Regional Logistics Strategic Plan
2015 - 2018
WHO AFRO Regional Logistics Strategic Plan 2015-2018

1. Disease Outbreaks – organization and administration
2. Epidemics – organization and administration
3. Surge Capacity – organization and administration
4. Emergency Responders
5. Disaster Planning – organization and administration – methods

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WHO Team in emergency response in rural Ethiopia, 2007
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EXECUTIVE SUMMARY

Recurrent outbreaks of epidemic and pandemic diseases remain a threat to social and economic development of countries in the WHO African Region. These outbreaks are partly the cause of high morbidity and mortality, and negatively impact on the development of affected countries and their health security. Underlying factors such as weak public infrastructure, limited water supply and suboptimal sanitation and hygiene conditions, as well as negative cultural practices have contributed to the high frequency and magnitude of these outbreaks.

To address the burden of outbreaks and other public health emergencies in the WHO African Region, WHO continues to give support to countries through provision of norms and standards pertaining to epidemic preparedness and response. WHO also supports assessment and monitoring of IHR core capacities; enhancement of surveillance; national preparedness and response planning; and strengthening of logistic capacities for outbreaks. WHO provides leadership of health cluster at the national level to prepare and respond to humanitarian crises.

Over the past years, the importance of logistics during outbreak preparedness and response has been critical in ensuring that essential supplies and reagents are prepositioned and deployed rapidly to the field in support of outbreak operations. This importance is emphasized in the WHO Emergency Response Framework which specifies as an essential requirement the provision of administrative and logistic support to ensure an effective and rapid-response system.

Recognizing the critical role and importance of logistics in outbreak preparedness and response, WHO, in close collaboration with its partners - USAID, CDC and GOARN - initiated the process of developing a Regional Logistics Strategic Plan (RLSP), which covers the period 2015 - 2018.

The RLSP outlines the key logistic issues confronting outbreak response within the Region. It proposes six specific objectives to strengthen outbreak-related logistics. These objectives are supported by implementation activities, which range from upgrading skills of existing WHO logistics capacity within the Region, to addressing outbreaks and supporting WHO country offices to set up cross-border logistic networks allowing countries to support each other during such emergencies. An implementation strategy and time frame are provided for the five years.
1. **INTRODUCTION**

1.1 **Background and Burden of Diseases**

The WHO African Region continues to be affected by recurring epidemics and major public health events. Approximately, 100 acute public health events are reported to the WHO African Regional Office annually. The most frequently reported epidemics include cholera, meningitis, measles, viral haemorrhagic fevers, plague and dengue. These epidemics have a significant impact on health and economic development in the Region.

They also tend to be associated with high morbidity and mortality rates and often affect large geographic areas across national frontiers. Conditions favouring recurring and often severe epidemics are prevalent in the Region, and include inadequate access to safe water and sanitation; underlying health conditions; limited public awareness of prevailing health risks; and weak health systems with limited capacity for timely identification and response to epidemics. The inextricable link between humans and animals in Africa poses a serious risk to public health, given that the majority of emerging and re-emerging infectious diseases have originated from animals.

The WHO Regional Office for Africa provides technical support and capacity building for surveillance, laboratory services, coordination, case management, communication and logistics, during response to outbreaks and other public health emergencies. Comprehensive response is hampered by weak national preparedness as well as limited material and human resources.

During outbreaks, logistic teams are responsible for providing supplies and equipment to the surveillance and response teams. Logistic teams also provide communication systems and support the operations of treatment centres. The basic equipment and supplies required are often not readily available within the host country. Needs assessment, development of specifications, procurement, and delivery of equipment and supplies at the points of need within a short time frame are essential for ensuring efficient outbreak response.

Several resolutions passed by the WHO Regional Committee for Africa have laid the foundation for efficient outbreak response. They include the resolution on Strengthening Public Health Laboratory in the African Region (AFR/RC58/6) and Strengthening Preparedness and Response Strategies to Epidemic and Pandemic- prone diseases, including influenza A H1N1 (AFR/RC59/12). Notable improvements in early detection and rapid response to epidemics have been made within the Region, following the adoption of the IDSR strategy and IHR (2005) by Member States.
1.2 Epidemic and Pandemic Alert and Response Programme

The regional outbreak response programme supports Member States to conduct epidemic risk assessments for vulnerable populations and geographic areas. This strengthens national capacity for timely and effective epidemic preparedness and response; and enhances the development of laboratory capacities and early warning systems.

