



INSTITUTIONALIZATION OF THE ADS SELLER AND OWNER TRAININGS

Revised Model for Institutionalization of the ADS Trainings in Uganda

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ACRONYMS AND ABBREVIATIONS

ADDO	Accredited drug dispensing outlet
ADS	Accredited Drug Shop
DADI	District Assistant Drug Inspector
EADSI	East African Drug Seller Initiative
EDCO	Enterprise Development Company
FINS	Fort Portal International School
ICCM	Integrated Community Case Management
IIHS	International Institute of Health Sciences
MAK	Makerere University
M&E	monitoring and evaluation
MOES	Ministry of Education and Sports
MOH	Ministry of Health
MOU	memorandum of understanding
MSH	Management Sciences for Health
NDA	National Drug Authority
PSFU	Private Sector Foundation Uganda
PSU	Pharmaceutical Society of Uganda
SDSI	Sustainable Drug Seller Initiatives
SEAM	Strategies for Enhancing Access to Medicines
TOT	training of trainers
UAHEB	Uganda Allied Health Examinations Board

1.0 INTRODUCTION

1.1 Background

The Sustainable Drug Seller Initiatives (SDSI) programme builds on the Management Sciences for Health (MSH) Strategies for Enhancing Access to Medicines (SEAM) and East African Drug Seller Initiatives (EADSI) programmes. Those programmes focused on creating and implementing public-private partnerships using government accreditation to increase access to quality pharmaceutical products and services in underserved areas of Tanzania and Uganda. The new programme's goal is to ensure the maintenance and sustainability of these public-private drug seller initiatives.

In Uganda, EADSI adapted Tanzania's accredited drug dispensing outlet (ADDO) model for Uganda and the concept was introduced successfully in Kibaale district. Results from the project evaluation showed that district health officials, shop owners, and sellers have embraced the Accredited Drug Shop (ADS) initiative.

The objective of SDSI in Uganda was to enhance accredited drug seller initiatives' long-term sustainability, contributions to community-based access to medicines and care, and ability to adapt to changing health needs and the health system context. The sustainability of the successes achieved under the EADSI programme depends highly on the availability of well-trained and competent sellers who can provide services in the established outlets. The demand for and attrition of sellers was addressed through continuous training and retraining of new and old sellers with donor funds. The situation raised concern for programme stakeholders, including regulatory authorities, because a more sustainable way of training sellers was needed in order for the programme to continue achieving positive results in the short and long term. Makerere University (MAK) collaborated with SDSI/MSH to identify and implement a sustainable model for ensuring availability of trained ADS sellers and owners.

During the initial phase of the SDSI/MSH/MAK project collaboration in 2012, the Makerere University team carried assessments and stakeholder consultations to obtain information on the modalities for which the ADS sellers and owners trainings can be institutionalized so as to ensure sustainable availability of ADS sellers. The modalities/approaches identified were agreed upon at a stakeholders' workshop; they included a review of the ADS seller curriculum and the institutionalization of the ADS seller and owner trainings.

During the second phase of the SDSI project, the Makerere University team carried out data collection using key informant guides for central and ADS districts and documentary reviews in order to come up with the criteria for selection of health training institutions to carry out the ADS sellers and owners' trainings and identify the roles various stakeholders can play in ADS trainings institutionalization. Makerere University in partnership with EDCO International Ltd. also carried out assessments to identify required competencies of ADS sellers and owners and changes in the ADS curriculum. These changes were necessary to ease the training of the ADS sellers and owners and most importantly equip the trainees with knowledge and skills to respond to the changing trends in health problems in their communities.

Based on the criteria agreed upon by stakeholders, the Jinja International Institute of Health Sciences (IIHS) and Fort Portal International Nursing School (FINS) were selected to conduct the ADS sellers and owners' trainings. After selection, these institutions were fully engaged and

sensitized on the SDSI project. Seven participants from each school were selected to attend training of trainers (TOT).

After the TOT, the institutions adopted the ADS curriculum and developed an implementation plan for the start of the ADS trainings. The institutions also signed a memorandum of understanding (MOU), undertook mobilization, and sensitized the community on the ADS trainings.

Throughout the institutionalization process, feedback was obtained to further improve the process, training materials, and curriculum. Lessons were also learned. These helped to refine the institutionalization model.

