



# **UNDP Health Procurement & Supply Chain Support Services**

*Maximizing savings. Enhancing quality. Guaranteeing results.*



# 1. UNDP GF HIST Mission

**UNDP's Mission: Eradicate poverty, reduce inequalities and exclusion, strengthen effective and inclusive governance, and build resilient and sustainable systems for health.**

In line with Sustainable Development Goals including SDG 3, UNDP Strategic Plan & UNDP HIV, Health & Development Strategy 2016–2021

*“UNDP health procurement and supply management is a development activity and inseparable from the strengthening of national capacities for equitable and sustainable delivery of essential health services.” November 2017*

Since 2003, the **UNDP Global Fund/ Health Implementation Support Team (GF-HIST)** in collaboration with **Country Offices** provides **specialized advisory** and **health procurement** support in some of the most challenging operating environments to ensure the quality and reach of essential health services and to improve peoples' lives.

Currently totaling **US\$1.366 billion** in signed agreements

≈ **350 M\$ Health Procurement** in 2018 with more than **50% for NCDs medicines**



*For more information on our work, please refer to the GF/HIST Annual Report 2016-2017*



## 2. Overview of UNDP Health Support

Collaboration with partners such as government, civil society organizations, the Global Fund and UN agencies to help build resilient and sustainable systems for health.

**36**   
COUNTRIES  
Health procurement  
and supply management

- UNDP is **Principal Recipient of Global Fund** grants in 18 countries as well as for 3 regional grants
- UNDP helps governments through **Financial Agreements** for health procurement and supply chain systems support
- UNDP **collaborates** with other UN agencies to provide supply chain support

**36**   
COUNTRIES  
Access to medicines

***UNDP supports governments (MoH and other ministries or national entities) by:***

- Providing procurement services through Copenhagen Health Procurement units and Country Offices
- Applying a strict Quality Assurance policy for health products supplied based on WHO norms and standards
- Dealing with intellectual property and regulatory issues
- Contributing to develop/strengthen National Supply Chains





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### 3. The UNDP GF/HIST and GPU Health Team & services

Global Procurement Unit Health - Copenhagen  
For other health products and laboratory items

Procurement specialists GF-HIST-Copenhagen  
For medicines

Procurement & Supply Chain Management (PSM) Specialists  
Providing Country Support

PSM Roster Experts  
71 consultants for systems strengthening

Quality Assurance specialist  
For all health products

**A. HEALTH  
PROCUREMENT  
SERVICES**

**B. SUPPLY CHAIN  
SUPPORT  
SERVICES**

Senior Health PSM Advisor



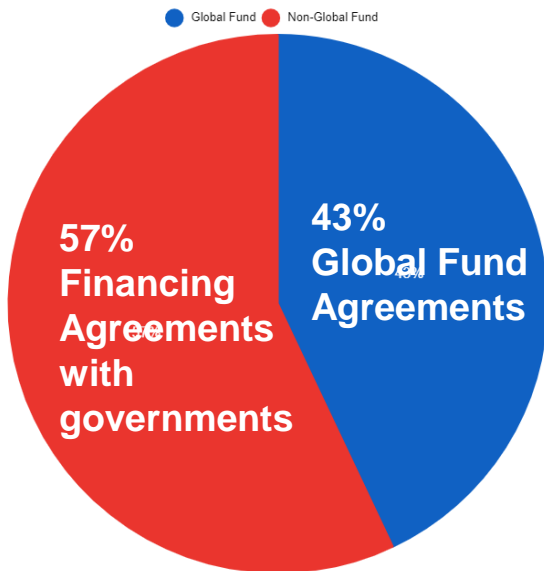
# A. HEALTH PROCUREMENT SERVICES

## UNDP Health Procurement Activities 2018

### Total Health Procurement Volume 2018

in collaboration with UNICEF, UNFPA, GDF/UNOPS (8%)

≈ \$350 Million USD\$



All data is extracted from the UNDP Health Procurement Analytics Dashboard  
GF: Global Fund ; Non GF: Financial Agreements.