During outbreaks, rapid-response teams (RRT) are deployed to support field coordination, detection and confirmation of outbreaks, as well as case management and containment. WHO tools guide and support outbreak response, including training and national capacity building. The current approach is mainly reactive and ad hoc, in that logistics support is provided as and when each outbreak unfolds. This approach leads to crisis management during outbreaks, with varying periods of delay.

To strengthen national rapid-response capabilities, it is necessary to develop contingency stocks of essential supplies, equipment, vaccines, diagnostic and treatment supplies, and to preposition these at strategic locations. Usually, limited financial resources are provided to support and sustain national response where necessary. The response programme is supported by expanded health promotion activities, in collaboration with existing health promotion and hygiene education programmes.

Member States have limited capacity to rapidly mobilize resources and respond to outbreaks. National preparedness plans are usually broad and all-hazards oriented, rather than focused on specific outbreaks.

During the fifty-ninth session of the Regional Committee for Africa, Member States agreed to establish a fund to support response to epidemic and pandemic threats. The African Public Health Emergency Fund supports national efforts in deploying rapid-response teams; procurement and prepositioning of epidemic and emergency response supplies during outbreaks and other emergencies.

1.3 Role of Logistics

Support for logistics during response to outbreaks covers the following areas: Development of specifications for equipment; procurement and management of supplies; training and deployment of logistic personnel; providing equipment and supplies to rapid-response teams as well as providing communication and security support during outbreaks.

Logisticians in most WCOs serve specific functions like WCO transport management and EPI logistics. These WCO logisticians assume no overall outbreak logistics responsibility even during emergencies, neither do they have adequate training and skills to appropriately handle logistics during emergency response.
Prepositioning and, where necessary, rapid deployment of equipment and supplies such as laboratory reagents, drugs and personal protective equipment are essential components of outbreak logistics. They enhance capacity of surveillance teams to rapidly detect and confirm outbreaks, and ensure that appropriate interventions are promptly implemented to control outbreak and prevent further spread.

Responding to outbreaks of measles, polio and yellow fever that require reactive vaccination demands rapid movement of large volumes of vaccines and other supplies along a cold chain. It also entails detailed micro planning, training of vaccination teams as well as management of health-care waste. The urgency and magnitude of these activities require appropriate logistic preparedness and adequate capacity to implement. Response to cholera outbreaks within the Region is rather reactive. Logistic challenges include rapidly moving large quantities of intravenous fluids and laboratory equipment. The proposed use of existing pre-qualified cholera vaccine will pose logistic challenges in vaccine management, transportation and support for vaccination teams.

Logistic support for public health events such as lead poisoning in northern Nigeria in 2010, alcohol poisoning in Uganda in 2010, and food poisoning in the border region of Mozambique and Malawi in 2009 involved provision of protective materials and monitoring supplies.

Logistic challenges of a VHF response include sustained regular supply of laboratory consumables; provision of personal protective materials and infection control supplies; daily transportation of samples to centralized laboratories; as well as communication and security supplies in the field. Apart from the technical complexity of containment of diseases such as VHFs, their control also requires the construction of isolation facilities.

Rapid-response teams require basic laboratory and response supplies for active deployment. Delayed delivery of supplies at the national and subnational levels, remains a major constraint to effective response. Constraints, such as the latter, are aggravated by the limited involvement of logisticians during planning and development of national response programmes.

### 1.4 Scope of RLSP – RO and Outbreaks

The RLSP attempts to use data and current field experiences to develop strategies to provide comprehensive logistic support to address outbreaks and public health events within the Region in a holistic manner. It will build outbreak logistics capacity based on existing strengths within the Region. It will also standardize basic equipment and supplies and pre-emptively develop systems and procedures for rapid logistics response.

The strategic plan makes recommendations to restructure the current operational philosophy to create greater depth of logistics capacity throughout AFRO, the ISTs and WCOs. This will be achieved, in part, by investing in training of AFRO logistics personnel and in logistic resources, and developing a Health Logistics Network for Africa within the Region, in consultation with the GOARN Secretariat.
Third party logistic providers (TPL) have been deployed under certain circumstances to handle key components of outbreak logistics, including transportation of supplies and infectious samples. This option will still be exercised depending on the circumstances. Service quality, reliability, performance and cost will be the main determinants in the use and selection of TPL providers.

