

Kartong

community pharmacy

functional commerce to create a sponsor independent sustainability in drug availability

Follow up November 2007 Tom & Manon Gelevert

Friday 16th November

Arrival in Banjul in the evening. Welcome by Lamin and the lodge staff.

Saturday 17th November

We met Ousman Camara, the “pharmacist”, at the lodge. We made a visit to the town with Ousman. Walked through the town, short visit to the clinic and the pharmacy. First impressions are good! Visit to Ousmans family and to the crocodile pool.

Sunday 18th November

- Discussion with Lamin what to do these two weeks. Making plans. Program see below.
- Meeting with Alhagie Jabang, the accountant of the FOFDHIK. We discussed the following subjects.
 - Fee
Alhagie thinks that the fee of 8 Dalasis is somewhat low. 10 Dalasis should be a reasonable fee according to Alhagie. With a fee of 10 Dalasis the pharmacy project would be more sustainable; salary can be paid as well as the costs for a new order.
 - Role as controller
Alhagie didn't show up in the pharmacy last months. He gave two reasons for it. The first reason is his new job at the World Bank, which costs him a lot of time. The second reason according to himself is the Health Board. At the time that only FOFDHIK existed (and not yet the Health Board) he knew his role as an independent accountant and he acted like that. But the establishment of the new Health Board made his role unclear. Alhagie didn't hear anything from the Health Board so he wasn't sure whether they still need his contribution. We asked him to continue controlling the progress of the Kartong community pharmacy. We handed over the two reports of September and October written by Ousman. Alhagie will read the reports and after that he wants to give his opinion about the reports. We will advise the Health Board to ask Alhagie Jabang to do the financial control of the Kartong Pharmacy.
 - Pharmacy and clinic
Alhagie's opinion is that Ousman is doing a very good job. The pharmacy is a big improvement for the Kartong community. Until now there were not so many prescriptions because there was no prescriber. The midwife Sakary was not around for a long time. According to Alhagie he is not doing a good job. Alhagie thinks that Sakary has to be warned and that if he is not taking his job serious, he should be fired. Lamin does not agree with this. This is one of the several disagreements between Alhagie and Lamin.
 - Army camp
According to Alhagie the Army camp with the doctor does not play an important role in the project. The doctor has only few drugs and not many people visit him. On the contrary he is very useful also for the clinic, because he sometimes assists with first aid cases.

Monday 19th November

- Kartong community pharmacy
Meeting nurses Habbie and Fadou, mr. Bojang, the labman and Sakary, the midwife. Ousman explained us his way of acting. Pharmacy looks very good. He takes the administration very serious. We did some stock checks and registered the expiry dates. See “Report pharmacy” for more detailed information.
- Visit to the army camp
Meeting with doctor Bubacar Mballow. Man in charge in the army camp is Sergeant Abdul. The army is there to defend the border with Senegal. In order to get information from the villagers their strategy is to serve the people of the village, including medical treatment. The doctor in the army camp has only few different drugs. They are all for free (the army soldiers are not allowed to collect money from villagers). All drugs are donations. Not sustainable. Not always the same drugs. If he hasn't the drugs he sends the patients to the clinic/pharmacy. Also for lab-tests he sends them to the clinic. Only few patients. In his administration we saw in august on different days respectively 5, 7, 1, 6 patients including soldiers. He is very useful also for the clinic, because he sometimes helps with first aid cases, and other medical treatment.

Tuesday 20th November

Visit to Brikama.

- We visited the Brikama Health Centre (BHC). We have seen the Pharmacy and we have talked to the senior pharmacist (Ibrahim or CC (Sisi?) BHC is a governmental Health Centre. Patients only have to pay 5 Dalasis for treatment including medication. The problem of the pharmacy is that they don't always get enough stock from the Central Medical Stores. If that is the case, they have to refer their own patients to a commercial pharmacy. This is also the case when a drug does not belong to their normal assortment. In the commercial pharmacy the patients have to pay a lot of money for the drugs. This hospital serves as a regional hospital with a lot of (out)patients.