### Key Categories of Health products

Infectious diseases: HIV, Malaria, Tuberculosis, **Hepatitis C and B**

Non Communicable Diseases:

- **Cancers** (and medicines for palliative care)
- **Cardiovascular diseases**
- **Chronic Respiratory diseases** (including asthma)
- **Diabetes**

**Blood factors, Orphan diseases, Psychiatric disorders medicines**

Health **equipment** and **medical devices**, consumables, **diagnostic** tests, hospital equipment, **laboratory** products, reagents, bed nets, etc.



## A. HEALTH PROCUREMENT SERVICES

### Reducing prices for Hepatitis C medicines

According to WHO, Hepatitis C is a major health problem - 71 million people affected worldwide.

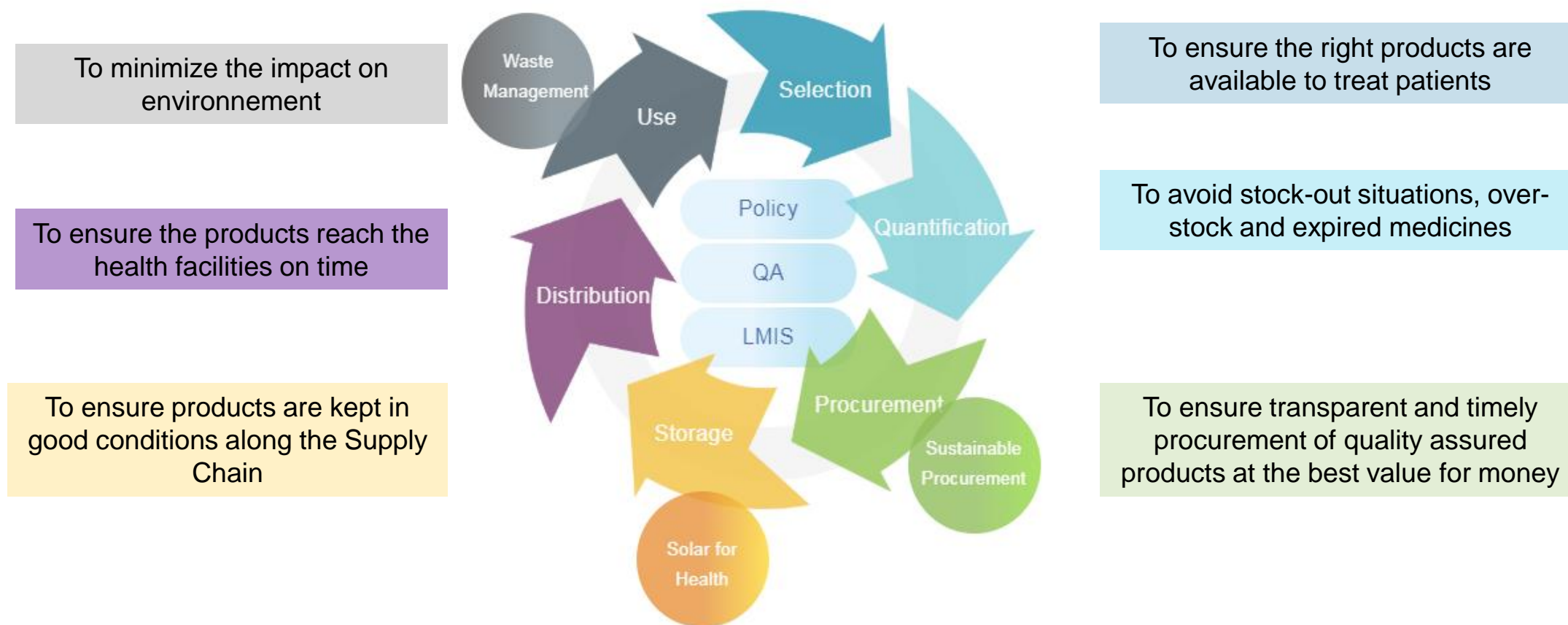
- In July 2018, UNDP secured a **breakthrough reduction** in the price of hepatitis C treatment through a Long Term Agreement signed with the manufacturer covers more than **105 countries**
- The agreement with a generic manufacturer has lowered price for hepatitis C treatment to just under **US\$90 per full 12 weeks treatment course per patient**
- Actually supporting Ministries of Health with procurement services for more than **25,000 patients in 3 countries** and providing advices on Intellectual Property and Regulatory aspects and strengthening National Supply Chains.

