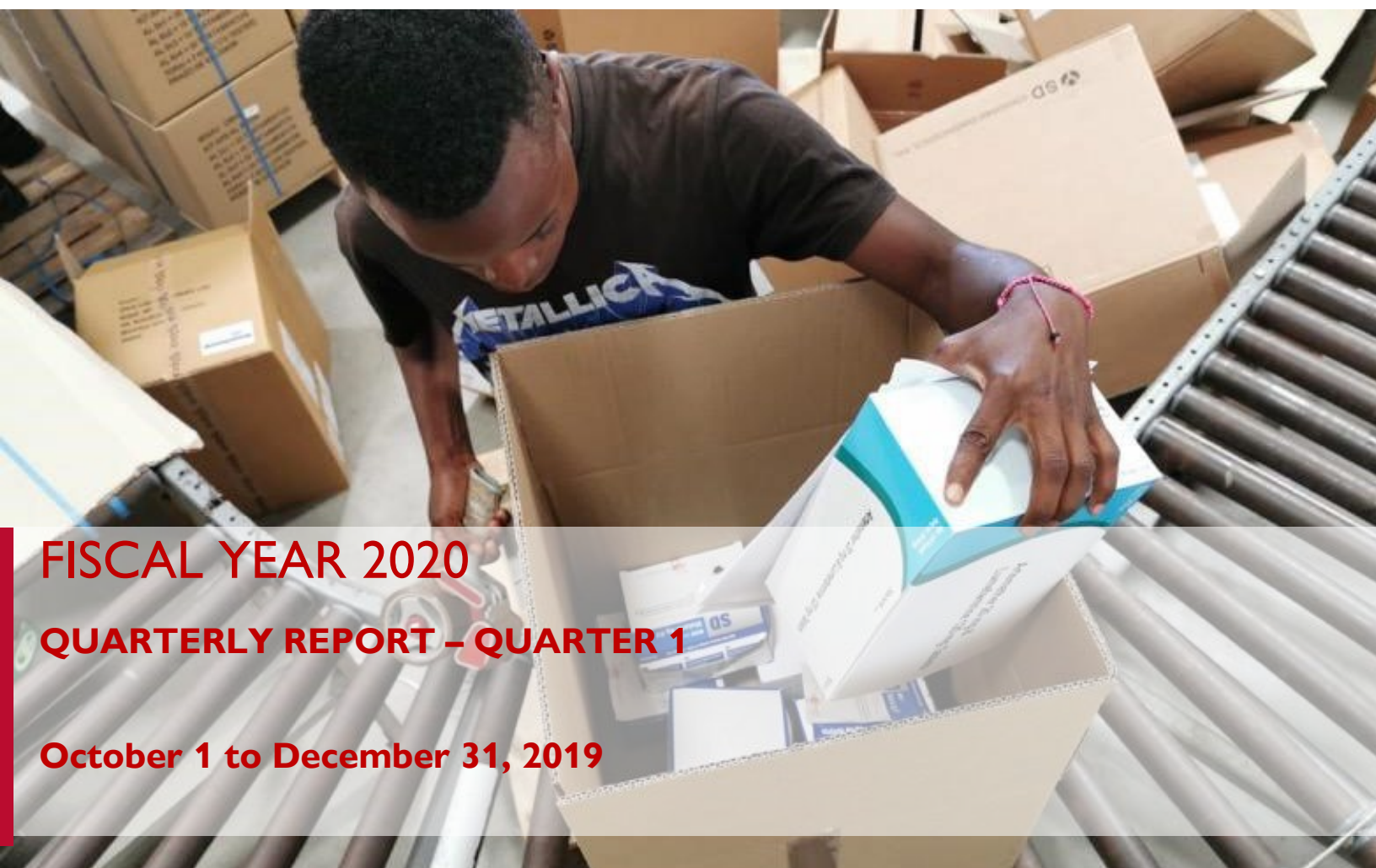


USAID GLOBAL HEALTH SUPPLY CHAIN PROGRAM
Procurement and Supply Management



FISCAL YEAR 2020

QUARTERLY REPORT – QUARTER 1

October 1 to December 31, 2019

Malaria kits are sorted on a conveyer belt at Mozambique's central warehouse. *Photo credit: Mickael Breard/GHSC-PSM*



FISCAL YEAR 2020

QUARTERLY REPORT – QUARTER 1

October 1 to December 31, 2019

Contract No. AID-OAA-I-15-00004

The USAID Global Health Supply Chain Program-Procurement and Supply Management (GHSC-PSM) project is funded under USAID Contract No. AID-OAA-I-15-00004. GHSC-PSM connects technical solutions and proven commercial processes to promote efficient and cost-effective health supply chains worldwide. Our goal is to ensure uninterrupted supplies of health commodities to save lives and create a healthier future for all. The project purchases and delivers health commodities, offers comprehensive technical assistance to strengthen national supply chain systems, and provides global supply chain leadership.

Chemonics International implements GHSC-PSM in collaboration with Arbola, Inc.; Axios International, Inc.; the IDA Foundation; IBM; IntraHealth International; Kuehne + Nagel, Inc., McKinsey & Company, Panagora Group, Population Services International, SGS Nederland B.V.; and University Research Company, LLC. To learn more, visit ghsupplychain.org

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Acronyms

3HP	isoniazid and rifapentine combination treatment for tuberculosis
3PL	third-party logistics
ADVISER	AIDS Data Visibility, Evaluation and Reporting
ALu	artemether-lumefantrine
API	active pharmaceutical ingredient
ARV	anti-retroviral
BOA	Basic Ordering Agreement
CDC	U.S. Centers for Disease Control and Prevention
CMS	central medical store
COP	Country Operational Plan
CSP	Coordinated Supply Planning
DCP	decentralized procurement
DMPA	depot-medroxyprogesterone acetate
DRC	Democratic Republic of the Congo
EID	early infant diagnosis
eLMIS	electronic logistics management information system
EPHI	electronic proof of delivery
EPSA	Ethiopian Pharmaceuticals and Supply Agency
ESC	emergency supply chain
FASP	forecasting and supply planning
FP/RH	family planning/reproductive health
FY	fiscal year
GDSN	Global Data Synchronization Network
GHSCS	Global Health Supply Chain Summit
GHSC-PSM	Global Health Supply Chain Program-Procurement and Supply Management project
GHSC-QA	Global Health Supply Chain Program-Quality Assurance project
GHSC-RTK	Global Health Supply Chain Program-Rapid Test Kit project
GLN	Global Location Number
Global FP VAN	Global Family Planning Visibility and Analytics Network
GTIN	Global Trade Item Number
IM	intra-muscular
LLIN	long-lasting insecticide-treated net
LMIS	logistics management information system
LZN	lamivudine/zidovudine/nevirapine
MCH	maternal and child health
MMD	multi-month dispensing
MNCH	maternal, newborn, and child health
MOH	Ministry of Health