We explained to Ibrahim our Kartong Pharmacy Project. He was enthusiastic and thinks that it would be a good idea for Brikama. He thinks that many patients will visit such a pharmacy because more patients are able to afford the drugs because of the lower price.

We have also discussed certain things with the in charge of the hospital.

In the pharmacy there is no administration of stock. Also no patient administration.

In our opinion not very organised and a lot of mess.

- Visit to Kairaba Pharmacy in Brikama

We visited the biggest commercial pharmacy in Brikama; Kairaba pharmacy. This pharmacy is owned by an Egypt Company. They have enough stock and a big assortment. Drugs are imported from different countries by the head office of the company and distributed to the shops. In the shop there is no administration except for the sales administration. Patients need a prescription but 'sometimes' drugs are sold without prescription. We asked for prices, but they did not want to give this. (One of the employees advised us to come back when the boss was not around! Then he could give more information) We heard from several persons that prices here are very high. (bargainable?)

At the time we were there one patient bought 200 tablets Brufen 200mg: 100 Dalasis. Kartong Price = 34 Dalasis.

Wednesday 21st November

- Kartong community pharmacy

We checked the stock of the product and we have written down the 6 months

sales of all products. This information can be used for the next order. We discussed some things with Ousman.

See "Report pharmacy" for more detailed information.

- Visit to Katak Buduk in the Casamance, Senegal

Lamin Jattah = chief, Amadu Badji=imam, Abdul Asis, Jammah Badjah and Janna Basanko= clinic workers

We were invited by the people of the Senegalese village Katak Buduk. We took the bush road instead of the main road so passports were not needed. We travelled by bike crossing the Allahein River partly by walking through the water (getting wet shoes!) and partly by taking the water taxi (small canoe with boatmen).

We got a warm welcome by the villagers. About 40 people were present at the meeting. Among the chief secretary, the in charge of the clinic, the imam and the elderly of the village. It was a very official meeting! Every important person has acted as a spokesman. Every speaker welcomed us and explained the situation of the village. They all asked us to help them. The village is poor and the clinic is very small and unequipped. They have very few drugs. A hospital (in Senegal) is 82 km away and they have no transport.

They need drugs, solar system, car, materials and 2 beds.

We have told them that we shall try to do our best and to discuss this in the board meeting of Farmacie Mondiale. We explained that our foundation focuses on availability of drugs, not cars, bed, etcetera. We are not a donor.

Difficulties:

- Remote area, especially during the raining season.
- Different languages, so an interpreter is required.
- Rebellions in the bush

Possibilities: If Kartong project expands maybe also to Katak?

Positive condition: Very clear demand for help.

Thursday 22nd November

- Kartong community pharmacy

We finished checking stock. Corrections in stock have been made for omeprazol, ORS, chloroquine tablets 100mg, chloroquine solution, amoxicillin 500mg, cotrimoxazol syrup and tablets, omeprazol and silver sulfadiazine ointment.

Ousman is very sad about the stocks that are not correct. (He really was in our opinion, not a matter of good acting!) This shows he takes his job very serious. We explained to him that everybody makes mistakes; there is nobody who can work without making any mistake!

See "Report pharmacy" for more detailed information.

Friday 23th November

- Meeting with Mr. Cham and Mr. Manly-Rollings, pharmacists of Imres Gambia.
Present: Mr. Cham and Mr. Manly-Rollings of Imres Gambia, Lamin Jammeh, Alhagie Jabang, Tom Gelevert, Manon Haas.

At this moment Imres Gambia has only a small amount of stock. This is due to problems with payment between Imres Gambia and Imres Netherlands. As a result Imres Netherlands didn't send a new container with drugs to Imres Gambia. According to Mr. Manly-Rollings it will take about 2 months between ordering at Imres Gambia and receiving the drugs (transport by boat).

About the quality of the drugs they trust on analysis certificates that they receive from Imres Netherland. They don't do quality controls by themselves.

They have a delivery service for Serrekunda and surroundings but Kartong may be a problem for them. According to Lamin this is no problem at all. They can come and get the drugs from Imres in Serrekunda.

