APRIL 2020

Save Her, Ghana

Roche

Submitted as part of Access Accelerated

Access Observatory

Contents

Program Description

Program Overview

1 **Program Name**

Save Her, Ghana

2 **Diseases program aims to address**

• Cancer (Breast)

3 **Beneficiary population**

• Gender: All genders
• Age: All ages
• Special populations: People with low income, Rural populations, Urban populations

4 **Countries**

• Ghana

5 **Program start date**

January 1, 2017

6 **Anticipated program completion date**

Completion date not specified.

7 **Contact person**

John Klu, Head of Access, Policy & Governmental Affairs, Ghana

john_kafui.klu@roche.com

8 **Program summary**

The primary objective of Save Her, Ghana is to improve breast cancer care in the country through a comprehensive, systematic approach. The specific aim of the project is to provide to the population access to standard of care, which is currently limited by lack of health care professional, limited access to diagnosis, lack of sustainable public funding for innovative therapies, low policy prioritization and low disease community awareness. The program addresses the multiple challenges in Ghana thanks to multiple local stakeholders and through the development of the following strategies:

1. Increase public awareness on breast cancer: The main awareness channel for breast cancer is through media where the First Lady of Ghana gives visibility and different speeches, which is one of the main partners of the program. Moreover, Roche and other local stakeholders are involved in advocacy groups, provide support to community groups through funding, banners and other means and make direct calls to patients to advice along the patient journey.

2. Improve diagnostic capabilities: Roche provided two Ventana diagnostic machines to local hospitals and reagents in order to improve diagnosis.

3. Increase number of oncology healthcare professional and their expertise in the country: Roche provides funding to the local university to train specialists in oncology, nurses and physicians.

4. Increase inventory and monitoring efficiency: Roche has established a new data inventory management system with the government in order to track the patient and improve efficiency in the supply chain.

(continued on next page)

Program Overview

8 Program summary, cont.

5. Increase policy awareness and public registries: Provide Advocacy to the government for the drawing of the National Cancer Control Policy, National Strategy for Cancer Control and NCD Policy and provide evidence on gaps in the patients journey. Roche provides fund to train technical people and two centers for the development of public registries in different regions of Ghana.

6. Provide access to standard of care with the inclusion of Herceptin in the National Health Insurance Scheme: After Herceptin price negotiation, it has been included in the National Health Insurance Scheme and wait for approval to be included in the Essential Medicine List. By 2019, the project achieved 109 people on Herceptin treatment with 1236 vials provided.

The success of the project is specifically driven by multiple interventions in the system and the multiple local partnerships. Each of them play an important role in the development of the different activities and nominally they are: The First Lady of Ghana, Ministry of Health, National Health Insurance Authority, Ghana Health Service, Ghana National Drug Programme, Cancer Treatment Centers Leadership, Therapeutic Area Experts, Patient Advocacy groups and the Association of Representatives of Ethical Pharmaceutical Industry (AREPI).

Program Strategies & Activities

9 Strategies and activities

Strategy 1: Community Awareness and Linkage to Care

ACTIVITY	DESCRIPTION
Communication	Roche increases awareness through its partnership with the First Lady of Ghana who gives visibility to the project. She conducts awareness campaigns to support early detection on media.Moreover, Roche provides funds, banners and advises on Breast cancer to 4 community groups who provide knowledge and awareness on breast cancer to their communities.
Mobilization	Patient Advocacy groups drive awareness and early detection campaigns on breast cancer with support from stakeholders. They call patients along the patient journey, providing advice and support to them.

Strategy 2: Health Service Strenghtening

ACTIVITY	DESCRIPTION
Infrastructure	Roche provides two Ventana machineries and reagents for the diagnosis of breast cancer through funds and help from Roche Diagnostics to local hospitals.
Funding	Roche provides funds to local medical schools to train specialists in oncology, nurses and physicians. It implements already existing courses(training) by the College for oncology care where they have a curricula to train healthcare professionals allowing the achievement of specialist status.

Strategy 3: Supply Chain

ACTIVITY	DESCRIPTION
Technology	Roche together with the government, developed a software for inventory management and program monitoring. It has the final aim to get data to improve efficiency in the supply chain, track the patient journey, and ultimately provide insights and evidence to the government for policy consideration.