This document presents the revised institutionalization model for ADS seller and owner trainings in Uganda. In addition, the document provides an overview of the core curriculum components for the ADS sellers training. The institutionalization strategy aims to ensure a sustainable availability of trained ADS sellers and owners in Uganda.

2.0 OVERVIEW OF THE ADS TRAINING CURRICULUM

2.1 Competences of the ADS Sellers and Owners

On completion of the ADS course, the trainee shall be expected to exhibit the following competences: evaluating, managing, and referring patients; correctly reading, interpreting, and dispensing prescriptions; effectively communicating with patients; counselling clients on optimal medicines use; advising on care for newborns and family planning; providing first aid; managing children under five years using the Integrated Community Case Management (ICCM) approach; maintaining compliance with regulations and keeping required legal and requisite records; managing medicines inventory; properly storing medicines; and demonstrating professional conduct and health-related ethics.

2.2. Structure and Design of the Curriculum

To empower an ADS seller with the requisite competences, the ADS curriculum is divided into four themes. Themes 1 and 2 are interrelated and will be taught together, and themes 3 and 4 will be taught independently, totalling to 4 weeks of intensive training, followed by a one-week practicum.

The themes are designed in a spiralling manner—that is, knowledge of one theme helps the trainee to understand the next one. Theme 1 consists of general and legal aspects of drug sale and use, theme 2 focuses on medicine management, theme 3 is dedicated to actual management of common illnesses that affect the community, and theme 4 consists of business essentials. Such an arrangement allows for well-sequenced and coordinated learning.

The design of the curriculum has also been intentionally organized to respond to the actual needs of the ADS sellers and the target community they serve. It is also designed in line with the disease burden in the country and accepted management guidelines for Uganda. This will ensure that after completion of the training, ADS sellers will be conversant with the health needs of the community, will be able to manage common ailments, will understand the most commonly used drugs, and will be able to empower themselves by improving their quality of life and that of the communities they serve. The design and structure of the curriculum emphasizes the attainment of practical competences and skills in health care. The course aims to foster the ability of the trainee to participate in ADS-appropriate patient care and above all to practice with great dedication to ethics, integrity, and professionalism. The details of the curriculum are shown in Appendix 1.

2.3 Teaching and Learning Strategies

The curriculum focuses on development of competences and skills through the following approaches: participant-centred learning; small group learning; role play, demonstrations, presentations, and debates with facilitator guidance; themes stimulating competence and skills development; and competencies and skills obtained through self-directed learning.

Demonstrations, when utilised, provide a better understanding and a holistic approach to patient care, while role plays provide guidance in scope and depth to broaden the trainees' understanding.

2.4 Target Group for the Training

All individuals selling (drug sellers) or intending to sell medicines at drug shops who have attained a minimum of an O-level certificate from the Uganda National Examinations' Board and have undertaken a nursing assistant's course for a duration of at least six months were qualified for the training. It ought to be noted that, although the Ministry of Health (MOH) phased out nursing assistants in its recruitment, those who had already entered ADS training offer valuable support in health service delivery; thus, the MOH has not dismissed those who are already in practice. Hence, those in private practice ought to be supported and encouraged to offer better service. In screening participants, the training institution needs to pay close attention to academic qualifications, the minimum requirements being as stated above. This process could involve the support of the District Assistant Drug Inspectors (DADIs) and district health team.

2.5 Duration of the Training

The training shall cover a period of five weeks (160 hours of theory and 40 hours of practical training during attachment). The first three weeks are to focus on the medical component, with the fourth week focusing on the business component. The fifth week is for practical attachment to a health facility, located in the catchment area of the local training institution for ease of supervision and mentorship.

2.6 Cost of the Training

The training institutions will budget for the trainings and determine the appropriate cost for the training. It is recommended that the training institutions charge no more than 600,000 Ugandan shillings (UGX) in order to ensure that training is affordable to the ADS sellers and owners. Price may vary with inflation. The cost of the training was determined based on the survey done during SDSI phase I and the budgeting exercise carried out with the training institutions in SDSI phase II. In SDSI phase I, the sellers and owners, when asked how much they were willing to pay for the training, generally gave a response of UGX 500,000 UGX. In SDSI phase II, after actual budgeting with the training institutions, an average amount of UGX 600,000 was agreed upon. A prototype training budget is attached in Appendix 2.