We agreed to send a list with 6 months sales of the Kartong community pharmacy . Then they will let us know which drugs they have in stock and whether it is financially interesting to order the drugs at Imres or not.

Plans for cooperation

At the beginning of the meeting Mr. Cham's mission was to realise access of drugs to all Gambian people, especially in the remote divisions. He wanted to realise this in cooperation with the government (and so with the Central Medical Stores) and with help of Farmacie Mondiaal. With this partnership a lot of pharmacies shall have to be established.

As a reaction we made clear to Mr. Cham that Farmacie Mondiaal is just a small NGO that offers support in the form of knowledge and training. At this moment Farmacie Mondiaal is not able to do/make big investments. In the case of the Kartong community pharmacy the Farmacie Mondiaal strategy is to start on a small scale/basis and if this appears to be a success to expand it one by one.

Mr. Cham made clear to us that it is crucial to get consent/cooperation of the government. And you get the consent of the government only if a certain part of the country is involved (certain scale). So a legal network of NGO's is necessary to get governmental support.

So the total concept has to be expanded to a bigger region and so to a bigger number of pharmacies. According to him this expansion could be realised in for example 3 phases; 1 Kombo South 10-15 pharmacies, 2. Kombo Region and 3. Further expansion.

Beside that, if you start with 10 to 15 pharmacies you can order a complete container with drugs which is cheaper and faster.

To be able to realise the lowest possible price a cooperation with Jammeh Foundation for Peace (JFP) is important to get exemption of import duties.

Another important aspect is the new health act that says that certificated staff is necessary to guarantee the quality of the healthcare. For example the person in charge in the Kartong pharmacy (Ousman Camara) has no certificate. This may give problems with the new act especially if the Kartong project is going to be expanded.

If Imres , FOFDHIK/Health Board, JFP and Farmacie Mondiaal work together Imres in person of Mr. Cham and Mr. Manly Rollings can assist in getting staff trained and they can monitor the pharmacies.

According to finance it is not necessary for Farmacie Mondiaal to do big investments. Every village or district gets its own Social Developing Fund (SDF) provided by government. These budgets can be used to buy drugs etcetera. Finally the SDF's will become responsible for their pharmacies.

For the pharmacies we advised to use the Kartong model in order to get a sustainable system. If Imres, FOFDHIK/Health Board, JFP and Farmacie Mondiaal cooperate drugs can be available for the lowest possible price for all people in remote areas.

Other things discussed

- 13 pharmacists in Gambia.
- 5 Dalasi system for health exists since 1988.
- Government has visited the clinic and pharmacy in Kartong. According to Alhagie the way Ousman is working and the fact that he is the person in charge is ok despite the fact that he is not certified.

Saturday 24th November

- Visit to Nyoffeley Health Centre with Lamin and Ousman (nephew of Lamin)
In the health centre we had a meeting with the chief of the village, the chairman of the village development committee (VDC), the staff of the clinic and some elderly.

They explained the situation of their clinic. Until now they always received drugs from donors or they receive money from donors to buy drugs. But recently the donors stopped donating.

Because of this situation they realised that they need a sustainable way of buying and selling drugs. They heard about the Kartong pharmacy project and they are very interested. So they asked us for help.

They handed over a report of the health centre as well as a list of prescribed drugs. They have also shown us the clinic which looks rather equipped.

- Kartong community pharmacy

We checked the bank account. The bank account balance on the 24th November is 23644 Dalasis.

At the first sight it looks good. There are 2 withdrawals; 10.000 Dalasis was paid back to the Equator foundation and 4000 Dalasis was used for the second drugs order to take the drugs from the airport and to do paper transactions etcetera.

Two signatures are needed to withdraw money from the bank; Ousmans as well as Lamins signature.

Later we compared the bank account with the weekly sales administration.

The bank and the way they act seems to be correct.

See "Report pharmacy" for more detailed information.