Strategy 4: Regulation & Legislation

ACTIVITY	DESCRIPTION
Advocacy	Stakeholders of the project help the drawing of National Cancer Control Policy, National Strategy for Cancer Control and NCD Policy. They influence the standard practice to provide a safest and more efficient care. Moreover, they facilitate the inclusion of standard of care therapy onNational Essential Medicine and National Health Insurance Scheme..The project is also developing evidence of industry contribution to bring to policy makers.
Management	We helped the two centers by providing funds to train technical people for the development of a national registry moreover; we are now assisting the Government to create a national registry. The registry is jointly created by Roche and major Government stakeholders.

Program Strategies & Activities

9 Strategies and activities, cont.

Strategy 5: Price Scheme

ACTIVITY	DESCRIPTION
Pricing	Roche made medicine price negotiation to make it more affordable. Ultimately, Herceptin is part of the National Health Insurance Scheme and it has been provided for free to 109 out of pocket patients.

10 Strategy by country

STRATEGY	COUNTRY
Community Awareness and Linkage to Care	Ghana
Health Service Strengthening	Ghana
Supply Chain	Ghana
Regulation & Legislation	Ghana
Price Scheme	Ghana

Companies, Partners & Stakeholders

11 Company roles

COMPANY	ROLE
Roche	Roche is the key coordinator of the project and it collaborates with all key stakeholders to ensure the successful take of and sustainability of the project . It also provide technical and financial support for key components of the project. Providing access to diagnostics, capability building, funds to ministry of health, medical schools to train specialists in oncology nurses and physicians and other key elements of project.

12 Funding and implementing partners

PARTNER	ROLE/URL	SECTOR
Therapeutic Area Experts, Oncologists	They create evidence generation through Breast Cancer Patient Journey Study for access with NHIA, MOH. They share Professional experience of burden of diseases. Draw recommendations for implementation and guidelines for eligible patients for access, lead drawing of National Cancer Treatment Guidelines and Support drawing of National Strategy for Cancer Control/NCCP with GHS. [No URL provided]	Private

13 Funding and implementing partners by country

PARTNER	COUNTRY
Therapeutic Area Experts, Oncologists	Ghana

Companies, Partners & Stakeholders

14 Stakeholders

STAKEHOLDER	DESCRIPTION OF ENGAGEMENT	REQUESTED OR RECEIVED FROM STAKEHOLDER
Government	The Ministry of Health contributes to the Government's vision of universal health coverage and on health in Ghana. They lead the Project in all phases, especially the implementation, dissemination and the sustainability planning. They lead working groups, review progress reports and make decisions to address challenges during the project implementation. They facilitated the setup of the national cancer registry, the inclusion of the standard care therapy on Essential Medicine List and National Health Insurance Scheme reimbursement. They ensure the funding allocation for the project and also support policy creation, change, implementation. The First Lady of Ghana: She is the chair officer of the project. She demonstrates contributio towards women healthcare in the country and drive political will to address this project facilitating the financing plan. She provides visibility to the project and is the main enabler of awareness campaign in media. Lastly she is in charge of the coordition among stakeholders of the project. Ghana National Drug Programme: It is a programme established by the Ghana Ministry of Health. They provide evidence to health system through Standard Treatment Guidelines and medicines prices negotiation. They are in charge for the enlistment of Herceptin into the essential medicines list (does not happen regularly, application have been accepted but the medicine is not included yet). They make the value assessment of therapy and other technologies into the health system(HTA coordinator) Lastly, They make recommendations for new drugs from EML into NHIS reimbursement list.	Infrastructure: No Human Resources: No Funding: Yes Monitoring or Oversight: Yes Other resource: [No response provided]
Local Hospitals/ Health Facilities	Roche supports 4 local hospitals in order to improve the screening of breast cancer.	Infrastructure: Yes Human Resources: No Funding: Yes Monitoring or Oversight: No Other resource: Yes
Local universities	Roche provides fund to school to train specialists in oncology nurses and physicians	Infrastructure: No Human Resources: No Funding: Yes Monitoring or Oversight: No Other resource: Yes

