**INDICATOR: Number of facilities with expired medications found on shelves this reporting period**

**STANDARD SECTOR INDICATOR CODE:** HE_HIV_224

**HEALTH SECTOR**: HIV/AIDS

**PROJECT AREA:** HIV/AIDS

**Type:** Outcome

**Unit of Measure:** Facility

**Disaggregation:** None

**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 (SCM) 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.

**Expired medication found on shelves:** For this indicator, as with the indicator measuring stock-outs (HE_HIV_214), a subset of medicines should be selected, or key tracer drugs (defined below). These key tracer drugs should be monitored routinely to ensure they are not beyond their expiration date. Or, if they are past their expiration date, they should have been identified and taken off the pharmacy shelves for distribution to clients.

**Key tracer drugs:** For this indicator, not all medicines or supplies need to be tracked, but the facility should select three to five key commodities or drugs that are key for service delivery to monitor as a proxy of all drugs. This is in line with guidance from WHO, so a list of tracer drugs/commodities may already be defined for government reporting. The three to five tracer drugs are usually a subset of the National Essential Medicines List. For more information, see [http://www.who.int/selection_medicines/list/en/](http://www.who.int/selection_medicines/list/en/).

**Reporting period:** This should be defined by the post or local government.

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

**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 fiscal year. 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.