Sunday 25th November

- Meeting with the Health Board

Members of the Health Board:

- Muhammed Jalom Jabang – principal lecturer and head of school of public health, Gambia college, Brikama.
- Sanna Sambou – National programme coordinator integrated diseases surveillance and response, Department of State for health, Gambia Government, Banjul.
- Dr. Alagie Touray – Medical doctor, private practitioner, Bambo clinic, Banjul.
- Lamin K. Bojang – Laboratory technician, Kartong health facility, Katong.
- Lamin Jarjou – Teacher, Bottrop senior secondary school, Brikama.
- Amadou Basang Sambou- Member of village development committee (VDC), ambulance driver, Kartong.
- Babucarr (Badibou) Sambou – Teacher, Farato lower basic school, Farato.
- Kanjura Topuray – VDC member, Kartong.
- Government representative at the health facility.

Present:

Mr. Jalom Jabang, Mr. Babucarr Sambou, Mr. Lamin K. Bojang, Tom Gelever and Manon Haas

The Health Board has been established in July 2007. The responsibility for the clinic and its staff has been handed over from FOFDHIK to this Health Board. Although the missions and the ideas of FOFDHIK were ok, they did not manage to realise them. And beside that they didn't communicate their ideas to the community of Kartong. And because of that FOFDHIK did not get so much confidence from the people of Kartong.

That's why the village development committee (VDC) and Dirk Rezelman decided to establish the Health Board.

The Health Board (HB) manages the clinic, pays the salaries to the staff and is responsible for the clinic. Beside that the HB is responsible to improve the clinic in such a way that this system can be expanded to other communities in Kombo south.

FOFDHIK still exists, but their role has been changed. FOFDHIK is responsible for raising funds that the HB has to invest in the clinic.

We informed the HB that at this moment there is a lot of confusion and commotion among different people that are involved in the Kartong clinic. For example the accountant Alhagie Jabang, member of FOFDHIK, doesn't know anymore whether his efforts are still needed.

According to the HB the roles have been changed and Mr. Jalom Jabang is now responsible to monitor Ousman Camara.

We advised the HB to organise a meeting with all the people that are involved in the Kartong clinic i.e. FOFDHIK, staff of the clinic and the pharmacy.

According to us it is important to organise this as soon as possible to make clear to everybody what every one's role is. This can take away a lot of confusion and dissatisfaction.

As a member of Farmacie Mondiaal we were very happy to hear from Jalom Jabang that the HB is very satisfied about the work done by Ousman Camara. They have seen that Ousman is doing a very good job. We totally agree with these conclusions.

We asked the HB why Ousman has to write a new application letter. The HB answered that they want to manage the clinic in a professional and legal way. As they didn't get enough information from FOFDHIK they asked directly to all people from the staff to write a new letter of application. And also they want to do interviews with the staff to get more information about them. For every person they want to make a file. They want to use this for the training and development of the staff.

The HB elucidated that it is absolutely not the intention to apply other people. Maybe some people are afraid that this new application procedure is organised to apply friends or relatives of the HB members. But this is definitely not true according to Mr. Lamin K. Bojang. The HB realised that it is important to keep the committed staff from Kartong because they know Kartong and its inhibitors.

Ousman Camara wants to be monitored according to the pharmacy guidelines. According to him nobody did this in the past months. However, the HB in person of Heleen Sombroek and Jalom Jabang did check him. Maybe Ousman did not see this as an official check.

So, this is one of the confusions and misunderstandings.

The HB now promise that they will improve it.

In general changes always cause commotion and confusion. To minimize this, one has to try to get confidence and support. These things can be achieved by good communication and explanations.

So a meeting should be organised as soon as possible.

So far the minutes of the meeting. We hesitate about the capabilities of the Health Board and about their intentions. They don't get the confidence of the staff of the clinic/pharmacy. We heard to many different stories. We don't know which story is true. We will inform Dirk Rezelman about this subject.

Monday 26th November

Trip to Serrekunda and Gunjur to visit several places

- Visit to Step Stop pharmacy and wholesale

The pharmacy and wholesale part look very good, clean and organized.

