

# PEOPLE that DELIVER

## **Submission:**

### **Public consultation to inform the Global Strategy on Human Resources for Health**

#### **# 8: Building on human capability beyond the health sector**

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Contents

Executive Summary.....3

Overview of the People that Deliver (PtD) Initiative .....6

The need to focus on HR in Health Supply Chain Management .....7

Evidence: Surveys, Assessments, Studies and Papers .....8

Key Technical documents.....10

Recommendations for Next steps.....13

## Executive Summary

The People that Deliver Initiative welcomes the opportunity to provide feedback on Paper 8 of 'Global Strategy on Human Resources for Health', '**Building on human capability beyond the health sector**'.

**We agree that ...***'There needs to be a paradigm shift on how services are configured to maximise healthy lives by focusing on people centeredness and integration of services. To achieve UHC and other development goals, human resources beyond the health sector will need to be engaged and empowered to better manage and reduce health risks, share responsibility for the management and delivery of services, increase community and individual self-reliance which will consequently lead to more appropriate demand for services.'* #8

**We are concerned that** in considering '**Engaging the role of the non-public health professions in health improvement**' that there is NO mention of the '**unrecognized cadres**' or '**supporting cadres**' that are essential for providing health commodities and support services to clinical cadres. These cadres include: **Health logistics and supply chain professionals, laboratory, pathology and biomechanical technicians.**

This submission provides the currently available evidence in support of a focus on health logistics and supply chain professionals within the 'Global Strategy on Human Resources for Health', as collated by the People that Deliver Global Initiative.

With up to a third of the world's population with limited access to essential medicines, it is clear that by 2015 many countries will not be able to achieve their health related Millennium Development Goals (MDGs) [1]. Of the eight MDGs, four explicitly discusses the availability of medicines at the primary care or service delivery point level [2]. It is pertinent because without access to and appropriate use of quality medicines, health systems would lose their ability to meet healthcare needs.

Though affordability of medicines and high prices are frequently highlighted as challenges to access to essential medicines, the weakness of health supply chains has remained a consistent barrier across a range of low and middle income countries [3,4,5]. Despite major investment over the past decades, national supply chains are often unable to respond effectively to existing demands, putting health outcomes at risk. Since the first Global Forum on Human Resources for Health in Kampala in 2008[6], the human resource focus has been on the doctors, nurses, midwives and community health workers. However, there is little focus on human resources to improve and sustain health supply chains.

Launched in 2011, the PtD Initiative is a global partnership of over 80 organizations who have the joint vision of a world where an agenda for national health supply chain workforce is developed and implemented at international and country levels. ([www.peoplethatdeliver.org](http://www.peoplethatdeliver.org)).

Human resources are a key performance driver within public health supply chains. The effective management of a supply chain demands excellence in managing its human resources, an area particularly overlooked in resource poor environments. By proactively managing plans, policies and procedures associated with people, an organisation can improve supply chain performance. Such a systematic approach requires the need to plan, finance, develop, support, and retain the national workforces needed for the effective, efficient, and sustainable management of health supply chains [7,8,9].

This submission:

- 1. Provides an overview of The People That Deliver Initiative as a global partnership, concerned about the underinvestment in human resources in health supply chains.**
- 2. Presents evidence in the form of Surveys, Assessments, Studies and Papers, commissioned by PtD and its members which highlights the need to focus on human resources in health supply chains.**
- 3. Documents the current promising practices, tools and approaches being used by PtD and its partners, in countries, to improve human resources in health supply chains, and**
- 4. Outlines a collective summary of concerns, activity and proposed next steps made by 160 participants from 20 countries who attended the 2<sup>nd</sup> PtD Global Conference on Human Resources for Supply Chain Management, October 2014.**

As the post 2015 development agenda moves its focus toward health equity, the world's increasing population and expanding middle class will place even greater demands on health services. These increasing demands will put further strain on the health supply chains needed to provide these services. In resource constrained environments, the challenge will be to provide a business case to governments, convincing them of the need to invest in health supply chains. The international development agenda will require organisations involved in health supply chains to come together in a more coordinated fashion, working with governments to enact local, sustainable change. The People that Deliver Initiative will continue to provide a platform to ensure that HR for SCM remains on the international agenda and looks forward to being a part of the developing 'Global Strategy on Human Resources for Health'.

