

Promoting Accountability of Public Resources

## PERFORMANCE AUDIT REPORT



### On the Regulation of Pharmacies and Drugs (Medicines) Stores in Liberia

*July 1, 2017 to December 30, 2023*

**December 2024**

**P. Garswa Jackson, Sr. FCCA, CFIP, CFC  
Auditor General, R.L.**



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## **ACRONYMS**

<b>NO.</b>	<b>ACRONYMS</b>	<b>MEANINGS</b>
1.	LPB	Liberia Pharmacy Board
2.	CEO	Chief Executive Officer
3.	IG	Inspector General
4.	LMHRA	Liberia Medicines and Health Product Regulatory Authority
5.	MoH	Ministry of Health
6.	GOL	Government of Liberia
7.	HR	Human Resource
8.	AG	Auditor General
9.	DAG	Deputy Auditor General
10.	LRD	Liberian Dollar
11.	USD	United States Dollar
12.	SDG	Sustainable Development Goal
13.	LINA	Liberia News Agency
14.	OIC	Officer In Charge
15.	SOP	Standard Operation Procedures
17.	GAC	General Auditing Commission
18.	PAL	Pharmaceutical Association of Liberia





### Definition of words used

WORD	MEANING
Registered Medicine Store	A store for which a storekeeper's license has been issued to permit the sale at retail for medicinal use without a prescription, of any certain unopened prepackaged drugs and medical prescriptions listed.
Pharmacy	Any place, other than a registered medicine store, in which drugs, medicines, prescriptions, poisons and therapeutic devices are possessed for the purpose of compounding, preserving or dispensing them for sales at retail, or offered for sale at retail.
The Board	The Liberia Pharmacy Board.
Dispenser	A person who has undergone a course of study and practiced and thereby has become proficient in the dispensing of drugs, medicines, poisons and therapeutic devices.
Drug sundries	Those products which are related and supplementary to medicine such as health aids, therapeutic devices and appliances, medical equipment, baby and or infant products, toiletries and cosmetics.
Pharmacist	Health care professional specialized in usage and administration of medication.
Regional Coordinator	Professional who manages the administrative tasks of an organization at the regional level.
Proprietor	One who has the exclusive right or title of a pharmaceutical outlet.
Pharmaceutical Outlet	Pharmacy or medicine store.
Drugs Peddler	An unauthorized medicines seller in the street.
Stakeholder	A stakeholder is a person, group or organization with a vested interest, or stake, in the decision-making and activities of a business, organization or project.
Regional Office	Head offices of a region.
Counterfeit Medicine	Is a medication or pharmaceutical item which is produced and sold with the intent to deceptively represent its origin, authenticity, or effectiveness.
Counter banned Medicine	Medicine imported illegally, either in defiance of a total ban or without payment of duty.
Routine Inspection	Asses new establishment that has applied for a permit to extend scope of operations; changes in its personnel, move to a new premise or has been inspected in a long time.
Concise Inspection	Assess standards of good pharmacy practice.
Follow-Up Inspection	Ensures that corrective measures have been under taken by outlets after advice and notice given during a previous inspection.
Special Inspection	Asses the performance of a new establishment whose scope of operations is unknown.
Investigative Inspection	Deals with specific complaints received about lapses or non-compliance with standards of professional practice.

## **TRANSMITTAL LETTER**



**The Honorable Speaker of the House of Representatives and Honorable President Pro-Tempore of the House of Senate.**

We have undertaken a performance Audit on the Regulation of Pharmacies and Drugs (Medicines) Stores in Liberia for the fiscal years 2017 to 2023. This audit was conducted in line with the Auditor General's statutory mandate as enshrined under Section 2.1.3 of the GAC Act of 2014.

The audit was conducted in accordance with the International Organization of Supreme Audit Institutions (INTOSAL), Performance Auditing Standards and Guidelines as stated in the Performance Audit Manual. The Act that created the Pharmacy Board was also used as baseline for the evaluation of the Performance of the Board.

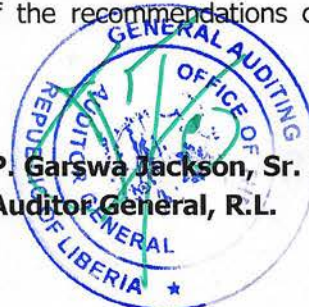
As indicated in the methodology segment of this report, all findings conveyed in the report were formally communicated to the Management of the Pharmacy for their responses. Where responses were provided, they were evaluated and incorporated in this report. We are therefore thankful to the auditee (LPB Management) for assisting us in completing the audit.

The GAC will conduct follow-up at an appropriate time in the future regarding actions taken in relation to the recommendations in this report.

We ask that you pay particular attention to the issues in this report that if implemented, will significantly improve the regulation of pharmacies and drugs (medicines) store in the country.

Given the significance of the matters raised in this report, we urge the Honorable Speaker and Members of the House of Representatives and Honorable Pro-Tempore and Members of the Liberian Senate to consider the implementation of the recommendations conveyed herein with urgency.

**P. Garswa Jackson, Sr. FCCA, CFIP, CFC  
Auditor General, R.L.**



**Monrovia, Liberia**  
December 2024





## **Executive summary**

The Liberia Pharmacy Board (LPB) is a regulatory authority that was established by an Act of Legislature in 1967 to regulate the practice of pharmacies and medicine stores in Liberia. The Board has the mandate to ensure that every pharmaceutical entity operating in Liberia, meets basic requirements for safe practice, improve productivity, efficiency, and professionalism. Its aim is to promote, protect the public health, regulate and control the personnel involved in pharmacy practice and discipline. It also reviews quality, safety, and efficiency of medicines to ensure public health safety which is in line with the Sustainable Development Goals 3: (To ensure healthy lives and promote well-being for all at all ages).

The Liberia Pharmacy Board has five members: a representative from the Pharmaceutical Association of Liberia (PAL), a representative from the Liberia Medical Association (LMA), two pharmacists representing those in private practice, and the Chief Pharmacist of Liberia as representative from the Ministry of Health (MOH).

The Liberia Pharmacy Board has a secretariat that runs the day-to-day affairs of the board. The secretariat is managed and headed by a licensed pharmacist known as the Registrar or the Chief Executive Officer (CEO).

The secretariat has three major departments; Administrative, Inspectorate and Finance Departments. In addition, to the above departments, there are other sub-units. They are Testing, Monitoring & Evaluation, and, Record and Registration.

The board is charged with the responsibility to set standards and policies in the retail pharmaceutical sector to ensure that:

- i. personnel in the sector are trained, qualified and registered,
- ii. pharmaceutical entities/premises in the sector are of good standard and registered and,
- iii. General Populace receives the best pharmaceutical care.

## **Audit objective**

The general audit objective is to assess whether the Liberia Pharmacy Board is efficiently and effectively enforcing its regulations and guidelines on pharmacies, medicine stores, pharmacists and dispensers operating across the country.

## **Methods Used in Gathering Audit Evidence**

The team used review of documents and data analysis, interviews and physical observations to gather sufficient relevant audit evidence for the report.

## **Assessment Criteria**

Assessment criteria for the audit were drawn from the following governing legislations;

- Liberia Pharmacy Board Act
- Revised Public Health Law of Liberia
- Policies and guidelines governing the functions of the Liberia Pharmacy Board
- Strategic and Operational plans and Budgets 2018 – 2023



- Standard Operating Procedures on Monitoring of pharmacies and drugs stores
- Best Practice

## **Summary of Findings**

### **Inadequate Inspection of Pharmaceutical Outlets by LPB Inspectors**

In the midst of the challenges faced by the Liberia Pharmacy Board as it relates to inspection, in 2018, the Board conducted concise inspection on pharmaceutical outlets and its personnel. While in 2019, the Inspectorate division also carryout inspection in six counties as indicated below. Montserrado, Bong, Margibi, Grand Bassa, Rivercess and Nimba Counties. Inspections carried out in ten counties in 2021, while 8 counties realized inspection in 2022 by the LPB inspectors.

In the midst of the effort applied by the Liberia Pharmacy Board we did not see evidence of inspection done in 2017.

The Liberia Pharmacy Board (LPB) should perform a comprehensive need assessment comprising of the required number of personnel, logistics (vehicles, motorbikes, computers, etc.) and operational funds (DSA, etc.) needed to effectively execute the proposed annual plan. The results of the need assessment should be appropriated on an annual basis to accommodate cashflow and budgetary considerations.

The Liberia Pharmacy Board should establish a mechanism/platform for the public and other stakeholders to file official complaints on non-compliant activities observed. The queries can be received through a portal on the website, an email or onsite complain directly at the head office.

The Liberia Pharmacy Board should perform an annual risk assessment of the existing pharmaceutical outlets portfolio, complaints received and craft annual workplan taking into consideration the following:

- Mandatory Special inspection exercises for all new pharmaceutical outlets before issuance of permits and licenses for operations.
- Mandatory Routine inspection exercises for all pharmaceutical outlets expanding their scope of operations or relocation to a new vicinity.
- Selected and scheduled number of Investigative inspections based on the risk assessment of complaints received.
- Selected and scheduled number of follow-up inspections based on recommendations from prior period investigations.
- Selected and scheduled concise monitoring inspections based on the annual risk assessment.

### **Limited Logistic for Effective Operations of the Liberia Pharmacy Board**

We observed that one of the challenges the entity is faced with is limited logistics to effectively carryout the activities of the Board. LPB's 2021 and 2022 annual reports indicated that, the entity operated with five vehicles and four motorbikes for the periods under audits. Out of the five vehicles mentioned, four are currently not in use and the only vehicle in use is also experiencing breakdowns frequently.



The Liberia Pharmacy Board (LPB) should perform a comprehensive need assessment comprising of the required logistics (vehicles, motorbikes, computers, etc.) and operational funds (DSA, etc.) needed to effectively execute inspection activities.

The Government of Liberia through the Ministry of Finance and Development Planning and the Ministry of Health should make available the required budgetary allocations for the purchase of logistics to facilitate the smooth function of the Liberia Pharmacy Board.

#### **Limited Inspectors for Effective Inspection of Pharmaceutical Outlets in the Country**

We observed the Inspectorate Department had limited inspectors to effectively inspect the activities of pharmaceutical outlets in the entire country. We were informed that in order for the Inspectorate Department to be effective in all the counties, the entity needs 25 inspectors in the Inspectorate Department. It is established that the Board has 15 inspectors in total. Four are assigned in Nimba County and the rest of the 11 inspectors, are assigned in Montserrado County leaving the remaining 13 counties without inspectors.

The Liberia Pharmacy Board should perform a comprehensive need assessment comprising of the required number of personnel and operational funds (DSA, etc.) needed to effectively execute the proposed annual plan. The results of the need assessment should be appropriated on an annual basis to accommodate cashflow and budgetary considerations.

The National Government should empower the Board with the required resources to employ the needed number of inspectors to counties that do not have inspector which will minimize the ineffective inspections of pharmacies and medicine stores.

Subsequently, the LPB should facilitate the appropriate scheduling/assignment of staff in all 15 counties based on the number and associated risks of pharmaceutical outlets.

#### **Inadequate Enforcement of Pharmacy Board's Regulations and Guidelines**

The Board is not adequately enforcing her regulations and guidelines by evidences of numerous violations seen committed by pharmaceutical outlets and their personnel. We observed that pharmaceutical outlets are operating without regard to Pharmacy Board regulations and guidelines. Regulations and guidelines noted in violations are the 500ft distance from one entity to another. Facilities were seen operating without the required paints (Forest green) on the doors, ventilation equipment: air conditioners and fans. We also observed that facilities were operating without LPB's permits and licenses.

The LPB should adequately enforce her regulations and guidelines by making sure that all outlets adhere to the regulations and guidelines or risk being fined or closed for such violation.

The Liberia Pharmacy Board (LPB) should perform a comprehensive need assessment comprising of the required number of personnel, logistics (vehicles, motorbikes, computers, etc.) operational funds and DSA needed to effectively execute the proposed annual plan. The Liberia Pharmacy Board should establish a mechanism/platform for the public and other stakeholders to file official





complaints on non-compliant activities observed. The queries can be received through a portal on the website, an email or onsite complain directly at the head office.

### **Expired medicines found on shelves of pharmaceutical outlets**

Expired medicines were found on the shelves of pharmaceutical outlets in the country.

