

MTaPS objectives

- I. Pharmaceutical-sector governance strengthened
- Institutional and human resource capacity for pharmaceutical management and services increased, including regulation of medical products
- Availability and use of pharmaceutical information for decision making increased and global learning agenda advanced
- 4. Pharmaceutical-sector financing, including resource allocation and use, optimized
- 5. Pharmaceutical services, including product availability and patient-centered care, to achieve health outcomes improved

The MTaPS Program is from the American People through USAID

Based on its decades of expertise in strengthening health systems to save lives and improve the health of people in low- and middle-income countries, USAID supports better governance and integrated, innovative, and sustainable strategies to strengthen pharmaceutical systems.

Funded by the US Agency for International Development and led by Management Sciences for Health (MSH), the goal of the five-year USAID Medicines, Technologies, and Pharmaceutical Services (MTaPS) Program (2018–2023) is to help low- and middle-income countries strengthen their pharmaceutical systems to ensure sustainable access to and appropriate use of safe, effective, quality-assured, and affordable essential medicines and pharmaceutical services.



IMPROVING PHARMACY SERVICES FOR STRONGER HEALTH SYSTEMS AND BETTER HEALTH OUTCOMES

chieving the health and financial protection goals of universal health coverage (UHC) depends on well-performing health systems, which include public and private pharmacies and other retail outlets that ensure that effective, quality-assured, and affordable medical products are available and are prescribed, dispensed or supplied, and used safely and appropriately.

Effective pharmacy services improve patient outcomes and satisfaction by ensuring that life-saving products are available and providing care that helps patients use products safely and appropriately. Pharmacy services include all medical product-related services at public and private hospitals, clinics, pharmacies, private retail outlets, and other points of health service that support the delivery of patient care and treatment, including the provision of pharmaceutical care to help prevent or resolve medicine use problems and optimize treatment outcomes (figure 1).

In low- and middle-income countries (LMICs), people commonly obtain their medicines and seek health care at their own expense from retail pharmacies, drug shops, and sometimes drug peddlers, particularly in rural areas. The places where people get their medicines and the interactions they have when doing so—whether with clinicians, pharmacists, dispensers, community health workers supplying medicines as part of community case management, drug shop staff, or vendors in the market—influence whether they use the medicines as intended. Inappropriate prescribing, dispensing, and sale of medical products by providers and sub-optimal use by patients and caregivers is common in LMICs, and the quality of pharmaceutical care at pharmacies and other medicine outlets is often poor due to a lack of regulations, systems, capacity, and resources. Inappropriate medicines use and medication-related problems, such as adverse drug reactions (ADRs) or

- Smith F. 2009. The quality of private pharmacy services in low- and middle-income countries: a systematic review. Pharmacy World and Science 31: 351–61.
- Goodman C, Brieger W, Unwin A, Mills A, et al. 2007. Medicine sellers and malaria treatment in sub-Saharan Africa: what do they do and how can their practice be improved? The American Journal of Tropical Medicine and Hygiene 77(6 Suppl):203–18.
- ³ Holloway K, van Dijk L. 2011. Rational Use of Medicines. In: WHO. The World Medicines Situation, 3rd edition. Geneva: World Health Organization.

poor-quality medicines, can harm patients, lead to treatment failure, drive antimicrobial drug resistance, and waste scarce health system resources.

As some of the most visible and accessible providers of health care in the community, pharmacies and other medicine outlets that can legally dispense or supply medicines are well placed to provide a range of services that improve medicines use, promote public health, and prevent disease (figure 1).⁴ To achieve the goals of UHC, service delivery-level interventions must include strengthening pharmacy services and efforts that improve supply management to ensure the uninterrupted availability of quality products.

As USAID's primary central mechanism for strengthening pharmacy services at public and private hospitals, clinics, pharmacies, and other medicine outlets, the USAID Medicines, Technologies, and Pharmaceutical Services (MTaPS) program assists countries to:

 Improve pharmacy practices, including the dispensing and supply of medical products to individuals and the provision of related information and counseling

- Implement interventions that optimize medicine use; promote product safety; and support antimicrobial stewardship, health promotion, and disease prevention programs
- Strengthen processes and capacity to improve the supply and control of medical products at service delivery points and protect patients from poor-quality medicines
- Improve the regulation, organization, financing, and management of pharmacy services; reform education and training of pharmacy service providers; and conduct practice research

MTaPS works with countries to strengthen:

Dispensing and supply of medical products to individuals

- Help health care facilities, pharmacies, and retail outlets implement and monitor adherence to dispensing standards
- Assist pharmacy providers to upgrade practices and employ interventions such as patient-centered consultations
- Improve the capacity of retail pharmacies and drug shops to support self-care and make medical referrals

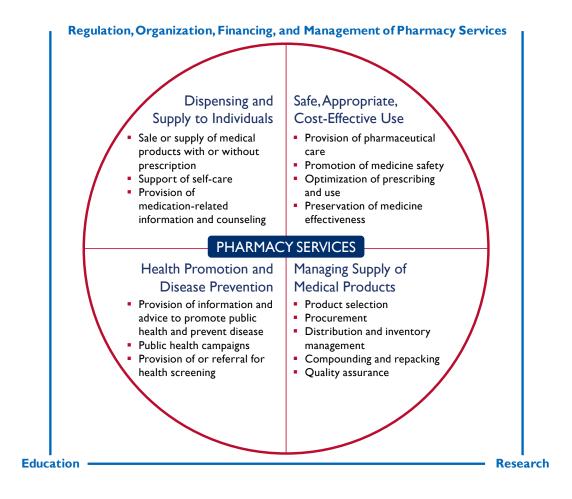


Figure 1: Components of pharmacy services

World Health Organization (WHO). The Role of the Pharmacist in the Health Care System. Geneva: WHO; 1994

Optimization of medicines use

- Improve patient satisfaction, adherence, and treatment outcomes by developing provider-patient partnerships and strengthening communication
- Support facilities in developing standards, guidelines, and tools to institutionalize pharmaceutical care and help hospitals strengthen the role of pharmacists in patient care (e.g., through clinical pharmacy programs)
- Implement behavior change strategies to increase voluntary reporting of suspected ADRs, medication-related errors, and poor-quality products and enhance the use of data to improve patient safety
- Implement active surveillance to evaluate the safety and risk/ benefit of new products
- Capacitate facility-level committees and multidisciplinary teams to monitor and increase the appropriate use of antimicrobials and other medicines
- Use retail pharmacies and drug shops to raise community awareness and provide information on the need for appropriate use of antimicrobial and other medicines and the hazards of poor-quality medicines

Management of medical product supply at points of service

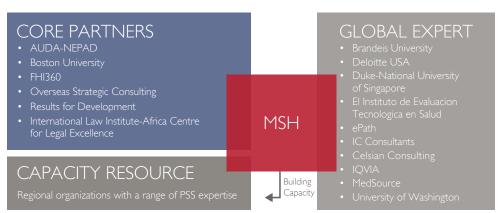
 Assess supply chain practices at health facilities and pharmacy outlets and their interconnections with medicine use; help diagnose and address system weaknesses by strengthening supply chain monitoring, oversight bodies, and processes Support access to timely and accurate patient and product supply data through interoperable information systems; support the use and maintenance of electronic dispensing, stock management, and transaction management tools

Regulation, organization, financing, and management of pharmacy services, education, and practice research

- Work with national stakeholders to establish minimum standards for dispensing areas, develop patient-centered pharmacy service standards, and institute monitoring and oversight systems
- Support medicine regulatory authorities to design and administer accreditation programs for retail pharmacies and medicine outlets, develop training curricula, and establish inspection protocols
- Improve competencies of pharmacists and providers through preservice trainings and continuing professional development; develop guidelines and tools to support the provision of medication-related counselling and pharmaceutical care
- Develop legal frameworks for contracting with the private sector for pharmacy services to ensure quality and access; support the development of credentialing and contracting tools for retail pharmacies in medicine benefit schemes
- Extend or institute pharmacy management information tools and systems to retail pharmacies and outlets; incorporate data on private-sector procurement and consumer purchasing behavior into routine reporting systems

The MTaPS Consortium

Led by Management Sciences for Health (MSH), the MTaPS consortium comprises core partners, global experts, and capacity resource partners. Core partners and global experts are listed below. Capacity resource partners include local organizations with regional or country-based knowledge, technical expertise, and networks (African Health Economics and Policy Association, African Collaborating Centre for Pharmacovigilance and Surveillance, Ecumenical Pharmaceutical Network, Kilimanjaro School of Pharmacy, Muhimbili University, Pharmaceutical Systems Africa, U3 SystemsWork, and the University of Ibadan) and other partners (Columbus Consulting, Empower Swiss, and Softworks).



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