Handling and management of expired supplies, including their safe disposal, will be streamlined as part of the SIM training. While WHO guidelines are available to guide the safe management of unwanted supplies, expired supplies are considered as mis-procurement and impinge on integrity of the supply chain.

Emergency response supplies in Mali during the humanitarian crises, 2012
2. SITUATION ANALYSIS OF LOGISTICS IN THE REGION

2.1 Logistic Challenges for the Most Common Outbreaks

Despite progress made in providing logistic support during response to outbreaks and other public health emergencies in the Region, a number of challenges persist; these include, lack of risk assessment for most of the common epidemic diseases in most countries in the Region; general emergency rather than disease specific preparedness plans; and limited focus and low resource allocation to emergency preparedness and response by health systems. Besides these challenges, health facilities and community-based health systems in the Region are inadequately equipped to respond to outbreaks requiring surge capacity.

Usually, resource constraints hinder strategic prepositioning of basic supplies leading to delayed delivery of supplies to the field during response. Limited cross-border collaboration and restriction in the movement of goods and people limit sharing of supplies and resources among countries, and further affect timely availability of supplies in the field for effective response.

Deployment of bundled vaccines for reactive and preventive SIAs for diseases such as yellow fever, and meningitis poses challenges. Vaccines are usually air-freighted while the accompanying devices are too bulky for cost-effective air shipment. Most epidemic-prone countries are landlocked, which further increases the time needed to get supplies in place with shipment by sea. Data-based forecasting and logical prepositioning of devices, if not vaccines, will enhance response to outbreaks.

2.2 Rationale for RLSP

The short reaction time required for outbreaks does not allow for effective mobilization of resources. Essential materials often arrive late and are inhibited by in-country logistical challenges.

The industrial base in many countries in the Region is still insufficient to support production of essential supplies for emergency response. Regional transportation networks and varied import/export regimes pose challenges to movement of goods.

Weak national supply networks and limited health system financing do not provide adequate and regular support to peripheral services, in terms of essential supplies for viable sentinel surveillance in most countries. Sectorwide reform programmes in many
countries have separated the supply chain management system from the main body of health ministry administration. Basic medical supplies, where available, are delivered on the basis of access to funding. Strengthening such national surveillance systems will require provision and replenishment of specialized laboratory and response supplies.

Deploying RRTs is the first line of defence in outbreak response. Logistics provide basic equipment, transport and protect equipment and communication systems to ensure functionality and safety of the teams. Seed supplies for rapid containment also reduce morbidity and mortality. On special occasions, technical logistics staff is deployed to support field operations, set up field offices, isolation facilities and to rapidly deploy essential supplies.

Developing regional logistics capacity will make for speedy deployment of RRTs. It will also support prompt enhancement of surveillance systems during outbreaks through provision of laboratory supplies and communication equipment. Evidence-based forecasting, using historical disease occurrence patterns and existing surveillance data will facilitate strategic prepositioning of essential supplies. This, together with reinforced human resource capacity to manage logistics, will contribute to better outbreak preparedness and response.
3. GOAL AND OBJECTIVES OF FIVE-YEAR RLSP

3.1 General Objective

The goal of RLSP is to reduce morbidity and mortality due to epidemic and pandemic threats and other public health emergencies by building regional and national outbreak logistics response capacity, using an all-hazard approach.

3.2 Specific Objectives

The main objective is to establish a system of logistics and supply network and capacity that will support Member States to respond to public health emergencies in the Region.

Ebola PPE training in Kailahun, Sierra Leone, July 2014
4. SPECIFIC OBJECTIVES AND KEY STRATEGIES

The RLSP has six specific objectives, namely:

- To develop Standard Operational Protocol for outbreak logistics;
- To strengthen logistics human resource capacity for outbreak response;
- To procure and strategically preposition standardized outbreak supplies and equipment to ensure regional rapid-response capacity;
- To develop a WHO/AFRO guide on transportation and shipment of specimens and supplies;
- To establish an operational East African Response Unit;
- To strengthen management of outbreak supplies within the Region through installation and effective use of the Stock Management and Inventory System (SIMS).

The RLSP aims to comprehensively address the following key strategies to be implemented over a period of five years.

4.1 Specific objective 1: Develop Standard Operational Protocol for Outbreak Logistics

Activity 1: Develop Standard Operating Procedures (SOP) for outbreak logistics

During the Regional Logistics Strategic Plan implementation process, standard operating procedures (SOPs) for outbreak logistics will be developed. The SOP will become the standard guide for outbreak and emergency response logistics preparation, response and coordination in the Region.