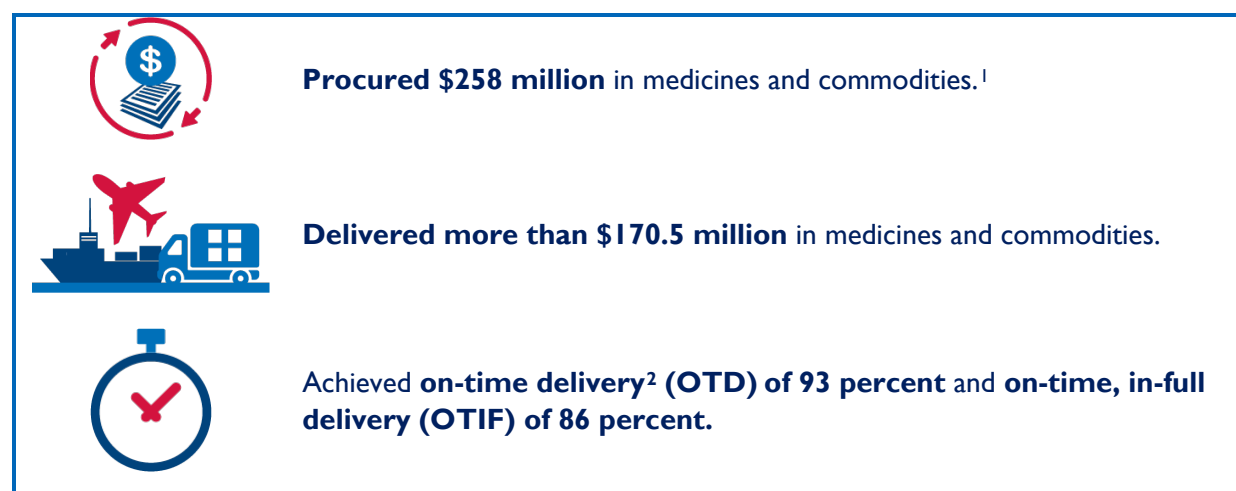
MOHCC	Ministry of Health and Child Care (Zimbabwe)
MOHS	Ministry of Health and Sport
NBCH	newborn and child health
NMCP	National Malaria Control Program
OTD	on-time delivery
OTIF	on-time in-full delivery
PEPFAR	U.S. President's Emergency Plan for AIDS Relief
PLHIV	people living with HIV
PMI	U.S. President's Malaria Initiative
PMIS	pharmaceuticals management information system
PPMR	Procurement Planning and Monitoring Report
PPMRm	Procurement Planning and Monitoring Report-malaria
PrEP	pre-exposure prophylaxis
Q	quarter
QA	quality assurance
QC	quality control
RDT	rapid diagnostic test
RHSC	Reproductive Health Supplies Coalition
RTK	rapid test kit
SMO	social marketing organization
SAPICS	South African Production and Inventory Control Society
TB	tuberculosis
TLD	tenofovir, lamivudine, dolutegravir
TO	task order
TPT	TB preventive therapy
TransIT	transportation information tool
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
USAID	United States Agency for International Development
VMMC	voluntary medical male circumcision
WHO	World Health Organization

Executive Summary

The Global Health Supply Chain Program-Procurement and Supply Management (GHSC-PSM) project, funded by the U.S. Agency for International Development (USAID), is pleased to present this report to summarize our work and performance for Quarter I (Q1) of Fiscal Year 2020 (FY 2020). We describe here our work in providing life-saving medicines and other health commodities and building efficient, reliable, and cost-effective supply chains for delivering these drugs and health supplies for the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), the U.S. President's Malaria Initiative (PMI), USAID's programs in voluntary family planning and reproductive health (FP/RH), and the Agency's program in maternal and child health (MCH), which equitably share the cost of the project.

Global Supply-Chain Performance

Section C1 describes GHSC-PSM's global supply-chain, procurement, and logistics activities and achievements. Highlights of the performance of our global supply-chain appear below.

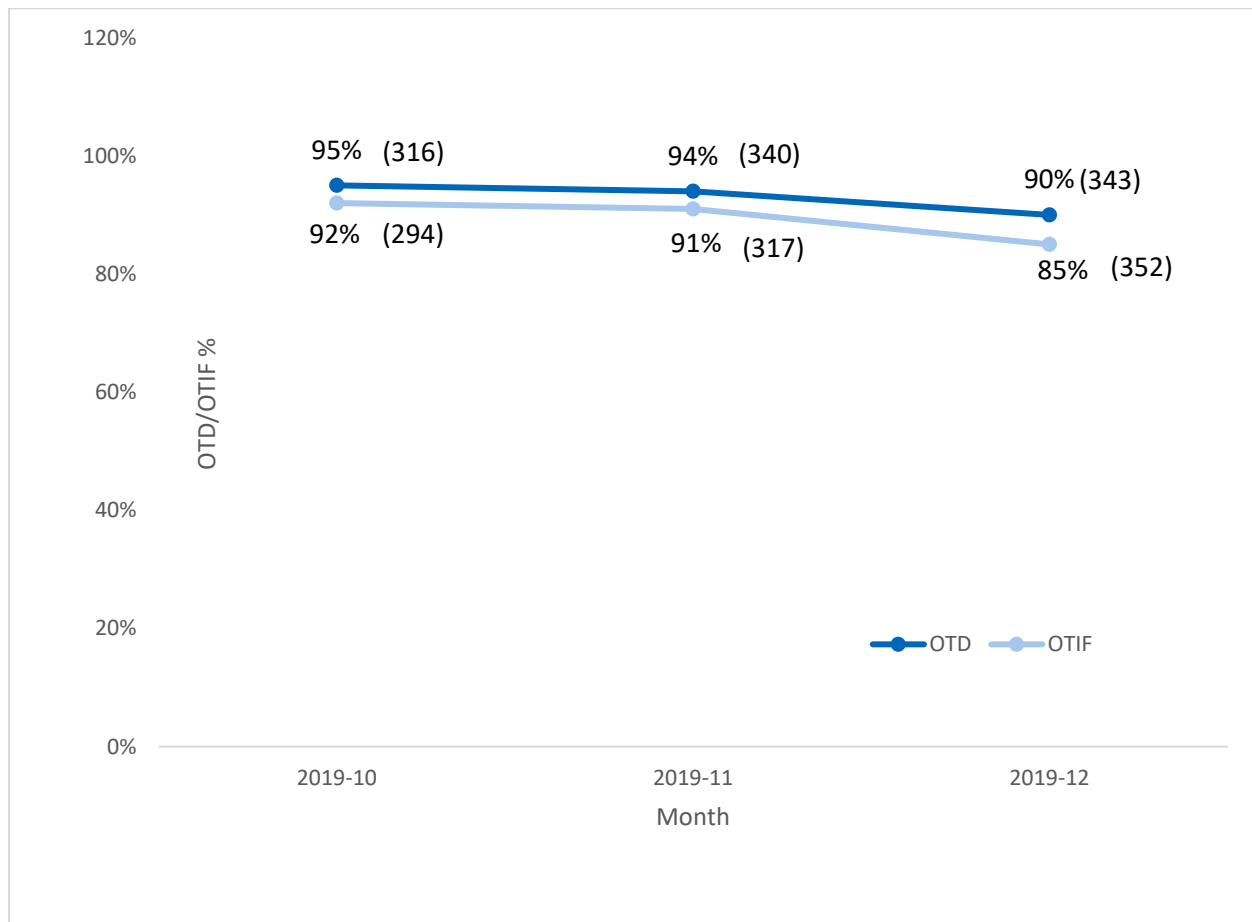


OTD and on-time, in-full delivery (OTIF) rates were strong for all health areas during Q1. OTD was 94 percent for HIV; 91 percent for malaria; 89 percent for FP/RH; and 100 percent for maternal, newborn, and child health (MNCH) medicines and commodities, each of which exceeded the contract's 80 percent quarterly target. GHSC-PSM continues to conduct root-cause analysis of late deliveries and to refine procurement and supply-chain processes to improve performance continuously.