We noticed expired medicines on the shelves of 105 out of 149 pharmaceutical outlets in the counties visited. In Montserrado County 18 out of 26, Nimba 16 out of 24, Bong 13 out of 17, Margibi 23 out of 31, Rivercess 10 out of 12, Grand Bassa 15 out of 24 and Bomi 10 out of 15 facilities visited had expired medicines on their outlets' shelves.

Selected and scheduled concise monitoring inspections based on the annual risk assessment should be prioritized on an annual basis. The Pharmacy Board should be robust in ensuring that expired medicines discovered from inspections are removed from the shelves and not subsequently sold by outlets owners in the country. The required fines and penalties should also be imposed and implemented where applicable.

### **Pharmaceutical outlets operating without license or permit**

There are pharmaceutical outlets in the country operating without licenses or permits from the Pharmacy Board. We observed that 61 out of 149 constituting 40.9% of pharmaceutical outlets in the seven counties visited were operating without licenses or permits from the Pharmacy Board.

The LPB should be vigorous in ensuring that all pharmaceutical outlets operating in the country are registered before operating.

The LPB should facilitate mandatory Special and Routine inspection exercises for all new pharmaceutical outlets and those expanding their scope of operations or relocating to a new vicinity. Also, all outlets operating without permits and licenses, LPB in collaboration with other requisite authorities, should ensure that the required penalties are meted out to violators operating without authorization.

### **Unlicensed facility owners involved with the dispensing of pharmaceutical products to customers**

Unlicensed facility owners of pharmaceutical outlets dispense pharmaceutical products to customers at their outlets.

We observed that 43.6% of dispensers, were absent at (65 out of 149) facilities visited, unlicensed facility owners were dispensing pharmaceutical products to customers. Products dispensed to customers by unlicensed personnel is a violation.

Unlicensed facility owners who are dispensing medicines to customers and patients without the approval of LPB's authority should face the required penalties: All dispensers, before being employed and assigned at any pharmaceutical outlets in the country should be qualified and registered with the Liberia Pharmacy Board. He or she must have sat and passed the LPB's Board test, must have graduated from an institution that is recognized by the LPB.





The LPB should ensure that selected and scheduled concise monitoring inspections based on the annual risk assessments are prioritized on an annual basis to identify unqualified dispensers. The Board in collaboration with other requisite authorities should ensure that the prescribed fines are imposed on dispensers and facility owners who are in violation.

#### **Unqualified Dispensers at pharmaceutical outlets**

Unqualified dispensers are employed and assigned at pharmaceutical outlets in the country. We noted that, 73.9% of dispensers employed at pharmaceutical outlets are unqualified in the seven counties visited. Unqualified dispensers at outlets are due to facility owners' refusal to adequately adhere to the LPB's regulations and guidelines as required and limited inspections carried out by LPB's inspectors.

This act of altitude is causing unqualified personnel at these outlets to dispense without proper prescriptions. The absence of qualified dispensers may impair adequate inquiry from customers relating to the usage of products; so as to educate them, what effect it may cause if he or she is suffering from a particular illness to make a preferred prescription or recommendation.

#### **Limited Regional offices for Pharmacy Board activities**

The Liberia Pharmacy Board has limited regional offices. There is only one regional office in one of the four regions in the country. We noted that the Liberia Pharmacy Board is unable to adequately decentralize regional offices for the effective implementation of the Board's operations across the country as planned.

The Government of Liberia should provide the required budgetary support to the Liberia Pharmacy Board for the establishment of regional offices in the remaining regions that are without office for the effective implementation of LPB's regulations and guidelines across the country.

#### **Delay in delivery of permits and licenses to registered pharmaceutical outlets**

The Liberia Pharmacy Board delays in the delivery of permits and licenses to proprietors of pharmaceutical outlets after being paid for.

We observed that current licenses and permits for 103 out of 149 outlets were not displayed as required by law (within two weeks of payment for license). Licenses were not issued for periods up to three to four months after payment for permits and licenses were made.

The Liberia Pharmacy Board should be proactive in the printing and delivery of permits and licenses to pharmaceutical outlets after payment is made to LPB in the required time (within two weeks) so as to enable registered outlets to display their licenses or permits.

Pharmacists covering outlets and County pharmacists should be admonished by LPB to collect and deliver paid-for permits and licenses within the LPB's specified time.

## **CHAPTER 1**

### **1.1 Introduction**

This chapter presents the background and motivation for the audit, the objectives, scope and methodology of the audit, and outlines the sources of audit criteria used.

### **1.2 Background**

- 1.2.1.1 Majority of Liberians get their medications prescribed or over-the-counter medicines, from medicine stores and pharmacies. This is due to the inability of hospitals and clinics to provide the medicines needed to patients but rather give prescriptions for these medicines to be bought by them. From documents received from the Liberia Pharmacy Board, there are over 1,255 medicine stores, 318 pharmacies and medicines outlets across the country. Pharmacies and medicine stores are essential components of the health system. They were also important in helping to ease the pressure on health facilities and providing major relief to residents during two major outbreaks: Ebola and COVID, in Liberia. Accordingly, it is important that medicines being sold and dispensed by these outlets be of standard quality and those dispensing these drugs are adequately trained, qualified and licensed. The regulation of this sector is therefore very critical in ensuring that they sell standard medicines and those dispensing meet all of the requisite criteria to operate.
- 1.2.1.2 The Liberia Pharmacy Board (LPB) is a regulatory authority that was established by an Act of Legislature in 1967 to regulate the practice of pharmacies and medicine stores in Liberia. The Board has the mandate to ensure that every pharmaceutical entity operating in Liberia, meets the basic requirements for safe practice, improve productivity, efficiency, and professionalism. LPB objectives are to promote, protect the public health, regulate and control the personnel involved in pharmacy practice and discipline. It also reviews quality, safety, and efficiency of medicines to ensure public health safety which is in line with the Sustainable Development Goal 3: to ensure healthy lives and promote well-being for all at all ages.
- 1.2.1.3 The Liberia Pharmacy Board has five members; a representative from the Pharmaceutical Association of Liberia (PAL), a representative from the Liberia Medical Association (LMA), two pharmacists representing those in private practice, and the Chief Pharmacist of Liberia as representative from the Ministry of Health (MOH).
- 1.2.1.4 The Liberia Pharmacy Board has a secretariat that runs the day-to-day affairs of the Board. The secretariat is managed and headed by a licensed pharmacist known as the Registrar or the Chief Executive Officer (CEO).
- 1.2.1.5 The secretariat has three major departments; Administrative, Inspectorate and Finance Departments. In addition, to the above departments, there are other sub-units. They are Testing, Monitoring and Evaluation, and, etc.
- 1.2.1.6 The Board is charged with the responsibility to set standards and policies in the retail pharmaceutical sector to ensure that:





- i. personnel in the sector are trained, qualified and registered,
- ii. pharmaceutical entities/premises in the sector are of good standard and registered and,
- iii. general populace receives the best pharmaceutical care.

### **1.3 Audit Motivation**

- 1.3.1.1 The audit was motivated by the alarming public outcry on the issues of expired medicine being sold on the market and the opening of substandard pharmaceutical outlets in the 15 counties.
- 1.3.1.2 On August 28, a local news outlet reported that on Thursday, August 25, 2022 during the induction ceremony of the Board of Trustees of the Liberia Pharmacy Board, held at the Bella Casa Hotel in Monrovia, the Registrar General of the LPB termed the huge circulation of falsified or fake medicines across the nation as a menace and said it has been a challenging task to mitigate the problem. He also said, "To clean up this menace is a huge task for the Pharmacy Board of the Republic of Liberia. There are more drug stores that need to be brought to justice<sup>1</sup> because they are in violation of the law."
- 1.3.1.3 On April 21, 2019, the Liberia News Agency (LINA) reported that authorities of the Liberia Pharmacy Board (LPB) burned a huge quantity of expired and substandard medical drugs valued at L\$5 million in Ganta, Nimba County<sup>2</sup>. The drugs were burned at the Zuah Mill crossing point, as part of the LPB's strive to ensure that no substandard or expired drugs are found on the shelves of drugstores and pharmacies. Speaking to reporters during the exercise, LPB Inspector General said the drugs were arrested across Nimba County in pharmacies and medicine stores, specifically from the Yekepa and Ganta ports of entry.
- 1.3.1.4 Most of the drugs were expired more than a year, while others were substandard drugs produced in neighboring Guinea. Among drugs burned were paracetamol, bon power, amodiaquine, septrin and various malaria drugs.
- 1.3.1.5 The government of Liberia banned the use and sale of amodiaquine in the country, but LINA reported that the boards on one of its inspection trips was surprised to see it on pharmacies and drugs stores shelves in counties visited. The newspaper further reported the death of Pinky Keman, who underwent an illegal abortion carried out by an unlicensed clinician.
- 1.3.1.6 Regarding the proliferation of drugs peddling on the Streets of Monrovia and other parts of Liberia, the Newspaper (LINA) quoted the LPB's authorities saying, these drugs are mostly smuggled into the country due to the porous borders and many illegal entry points

<sup>1</sup> <https://allafrica.com/stories/202208310088.htm>

<sup>2</sup> [Pharmacy Board Destroys L\\$5m Expired, Substandard Medicines In Nimba - Liberia News Agency](#)  
[LIBERIA: Pharmacy Board Destroys L\\$5m Expired, Substandard Medicines In Nimba - Global News Network \(gnnliberia.com\)](#)



between Liberia and her neighbors. They called on National Government to support the effort of the Inspection team at LPB. The CEO added that the situation is causing serious health complications as those drugs might lose values and essence due to its exposure to the sun and other unfavorable environments<sup>3</sup>.

1.3.1.7 The Good Regulatory Practices (GRP) document provides advice to establish and implement sound, affordable, efficient regulation of medical products as an important part of health system performance and sustainability. It presents widely recognized principles derived from an extensive review of public documents issued by governments and multilateral organizations as well as many consultative workshops, benchmarking exercises and interactions with countries' realities.

1.3.1.8 The nine principles presented in this document – legality, consistency, independence, impartiality, proportionality, flexibility, clarity, efficiency and transparency – are relevant to all authorities responsible for the regulation of medical products, irrespective of their resources, sophistication or regulatory model. Regulated parties and other stakeholders also have important roles to play in implementing GRP and achieving an efficient regulatory environment<sup>4</sup>.

#### **1.4 Objective of the Audit**

1.4.1.1 The general audit objective is to assess whether the Liberia Pharmacy Board is efficiently and effectively enforcing its regulations and guidelines across the country. Specifically, the audit focused on the following:

1. Assessed LPB strategy in place to enforce its regulations and guidelines;
2. Evaluated the level of monitoring and inspection carried out by LPB; and
3. Assessed whether LPB has the required resources; human and logistical tools & equipment to enforce its rules and regulations.

#### **1.5 Scope of the Audit**

1.5.1.1 We focused primarily on the Liberia Pharmacy Board Secretariat and assessed the strategy put in place on the regulations of pharmacies, medicine stores as well as pharmacists, and dispensers operating (in pharmaceutical outlets, hospitals and clinics) in Liberia. The audit considered fiscal years 2017/2018 through December 2023. It covers seven of the fifteen counties of Liberia; Montserrado, Margibi, Grand Bassa, Bong, Nimba, Bomi and Rivercess Counties.

#### **1.6 Methods of Data Collection and Analysis**

1.6.1.1 The audit was conducted in accordance with the International Standards of Supreme Audit Institutions (ISSAI 3000) as well as relevant SAI standards and guidelines applicable to performance auditing. Audit evidence was gathered through document reviews and data analysis, interviews and physical verification/observations.

<sup>3</sup> <https://newspublictrust.com/liberia-pharmacy-board-key-challenges-highlighted/>

<sup>4</sup> [WHO Publishes new guidance to promote Strong, Efficient and Sustainable Regulatory Systems](#)





## **1.7 Documents review and interview with key players analysis**

- 1.7.1.1 The team reviewed documents from the Liberia Pharmacy Board relating to the regulations of pharmacies, medicine stores, pharmacists, dispensers, operating in Liberia as well as analyzed data gathered from comprehensive, relevant and reliable information on the subject matter. Documents reviewed and analysed also helped us to validate information obtained through interviews, observation and field verifications.
- 1.7.1.2 Interviews were conducted with officials at the Liberia Pharmacy Board, that are involved with the regulations of pharmacies, medicine stores and its personnel in the seven counties visited. *See Appendix 1 for documents reviewed and Appendix 2 for key players interviewed and reasons in the appendix.*

## **1.8 Physical Verification**

- 1.8.1.1 We visited pharmaceutical outlets in Montserrado, Nimba, Margibi, Bong, Rivercess, Grand Bassa and Bomi Counties. The visits were to verify if Pharmacy Board regulations and guidelines are being adhered to by outlets and their personnel within the country and whether personnel employed at these facilities are trained and registered.

