



National logistics working groups: A landscape analysis study[☆]



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ARTICLE INFO

Keywords:

National logistics working group
EPI
Immunization
Effective vaccine management
Improvement plan
Supply chain
Human resources

ABSTRACT

Several countries have acknowledged the contributions made by national logistics working groups (NLWG) to ensure equitable access to the expanded program on immunization's (EPI) vaccines against preventable diseases. In order to provide key insights to the United Nations Children's Fund (UNICEF) and the World Health Organization (WHO) supply chain hub – as well as other players, including national EPI – a landscape analysis study was conducted from September 2015 to February 2016.

This is a cross-sectional survey taken by 43 countries that combines qualitative and quantitative approaches. Data was collected through a desk review, consultation, interviews, and distance questioning. References and guidance were used to determine and specify the underlying mechanisms of NLWGs. The key findings are:

- Mandate of NLWG commonly declared by countries is improving immunization logistics and supply chain.
- Of the 43 countries surveyed, 10 have formal NLWGs, 8 have informal or ad hoc NLWGs, and 25 have none.
- The immunization supply chain and logistics (iSCL) decision-making process in countries, regardless of NLWG status, mainly depends on the EPI manager.
- In countries with an NLWG, members with logistics and supply chain backgrounds are relatively common; they are mostly from EPI, UNICEF, and WHO.
- Almost all NLWGs have terms of reference and primarily operate under EPI governance; however, three NLWGs have standard operation procedures (SOP), and four use monitoring and evaluation tools.
- The coordination mechanism of these iSCL activities is mainly built into the immunization Comprehensive Multi-Year Plan (cMYP) and annual EPI plans, and organized by EPI/Immunization Coordination Committee (ICC).
- Most countries that participated in this survey expressed their technical requirement for improving the function, positioning and influence of the immunization logistics working group, and capacity building for the group's members.

This study has provided a general overview of the status of NLWGs for immunization in various countries. Based on the key insights of the study, technical assistance needs have been identified, and immunization partners will be required to help countries create and reinforce their NLWGs.

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1. Introduction

National Immunization Programs (NIPs) in developing countries have been facing several challenges in ensuring equitable access to

the expanded program on immunization (EPI) vaccines against preventable diseases. Safely storing and transporting vaccines and other immunization commodities to immunization service points is one of the biggest obstacles these countries are struggling with in general, and especially in remote and hard-to-reach areas.

The Effective Vaccine Management (EVM) Initiative, launched by the World Health Organization (WHO) and United Nations Children's Fund (UNICEF) in 2010, is a process by which countries periodically evaluate the performance of their immunization supply

[☆] Open Access provided for this article by the Gates Foundation.

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chain and logistics (iSCL) systems against best-practice benchmarks in order to enact an improvement plan accordingly.

The TechNet meeting in Bangkok (May 2015) [1] acknowledged that National Logistics Working Groups (NLWGs) appear to be a promising strategy for improving supply chain management, decision-making, and accountability at the national level. Indeed, the role and successes that NLWGs have achieved in India, Indonesia, Kenya, Mozambique, and Nigeria suggested that it is a key mechanism for decision making in health supply chain. These Groups provide oversight, guidance, visibility and accountability. NLWGs can bring innovation, mobilize resources, and advocate for stakeholder involvement. The countries also highlighted the crucial role of NLWGs in coordinating with partners, taking decisions, and jointly implementing supply chain improvements.

NLWGs as “leadership groups” may take different forms and names. Gambia, for example, named its NLWG the “National EPI Logistics Committee” and Lao PDR named its NLWG the “National Immunization Logistics Working Groups – NILWG”. Whatever their names, these groups aim to improve coordination among partners to plan and implement initiatives to strengthen national immunization priorities. Establishing and operating these working groups are part of the Ministry of Health’s process of strengthening iSCL with the objective of continuous improvement in the availability of vaccines and immunization commodities, vaccine potency, and supply chain efficiency.

Recognizing the potential importance of NLWGs, WHO-UNICEF Supply Chain Hub has made it a priority to support countries in establishing or strengthening NLWGs. However, too little is known about what the NLWGs should do, how they should operate, how they should be managed, and who should be involved. In order to support the WHO and UNICEF joint statement on “Achieving immunization targets with the comprehensive EVM framework”, a landscape analysis study was conducted from September 2015 to February 2016.