¹ Procurement totals throughout this report refer to the contract value of commodity purchase at the time of execution. For a financial accounting of invoices paid, please refer to project financial statements.

² The project's delivery window is -14/+7 days. With this window, deliveries are considered on time if they are made within the period 14 days before or seven days after the agreed delivery date.

Exhibit I. OTD and OTIF over the Quarter



Health Areas

GHSC-PSM provides procurement, assistance to strengthen supply chains, and global collaboration to the U.S. Government's programs for HIV/AIDS, malaria, FP/RH, MCH, and other emerging health threats. We provide highlights of project achievements below.

HIV

GHSC-PSM continues to contribute to PEPFAR's life-saving agenda.

On-time delivery. GHSC-PSM achieved consistently high on-time delivery performance for HIV drugs and commodities this quarter—94 percent for the quarter.

The transition to preferred first-line treatment tenofovir/lamivudine/dolutegravir (TLD). GHSC-PSM delivered TLD to 14 countries this quarter with 100 percent of TLD orders on time.

The project also made a first-time delivery of 90-count bottles to the Socialist Republic of Viet Nam and a delivery of 180-count bottles to Haiti to facilitate multi-month dispensing (MMD).

GHSC-PSM's quarterly go-to-market strategy for TLD has also resulted in significant cost-savings passed on to countries. In Q1 alone, GHSC-PSM obtained a weighted average price reduction of \$0.60 per 90-count pack from the previous quarter, representing a cost saving of \$4.1 million quarter-to-quarter. Since enacting this strategy, GHSC-PSM has realized a 12.5 percent price drop, resulting in an annual treatment cost of less than \$64 per patient per year.

Pre-exposure Prophylaxis (PrEP). In helping countries scale-up procurement of PrEP to reduce the risk of HIV infection, GHSC-PSM delivered a total of 64,583 packs of tenofovir/emtricitabine 200/300mg 30-tablet bottles in Q1 to the Republics of Haiti, Mozambique and Zambia.

Multi-month dispensing and cartonless pack presentation. In Q1, GHSC-PSM delivered more than 2.8 million units of cartonless 90-count TLD bottles to 10 countries.³ The cartonless approach reduces packaging, shipping and distribution costs. In Q1, GHSC-PSM also worked to ensure the availability of 180-count bottle supply by adding pack-size as a criterion in the quarterly tender process for TLD and added another two eligible suppliers. The first delivery of 180-count TLD was made to Haiti in Q1. GHSC-PSM is currently processing additional orders for five countries: Democratic Republic of the Congo (DRC), Federal Republic of Nigeria, Haiti, Republics of Côte d'Ivoire, and Uganda.

Condoms. GHSC-PSM continued to build the condom supplier base and issued orders to a newly approved male condom supplier in Q1. Also, the project is collaborating closely with USAID and the United Nations Fund for Population Activities to build a comprehensive database of condom registrations and in auditing a previously suspended condom manufacturer to verify compliance with U.S. and international regulations.

HIV/tuberculosis (TB) prevention and treatment. Even though the market is tight, the project continues to work to secure sufficient quantities of isoniazid and rifapentine (3HP), the preferred tuberculosis preventive therapy, to ensure patients can access the required three-month supply. In Q1, GHSC-PSM, in collaboration with the USAID Office of HIV/AIDS, began conducting market research to identify other rifapentine manufacturers and exploring the readiness of countries for 3HP scale-up.



GHSC-PSM has delivered enough anti-retroviral therapy (ART) to provide more than **7.7 million patient-years of HIV treatment to date.**

This includes more than **3 million patient-years of TLD treatment delivered to date.**

³ Cameroon, DRC, eSwatini, Ethiopia, Haiti, Mozambique, Nigeria, Tanzania, Uganda, Zambia.

Malaria

GHSC-PSM works to help PMI reduce deaths from malaria and decrease morbidity from the disease. (See box.)

On-time delivery. GHSC-PSM achieved consistently high on-time delivery performance for malaria drugs and commodities this quarter—91 percent for the quarter.

Sourcing and procurement strategies. With the FY 2020 TO2 Call for Orders (most received in Q1 FY 2020), GHSC-PSM implemented a suite of new, data-driven strategies, processes, tools, and communications protocols. These efforts are designed to deliver better overall value to recipients, support market objectives, and drive supply-chain efficiencies and responsiveness.

Global collaboration on quality assurance (QA). In Q1, GHSC-PSM and the Global Fund began to hold monthly virtual meetings on QA/QC for malaria products to discuss such topics as product specifications, standard operating procedures (SOPs), test methods, out-of-specification test results and upcoming conferences and learning opportunities to benefit from insights into each other's experiences.

Procurement of long-lasting insecticide-treated nets (LLINs). This quarter, GHSC-PSM procured enough LLINs to protect nearly 17.3 million people in Nigeria, Federal Democratic Republic of Ethiopia and the Republics of Angola, Ghana, Liberia, Senegal and Zimbabwe.

Global standards. At the December TraceNet working group meeting, co-chaired by USAID and the Global Fund, members finalized the Recommended Identification, Capture, and Data Sharing Specifications for Long Lasting Insecticidal Nets document. GHSC-PSM will support USAID in drafting implementation guidelines and begin dissemination in Q2 FY 2020.

Global collaboration and knowledge sharing. GHSC-PSM presented on TO2-related findings at two global conferences in Q1. At the Annual Meeting of the American Society of Tropical Medicine and Hygiene (ASTMH), members of GHSC-PSM in Ethiopia, presented their findings on whether cases of severe malaria were being treated according to guidelines. At the Global Health Supply Chain Summit (GHSCS), conference attendees from GHSC-PSM highlighted the project's work to build a data-driven decision-making culture in supply-chain management in Cameroon.



GHSC-PSM has delivered enough anti-malarials to **treat more than 219 million infections to date.**

This includes **treatment for 12.1 million infections in Quarter I.**

Family Planning and Reproductive Health

GHSC-PSM's support for USAID's programs in voluntary family planning/reproductive health achieved several major milestones in Q1.

On-time delivery. GHSC-PSM delivered 89 percent of FP/RH commodities on time in Q1.

New country impact indicators. As part of a TO3 core-funded activity, GHSC-PSM began to generate a set of supply chain-related health outcome indicators to aid countries in their contraceptive security advocacy efforts. The indicators represent USAID contraceptive investment over the life-of-project data for all countries where the project has delivered contraceptive products. Highlights include estimates for the number of maternal deaths, unintended pregnancies, abortions and child deaths averted, in addition to direct health-care cost savings.