## **1.9 Assessment Criteria**

- 1.9.1.1 In order to answer the audit questions and assess LPB's regulations and guidelines of pharmaceutical outlets, assessment criteria were drawn from the following sources:
- Liberia Pharmacy Board Act
  - Revised Public Health Law of Liberia
  - Policies and Guidelines Governing the functions of the Liberia Pharmacy Board
  - Strategic and Operational Plan and Budget 2018 – 2023
  - Standard Operating Procedures on Monitoring of pharmacies and drugs stores
- Appendix 3: Assessment criteria, Audit questions and Sources of criteria**



## 2 CHAPTER 2

### 2.1 Description of the audit area

#### 2.1.1 Introduction

2.1.1.1 This chapter describes the process for the issuance of permits for one to operate new pharmacies and medicine stores and shows steps leading to the issuance of license for pharmacists and dispensers. It also identifies governing legislations for the sector, roles and responsibilities of key players and stakeholders, as well as funding source of the audited entity.

#### 2.1.2 Process description of registration and qualification for outlets and its personal

##### A. PHARMACY

In order to establish and operate a pharmacy, the following must be met:

- The construction or rental of a premise and hiring the services of a licensed pharmacist who will provide coverage as required by the policy.
- A request sent to the Office of the Inspector General by the proprietor for an application form which will be filled and returned to the IG's office for initial check.
- The LPB will dispatch a team of inspectors to the proposed site for inspection in order to establish whether the premises meets the requirements as prescribed in the policy. If the premise is qualified to operate, the proprietor will be requested to submit the name of the dispenser to go through the evaluation test.
- The Department of Testing & Evaluation administers test to the dispenser and if he or she passes, a registration document will be given to the proprietor to proceed with the registration.
- A billing form will be submitted for payment of every required fees. The completed registered document is forwarded to the IG's office for coding and signature followed by printing of permit by the Department of Registration and Record.
- The Department of Registration and Record sends the printed permit to the office of the Registrar/CEO for onward approval and seal for final delivery.

##### B. MEDICINE STORE

- All of the above-mentioned procedures leading to the issuance of permits for the operation of a retail pharmacy apply to medicine store; the only exception is, the medicine store does not require the service of a pharmacist to operate.

#### 2.1.3 Steps leading to the issuance of license for Pharmacist:

2.1.3.1 To qualify for a license to practice pharmacy, an applicant shall file an application with the Liberia Pharmacy Board and submit evidence as to the following matters:

- The applicant should be 21 years of age or above;
- The applicant should be of good moral character;
- The applicant must have graduated with a bachelor's degree in either of the sciences or equivalent in Pharmacy from a college or school of pharmacy, either in





Liberia or abroad, which college or school is approved by the Liberia Pharmacy Board as maintaining satisfactory standard;

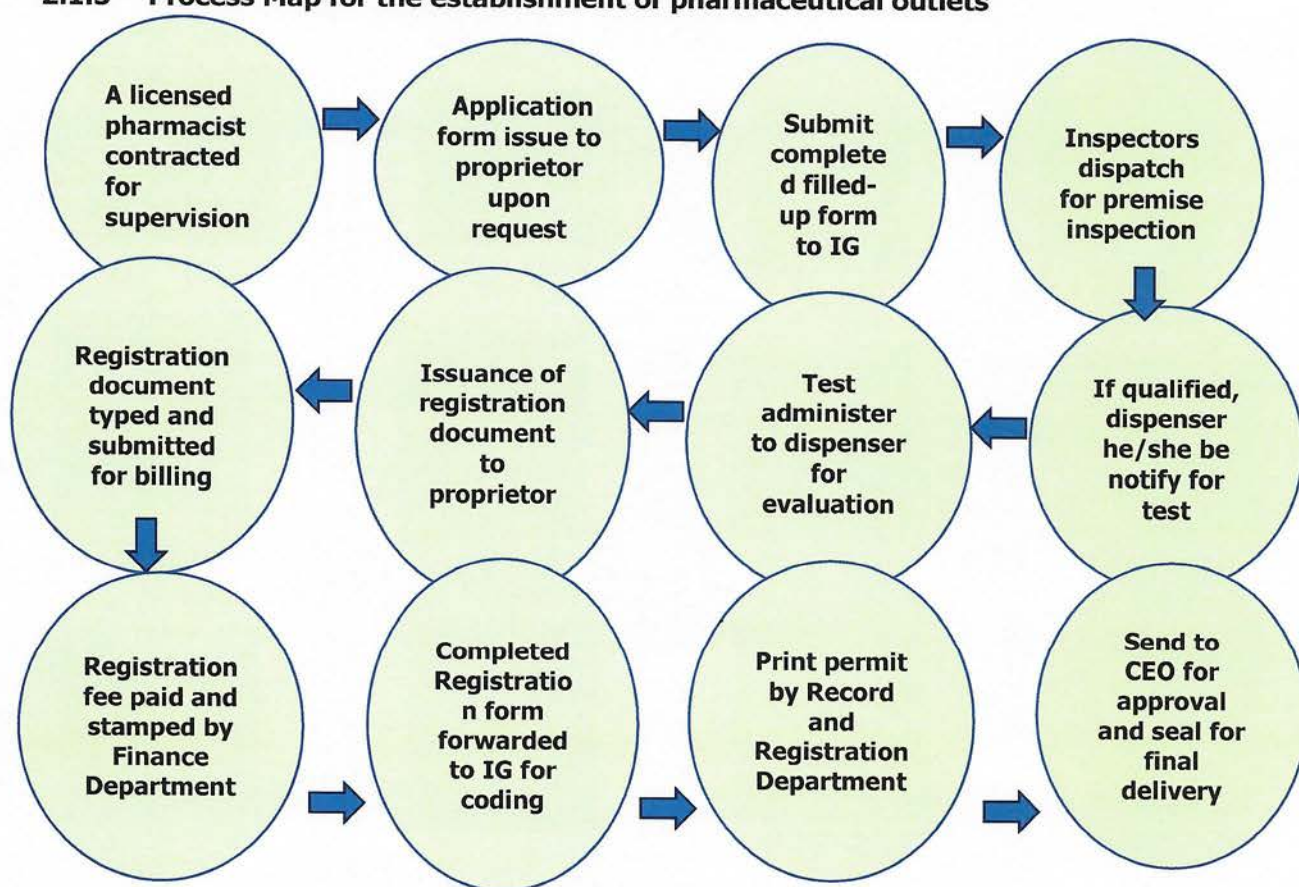
- That the applicant has passed a written examination prepared and administered by the Liberian Pharmacy Board.

#### 2.1.4 Steps leading to the issuance of license for dispenser:

2.1.4.1 To qualify for a dispenser's license, an applicant shall file an application with the Liberia Pharmacy Board and submit evidence as to the following matters:

- That the applicant is 21 years of age or above;
- That the applicant is of good moral character;
- That the applicant has satisfactorily completed a course of study and practice in dispensing of drugs, medicines, poisons, and therapeutic devices prescribed by the Liberian Pharmacy Board;
- That the applicant has passed an examination prepared and administered by the Liberian Pharmacy Board

#### 2.1.5 Process Map for the establishment of pharmaceutical outlets



## **2.2 Governing Legislations**

### **2.2.1 Liberia Pharmacy Board Act**

- 2.2.1.1 The Liberia Pharmacy Board was established by an Act of the National Legislature in 1967 as a specialized body of the Liberia health sector serving as the directing and coordinating authority for the practice of pharmacy in Liberia.

### **2.2.2 Revised Public Health Law of Liberia**

- 2.2.2.1 Chapter 67. Pharmacy, Subchapter A. Introductory Matter and Subchapter B. Licensing of Pharmacists. This chapter applies to the profession of pharmacy and includes the licensing of pharmacists and dispensers, the licensing and operation of retail, wholesale and manufacturing establishments in connection therewith, and the regulation of pharmaceutical dispensaries in hospitals. The general provisions for all medical and allied health profession contained in chapter 61 apply to the chapter.

### **2.2.3 Policies and Guidelines Governing the functions of the Liberia Pharmacy Board**

- 2.2.3.1 The National Board of Pharmacy, named and styled; the Liberia Pharmacy Board (commonly called Pharmacy Board of Liberia or LPB), is a regulatory authority that was established by an Act of Pharmacy in 1967 to regulate the practice of pharmacy in Liberia. The Board, in accordance with the provisions of 61.12 of the 1967 Act, shall assist the Minister of Health on matters concerning the practice of pharmacy, and the licensing of pharmacists, hospital dispensaries, retailed pharmaceutical outlets (pharmacies and medicine stores) at the community level.

### **2.2.4 Strategic and Operational Plan and Budget 2018 – 2023.**

- 2.2.4.1 The strategic and operational plans and budget support the Liberia Pharmacy Board legal mandate's goals and priorities. This strategy outline policies and planned activities as mentioned below. It also provides more detail on the activities to be undertaken to further the implementation of the ongoing reform processes and activities.
- 2.2.4.2 The platforms in this document are based upon the reform measures designed to make the regulatory authority more relevant in terms of improving the quality of services provided to the pharmaceutical sector.
- 2.2.4.3 The successful implementation of the activities within the strategy and operational plan which is based on the Planned Activity implementation Assumptions:
- That the GOL will top up its financial subsidy to the Pharmacy Board of Liberia (PBL) for each fiscal period and the allotment to the PBL account be deposited as timely as possible,
  - That the Liberia Pharmacy Board (LPB) generates revenue from Regulatory Fees,
  - The Ministry of Health (MOH) will subsidize activities that are in line with the National Health Plan,
  - That the Health partners and donors will support programs that are in line with health interventions in Liberia.





## 2.2.5 Standard Operating Procedures on Monitoring of pharmacies and drugs stores

2.2.5.1 Section 61.12 Functions of the Board, the Liberia Pharmacy Board was established for a purpose/mandate, a mission/vision. To meet up with these challenges, the board is therefore clothed with the authority to carry out the following functions:

- Administers examinations for the qualification of graduate pharmacists, pharmacy Technicians/Dispensers who have completed the requirement of licensure;
- Registers and maintains the register of all pharmacists and pharmacy technicians and dispensers practicing in Liberia;
- Supervises and control the ethical behaviour of practicing pharmacists and pharmacy technicians/dispensers;
- Ensures the continuing professional development (CPD) of pharmacists and pharmacy technicians/ dispensers in Liberia;
- Sets standards and defines requirements for establishing and operating retail pharmaceutical outlets;
- Inspects retail pharmaceutical outlets for annual registration documents, condition of premises, and qualifications of pharmacists, pharmacy technicians/dispensers in entities/stores;
- Issues permits to retailers annually;
- Evaluates curricula and issues annual permits to pharmaceutical training institutions; and
- Advises the Minister of Health on the practice of pharmacy in the country.