We talked with the lady in charge of the wholesale. If we have a list of drug amounts she can make an invoice. For now we asked some prices of the drugs. They order the drugs from England, France and India. The prices of the drugs differ per order and they cannot guarantee the quality. Some drugs like chloroquine injections are out of stock. In this case they bought the injections from Kairaba pharmacy and sell them in their own shop.

Some prices:

Product	Quantity	Price (Dalasis)	Price/unit (Dalasis)
Amoxicilline 500mg	100 st.	195	1,95
Ibuprofen 200mg	100 st	28	0.28
Hydrocortison ointment	12 tubes	960	80
Multivitamin tabs	1000 st.	125	0.125
Paracetamol 500mg	1000 st.	180	0.18
Chloramphenicol eyedrops	10 bottles	150	15
Cyproheptadine tabl	100 st.	150	1.5
Paracetamol syrup	12 bottles of 60ml	192	16
Chloroquine syrup	12 bottles of 60ml	192	16
Multivitamin syrup	12 bottles of 200ml	480	40
Amoxicillin syrup	12 bottles of 60ml	360	30
Salbutamol tabs	1000 st	150	0.15
Quinine tabs	100 st	800	8
ORS	50 sachets	255	5.1
Whitfield ointment	20 tubes	260	13
Chloramphenicol syrup	60 ml	25	
Ampicillin syrup	100 ml	10	
Needle + Syringe 5 ml	100 st	175	1.75

- Visit to Kairaba pharmacy

We also visited Kairaba pharmacy in Serrekunda. This is the same company as we have visited in Brikama.

The place looks a bit dusty. Kairaba orders its drugs at its own wholesale compound. The quality can not be guaranteed.

Some drugs are out of stock. Seems not very reliable!

They didn't want to give us prices of the drugs. So we got only a few prices.

Product	Quantity	Price (Dalasis)	Price/unit (Dalasis)
Paracetamol 500mg	1000 st.	180	0.18
Amoxicilline syrup	12 bottles of 60ml	360	30
Chloroquine injections	100 amp.	350	3.5
Hydrocortison ointment	12 tubes	444	37

By comparing these prices with the Kartong pricelist most drugs are more expensive at Step Stop and Kairaba pharmacy except for the chloramphenicol eyedrops of Step Stop pharmacy.

If drugs are ordered in the Gambia the fee can be a little bit lower because the transport costs are less than when we order the drugs in Holland.

For now, according to us, it is not advisable to buy the drugs in Gambia. The quality cannot be guaranteed. And there are also some drugs out of stock.

They companies here order every time at different wholesalers. Prices can fluctuate a lot. It looks like if they have not a very organized ordering systems.

The advantage is that the transport costs are lower. But according to us the quality is very important. And on the other side, it takes a lot of time buying the drugs in the Gambia and going to Serrekunda many times. You also have to count for these transport costs and time.

- Visit to Roland Clinic

Roland Clinic is a clinic run by a Gambian NGO. They have one doctor and 4 nurses. They have 4-8 patients a day! Ousman used to work for them. It was a very dirty place!

- Visit to Ousmans former shop in Gunjur

Ousman has still some stock in his shop. He can not sell that stock anymore so he asked for compensation because when he started the work in Kartong he had just bought new stock (he had been unaware that he had the job). We asked him to write down the stock and the prices. After that we also calculated the amount of money for the drugs. We have given 1000 Dalasis for this old stock. Ousman has written a Memorandum Of Understanding (MOU) for this. But Ousman also wants money for the rent he has to pay for his shop, because he still rents that place. We decided not to give him this money, because according to us, there is no need to rent that place any longer. If he wants to rent it, this is his own decision. He has to pay for it himself, not Farmacie Mondiaal!

- Visit to Gunjur fishing area
- Visit to Tanji fishing village

Tuesday 27th November

- Kartong community pharmacy

Checking sales administration.

Tom has installed a cupboard in the pharmacy and Ousman has cleaned the pharmacy.

See "Report pharmacy" for more detailed information.

Wednesday 28th November

- Kartong community pharmacy

Discussion about sales administration with Ousman.