Enhancing data visibility. GHSC-PSM co-facilitated a training in Nigeria for staff from the Federal Ministry of Health and other stakeholders on how to use the Global Family Planning Visibility and Analytics Network (Global FP VAN) platform to access upstream order and shipment data, request actions from donors, and share their inventory and supply plan data with Global FP VAN member organizations.

Addressing the constrained global supply of FP/RH products. The global supply markets of injectables and implants remain constrained because of supplier production holds and systemic gaps between global supply and demand. To address this challenge, GHSC-PSM conducted supplier management visits to key FP/RH commodity suppliers in the Asia region, refreshed the FP/RH sourcing strategy, and held a webinar on sourcing in a constrained environment. The project also drafted the first social marketing organization (SMO) engagement strategy to gain greater visibility into SMO procurements.



GHSC-PSM has delivered enough contraceptives to provide **60.5 million couple-years of protection to date.**

This includes **5.2 million couple years of protection in Q1.**

MNCH

GHSC-PSM works to prevent child and maternal deaths by increasing access to quality-assured MNCH medicines and commodities and by providing global technical leadership on MNCH commodities.

Deliveries. In Q1, GHSC-PSM delivered 100 percent of MNCH drugs and commodities on-time.

Quality of oxytocin. GHSC-PSM began assessing current oxytocin procurement and management practices in Mozambique to understand the potential impact of long storage durations at ambient temperatures on product quality using modelled data.

Improving availability. The project is working with governments to ensure the availability of priority newborn and child health (NBCH) commodities for treating pneumonia and other health issues. In Q1, a GHSC-PSM assessment in the Republic of Mali led to immediate adoption of national health protocols that list key NBCH commodities as the preferred treatment. This is expected to increase uptake of these critical commodities.

Assessing quality for MNCH commodity wholesalers. With an eye to USAID's Journey to Self-Reliance initiative, the project assessed the domestic wholesalers currently supplying MNCH commodities to the Zambia Ministry of Health (MOH) and explored opportunities to improve the quality of MNCH products sourced by private wholesalers in Zambia.

Increasing data visibility through End Use Verification (EUV) survey capacity building. The project trained six countries in the proper collection, cleansing, and analysis of EUV MNCH and FP/RH commodity survey data. EUVs are providing important insights into availability of lifesaving MNCH commodities in these countries.

Global MNCH technical leadership. In addition to presenting oxytocin supply-chain recommendations to the Reproductive Health Supplies Coalition's Maternal Health Supplies Caucus in October 2019, GHSC-PSM is also working with a coalition of reproductive, maternal, newborn and child health (RMNCH) and supply chain experts to revise the United Nations' RMNCH quantification guidance for low- and middle-income countries (LMICs).

Other Emerging Health Threats

Zika. GHSC-PSM continued procuring male condoms and mosquito repellent to help women in Latin America and the Caribbean (LAC) avoid contracting Zika and reduce its spread. Orders for the Republics of Ecuador and El Salvador were processed in Q1 and will be delivered in Q2 and Q3.

Emergency supply chain (ESC) and preparedness. The project worked with seven countries in the LAC region to strengthen their emergency response capabilities for public health threats (such as the dengue outbreak), holding stakeholder workshops (using [the Emergency Supply Chain Playbook](#)) and developing government protocols and procedures.



GHSC-PSM is helping governments adopt the processes needed to **increase availability of oxytocin that is effective and safe to administer.** This medicine treats and helps prevent postpartum hemorrhage, the leading cause of maternal mortality.

In Q1, GHSC-PSM shared oxytocin supply-chain recommendations on the global stage at the Maternal Health Supplies Caucus.

Global Supply Chain

During Q1 FY 2020, GHSC-PSM achieved a strong OTD performance. Additionally, the project's cross-cutting achievements over the quarter include the following:

- In Nigeria, GHSC-PSM made significant gains in Q1 by negotiating an innovative service-level agreement with a point-of-care provider of HIV, viral load, early infant diagnosis, and TB testing services and supplies. This agreement will bring visibility and accountability to servicing and maintaining the supplier's network in Nigeria. This is the first time that the global community has been able to negotiate such an agreement across partners. Other international donors, partners and the supplier are using the GHSC-PSM contract to pursue a surcharge-based model in other countries.
- GHSC-PSM consolidated all contracts with a major pharmaceutical supplier under one universal Basic Ordering Agreement (BOA), thus ensuring a critical lever in generating greater value by changing the contractual mechanism and its governance conditions. The consolidated BOA will enable closer collaboration and contract governance between GHSC-PSM and the supplier across task orders and commodity groups.
- GHSC-PSM continues to make progress toward adopting global standards (namely GS1) for identifying products and locations, and product master data having received Global Location Numbers (GLNs) for 53 percent of in-scope⁴ manufacturers; Global Trade Item Numbers (GTINs) for 60 percent of in-scope trade items; and confirmation that 54 percent of all in-scope items comply with the tertiary pack labeling requirement.

Strengthening Health Institutions

GHSC-PSM continues to manage 33 country or regional field offices. Supplemented by headquarters-based experts, these offices provide wide-ranging technical assistance to strengthen national health supply chains. These investments in strengthening supply chain systems are yielding important innovations and positive results on many fronts. This quarter, GHSC-PSM:

- Met with the Digital Impact Alliance (DIAL) to begin discussions and planning around making TransIT, an electronic tool that transmits real-time proof of delivery to health facilities, an open-source solution. In Q1, the Kingdom of Swaziland (eSwatini) became the latest GHSC-PSM country to adapt and deploy the tool successfully.
- Assisted eSwatini's central medical store (CMS) in disposing of more than two tons of expired medical supplies that had been accumulating since 2013, at no cost to the CMS.
- Hosted MOH officials from Guinea in Mali to share knowledge, insights and lessons learned on successfully implementing prefabricated warehouses.

⁴ In-scope commodities are defined as pharmaceuticals, medical devices, sterile kits and laboratory reagents that are currently listed as saleable in the ARTMIS product catalog and have been purchased before.

- Led the SCM Leadership and Change Management Course in collaboration with the University of Rwanda for 27 participants from faith-based hospitals and supply-chain management organizations.
- Completed a baseline assessment of 164 ART facilities in Ethiopia to determine bottlenecks for recording and reporting systems and took actions as a result of the findings to improve availability of anti-retrovirals (ARVs) and overall treatment outcomes for patients.
- Partnered with the Ethiopian Public Health Institute and Ethiopian Pharmaceutical Supply Agency in conducting a series of ESC management workshops with key stakeholders.
- Began piloting a call center in Niger. This low-cost intervention is based on private-sector approaches and provides unprecedented access to stock data in challenging environments. The call center was first implemented in Republic of South Sudan and in Q I was adapted to the local context in Niger.

The pages that follow provide additional detail on strides GHSC-PSM has made this quarter to ensure the continuous availability of life-saving drugs, medical supplies, and health commodities to the people who need them around the world.