4.2 Specific Objective 2 – Strengthen Human Resource Capacity to Manage Outbreak Logistics

Logisticians working for WHO in the Region will be identified and their profiles developed. Training will be provided to enhance their skills in outbreak logistics.
**Activity II: Develop profile of logistics human resources within the Region.**

Map regional Logistics HR capacity at all levels (national and regional) that could be deployed during outbreaks.

**Activity III: Develop a network of health logisticians within the Region.**

Developing subregional logistic partnerships between WCO logisticians will strengthen the response capacity available within the IST, facilitate subregional training, identify and develop subregional and WCO-specific logistic initiatives.

**Activity IV: Develop logistic training modules.**

Conduct assessment of training needs, followed by development of a comprehensive logistics training package. In-service training will be conducted, using the developed training modules.

**Activity V: Employ logisticians for each IST and selected priority countries.**

The availability of logistic officers at the three ISTs is essential to the delivery of goals and objectives of the RLSP. This will strengthen WCO and IST capacity and increase the number of professional logistic officers available to respond to outbreaks and emergency events throughout the Region. These officers will be recruited and deployed to each IST and selected priority countries. Furthermore, existing WHO logistics capacity will be enhanced to support outbreaks.

The job description and functions of Emergency Response Logistics Officers will be redefined, based on core logistic activities expected to be accomplished during outbreak and emergency response.

The roles and functions of existing WHO/AFRO Logistics Officers either at IST or WCO will be profiled to support outbreak response with the consent and support of WCOs. A minimum of 24 LOs at IST and WCOs throughout the Region will be trained in basic outbreak logistics.

**Activity VI: Develop bilateral neighbourhood country logistic networks in at least six countries with the highest occurrence of epidemics.**

The neighbourhood logistic network will create a forum for regular exchange of information and data on outbreaks among logisticians. It will facilitate relationships between two neighbouring countries and provide support to logistic operations in either country. It will also allow for rapid deployment of staff and supplies across borders.
4.3 Specific Objective 3: Procure and Strategically Preposition Standardized Outbreak Supplies

**Activity VII:** Develop at least three storage hubs within the Region for prepositioning outbreak preparedness and response equipment and supplies.

The current prepositioning strategy will be reviewed to determine the most efficient and cost-effective method. This may involve using third party logistics partners (3PL), external service providers (VMI) and shared/managed warehousing with UN partners. The possibility of consolidating existing WHO and other UN facilities within the Region could be an option.

**Activity VIII:** Develop and implement a Warehouse and Inventory Management system for all outbreak stores within the Region.

To ensure inventory transparency of all prepositioned emergency response resources, standard warehouse management and stock control practices will be adopted to manage facilities. All WCOs will also adopt the SIMS for stock control and inventory management of emergency response equipment, generating weekly/monthly stock reports to the Regional Strategic Information System (rSIS) at AFRO.

**Activity IX:** Determine countries for development of first-level response capacity based on risk of outbreaks.

Criteria will be established, and the profile of countries most prone to outbreaks developed. Countries selected and approved will be supported to preposition a minimum quantity of agreed emergency supplies and equipment. These supplies will be managed by the National Emergency Task Force and the WCO. This will enable such priority countries to have first response capability, based on the recommendations of the ERF, for establishing “all-hazards” response capacity at country level.

**Activity X:** Develop equipment specifications for regional rapid-response team operations.

Current outbreak response equipment within the Region will be reviewed and recommendations made on the appropriate equipment to purchase and preposition.

Specification of the “all-hazards” dual use of equipment and minimum establishment of specialist response equipment (BSL4 suits, SCBA, PAPR, Decontam, Chem/Bio Detection) will be undertaken with the relevant specialist partners (CDC, IAEA, OPCW, UNSCEAR).
Activity XI: Develop and adapt standard kits for rapid field deployment

Standardized Outbreak Response Personnel Deployment Kits will be established and maintained for immediate issue to staff going to support field operations.

AFRO emergency deployment travel processes will be detailed and included in the SHOC activation SOP and Outbreak Response guidelines. All logistics officers within the Region will complete the pre-deployment documentation requirements of GOARN and the AFRO Rapid Response Preparedness Framework, and undergo the outbreak emergency response training as a pre-requisite for inclusion in the RRT rosters.

Activity XII: Develop a proposal for regional courier and shipment services.