We wrote some recommendations for Ousman.

See "Report pharmacy" for more detailed information.

Thursday 29th November

- Meeting with the Jammeh Foundation for Peace

Present: Ansumana Jammeh, Sulayman Badjie, Lamin Jammeh, Tom Gelever and Manon Haas

The Kartong pharmacy project has been explained. They were very enthusiastic and they would like to collaborate.

We need governmental support and with the Jammeh Foundation for Peace (JFP) this is more easy to obtain. It is also easier to import the drugs without paying tax when we work together with the JFP. This makes the drugs cheaper for the patients.

At first we have to make a good plan and then we can explain this plan to the Minister of Health. The Ministry can give its ideas. After that we will know what the possibilities are for expanding the project with governmental support.

We have mentioned that we can start in a few places and expand it later.

Badjie said that the president always thinks big so maybe he wants to start the project in the whole country!! We made clear, that in our opinion this is not the right strategy to succeed.

We have given our email address and we have made the arrangement that we will discuss everything in the board of Farmacie Mondiaal and that we will make a plan and email this plan to mr. Jammeh and Mr. Badjie.

- Discussion with Lamin about the Health Board and the way things are going.
 - According to Lamin mr. Jalom Jabang has done a similar project before and this project has been spoiled by him. That's why everybody has lost confidence in him. Lamin also has no confidence in him.
 - Lamin let them have their way, but when it will give to much problems he will stop them.
 - Lamin knows exactly what the problems with the Health Board are and he knows how they (do not) function.
 - Lamin told us that the board never talks to other people about their meetings and things. According to Lamin the staff of the hospital has to become part of the Health Board together with one independent person.
 - Lamin doesn't want to talk to much about the Board with other people because that gives to much trouble. But he knows exactly what to do.
- If things are going wrong Lamin wants to report this to Dirk, because he doesn't want the whole clinic to be spoiled. That's also Lamins responsibility.

Appointment letter of Ousman

FOFDHIK should have made the appointment letter for Ousman. Alhagie has made a concept but that was not given to Ousman. Now FOFDHIK has handed over the responsibility of the clinic to the Health Board. So at this moment it is difficult for FOFDHIK to give an appointment letter to Ousman.

Loan for drugs for Nyoffeley Health Centre

We have calculated the total loss of income for the pharmacy as a result of sending drugs to the Nyoffeley Health Centre instead of selling these drugs in the Kartong Pharmacy. This loss of income is 10000 Dalasis caused by missing the fees. We have shown this to Lamin and we have asked if he has already paid the money for the loan to Ousman.

Until now he has not paid, but he wants to do it soon.

We have also explained that we understand the reason why he has given the drugs to Nyoffeley Health Centre, but we explained that the Kartong pharmacy can not act as a wholesaler. This costs too much money and then the system is not longer sustainable.

- Visit to the Kachikally crocodile pool.

Friday 30th November

- Kartong community pharmacy

Final day in Kartong. We have discussed the recommendations with Ousman (see "Recommendations").

We have helped to fill in the new forms for stock administration by transferring the actual stock to a new form. So from now he can use the new forms.

See "Report pharmacy" for more detailed information

Return home in the evening.

General description

Farmacie Mondiaal can do a lot in Gambia. In most clinics and hospitals the pharmacy part is not organized very well and because of that they don't have (enough) drugs.

We have had some demands for help. We explained the Kartong-concept (paying cost-price plus fixed fee for drugs) to several organizations, clinics and hospitals. It seems that people are very enthusiastic (maybe common politeness?) Imres and JFP are two of the organisations that were enthusiastic about the concept. They would like to cooperate with Farmacie Mondiaal to implement this concept in a bigger scale. We have to discuss this.

The organization of the pharmacy project in Kartong is functioning quite well. Most guidelines are followed up and the place looks organized, clean and good. People in Kartong appreciate the pharmacy. The Kartong-concept has been accepted by them. The prices of most drugs are lower than in commercial pharmacies. However, two important problems are that the number of patients is less than expected and that the project is not sustainable until now.