INTRODUCTION

A1. Background

The USAID GHSC-PSM project works to ensure uninterrupted supplies of quality medicines and commodities to save lives and to create a healthier future for all. The project directly supports the following global health areas of importance to the U.S. Government:

- The U.S. President's Emergency Plan for AIDS Relief (PEPFAR) to help reach its HIV/AIDS global 95-95-95 HIV/AIDS testing, treatment and viral-load suppression targets.
- The U.S. President's Malaria Initiative (PMI) to reduce malaria deaths and substantially decrease malaria morbidity, toward the long-term goal of elimination.
- USAID's Family Planning (FP) and Reproductive Health (RH) program to ensure that key reproductive- health commodities are available for safe and reliable voluntary family planning.
- USAID's maternal and child health (MCH) program to prevent child and maternal deaths.
- Other public health threats as they emerge, with support for Zika at this time.

The project procures and delivers medicines and commodities, offers comprehensive technical assistance (TA) to strengthen national supply-chain systems, and provides global supply-chain leadership to ensure that life-saving health supplies reach those most in need. In quarter 1 (Q1) of Fiscal Year 2020 (FY 2020), the project procured commodities or provided TA to 64 countries (see Exhibit 2 on the following page).

A2. About This Report

We are pleased to present our performance report for Q1 FY 2020 (October 1 through December 31, 2019). GHSC-PSM is a matrixed project that integrates work across two axes: health areas and technical objectives. Accordingly, the report is organized as follows:

- Section B summarizes major activities in each of the **five health areas**, including HIV/AIDS; malaria; family planning and reproductive health (FP/RH); maternal, newborn, and child health (MNCH); and other public health threats.
- Section C describes activities under each of the **three main technical objectives** (global commodity procurement and logistics, systems strengthening, and global collaboration), including key indicator results for those objectives.
- Annex A provides **performance and context indicators** for October 1 through December 31, 2019 (quarterly indicators).

Given the size and complexity of GHSC-PSM, this report summarizes our primary efforts and achievements this quarter and reflects only a fraction of the project's efforts each day to help people around the world live healthier lives.

Exhibit 2. Countries for Which GHSC-PSM Procured Commodities or Provided TA in Q1

	Proc.	TA		Proc.	TA
AFRICA:			ASIA:		
Republic of Angola	•	•	Islamic Republic of Afghanistan	•	
Republic of Benin	•		People's Democratic Republic of Bangladesh	•	
Republic of Botswana	•	•	Kingdom of Cambodia	•	•
Burkina Faso	•	•	Republic of Indonesia		•
Republic of Burundi	•	•	Republic of Kazakhstan	•	
Republic of Cameroon	•	•	Kyrgyz Republic	•	
Republic of Côte d'Ivoire	•		Lao People's Democratic Republic	•	
Democratic Republic of the Congo (DRC)	•		Republic of the Union of Myanmar	•	•
Federal Democratic Republic of Ethiopia	•	•	Federal Democratic Republic of Nepal	•	•
Republic of Ghana	•	•	Islamic Republic of Pakistan		•
Republic of Guinea	•	•	Independent State of Papua New Guinea	•	
Republic of Kenya	•	•	Republic of Tajikistan	•	
Kingdom of Lesotho	•	•	Kingdom of Thailand	•	•
Republic of Liberia	•	•	Socialist Republic of Viet Nam	•	•
Republic of Madagascar	•	•	LATIN AMERICA & CARIBBEAN:		
Republic of Malawi	•	•	Barbados		•
Republic of Mali	•	•	Dominican Republic	•	•
Islamic Republic of Mauritania	•		Republic of Ecuador	•	
Republic of Mozambique	•	•	Republic of El Salvador	•	•
Republic of Namibia	•	•	Republic of Guatemala		•
Republic of the Niger	•	•	Republic of Haiti	•	•
Federal Republic of Nigeria	•	•	Republic of Honduras	•	•
Republic of Rwanda	•	•	Jamaica	•	•
Republic of Senegal	•	•	Republic of Panama	•	•
Republic of Sierra Leone	•	•	Republic of Paraguay	•	
Republic of South Africa	•		Republic of Peru	•	
Republic of South Sudan	•	•	Republic of Suriname	•	•
Kingdom of Swaziland (eSwatini)	•	•	OTHER:		
United Republic of Tanzania	•		Ukraine	•	
Republic of Togo	•		Republic of Yemen	•	
Republic of Uganda	•	•			
Republic of Zambia	•	•			
Republic of Zimbabwe	•	•			

PROGRESS BY HEALTH AREA

In this section, we summarize GHSC-PSM's support over FY 2019 and Q4 for HIV/AIDS, malaria, FP/RH, MNCH, and other public health threats.

BI. HIV/AIDS



GHSC-PSM has delivered enough ARVs to provide more than **7.7 million patient-years of HIV treatment over the life of the project**, including **857 thousand patient-years of treatment this quarter**.



To date, GHSC-PSM has delivered nearly **29 million bottles of tenofovir, lamivudine, dolutegravir (TLD)** to countries, which would provide more than 3 million patient-years of treatment.



39 countries⁵ procured HIV/AIDS medicines and commodities, and **27 countries received health supply-chain systems strengthening** with HIV/AIDS funding.



GHSC-PSM brought **improved product visibility** into HIV commodities in **28 central warehouses and 66 regional warehouses in 18 PEPFAR countries and 11,538 health facilities** in 12 PEPFAR countries.



This quarter, 8 countries procured **2.3 million viral-load tests** to support scale-up of testing for viral suppression.

GHSC-PSM supports PEPFAR's goal of controlling the HIV/AIDS epidemic by procuring and delivering medicines and commodities to prevent infection and treat people living with HIV (PLHIV), including those used to support scale-up of viral-load testing to monitor treatment efficacy for PLHIV. GHSC-PSM is also implementing data visibility initiatives that support appropriate procurement and distribution of ARVs to link patients with the necessary commodities.

Supporting PEPFAR's HIV Prevention Agenda

⁵ GHSC-PSM procured health commodities for the following countries: AFRICA: Angola, Botswana, Burkina Faso, Burundi, Cameroon, Côte d'Ivoire, DRC, eSwatini, Ethiopia, Ghana, Malawi, Mali, Mozambique, Namibia, Niger, Nigeria, Rwanda, Senegal, South Africa, South Sudan, Tanzania, Togo, Uganda, Zambia, Zimbabwe; LATIN AMERICA AND THE CARIBBEAN: Colombia, Haiti, Jamaica, Panama, Peru; ASIA: Burma, Nepal, Papua New Guinea, Vietnam; EUROPE AND EURASIA: Kazakhstan, Kyrgyzstan, Tajikistan, Ukraine.

Pre-exposure prophylaxis (PrEP)

Multiple clinical trials have shown that daily, oral pre-exposure prophylaxis (PrEP) using the ARV medicines tenofovir and emtricitabine (and in some countries, tenofovir and lamivudine) dramatically reduces the risk of HIV infection for people who take it as directed. A total of 64,583 packs of tenofovir/emtricitabine 200/300mg 30-tablet bottles were delivered in Q1 2020 to Haiti, Mozambique and Zambia.

Condoms

GHSC-PSM continued working to build the condom supplier base. To better insulate demand from market shocks, the project issued orders to a newly approved male condom supplier in Q1.