To support transportation of medical samples from the field to reference laboratories, WCOs will pre-establish customer accounts with selected courier services. Each WCO will create country-level accounts or use a standard AFRO account monitored at RO. This will facilitate the rapid transporting and shipment of samples to national and international reference laboratories.

4.4 Specific Objective 4: - Develop a WHO/AFRO Guide on Transportation and Shipment of Specimens and Supplies.

Activity XIII: Develop a proposal on shipping of outbreak supplies

The development of the AFRO Emergency Response Logistics guide will clarify the process for emergency shipping of outbreak response supplies by specifying the thresholds for activation of emergency shipment processes. This will operate in parallel with the ERF grading of humanitarian emergencies.

4.5 Specific Objective 5 – Establish an Operational East African Response Unit.

Activity XIV: Develop a proposal for the establishment of the East African logistic response unit.

This will ensure the feasibility of establishing a self-contained outbreak Logistics Response Unit for East Africa. It is envisaged that the LRU will have a range of logistic operations to support Eastern DRC, Rwanda, Burundi, Uganda, Kenya, Ethiopia and South Sudan.

The ARO/GOARN Logistics Response Unit, Dubai, will provide the model for the comparable standards of vehicle specifications and ancillary equipment to ensure operational compliance with UNDSS Phase 3 and above requirements.
4.6 Specific objective 6: Strengthen Management of Outbreak Supplies within the Region through Installation and Effective Use of the Stock Management and Inventory System (SIMS)

**Activity XV: Implement the Stock Management and Inventory System in at least six countries and the RO.**

The WHO Stock Inventory Management System (SIMS) and the SOP for inventory management have been developed to provide comprehensive transparency on outbreak response equipment inventories and their transaction histories. This system provides an immediately available platform suitable for the AFRO HQ, IST and Country Office management of outbreak and emergency response logistic supplies. A tracking capability linked with GSM is being added.

The SIMS system will provide interface to the Regional Strategic Information System (rSIS) for defining the current status of outbreak response equipment inventories throughout the Region.

*Pre-positioned emergency response supplies at UNHRD in Accra, Ghana: January 2015*
5. IMPLEMENTATION

5.1 Managing Implementation

The three critical points to address for ensuring successful strategy implementation are:

- Securing financial support for all activities, and for the entire five-year implementation period;
- Achieving consensus on implementation of the ERF “all-hazards” logistics component from key stakeholders at the regional, IST, country level (WRs/Programme Directors) and WHO/HQ before implementation commences;
- Recruiting qualified senior logistics personnel to manage implementation of the activities within the strategy;

On project approval, the RLSP and MS Project plan should be re-aligned based on agreed financially-supported activities, human resource availability and the ability to successfully implement each task within planned time frames.

5.2 Project Schedule

On approval of the RLSP, all activities will commence according to the programme schedule and be fully completed within the task-designated project cycle. The variety and complexity of implementing various activities within the strategic plan will result in many activities running concurrently. Time frames of the different activities will be reflected in the MS project plan by defining specific tasks, deliverables and their milestones, clearly mapped into a logical sequence.

5.3 Milestones

Tasks that must be achieved to ensure completion of the key components of the strategy will be defined in the MS project plan as milestones. The various sub-activities for achieving milestones will be constantly monitored to ensure the Change Management process is appropriately recorded and all associated dependencies and activities are reprogrammed to maintain a logical implementation sequence.
5.4 Deliverables

The RLSP contains a number of higher level project elements, all of which involve activities that individually, or in combination with other activities, will result in deliverables of varying significance to maintaining the critical path and overall success of the strategic plan. Specifying key deliverables, in concert with analysis of cross-cutting initiatives that will impact on other project elements and milestones, will be mapped throughout the project cycle. Project Change Management will require all reprogramming of tasks to be approved by DPC and recorded within the MSP or GSM project planning tool.

5.5 Project coordination—Regional Outbreak Response Logistics Adviser

To be effectively implemented, a senior operations and logistics officer with relevant experience in implementation of “all-hazard”, CBRNe and outbreak response preparedness should be recruited for the five-year implementation period of the strategy. The TOR should reflect primary responsibility for coordinating implementation activities and managing the MSP or GSM planning tool.

5.6 AFRO Technical Logistics Working Group

Senior logistic officers currently appointed within the African Region should be approached to form the AFRO Technical Working Group for Logistics. Members of the working group will assume the role of focal points between AFRO HQ project management team, the IST and subregional levels during implementation of the approved strategy initiatives. They will also be required to assume the role of a logistics coordination focal point during an emergency or outbreak response within their subregional areas, providing additional support to the affected WCO and responding logisticians.