2.7 Assessment Plan

At the beginning of the training, trainees will be given a pre-test to assess the level of knowledge and competence they have developed from their experiences. In addition, during each week, trainees will be engaged in continuous assessments related to the theme being studied to assess knowledge gain, behaviour change, and progress. The trainees will take a post-test and final assessments covering the various topics and issues discussed during the four weeks. These assessments will be in the form of a written exam. The business training final assessment will be done on a separate day to allow participants to concentrate on the key technical areas. At the end of the training, all participants who pass the final exams and satisfy the examiners will be awarded certificates of attendance/completion of training. (A sample certificate is shown in Appendix 3.) The pass mark for the tests and exams shall be 50%. Participants who do not achieve the pass mark should be interviewed and their results examined to determine the causes of the failure and whether these can be immediately addressed. Some participants may report poor knowledge of the English language and require translation of the questions, and to these an oral exam can be administered. Other participants may have failed for various other reasons, but it is advisable to orally interview participants whose scores are not more than 10 points below the

pass mark to see if they can be tutored and passed. Participants who completely fail the exam should be advised to retake the course when next offered at the institute.

3.0 ACCREDITATION OF ADS TRAINING INSTITUTIONS AND QUALITY ASSURANCE

All training institutions intending to conduct ADS training will be required to demonstrate capacity to conduct the training. They should meet the criteria for accreditation, which will include but not be limited to having five or more qualified permanent staff to carry out the training; having lecture rooms/classrooms that accommodate at least 50 participants; registration with the Ministry of Education and Sports (MOES); having been in existence for more than five years; and availability of training supplies like projectors, laptops, and demonstration aids. In addition, the selected institution should identify at least four tutors to attend a TOT course for ADS seller training.

The success of the institutionalized ADS sellers and owners trainings depends primarily on selecting the appropriate health professional training institutions. In Uganda, health training institutions are registered by the MOES but also accredited by the relevant health professional bodies (Pharmaceutical Society of Uganda [PSU], the Nursing and Midwives Council, and the Allied Health Professionals Council) based on standard criteria to ensure quality maintenance. The aspects of medicines management in this ADS course make PSU a relevant entity to this programme, yet ADS sellers are viewed as allied health professionals and are hence under the mandate of the Allied Health Professionals Council.

It is thus recommended that PSU in liaison with the Allied Health Professionals Council lead the accreditation of the training institutions after the adapted training curriculum of the institutions is reviewed, and recommendations are received from Makerere University, including the report of how each institution was selected.

4.0 IMPLEMENTATION OF THE ADS TRAINING

Having the local training institution launch the training program depends on prior activities, including mapping of potential institutions and applying the selection criteria to identify which institution is best suited to conduct the ADS training. The process is then followed by selection of tutors to attend TOT, for the TOT orientation of the tutors, key stakeholder engagements especially at the districts, trainee mobilisation, training, and award of certificates to qualifying participants.

4.1 Mapping and Selection of Training Institutions

A contact list of available training institutions is available on the MOH website. This list is used to identify the total sample of institutions in the target districts. Institutions neighbouring the target district can also be considered if target district institutions do not meet the criteria for ADS training. The institutions are then contacted via phone to make appointments to meet the directors and assess the institutions' suitability to participate in training ADS sellers. A checklist (Appendix 4) is used to assess each institution; based on the findings one institution meeting the selection criteria is chosen per region. These activities will be performed by Makerere University in liaison with the key stakeholders, including the Allied Health Professionals Council, the National Drug Authority (NDA), and the PSU.

4.2 Selection and Training of Tutors

The training of tutors from selected/accredited training institutions is key to the successful implementation of the ADS trainings. During the TOT, institution trainers are oriented with core curriculum components and materials. Once oriented, the tutors are then expected to adapt the prototype curriculum schedule to their institution. With support from the Makerere University Pharmacy Department, the institutions develop draft implementation plans spelling out what needs to be done to effectively conduct ADS trainings, including timelines and persons responsible. Meetings should then be held with the top management of the institutions in order to achieve full buy-in and support for the training activities. A schedule of recommended actions to be taken in preparation for the trainings is shown in Appendix 5. A sample TOT budget is shown in Appendix 6.

Printing of training materials and tools (as well as some other activities) need to be started early in the process, as they are bulky, need to be assembled, and should be available from the first day of the training. A detailed programme of the four-week training should be prepared and given to the participants. It is imperative that the training institutions put in place an MOU with health facilities where trainee field placements will be arranged, if this has not already been the practice with other courses offered at the institution.

