

National Workshop to Review Current Medical Supply Procurement Practices and Ways of Improving Availability of Essential Pharmaceuticals and other Health Technology Products in Iraq

Summary Report

February 2019



Summary Report of Workshop for the Review of Current Medical Supply Procurement Practices and Ways of Improving availability of Essential pharmaceuticals and other health technology products in Iraq

Baghdad, 25-26 February 2019

I. Background and Rationale

Availability of, and access to essential medicines, medical supplies and other health technology products constitute an important part of an effective and efficient health system that contribute towards achieving health related sustainable development goals for ensuring healthy lives and promoting well-being for all at all ages.

In the recent years, the Ministry of Health of Iraq (MOH) has been facing challenges to timely procure and make available medicines and medical supplies that the country needs due to various reasons, some of which include complex procurement process and procedures used by Kimadia, the State Company for Medicines and Medical Appliances. This has been translated into recurrent shortages of essential medicines at different health facility levels in Baghdad and in governorates.

In order to overcome this situation and improve access to and availability of critically needed pharmaceuticals and other health technologies, MOH organised, with WHO technical and logistic support, a workshop to review the current medical supply procurement practices and ways of improving availability of essential medicines and other health technology products in Iraq which was held in Baghdad from 25-26 February 2019.

The main workshop objectives were to: (1) identify gaps and challenges, which once addressed, could lead to an improved access to and availability of essential medicines/medical supplies to the population that need them most and (2) develop an action plan for addressing these gaps and challenges with realistic timelines for implementation of the plan.

II. Workshop participation, WHO facilitation and proceeding

In total, 31 Iraqi professionals from different directorates of the Ministry of Health, the Ministry of Finance, the Ministry of Planning and the Federal Board of Supreme Audit participated in the workshop. MOH participants included representatives from Kimadia (i.e. Finance, Importation Departments for medicines, medical supplies, medical equipment, Warehousing, Legal, Audit, Communication and Follow up/Monitoring); and MOH/Technical Affairs (i.e. Pharmacy, Controlled Substances, Needs Assessment/quantification for medicines, medical supplies and equipment Registration and Pricing).

WHO team comprising of 11 specialists of different aspects of essential medicines policies, medical supply chain and health system strengthening from the three levels of the organization (HQ, Regional and Country Offices) facilitated the workshop and steered discussions during the two-day workshop. A comprehensive list of contacts of all participants and facilitators is shown as Annex I.

The first day was dedicated to the presentation, by Iraqi participants, of a comprehensive overview of the process, procedures and practices applied in Iraq for the procurement of pharmaceuticals and other health technology products and discussions on identified obstacles assessed as contributing to the recurrent shortages experienced in Iraq. The first day was also

used by WHO team to share experiences and lessons learnt from different procurement systems and modalities used for emergency procurement by WHO and approaches used by individual or group of countries taking Jordan and Gulf Cooperation Council (GCC) as examples.

A special session was also dedicated to the review of lists of different categories of medicines for which the MOH Iraq has requested WHO to support in procuring these medicines using funds to be provided by the ministry.

The second day witnessed extensive discussions and exchange of views on how to address gaps/bottlenecks identified during the first day, including the development of a draft action plan with practical actions to be taken to address these gaps. This action plan was presented and refined in a plenary session which was also attended by HE. Dr. Alaa Alwan, Minister of Health who took the opportunity to provide feedback on the plan as well as providing guidance and advice on next steps.

III. Summary of gaps/challenges identified and way forward

Gaps and challenges identified throughout medical supply management chain and include gaps in the areas of (1) Selection, (2) Quantification and forecasting; (3) Procurement strategies and procedures, including increase of the number of approved suppliers (4) Warehousing and Inventory management; (5) Distribution; (6) Quality Assurance; (7) Rationale use of medicines.

Annex II is a detailed matrix on major areas of gaps/challenges identified and actions/activities required to address these gaps. From operational perspective, these actions/activities have been grouped into short, medium and long term interventions.

1. Short term interventions for completion in 2019

WHO support for Emergency procurement of essential medicines requested by MOH

For the list of medicines shared with the MOH for WHO possible procurement, the following are the agreed action points:

it has been agreed that only medicines that are listed in the WHO Essential Medicines List (EML, 2017) will be procured, once funds are made available by the MOH.