## 2.3 Key players and stakeholder's roles and responsibilities

**Table 1: Details of Key players and stakeholder's roles and responsibilities**

No.	Key players/Stakeholders	Roles and responsibilities
1.	Registrar General/CEO	The Registrar General/Chief Executive Officer (CEO) is the highest-ranking person in the administrative arm of the Liberia Pharmacy Board (LPB). The CEO is often responsible for expanding LPB, driving profitability, and improving the entity. The CEO manages the overall operations of LPB, etc.
2.	Deputy Registrar General	Acts as the CEO if he is absent from the job or as directed by the CEO.
3.	Comptroller	Manages all accounting transactions, issues receipts to all pharmaceutical outlets, prepares budget forecasts, ensures bank payment, prepares financial statements, and handles monthly, quarterly and annual closings documents for LPB, etc.
4.	Director of Testing and Evaluation	Optimizes rational use of medicines by evaluating the clinical use of pharmaceutical, develop policies for managing medicines use and administration and services rendered in pharmaceutical outlets.
5.	Montserrado County Coordinator	Conducts inspections within Montserrado County on all pharmaceutical outlets with other inspectors; write reports on all inspections carried out and submit said reports to the IG; confiscates counterfeit and expired medicines from the market; conducts inspections in hospitals and clinics dispensaries; enforces compliance relating to pharmaceutical practices in hospitals and clinics dispensaries;



No.	Key players/Stakeholders	Roles and responsibilities
		confiscates fake medicines from hospital and clinics dispensaries; shall be in readiness at all time to carry out inspection in health facilities dispensaries and etc.
6.	Region One Coordinator	Does periodic and or quarterly inspections within Nimba, Bong, Lofa, Grand Gedeh, River Gee, Maryland, Grand Kru and Sinoe Counties on all pharmaceutical outlets; report all inspection related activities to the IG; confiscates counterfeit, expired and counter band medicines; inspects where pharmaceutical products are stored and inspect all dispensaries of hospitals and clinics including their personnel.
7.	Region Two/Western Region Coordinator	Does periodic and or quarterly inspections within Bomi, Gbarpolu, Grand Cape Mount, Grand Bassa and River ccess Counties on all pharmaceutical outlets; report all inspection related activities to the IG; confiscates counterfeit, expired and counterband medicines; inspects where pharmaceutical products are stored and inspect all dispensaries of hospitals, clinics including their personnel.
8.	Administrator	Supports the smooth running of the offices by carrying out clerical tasks and projects; prepares, organizes and store information on paper and digital form; deals with queries on phone and by email from customers; managing diaries, scheduling meetings and booking rooms; arranges travel and accommodation; orders office supplies, maintaining office systems, liaising with suppliers and contractors; liaising with staff in other departments, e.g. Finance and HR.
9.	Inspector General/IG	Ensures regulatory compliance; prepares work plan and strategy for inspection; recommends the best option in the implementation of inspection of activities; advises on related inspection activities; produces documents and guidelines for the inspection; reviews and updates inspection tools to confirm with acceptable standards; submits quarterly reports to the Registrar General/CEO on all inspection activities; provides recommendation on cost-effective and evidence-based inspections plan and implementation; also collaborates with hospital Officer in Charge (OIC) and administrator for the conduct of inspection in the dispensaries and medical teams for the adherence to LPB guidelines.
10.	Head of Records and Registration	Head of records keeps records of permits for both medicine stores and pharmacies; keeps records of professional licenses and keeps track of number of superintended pharmacists; dispatches all permits to all pharmaceutical outlet owners; develops, maintains, verifies and evaluates existing systems; deals with enquiries and requests for information from both clients; classifies and indexes records of pharmaceutical outlets and ensures that records are easily accessible.
11.	Director of Research and Drug Information Center	Collects and reviews all the necessary data of newly manufactured drugs; sets up drug data base for professional and public consumption; participates in the conduction of research activities including pharmaco-epidemiology, e. g. drug utilization studies and pharmacovigilance in collaboration with other relevant agencies; provides drug information to health care professionals and the public; assesses therapeutic drugs through principal medical and





No.	Key players/Stakeholders	Roles and responsibilities
		pharmaceutical journals; collaborates with testing and evaluation department in the training of pharmaceutical outlet personnel; conducts training and workshop to build the knowledge or capacity of the personnel of the Research and Drug Information Department and etc.
12.	Human Resource Director (HR)	Creates and puts into action HR initiatives and strategies that are in line with the overall policy; improves ties between management and employees by responding to requests, grievances, or other issues; controls the hiring and hiring process; support present and future demands through growing, involving, inspiring, and preserving human capital; manages and maintains a set up that promotes optimum performance; always maintains legal compliance while managing human resources; maintains the benefits and pay schedule and etc.

### 2.3.1 Funding

- 2.3.1.1 The Liberia Pharmacy Board is funded by the Government of Liberia through budgetary allocations and fees collected from pharmaceutical outlets. For the audit period, GoL contribution amounted to **US\$ 918,715.00**, while fees collected by LPB amounted to **US\$ 226,624.00** and **LR\$ 64,227,351.92** as detailed in Table 2, 3 and 4 below.

**Table 2: Government of Liberia support to the Liberia Pharmacy Board**

NO.	Funding Arrangement per year	GOL Budget actual allocation (USD)
1.	2017/18	\$ 137,409
2.	2018/19	\$ 124,133
3.	2019/20	\$ 167,976
4.	2020/21	\$ 106,447
5.	2021 --- Special Budget	\$ 73,263
6.	2022	\$ 138,471
7.	2023	\$ 171,016
8.	<b>TOTAL</b>	<b>\$ 918,715</b>

Source: Liberia National Budget (2017 – 2023)

**Table 3: Fees collected by the Liberia Pharmacy Board**

YEAR	LRD	USD
2017	N/A	N/A
2018	N/A	N/A
2019	\$16,277,986.92	N/A
2020	\$9,368,840.00	\$39,876.00
2021	\$13,900,125.00	\$54,111.00
2022	\$12,872,820.00	\$69,656.00
2023	\$ 11, 857,580.00	\$ 62,981.00
<b>TOTAL</b>	<b>\$64,227,351.92</b>	<b>\$226,624.00</b>

Source: LPB's Financial reports 2019 -2023

**Table 4: Expenditures of fees collected by the Pharmacy Board**

YEAR	Amt. Collected (LRD)	Expenses (LRD)	Balance	Amt. Collected (USD)	Expenses (USD)	Balance
2017	N/A	N/A	N/A	N/A	N/A	N/A
2018	N/A	N/A	N/A	N/A	N/A	N/A
2019	16,227,986.92	13,786,519.30	2,441,467.62	N/A	N/A	N/A
2020	9,368,840.00	10,809,096.00	- 1,440,256.00	39,876.00	38,458.50	1,417.5
2021	13,900,125.00	14,391,165.00	- 491,040.00	54,111.00	54,434.75	-323.75
2022	12,872,820.00	13,103,825.00	-231,005.00	69,656.00	66,243.50	-3,412.5
2023	11,857,580.00	11,660,870.00	196,710.00	62,981.00	55,372.25	7,606.75

Source: LPB Financial reports 2019 -2023





### 3 CHAPTER 3: Findings

#### 3.1 Introduction

3.1.1.1 This chapter presents the findings as it relates to the audit objectives based on evidence and our assessments using the selected audit methodology, applying reasonable professional judgments to answer audit questions and analysing the information gathered. It provides the overall account of the problems that are affecting the regulation of pharmacies and medicine stores in Liberia.

#### 3.2 Inadequate Inspection of Pharmaceutical Outlets by the Pharmacy Board's

3.2.1.1 The LPB's Inspector Handbook page 2 paragraph 2 requires the Inspectorate Department to carry out the following types of inspections: routine, concise, follow-up, special and investigative inspections based on case-by-case basis.

- Routine – assesses new establishment that has applied for a permit to extend scope of operations, changes in its personnel, move to a new premise or has been inspected in a long time;
- Concise – assesses standards of good pharmacy practice;
- Follow-Up – ensures that corrective measures have been under taken following advice and notice given during a previous inspection;
- Special – assesses the performance of a new establishment whose scope of operations is unknown;
- Investigative – deals with specific complaints received about lapses or non-compliance with standards of professional practice.

3.2.1.2 However, from our review of the monitoring and inspection reports on pharmacies and medicine stores for the year 2017, LPB did not provide record of any inspection carried out by the Inspectorate Department in any of the fifteen counties. There is no evidence or report to verify LPB's claim that inspection was conducted in 2017.

3.2.1.3 For 2018 and 2019, Concise Inspection was conducted in six out of fifteen counties namely: Montserrado, Margibi, Rivercess, Bong, Grand Bassa and Nimba Counties, leaving out nine counties of the supervision exercise. From the additional reports obtained from the LPB management, we acknowledged that in 2018 concise and routine inspections were conducted in 7 out of the 15 counties, namely: Montserrado, Bong, Margibi, Grand Bassa, Grand Cape Count, Bomi and Nimba Counties. Our analysis done for the period of 2019 also shows that concise inspection was conducted in Nimba county.

3.2.1.4 Additionally, from the analysis done on the latest documents received from the LPB management for the period 2020, we acknowledged that the LPB management conducted concise and routine inspections in 8 out of the 15 counties, namely: Montserrado, Rivercess, Bong, Margibi, Grand Bassa, Grand Cape Mount, Bomi and Nimba Counties.

3.2.1.5 In 2021, we noted that the Inspectorate Department carried out Routine (quarterly) inspection in ten counties: Lofa, Grand Bassa, Rivercess, Bomi, Grand Cape Mount,



Gbarpolu, Grand Gedeh, Grand Kru, Maryland and Sinoe Counties leaving five counties with no inspection.

- 3.2.1.6 In the year 2022 routine Inspection was conducted in five of fifteen counties, Bong, Margibi, Lofa, Nimba and Montserrado Counties.
- 3.2.1.7 From the analysis done for the period 2023 on the additional documents provided to us by the LPB management, concise inspection was conducted in 9 out of 15 counties, namely: Bong, Margibi, Montserrado, Nimba, Bomi, Grand Cape Mount, Sinoe, Grand Kru, and Rivergee Counties.
- 3.2.1.8 We also observed that LPB did not carry out follow-up and investigative inspections for the audit period though the conditions for said inspections existed in pharmaceutical facilities visited. **See Table 5** for details on the level of monitoring and inspection conducted.

**Table 5: Detail of monitoring/inspection conducted by LPB for years under audit**

YEAR	2017	2018	2019	2020	2021	2022	2023
TYPE OF INSPECTION	None	Concise Inspection Oct. 6-11	Concise Inspection	Concise/Routine inspections	Routine Inspection Jan.-June	Routine Inspection May 11-30	Concise inspection
COUNTY							
BONG	None	Y	None	Y	X	y	Y
MARGIBI	None	Y	None	Y	x	Y	Y
LOFA	None	X	None	X	y	Y	X
MONTSERRADO	None	Y	None	Y	X	Y	Y
NIMBA	None	Y	Y	Y	x	Y	Y
GBARPOLU	None	X	None	X	Y	X	X
BOMI	None	Y	None	Y	Y	X	Y
GRAND CAPEMONT	None	X	None	Y	Y	X	Y
GRAND BASSA	None	Y	None	Y	Y	X	X
RIVERCESS	None	Y	None	Y	Y	X	X
SINOE	None	X	None	X	Y	X	Y
GRAND KRU	None	X	None	X	Y	X	Y
MARYLAND	None	X	None	X	y	X	X
RIVERGEE	None	X	None	X	X	X	Y
GRAND GEDEH	None		None	X	y	X	X
Number of counties inspected	None	7	1	8	10	5	9
Number of counties not inspected	15	8	14	7	5	10	6

Source: LPB Monitoring and Inspection Reports



**Legend: y= Inspected**

**X= Not Inspected**

**None= No Account Available**

- 3.2.1.9 From interviews conducted with facility owners and dispensers at 149 facilities, we noted that random inspections were conducted by the LPB's inspectors. These inspections were varying from days, weeks and month every year to their premises.
- 3.2.1.10 Documents reviewed revealed that LPB inspectors were not vigorous in carrying out their functions in regard to inspection of pharmaceutical outlets operating in the country. Authorities at LPB, indicated that this is due to limited resources including logistics and bad road conditions.
- 3.2.1.11 The situation is hampering the effective day-to-day inspections of pharmaceutical outlets in the country. Out of the over 1,573 pharmaceutical outlets recorded by the Department of Registration and Records at the LPB, the Inspectorate department is unable to inspect 30% of the facilities in a given fiscal period. LPB currently has a total of 15 inspectors which is inadequate considering the challenges associated with inspections.
- 3.2.1.12 From over fifty of the facility owners interviewed, we noted that the LPB is not involved with inspection to actually establish the prevailing conditions at these facilities but is only concerned about the collection of annual fees.
- 3.2.1.13 The failure of the LPB through the Inspectorate Department to carry out inspections as required by law may result in the operations of inadequate pharmaceutical outlets or outlet being operated by unqualified personnel thereby resulting into sales of inappropriate medicines and inadequate dispensing of drugs and/or mis-prescription. **See figure 1** for violations observed.

Patients are treated in pharmacies and medicine stores across the nation.

Compound # 3, Grand Bassa County



**Source: GAC Photo 1**



**GAC Photo 2**

### **Conclusion**

- 3.2.1.14 The LPB conducted inadequate inspection on pharmacies and medicines stores as well as facilities personnel.