Some items were learned

Pharmacy

- Ousman is very negative about the Health Board. If Mr. Jallom is the person who's going to check him, he wants to leave the place immediately! Ousman is convinced that Jallom is corrupt. Lamin is aware of this problem.
- We gave Ousman 2000 Dalasi for his stock in his shop in Gunjur. He also asked for compensation for the rent of his shop. We have not paid anything for that. Going on renting that place is his own decision.
- Number of prescriptions is low. One reason is that there is no prescriber. Now Sakary is back, so maybe the number of patients will rise. The fee is based on 45 prescriptions a day. It is the question if this can be reached, because it is a small clinic and not so many patients visit the clinic.
- The assortment has to be adjusted for the drugs mentioned above.
- When these adjustments have been done, then the drawer-cupboard has to be rearranged in alphabetical order.
- The six months turnover can be used for the next order.
- Sales administration and the bank account has to be checked well next time, because at this moment there is a shortage of at least 5000 Dalasis in 10 months.
- A computer course for Ousman is a good idea (Word, Excel). Ousman has to ask for a quotation. Problem is that he has no transport to Brikama. So he wants a motorbike!
When he's doing a course during the day he cannot work in the pharmacy and we think that is not very desirable!
- Too many patients pay on bill. Ousman doesn't have a good administration for this and we don't know where that amount of money is. Ousman wants to stop these payments on bill. This has to be monitored.
- The pricelist has to be adjusted because of the change rate Euro-Dalasi. This has to be checked regularly.
- Expiry dates have to be checked according to the new guidelines. At this moment no attention is paid to this.

Other

- The 5 Dalasi system exists since 1988! The government is now thinking about how to change and how to improve the health system.
- There are only 13 pharmacists in Gambia.
- Commercial pharmacies in Gambia buy their drugs at different suppliers outside Gambia. Prices differ per order and also the selling price differs per order. They cannot guarantee the quality of the drugs.
The way they buy their drugs doesn't look very organized.
- Imres has a low stock. There are problems between Imres Gambia and Imres Netherlands.
- There is a new act that says that health centres and pharmacies need certified staff. If we will expand the project, we have to look for certified staff or we have to educate them.
- Mr. Cham and Mr. Rollings of Imres can help to educate the staff.
- If we want to expand we need support of the government. Cooperation with JFP will make this easier.
- The Health Board is not functioning well at this moment. There is a lot of confusion and dissatisfaction among the staff of the clinic. Lamin knows about this and keeps his eye on this.

Development / future

- Pharmacy in Kartong is not sustainable at this moment. What are we going to do?
We have to discuss this and decide what we are going to do.
- We have to decide what to do with the different demands for help (Nyoffeley Clinic, Katak Buduk in the Casamance).
- We have to decide whether we are able to expand the project and if so, with which partners or without any partner?
- Where are we going to order the drugs for the pharmacy?
We now order the drugs at IDA in The Netherlands.
If we decide to order drugs in Gambia, Imres is the only option to order. Other wholesalers cannot guarantee the quality and the way they order drugs doesn't look very organized. The prices differ too much. They order at different wholesalers outside the country.

We have to send Imres a list of six months sales. They can check what they have in stock and what the price is. The same to IDA. After that we compare the prices. With this comparison we can decide whether ordering drugs from Imres Gambia is really a good option.

To avoid paying import duties we need the JFP to import the drugs. Then we don't have to pay tax and that makes the drugs cheaper.

- The JFP is very enthusiastic about the Kartong pharmacy concept. They want to cooperate. We have to decide what we want: do we want to expand the project? How much money is available?
For expansion we need the support of the government and the JFP can make this much easier.
If we decide to work together with the JFP we have to make a plan that can be discussed with the Minister of Health.
- Mr. Manly-Rollings and Mr. Cham are also enthusiastic about the Kartong pharmacy concept. They also want to cooperate. What are we going to do? They also think about cooperation with JFP, Imres Gambia, Farmacie Mondiaal.
- If we expand the project we need certified staff or we have to educate the staff. Mr Manly-Rollins and Mr. Cham can assist us in training staff.
- For the Kartong pharmacy we have to decide (with the help of the six months sales report) which drugs, which amounts and when to order.

