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Pakistan Workshop Report :

Contraceptive Procurement, Quality Assurance,
Contracting, Monitoring and Evaluation

28-30 September, 2009

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USAID | DELIVER PROJECT, Task Order 1

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Background: National Health Policy 2009

In 2008, the process was initiated to prepare an updated national health policy. (The previous 2001 Health Policy had been formulated during a period of unelected government.) Consultations around successive drafts of the **National Health Policy 2009** have proceeded during the first half of this year. The policy draft is being shared with Provincial Chief Ministers, and Provincial Governments. Final Cabinet and National Assembly approval of the policy is anticipated soon.

Following the finalization and ratification of the National Health Policy 2009, the next step will be to prepare national, provincial and district “strategic frameworks” –spelling out the respective responsibilities and proposed actions on the part of each of the 3 tiers of government for policy implementation (and the prioritization of efforts and resources).

The USAID | DELIVER PROJECT interventions centre around on two key dimensions of “improving the performance of the health system” and – redressing weaknesses Supply Management Systems and to improve the availability of contraceptives in the public sector in Pakistan by working in partnership with the Ministry of Population Welfare (MOPW) and Ministry of Health (MOH) to achieve contraceptive security through a series of interventions in the key focus areas identified:

- Warehouse Operationalization
- Contraceptive Procurement
- Logistics Management Information System (LMIS) Strengthening
- Capacity Development/Training
- Additional Supporting Activities

Supply Chain Management

Amongst a range of Policy Objectives and Action linked to ensuring access to contraceptive and other health products, the National Health Policy 2009 includes the Policy Action “Efficient logistics management system to be developed to store and transport medicines (*and other essential supplies*) at the National, Provincial, District and Facility levels.”

This policy action stems from a number of persisting Supply Chain Management (SCM) weaknesses. Especially at the Central level and below, many stores are inappropriately designed, and lack the basic essential equipment and facilities. Alongside such ‘physical’ constraints, store and inventory management manuals, cards, and other basic materials are frequently missing. Standard operating procedures are not either practiced, or, even worse not recognized, as an integral part of an effective storage system. Most stores are not yet computerized – or only computerized for specific products.

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On November 19, 2008, after a request from the Ministry of Population and Welfare (MOPW) Secretary, a team comprising the Secretary and DG (Monitoring) from MOPW, representatives from the USAID mission and the USAID | DELIVER PROJECT, visited the Central Warehouse (CWH) in Karachi. The team toured the warehouse facility and observed warehouse operations. The team reviewed and discussed potential improvements needed in the CWH, and the MOPW asked for USAID’s support in providing technical assistance to carry out improvements.

Following the team’s visit, additional meetings were held with the CWH staff in Karachi, then with MOPW officials in Islamabad. While the team’s focus was on immediate improvements to the CWH, the activities discussed also covered what would be needed to support overall contraceptive security-ensuring the availability of, and access to, quality contraceptives for all Pakistanis. Based on these meetings/discussions and observations, key improvement areas were identified and activities outlined for USAID’s support.

Key Areas of Improvement

These challenges suggest the following areas for improvement:

1. Central Warehouse improvement
2. Contraceptive procurement
3. Logistics Management Information System (LMIS) strengthening
4. Local capacity building/training
5. Additional contraceptive security activities including a contraceptive security assessment, donor and NGO coordination, and forecasting

Of the above mentioned areas one of the **Key Interventions**” is the:

Contraceptive Procurement

These activities focus on assisting the MOPW in developing procurement capacity to enable the MOPW to begin procuring contraceptive supplies on their own.

Currently, all contraceptives for the MOPW that use GOP funds are procured once a year through UNFPA. The MOPW Secretary specifically mentioned that the ministry would like to procure its own commodities; they would like to receive technical assistance to develop the capacity to procure contraceptives. All contraceptives are currently procured from outside the country. However, it may be possible to procure in-country, as there are local suppliers for some methods that are currently supplying local Social Marketing programs.

After meeting with stakeholders including MOPW and MOH; readiness assessment has been conducted to outline the technical assistance needed. The MOPW and the USAID | DELIVER PROJECT consider a quality assurance component critical to ensure procurement of quality products and this will be included as an integral part of the procurement plan. The QA plan will include criteria for supplier prequalification as well as the pre and post inspection of the contraceptives in the bid reviewing process.

A “Procurement Workshop – Procurement, Contracting, Process Management, Monitoring and Evaluation” was conducted for procurement officers from MOPW, MOH, National LHW, MNCH and AIDS programs between 28-30 September. This team of procurement officers is trained in all elements of procurement as the MOPW begins to procure on a phased basis. Appropriate Job Aids and Manuals outlining the procurement process will be developed, providing tools for the core team to carry out their jobs. All future trainings will be based on these tools.