3.2.1.15 Concise and routine inspections were conducted in Montserrado, Bong, Margibi, Grand Bassa, Rivercess, Grand Cape Mount and Nimba Counties in 2018. And in 2019 concise inspection was done only in Nimba county, while routine inspection was conducted in 2021 and 2022 in ten and five counties respectively.

3.2.1.16 However, in 2017 we observed no evidence of inspections conducted by LPB nor were followed-up and investigative inspections conducted for the audit period.

#### **Recommendation**

3.2.1.17 The Liberia Pharmacy Board (LPB) should perform a comprehensive need assessment comprising of the required number of personnel, logistics (vehicles, motorbikes, computers, etc.) and operational funds (DSA, etc.) needed to effectively execute the proposed annual plan. The results of the need assessment should be appropriated on an annual basis to accommodate cashflow and budgetary considerations.

3.2.1.18 The Liberia Pharmacy Board should establish a mechanism/platform for the public and other stakeholders to file official complaints on non-compliant activities observed. The queries can be received through a portal on the website, an email or onsite complain directly at the head office. All of these platforms should be given the needed publicity, and monitored periodically to inform future investigative exercises.

3.2.1.19 The Liberia Pharmacy Board should perform an annual risk assessment of the existing pharmaceutical outlets portfolio, complaints received and craft annual workplan taking into consideration the following:

- Mandatory Special Inspection exercises for all new pharmaceutical outlets before issuance of permits and licenses for operations.
- Mandatory Routine Inspection exercises for all pharmaceutical outlets expanding their scope of operations or relocation to a new vicinity.
- Selected and scheduled number of Investigative inspections based on the risk assessment of complaints received.
- Selected and scheduled number of follow-up inspections based on recommendations from prior period investigations.
- Selected and scheduled concise monitoring inspections based on the annual risk assessment.

3.2.1.20 The Liberia Pharmacy Board should facilitate the preparation of activities reports for each annual activity mentioned above to be subsequently consolidated into a periodic / annual report of the entity. Evidence of periodic / annual reports should be adequately documented and filed to facilitate future review.

#### **Management's Response**

3.2.1.21 *The Board already has three existing platform for the dissemination of information: the Liberia Pharmacy Board official website (<https://www.lpb.gov.lr>) an email account and a Facebook page which are functional and assessable to the public. However, an additional*





*platform like WhatsApp will be created to increase access to information and awareness has to be conducted for increase public utility of the various portals.*

### **Auditor General's Position**

- 3.2.1.22 The management's assertion did not adequately address the issues raised. Management did not address concerns related to personnel, logistics (vehicles, motorbikes, computers, etc.) and operational funds (DSA, etc.) needed to effectively execute the proposed annual plan, the conduct of periodic risk assessment and the preparation of periodic /annual reports. Therefore, we maintain our findings and recommendations. We will follow up on the implementation of our recommendations during subsequent audit.

### **3.3 Limited Logistic for effective operations of the Liberia Pharmacy Board**

- 3.3.1.1 In keeping with the Liberia Pharmacy Board's legal mandates as the regulating authority for the practice of pharmacy in Liberia. LPB is to ensure that every pharmaceutical entity operating in Liberia, meets the basic requirements for safe practice, improve productivity, efficiency, and professionalism.
- 3.3.1.2 In order to adequately carry out the statutory function, the LPB should have the required number of road-worthy vehicles and bikes with maintenance services, with the needed fuel, lubricant and other logistics to efficiently and effectively carry out its operations.
- 3.3.1.3 However, our analysis on the asset registers and the annual reports of the Board, we noted that 5 vehicles and 4 motorbikes were purchased between 4 to 11 years ago and were fully depreciated and not road worthy.
- 3.3.1.4 Moreover, from observation of the entity's logistics, we observed that the Board has limited logistics for effective operations.
- 3.3.1.5 Also, interviews conducted with stakeholders at the LPB, informed us that for the last nine years, the Government of Liberia has not allocated any funding for the purchase of vehicles, and 3 years for the purchase of motorbikes. This has caused the limitation of logistics, which is one of the challenges the entity is faced with to effectively carryout the activities of the Board.
- 3.3.1.6 We observed that, in order for the Board to effectively function, especially to enhance the aspect of inspection, the entity needs additional vehicles and motorbikes to effectively execute its mandate.
- 3.3.1.7 The failure of Government of Liberia to prioritize the logistical components of the Board's request at the formulation of the national budget, is hampering the Liberia Pharmacy Board to effectively and efficiently implement her mandates in the country. **See Table 6:** Summary of logistics/vehicles for the list of logistics, date purchased and current condition.



**Table 6: Summary of logistics/vehicles**

Logistic/Vehicle Description	Year Purchased	Number of years Used	Current condition of the asset
Renault Logan (3 vehicles for administrative use)	2014	9 years	Not Road worthy (Out of use)
Toyota (18 seated Bus to take staff to work)	2012	11 years	Not Road worthy (Out of use)
Nissan Patrol (Jeep for Inspection)	2013	10 years	Not Road worthy
Motor Bike for Inspection (4 TVS Bikes)	2019	4 years	Not Road worthy

**Source: LPB 2022 Annual Report**

**See Appendix: 4** for LPB's logistics in the appendix.

### Conclusion

- 3.3.1.8 The Pharmacy Board has limited logistics for the effective implementation of their mandates and operations of the entity. Out of the 5 vehicles bought for the period under audit, only one vehicle is functioning with four motor bikes. However, we observed that the functioning fleets are frequently in garage for repair. The government is yet to purchase new vehicle for the entity.

### Recommendation

- 3.3.1.9 The Liberia Pharmacy Board (LPB) should perform a comprehensive need assessment comprising of the required logistics (vehicles, motorbikes, computers, etc.) and operational funds (DSA, etc.) needed to effectively execute inspection activities. The results of the need assessment should be appropriated on an annual basis to accommodate cashflow and budgetary considerations.
- 3.3.1.10 The Government of Liberia through the Ministry of Finance and Development Planning and the Ministry of Health should make available the required budgetary allocations for the purchase of logistics to facilitate the smooth operations of the Liberia Pharmacy Board.

### Management's Response

- 3.3.1.11 *In response to the above count, the Board do agree with the recommendations as a means to strengthen the Board performance, the conduct of the need assessment comprising of the required number of personnel, logistics (Vehicles, Motorbikes, etc.) as well as basic office materials and equipment. Appropriate budget will be attached to be submitted to the ministry of Finance and development planning for support to implement.*

### Auditor General's Position

- 3.3.1.12 We acknowledge Management's acceptance of our findings and recommendations. We will follow up on the implementation of our recommendations during subsequent audit.



### **3.4 Limited Inspectors for effective inspection of pharmaceutical outlets in the country**

- 3.4.1.1 The LPB's Inspection Handbook introductory page, paragraph 1&2 states that Medicine inspectors serve as pharmaceutical control authorities who are to enter or inspect any outlets that is on the register of LPB to enforce compliance relating to standard of premise as well as maintaining the identity, quality, purity and strength of medicines sold in the country.
- 3.4.1.2 The Act further empowered the Board to ensure that every pharmaceutical entity operating in Liberia, meets the basic requirements for safe practice, improve productivity, efficiency and professionalism.
- 3.4.1.3 Interviews with key players at the LPB revealed that the Inspectorate Department had limited inspectors to effectively carry out the activities of the board in the entire country. We further established through documents reviews that the Board has 15 inspectors in total. Four inspectors are assigned in Nimba County and the rest of the 11 inspectors are assigned in Montserrado County leaving the remaining 13 counties without assigned inspectors, though pharmaceutical activities are taking place in those counties.
- 3.4.1.4 During the face-to-face interview with the IG of LPB, we were informed that in order for the Inspectorate Department to be effective in all the counties, 25 inspectors are needed in the department. Our investigation established that the Board's failure to recruit and assign inspectors to all the 15 counties as required is due to limited budgetary allotment. This constraint is leading to pharmaceutical outlets in counties without inspectors to operate with disregard to the prescribed rules and regulations of the Board.

#### **Conclusion**

- 3.4.1.5 The Pharmacy Board has limited inspectors. The LPB Inspectorate Department has 15 inspectors for the inspections of pharmaceutical outlets in the country. Out of the 15 inspectors, 11 are in Montserrado county and 4 in Nimba County with none in the remaining 13 counties thereby leaving pharmaceutical outlet owners operating without the adherence of the Board's regulations and guidelines.

#### **Recommendation**

- 3.4.1.6 The Liberia Pharmacy Board (LPB) should perform a comprehensive need assessment comprising of the required number of personnel and operational funds and DSA needed to effectively execute the proposed annual plan. The results of the need assessment should be appropriated on an annual basis to accommodate cashflow and budgetary considerations.
- 3.4.1.7 The National Government should empower the Board with the required resources to employ the needed number of inspectors to counties that do not have inspectors which will minimize the ineffective inspections of pharmacies and medicine stores. This will help limit the nonadherence posture of pharmaceutical outlets owners to LPB regulations and guidelines.



- 3.4.1.8 Subsequently, the LPB should facilitate the appropriate scheduling/ assignment of staff in all the 15 counties based on the number and associated risks of pharmaceutical outlets; therein.

### Management's Response

- 3.4.1.9 In addressing this concern, the Board has developed the decentralization plan, coupled with plans to open regional offices in the counties and have submitted same to the MFDP for budget allocation. Therefore, the LPB has developed the appropriate scheduling/ assignment of staff in all the 15 counties based on the number and associated risks of pharmaceutical outlet and appeal to the Government to support the plan.

### Auditor General's Position

- 3.4.1.10 We acknowledge Management's acceptance of our findings and recommendations. We will follow up on the implementation of our recommendations during subsequent audit.

## 3.5 Inadequate enforcement of Pharmacy Board's regulations and guidelines

- 3.5.1.1 The Act that established LPB states that the Board is to ensure that every pharmaceutical entity operating in Liberia, meets the basic requirements for safe practice, improve productivity, efficiency and professionalism.
- 3.5.1.2 From the documents received from the Department of Records and Registration, it is established that the Liberia Pharmacy Board registered 319 retail pharmacies and 1,256 medicine stores across the 15 counties. **See table: 7.**

**Table 7: Registered pharmaceutical outlets per county**

No	County	Number of medicine stores registered	Number of retail pharmacies registered	Total number of pharmaceutical outlets registered per county
1	Bomi	18	1	19
2	Bong	58	14	72
3	Gbarpolu	13	0	13
4	Grand Bassa	36	2	38
5	Grand Cape Mount	16	3	19
6	Grand Gedeh	34	3	37
7	Grand Kru	13	0	13
8	Lofa	30	2	32
9	Margibi	49	14	63
10	Maryland	22	0	22
11	Montserrado	808	261	1069
12	Nimba	114	15	129
13	River Gee	22	1	23
14	Rivercess	5	1	6
15	Sinoe	18	2	20
	<b>Grand Total</b>	<b>1,256</b>	<b>319</b>	<b>1,574</b>

**Source: LPB Registry 2021**



- 3.5.1.3 Out of the total number of pharmacies and medicines stores mentioned above, the inspectorate staff are mainly focused in Montserrado and portion of Nimba County.
- 3.5.1.4 The Liberia Pharmacy Board has only one Regional Office that is located in Nimba county with a total number of 6 staff (2 securities and 4 inspectors) with limited logistics for inspections and supervision.
- 3.5.1.5 During our field verification to 7 of the 15 counties, we observed that pharmaceutical outlets were operating without regard to the 500ft distance from one entity to another.
- 3.5.1.6 Facilities were seen operating without the required paints on the doors and walls of the building, malfunctional air conditioners, failure to display the annual registration certificate, ID cards, dispensers operating without gowns and other violations.
- 3.5.1.7 The inadequate enforcement of the LPB's regulations and guidelines is due to the ineffective inspection by the LPB inspectors.
- 3.5.1.8 The failure of the Liberia Pharmacy Board to adequately enforce the Board's regulation is providing facilities owners the opportunity to carry out the mentioned violations. **See Table 8 for detail on facilities that are in violations.**

**Table 8: Detail of violations of LPB's regulations and guidelines by facilities in the counties visited.**

COUNTY	FACILITY WITHOUT FOREST GREEN	FACILITY WITHOUT AIR CONDITION OR FAN	FACILITY NOT OBSERVING THE 500FT DISTANCE SPACE	FACILITY EXISTING WITHOUT LPB REGISTRATION
Montserrado	5	5	3	-
Nimba	6	5	5	-
Bong	5	8	7	3
Margibi	8	10	7	4
Rivercess	6	3	4	6
Grand Bassa	6	3	8	8
Bomi	5	3	5	7
<b>TOTAL</b>	<b>41</b>	<b>37</b>	<b>39</b>	<b>28</b>

Source: GAC Analysis

### Conclusion

- 3.5.1.9 The Liberia Pharmacy Board is not adequately enforcing her regulations and guidelines.
- 3.5.1.10 Pharmaceutical outlets in the country are seen without forest green on their iron gates as per the PLB regulation, outlets are without fan or air-conditioner to maintain the required temperature of medicines, 500ft distance space is not observed by pharmaceutical outlets established in the country.