A number of job aids have been developed for these trainings; see the list in Appendix 7, Section 5. Each participant should receive a copy of these during the training as well as afterwards, to aid their actual practice back home.

4.3 Trainee Mobilisation

Once dates for a training course are set, the institution begins mobilising participants for the course. The mobilisation of trainees is primarily done by the training institution in collaboration with area DADIs and district health focal persons. The DADIs should be engaged initially through meetings with the district health teams. Training institutions prepare announcements to

be aired on local mass media (FM radio stations). The announcements focus on the relevance of the ADS trainings in improving patient care and call for applications from potential candidates, specifying the target candidates and the duration of the training course, and asking them to bring their academic documents when applying for the course. These documents should be screened by the ADS course coordinator at the training institution with support from the DADIs to ensure that the applicants qualify to attend the course before they are given an admission letter. Mobilisation should begin at least one month before the expected dates of commencement of trainings. Only trainees that will meet the minimum requirements will be enrolled for the trainings.

4.4 Preparation to Conduct the Trainings

The training institutions should make sure the trainers, materials, and facilities for the training are available. The materials should be printed early, health facilities for attachment should be contacted, the tests and exams should be prepared, and lecture rooms and boarding facilities should be secured for the training. See Appendices 5 and 7 for details.

The trainings will be conducted by accredited training institutions. The training institutions will be required to strictly adhere to the training curriculum and the methodology. Accreditation will be revoked if an institution fails to carry out quality training and adhere to the curriculum and its methodology. These trainings will be constantly monitored by relevant stakeholders (e.g. district health teams, district leadership, health professional councils, NDA) to ensure consistent quality of the trainings.

4.5 Monitoring of Training Quality and Supportive Supervision

The plan for the institutionalized ADS training programme is to have it run by selected health training institutions under prototype curricula; these selected training institutions may also have different implementation plans. Similar courses run under different administrations require quality monitoring to ensure that the cadres required are adequately trained to meet the challenges that need to be addressed. The nursing and midwifery programme, allied health programmes, and the pharmacy programme all run centralised/universal exams for their professionals to ensure that the trainees are fit for registration to practice. Based on the ADS programme dynamics/particulars, ADS sellers are allied health professionals. The Uganda Allied Health Examinations Board (UAHEB) (under the MOES) has the mandate to streamline, regulate, and coordinate examinations and awards for allied health professionals in Uganda. The ADS trainees, upon completing the course, practice in drug shops, a practise regulated by PSU. This makes PSU relevant in examinations and certification of the ADS programme since its mandate is to ensure the highest practicable standards in the practice of pharmacy in Uganda. Since the inception of the ADS programme, PSU has played an active role through training, curriculum development, and support supervision and has continuously expressed willingness to continue supporting this programme. It is thus recommended that, based on the contributions of PSU, its mandate, and willingness and ability to provide continuous support, we recommend strongly that PSU takes the lead in training monitoring in liaison with UAHEB.

4.6 Regular Review and Updating of Training Curriculum

The health care needs for communities change constantly and so do the management protocols for various health conditions. Thus routine review and updating of the ADS curriculum are needed to capture these changes and maintain relevance. The institutionalised ADS training comes with the idea of sustainability, and hence requires that the roles be taken up by

organisations with the appropriate mandates. The MOH ensures that quality health professionals are trained; this it achieves through the mandate of its institutions, especially the professional bodies. PSU's great expertise and understanding of the ADS programme, acquired through its continued participation, makes it a relevant body to support the ADS trainings and curriculum revision processes. Since ADS sellers are considered allied health professionals, the Allied Health Professionals Council would have a central role/mandate. However, the ADS programme mostly covers medicines management, an area in which the pharmacy training institutions, especially Makerere University, have great expertise as far as training and curriculum development. The ADS programme dynamics require that the curriculum contents be selected critically, based on participants' previous knowledge and the new health care demands of the populations they serve in hard-to-reach areas.