This research is a first step in understanding where NLWGs exist, how they are structured, and what impact they might have on decision-making, and immunization program performance.

This paper, therefore, outlines the key findings of a landscape analysis study, including the current situation of NLWGs in terms of their availability, functioning and scope of work that would be important to improve health supply chains, as well as the countries’ needs for establishing or enhancing NLWGs.

2. Methodology

The investigator searched for data to identify which countries are operating with or without an NLWG, how existing NLWGs operate, how NLWGs are institutionalized, how they support decision-making, and what countries still need to establish or reinforce NLWGs. To collect data, the investigator developed a cross-sectional survey to provide a snapshot, in February 2016, of the situation of NLWG in 157 UNICEF-supported countries, and to document their needs for support. The study combined qualitative and quantitative assessments.

The investigator used existing references and guidance to determine and specify the functioning mechanisms of NLWGs: the WHO/UNICEF joint statement on the comprehensive EVM framework (2016) [2]; the WHO Immunization Practices Advisory Committee’s (IPAC) call to action for national programs and the global community by IPAC (2014) [3]; and People that Deliver’s framework on health supply chain competency (2015) [4]. Likewise, the investigator performed a systematic review of guidance documents and materials used by existing NLWGs. Table 1 presents the types of materials reviewed from consulted countries (Table A1). In addition, the performance of other working groups in the health sector was analyzed, including: the Supporting Independent

Immunization and Vaccine Advisory Committees’ (SIVAC) Initiative and National Immunization Technical Advisory Group (NITAG) [5,6], the Health Stakeholder Leadership Groups, Strengthening Commodity Security Committees, Contraceptive Security Committee, and the Advisory Group on acquired immune deficiency syndrome (AIDS) (Table A2).

The investigator conducted semi-structured interviews with UNICEF immunization focal points in the seven Regional Offices (Central and Eastern Europe, East Asia and the Pacific, Eastern and Southern Africa, Middle East and North Africa, West and Central Africa, South Asia) and in eight countries operating with existing NLWGs (Democratic Republic of Congo, Ethiopia, Haiti, India, Indonesia, Mozambique, Nepal, and Nigeria). However, the Latin America and Caribbean Regional Office (LACRO) did not participate in the survey because of the unavailability of informants at the regional level. The interviews were designed to collect data about informants’ perception of how iSCL issues are addressed, how is iSCL managed at the national level, what is/was the rationale for establishing an NLWG, and how do NLWGs function (e.g. Do they have a Terms of Reference or Standard Operating Procedures?). The investigator gathered opinions about best practices and the challenges of NLWGs.

The interviews and desk review identified possible functioning and performance indicators of NLWGs. These indicators were used to design a questionnaire and to analyze two possible situations in a country:

- Existing NLWGs: formal/informal NLWG, functioning, technical capacities, key barriers and challenges, and needs for improvement.
- Non-established NLWG: process for coordinating partners and assessing EVM, implementing improvement plan, conducting reviews/assessments/studies related to immunization supply chain, needs for establishing an NLWG.

UNICEF regions sent the questionnaire to 121 countries. The study population could access the questionnaire online on the SurveyMonkey® Web platform, and via an interactive Microsoft® Word questionnaire sent by regional offices. UNICEF country offices provided data in cooperation with EPI managers.

3. Results

Forty-three out of the 157 UNICEF supported countries participated in the study (Fig. 1) through direct interviews by Skype or phone and/or online or interactive word questionnaire. The distribution of participating countries is presented in Table 3. Of the 43 countries, 6 countries only participated in interviews, 36 countries only filled in the questionnaire, and 2 countries participated both in the interviews and questionnaire. Seventy-nine countries did not reply to the sent questionnaire, and 35 countries in Latin America and the Caribbean could not receive the questionnaire via the LACRO because of unavailability. Unlike other LACRO countries, Haiti, which participated in the interview, could receive the questionnaire.

Twenty-nine documents (Table 1) from countries and 34 documents from five other working groups (Table 2) were collected and reviewed through desk reviews.

3.1. What is an NLWG?

Based on the results of interviews and questionnaires, NLWG is considered a mechanism for coordinating national immunization logistics and supply chain activities as well as supply chain investments made by government agencies and development partners

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