- 3.5.1.11 Also, there are outlets existing in the country without being registered with the Liberia Pharmacy Board.

### **Recommendation**

- 3.5.1.12 The LPB should adequately enforce her regulations and guidelines by making sure that all outlets adhere to the regulations and guidelines or risk being fined or closed for such violation.
- 3.5.1.13 The Liberia Pharmacy Board (LPB) should perform a comprehensive need assessment comprising of the required number of personnel, logistics (vehicles, motorbikes, computers, etc.) and operational funds (DSA, etc.) needed to effectively execute the proposed annual plan. The results of the need assessment should be appropriated on an annual basis to accommodate cashflow and budgetary considerations.
- 3.5.1.14 The Liberia Pharmacy Board should establish a mechanism/platform for the public and other stakeholders to file official complaints on non-compliant activities observed. The queries can be received through a portal on the website, an email or onsite complaint directly at the head office. All of these platforms should be given the publicity needed and monitored periodically to inform future investigative exercises.
- 3.5.1.15 The Liberia Pharmacy Board should perform an annual risk assessment of the existing pharmaceutical outlets portfolio, complaints received and craft annual workplan taking into consideration the following:
- Mandatory Special inspection exercises for all new pharmaceutical outlets before issuance of permits and licenses for operations.
  - Mandatory Routine inspection exercises for all pharmaceutical outlets expanding their scope of operations or relocation to a new vicinity.
  - Selected and scheduled number of Investigative inspections based on the risk assessment of complaints received.
  - Selected and scheduled number of follow-up inspections based on recommendations from prior period investigations.
  - Selected and scheduled concise monitoring inspections based on the annual risk assessment.
- 3.5.1.16 The Liberia Pharmacy Board should facilitate the preparation of activities reports for each annual activity mentioned above to be subsequently consolidated into a periodic / annual report of the entity. Evidence of periodic / annual reports should be adequately documented and filed to facilitate future review.

### **Management's Response**

- 3.5.1.17 *The Board remains committed to enforce its regulatory mandate to mitigate associated risks*





- 3.5.1.18 *The Board welcomes the recommendation that The LPB should adequately enforce her regulations and guidelines by making sure that all outlets adhere to the regulations and guidelines or risk being fined or closed for such violation. This will require logistics and financial support.*
- 3.5.1.19 *The Board will perform a comprehensive need assessment our agency and will continue to appeal for logistics support and needed budget to support increase human resource. We anticipate that the Civil Service Agency will approve of the human resources needs and that the Ministry of finance will make available the needed budget to implement this activity.*

#### **Auditor General's Position**

- 3.5.1.20 We acknowledge Management's acceptance of our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

### **3.6 Expired medicines found on shelves of pharmaceutical outlets**

- 3.6.1.1 From the Liberian Pharmacy Board's Standard Operating Procedures on Monitoring of pharmacies and medicine stores, page 11 paragraph 2.1 on Violations states that selling of damaged/expired medicines and medicines outside the approved medicines list is an offense.
- 3.6.1.2 Also, page 2 paragraph 2 under Locum Tenens of the Pharmacy Board's policies and guidelines governing the functions of LPB – pharmaceutical outlets shall not sell expired medicines. All expired medicines shall be retrieved from sale area and disposed of.
- 3.6.1.3 Medicines are decisive tools of any health care delivery system. Consequently, one objective of the National Drug Policy is the assurance of the quality, safety, and efficacy of medicines being sold on the Liberian market.
- 3.6.1.4 On the contrary, during our field visit in the seven counties selected, we observed expired medicines were on the shelves of 105 (over 70%) out of 149 pharmaceutical outlets in the counties visited. **See table 9 for details.**

**Table 9: Number Expired medicines found on shelves of outlets in counties visited**

NO.	Counties	Total Pharmaceutical Outlets Visited	Shelves with Unexpired Medicines	Shelves with Expired Medicines
1.	Montserrado	26	8	18
2.	Nimba	24	8	16
3.	Bong	17	4	13
4.	Margibi	31	8	23
5.	Rivercess	12	2	10
6.	Grand Bassa	24	9	15
7.	Bomi	15	5	10
<b>Total</b>		<b>149</b>	<b>44</b>	<b>105</b>

**Source: GAC Analysis**

**See Appendix 5: Expired medicines found on pharmaceutical outlets' shelves.**

- 3.6.1.5 Facilities owners interviewed during our field visit informed us that expired medicines are sometimes seen on the shelves of their facilities, documents reviewed from the Pharmacy Board revealed that expired medicines were found on the shelves of pharmaceutical outlets during inspections.
- 3.6.1.6 This is due to pharmaceutical outlets owners and personnel failure to conduct proper or regular inventory within their outlets. Also, proper checking on the date of expiration for medicines is not considered when purchasing new medicines.
- 3.6.1.7 Our investigation revealed that the interest of maximizing profits resulted into facility owners purchasing and maintaining expired medicines on the shelves of their facilities.
- 3.6.1.8 Furthermore, the limited inspections carried out by the LPB and inadequate enforcement of the LPB regulations and guidelines with sanctions for violations are also responsible for outlets having and selling expired medicines.
- 3.6.1.9 Selling or circulating expired medicines is not only a violation but it poses threats to the wellbeing of the citizens. Moreover, one could develop another health condition or problem other than what they are facing, while at the same time lose the value of the money spent.

### **Conclusion**

- 3.6.1.10 Expired medicines are found on the shelves of pharmaceutical outlets in the country.
- 3.6.1.11 Pharmaceutical outlets owners stated that expired medicines are sometimes found on the shelves of their outlets.
- 3.6.1.12 Documents revealed that expired medicines were found in pharmaceutical outlets within the country.
- 3.6.1.13 Also, we noted that expired medicines were found on the shelves of pharmacies and medicines stores during the field visit.

### **Recommendation**

- 3.6.1.14 Selected and scheduled concise monitoring inspections based on the annual risk assessment should be prioritized on an annual basis. The Pharmacy Board should be robust in ensuring that expired medicines discovered from inspections are removed from the shelves and not subsequently sold by outlets owners in the country. The required fines and penalties should also be imposed and implemented where applicable.

### **Management's Response**

- 3.6.1.15 *The Board is robust in ensuring that expiries are handle appropriately, however, there is no define penalty for would be violator. At present, the Board carry on confiscation of expiries and giving a warning notice is issued to the proprietor of the premise. Moving*





*forward the Board will seek legal advice to ensure public safety and institute vigorous regulatory measures to violators such as arresting the perpetrators and imposing fines. Subsequently, the Board will seek legal advice on the imposition of fines and penalties.*

- 3.6.1.16 *The Board has a robust Team of Inspector, that are well trained and very experienced in the enforcement of regulatory policies and guidelines and the Department is headed by the Inspector General. Base on the Board activity plan, the Inspectors move out to execute various types of inspections: Mandatory Routine inspection, Selected and scheduled Investigative inspections, Selected and scheduled number of follow-up inspections, Selected and scheduled concise monitoring inspections, etc. including monitoring and supervision of pharmacy practices.*
- 3.6.1.17 *The Board had not been able to reach its maximum coverage nationwide due to logistics challenges and lack of accessibility to the road.*
- 3.6.1.18 *However, the logistical constraints continue to handle the Board capacity. Therefore, the Board will, include in its work plan the needy logistical support for onward submission to MFDP to boost the capacity of the Board for effective inspection activities that will ensure the safety of the general public.*

#### **Auditor General's Position**

- 3.6.1.19 We acknowledge Management's acceptance of our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit

### **3.7 Pharmaceutical Outlets operating without license or permit**

- 3.7.1.1 The Public Health Law of Liberia chapter 67.21 states that, retail sale of medicines is prohibited without license or permit. No person shall possess medicines, for the purpose of dispensing them for sale at retail or wholesale, nor shall any person sell or offer to sell at retail or wholesale any medicines, unless licensed as a pharmacy or registered medicine store.
- 3.7.1.2 During the field verification, we observed that 61 out of 149 constituting 40.9% of pharmaceutical outlets in the seven counties visited were operating without licenses or permits from the Pharmacy Board. **See table 10.**

**Table 10: Detail of pharmaceutical outlets operating without license or permit**

County	Outlets visited	Outlets with permit/License	Outlets without Permit /License
Montserrado	26	12	14
Nimba	24	20	4
Bong	17	11	6
Margibi	31	27	4
Rivercess	12	2	10
Grand Bassa	24	11	13
Bomi	15	5	10
<b>Total</b>	<b>149</b>	<b>88</b>	<b>61</b>

#### **GAC Analysis**



3.7.1.3 Pharmaceutical outlets operating without license or permit is due to Pharmacy Board not reaching out effectively to all the 15 counties.

3.7.1.4 Also, it is due to the unwillingness of outlets owners to go to the LPB head offices for registration thereby, operating illegally and denying the Board from generating revenue.

#### **Conclusion**

3.7.1.5 There are pharmaceutical outlets in the country operating without licenses or permits from the Pharmacy Board.

3.7.1.6 Pharmaceutical outlets owners are unwilling to go for licenses and permits at the Pharmacy Board head offices.

3.7.1.7 We observed instances of untimely issuance of licenses and permits after payments by the pharmaceutical outlets.

3.7.1.8 Pharmaceutical outlets operating without license and permit are operating illegally, may be incapacitated to operate their outlets and deny LPB from generating revenue.

#### **Recommendation**

3.7.1.9 The LPB should be vigorous in ensuring that all outlets operating in the country are registered before operating.

3.7.1.10 The LPB should facilitate mandatory Special and Routine inspection exercises for all new and pharmaceutical outlets expanding their scope of operations or relocating to a new vicinity. All pharmaceutical outlets operating without permits and licenses, the Board in collaboration with other requisite authorities, should ensure that the required penalties are meted out to violators operating without authorization.

#### **Management's Response**

3.7.1.11 *As part of the Board regulatory policy those who open illegally are given warning notice, with immediate closure of the premise, and goods are confiscated until the premise complies with regulations. Moving forward the Board will seek legal advice on the imposition of fines and rigid penalties to serve as deterrence to would-be violators.*

#### **Auditor General's Position**

3.7.1.12 We acknowledge Management's acceptance of our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit

### **3.8 Unlicensed facility owners involved with the dispensing of pharmaceutical products to customers**

3.8.1.1 The Liberia Pharmacy Board's Standard Operating Procedures on Monitoring of pharmacies and medicines stores, page 3 number 3 on cashier/manager/proprietor states that all those who are not licensed as pharmacists, pharmacy technicians and dispensers are not allowed to dispense any pharmaceutical product(s) under any circumstance. Doing so is a violation of pharmaceutical dispensing practice.





- 3.8.1.2 During our field visitation, we observed that 43.6% of dispensers, pharmacy technicians and pharmacists (65 out of 149) were absent at facilities visited and unlicensed facility owners were dispensing pharmaceutical products to customers.
- 3.8.1.3 The absence of dispensers, pharmacy technicians, and pharmacists is due to facility owners not complying with the LPB's regulations and guidelines.
- 3.8.1.4 Products dispensed to customers by unlicensed personnel is a violation and such products may not be dispensed in line with the regulations or procedures.
- 3.8.1.5 Also, full doses or dosage of dispensed medicines may not be administered to the patient.

#### **Conclusion**

- 3.8.1.6 Dispensers, pharmacy technicians and pharmacists are sometimes absent from their assigned outlets, and unlicensed facility owners of pharmaceutical outlets dispense pharmaceutical products to customers and patients at their outlets.