5.7 Existing Policy and Standards

Establish and reference the existing Policy and Standards for the activities specified within the Regional Logistics Strategic Plan, to include Procurement, HR Policy, Finance and Operational Procedures. Leverage the existing Operational Guidelines and SOPs to ensure consistent operational logistic processes during all types of responses. Key documents of WHO and other agencies, with established logistic practices for addressing “all hazards” and outbreak response are referenced in Annexes 1 to 20.
5.8 Regional Coordination

Implementation of the Regional Logistics Strategic plan will be supervised by the Director, DPC at AFRO, and managed by the Outbreak Response Regional Logistics Adviser, who will also initially maintain the MSP or GSM plan and coordinate implementation of activities from the strategy, pending appointment of a permanent incumbent. Further activity management opportunities will be leveraged through the AFRO Technical Working Group for Logistics.

5.9 WCO Coordination

Close discussion, negotiation and agreement between the Regional Office and the WCOs will be essential for the successful implementation of the Regional Logistics Strategic Plan. The majority of initiatives and activities identified within the strategy rely on existing personnel at the WCO to support development of regional logistics network capacity and implementation of cross-cutting activities specified in the Emergency Response Framework. In accordance with the ERF, WCO staff must be released by the WRs from existing WCO programme responsibilities to respond to emergencies at the national, regional and international levels.
In addition to the assessment of each specific objective, the following key indicators will be used to monitor progress of implementation of the RLSP.

- RLA appointed and at post;
- Time frame for implementation completed and approved by AFRO management;
- Logistics Technical Working Group established and operational;
- SOP for logistics approved and published.

Implementation of project components will be monitored through quarterly ERP meetings.
The following risks and assumptions underpin implementation of the RLSP:

- WHO focus is on health technical work and outbreak response, specifically on surveillance, case management and health cluster leadership and not on logistics. Maintaining the enthusiasm and support for objectives of the RLSP will be most challenging.

- An all-hazard approach requires a level of collaboration between programmes short on budget and staff, which could be a tall order. The project could start by focusing on outbreak response, and then gravitate gradually towards an all-hazard approach with increasing capacity.

- Project objectives are ambitious, considering funding possibilities. The RLA may have to prioritize specific objectives, if funding is limited.

- Almost all current logistics capacity within WHO is focused on Polio eradication and immunization work. The RLSP premise is based on the ability to co-opt, train and use this cadre for outbreak response, where necessary. Programmes funding staff costs have their own priorities and will continue to focus on those priorities.

- Developing a regional prepositioning hub assumes consent of the host government to all-for-free port status, with all the implications. Compromises may have to be made.
Initially, funding for project start-up will be provided by AFRO and seed funding by USAID.

The Regional Outbreak Response Logistics Adviser will be responsible for finalizing the time frame and budget details. RLA will develop funding proposals for specific activities that are currently unfunded and submit an implementation strategy.

