



**REPUBLIC OF ZAMBIA**

**REPORT**

**OF THE**

**COMMITTEE ON HEALTH, COMMUNITY DEVELOPMENT AND SOCIAL  
SERVICES**

**ON THE**

**ZAMBIA MEDICINES AND MEDICAL SUPPLIES AGENCY (AMENDMENT)  
BILL N.A.B 48 OF 2026**

**FOR THE**

**FIFTH SESSION OF THE THIRTEENTH NATIONAL ASSEMBLY**

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## FOREWORD

Honourable Madam Speaker, the Committee on Health, Community Development and Social Services has the honour to present its Report on the Zambia Medicines and Medical Supplies Agency (Amendment) Bill N.A.B 48 of 2026, for the Fifth Session of the Thirteenth National Assembly.

The Committee is mandated to consider Bills referred to it by the House pursuant to Standing Orders 112(3) and 207(j) of the National Assembly Standing Orders, 2024.

In order to acquaint itself with the ramifications of the Bill, the Committee sought both written and oral submissions from selected stakeholders. The Report highlights the background, objectives and provisions of the Bill, stakeholder submissions, and the Committee's observations and recommendations.

The Committee is indebted to all stakeholders who made submissions and expresses gratitude to you, Madam Speaker, for the opportunity to scrutinise the Bill. Appreciation is also extended to the Office of the Clerk for the support rendered.



Mr Joseph S Munsanje, MP  
**CHAIRPERSON**

May, 2026  
**LUSAKA**

## **1.0. COMPOSITION OF THE COMMITTEE**

The Committee consisted of Mr Joseph S Munsanje, MP (Chairperson); Mrs Marjorie Nakaponda, MP (Vice Chairperson); Dr Christopher K Kalila, MP; Mr Paul Chala, MP; Mr Monty Chinkuli, MP; Mr Heartson Mabeta, MP; Mr Leevan Chibombwe, MP; Mr Masautso Tembo, MP; Mr Miles Sampa, MP and Mr Elias Mubanga, MP.

## **2.0. BACKGROUND**

The Zambia Medicines and Medical Supplies Agency Act, No. 9 of 2019, establishes the Zambia Medicines and Medical Supplies Agency as the statutory body mandated to procure, store and distribute medicines and medical supplies. The Government, through the Zambia Medicines and Medical Supplies Agency (ZAMMSA) proposes to amend the principal Act to revise, among others, the composition of the Council and related governance provisions. This revision is part of the broader public sector reform programme guided by Cabinet Office Circular Minute No. CO.101/39/1 of 2025. The Circular directs all Ministries to streamline Boards and Committees of State-Owned Enterprises (SOEs) in order to strengthen governance, enhance representation and service delivery. It specifically requires that Boards and Committees include private sector representation, not to exceed eleven members, ensure gender balance, and reflect national diversity.

The reforms aim at strengthening institutional governance by promoting accountability, transparency, operational efficiency, and long-term sustainability. This approach is aligned with internationally recognised best practices, including the Organisation for Economic Co-operation and Development Guidelines on Corporate Governance of State-Owned Enterprises (2015). Accordingly, the proposed amendments in the Bill seek to align the composition of the Board with these established governance principles.

## **3.0. OBJECT OF THE BILL**

The object of this Bill is to amend the Zambia Medicines and Medical Supplies Agency Act, No. 9 of 2019 so as to:

- i. revise the composition of the Zambia Medicines and Medical Supplies Agency Board; and
- ii. provide for matters connected with, or incidental to, the foregoing.

## **4.0. SALIENT PROVISIONS OF THE BILL**

### **Clause 2 - Revision of the composition of the Board**

The clause provides for amendment to section 6 of the principal Act by replacing the existing provisions relating to the composition of the Board. The revised composition provides for a nine (9)-member Board comprising part-time members appointed by the Minister.

### **Clause 3 - Introduction of a Nomination Framework**

The clause introduces a provision requiring the ministries, institutions, and organisations represented on the Board to nominate their respective representatives for appointment by the Minister. This provision seeks to enhance transparency and institutional participation in the appointment process.

## **5.0. SUBMISSIONS FROM STAKEHOLDERS**

Stakeholders submitted various views on the clauses of the Bill, which are outlined below:

### **5.1. Clause 3: Composition of the Board**

Stakeholders generally welcomed the proposed expansion of the Board from seven (7) to nine (9) members, noting that this allows for broader institutional and technical representation. It was submitted that the inclusion of institutions with expertise in procurement, logistics, transport, commerce, and supply chain management reflects the evolving mandate of the Agency as a national procurement and distribution authority for medicines and medical supplies. Therefore, stakeholders made the following comments.

#### **i. Strengthening supply chain and procurement expertise**

Stakeholders submitted that the inclusion of procurement and logistics professionals represents a significant improvement in the governance structure. It was emphasised that the Agency's core functions revolve around procurement, warehousing, distribution, and supply chain coordination, and therefore, require expertise in these areas. It was further noted that the proposed composition has potential to improve procurement efficiency, reduce stock-outs of essential medicines and strengthen supply chain resilience.

Stakeholders further observed that the introduction of specialised institutions enhances the Board's capacity to provide strategic oversight in inventory management, contract management, and supply chain optimisation. This is consistent with modern corporate governance principles and international best practices for public procurement institutions.

However, stakeholders expressed concern that the inclusion under clause 2(1)(e) and (h) may result in duplication, as the nominees are likely to be drawn from similar professional backgrounds, thereby limiting diversity of expertise and perspectives on the Board.