Conclusies

Conclusie wat betreft Kartong community pharmacy

De apotheek loopt organisatorisch goed; dat wil zeggen dat de guidelines goed opgevolgd worden, de administratie klopt grotendeels, de apotheek ziet er netjes uit en Ousman lijkt het werk serieus te nemen.

Het principe van de fee lijkt geaccepteerd in Kartong en mensen in de plaats waarderen de apotheek en zijn er blij mee.

Qua administratie zijn er een paar dingen aangepast, wat het eenvoudiger moet maken voor Ousman en overzichtelijker vanuit Nederland. We moeten er dicht op blijven zitten, zodat het ook voor Ousman duidelijker wordt.

De geneesmiddelen zijn (bijna) allemaal goedkoper dan bij andere commerciële apotheken. En de middelen zijn van goede kwaliteit wat je ook niet overal kunt zeggen.

Enkele minpunten zijn het grote geld tekort en het lage aantal voorschriften. Dit geldtekort moet goed gemonitord worden. Vanuit Nederland moeten we hier ook meer op zitten en Ousman moet ter plekke vaker gecontroleerd worden. Bij een volgend bezoek moet hier goed naar gekeken worden. Het aantal voorschriften zal alleen stijgen als er een voorschrijver in de kliniek is. Taak om hier samen met stichting Evenaar aan te werken.

De apotheek is op dit moment mede door boven genoemde minpunten niet sustainable.

Maar naar ons idee voegt de apotheek wel echt iets toe voor Kartong en help je er toch veel mensen mee.

Daarom adviseren wij de apotheek voorlopig te laten bestaan. Dit betekent wel dat Farmacie Mondiaal geld moet investeren!

De apotheek loopt ook nog geen jaar, dus het kan best zijn dat het nog beter gaat lopen.

Eventueel kan de fee aangepast worden naar aantal voorschriften.

Conclusie wat betreft uitbreiding

Eerst zorgen dat Kartong Pharmacy goed gaat lopen (sustainable). Het is nu te vroeg voor uitbreiding op grote schaal (met Imres en JFP en overheid).

Als we uitbreiden, dan eerst met 1 apotheek, bijvoorbeeld in Nyoffele. Op basis van alleen de apotheek in Kartong kun je eigenlijk niet zeggen of een apotheek werkend met het Kartong principe van de fee, op deze manier ooit sustainable kan worden en hoe het idee van de fee wordt geaccepteerd en uitpakt. Alleen al om meer duidelijkheid hierover te krijgen. zou het goed zijn om eerst op 1 plek uit te breiden en het niet direct groot aan te pakken. Wie weet wordt het een fiasco en dan heb je er wel zoveel tijd en geld ingestoken!

Daarbij heb je voor 1 apotheek nog niet direct overheid toestemming nodig en wat betreft gecertificeerd personeel zal het met 1 apotheek ook nog wel meevallen. Als we op meer plekken gaan uitbreiden, moeten we wel toestemming aan de overheid vragen en wordt het gecertificeerde personeel ook eerder een issue.

Wanneer langzame uitbreiding met 1 andere apotheek goed gaat, kunnen we eventueel met JFP/Imres proberen heel Kombo South aan te pakken.

Aan de andere kant is FM in huidige vorm niet in staat om zo'n groot project uit te voeren; ten eerste hebben we veel geld nodig en ten tweede zijn er veel mensen nodig die er veel tijd in moeten kunnen steken. Als dit niet te realiseren is, is het de vraag of het project op zo'n grote schaal een succes wordt. Ervaring is dat je er vooral in het begin toch op moet zitten en daar is geld, tijd en menskracht voor nodig.

Aan de andere kant ligt hier wel een grote uitdaging en mooie kans voor FM om projecten op te pakken. Ook dat moeten we niet uit het oog verliezen!

Grote vraag is dus steeds: Wat wil FM en welke kant wil FM op?