Brief Workshop Report:

Facilitators	Mr. Todd Dickens Mr. Iqbal Ahmad
Chief Guest	Ms. Janet Paz-Castillo, Health Office Chief, USAID Mr. Amant Rasul, D.G. Ministry of Population Welfare Mr. Hamid Khalil, Director MoPW
Participants	Mr. Muhammad Asghar, Dy Director (PME) Mr. Waqar Ahmad Sheikh Dy. Director SS&DP Mr. Muhammad Saleem, Dy. Director (Planning) Mr. Omer Farooq Rana, Section officer (Services) Mr. Tahir Kaleem, Research Supervisor (PM) Ms. Saima Rashid, Assistant Director (PM) Mr. Muhammad Naeem, Section Officer, MoH Mr. Aftab Ahmad Qazi, Section Officer, MoH Mr. Asif Malik, Assistant Director (C&L), Population Welfare Department Mr. Imdad Talpur, Dy. Secretary (W&D), Population Welfare Department Mr. Abdul Sattar Shawani, District Population Welfare Officer, Population Welfare Department Mr. Javed Akhtar, Assistant Director, (G)/DDO, Population Welfare Department Dr. Hamid Afridi, Dy. National Coordinator LHW Program Mr. Muhammad Tahir, Logistics Officer, LHW Program Dr. Muzaffar Jakharani, Deputy Program Manager, MNCH Mr. Muhammad Ghazi, Logistics officer, MNCH Mr. Mehmood-ul-Hasan, Research Associate, NACP Mr. Rahman Shah, Procurement Officer, NACP



Mr. Todd Dickens welcomed the distinguished guests and workshop participants and the workshop was opened with a recitation from the Holy Quran. Mr. Aamanat Rasul and Ms. Janet Paz-Castillo then shared their opening remarks for the workshop.

The Workshop was divided in eight sessions with an initial overview session followed by a pre-test.

The following topics were presented and discussed during three day workshop

Day-1 Sessions

1. Challenges In health commodity procurement

The first session provided an overview of the key challenges encountered in procuring health care commodities, such as proper quantification, specification development, and transparency in the procurement process. Through a group exercise the workshop participants identified some of the procurement challenges that they face which include:

- Lack of technical expertise
- Conflict between PPRA and World Bank
- Litigation
- Criteria for disqualifying bidder
- Political Interference

2. Common QA problems

Session two focused on common quality assurance problems found in contraceptive products and provided visual examples that the workshop participants discussed



3. QA through supply chain

This session looked at the different points in the supply chain where quality assurance problems can occur. Workshop participants engaged in a group exercise to identify actions that procurement personnel can take to address such problems.



4. Developing product specifications

In session four the importance of technical specifications in the procurement process was discussed and the considerations and processes necessary to develop sound technical specifications were reviewed.

Day-2 Sessions

1. Mapping supply process



This session focused on an exercise in which participants developed a map of the public sector procurement and supply process for medicines and contraceptives in Pakistan. The map that has been developed can serve as a tool to help participants identify activities in the procurement and supply process where they are currently experiencing problems or delays.

Day-3 Sessions

1. Contract Terms and Conditions

In this session the importance of suitable terms and conditions for contracting were discussed. A case study was presented to the participants that illustrated the problems that can occur in procurement when a contract does not have the necessary protection that is provided through clear specifications and comprehensive terms and conditions.



2. Procurement record keeping

This session briefly described the importance of keeping good records to document the transactions that occur during the procurement process. Following discussion, the participants agreed on following:

- The documents should be assembled to record the actions that take place and the decisions that are made. This becomes the historical record of the procurement.
- The documentation is also the legal record of the procurement and contains binding documents between contracting parties. This becomes important in the event procurement personnel need to defend their actions in a bid protest.

- When procurement documents are assembled in a sequential manner – it can read like a book and the reader can quickly understand why decisions were made.
- Good documentation has lasting value and can help a future reader recreate a good procurement process or learn from the mistakes of a bad procurement process.

3. Monitoring and Evaluation.

The following objectives were discussed;

- Understand what M&E is.
- Identify the common elements of M&E..
- Understand the reasons and benefits of performing M&E
- Understand how to define indicators.
- Understand how to collect data..

At the end of the final session, Dr. Muhammad Tariq - Country Director, USAID DELIVER PROJECT in his closing remarks thanked all the participants and USAID, MOPW, MOH and National MNCH, FP&PHC and HIV/AIDS programs. He emphasized notion of “no commodity no program” and said with these activities supply chain management should not remain an “afterthought” as it is integral component of health systems strengthening. He also said that USG assistance to GOP in the form of USAID | DELIVER PROJECT is committed to introduce the science of supply chain management for improving uptake of contraceptives at both public and private facilities towards improving the quality of the life and decreasing maternal and infant mortality rates. At the end, Dr. Tariq and Mr. Dickens distributed the certificates among the participants.



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