Also, GHSC-PSM worked closely with USAID and the United Nations Fund for Population Activities (UNFPA) in auditing a suspended condom manufacturer to verify compliance with US and international regulations. Results of the audit and a determination of the supplier's future eligibility are expected in Q2.

To better streamline importations, GHSC-PSM also coordinated with UNFPA to build a comprehensive database of country condom registrations.

Voluntary Medical Male Circumcision Kits

Following the decision to reduce the types of VMMC kits procured from nine to three in Q4 FY 2019, the project is ramping up to increase supply by an estimated 1.2 million VMMC kits to 11 countries in FY 2020. This is an increase from 2019 in the number of countries and quantity delivered. By working with USAID partners to develop comprehensive supply plans and new long-term agreements (LTAs) signed with vendors, total landed cost is expected to be reduced by optimizing freight container use. FY 2020 will also see an increase in pilot initiatives for the new "no suture" method of circumcision.

HIV/Tuberculosis Prevention and Treatment

Globally, tuberculosis (TB) is a leading cause of death among PLHIV. According to the [2019 Global Tuberculosis Report](#), 862,000 PLHIV developed active TB, and 251,000 PLHIV died from TB in 2018. Current treatment options include either six to 12 months of isoniazid prevention therapy (IPT), six to nine months of daily Q-TIB (fixed-dose combination of isoniazid, B6 and cotrimoxazole), or a weekly dose of isoniazid and rifapentine for three months (3HP). For HIV-negative children who have contact with PLHIV and TB, the current recommendation is a three-month daily dose of isoniazid and rifampin (3HR).

Although 3HP is a preferred TB preventive therapy (TPT) method, the price of rifapentine had been an obstacle for low- and middle-income countries. An October 31, 2019, agreement between a key supplier, Unitaid and the Global Fund resulted in a 66 percent discount on the patent treatment course price, dropping it from \$45 to \$15 for 100 low-income and middle-income countries. However, the global demand for rifapentine currently exceeds the key supplier's single capacity. To secure supply,

Commodities Procured for HIV/AIDS Programs

- ARVs
- Diagnostics
- Essential medicines
- Injectable anesthetics
- Laboratory reagents
- Male and female condoms
- Personal lubricants
- Voluntary medical male circumcision (VMMC) kits

GHSC-PSM, in collaboration with the USAID Office of HIV/AIDS, began conducting market research to identify other rifapentine manufacturers and is exploring the readiness of countries for 3HP scale-up.

While rifapentine was unavailable, GHSC-PSM secured the equivalent of 2,558,398 TPT courses of isoniazid for 11 countries.⁶

Supporting the First 95: Testing

In support of RTK availability to reach the first 95 (HIV diagnosis), GHSC-PSM provides forecasting and supply planning as well as in-country logistics support to the Global Health Supply Chain Program-Rapid Test Kit (GHSC-RTK) project (implemented by Remote Medical International). The project also promotes better management of RTK orders and deliveries through the regional- and central-level stock data we collect through the Warehouse AIDS Data Visibility, Evaluation and Reporting (ADVISED) initiative. GHSC-PSM shares these data with GHSC-RTK monthly to guide RTK procurement planning and to triangulate data, reviewing HIV testing targets against RTK stock in countries with PEPFAR-supported HIV testing programs.

Supporting the Second 95: Treatment

TLD transition

To help achieve HIV treatment goals, GHSC-PSM continued to support PEPFAR countries' transition to TLD, the preferred first-line ARV. This quarter, the project delivered TLD to 14 countries⁷ primarily in 90-count bottles, including a first-time delivery to Vietnam and a delivery of 180-count bottles to Haiti to facilitate multi-month dispensing (MMD). Thanks to these efforts, as of October 2019, 90 percent of health facilities in seven countries⁸ reported that TLD was available to be dispensed to patients, an 8 percent increase over Q4 FY 2019.

Scaling Up Supply of TLD

To date, the project has delivered 29 million units of TLD to 21 countries. This is enough to provide more than **3 million patient-years of TLD treatment**.

The GHSC-PSM TLD procurement strategy has delivered tremendous benefits to PEPFAR-supported countries, specifically:

- GHSC-PSM currently has five approved TLD suppliers with a short-term supply capacity exceeding 5.5 million 90-count packs monthly. This enables GHSC-PSM to fast-track deliveries, especially for countries working to accelerate their MMD program, such as Côte d'Ivoire, Mozambique and Nigeria.
- GHSC-PSM's quarterly go-to-market strategy for TLD has resulted in significant cost-savings passed on to countries. In Q1 alone, GHSC-PSM obtained a weighted average price reduction of \$0.60 per 90-count pack from the previous quarter, representing a cost saving of \$4.1 million quarter-to-quarter. Since enacting this strategy, GHSC-PSM has realized a 12.5 percent price drop, resulting in an annual treatment cost of less than \$64 per patient per year.

⁶ Cameroon, Côte d'Ivoire, DRC, Eswatini, Haiti, Lesotho, Namibia, Nigeria, South Sudan, Tanzania, Zambia, Zimbabwe.

⁷ Botswana, Burkina Faso, Cameroon, DRC, eSwatini, Ethiopia, Haiti, Mozambique, Nigeria, Rwanda, Tanzania, Uganda, Vietnam, Zambia.

⁸ Botswana, Haiti, Malawi, Mozambique, Nigeria, Uganda, Zambia.

- To provide necessary support for MMD, in GHSC-PSM's Q1 TLD request for quotations, the project sent a strong market signal for suppliers to work to extend the shelf-life of TLD to 36 months. GHSC-PSM now has clear and aggressive timelines for suppliers to seek this shelf-life extension and will work with suppliers to further accelerate the timelines when and where possible. An improved longer product shelf-life will increase flexibility of supply across PEPFAR programs.
- GHSC-PSM is closely tracking market developments for new U.S. FDA-approved sources for TLD. The project is also working closely with already approved manufacturers on additional production facility approvals.

To ensure close coordination on TLD transition with key stakeholders, the project regularly shares data and facilitates technical coordination meetings. GHSC-PSM continued to host the First-Line ARV Transition (FLAT) technical working group, ensuring alignment between GHSC-PSM and USAID on TLD demand, supply and delivery. This quarter, the project began hosting country TLD transition analysis presentations that include data-focused reviews and participation from USAID and implementing partner stakeholders at the country and head office levels.

