Assessment*, 17, 203-218.
- Moy, G. (2018). 'The role of whistleblowers in protecting the safety and integrity of the food supply', *Science of Food*, 2, 8.
- NMSF (Sudan) (2015). *Code of Conduct and Business Ethics*, translated version.
- NMSF (Sudan) (2017). *Training Strategy 2017-2021. Human Resources for Supply Chain Management*.
- NCIHD (2014). *Training Needs Assessment of Central Medical Supplies Public Corporation. Republic of Sudan. Nuffield Centre for International Health and Development. Mission Report 2014*.
- Palmer, D. (2006). 'Tackling Malawi's human resources crisis'. *Reproductive Health Matters*, 14(27), 27-39.
- Paul, A.K., and Anantharaman, R.N. (2003). 'Impact of people management practices on organizational performance: analysis of a causal model'. *International Journal of Human Resource Management*, 14(7), 1246-1266.
- PtD (2018). *Building Human Resources for Supply Chain Management: Theory of Change*.
- Posthuma, R.A., and Campion, M.A (2008). 'Twenty best practices for just employee performance reviews'. *Compensation and Benefits Review*, 40, 47-55.
- PricewaterhouseCoopers (2018) 'Where organizational culture is headed'. <https://www.strategyand.pwc.com/gx/en/insights/2018/global-culture-survey.html> (Accessed May 2020).

- Schaufeli, W. B., Salanova, M., Gonzalez-Roma, V., and Bakker, A. B. (2002) 'The measurement of engagement and burnout: A two sample confirmatory factor analytic approach'. *Journal of Happiness Studies*, 3, 71–92.
- Scheil-Adlung, X. (2016). *Health Workforce: A Global Supply Chain Approach New Data on the Employment Effects of Health Economies in 185 Countries*. Geneva: International Labour Office.
- Schippmann, J.S. (2010). 'Competencies, job analysis, and the next generation of modelling'. In J. C. Scott and D. H. Reynolds (Eds.), *Handbook of Workplace Assessment: Evidence-Based Practices for Selecting and Developing Organizational Talent*. San Francisco, CA: Jossey-Bass, 197–231.
- Shumba, C. S., Kielmann, K. and Witter, S. (2017). 'Health workers' perceptions of private-not-for-profit health facilities' organizational culture and its influence on retention in Uganda'. *BMC Health Services Research*, 17, 809.
- Smith, K., Tillema, H. (2003). 'Clarifying different types of portfolio use'. *Assessment & Evaluation in Higher Education*, 28, 625–648.
- Spisak, C., and Morgan, L. (2014). 'Use of incentives in Health Supply Chains—A Review of Results-Based Financing in Mozambique's Central Medical Store'. Arlington, Va.: USAID | DELIVER PROJECT, Task Order 4, and Bethesda, Md: Health Finance & Governance Project.
- UN (2019) 'Secretary General's Bulletin: "Addressing discrimination, harassment, including sexual harassment, and abuse of authority"'.
<https://www.un.org/press/en/2019/sgsmbs1900001.doc.pdf>
- USAID Deliver (2013). *Recruiting Supply Chain Professionals: A Ready Reference Guide for Finding and Selecting High Performers*. Arlington, Va.: USAID | DELIVER PROJECT, Task Order 4.
- Vujicic M., Zurn P., Diallo K., Adams O., and Dal Poz M.R. (2004). 'The role of wages in the migration of health care professionals from developing countries'. *Human Resources for Health*, 2, 3.
- Wenger-Trayner, E. and Wegner-Trayner, B. (2015). 'Communities of practice: A brief introduction'. <https://wenger-trayner.com/introduction-to-communities-of-practice.html> (Accessed June 2020).
- WHO (2006). *World Health Report 2006: Working Together for Health*. Geneva: WHO.
- WHO (2017). *Primary Health Care Systems (PRIMASYS): Case Study from Rwanda*. Geneva: WHO.
- WHO (2011). *Monitoring the Building Blocks of Health Systems: A Handbook of Indicators and Their Measurement Strategies*. Geneva: WHO.
- Wright, P.M. and McMahan, G.C. (1992). 'Theoretical perspectives for strategic human resource management'. *Journal of Management*, 18, 295–320.
- Yadav, P. (2014). *KEMSA: A Case Study of the Ongoing Transition from an ungainly bureaucracy to a competitive and customer focused medical logistics organization*. World Bank.
- Zingheim, P.K., Schuster, J.R., and Dertien, M.G. (2009). 'Compensation, reward, and retention practices in fast-growth companies'. *World at Work Journal*, 18(2), 22–39.