#### **Recommendation**

- 3.8.1.7 The LPB should ensure that selected and scheduled concise monitoring inspections based on the annual risk assessment should be prioritized on an annual basis to identify unlicensed practitioners.
- 3.8.1.8 The Board in collaboration with other requisite authorities, should ensure that the prescribed penalties are meted out to unlicensed facility owners who are dispensing medicines to customers and patients without the approval of LPB's authority.

#### **Management's Response**

- 3.8.1.9 *As part of the Board regulatory policy those who open illegally warrant immediate closure, and goods are confiscated. Moving forward the Board will seek legal advised on the imposition of fines and rigid penalties that will serve as deterrence to would be violators.*

#### **Auditor General's Position**

- 3.8.1.10 We acknowledge Management's acceptance of our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

### **3.9 Unqualified Dispensers at pharmaceutical outlets**

- 3.9.1.1 The Liberia Pharmacy Board 1996 Revised Rules and Regulations on pharmacies and medicine stores page 1 paragraph 4 states, pharmaceutical outlets shall be operated by registered dispenser (s).
- 3.9.1.2 Also, on page 2 states any and all dispensers employed by a pharmaceutical outlet shall be registered with the Board.



- 3.9.1.3 The Public Health Law of Liberia 1966-67 Section 67.12 "Requirements for a dispenser's license" (c) and (d) He or she must have satisfactorily completed a course of study and practice in dispensing of drugs, medicines, poison and therapeutic devices prescribed by the Liberian Pharmacy Board; and must have passed an examination prepared and administered by LPB.
- 3.9.1.4 During our field visit to pharmaceutical outlets in the seven counties, we noted that, 73.9% of dispensers employed were unqualified.
- 3.9.1.5 Unqualified dispensers at outlets are due to facility owners' refusal to adequately adhere to the LPB's regulations and guidelines as required and limited inspections carried out by LPB's inspectors.
- 3.9.1.6 This act of altitude is causing unqualified personnel at these outlets to dispense without proper prescriptions.
- 3.9.1.7 The absence of qualified dispensers may impair adequate inquiry from customers relating to the usage of products; so as to educate them, what effect it may cause if he or she is suffering from a particular illness to make a preferred prescription or recommendation.
- 3.9.1.8 Rather, they may only be interested in the sales of products and dispense the requested medicines to customers and their patients. **See below Table 11** statistics on dispensers that were at pharmaceutical outlets visited in the seven counties.

**Table 11: Statistics on dispensers that were at pharmaceutical outlets visited**

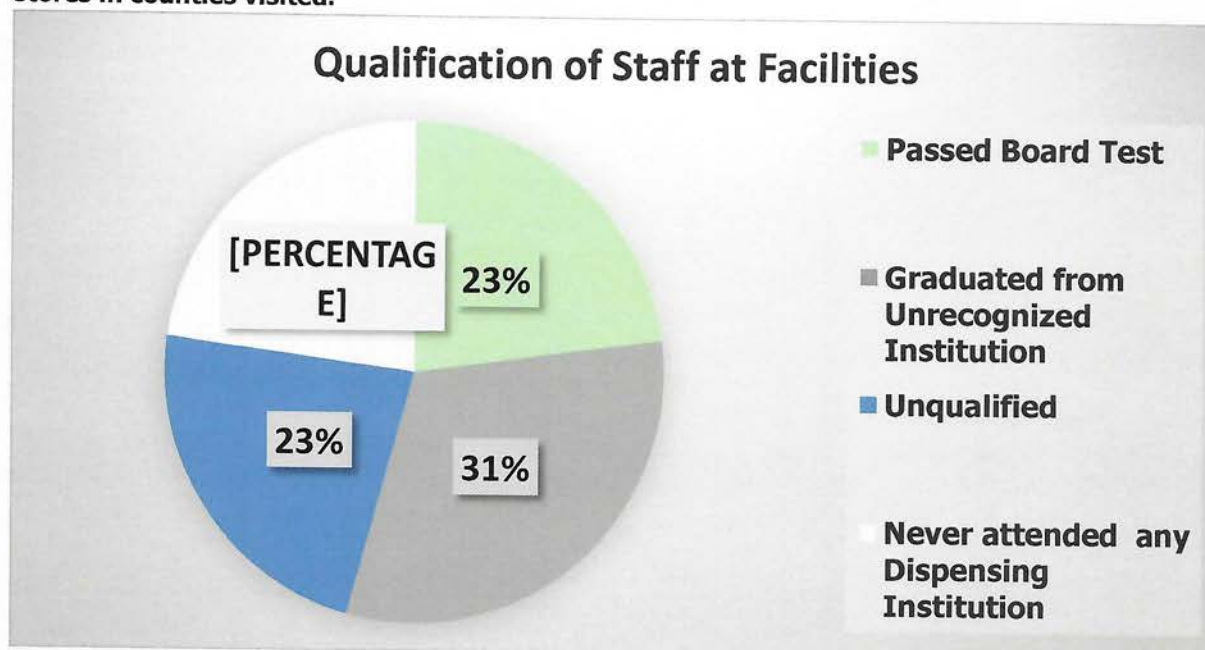
No.	Counties	Total Number of Dispenser	Number of Dispenser Qualify	Number of Dispenser Unqualified
1.	Montserrado	33	17	16
2.	Bong	29	10	19
3.	Margibi	36	7	29
4.	Nimba	34	10	24
5.	Rivercess	14	0	14
6.	Grand Bassa	22	2	20
7.	Bomi	16	2	14
<b>Total</b>		<b>184</b>	<b>48</b>	<b>136</b>

**GAC Analysis**





**Figure 3 The qualifications of those who are dispensing drugs at pharmacies and medicines stores in counties visited.**



#### GAC Analysis

##### Conclusion

- 3.9.1.9 Dispensers at 136 outlets across the country are not registered dispensers with the Pharmacy Board, 23% of dispensers employed and assigned at pharmaceutical outlets are unqualified, 23% passed the Pharmacy Board test, 31% graduated from unrecognized institutions while 23% never attended any dispensing institutions within and out of the country.

##### Recommendation

- 3.9.1.10 All dispensers, before being employed and assigned at any pharmaceutical outlets in the country should be qualified and registered with the Liberia Pharmacy Board.
- 3.9.1.11 Dispensers must have sat and passed the LPB's Board test, must have graduated from an institution that is recognized by the LPB.
- 3.9.1.12 The LPB should ensure that selected and scheduled concise monitoring inspections based on the annual risk assessment are prioritized on an annual basis to identify unqualified dispensers.
- 3.9.1.13 The Board in collaboration with other requisite authorities, should ensure that the prescribed fines are imposed on dispensers and facility owners who are in violation.

##### Management's Response

- 3.9.1.14 *The Board administers evaluation or examinations of applicants for LPB dispenser ID Cards. Base on the result one may be eligible to be issued the permit or be denied if he/she failed the test.*

- 3.9.1.15 *Applicants that graduate for accredited pharmacy training Institution must sit and passed the national State board Exams.*
- 3.9.1.16 *Moving forward the Board will ensure that all dispensers who are not certified will be removed, and this has to be done through vigorous monitoring and supervision of the premise. The Board concord with the recommendations.*

**Auditor General's Position**

- 3.9.1.17 We acknowledge Management's acceptance of our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit

**3.10 Limited Regional Offices at Liberia Pharmacy Board**

- 3.10.1.1 Regional Offices are units of a company or government that are responsible for selling products or providing services in an area that is not directly serviced by the main offices or headquarters.
- 3.10.1.2 It is important for regional offices to be established in the remaining regions to enhance efficient and effective activities of the entity.
- 3.10.1.3 This situation is more likely applicable to the Liberia Pharmacy Board. For the effective implementation of the Board mandates or regulations and guidelines, there is a need for regional offices to be established in the four regions. It is in this light, the Board planned to carryout the establishment of regional offices.
- 3.10.1.4 The Liberia Pharmacy Board Strategic and Operational Plan and Budget 2018 – 2023, page 17, under the caption – Decentralization of the Pharmacy Board to provide complete coverage for regulation of pharmacy practice, aimed at strengthening the operational capacity of the Board to effectively regulate the practice of pharmacy nationwide. This plan includes the establishment of additional three headquarters based on geographic division of the Board operations. These regional offices were going to move the Board closer to the people for processing of their legal documents and will make the Board more visible in term of inspections, monitoring and supervision.
- 3.10.1.5 However, from documents reviewed, the Liberia Pharmacy Board was unable to adequately decentralize regional offices for the effective implementation of the Board's operations across the country as planned. We noted that they were unable to implement the plan fully.
- 3.10.1.6 The report revealed that the LPB's failure was due to limited financial support from the National Government to implement as planned. Moreover, the LPB's authority informed us that the LPB didn't establish the three regional offices due to Government not supporting the process.





- 3.10.1.7 Limited Regional offices of LPB had led to the decrease in the generation of revenues from pharmaceutical activities. It also creates the avenue for the opening of unauthorized pharmaceutical outlets across the country, thereby posing huge public health effect and increase medicines peddling and unauthorized (black bag) treatments. The lack of regional offices further contributed to the inadequate inspections and enforcement activities carried out by LPB. **See Appendix 6** for the only Regional Office in Nimba County.

#### **Conclusion**

- 3.10.1.8 The Liberia Pharmacy Board has only one regional office in one of the four regions in the country.
- 3.10.1.9 The decentralization plan for the establishment of three additional regional headquarters for nationwide coverage was not realized.
- 3.10.1.10 Support requested for by the Pharmacy Board for the decentralization process was not provided by GoL.

#### **Recommendation**

- 3.10.1.11 The Government of Liberia should provide the required budgetary support to the Liberia Pharmacy Board for the establishment of regional offices in the remaining regions that are without office for the effective implementation of LPB's regulations and guidelines across the country.

#### **Management's Response**

- 3.10.1.12 *Management of LPB did not provide a response for this finding.*

#### **Auditor General's Position**

- 3.10.1.13 In the absence of Management's response, we maintain our findings and recommendation. we will follow-up on the implementation of our recommendation during subsequent audit.

### **3.11 Delay in the delivery of permits and licenses to registered pharmaceutical outlets**

- 3.11.1.1 The Public Health Law section 67.22(d): Display of Pharmacy License - states that the current pharmacy license shall be conspicuously displayed at all times within the interior of the pharmacy.
- 3.11.1.2 From interview with the LPB's authority, we noted that receipt is provided immediately for license and permit when paid for. Then, the license or permit is to be printed and deliver within two working weeks to the customer.
- 3.11.1.3 However, during our inspections carried out at various pharmaceutical outlets, in the counties selected, we observed that current licenses and permits for 90 out of 149 constituting 60.4% outlets were not displayed as required.



- 3.11.1.4 Based on inquiries from facility owners, we were informed that there are delay on the part of the Liberia Pharmacy Board to deliver paid-for permits and licenses to facility owners of pharmaceutical outlets. Receipts for payment made for these documents were provided for audit purposes indicating three to four months delay since the completion of registration by these outlets. **See Table 12 for details.**

**Table 12: Delay in the deliverance of permits and license**

NO.	Counties	Number of license delay	Number license issued within time
1.	Montserrado	16	10
2.	Margibi	23	8
3.	Bong	8	9
4.	Nimba	10	14
5.	Rivercess	5	7
6.	Grand Bassa	16	8
7.	Bomi	12	3
<b>TOTAL</b>		<b>90</b>	<b>59</b>

**Source: GAC Analysis**

- 3.11.1.5 We noted that delay in the delivery of permits and licenses are frequent because, printing of permits and licenses is taking place only at LPB's head offices in Monrovia.
- 3.11.1.6 We observed that county pharmacists and pharmacists superintending these outlets collect pharmaceutical outlets monies and made payment on behalf of them at the LPB's head offices in Monrovia. County Pharmacists & Superintending Pharmacists deliver receipts to pharmaceutical outlets at indefinite timings. In this regard, licenses and permits delay for months before delivery to outlets.

### **Conclusion**

- 3.11.1.7 There is a delay in the delivery of paid for permits and licenses to facility owners of pharmaceutical outlets.
- 3.11.1.8 Printing of licenses and permits are done only at the LPB's head offices in Monrovia.
- 3.11.1.9 Only receipts for payment of licenses and permits are delivered immediately.
- 3.11.1.10 Pharmacists covering outlets and counties pharmacists collect and deliver outlets permits and licenses in an untimely manner.