#### **ii. Exclusion of pharmaceutical expertise and technical misalignment**

Notwithstanding the above, stakeholders expressed concern regarding the intention to exclude representation of pharmaceutical expertise from the Board. It was submitted that the absence of professional representation directly linked to medicines management undermines the technical integrity of the Board.

Stakeholders emphasised that procurement of medicines is not comparable to general procurement of goods and requires specialised expertise in medicine selection and quantification, as well as quality assurance and safety standards. It was further submitted that the exclusion of such expertise may increase the risk of procurement of inappropriate or substandard medicines, thereby undermining patient safety. In this regard, stakeholders proposed to replace the representative in 2(1)(h) with the Pharmaceutical Society of Zambia.

iii. **Private sector participation and risk of commercial influence**

Stakeholders acknowledged that the inclusion of private sector actors introduces valuable insights, including efficiency, innovation, and market intelligence. However, concerns were raised that increased private sector participation may introduce risks of conflict of interest in procurement processes and commercial priorities overriding public health objectives.

It was submitted that procurement institutions must remain primarily public health-driven, and therefore, safeguards are necessary to ensure that commercial interests do not compromise transparency, accountability, and equitable access to medicines.

iv. **Balance between state and non-state representation**

Stakeholders also expressed concern regarding the balance of representation between government institutions and independent stakeholders. It was observed that excessive representation of government or government-controlled entities may undermine the independence of the Board and limit diverse perspectives necessary for sound governance.

Conversely, stakeholders cautioned that over-reliance on private sector representation may equally distort governance priorities. Therefore, a balanced mix of public, private, and professional representation was considered essential.

**5.2. Clause 3(2): Nomination and Appointment of Board Members**

i. **Need for transparent and merit-based appointment framework**

Stakeholders emphasised the importance of establishing a transparent and merit-based appointment process to ensure that Board members possess relevant qualifications, competence, and experience. Additionally, stakeholders acknowledged the need for ensuring inclusive representation. It was further submitted that nomination processes must be strengthened to ensure selection of senior and decision-making officials, promote gender balance and inclusivity; and aligning appointments with constitutional requirements.

ii. **Challenges in representation of stakeholder groups**

Stakeholders raised practical concerns regarding the nomination of representatives from broad categories such as civil society or private sector organisations.

During the oral submissions, it was noted that multiple organisations exist within these categories while there is no clear mechanism for selecting a representative. In addition, they warned that this may create ambiguity, competition, and lack of legitimacy in representation. It was submitted that clearer guidelines are required to guide the nomination process and ensure fairness and transparency.

**5.3. Procurement integrity and conflict of interest risks**

Stakeholders raised concerns regarding the risk of conflicts of interest arising from Board

composition, particularly where members represent institutions involved in procurement processes. It was recommended that robust safeguards be introduced, including conflict of interest policies, mandatory disclosure requirements; and independent oversight mechanisms.

## **6.0. COMMITTEE'S OBSERVATIONS AND RECOMMENDATIONS**

After carefully studying submissions from stakeholders, the Committee makes the following observations and recommendations:

- 6.1. The Committee observes that the exclusion of the pharmaceutical industry undermines the technical competence of the Board. Therefore, it recommends the retention of the Pharmaceutical Society of Zambia by removing the proposed representative provided under 2(1)(h).
- 6.2. The Committee notes that requiring a representative of the Attorney-General on the Board may be unnecessary, considering that the Service already has an established internal legal department capable of addressing its legal needs. In this regard, the Committee recommends that the necessity of mandating such representation be reviewed.
- 6.3. The Committee notes that the existing nomination and appointment framework lacks sufficient clarity to ensure the selection of suitably qualified and senior officials and does not adequately promote gender balance and inclusivity. In this regard, the Committee recommends that:
  - i. a formalised nomination process be instituted for nominating entities with a clearly defined criteria to promote competence, transparency, and credibility;
  - ii. section 6 of the principal Act be further amended to introduce conditional appointment provisions, allowing the Minister to defer appointments where established thresholds are not satisfied and to require re-nominations to rectify imbalances; and
  - iii. a provision be incorporated requiring institutions to nominate senior-level officials to the Board in order to enhance effective participation, facilitate timely decision-making, and strengthen strategic oversight.

## 7.0. CONCLUSION

The Committee supports the Bill, subject to the incorporation of the above observations and recommendations. While the Bill introduces progressive reforms to strengthen procurement and supply chain governance, concerns remain regarding limited pharmaceutical representation and potential duplication in Board composition. The Committee urges Government to address these issues to ensure a balanced, technically sound, and independent governance framework, capable of enhancing medicines availability and safeguarding public health outcomes.



Mr Joseph S Munsanje, MP  
**CHAIRPERSON**

May, 2026  
**LUSAKA**

**APPENDIX I - NATIONAL ASSEMBLY OFFICIALS**

Mr Charles Haambote, Director (Social Committees)

Mrs Chitalu K Mumba, Deputy Director (Social Committees)

Mr Darius Kunda, Senior Committee Clerk (SC1)

Mr Kelezo Lushako, Committee Clerk

Ms Catherine Chibuye, Administrative Assistant II

Mr Daniel Lupiya, Senior Committee Assistant

Mr Muyembi S Kantumoya, Committee Assistant

Ms TaonaChabinga, Committee Assistant

**APPENDIX II–LIST OF WITNESSES**

Institute of Directors Zambia

Ministry of Health

Ministry of Justice

Pharmaceutical Society of Zambia

Zambia Medical Association

Zambia Medicines and Medical Supplies Agency

Zambia Medicines Regulatory Authority