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

**Human Resources for Health Supply Chains:
A step by step approach for HR Capacity
Development in health SCM**

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Overview

Strong supply chains are essential for positive health outcomes and require a competent, recognized and supported supply chain workforce with significant technical and managerial capacity. This document presents a stepped approach to systematically assess HR for SCM in country contexts and provides supporting tools and guidance that may aid interventions.

This document is designed for use by managers and leaders responsible for the development of health supply chains in low and middle income environments.

Electronic copies of this document which contains active web links to suggested tools and guidance can be found at:

The **People that Deliver** website www.peoplethatdeliver.org



For more information on the content of this document please e-mail info@peoplethatdeliver.org

A step by step approach for HR capacity development in health SCM

Step 1: Assess your current approach and status of HR in health SCM

Human Resource Capacity Development in Health SCM: Assessment Guide and Tool:

USAID|DELIVER, 2013

This assessment methodology and planning tool assists health supply chain managers assess and improve the management and capacity development of their human resources by engaging local SCM stakeholders in five interrelated building blocks: 'engaged stakeholders', 'optimize policies and plans', 'workforce development', 'increase performance and workforce retention' and 'professionalize SCM'.

The tool identifies opportunities for improvement and aids in the development of an HR capacity development plan that compliments broader supply chain strengthening and health system strengthening efforts.

Step 2: Develop a competency map for all staff engaged in health SCM activities

The PtD Competency Compendium for Health Supply Chain Management: PtD, 2014

PtD Competency Compendium: Health Supply Chain Competency Mapping in Namibia, 2014

This competency compendium and further guidance from Namibia demonstrates how to create SCM competency frameworks for different cadres of supply chain workers. The compendium draws on 20 competency frameworks and related documents from a number of global organizations.

The PtD Health Supply Chain Competency Framework for Managers & Leaders, PtD, 2015

This globally validated framework has 6 domains; technical (i. Selection & quantification, ii Procurement, iii. Storage & Distribution, iv. Use), and managerial (v. Resource Management, vi. Professional & Personal), with 33 competency areas.

The framework defines the skills, competencies and associated behaviours that are required for effective supply chain management. It can be used to map existing competencies with desired competencies at all levels of the system and inform a capacity development plan to address the gaps. Defining what is needed for sustainable health SCM.

Step 3: Prepare a health supply chain strategic plan with a strong HR component

Process Guide and Toolkit for Health Supply Chain Systems Strengthening, UNICEF, 2015

(available shortly from the PtD website)

This toolkit brings together all the elements defined in steps 1 to 3 and other resources to support countries in developing an integrated strategic plan for health supply chains that contains a strong HR component.

Step 4: Assemble costed and funded operational plans that align with Step 1 & 3

These plans can use the wide range of existing tools and guidance noted in Annex 1 to prioritise the activities needed to improve weak HR building blocks

Country Guide: Applying for Health Supply Chain Management Development Funds, PtD, 2014

This guide is created to aid health supply chain managers in their application for funds for development, acknowledging that no direct funding stream for HR in SCM exists, but the systematic strengthening of HR for SCM forms part of a strategic & planned approach to systems strengthening.

This table summarizes problems that may be revealed by a HR for SCM systematic analysis, suggests actions that may be taken & identifies available tools and guidelines.

Appendix 2 documents the evidence supporting the need for an increased focus on HR in health SCM and Appendix 3 provides a more detailed explanation of the tools and guidance available to support advocacy for increased professionalization & systematic approaches to HR in health SCM.