- Procurement will be only for the items that are included in WHO list of Essential medicines and will be done according to WHO procurement rules
- Estimate prices and delivery time will be provided to the MOH only after the finalization of the whole process as prices and delivery time may vary according to items, quantities and sources noting that in case the MOH official request is received, the procurement process will be treated as emergency procurement and treated in this time frame.
- The procurement of items to be procured will require an endorsement of the WHO regional office senior management prior to actual procurement.
- WHO will review speedily these lists and will provide feedback to the MOH/Kimadia on items that WHO can be able to procure, should funds be made available.
- MOH will submit a formal request to WHO for the final list of items to be procured by WHO.

Installing electronic technology in Iraq

- Install SIAMED and organize the training on its use at the WHO Collaborative center (Electronic Registration).
- Conduct an assessment for the installation of a comprehensive Inventory Management system at KIMADIA and major hospitals in Iraq. This is to assist in providing accurate

forecasting and planning distribution based on actual needs. With support evidence of country experience.

- Organize a media and communication campaign on rational use of antibiotics (in collaboration with AMR unit).

Guidelines/process

- Develop National Good storage and distribution guidelines (GSP/GDP).
- Develop a short Guidance Note on forecasting and quantification.
- Support the review of the National medicine policy covering a long period (2019-2019),
- Print out and disseminate the updated National Medicine Policy
- Develop an implementation plan for the National Medicine Policy.
- Develop the standard technical specification for biomedical equipments (with a cost efficiency analysis).
- Develop a standard catalogue items for medicines to be procured by KIMADIA.
- Develop a strategy for Quality control of procured medicines based on risk analysis.

Training & capacity building

- Organize a training for warehouse managers on the new national GDP/GSP guidelines developed.
- Organize a training for pharmacists (hospital and DOH) on forecasting and quantification with ToT training to roll out the training to lower levels over the following years).
- Organize the training for Inspectors on GDP/GSP.
- Support MOH/Kimadia to review its current guidelines and procedures for Invitation to Bids (ITBs) with a view of simplifying them while assuring the quality of good to be procured.

Other activities

- Initiate, in collaboration with EMRO, the self-benchmarking for the National Regulatory Authority (NRA) in Iraq.
- Analyze the results of the benchmarking exercise and develop a corrective action plan.

2. Medium term

Training & capacity building

- Organize a training for pharmacists in the registration department on dossier evaluation and selection of suppliers (**Annual Certification on Medicines Quality Assessment Training**).
- Organize a training for pharmacists in the Registration department on medicines dossier evaluation.
- Organize a training of the team of inspectors on GMP (join audits and certification).
- Update and train the doctors on the STGs (ToT training with a roll out to lower levels over the following years).
- Develop a capacity building programme of the National Quality Control Laboratory (Baghdad).

Guidelines/Process

- Develop a procurement plan and distribution plan after the quantification exercise.
- Develop categories criteria for items to be procured.
- Develop criteria selection tool for offers' evaluation.
- Develop monitoring and evaluation tools for suppliers.

- Update, develop and disseminate the revised STGs.
- Develop national procurement policy for medicines and other health products.
- Implement corrective actions from the self-benchmarking tool.

3. Long term

- Make cases and build advocacy tools and share experiences from other country on the alignment of the health budget with the procurement cycle.
- Roll out of the training on quantification and forecasting.
- Roll out of the training on Good storage and distribution practices.

IV. Conclusions

The successful implementation of the suggested plan assumes following prerequisites:

- Required financial resources will be provided mainly by the ministry of health and will be timely made available.
- WHO will play a supportive role providing technical assistance and expertise where needed, particularly in the area of capacity building/training, expertise and knowledge sharing, including sharing best practices and technical materials and guidelines in different programmatic areas covered by the action plan
- The MOH will establish a small but efficient taskforce responsible for following up closely the implementation of the plan
- The Taskforce will develop, in coordination of WHO, a result framework defining target indicators which will be used to monitor progress
- A strong coordination structure involving members of the MOH Taskforce and WHO will be established to ensure timely implementation of activities included in the action plan.