### **Recommendation**

- 3.11.1.11 The Liberia Pharmacy Board should be proactive in the printing and delivery of permits and licenses to pharmaceutical outlets after payment is made to LPB in the required time (within two weeks) so as to enable registered outlets to display their licenses or permits.
- 3.11.1.12 Pharmacists covering outlets and County pharmacists should be admonished by LPB to collect and deliver paid-for permits and licenses within the LPB's specified time.





### **Management's Response**

- 3.11.1.13 *Management of LPB did not provide a response for this finding.*

### **Auditor General's Position**

- 3.11.1.14 In the absence of Management's response, we maintain our findings and recommendations. We will follow-up on the implementation of our recommendations during subsequent audit.

## **3.12 Overall Conclusion**

- 3.12.1.1 The Liberia Pharmacy Board is not efficient and effective in the enforcement of its regulations and guidelines across the country.
- 3.12.1.2 The LPB conducted inadequate inspection of pharmacies and medicines stores as well as facilities personnel. Only concise inspection was conducted in 2018 and 2019 respectively affecting Montserrado and Nimba Counties, leaving the remaining 13 counties uninspected. Routine inspections were conducted in 2021 and 2022 within 10 and 5 counties respectively. No record of any inspection carried out in 2017 and 2023; also, no follow-up nor Investigative inspections were conducted for the period under audit.
- 3.12.1.3 The Pharmacy Board has limited logistics, out of the 5 vehicles bought for the period under audit, only one vehicle is functioning with 4 motorbikes that are frequently in garage for repair.
- 3.12.1.4 The Pharmacy Board has limited inspectors. The LPB Inspectorate Department has 15 inspectors for the inspections of pharmaceutical outlets in the country. 11 are assigned to Montserrado and 4 in Nimba County with none in the remaining 13 counties.
- 3.12.1.5 The Liberia Pharmacy Board is not adequately enforcing her regulations and guidelines.
- 3.12.1.6 Out of the 149 Pharmaceutical outlets visited by us, 41 were seen without forest green on their iron gates as per the PLB regulation, 37 without fans or air conditioners to maintain the require temperature of medicines, 39 did not observe 500ft distance space and 28 existing without registering with the LPB.
- 3.12.1.7 Expired medicines were found on the shelves of pharmaceutical outlets in the country.
- 3.12.1.8 From our interview with pharmaceutical outlets owners, we noted that expired medicines are sometimes found on the shelves of their outlets. We were further informed that these expired medicines are gathered and kept for Liberia Medical and Health Product Regulatory Authority (LMHRA) for disposal, while others said they burned them by themselves.
- 3.12.1.9 There are pharmaceutical outlets operating without licenses or permits from the Pharmacy Board.



- 3.12.1.10 Pharmaceutical outlets owners are unwilling to go for license and permit at the Pharmacy Board head offices but, are involved with dispensing of pharmaceutical products to citizens.
- 3.12.1.11 Unlicensed facility owners of pharmaceutical outlets dispense pharmaceutical products to customers and patients at their outlets. Dispensers, pharmacy technicians and pharmacists are most times absent from their assigned outlets.
- 3.12.1.12 Record from our field verification shows that, dispensers at 136 outlets across the country are not registered with the Pharmacy Board. 23% of dispensers employed and assigned at pharmaceutical outlets are unqualified, 23% passed the Pharmacy Board test, 31% graduated from unrecognized institutions by the LPB while 23% never attended any dispensing institutions within and out of the country.
- 3.12.1.13 The Liberia Pharmacy Board has only one regional office in one of the four regions in the country.
- 3.12.1.14 The decentralization plan for the establishment of three additional regional headquarters for nationwide coverage was not realized.
- 3.12.1.15 There is a delay in the delivery of permits and licenses to facility owners. Printing of licenses and permits is done only at the LPB's head offices in Monrovia. Pharmacists covering outlets and counties pharmacists collect and deliver outlets permits and licenses in an untimely manner.





## APPENDICES

### Appendix 1: Documents reviewed during the audit

No.	List of documents reviewed	Reasons for review
1.	Liberia Pharmacy Board Act	To understand the mandate and functions of the board
2.	Strategy Plans for the period under audit.	To verify the level of implementation of the targeted goals
3.	Annual Reports	To have an idea on the board achievements and challenges
4.	List of licensed pharmacists, pharmacy technicians and dispensers in the four counties.	To verify qualified and unqualified pharmacists, pharmacy technicians and dispensers
5.	List of updated registered Pharmacies and medicines stores in the selected counties.	To verify updated registered from unregistered pharmacies and drugs/medicines stores
6.	List of operating retail and wholesale pharmaceutical outlets including their location.	To be inform on those with the authority to carryout retail or wholesale of pharmaceuticals products
7.	Monitoring or inspection reports on pharmacies, drugs stores, pharmacists, and dispensers	To know whether pharmacies, drugs stores, pharmacists and dispensers are adhering to the laws governing them
8.	The LPB Organogram	To be aware of the structure and functions of LPB staff.
9.	SOP For the establishment of pharmacies and medicine store	To understand the requirements and the running of pharmacies and medicine store.
10.	Inspection policy	To understand the processes involved for inspection to be carryout at all pharmacies and medicine store

### Appendix 2: Interviewed Stakeholders and Key players and reasons for interview

No.	Position	Reason
1.	Registrar Gen./CEO	To have an overall understanding on policies, strategies and procedures the Pharmacy Board is instituting to regulate pharmacies and drugs stores in the country.
2.	Administrator	To ascertain mechanisms that is put in place by the LPB for the smooth operation and regulation of pharmaceutical outlets.
3.	Director- Testing & Evaluation	To understand how pharmacists, pharmacy technicians, and dispensers are prepared and qualified to serve the people in pharmaceutical outlets.
4.	Human Resource Manager	To acquire the total work force and qualification of the staff at LPB in regulating the Pharmacy Board. Also, how employment is done at LPB.
5.	Inspector General	To ascertain whether there is a system put in place for the inspection of pharmaceutical outlets and its personnel within the country.
6.	Comptroller	To establish how the resources of the Pharmacy Board are being manage in the regulation of the Board.
7.	Director for Research and Drugs Information Center	To acquire what results had been developed from researches over the years on medicines the brought values to the sector.
8	Head of Registration &	To inform on the registration process and what are the requirements for a business to be qualify and how the recording system is at the LPB.



	Records	
9.	Western Region Coordinator	To acquire how pharmaceutical outlets, pharmacists, dispensers and pharmacy technicians are supervised in the Western Region and situation involve with.
10.	Region One Coordinator	To acquire how pharmaceutical outlets, pharmacists, dispensers and pharmacy technicians are supervised in this region and to know if the registration of these outlets are carried out there.
11.	Montserrado County Coordinator	To acquire how pharmaceutical outlets, pharmacists, dispensers and pharmacy technicians are supervised in Montserrado County.

### Appendix 3: Assessment criteria, Audit questions and sources of criteria

Audit Questions	Audit Criteria	Source of criteria
<b>1.To what extent is the LPB enforcing the requirements of establishing pharmaceutical outlets?</b>	Application for the establishment of new retail pharmacy or medicine store: All person/s organization/s wishing to carry out pharmaceutical business in the country shall apply for inspection, registration, and accreditation with the Liberia Pharmacy Board.  Retail sale of medicines is prohibited without license or permit. No person shall possess medicines, for the purpose of dispensing them for sale at retail or wholesale, nor shall any person sell or offer to sell at retail or wholesale any medicines, unless licensed as a pharmacy or registered medicine store.	LPB's Standard operating procedures on monitoring of pharmacies and drug store – Page 8.  The Public Health Law of Liberia Chapter 67.21
<b>1.1 How efficient is the process of obtaining license and permit (for pharmaceutical outlets and personnel) from the LPB?</b>	"Requirements for a dispenser's license" (c) and (d) He or she must have satisfactorily completed a course of study and practice in dispensing of drugs, medicines, poison and therapeutic devices prescribed by the Liberian Pharmacy Board; and must have passed an examination prepared and administered by LPB. Pharmaceutical outlets shall be operated by registered dispenser (s).	The Public Health Law of Liberia 1966-67 Section 67.12  The Liberia Pharmacy Board 1996 Revised Rules and Regulations on pharmacies and medicine stores page 1 paragraph 4
<b>1.2 How effective is the enforcement of the pharmacy Board requirement on pharmaceutical outlets and its personnel?</b>	"Requirements for a dispenser's license" (c) and (d) He or she must have satisfactorily completed a course of study and practice in dispensing of drugs, medicines, poison and therapeutic devices prescribed by the Liberian Pharmacy Board; and must have passed an examination prepared and administered by LPB.	The Public Health Law of Liberia 1966-67 Section 67.12  The Liberia Pharmacy Board 1996 Revised Rules and Regulations on pharmacies and medicine stores page 1 paragraph 4. Pharmaceutical outlets shall be operated by registered dispenser (s).
<b>2. How efficient is the</b>	The Board is to ensure that every pharmaceutical	The Act that established the





<b>enforcement of LPB's regulations and guidelines?</b>	entity operating in Liberia, meets the basic requirements for safe practice, improve productivity, efficiency and professionalism.	Liberia Pharmacy Board.
<b>2.1 To what extent does the Liberia Pharmacy Board ensure that her regulations and guidelines are enforced?</b>	Medicine inspectors serve as pharmaceutical control authorities who are to enter or inspect any outlets that is on the register of LPB to enforce compliance relating to standard of premise as well as maintaining the identity, quality, purity and strength of medicines sold in the country.	The LPB's Inspection Handbook's introductory page, paragraph 1&2
<b>2.2 What are the challenges in the enforcing LPB's regulations and guidelines?</b>	Medicine inspectors serve as pharmaceutical control authorities who are to enter or inspect any outlets that is on the register of LPB to enforce compliance relating to standard of premise as well as maintaining the identity, quality, purity and strength of medicines sold in the country.	The LPB's Inspection Handbook's introductory page, paragraph 1&2
<b>3. To what extent is the Liberia Pharmacy Board capacitated in the implementation of its regulations and guidelines?</b>	The Board is to ensure that every pharmaceutical entity operating in Liberia, meets the basic requirements for safe practice, improve productivity, efficiency and professionalism.	LPB Act
<b>3.1 How effective is the LPB implementing her regulations and guidelines?</b>	Medicine inspectors serve as pharmaceutical control authorities who are to enter or inspect any outlets that is on the register of LPB to enforce compliance relating to standard of premise as well as maintaining the identity, quality, purity and strength of medicines sold in the country.	The LPB's Inspection Handbook's introductory page, paragraph 1&2

#### Appendix 4 Logistic of LPB for the year under audit



GAC Photo 1



GAC Photo 2



GAC Photo 3



GAC Photo 4



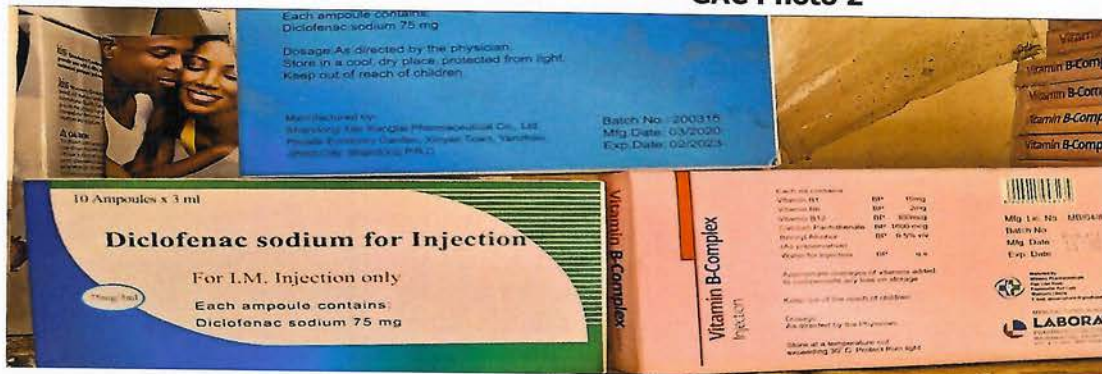
## Appendix 5 Photos of expired medicines found on shelves of pharmaceutical outlets



GAC Photo 1



GAC Photo 2



GAC Photo 3

## Appendix 6: The only LPB regional office in Nimba County



GAC Photo 1