		Problem	Action	Tool*
1	Engaged stakeholders	HR for SCM not a MOH priority	Develop an advocacy plan and engage with MoH leaders	A
		Don't have a SCM Stakeholder Group	Engage with other stakeholders and develop national health supply chain working groups	B, C
		Inadequate leadership of supply chain strategic planning and operations	Develop SCM leaders	C, D
2	Optimise policies & plans	Don't have recruiting policies and SOPs	Review HR policies, then create your own	E
		Don't have a SCM Strategic Plan	Create a strategic plan using results from HR for SCM assessment	Go to Step 1 page 3
		Don't have a HR workforce plan for SCM	Create a HR plan using workload evidence	G,H
		Don't have SCM SOPs	Access model SOPs	I
		Don't have a budget allocation for HR for SCM	Learn how to budget for HR and work with stakeholders to develop appropriate HR budgets	J
		Don't have an SC organizational structure that identifies a career path	Review other SCM organizational structures for ideas Map your organizational structure	AB, AC, AD, AE
3	Workforce development	Don't have defined competency frameworks for all cadres and levels	Apply the PtD competency compendium and tools to your situation	Go to Step 2 page 3
		Don't have job descriptions	Review sample SCM job descriptions Work with personnel to develop job descriptions	E,F
		Don't have adequate SCM education and training opportunities	Review available courses Develop SCM education and training plan with stakeholders	K,L,M,N,O,P, Q.R
4	Increase performance and staff	Missing performance management, policies, procedures and tools	Review performance management advice, example policies and procedures, then create your own	S,T,U.V.W,
		Don't have a retention strategy	Review guidelines to improve retention and reduce workforce migration	V,W,X,Y
		Don't have supportive supervision guidelines	Develop guidelines suitable to your context	X
5	Professionalise SCM	Your SCM personnel are not linked with a professional organization	Encourage professionalization in your system Inform personnel of possible organizations they can join	Z, AA
*Letters and numerals noted here refer to tools and guidelines explained in further detail in the 'Tool and Guideline Repository', Appendix 1.				

Appendix 1: HR for health SCM tool and guideline repository

1. Engaged stakeholders

- A. **Advocacy toolkit for professionalization & systematic approach to HR for HSCM**, PtD 2013
Government and health supply chain leaders need to be aware of the importance of health supply chains to improved health outcomes. PtD has put together this toolkit, which includes four tools to aid advocacy efforts: (1) a 2-page brief that outlines key messages, (2) a 2-page brief that describes People That Deliver, (3) an advocacy slide presentation that can be adapted for particular contexts, and (4) links to a variety of advocacy videos on the importance of health supply chains and the need to focus on human resources in health and (5) Making Smart Investments - Facilitator Guide and Slides.
- B. **Tips & Tools for Strengthening Contraceptive Security Committees**, K4Health, 2013
The Toolkit for Strengthening Contraceptive Security Committees provides tips and tools that countries can use to improve the effectiveness and sustainability of their contraceptive security (CS) committees.
- C. **Guidelines for Forming and Sustaining HR for Health Stakeholder Leadership Groups**, CapacityPlus, 2011
These stakeholder leadership group (SLG) guidelines are intended to provide a practical, clear, and user-friendly set of actions that human resources for health (HRH) leaders at the country level can take to successfully launch and sustain SLGs.
- D. **Leadership Management & Governance Project (LMG)**, MSH
This project is collaborating with health leaders, managers, and policy-makers at all levels to show that investments in leadership, management, and governance lead to stronger health systems.
- ### 2. Optimize policies & plans
- E. **Recruiting Supply Chain Professionals: A Guide for Finding & Selecting Performers**, USAID|DELIVER, 2013
This ready reference guide leads users through the steps required to hire the right supply chain professionals, in the right quantities, with the right skills, in the right place, at the right time, and for the right salaries. It also includes templates that will be helpful at each stage of the process.
- F. **Health supply chain job descriptions from the Dominican Republic** (will be available from PtD Website shortly) CapacityPlus, 2014
Working with MoH CapacityPlus developed a set of health logistics and supply chain job descriptions for all staff involved in the health supply chain. This example can be modified for wider application.
- G. **Workload Indicators of Staffing Need (WISN)**, WHO, 2010
The WISN method is based on a health worker's workload and determines how many health workers of a particular type are required to cope with the workload of a given facility and assesses the workload pressure of the health workers in that facility.
- H. **HR for Health: Models for projecting workforce supply and Requirements**, WHO, 2001
WHO suggested projection models to facilitate the long-range planning of health personnel. This document describes Version 3.0 of these models and provides instructions in their use.
- I. **Procurement and Supply Management (PSM) Toolbox**, WHO, 2007
This platform is a database that lists available PSM tools and is presented in the form of a search engine to find and select PSM tools that are needed for a particular PSM technical area of interest.
- J. **Resource Requirement Tool (RRT) Guidelines**, WHO, 2008
RRT is a Excel-based tool to apply to: (i) estimate the resources required for meeting their HRH plans; (ii) analyze the plans' affordability; (iii) simulate "what if" scenarios; (v) contribute to the development of the cost and financing component of Human Resource Management Information Systems.