It was therefore recommended that Makerere University take the lead role in the regular update and review of the ADS curriculum. This role will be carried out in partnership with NDA, PSU, the Allied Health Professionals Council, and UAHEB

4.7. Capacity Building of Selected Training Institutions

The previous ADS sellers' training was carried out by PSU, NDA, and Private Sector Foundation Uganda with support from the district local leadership and ADS associations. However, the recent ADS trainings in Eastern and Midwestern Uganda were undertaken by training institutions in those regions, namely IIHS and FINS. The selected health training institutions need support supervision so as to build capacity of the institutions' staff in carrying out the training activities. The mandate to carry out capacity building of the health professionals trainers is shared by the MOES and MOH. The MOES carries out its mandate through its constituent bodies. The National Council for Higher Education, and institutions of higher learning, especially universities; the MOH does it mainly through the constituent professional bodies. Since the training institutions to be selected will be those already registered by MoES (as is the case for Jinja based International Institute of Health Sciences and Fort Portal International Nursing School), and accredited by relevant professional bodies, the capacity building required by these institutions is essentially related to unique matters concerning the ADS programme. Therefore, capacity building of the training institutions, for sustainability purposes, needs to be done by institutions/organisations well versed with the ADS programme and having the ability to train people appropriately. The recent trainings were mainly supported by the Makerere University Pharmacy Department, owing in part to its adequate and competent human resources in pharmaceutical service delivery.

It was agreed in the stakeholders' meeting that, since support supervision requires that the entity to carry it out is readily available and has the relevant expertise, Makerere University will take the lead role in capacity building of the selected health professionals' training institutions while PSU will participate in supportive supervision.

APPENDIX 1: DETAILED COURSE AND CONTENTS OUTLINE

Medical component

Theme 1: General introduction, legal aspects of drug sale and use

Objectives

By the end of theme 1, participants will be able to:

- Outline the components of the pharmaceutical sector of Uganda
- Define concepts in ADS
- Discuss the role of ADS in service delivery
- Describe Uganda's health system
- Examine professional bodies and regulatory authorities as stakeholders in ADS operations

Content outline

- Overview of public-private partnership
- Uganda's health system
- Roles of professional bodies (NDA, PSU, Allied Health Professionals Council, Nurses Council, Uganda Medical Council).
- Law, regulation, and ethics in pharmacy

Theme 2: Medicine management

Objectives

By the end of theme 2, participants will be able to:

- Show basic understanding of the different routes of drug administration and dosage forms
- Explain the proper administration of the different dosage forms
- State the abbreviations used on prescriptions
- Interpret a prescription and dispense it appropriately
- Identify the different drugs on the ADS expanded list
- Explain how drugs are procured and appropriately stored
- Differentiate between a counterfeit and an original drug
- Identify and report adverse drug reactions

Content outline

- Dispensing practice
- Routes of drug administration
- Drug interaction
- Prescription interpretation and abbreviations used
- Dispensing to special groups (pregnant and breastfeeding mothers and children)
- Stock management
- Quality monitoring
- Pharmacovigilance

Theme 3: Clinical care and management of common illnesses

Objectives

By the end of theme 3, participants will be able to:

- Perform basic first aid that can be offered in the community
- Describe the common diseases affecting children, their clinical presentation, and management
- Describe the common diseases affecting women, their clinical presentation, and management
- Describe the common diseases that affect adults including chronic conditions, clinical presentation, management, and patient education
- State the different types of family planning
- Conduct counselling and care for the pregnant mother and the newborn
- Explain the minor illnesses managed from a drug shop and when to refer

FIRST AID AND EMERGENCY CARE

Diseases Affecting Children

- Skin diseases: *nappy rash, pediculosis, impetigo, tinea capitis.*
- Infections: *mumps, measles, malaria*
- Ear, nose, and throat disorders: *otitis media, otitis externa*
- Gastrointestinal diseases: *colic pain, worm infestation*
- Oral and dental diseases: *toothache, dental abscess, dental caries*
- Malnutrition: *marasmus, kwashiokor, anaemia*

Diseases Affecting Women

Dysmenorrhoea, premenstrual syndrome, pelvic inflammatory disease (PID)

Family Planning

Oral contraceptives, barrier methods

Maternal and Child Care

Antenatal care, care of the mother during pregnancy and after delivery

Maternal nutrition, infant feeding, care of the newborn, immunization

Chronic Disease and Conditions

Hypertension, diabetes mellitus, asthma

Drug Shop–Initiated Treatment (Common Presenting Symptoms)