Companies, Partners & Stakeholders

14 Stakeholders, cont.

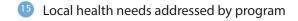| STAKEHOLDER	DESCRIPTION OF ENGAGEMENT	REQUESTED OR RECEIVED FROM STAKEHOLDER
Non-govern-mental organi-zation (NGO)	IThe National Health Insurance Authority is the decision maker of the National Health Insurance Scheme introduced by the government of Ghana to provide financial access to health care. Its main activities are: - Revise National Reimbursement list to include new standard of care - Collaborates to influence standard of practice to provide safe and efficacious care - Pro-vide input in National Strategy For Cancer Control or National Cancer Control Policy Cancer Treatment Centers Leadership:They improve the health service delivery by providing diagnosis. Roche provides them the funds for the installation of the ventanna system. They also provide reagents to Komfo Anokye Teaching Hospital (KATH) and Korle Bu Teaching Hospital(KBTH). The center is becoming center of excellence in sub-region Potential which would lead to more interest by the population. Ghana Health Service: It is an autonomous Executive Agency responsible for implementation of national policies under the control of the Minister for Health through its governing Council. It drives quality service delivery to Ghanaian through establishment of efficient pathways, systems and policy to enable sustainable access to safe and quality care. Its main objectives are the drawing of National Cancer Control Policy, National Strategy For Cancer Control and NCD Policy. They are also the key medium for awareness creation and early detec-tion as all public sector hospitals except tertiary facilities are under its remit. Association of Representatives of Ethical Pharmaceutical Industries (AREPI): It is the neutral body of the pharmaceutical industry in Ghana which focus on the improvement of local cancer cure. In the project they: - Drive HTA adoption with MCDM as preferred - Cost-sharing for industry event related to oncology - Demonstrate industry contribution to healthcare provision in Ghana and enhance its reputation to be involved in landscape shaping.	Infrastructure: Yes Human Resources: Yes Funding: Yes Monitoring or Oversight: Yes Other resource: Yes
Other	Patient Connect- patients advocacy group: They represent the patient view and perspective in discourse and improve awareness through early detection campaigns with support of other stakeholders of the program like Roche. Their voice is fundamental for the inclusion of Herceptin in the Essential Medicine List.	

Local Context, Equity & Sustainability

15 Local health needs addressed by program

Nearly 70% of woman diagnosed of Breast cancer in Ghana are in advance state of the disease due to low awareness among the general public. Moreover, overall there is an high mortality rate due to lack of policy prioritization, lack of sufficient diagnostic equipment and limited infrastructures, number of oncology experts (e.g specialists, physicians and nurses) and recordings. Save-Her Ghana aims to increase the health population rate giving breast cancer patients access to required diagnostics, increasing the general awareness through medias, its partnership with the First Lady of Ghana, Advocacy Groups and community groups. It increase the health system strengthening and delivery proving fund for diagnostics, training for oncology experts and improve the supply chain through the creation of inventory management tool which would ultimately provide evidence to government to shape policy decisions. It also provide a pricing and financing scheme, giving access to treatment to out of pocket patients and with the cover of the national health insurance scheme[1].

a How needs were assessed

[No response provided]

b Formal needs assessment conducted

[No response provided]

16 Social inequity addressed

The program address social inequity in Ghana primary, thanks to the ministry of Health which aim to bridge inequality gap in the country. It is addressing cancer care in women and children by 2020 with the aid of Private organizations to cover regional inequity. Moreover, the project is collaborating to include breast cancer care into the Universal Health Coverage, together with other stakeholders. Lastly, the Standard of care treatment offered by the project is targeted to all patients resident in Ghana, especially, out of packets patients.

Local Context, Equity & Sustainability

17 Local policies, practices, and laws considered during program design Cont.

POLICY, PRACTICE, LAW	APPLICABLE TO PROGRAM	DESCRIPTION OF HOW IT WAS TAKEN INTO CONSIDERATION
National regulations	Yes	National Cancer Control Policy, National Cancer Treatment Guidelines, National strategy for cancer control, published NCD Strategy Control.
Procurement procedures	No	
Standard treatment guidelines	Yes	[No response provided]
Quality and safety requirements	No	
Remuneration scales and hiring practices	No	

18 How diversion of resources from other public health priorities is avoided

[No response provided]

19 Program provides health technologies (medical devices, medicines, and vaccines)

Yes

TYPE	COMMERCIAL NAME	INTERNATIONAL NON-PROPRIETARY NAME (INN)
Medicine	Herceptin	Trastuzumab

Local Context, Equity & Sustainability

20 Health technologies are part of local standard treatment guidelines

Yes, Herceptin.

