INDICATOR: Number of facilities supported to improve logistics management

STANDARD SECTOR INDICATOR CODE: HE_HIV_204

HEALTH SECTOR 😊

PROJECT AREA: HIV/AIDS

Type: Output

Unit of Measure: Facility

Disaggregation: Intervention Type: SCM Storage/Commodity Management, SCM Task Management/Reporting

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

Precise definitions

Facilities: Facilities that the PCV and their counterparts worked with to improve supply chain management procedures. This should not be a once-off intervention, but rather an ongoing mentoring or onsite technical assistance/training. One facility should only be counted once during the fiscal year even though there may be multiple trainings. The number of individuals trained can be counted under indicators HE_HIV_202 and 203.

Supply chain management: 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.

Logistics management (LM) is a subset of SCM and focuses on the “flow and storage of goods, services, and information between the point of origin and the point of consumption. Logistics activities [can be considered] the operational component of supply chain management, including quantification, procurement, inventory management, transportation and fleet management, and data collection and reporting.”

Supported:

1. **SCM storage/commodity management:** The PCV helps improve a facility’s standards for storage of health commodities, per national standard operating procedures (SOPs). (If SOPs are not available, basic storage standards can be found on p. 116 of USAID | DELIVER’s Logistics Handbook).

   Illustrative activities:
   - Organize and clean storage areas ensuring that commonly used products are easily accessible and expired commodities are separated from usable stock.
   - Reorganize and store commodities per standards (off the floor on pallets or shelves, ventilated, out of direct sunlight, arranged by first to expire/first out [FEFO], etc.).
   - Ensure appropriate tracking of bins and commodities maintained at the facility.

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2 Ibid.
• Proactively identify and address problems (such as late/incomplete ordering or stock not organized to use commodities to expire first) to decrease the number of emergency orders of commodities and expiries.
• Create standard operating procedures and visual aids on maintaining proper storage.

2. **SCM task management/reporting**: The PCV helps improve the quality completion and timely submission of logistics and stock management forms and reports at the facility. This might include monthly stock reports, commodity order and receipt forms, bin and inventory control cards or ledgers, etc. Illustrative activities include:

   • Set up electronic or other reminders and/or standard operating procedures and visual aids for staff of monthly reporting dates.
   • Work with counterparts to schedule daily tasks to ensure completion of daily stock forms.
   • Enlarge font of electronic forms for legibility.
   • Help colleagues address feedback about completed forms and reports from supervisors.
   • Coach colleagues in completion of electronic and/or paper forms.
   • Develop a process for tracking emergency orders and address problem(s) that prompted each request.
   • Populate template for monthly stock report to include all medicines and formulations designated for facility level without changing other content in the template.

**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 implement at least one SCM improvement intervention.
- There was documentation to support the implementation of the intervention(s). The documentation shows improvement in at least one SCM improvement intervention.

Volunteers should enter a separate activity for each facility where they are implementing SCM interventions. They should also include the name of the facility in the activity description title. Under each SCM facility being reported, the Volunteers will select the SCM interventions implemented and provide any additional disaggregation required.

**Reporting on disaggregated data in the VRT**: This indicator is disaggregated by intervention type. When reporting in the VRF, a Volunteer should indicate the SCM interventions (SCM Storage/Commodity Management and SCM Task Management/Reporting) that were implemented.

**Note**: A facility may only be counted once as part of this indicator in a given fiscal year (October–September) but may be counted again in a new FY. Multiple SCM interventions may be implemented at the same health facility. If the same facility is eligible for measurement for another indicator, it may be counted for that indicator according to the guidelines in that indicator’s reference sheet.