Abnormal vaginal discharge, urethra discharge, painful urination, nasal discharge and sneezing, sores in the mouth, Diarrhoea, itching of the skin, pus discharge from the ear, red eyes, joint pains, cough, fever

Diseases Affecting the Gastrointestinal System

Peptic ulcers, haemorrhoids, constipation, reflux esophagitis, flatulence

Diseases Affecting the Skin in Adults

Athlete's foot, ringworm, pimples (acne)

Notifiable Diseases

Cholera, Marburg, Ebola

Business component

Module 1: Understanding your business

Objectives:

The specific objectives of this module are to help the learner to:

- Know the ideal qualities and responsibilities of an entrepreneur
- Appreciate the unique nature of ADS
- Assess the current nature of their drug shops and business environment
- Identify ADS stakeholders and their influence on the business

Content outline

- Businessperson characteristics
- Differing intentions to start ADS
- ADS business environment
- Strengths of your ADS
- Opportunities to your ADS
- Threats to your ADS
- Weaknesses to your ADS

Module 2: Family business

Objectives:

The specific objectives of this module are to help the learner to:

- Appreciate the unique nature of family business
- Know the challenges facing family business
- Family business stakeholders
- Appreciate the importance of succession planning in family business
- Identify the critical success factors of a family business

Content outline

- Introduction to family business
- External stakeholders
- Family business management
- Family business evaluation
- Succession planning in family business

- Key success factors in family business
- Weaknesses of your ADS
- Critical success factors in family business

Module 3: ADS business planning

Objectives:

The specific objectives of this module are to help the learner to:

- Appreciate the concept and importance of business planning for an ADS
- Identify the key components of a simple business plan for an ADS
- Develop a simple business financing strategy for an ADS

Content outline

- Why business planning
- Vision and mission
- Key components of business plan

Module 4: Business leadership and ethics

Content outline

- Business leadership
- Qualities of a good business leader
- Business ethics
- Ethical business practices
- Key leadership facts
- People management

Module 5: Buying and transportation of medicine

Objectives:

The specific objectives of this module are to help the learner to:

- Analyse principles of buying and selling on credit for an ADS business
- Develop guidelines for income and expenditure control for ADS

Content outline

- Transportation and purchase of medicines
- Source of medicine
- Receiving of medicines
- Pricing of medicine

Module 6: Stock management

Content outline

- Advantages of stock management
- Survival and growth of ADS
- How much of each type of stock
- Stock rotation and arrangement
- How to determine fast-selling medicine
- Record keeping documents used in ADS stock management
- Stock control, ordering for stock, and stock taking
- Housekeeping, merchandising and hygiene

Module 7: Marketing and customer care in medicine business

Content outline

- What is marketing?
- Attracting customers
- The four P's of marketing
- Marketing communication for a drug shop
- Key rules of effective marketing
- Keeping customers
- Marketing plan and key marketing facts

Module 8: Pricing and costing of drugs

Content outline

- What is business costing?
- Importance of costing in ADS
- Fixed and variable costs
- Pricing
- Steps in product costing using cost-plus method
- Cost statement for ADS products
- How to get the cost of pricing of and a product
- Tips for successful pricing

Module 9: Personal finance management

Objective:

The specific objectives of this module are to help the learner to:

- Identify personal financial goals
- Appreciate the importance of personal financial planning
- Develop a roadmap for achieving personal financial goals
- Determine key building blocks for personal financial success

Content outline

- The need for personal finance
- Individual goal setting and visioning
- Current economic trends to watch
- Achieving financial goals through planning
- Life cycle financial planning
- The building blocks of success
- Tracking monthly expenses, variable costs
- Managing the income vs. expenses gap
- Choosing the right business for you
- The key things you need to note, best options for start-up capital
- When to borrow and how to manage borrowed funds
- Daily financial tips

Module 10: Record keeping and business financial management

Objectives:

The specific objectives of this module are to help the learner to:

- Appreciate the importance of bookkeeping
- Acquire profit and loss management knowledge and skills for an ADS

Content outline

- Importance of bookkeeping and how to set up a simple bookkeeping system
- Documents used in ADS bookkeeping
- Guideline for income and expenditure control
- Books of account
- Managing profit and loss and how to calculate monthly profit or loss
- Buying and selling on credit