21 Health technologies are covered by local health insurance schemes

Yes, Herceptin.

22 Program provides medicines listed on the National Essential Medicines List

No, due to delay times in Ghana the medicine is not listed in the National Essential Medicines List yet but the request has been sent and it will ultimately be included by 2020/2021

23 Sustainability plan

Roche has signed a 5 year agreement with the Government of Ghana to sustain the project. Following, the program commitments have been integrated into the public healthcare delivery through the inclusion of Herceptin in the list of reimbursed products and public communication. Moreover, Roche Ghana capped the budget proposal tabled as option for program sustenance to support continued funding from government. Ultimately it has been established a special technical committee which will provide guidelines for sustainable implementation. Recommendations by special technical committee for sustenance of project provide guidelines for sustainable implementation. In the future Roche aim to integrate the project into the mainstream of C/CAN projects within country; Increased collaboration with key partners expected to expand scope of project and its funding sustenance Innovate and get Perjeta/Herceptin combination reimbursed in the country. It is also planned to establish MCDM as preferred HTA technique for fledgling HTA institution in Ghana and have further collaboration with Access Accelerated, Clinton Health Access Initiative, Quasi-government institutions, Private Health Insurance, HTA & Pricing Committees and attract media interest.

Additional Program Information

24 Additional program information

No

a Potential conflict of interest discussed with government entity

No

25 Access Accelerated Initiative participant

Yes

26 International Federation of Pharmaceutical Manufacturers & Associations (IFPMA) membership

Yes

Resources

1. Bonsu, A. and Ncama, P. (2019). Clinicians' experiences and perspectives of breast cancer and possible integration of breast cancer prevention and early detection into palliative care. International Journal of Africa Nursing Sciences.

Program Indicators

PROGRAM NAME

Save Her, Ghana

27 List of indicator data to be reported into Access Observatory database

INDICATOR	TYPE	STRATEGY	2017-2019	2017	2018	2019
1 Community groups supported	Output	Community Awareness and Linkage to Care	---	4 institutions	4 institutions	4 institutions
2 Number of hospitals supported	Output	Community Awareness and Linkage to Care	---	4 institutions	4 institutions	4 institutions
3 Tools in use	Output	Supply Chain	---	1 tool	1 tool	1 tool
4 Tools in use	Output	Regulation & Legislation	---	2 tools	2 tools	2 tools
5 Medicines registered	Outcome	Regulation & Legislation	---	---	---	1 medicine
6 Number of registries created	Outcome	Regulation & Legislation	---	---	---	2 tools
7 Number of patients receiving the medicines included in the pricing scheme	Outcome	Price Scheme	109 people	---	---	---
8 Number of patients diagnosed	Outcome	Health Service Strengthening	200 people	---	---	---
9 Equipment in use	Output	Health Service Strengthening	2 equipments	2 equipments	2 equipments	2 equipments

ITEM		DESCRIPTION
	Definition	The number of community groups supported by the company program or its implementing partners. Support is defined as any financial or in kind transaction that is aimed to provide money, goods or services to facility the activities of community groups. A community group can be defined as "An association of individuals from the same community, especially one formed to advance a particular cause or interest."
	Method of measurement	Counting of the number of community groups that are supported by the program or its implementing partners. The program administrative records contain information on the community groups that received funding, goods or services Calculation: Sum of the community groups that are supported by the program or its implementing partners
28	Data source	Routine program data
29	Frequency of reporting	Once per year

		RESPONSIBLE PARTY	DESCRIPTION	FREQUENCY
30	Data collection	Company: Roche	When implementing awareness activities and mobilization of advocacy groups, Roche directly tracks the number of community groups that it supports with in-kind and financial contributions.	Less than once per year
31	Data processing	Company: Roche	A member of the Ghana Roche team reviews the in-kind or financial support to be provided to the community group and verifies with the Roche member responsible for the project. The total number of community groups that are supported by the program are summed.	Less than once per year
32	Data validation		A member of my company visits the local team once per year or work closely with team by video conference.	