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**On behalf of The People that Deliver Initiative**

## References:

1. WHO, The World Medicines Situation 2011 Medicines Prices, Availability and Affordability  
[http://www.who.int/medicines/areas/policy/world\\_medicines\\_situation/WMS\\_ch6\\_wPricing\\_v6.pdf](http://www.who.int/medicines/areas/policy/world_medicines_situation/WMS_ch6_wPricing_v6.pdf) [accessed 21st July 2014]
2. UN. The Millenium Development Goals Report 2012. 2012  
<http://www.un.org/en/development/desa/publications/mdg-report-2012.html> [accessed 21st July 2014]
3. United-Nations:Every-Woman-Every-Child, UN Commission on Life-Saving Commodities for Women and Children: Commissioners' Report September 2012, 2012.  
[http://everywomaneverychild.org/images/UN\\_Commission\\_Report\\_September\\_2012\\_Final.pdf](http://everywomaneverychild.org/images/UN_Commission_Report_September_2012_Final.pdf)
4. Matowe, L., et al., A strategy to improve skills in pharmaceutical supply management in East Africa: the regional technical resource collaboration for pharmaceutical management Human Resources for Health, 2008. 6(30): p. doi:10.1186/1478-4491-6-30.
5. Dowling, Paul. 2011. Healthcare Supply Chains in Developing Countries: Situational Analysis. Arlington, Va.: USAID | DELIVER PROJECT, Task Order 4.  
<http://peoplethatdeliver.org/sites/peoplethatdeliver.org/files/dominique/files/Healthcare%20Supply%20Chains%20-%20Situation%20Analysis%20EN.pdf>
6. First Global Forum on Human Resources for Health, 2-8<sup>th</sup> March 2008 Kampala Uganda.  
<http://www.who.int/workforcealliance/forum/2008/en/>
7. Soucat, A. Scheffler, R. Ghebreyesus, T. The Labor Market for Health Workers in Africa: A new Look at the Crisis. Washington DC: World Bank
8. USAID DELIVER PROJECT, Task Order 4. 2013. Human Resource Capacity Development in Public Health Supply Chain Management: Assessment Guide and Tool. Arlington, Va.  
[http://deliver.jsi.com/dlvr\\_content/resources/allpubs/guidelines/HumaResoCapaDeveAsseGuid.pdf](http://deliver.jsi.com/dlvr_content/resources/allpubs/guidelines/HumaResoCapaDeveAsseGuid.pdf) [accessed July 2014]
9. Capacity Plus Technical Brief 12, 2013 Applying the HRH Action Framework to Develop Sustainable Excellence in the Health Supply Chain Workforce  
<http://www.capacityplus.org/files/resources/applying-hrh-action-framework-develop-sustainable-excellence-health-supply-chain-workforce.pdf> [accessed July 2014]

## Overview of the People that Deliver (PtD) Initiative

### PtDs Purpose

The PtD Initiative is a global partnership of more than 80 organizations with a strong interest in human resources (HR) for health supply chain management. PtD seeks to provide a coordinated, multi-organizational approach to addressing human resources for supply chain management (SCM) in the global health area. The PtD Initiative was launched in June 2011.

<http://www.peoplethatdeliver.org/content/vision-mission>

### PtD Mission

The PtD mission is to build global and national capacity to implement evidence-based approaches to plan, finance, develop, support and retain the national workforces needed for the effective, efficient and sustainable management of health supply chains.

### How PtD Works

**The Board:** PtD is governed by a Board with representation from a variety of sectors including governments, donors and aid agencies (e.g. USAID, Global Fund, UNICEF, UNFPA), NGOs, academic institutions, professional associations and private sector organizations. The Board has a two-year tenure, and is led by a Chairman elected from the Board's membership.

<http://www.peoplethatdeliver.org/content/initiative-board>

**The Secretariat:** Consists of an Executive Manager and modest administrative function, is jointly supported by UNICEF, USAID and UNFPA. The Secretariat takes direction from the Chairman and is responsible for day-to-day operations implementing the vision and priorities set by the Board. The Secretariat is housed at UNICEF Supply Division in Copenhagen.

