**INDICATOR:** Number of individuals trained as trainers in supply chain management (SCM)

<table>
<thead>
<tr>
<th>STANDARD SECTOR INDICATOR CODE:</th>
<th>HEALTH SECTOR</th>
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<tr>
<td>HE_HIV_203</td>
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**Standard Sector Indicator Reference Sheet**

**Type:** Output  
**Unit of Measure:** Individual  
**STANDARD SECTOR INDICATOR CODE:** HE_HIV_203  
**PROJECT AREA:** HIV/AIDS

**Disaggregation:**  
**Sex:** Male, Female  
**Provider Type:** Nursing Staff (RN, Nursing Officer, Principle/Chief Nurse)  
Pharmacy Staff (Pharmacy Assistant, Pharmacy Technician, Pharmacist)  
Health Lay Worker/Health-Care Auxiliary: Physician  
PCV

**Related Objective:** Improve the community environment to support people living with or affected by HIV/AIDS (Objective 2.2)

**Precise definitions**

**Individuals:** Unique individuals trained directly by the PCV and their counterparts. The type of individuals will be broadly in the following categories: nursing staff (RN, nursing officer, principle/chief nurse); pharmacy staff (pharmacy assistant, pharmacy technician, pharmacist); health lay worker/health-care auxiliary: physician; or PCV.

**Supply chain management (SCM):** encompasses the processes needed to procure, manage, and distribute essential pharmaceuticals and commodities for the prevention and treatment of HIV/AIDS and other priority health conditions. SCM activities reach from the global market to the village level. They focus on the dependable provision of the highest quality medicines and other HIV and health commodities through needs assessments, forecasting, procurement, shipping, warehousing, and distribution at the national level. At lower levels of the health system—where PCVs typically operate—SCM efforts improve the ability of health management teams and health facilities to ensure proper storage and management of supplies and monitoring and reporting.

**SCM training of trainers:** The PCV directly trains individuals in a basic national logistics management course. Posts should use host government logistics management training packages or materials to align activities with national policies and systems, where applicable. Training of trainers also focuses on individuals being able to replicate the training, and therefore includes training on how to facilitate in addition to the technical content.

**Data collection**

**Tool:** Supply Chain Reporting Tool. This tool is a way for the PCV to summarize their data for entry into the VRT. The post or PCV can modify the Excel template as needed. When working at a facility, the PCV may want to use the Supply Chain Management Facility-Level Tool, which tracks much more detailed information. The VRT only requires summary data.
**Frequency of data collection and tracking**: Data should be tracked on an ongoing basis as PCVs implement training activities. Data should be aggregated and reported based on the post-determined reporting frequency.

**Reporting**

To be counted for this indicator the following criteria must be met:

- The Volunteer worked with the health facility’s staff or their counterpart to train and or build the capacity of clinic staff to be trainers.
- There was documentation of the training (sign-in sheet, photos) and its content.
- Only PCVs who have been certified as SCM trainers may report on SCM TOT trainings. SMC TOT trainings occur when the certified PCV facilitates the national supply chain management curriculum. PCVs should document the training by providing a copy of the agenda and registry of participants.

**Reporting on disaggregated data in the VRT**: This indicator is disaggregated by sex and provider type.

**Note**: Individuals may only be counted once as part of this indicator during a fiscal year (October 1–September 30).