33 Challenges in data collection and steps to address challenges

[No response provided]

INDICATOR	2017	2018	2019
1 Community groups supported	4 institutions	4 institutions	4 institutions

Comments: N/A

	ITEM	DESCRIPTION
	Definition	The number of hospitals supported by the company program or its implementing partners. Support is defined as any financial or in kind transaction that is aimed to provide money, goods or services to facility the activities of hospitals
	Method of measurement	Counting the number of hospital supported by the company program or its implementing partners Calculation: Sum of the hospitals supported
28	Data source	Routine program data
29	Frequency of reporting	Once per year

		RESPONSIBLE PARTY	DESCRIPTION	FREQUENCY
30	Data collection	Company: Roche	Using routine data, Roche tracks the number of hospitals that it supports via financial or in-kind transactions.	Less than once per year
31	Data processing	Company: Roche	The number of hospitals or health facilities to which Roche provides any financial or in-kind support over the course of the year is summed.	Less than once per year
32	Data validation		A member of my company visits the local team once per year or work closely with team by video conference.	

33 Challenges in data collection and steps to address challenges

[No response provided]

INDICATOR	2017	2018	2019
2 Number of hospitals supported	4 institutions	4 institutions	4 institutions

Comments: N/A

ITEM	DESCRIPTION
Definition	Number of tools (e.g., mHealth, EMR, etc.) introduced and in use by the program (please distinguish from "Management Procedures in Use" indicator)
Method of measurement	Counting the number of tools created and in use by the program Calculation: Sum of number of tools created by the program
28 Data source	Routine program data
29 Frequency of reporting	Once per year

	RESPONSIBLE PARTY	DESCRIPTION	FREQUENCY
30 Data collection	Company: Roche	Roche uses routine program data to directly collect the number of software that it develops for the Ghana government in its inventory management processes.	Less than once per year
31 Data processing	Company: Roche	Members of the Roche team sum the total number of supply chain tools that have been developed over the course of the year	Once per year
32 Data validation		A member of my company visits the local team once per year or work closely with team by video conference.	

33 Challenges in data collection and steps to address challenges

[No response provided]

INDICATOR	2017	2018	2019
3 Tools in use	1 tool	1 tool	1 tool

Comments: Software developed for inventory management and Program monitoring.

ITEM	DESCRIPTION
Definition	Number of tools (e.g., mHealth, EMR, etc.) introduced and in use by the program (please distinguish from "Management Procedures in Use" indicator)
Method of measurement	Counting the number of tools created and in use by the program Calculation: Sum of number of tools created by the program
28 Data source	Routine program data
29 Frequency of	Once per year

	RESPONSIBLE PARTY	DESCRIPTION	FREQUENCY
30 Data collection	Company: Roche	Roche uses routine program data to collect the number of Evidence Generation shared learning tools that are created for the program.	Once per year
31 Data processing	Company: Roche	Members of the Roche teams reference routine program data to sum the total number of Evidence Generation tools that have been created for the government in order to better understand the patient's journey.	Less than once per year
32 Data validation		A member of my company visits the local team once per year or work closely with the team by video conference.	

33 Challenges in data collection and steps to address challenges

[No response provided]

INDICATOR	2017	2018	2019
4 Tools in use	2 tools	2 tools	2 tools

Comments: The project created Evidence Generation for the government. The evidence shows gaps in the patients journey. The result shows that people get diagnosed but that not all of them get treatment.

ITEM		DESCRIPTION
	Definition	Number of medicines related to the program activity registered per time period
	Method of measurement	Registered products should be determined by molecule or INN. Products may be registered more than once based on formulation, so it is important to exclude duplicate registered products Calculation: Counting the number of medicines registered related to the program activity
28	Data source	Routine program data
29	Frequency of reporting	Once per year

		RESPONSIBLE PARTY	DESCRIPTION	FREQUENCY
30	Data collection	Company: Roche	Roche uses routine program data to count the number of medicines that it has helped to register in the Essential Medicines List. Roche has submitted the requested for Herceptin (i.e. Trastuzumab) to be added to the Ghana EML and is expecting approval in 2020.	Less than once per year
31	Data processing	Company: Roche	A member of the Ghana Roche team reviews how many Roche medicines have been registered and report to Roche Global.	Less than once per year
32	Data validation		A member of my company visits the local team once per year or work closely with team by video conference.	