**Working Groups:** Three working groups, guided by an agreed strategic and operational plan, are the main vehicles through which Initiative members collaborate to realise the Initiative's strategic goals. There are three working groups (*Advocacy & Knowledge Management, Research, and Technical*), that serve as the implementation and technical arms of the Initiative.

<http://www.peoplethatdeliver.org/working-groups>

### PtD's Strategic Goals

- I. Advocate for global recognition that strong supply chains are essential for positive health outcomes and require a competent, recognised and supported supply chain workforce with significant technical and managerial capacity.
- II. Government and national health institutions to demand, recruit and retain appropriately qualified personnel for positions with supply chain responsibilities.
- III. Adequate personnel from relevant cadres with appropriate supply chain competencies and qualifications are available within national systems.
- IV. Establish a repository of evidence-based resources for HR for SCM that is accessible, disseminated and used by countries.

### Planning documents

PtD has an active Strategic Plan and Operational Plan

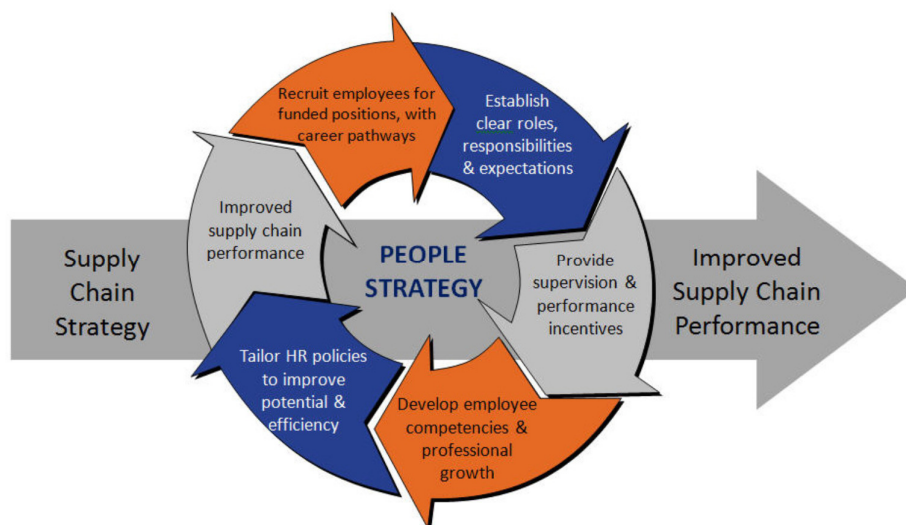
<http://www.peoplethatdeliver.org/content/vision-mission>

## The need to focus on HR in Health Supply Chain Management

Effective and efficient supply chains are vital in ensuring communities receive the medicines, vaccines and health supplies they need. However, the health supply chain is often the weakest link in achieving global health-related goals such as improving maternal health, reducing child mortality, and combatting diseases. It is estimated that up to one-third of the world's population has limited access to essential medicines.

Health supply chains are complex. They can be government or privately run or a combination of the two. The supply chain can extend from the national/ central level through to a regional or district level, then on to the community level right to the point of delivery.

In-country, supply chains may manage a large number of commodities (e.g. traditional government run health supply chains), others may be commodity or programme specific (e.g. immunization, reproductive health etc.). All health supply chains need competent and qualified personnel. This requires a dedicated workforce with training and experience in medicine selection and use of health commodities, quality assurance, procurement, storage and distribution, as well as a focus on the development of in-country infrastructure to support these activities. A government or organization that proactively plans, implements policies and procedures associated with HR, can improve overall supply chain performance.