3. Workforce development

K. **LAPTOP (Learning and Professional Training Opportunities for Public Sector Health Commodity Managers)** RHSC

LAPTOP serves as an information clearinghouse on professional development opportunities for health commodity managers in developing countries. The database includes courses that focus on the development of practical skills that have the potential to result in more professional management of public sector supply chains and therefore in improved product availability in country. These include classroom-based courses and workshops, self-directed distance learning programs, and degree programs.

L. **Initiating In-Country Pre-Service Training in Supply Chain Management for Health Commodities: Process Guide and Sample Curriculum Outline**, USAID|DELIVER, 2010

This process guide and sample curriculum outline offers programs, governments, and projects interested in implementing PST for supply chain management of health commodities a general understanding of the process, stages, steps, and activities required for initiating a successful PST training program.

M. **Scaling Up Health Workforce Education: Guide for Bottlenecks & Best Buys Approach**, CapacityPlus, 2015

This CapacityPlus tool is designed to help educational institutions identify obstacles to increasing the production of competent & qualified graduates that can be overcome through strategic investments.

N. **Transformation & scale up of Health Professionals' Education & Training**: WHO, 2013

These guidelines are part of the WHO program on the Rapid Scaling Up of the Health Workforce.

O. **A Global Framework for Quality Assurance of Pharmacy Education**: FIP, 2008

This document provides a framework for developing and assuring ongoing quality education at the academic level. Pharmacy is used as an example, while the principles can be applied to all academic education.

P. **A Global Improvement Framework for Health Worker In-service Training: Guidance for Improved Effectiveness, Efficiency and Sustainability**, USAID ASSIST PROJECT, 2013

This short report describes the improvement framework for in-service training programs that was developed by the USAID Health Care Improvement Project in collaboration with key stakeholders. The report describes the final set of 40 in-service training improvement recommendations developed through a consensus process with representatives of key stakeholder groups.

Q. **eLearning for undergraduate health professional education - a review**, WHO, 2015

This review provides evidence to inform and guide health professional education as an important vehicle in preparing health professionals to be 'fit-for-purpose'.

R. **Supply Chain Performance Improvement Program at the Central Medical Store in Namibia**, SCMS, 2015

This report documents a modular, adaptable three phase approach (Initiation, On-site training, Post-Review), to build capacity in Central Medical Store (CMS) staff in ISO-accredited warehousing best practices in Namibia.

4. Increase performance and staff retention

S.Options Guide: Performance-Based Incentives (PBI) to Strengthen Health Supply Chains (Version 1), USAID|DELIVER, 2012

This guide is intended to facilitate the development of successful PBI initiatives to strengthen supply system performance in low- and middle-income countries.

T.Commercial Sector Performance-Based Financing Offers Lessons for Public Health Supply Chains in Developing Countries, USAID|DELIVER, 2013

This brief explores ways that health supply chain managers can adapt commercial sector performance incentives to improve supply chain performance.

U.Performance-Based Incentives for Public Health Supply Chains: Training Toolkit, USAID|DELIVER, 2013

This training toolkit introduces the basics of performance-based incentive (PBI) schemes for the public health supply chain. It includes everything trainers need to conduct a training workshop, from a training PowerPoint and facilitator notes to a sample agenda and PBI flash cards.