33 Challenges in data collection and steps to address challenges

[No response provided]

INDICATOR	2017	2018	2019
5 Medicines registered	---	---	1 medicine

Comments:

2019: Herceptin has been registerd in the National Health Insurance Scheme and it is waiting to be part of the Essential Medicine List(EML). Roche already sent the request for the EML but due to long processing time in Ghana, Herceptin is expected to be part of the EML by 2020.

	ITEM	DESCRIPTION
	Definition	The number of regional registries created or implemented by the company program or its implementing partners
	Method of measurement	Calculation: Number of national registry created or implemented
28	Data source	Routine program data
29	Frequency of	Once per year

		RESPONSIBLE PARTY	DESCRIPTION	FREQUENCY
30	Data collection	Company: Roche	Roche works with Ghanaian government stakeholders to create new regional registries and maintains information regarding the registries that have been implemented.	Once per year
31	Data processing	Company: Roche	The total number of regional registries that have been created are summed by Roche.	Once per year
32	Data validation		A member of my company visits the local team once per year or work closely with team by video conference.	

33 Challenges in data collection and steps to address challenges

[No response provided]

INDICATOR	2017	2018	2019
6 Number of registries created	---	---	2 tools

Comments:

2019: The project supported the creation of registry for 2 regions. It aims to achieve a total of 10 registry.

Number of patients receiving the medicines included in the pricing scheme

STRATEGY   PRICE SCHEME

	ITEM	DESCRIPTION
	Definition	Number of patients receiving the medicines included in the pricing scheme
	Method of measurement	Counting the patients who received the medicines included in the pricing scheme Calculation: Sum of all patients who received the medicines included in the pricing scheme
28	Data source	Routine program data
29	Frequency of	Once per year

		RESPONSIBLE PARTY	DESCRIPTION	FREQUENCY
30	Data collection	Company: Roche	Roche use routine program data to collect the number of patients that receive medicine or treatment as part of the National Health Insurance pricing scheme.	Less than once per year
31	Data processing	Company: Roche	A member of the Ghana Roche team sums the total number of people enrolled in the National Health Insurance Scheme per year and verifies this number in reference to the number of medicines sold.	Less than once per year
32	Data validation		A member of my company visits the local team once per year or work closely with team by video conference.	

33 Challenges in data collection and steps to address challenges

[No response provided]

INDICATOR	2017-2019	2017	2018	2019
7 Number of patients receiving the medicines included in the pricing scheme	109 people	---	---	---

Comments: 2017-2019: Year-specific data not available.

	ITEM	DESCRIPTION
	Definition	Number of patients that were diagnosed with disease through the program
	Method of measurement	Counting of people who were diagnosed with disease through the program Calculation: Sum of the number of people diagnosed with disease
28	Data source	Routine program data
29	Frequency of	Once per year

		RESPONSIBLE PARTY	DESCRIPTION	FREQUENCY
30	Data collection	Company: Roche, and Implementing partner: Hospitals	Public hospitals send yearly reports via mail to Roche with the number of patients that have been diagnosed with disease through the program.	Once every two months
31	Data processing	Company: Roche	A member of Roche sums the total number of patients that have been diagnosed with disease through the program.	Once every two months
32	Data validation		A member of my company visits the local team once per year or work closely with team by video conference.	

33   Challenges in data collection and steps to address challenges

[No response provided]

INDICATOR	2017-2019	2017	2018	2019
8 Number of Patients Diagnosed	200 people	---	---	---

Comments:

2017-2019: Year-specific data not available.