Medicine	Form	Posology	Genotypes covered	Price per full treatment (12 weeks) DAP incoterm Delivery lead times: 90 days
Sofosbuvir + Daclatasvir Individual products	400 mg + 60 mg Boxes of 28 tablets	12 weeks for persons without cirrhosis and 12-24 weeks with cirrhosis	1, 2, 3, 4, 5, 6	<b>\$USD 90</b>
Sofosbuvir/Ledipasvir Fixed Dose Combination	400mg/90mg Box of 28 tablets	12 weeks for adolescents aged 12-17 years or weighting at least 35 kg	1, 4, 5, 6	<b>\$USD 90</b>
Sofosbuvir/Velpatasvir Fixed Dose Combination	400mg/100mg Box of 28 tablets	12 weeks for persons with and without cirrhosis	1, 2, 3, 4, 5, 6	<b>\$USD 270</b>

## B. SUPPLY CHAIN SUPPORT SERVICES

### Type of support

PSM specialists and roster's experts can **assess/support** [any area](#) of the PSM (Procurement & Supply Chain Management) cycle and provide technical assistance and build capacity.





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## 4. UNDP SUPPORT TO STRENGTHEN THE PSM SYSTEM IN TAJIKISTAN

- **Rehabilitation of the storage facilities** of NAC at central and regional levels with subsequent provision of the equipment needed to warehouse management.
- **Capacity development** of the NAC pharmacists in PSM area.
- Development and introduction of e-LMIS based on **1C software platform** among our SRs. The system appeared to be cost-effective in comparison with the e-VIN system while performing the same functions.
- **Incinerators** (10) procured to deploy the medical waste disposal sites at NAC central and regional levels



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## 4. TAJIKISTAN CHALLENGES ON PSM AND ARV PROCUREMENT

- 1. In-country weak storage and distribution system, not** meeting minimum GSP standards.  
Only one self sustained warehouse but with high prices, lack of transportation means, scarce budget for fuel and maintenance
- 2. Lack of legal framework** for public procurement of the medicines and other health products. The current procurement method is based on a lowest priced approach with less focus on the quality of the products which is critical for health products
- 3. Registration of medicines.** The current legislation requires the suppliers to register their products in the country. Currently, the registration fees are quite high and considering the quantity of the required ARV or TB medicines the private providers are not interested to register these drugs .  
Long bureaucratic process not attractive for the suppliers.



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## 4. TAJIKISTAN CHALLENGES ON PSM AND ARV PROCUREMENT

4. **Lack of qualified PSM staff** . In view of high level of migration the issue of finding qualified national staff is yet critical. The low salaries proposed in the public affects negatively on the sector.
5. **Medical waste disposal.** Currently, there is no system in place despite numerous support from the international organizations. Though the legislation framework exists, it doesn't work in practice. The investments are needed for more deployment of the medical waste disposal sites which will meet both international and national standards.  
Current practices of medical waste disposal cannot be considered as systematic and environmentally friendly.
6. **Quality Control.** The National Quality Control Laboratory is not WHO prequalified. This jeopardize the reliability of the QC results provided and increase the risk of having substandard medicines on the Tajik market. The support is needed to the National Quality Control Laboratory to help them to reach WHO prequalification requirements.



**Thank you**

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