V.Performance Management Toolkit, USAID | DELIVER PROJECT, 2015

This kit provides step-by-step guidance and resources for health supply chain workers with performance management responsibilities. The toolkit gives you practical advice and ready-to-use tools, including templates for writing job descriptions, tips for goal setting, guidance on supportive supervision, and sample forms for employee evaluation.

W.Increasing access to health workers in remote & rural areas through improved retention:

WHO, 2010

WHO proposes sixteen evidence-based recommendations on how to improve the recruitment and retention of health workers in underserved areas. It also offers a guide for policy makers to choose the most appropriate interventions, and to implement, monitor and evaluate their impact over time.

X.Application of Discrete Choice Experiments to Identify Health Workers' Employment Preferences: WHO, 2012

The Discrete Choice Experiment (DCE) methodology described in this user guide is a quantitative research method that can measure the strength of preference and trade-offs of the health workers toward different job characteristics that can influence their decision to take up rural postings.

Y.Supportive Supervision of Supply Chain Personnel (Video), USAID|DELIVER, 2014

This short animated video provides examples of supportive supervision best practices, and suggests specific steps on how to conduct a successful supportive supervision visit for facility-level supply chain staff. The video provides practical advice and tips for management level staff on how to be an effective, supportive supervisor for supply chain activities.

5. Professionalize SCM

Z.Professionalization of Under-Recognized Health Worker Cadres: CapacityPlus, 2014

This brief provides an overview of the Life Cycle Approach, which has been developed to systematically address all the crucial steps in the professionalization of under-recognized health worker cadres.

AA. Engage with health SCM professional organizations

[APICS](#) (American Production and Inventory Control Society), [CSCMP](#) (Council of Supply Chain Management Professionals), [CIPS](#) (Chartered Institute of Procurement and Supply), [CILT](#) (Chartered Institute of Logistics and Transport), [IAPHL](#) (International Association of Public Health Logisticians), [RESOLOG](#) (Francophone health supply chain professional society), [Technet 21](#) (Technical network for strengthening immunization services).

5. Global Toolkits and case studies

AB. **PtD HR for SCM organization case studies**, LMI, 2015

These case studies document HR for SCM approaches within organizations. Imperial Health Sciences and the Government of Sudan are featured.

AC. **HR for SCM: Perspectives from Supply Chain Leaders**, Gavi Alliance People and Practices Working Group, 2015

These case studies highlight the experience of a range of supply chain managers, providing insights into HR approaches of private companies and noting key points that may be applied to country contexts.

AD. **PtD Namibia Synthesis report PtD Namibia**, PtD 2015

Results and Recommendations from the collaboration of the "People that Deliver" Initiative, the Ministry of Health and Social Services, SCMS and CapacityPlus, 2015.

AE. **Immunization Supply Chain Managers HR toolkit**

Gavi Alliance People and Practices Working Group, 2015 (*available shortly from the PtD website*)

This kit provides a grouping of the HR tools and approaches put together by the Gavi Alliance People and Practices Working Group.

AF. **The Family Planning Logistics Toolkit**, K4Health, 2014

This toolkit shares evidence-based guidance & tools for strengthening & managing family planning logistics systems.

AG. **Promising Practices in Supply Chain Management - Series of Briefs**: UN Commission, 2014

These briefs provide ministries of health and partners with guidance on ways in which countries have addressed supply chain barriers & challenges including HR.

Appendix 2: Evidence supporting the need for an increased focus on HR in health SCM

Literature Review, PtD, 2011, EN, FR

This paper presents the results of a review of published literature related to workforce excellence in supply chain management in developing countries.

Situation Analysis, PtD, 2011, EN, FR, SP

2011 This paper examines the current situation for healthcare supply chains in low- and/or middle-income countries (LMICs), how the public and private healthcare supply chains in these countries are organized, and how they perform using some key availability and affordability indicators.