APPENDIX 2: PROTOTYPE TRAINING BUDGET

	Item	Unit Cost	Number of Days/Times	Total Cost
	Placement (Week 5):			
	Transport	60,000/=		
	Driver's allowance	20,000/=		
	Site supervisor's	50,000/=		
	Clinical teaching	30,000/=		
	Stationery:			
	Certificates	5,000/=		
	Masking tapes	5,000/=		
	Name tags	1,000/=		
	Markers	10,000/=		
	Pens	20,000/=		
	Pencils	2,000/=		
	Notebooks	2,000/=		
	Photocopier service	200,000/=		
	Flip charts			
	Demonstration materials:			
	Medicines samples	50,000/=		
	RDT kit	2,000/=		
	First aid kit	250,000/=		
	Box of gloves	20,000		
	Job aids (10 job aids per participant)	30,000 per set		
	Training manuals			
	Participants' Guide	45,000		
	Trainers' Guide	20,000		
	Accommodation	60,000/=		
	Meals	7,000/=		
	Administrative costs	200,000/=		
	Graduation	300,000/=		
	DADI & coordinator	100,000/		
	Transport of trainees to and from Kamuli	150,000/-		
	Training allowances			
	Teachers'	500,000/=		
	Support staff's	150,000/=		
	Institution's mark-up			
	GRAND TOTAL.....		

APPENDIX 3: SAMPLE CERTIFICATE



APPENDIX 4: MAPPING OF INSTITUTIONS TOOL

Assessment of Health Training Institutions for Suitability to Carry Out the Institutionalized ADS Sellers' Training

BACKGROUND INFORMATION

1. Name of district

2. Name of facility.....

3. Ownership
 A. Private
 B. Government
 C. PNEP

4. Ministry of Education Registration/license number

5. Name of interviewee

Contact information
 Mobile number.....
 E-mail

6. Position/title of interviewee
 A. Principal
 B. Deputy principal
 C. Other (please specify).....

7. How long have you worked with this institution?
 A. Less than 1 year
 B. 1–5 years
 C. 6–10 years
 D. More than 10 years

8. How long has the institution been operating?
 A. Less than 2 years
 B. 2–5 years
 C. 6–10 years
 D. More than 5 years

TRAINING PROGRAMMES

9. Do you offer the following programmes, are they accredited?

Programme	Offered Yes (Y)/ No (N)	Accredited Yes (Y) No (Y)	Level Degree(1) Diploma(2) Certificate (3)	Total No. of Students per Programme
Nursing and midwifery				
Pharmacy				
Medicine				
Laboratory technology				
Others				

10. Is medicines management integrated in any of your curricula?
 A. Yes (request to look at a copy of the curriculum)
 B. No
11. Do you offer any other short courses besides the main courses in no. 9 above?
 A. Yes
 B. No
12. If yes in no. 11 above, please provide the details as per the table below.

Course	Duration	Award/Qualification	(Cost /=)	Sponsorship
1.				
2.				
3.				
4.				

13. As an institution, do you review your curriculum?
 A. Yes
 B. No (go to no. 15)
14. If yes in no. 13 above, how often do you review your curriculum?
 A. Every 3 years
 B. Every 5 years
 C. Others (please specify).....
15. As a person, have you participated in curriculum development?
 Yes
 No

HUMAN RESOURCE AND INFRASTRUCTURE
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16. Teaching staff

Programme	Level		Qualification	Number
	Degree(1)	Diploma(2)		
Nursing and midwifery			Post-graduate	
Pharmacy			Bachelors	
Medicine			Diploma	
Laboratory technology			Certificate	
Others				

Do you have the following facilities at your institution?

Facilities present			If facility is present, score 1–5 according to adequacy.
Library	Y	N	
Lecture rooms	Y	N	
Boarding facilities	Y	N	
Training Hospital	Y	N	
Computer facilities	Y	N	

Internet connection	Y	N	
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KNOWLEDGE OF THE ADS PROGRAMME AND WILLINGNESS TO TRAIN ADS

17. Would the institution be willing to participate in the training of Accredited Drug shop sellers?

- A. Yes (proceed to the next questions)
- B. No

Please explain your response.

.....

18. What type/mode of short course would you like to run?

- A. Residential
- B. Distance
- C. Others, please

specify.....

19. How many students can you handle per training?

.....

20. How much would such courses cost?

Course	Duration	Estimated (Cost /=)
1. Residential	4 weeks	
2. Distance	2:2 weeks	

21. How often can you run this programme in a year?

.....