A technical proposal template in support of the East African Logistics Response Unit is provided in Annex 16 for review. On approval of the activity, donor support for the project will be solicited.
<table>
<thead>
<tr>
<th>Specific Objective</th>
<th>Strategy</th>
<th>Key Indicator</th>
<th>Activities</th>
<th>Implementation</th>
<th>Time-line</th>
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<tbody>
<tr>
<td>1. To develop Standard Operational Protocol for outbreak logistics to provide guidance and support to Member States</td>
<td>(i) Develop Standard Operating Procedures (SOP) for AFRO outbreak Logistics in the first 2 years of the project</td>
<td>(a) SOP for outbreak logistics tested, approved and shared with WCO</td>
<td>(i) Develop the draft SOP. ii. Share with AFRO outbreak team and ARO Lo HQ. iii. AFRO LWG to review the draft. iv. Finalize and publish. Share with WCO</td>
<td>Implementation will be led by EPR/AFRO supported by RSU/AFRO</td>
<td>June-Sept 2016</td>
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<td>2. Strengthen logistics human resource capacity within the Region by identifying, profiling, training and networking logisticians who can be deployed to support outbreak response</td>
<td>(ii) Within the first six months of the project develop profile of Logistics Human Resources available within the Region that can be deployed to support outbreak response</td>
<td>(a) A RLA recruited and at post. b. An AFRO logistics working group established and held first meeting with shared minutes</td>
<td>(i) Confirm TOR of RLA and agree on funding period. ii. Recruit a RLA. iii. Deploy RLA and set up office. iv. Establish an AFRO Logistics working Group v. Confirm and contact all members of the working group vi. Agree on a modus operandi and TOR of the LWG. vii. Organize first meeting and agree on regularity of meeting (TC/VC options)</td>
<td>This will be led by the RLA supported by the LO</td>
<td>Sept-Dec 2016 after the RLA is at post</td>
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<td>(iii) Develop in the first 18 months of the project an AFRO Network health logisticians within the Region</td>
<td>Data based on all Health logisticians within the Region established and used to support outbreak response</td>
<td>(i) Identify and collect CVs from all WCO logistics officers working in health sector in their countries. ii. Develop a data base, using the VSHOC and as part of the RRT of all health logisticians within the Region. iii. The data base to be available and used for redeployment of staff to support outbreak logistics. Develop a system of network based on the GOARN model of health logisticians within the Region</td>
<td>This will be led by the RLA supported by the LO</td>
<td>Jan-March 2016</td>
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<td>2. Strengthen logistics human resource capacity within the Region by identifying, profiling, training and networking logisticians who can be deployed to support outbreak response</td>
<td>(iv) Within the first year of the project, develop logistics training modules that could be used to enhance the skills of regional and subregional logistics officers</td>
<td>Standard logistics training modules available</td>
<td>(i) Establish a group of resource people (HQ, AFRO and Others) to support the development of the modules. ii. Review past training formats and agree on the basic modules to be developed. iii. Develop a time line and resource requirement for the development of the modules. iv. Develop the modules. v. Pre-test the modules vi. Review/revise and print</td>
<td>This will be led by the working group with individuals’ assignment specific recommendations. RLA will provide the secretariat backup</td>
<td>Jan 2016 – Dec. 2018</td>
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<td></td>
<td>(v) Support each IST and selected priority countries to have logistics officers to support outbreak response activities</td>
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<td>(vi) Support at least six countries with the highest occurrence of epidemics develop bilateral neighbour country logistics network</td>
<td>(i) Six countries within the Region have bilateral neighbour- hood logistics networks. ii. TWO IST have established subregional health logistics networks.</td>
<td>(iii) Support focal points to initiate the neighbour- hood links. iv. Organize short cross- border meetings. v. Identify the six priority countries with highest occurrence of epidemics within the Region. vi. Establish contact with selected country logistics focal points. vii. Identify focal points within each IST for logistics focal point to coordinate bilateral networks. Focal point can be at the IST or in a WCO. viii. Provide regular guidance and support to initiate and develop the network</td>
<td>This will be led by the IST Focal points supported by the RLA</td>
<td>Sept 2015 – Dec. 2016</td>
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<td>Specific Objective</td>
<td>Strategy</td>
<td>Key Indicator</td>
<td>Activities</td>
<td>Implementation</td>
<td>Time-line</td>
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<td>3. To procure and strategically preposition standardized outbreak supplies and equipment to support a regional rapid-response capacity</td>
<td>(vii) Develop at least three storage hubs within the Region for prepositioning outbreak preparedness and response equipment and supplies</td>
<td>Three regional hubs established with outbreak supplies prepositioned in them</td>
<td>(i) Review the existing structures being used by the UNHRD in Accra and how suitable that can be used for AFRO outbreak response prepositioning, ii. Select and agree on sites for hubs. iii. Develop standard list of materials for prepositioning. iv. Negotiate with host countries for free port conditions. v. Procure the materials. vi. Install stock management and tracking systems. vii. Make hubs operational</td>
<td>This will be led by the WCO logistics focal points supported by the RLA</td>
<td>Sept 2016 - Sept 2017</td>
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<td>(viii) Develop and implement a Warehouse and Inventory Management system for all outbreak stores within the Region in the first year of project</td>
<td>All WCOs with outbreak supplies use warehouse and inventory management systems</td>
<td>(i) Review and adopt the SIM for use for AFRO outbreak response supplies. ii. Incorporate inventory management and tracking tool into SIM. iii. Train selected WCO staff. iv. Install and use the SIM. v. Monitor regular use</td>
<td>This will be led by the RLA supported by LO/RO and WCOs</td>
<td>March 2016 – Dec. 2017</td>
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<td>(ix) Assess and recommend to AFRO management within the first year of the project countries to be selected for the development of first-level response capacity</td>
<td>Criteria developed and countries selected and approved for a first-level response capacity</td>
<td>(i) In consultation with the AFRO outbreak response team develop a criteria and select countries for the development of first-level response capacity. ii. Develop a protocol and TOR for first-level response capacity. iii. Support the development of funding proposals for the establishment of first-level response capacity. iv. Initiate the implementation of the first-level response capacity</td>
<td>This will be led by the RLA supported by LO/RO and WCOs</td>
<td>Sep - Dec 2016</td>
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### AFRO Regional Logistics Strategic Plan 2015-2018