### HR Building Blocks for Supply Chain Management

PtD supports governments and organizations to improve supply chain performance by advocating for country-based interventions to strengthen the following five building blocks that underpin effective HR management in public health supply chains:

- Building Block 1: Engaged stakeholders
- Building Block 2: Optimise policies and plans
- Building Block 3: Workforce development
- Building Block 4: Increase performance
- Building Block 5: Professionalisation of SCM

## Evidence: Surveys, Assessments, Studies and Papers

Each of the following paragraphs outlines the content of a specific document or paper, providing evidence supporting the need for an increased focus in HR for SCM. Collectively this information forms the body of knowledge collected by The People that Deliver Initiative since its inception in 2011. By clicking on each heading you will be taken to the full document. Further evidence is due for publication in the coming months including: a Realist review of UN agency websites on the topic of HR for SCM, and a report documenting an online discussion of HR for SCM involving 100 posts from 24 countries.

### Surveys

**[Burkina Faso Country Survey EN, FR, 2011](#)**

**[Senegal Country Survey EN, FR, 2011](#)**

**[West African Region Survey EN, FR, 2012](#)**

These three surveys are part of a series of country surveys conducted in the context of the People that Deliver Initiative and presents the HR for SCM needs for Burkina Faso, Senegal and the West African Region.

**[East African Community, HR for Supply Chain Management Review, 2014](#)**

The purpose of this survey was to review the situation regarding HR in supply chain management within the EAC, as a baseline, supporting the need to invest in HR for SCM. (Report available on request).

**[Global Survey EN, FR, 2011](#)**

As part of the effort to better understand the issues, constraints, and opportunities related to workforce excellence in public health supply chain management, the People that Deliver Initiative conducted an online survey of public health logisticians working in the developing world.

**[Country Assessment EN, FR, SP, 2011](#)**

This paper discusses some of the key points looking across the country assessments; however, the primary use for the country assessments was to inform each country's own strategic planning around human resources capacity for supply chain management.

### Studies

**[Literature Review EN, FR, 2012](#)**

This paper presents the results of a review of published literature related to workforce excellence in supply chain management in developing countries. It was conducted through desk review and online search.

**[Situation Analysis 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 indicators.

**[Landscape Analysis on Future Immunization Supply and Logistics Systems EN, 2012](#)**

The landscape analysis of immunization information system efficiency was conducted to better understand the work underway by all global stakeholders regarding HR in immunization supply chains.



### **GAVI Supply Chain Strategy Evidence Review, 2014**

The purpose of the review is to identify and document evidence to support the hypotheses proposed by the People and Practice Working Group, and the recommended interventions with a focus on HR for SCM.

### **Academic Papers**

#### **Professionalizing Health Logistics in Burkina Faso: challenges, implementation and sustainability, 2013**

A study lead by Dr. Arsène Ouedraogo, General Directorate for Pharmacy, Drugs and Laboratories Ministry of Health, Burkina Faso and Benoît Silve, general director of the Bioforce Institute. The article presents an analysis of the health supply chain, appropriateness of a transversal approach to Human Resources for SCM, and next steps regarding country implementation.

**The 2nd People that Deliver Global Conference on HR for SCM Oct 2014, (Proceedings due for publication 17<sup>th</sup> December 2014, Journal of Pharmaceutical Policy and Practice)** This peer reviewed publication presents 40 abstracts documenting current research in the area of HR for SCM, both evidence of need and specific activities addressing this need.

## Key Technical documents

Each of the following paragraphs outlines the content of a specific document or tool to aid countries improving HR for SCM in their context. The focus of PtD includes a focus on systematic approaches to HR, aiming to improve the professionalism and sustainability of HR in SCM, in specific country contexts. These documents and tools represents a repository of tools and approaches developed by PtD since 2011.

By clicking on each heading you will be taken to the full document.

### Technical toolkits

#### **The Family Planning Logistics Toolkit**

This Toolkit shares evidence-based guidance and tools for strengthening and managing family planning logistics systems. Resources selected for inclusion in this Toolkit were published by organizations working throughout the world to improve access to family planning by strengthening contraceptive security.

#### **Promising Practices in Supply Chain Management - Series of Briefs**

The promising practices in these briefs provide ministries of health and their partners with specific guidance on ways in which other EWEC countries have addressed specific supply chain barriers and challenges. Although the focus of this series is on improving access to the 13 life-saving commodities identified by the Commission, the Supply and Awareness TRT has adopted a holistic approach to in-country supply chain strengthening.