Equipment in use

9

ITEM	DESCRIPTION
Definition	Number of equipment donated or supplied and in use
Method of measurement	The number of equipment which are in use Calculation: Sum of the numerical count of equipment in use
28 Data source	Routine program data
29 Frequency of	Once per year

	RESPONSIBLE PARTY	DESCRIPTION	FREQUENCY
30 Data collection	Company: Roche	Roche Ghana counts the number of diagnostic machines that are delivered to hospitals.	Once per year
31 Data processing	Company: Roche	Roche Ghana sums the total number of diagnostic machines that have been provided to hospitals over the course of the year	Less than once per year
32 Data validation		A member of Roche Global yearly contact and control the data provided.	

33 Challenges in data collection and steps to address challenges

[No response provided]

INDICATOR	2017-2019	2017	2018	2019
9 Equipment in use	2 equipments	2 equipments	2 equipments	2 equipments

Comments: N/A

Appendix

This program report is based on the information gathered from the Access Observatory questionnaire below.

Program Description

PROGRAM OVERVIEW

1 Program Name

2 Diseases program aims to address:

Please identify the disease(s) that your program aims to address (select all that apply).

3 Beneficiary population

Please identify the beneficiary population of this program (select all that apply).

4 Countries

Please select all countries that this program is being implemented in (select all that apply).

5 Program Start Date

6 Anticipated Program Completion Date

7 Contact person

On the public profile for this program, if you would like to display a contact person for this program, please list the name and email address here (i.e. someone from the public could email with questions about this program profile and data).

8 Program summary

Please provide a brief summary of your program including program objectives (e.g., the intended purposes and expected results of the program; if a pilot program, please note this). Please provide a URL, if available. Please limit replies to 750 words.

PROGRAM STRATEGIES & ACTIVITIES

9 Strategies and activities

Based on the BUSPH Taxonomy of Strategies, which strategy or strategies apply to your program (please select all that apply)?

10 Strategy by country

If you have registered one program for multiple countries, this question allows you to provide a bit more specificity about each country (e.g. some countries have different strategies, diseases, partners, etc.). Please complete these tables as applicable. For each portion you have you selected from above (program strategies), please identify which country/countries these apply.

COMPANIES, PARTNERS AND STAKEHOLDERS

11 Company roles

Please identify all pharmaceutical companies, including yours, who are collaborating on this program:

What role does each company play in the implementation of your program?

12 Funding and implementing partners

Please identify all funding and implementing partners who are supporting the implementation of this program (Implementing partners is defined as either an associate government or non-government entity or agency that supplements the works of a larger organization or agency by helping to carry out institutional arrangements in line with the larger organization's goals and objectives.)

a. What role does each partner play in the implementation of your program? Please give background on the organization and describe the nature of the relationship between the organization and your company. Describe the local team's responsibilities for the program, with reference to the program strategies and activities. (response required for each partner selected).

b. For each partner, please categorize them as either a Public Sector, Private Sector, or Voluntary Sector partner.

(Public Sector is defined as government; Private Sector is defined as A business unit established, owned, and operated by private individuals for profit, instead of by or for any government or its agencies. Generation and return of profit to its owners or shareholders is emphasized; Voluntary Sector is defined as Organizations whose purpose is to benefit and enrich society, often without profit as a motive and with little or no government intervention. Unlike the private sector where the generation and return of profit to its owners is emphasized, money raised or earned by an organization in the voluntary sector is usually invested back into the community or the organization itself (ex. Charities, foundations, advocacy groups etc.))

c. Please provide the URL to the partner organizations' webpages

13   Funding and implementing partners by country

If you have registered one program for multiple countries, this question allows you to provide a bit more specificity about each country (e.g., some countries have different strategies, diseases, partners, etc.). Please complete these tables as applicable. For each portion you have you selected from above (funding and implementing partners), please identify which country/countries these apply.

14   Stakeholders

Please describe how you have engaged with any of these local stakeholders in the planning and/or implementation of this program. (Stakeholders defined as individuals or entities who are involved in or affected by the execution or outcome of a project and may have influence and authority to dictate whether a project is a success or not (ex. Ministry of Health, NGO, Faith-based organization, etc.). Select all that apply.