#### Goal, objectives, implementation and indicators

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| 3. To procure and strategically preposition standardized outbreak supplies and equipment to support a regional rapid-response capacity | (x) Develop within the first three years of the project specifications for AFRO rapid response equipment standards specifications | Outbreak response equipment specification for AFRO response equipment developed and approved | (i) In consultation with AFRO outbreak team, develop a standard list of outbreak response equipment.  
  ii. Develop technical specification for each equipment on the list.  
  iii. Initial funding proposal for the procurement of the equipment.  
  iv. Training outbreak response team in the use of the equipment | This will be led by the RLA | Jan - Dec 2016 |
| | (xi) Develop within the first two years of project specifications for logistics pre-deployment preparedness kits | List of the contents and specifications for Standard AFRO deployment kits submitted and approved | (i) In consultation with AFRO outbreak team, develop a list of the contents of AFRO Standard Response Kits for outbreak response.  
  ii. Develop technical specification for each item on the list.  
  iii. Initial funding proposal for the procurement of the materials and supplies.  
  iv. Train outbreak response team in the use of the response kit. | This will be led by the RLA | June 2016 - June 2017 |
| | (xii) Assess and recommend to AFRO management in the first 18 months of the project life, a proposal for regional courier and shipment services | Proposal submitted and approved by AFRO management on shipping arrangements for outbreak supplies. | (i) Review existing arrangements used by WHO HQ and AFRO as well as other UN agencies within the Region for use of courier services.  
  ii. Develop a comparative cost-effective proposal.  
  iii. Submit for approval.  
  iv. Initiate implementation. | This will be led by the RLA supported by outbreak response team and WCO | Sept 2015 - Dec. 2016 |
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<td>4. To develop a WHO/AFRO adversary guide on transportation and shipment arrangements for specimens and outbreak supplies</td>
<td>(xiii) Assess and recommend to AFRO management in the first 18 months of the project life, a proposal for priority shipping arrangements for samples and outbreak supplies</td>
<td>Proposal submitted and approved by AFRO management on courier and shipment services</td>
<td>(i) Review existing arrangements used by WHO and other UN agencies within the Region for shipment of supplies. ii. Develop a comparative cost-effective proposal. iii. Submit for approval. iv. Initiate implementation</td>
<td>This will be led by the RLA with input from LO and ARO Log HQ and supported by outbreak team AFRO</td>
<td>Jan 2016 – Dec. 2017</td>
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<td>5. To establish an operational East African Response Unit</td>
<td>(xiv) Develop within the first six months proposal, including funding proposal for establishment of the AFRO East Africa logistic response unit</td>
<td>AFRO East Africa Logistics response Unit established</td>
<td>(i) Finalize the TOR for the EALRU. ii. Agree on the location of the unit with approval from WCO and host country. iii. Finalize the needs and requirements for the EALRU. iv. Develop funding proposal for approval by WCO and AFRO Management. v. Initiate discussion with donors. vi. Initiate the establishment of the EALRU</td>
<td>This will be led by RLA with support from EPR and LO and the WCO</td>
<td>Jan 2016 – Dec. 2017</td>
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<td>6. To strengthen management of outbreak supplies within the Region through the installation and effective use of the Stock Management and Inventory System (SIMS)</td>
<td>(xv) Implement the Stock Management and Inventory System in at least six countries and the RO within the first years of the project</td>
<td>SIM operational and functional in six countries within the Region.</td>
<td>(i) Select the countries for training. ii. Administrative procedures for securing funding and approval for the training. iii. Develop format and schedule for the training. iv. Conduct the training. v. Ensure the SIM is installed in the offices that have received training. vi. Follow-up for implementation</td>
<td>This will be led by the RLA with input from LO and ARO Log HQ and supported by outbreak team AFRO</td>
<td>Jan 2016 – Dec. 2018</td>
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