### Technical Tools

#### **Country Guide: Applying for Public Health Supply Chain Management Development Funds**

This guide is created to aid health supply chain managers in their application for funds for development. It should be acknowledged that no direct funding stream for human resources in supply chain management (SCM) exists, but the systematic strengthening of human resources for SCM forms part of a strategic and planned approach to health systems strengthening (HSS).

#### **The PtD Competency Compendium for Health Supply Chain Management**

##### **PtD Competency Compendium: Public Health Supply Chain Competency Mapping in Namibia**

In collaboration with PtD member organizations and led by the University of Canberra, the PtD Technical Working Group has compiled this competency compendium and further guidance on how to create supply chain management (SCM) competency frameworks for different cadres of supply chain workers. The compendium draws on 20 competency frameworks and related documents from a number of organizations globally.

#### **Supportive Supervision of Supply Chain Personnel (Video)**

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.

### **Applying the HRH Action Framework to Develop Sustainable Excellence in the Health Supply Chain Workforce**

The objective of this technical brief is to create 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 health sector.

### **Commercial Sector Performance-Based Financing Offers Lessons for Public Health Supply Chains in Developing Countries**

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

### **Human Resource Capacity Development in Public Health Supply Chain Management: Assessment Guide and Tool -**

The USAID | DELIVER PROJECT and People that Deliver have developed a toolkit to help public health supply chain managers in developing countries assess and improve the management of their human resources.

### **Performance-Based Incentives for Public Health Supply Chains: Training Toolkit**

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.

### **Recruiting Supply Chain Professionals: A Ready Reference Guide for Finding and Selecting High Performers**

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.

### **Options Guide: Performance-Based Incentives to Strengthen Public Health Supply Chains (Version 1)**

This guide is intended to facilitate the task of developing successful PBI initiatives to strengthen supply system performance so that such systems can contribute to improved health outcomes in low- and middle-income countries.

### **Professionalization of Under-Recognized Health Worker Cadres**

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

### **Engaging Service Delivery Providers in Contraceptive Security**

This paper highlights the importance of service providers in contraceptive security and identifies recommended entry points at various levels of the health system to strengthen the role of service providers in contraceptive security.

### **Initiating In-Country Pre-Service Training in Supply Chain Management for Health Commodities: Process Guide and Sample Curriculum Outline**

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.

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### **Advocacy Toolkit: Advocacy for professionalization and a systematic approach to HR for health SCM**

Government decision makers and health supply chain leaders need to be aware of the importance of health supply chains to improved health outcomes. People That Deliver 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.

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### **LAPTOP (Learning and Professional Training Opportunities for Public Sector Health Commodity Managers)**

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.

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## Recommendations for Next steps

The 2nd PtD Global Conference on Human Resources for Supply Chain Management was held in **Copenhagen, Denmark – 29-30 October 2014** with 160 participants from 20 countries representing the following constituencies: country governments, international agencies, academic institutions, implementing partners, non-governmental organizations, private companies.

The following ‘Conference Statement of Commitment to Action’ was agreed by all participants at the conference and represents the current concerns, activity and proposed next steps to improve HR in SCM by the global health supply chain community.

**We, the participants of the second Global Conference of the *People that Deliver* Initiative, held in Copenhagen on October 29<sup>th</sup> and 30<sup>th</sup>, 2014:**

- **Having reviewed and discussed the current status, strengths, weaknesses, challenges and opportunities facing the supply chain workforce in the health systems of lower and middle-income countries.**
- **Having been actively engaged in innovative actions to improve the supply chain workforce since the first Global Conference of the *People that Deliver* Initiative, held in Geneva Switzerland on June 28<sup>th</sup> and 29<sup>th</sup>, 2011 at WHO Headquarters.**
- **Having notably achieved:**
  - the inclusion of systematic human resources for health supply chain components into the Interagency Supply Chain Working Group Position Paper, GAVI Immunisation Supply Chain Strategy, and UN Commission on Life-Saving Commodities for Women and Children briefs on Promising Practices in Supply Chain Management;
  - a suitable approach for assessment and planning regarding human resources in health supply chains, which has been implemented in more than 15 countries;
  - the publication of various technical and advocacy tools and resources for global and country-based application;
  - an increase in the availability of health supply chain and pre-service education; and
  - increased use of learning and professional training opportunities.
- **Are concerned that:**
  - health supply chains are limited in their ability to meet existing and future demands, jeopardising the health of individuals and the health goals of countries, as revealed by the recent Ebola outbreaks;
  - the burden on health supply chains has increased significantly and will continue to increase due to increasing volumes of supplies, the introduction of new health products, changing disease profiles, and efforts to achieve Universal Access to Health; and

- country governments and partners have not made sufficient investments to achieve a sustained, competent health supply chain workforce.