Landscape Analysis on Future Immunization Supply & Logistics Systems, Project Optimize, 2011,

The analysis allows better understanding of the work underway by all global stakeholders in this area.

Applying the HRH Action Framework to Develop Sustainable Excellence in the Health Supply Chain Workforce, CapacityPlus, 2013

This technical brief creates a bridge between the SCM and HRH communities by describing how the HRH Action Framework can be applied to strengthen the health supply chain workforce, drawing on lessons learned and successes from applications in the wider health sector.

Gavi Alliance Supply Chain Strategy Evidence Review, 2014

This review led by the Gavi Alliance People and Practices Working Group supports the proposed hypotheses on HR in SCM, and the recommended interventions for countries looking to strengthen HR.

PtD submission to GHWA Global Strategy on Human Resources for Health, PtD, 2014

This submission assembles the currently available evidence supporting the need to focus on the human resources in health logistics and supply chain.

Cadres that were not considered in the first round of strategy papers.

The 7 Habits of a effective Health Supply Chain Professional, Pamela Steele, 2014

Pamela Steele, invited members of the International Association for Public Health Logisticians (IAPHL) to participate in an online discussion on '*the habits of a highly effective health supply chain practitioner*' Specific contributions made by the IAPHL members are summarized [here](#).

IAPHL – PtD Discussion on HR in SCM, PtD, 2015

This report summarizes the discussion around three HR for SCM themes: i. HR as a barrier to effective health supply chains ii. Taking a systematic approach to human resources for supply chain management iii. Pre service education and continual professional development.

A Realist Review: HR Development in SCM of Health Commodities PtD, 2015

These review presents a systematic analysis of what publicly available UN literature articulates concerning issues regarding human resources in health supply chains.

IAPHL – Gavi Discussion on HR in SCM, 2015

Gavi, The Vaccine Alliance, in coordination with the People and Practices Priority Working Group of the Gavi Alliance Immunization Supply Chain Strategy, asked IAPHL members to participate in a discussion about human resources (HR) in supply chain management (SCM). The aim of this discussion was to better understand the academic profiles, career paths and job descriptions of supply chain managers.

Appendix 3: Tools to support advocacy for increased professionalization & systematic approaches to HR in health SCM

These tools equip and guide SCM leaders and managers to engage in advocacy efforts with government leaders and decision makers.

United Nations Children's Fund. 2010. Advocacy Toolkit: A Guide to Influencing Decisions that Improve Children's Lives. UNICEF, 2010

The toolkit draws from UNICEF's long standing experience, systematizing and coordinating both internal and external advocacy expertise, as well developing a few innovative approaches. The Toolkit provides a set of practical tools to help UNICEF staff and partners in the development and management of their advocacy work.

WHY HR in health SCM are important & HOW can they be strengthened?, PtD, 2014, *SP*

A two-page brief that outlines the key messages describing the importance of HR for SCM and how country based change can take place.

WHO is PtD and how does it operate?, PtD, 2014, *SP*

A two-page brief that describes who PtD is, its focus and activity.

HR for SCM advocacy slide presentation, PtD, 2014

A PowerPoint slide set that you can use to develop your own presentations advocating for country based change.

Advocacy videos, PtD, 2014

These videos support the importance of health supply chains, how medicine availability improves health outcomes, & the need for human resources.

Workshop Material Making Smart Investments - Facilitator Guide and Slides, PtD, 2014

This guide with resources, provides a customizable approach to orienting small-to-medium sized groups on the role and impact of HR in health SCM.

2nd PtD Global Conference on HR for SCM, October 2014

The outputs of the conference form the detailed record of the progress PtD has made to date:

- [Conference Statement and Commitment to Action](#),
- [Conference Proceedings](#) published in the Journal for Pharmaceutical Policy & Practice,
- [Conference Summary](#) document, and
- Video recorded conference presentations ([Day 1](#), [Day 2](#)).