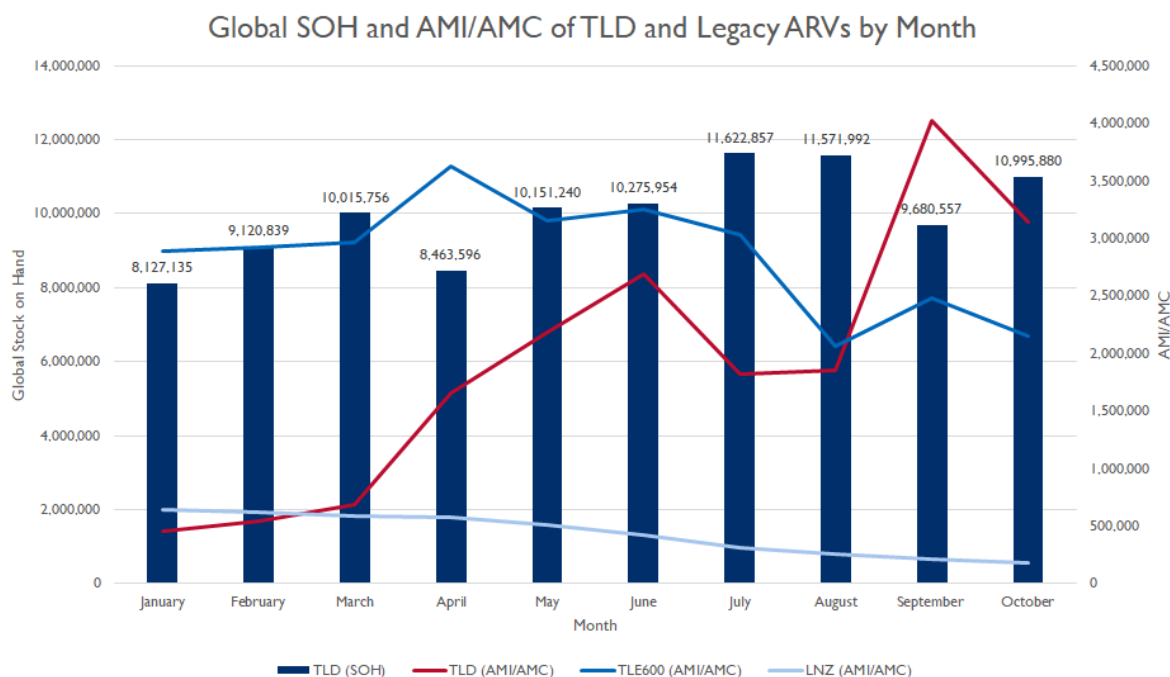
Legacy ARV Drawdown

To support efficient transition to more effective treatment regimens, (TLD), and minimize traces of less effective, older, first-line ARV regimens (legacy ARVs), GHSC-PSM collects, reviews and compiles monthly ARV inventory data from 65 warehouses in 16 countries through First-Line ARV Reporting and Evaluation (FLARE) reports.

Per 2019 Country Operational Plan (COP) Guidance, GHSC-PSM stopped procuring and began supporting the transition of patients away from legacy ARVs containing nevirapine, such as lamivudine/zidovudine/nevirapine (LZN). GHSC-PSM aligned the ARVs in the project's product catalog with the PEPFAR formulary to promote optimal ARV regimen ordering. Weekly reports are submitted to USAID outlining any second-line or suboptimal products that are ordered by partner countries so that both parties can engage country counterparts to determine if a better product should be selected.

Since January 2019, average monthly consumption of LZN has declined by 72 percent and average monthly consumption of TLE600 has declined by 25 percent (see Exhibit 3). Countries included in this analysis were Botswana, Burundi, Cameroon, Côte d'Ivoire, DRC, Eswatini, Ethiopia, Ghana, Haiti, the Kingdom of Lesotho, Mozambique, Namibia, Nigeria, Rwanda, Uganda, Vietnam, Zambia and Zimbabwe.

Exhibit 3. Drawdown of Stock-on-Hand and Reduced Consumption of LZN⁹



The analysis above shows successful drawdown of efavirenz- and nevirapine-based regimens and an overall increase in TLD stock-on-hand each month.

Multi-Month Dispensing and Cartonless Pack Presentation

In line with PEPFAR's guidance for all countries to increase MMD availability of ARVs, it is required that they procure larger pack sizes of ARVs, chiefly the 90- and 180- tablets bottles of TLD. In Q1, GHSC-PSM delivered 2.8 million units of cartonless 90-count TLD bottles to 10 countries.¹⁰ The cartonless approach reduces packaging, shipping and distribution costs. In Q1, GHSC-PSM also worked to ensure the availability of a 180-count bottle supply by adding pack size as a criterion in the quarterly tender process for TLD and adding another two eligible suppliers. The first delivery of 180-count TLD was made to Haiti in Q1. GHSC-PSM is currently processing additional orders of 180-count TLD for five countries: Côte d'Ivoire, DRC, Haiti, Nigeria and Uganda.

To help ensure timely delivery of product to countries, GHSC-PSM pre-positions TLD in the regional distribution centers (RDCs). In Q1, the project issued its largest order to date to restock the RDCs with TLD: 6 million 90-count packs of TLD and 420,000 180-count packs, valued at more than \$93 million, that will be used for COPI9 deliveries.

⁹ This represents central medical stores in Cameroon, Haiti, Lesotho, Malawi, Mozambique, Namibia, Nigeria, Uganda, Zambia and Zimbabwe.

¹⁰ Cameroon, DRC, eSwatini, Ethiopia, Haiti, Mozambique, Nigeria, Tanzania, Uganda, Zambia.

Pediatric ARVs

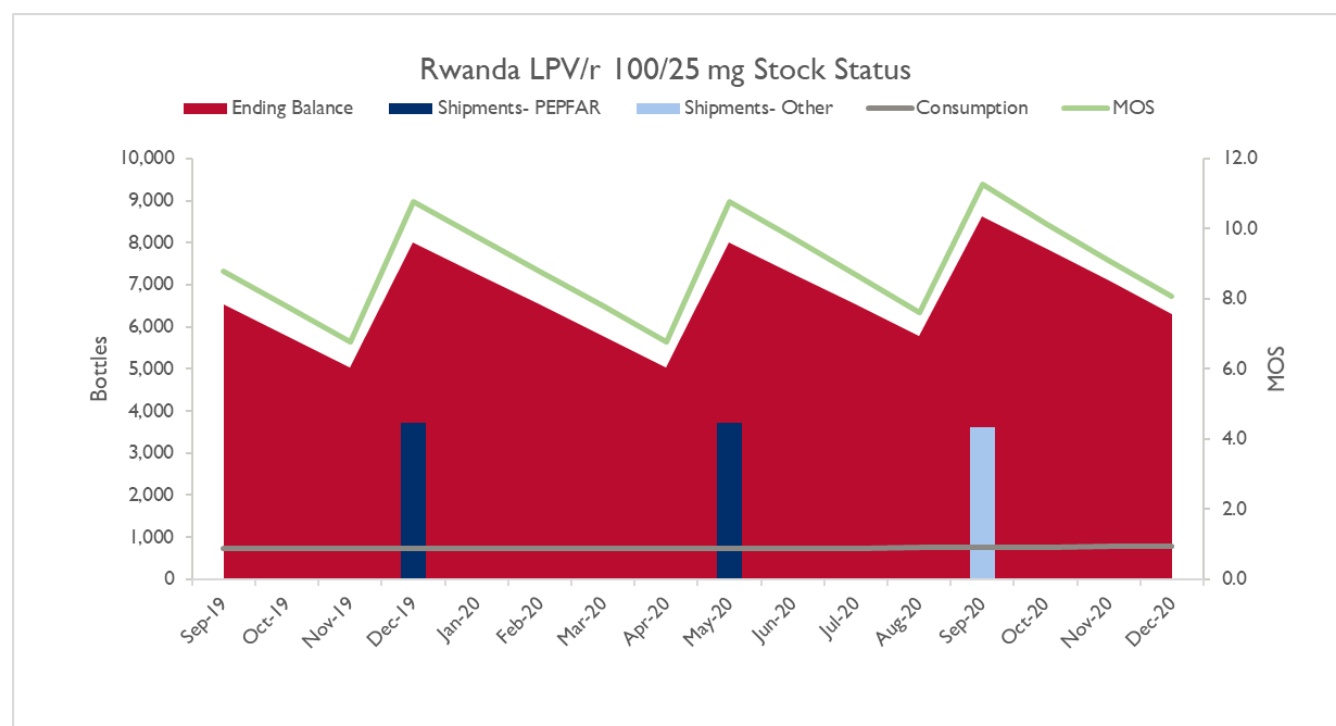
GHSC-PSM continues to coordinate a biweekly pediatric ARV transition meeting with USAID that focuses on coordinating activities supporting the transition from nevirapine-based pediatric ART. Emphasis is placed on analyzing the supply and global demand of commodities on the optimal pediatric ARV formulary and limited use list. In Q1, emphasis was placed on analyzing four main optimal pediatric products, and discussions were initiated on forecasting transitioning countries from lopinavir/ritonavir 40/10 mg pellets to new pediatric products becoming available for procurement in 2021.