- Government, please explain
- Non-Government Organization (NGO), please explain
- Faith-based organization, please explain
- Commercial sector, please explain
- Local hospitals/health facilities, please explain
- Local universities, please explain
- Other, please explain

LOCAL CONTEXT, EQUITY & SUSTAINABILITY

15   Local health needs addressed by program

Please describe how your program is responsive to local health needs and challenges (e.g., how you decided and worked together with local partners to determine that this program was appropriate for this context)?

a   How were needs assessed

b   Was a formal need assessment conducted

(Yes/No) If yes, please upload file or provide URL.

16   Social inequity addressed

Does your program aim to address social inequity in any way (if yes, please explain). (Inequity is defined as lack of fairness or justice. Sometime 'social disparities,' 'structural barriers' and 'oppression and discrimination' are used to describe the same phenomenon. In social sciences and public health social inequities refer to the systematic lack of fairness or justice related to gender, ethnicity, geographical location and religion. These unequal social relations and structures of power operate to produce experiences of inequitable health outcomes, treatment and access to care. Health and social programs are often designed with the aim to address the lack of fairness and adjust for these systematic failures of systems or policies.*)

*Reference: The definition was adapted from Ingram R et al. Social Inequities and Mental Health: A Scoping Review. Vancouver: Study for Gender Inequities and Mental Health, 2013.

17   Local policies, practices, and laws considered during program design

How have local policies, practices, and laws (e.g., infrastructure development regulations, education requirements, etc.) been taken into consideration when designing the program?

18   How diversion of resources from other public health priorities is avoided

Please explain how the program avoids diverting resources away from other public health priorities? (e.g. local human resources involved in program implementation diverted from other programs or activities).

19   Program provides health technologies

Does your program include health technologies (health technologies include medical devices, medicines, and vaccines developed to solve a health problem and improve quality of lives)? (Yes/No)

20   Health technology(ies) are part of local standard treatment guidelines

Are the health technology(ies) which are part of your program part of local standard treatment guidelines? (Yes/No) If not, what was the local need for these technologies?

21 Health technologies are covered by local health insurance schemes

Does your program include health technologies that are covered by local health insurance schemes? (Yes/No) If not, what are the local needs for these technologies?

22 Program provides medicines listed on the National Essential Medicines List

Does your program include medicines that are listed on the National Essential Medicines List? (Yes/No) If not, what was the local need for these technologies?

23 Sustainability plan

If applicable, please describe how you have planned for sustainability of the implementation of your program (ex. Creating a transition plan from your company to the local government during the development of the program).

ADDITIONAL PROGRAM INFORMATION

24 Additional program information

Is there any additional information that you would like to add about your program that has not been collected in other sections of the form?

a Potential conflict of interest discussed with government entity

Have you discussed with governmental entity potential conflicts of interest between the social aims of your program and your business activities? (Yes/No) If yes, please provide more details and the name of the government entity.

25 Access Accelerated Initiative participant

Is this program part of the Access Accelerated Initiative? (Yes/No)

26 International Federation of Pharmaceutical Manufacturers & Associations (IFPMA) membership

Is your company a member of the International Federation of Pharmaceutical Manufacturers & Associations (IFPMA)? (Yes/No)

Program Indicators

INDICATOR DESCRIPTION

27 List of indicator data to be reported into Access Observatory database

For this program, activities, please select all inputs and impacts for which you plan to collect and report data into this database.

28 Data source

For this indicator, please select the data source(s) you will rely on.

29 Frequency of reporting

Indicate the frequency with which data for this indicator can be submitted to the Observatory.

30 Data collection

a. Responsible party: For this indicator, please indicate the party/parties responsible for data collection.

b. Data collection — Description: Please briefly describe the data source and collection procedure in detail.

c. Data collection — Frequency: For this indicator, please indicate the frequency of data collection.

31 Data processing

a. Responsible party: Please indicate all parties that conduct any processing of this data.

b. Data processing— Description: Please briefly describe all processing procedures the data go through. Be explicit in describing the procedures, who enacts them, and the frequency of processing.

c. Data processing — Frequency: What is the frequency with which this data is processed?

32 Data validation

Description: Describe the process (if any) your company uses to validate the quality of the data sent from the local team.

33 Challenges in data collection and steps to address challenges

Please indicate any challenges that you have in collecting data for this indicator and what you are doing to address those challenges.