➤ **Are strengthened by:**

- the new dynamics stemming from improved international, regional and national cooperation between country governments and partners, agreeing to work together under the *People that Deliver* Initiative, to support countries in reinforcing human resources for supply chain management, in line with their organizational responsibilities and available resources;
- the development of the global Interagency Supply Chain Working Group, where international donors are coming together to improve the coordination of country-based activities directed at health supply chains; and
- the increasing dialogue among health supply chain professionals and logisticians through international platforms and through country-based activities and networks.

➤ **Highlight that:**

- well-performing supply chains are essential for ensuring access to health supplies and meeting the goal of universal health coverage;
- governments need to make appropriate policy changes to support the institutionalization of competent supply chain managers as a key component of human resources for health;
- specific country-based action should be the main emphasis of the next phase of the *People that Deliver* Initiative with all donors, implementing partners and country governments considering systemic and competency-based approaches to human resources in health supply chain activities;
- the professional development of the supply chain workforce must lead to sustainable and country-led systems;
- these approaches must be appropriately funded by national governments, other national sources, and development partners; and
- the health supply chain workforce must be managed within local contexts, with the following common principles:
  - engaged stakeholders and supply chain leaders need to be evident in both policy and technical areas related to national health supply chains,
  - policies and plans need to be in place to support planning of workforce needs and sustainable approaches to workforce development,
  - needs based approaches should be considered for workforce development, addressing pre-service and continuing professional development,
  - worker performance must be monitored and continuously improved, and
  - professionalization of supply chain cadres is required to meet the end-to-end demands of the health system and the needs of patients.

➤ **Pledge to** support the achievement of the shared aim of the *People that Deliver* Initiative, which is:

*for countries to improve health outcomes by developing sustainable excellence in the health workforce for managing supply chains and for overcoming existing and emerging health supply challenges.*

To achieve this aim, **we the participants at the *People that Deliver* Conference commit to take the following steps**, as appropriate given the respective mandates, capacities and resources of our individual institutions:

**Participate** in global and/or national collaborative efforts that seek to coordinate and align partners in working towards sustainable excellence in the health workforce for managing supply chains;

**Raise** the awareness of national governments, especially among high-level policy-makers, that supply chain management is a key strategic function of health systems, essential for meeting health goals, and that developing a strong and sustainable supply chain workforce should be a national priority, a global concern, and a shared responsibility;

**Build** greater recognition that supply chain management in health systems is highly complex and must satisfy specific regulations and requirements for health supplies, necessitating strong technical and managerial capacity for supply chain management within the health sector;

**Improve** the availability of, demand for, and retention of highly competent health supply chain workers, who ably respond to supply needs at all levels of the health system;

**Leverage** opportunities offered by human resource policies, systems and efforts at the national, regional and global levels to further this cause;

**Urge** greater involvement and interaction from countries in the Americas, Asia and Africa to share lessons and learn from other countries experiences;

**Encourage** the development of new best practices, guidelines, tools, models, evaluations and other resources that are relevant to all levels of the health system and adaptable to different country contexts, and which are based on existing evidence, previous work and agreement amongst Initiative partners;

**Disseminate** global resources, new knowledge and technical input to partners, countries and actors at all levels of the supply chain to support progress in developing workforce excellence in health supply chain management;

**Identify** priority actions with clear added value that will be undertaken by partner institutions to support countries, according to their needs and priorities, as they strive to attain workforce excellence in health supply chain management; and

**Monitor and evaluate** progress to demonstrate the impact and value of interventions promoted by the Initiative, as well as of the Initiative itself.