22. What additional resources/support would you require to carry out the training?

.....

APPENDIX 5: ADMINISTRATIVE GUIDE FOR ORGANIZING ADS TRAINING WORKSHOPS

	Items	Timing
1	Make a to-do list	Six months to planned training date
2	Identify tutors for training course and training-of-trainers (TOT)	Five months to planned training date (this is a one-off for the institution, so once it is done the first time it can be removed from the checklist)
3	Identify and engage health facilities for placement of trainees; prepare memorandum of understanding	Three months to training date
4	Prepare a training budget and have it approved	Three months to training date
5	Make a funds request	Three months to training date
6	Conduct a sensitization meeting with target district health team members, including the DADI[MR11]	Two and half months to training date
7	Work with DADI to mobilize participants	Two months to training date
8	Draft admission letters	Two months to training date
9	Procure workshop logistics, including training materials (see Appendix 7)	One month to training date
10	Draft a training programme and assign specific tutors to sessions	One month to training date
11	Prepare trainee certificates these will be completed after obtaining trainee photos (Appendix 3)	Two weeks to training date
12	Prepare pre- and post-test assessment and final exams	One month to training date
13	Prepare training workshop report after the course is completed	After training

APPENDIX 6: SAMPLE BUDGET FOR TOTS

#	Item	Unit cost	Qty	Amount	
1	Per diem for facilitators	150,000	39	5,850,000	3 facilitators for 13 days
2	Transport/fuel	250,000	3	750,000	3 facilitators
3	Facilitation fees	100,000	39	3,900,000	3 persons for 13 days
4	Printing and photocopying of materials	100,000	1	100,000	
5	Stationery	100,000	1	100,000	
6	Communication	100,000	1	100,000	
7	Report writing	150,000	2	300,000	
	Grand total			11,100,000	

APPENDIX 7: WORKSHOP LOGISTICS

1	Workshop logistics needed during the training	
	Printer + cartridge + power & data cables	
	Camera + charger + data cable + memory card	
	LCD projector + power & data cables	
	Presentation laser pointer	
	Small stapler + 2 packets of staples	
	Big stapler + 2 packets of staples	
	Paper punch	
	Daily registration forms	
	Daily evaluation forms	
	Participants' report cards	
	Cash accountability forms	
	Empty tins for drugs	
	Reference books	
2	Manuals	
	Handbook for ADS	
3	Training guides	
	Facilitators' Guide—both Business and Technical Training	
	Participants' Guide—both Business and Technical Training	
4	ADS tools for role plays	
	Filled prescription	
	Blank prescriptions	
	Rapid diagnostic test kits	
	Gloves	
5	Job aids—to be issued to each participant	
	Cleaning the ADS	

	Storage of Medicines	
	Inventory Management at the ADS	
	Dispensing Medicines at the ADS	
	ADS Expanded List of Medicines	
	Checklist: How to Be Sure Client is not Pregnant	
	Checklist: Initiating Mothers on Oral Contraceptives	
	FP flip chart	
	ICCM job aid	
6	Printing and stationery	
	File folders	
	Reams of duplicating paper	
	Reams of ruled paper	
	Masking tape	
	Pens	
	Notebooks	
	Name tags	
	Flip charts	
	Markers—packets	
	Sticky notes	
	Workshop photocopying	
	Photo shoot for closing ceremony	
7	Artificial ADS shelf	
	Cupboard	
	Drugs for demonstration	
	Packing envelopes	
8	Items to be received from NDA	
	ADS overcoat	
	Dispensing logbook for recording	
	Supervision book	

9	List of medicines in the sample ADS shops for training	
	Hydrogen peroxide mouthwash	2 bottles
	Amoxicillin powder for suspension	2 bottles
	Paracetamol tablets	100-strip pack
	Metronidazole tablets	100-strip pack
	Paracetamol syrup	2 bottles
	Co-trimoxazole suspension	2 bottles
	Combined oral contraceptives	5 cycles
	Progestin only contraceptives	5 cycles
	ORS sachets	5 sachets
	Dispersible amoxicillin tablets	30 tablets

Note:

- The Family Planning Register is intended to be printed for each ADS. However, in case of resource constraints, each seller should copy the format in the training material and record them in a counter book.
- Each participant should receive a certificate of attendance with his/her photograph imprinted in it.