

Procurement Interventions Health Department Balochistan







Balochistan has faced dire challenges in the wake of security concerns resulting in minimal intervention in health reforms. This has led to major disparity in its health indicators ranking in comparison to other provinces. Balochistan Government passed the Public Procurement Regulatory Authority (PPRA) Act in 2009. However no PPRA was established nor Procurement Rules were developed, procurements were largely done following the General Financial Rules (GFR) with oversight provided by the Auditor General's office through annual audits. It is expected that Balochistan government would soon be adopting the Federal Public Procurement Rules (FPPR) with some amendments. Despite financial constraints, it is pivotal to take considerable action for health procurement regulations andmanagement with assistance of federal and provincial health authorities.

Major Procurement Interventions

The Technical Resource Facility (TRF) has made noteworthy efforts in the past five years to improve the procurement system of Department of Health (DoH) Balochistan. Major areas where Technical Assistance (TA) was provided are following:

1. Placement of Biomedical engineer in Health Department

Procurement of specialised medical equipment is one of the most prioritised and technical task in the health department, requiring the need of an expert. The DoH requested TRF to provide technical assistance of a biomedical engineer for procurement of medical equipment and to build capacity of staff at the provincial level. This support was provided to the DoHmaking it possible to procurebiomedical equipment for the whole province.

2. Placement of procurement specialist in DoH including Nutrition Programme

To address its nutrition challenges, Balochistan has developed a provincial programme that would address, inter alia, malnutrition through "direct nutrition" interventions. The programme will be financed through a World Bank project called "Enhanced Nutrition for Mothers and Children". Under this, all procurement activities have to be undertaken according to World Bank procurement guidelines.

To fill the gap of technical assistance as well as to build the capacity of procurement officials and health managers, TRF has placed a procurement consultant for twelve monthson the request of DoHBalochistan and the World Bank.

3. Developing standard specifications for goods and supplies

The PC-1 of the Mother Newborn and Child Health Programme(MNCHP) lists development of detailed generic or standard specifications for medical equipment, medicines and goods to ensure transparency, accountability and uniformity in the procurement process.

In order to achieve this objective, a situation assessment of the Programme was carried out in close coordination with federal, provincial, special areas and selective district MNCH offices, down to the facility level. The assessment included reviews of (a) compliance of existing specifications with rules; and (b) clinical functions, packaging, quality and community feedback regarding items used in the Programme.

Detailed standard specifications for medical equipment, medicines, hospital supplies and general items have been developed through a consultative process. The provincial MNCH offices and health departments have shown keen interest for using these specifications in all future procurements.

4. Testing and refinement of procurement monitoring tools, development of software and training of provincial staff

To ensure accuracy, transparency and accountability in the procurement system of DoH, TRF developeda systematic and sustainable mechanism for monitoring each activity of the procurement cycle. As a result a set of tools were developed for monitoring each step in procurement of goods and services. In the second phase, the same tools were tested, refined and

implemented after development of software across all provincial departments. The software can be used for procurement planning at provincial and district levels. Monitoring of progress against plans through this system can helpmanagers to find inaccuracies in procurement activities.

5. Developing terms of reference and providing training in TA procurement

A capacity gap due to non-availability of procurement staff and lack of expertise in existing staff members posed a major challenge for the MNCH Programme to identify or procure technical assistance and develop terms of reference. The Technical Resource Facility addressed this through provision of a TA in capacity building of relevant programme staff at federal, provincial and Special Areas levels, through training in identification of TA needs, development of terms of reference and TA procurement and management.

This intervention resulted in the compilation of detailed guidelines for procurement and consultancy services in light of the Procurement of Consultancy Services Regulations, 2010. These guidelines have been approved by the Ministry of Health and concur with the principles of Public Procurement Regulatory Authority (PPRA). The PPRA has now posted the TA procurement guidelines on its website to promote wider application.

6. Development of guidelines and tools in contracting out service delivery

Contracting out guidelines of Public Private Partnership (PPP) models can make government funded health care services more accountable, transparent and efficient. This TA was formulated to comprehensively review existing guidelines for contracting out services. Aproperly assessed training plan was developed to enhance capacities of the health department in implementation of guidelines. The TA will also support capacity building of health department to manage/monitor the entire contracting mechanisms at all levels, effectively.

7. Logistics systems assessment to improve supply chain management systems

An assessment of the current status of logistics systems was carried out with the objective of developing a supply chain management system based on consultations with key stakeholders and to prepare a

work plan based on recommendations. Findings from the assessment will further strengthen health logistics and supply chain management systems whileensuring essential medicine and contraceptive availability. A streamlined system of logistics reporting will allow ongoing data availability and usage for proper product quantification, forecasting, procurement, and distribution.

Key Accomplishments

With considerable efforts of TRF in collaboration with donors and DoH, the key accomplishments are;

- The MNCH Programme had adopted the specifications in its procurements.
- Development of standard tender documentation, formats, SOP for procurements and formulation of technical evaluation criteria.
- Training /capacity building of procuring officers.
- The TA procurement guidelines were developed and adopted byPPRA.

Recommendations

It is suggested that to consolidate upon the constructive reforms through TRF interventions, Balochistan Government and DOH should vigilantly ensure the following:

- Establishment of Balochistan PPRA and adaptation of PPRA rules by the Balochistan Govt.
- Review and development of registration procedures for reliable suppliers by DoH.
- Instituting effective pre-qualifications of suppliers by DoH.
- Standardisingsafety of medical devices, development of PV list and updating of drug formularies.
- Review of procurement manual and SOP.

The Government of Balochistan needs to capitalise upon TRF interventions and take action based on recommendations to help achieve a transparent, accountable and effective procurement system for better healthcare of the province.



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