Key Pediatric Medicines Discussed During Pediatric ARV Transition Meetings

Abacavir lamivudine 120/60 mg
Lopinavir ritonavir 100/25 mg
Lopinavir ritonavir 40/10 mg pellets
Lopinavir ritonavir 40/10mg granules

In Q1, GHSC-PSM developed a tool to visualize, monitor and plan different stock and delivery scenarios. The tool triangulates data from ARTMIS on actual orders and information from country supply plans. These supply planning data include actual and forecasted consumption, dispensing, issues, shipments and stock-on-hand. By visualizing the status of each country by product or by product-equivalent aggregate, GHSC-PSM can better plan which orders should be prioritized while ensuring minimal delay when new regimens are introduced. Also, it will be easier to determine which countries may require a higher degree of technical support during transitions. A sample visual produced by the tool is provided in Exhibit 4:

Exhibit 4. Sample Visual of the Scenario Planning and Monitoring Tool



Urgent Deliveries

This quarter, GHSC-PSM successfully managed two time-sensitive deliveries to meet urgent needs:

- **Vietnam TLD.** Vietnam experienced challenges in obtaining government approval of TLD. A pending TLD order of \$750,000 was cancelled in October 2019 and GHSC-PSM managed to redistribute the stock, thus eliminating the cost risk for the country. Four days later, the Government of Vietnam approved TLD and the country requested a quick reorder. GHSC-PSM worked closely with the supplier to manufacture fresh product and deliver it to country in a record-breaking 64 days.
- **Nigeria TLD.** In October 2019 the Nigeria field office identified that TLD transition was happening faster than expected and that more product was needed. The country also wished to fast-track its MMD strategy. Within just four weeks, GHSC-PSM delivered 600,000 90-count TLD bottles. The goods, valued at over \$9.4 million, arrived in 25 separate air deliveries without any reported damages. Multiple warehouses and airports were used to deliver the product within the requested delivery dates.



VAAC representatives and GHSC-PSM staff in Vietnam officially receive TLD shipment at the Vietnam customs office. Photo credit: GHSC-PSM.

Supporting Third 95: Viral-Load Testing

In Q1, GHSC-PSM continued to support PEPFAR countries by building their capacity to procure viral-load testing reagents, specimen collection consumables, and testing equipment to reach their viral-load and early infant diagnosis (EID) targets. The project maintained high on-time delivery (OTD) of 92 percent for 517 line items by using fixed-price, long-term agreements with multiple suppliers to procure laboratory consumables, medical supplies, general laboratory reagents, and laboratory support equipment. These agreements cover more than 60 percent of all eligible laboratory lines.

Service and Maintenance Agreements

GHSC-PSM also made significant gains in Q1 toward improving service and maintenance of HIV viral-load, EID, and TB laboratory diagnostic networks. The project worked with a primary point-of-care provider, USAID, U.S. Centers for Disease Control and Prevention (CDC), the Nigeria MOH, and the Global Fund for AIDS, Tuberculosis, and Malaria (Global Fund) in developing the first surcharge model in Nigeria and in pooling volumes to generate the most value for the program. Working with the point-of-care provider of HIV viral load and EID, and multi-drug-resistant TB reagents and cartridges – a service-level agreement was negotiated and signed to bring visibility and accountability to servicing and maintaining their network in Nigeria. This network includes 407 sites and will serve over 500,000 patients with product funded by PEPFAR and the Global Fund and up to a further 400,000 patients for products funded by the Ministry of Health and other donors. This is the first time that the global community has been able to negotiate a surcharge deal with key performance indicator accountability and enhanced service terms that make a parts depot and module swap available in-country. The GHSC-PSM contract is being used by other international donors, partners and the provider to pursue this innovative surcharge model in other countries.

In Haiti, GHSC-PSM worked with USAID, CDC and national viral-load sites to address equipment breakdowns and service interruption. The working group identified spare parts for the equipment that break down most often. GHSC-PSM worked with the key equipment supplier and the in-country distributor to establish a new depot for standard in-country inventory of high-failure-rate parts. This new spare parts depot will increase instrument uptime and reduce repair time for the most commonly affected m2000 parts.

Forecasting and Quantification

In eSwatini and Haiti, GHSC-PSM worked with local partners to strengthen laboratory forecasting and supply planning and provided a refresher training on laboratory forecasting for viral-load scale-up using ForLab quantification software. In Eswatini and Ghana, GHSC-PSM provided remote support to the national laboratory quantification team that involved reviewing their data and ensuring that quantification outcomes reflect the reality on the ground.

VL Network Design

GHSC-PSM is working closely with USAID and country counterparts to support data-driven decision making and viral-load network design in Mozambique. Current analysis and support are focused on preparing Mozambique to enter COP20 planning with a fully mapped viral-load and sample referral network against current- and future-state patient demand for viral load, EID and TB.

Standardizing Dried Blood Spot Kits

GHSC-PSM participated in discussions with USAID, Global Health Supply Chain Program-Quality Assurance (GHSC-QA) project and CDC to standardize dried blood spot (DBS) kits. A DBS kit is a combination of several products needed to collect whole blood drops and package them for dispatch to a laboratory for analysis. Each country has its own protocol of collection and packaging, resulting in a varied range of DBS kits. Some kits may miss essential components, and other kits may have unnecessary components (resulting in waste). The goal is for all partners to align on a certain set of standard DBS kits, which will be used for all countries.

Stock Tracking, Oversight and Planning for HIV/AIDS

This quarter, GHSC-PSM carried out multiple efforts to support USAID's vision for improved visibility into HIV commodity inventories at all levels of the supply chain.

Site-Level Data Visibility in 12 countries at 11,538 health facilities

The project continued to collect, review and report site-level inventory data from 11,538 facilities in 12 countries.¹¹

HIV Commodity Data Visibility at 28 Central Warehouses and 66 Regional Warehouses in 18 Countries

Each month, GHSC-PSM reviews inventory data for more than 20 HIV medicines and commodities from central and regional warehouse levels in 18 PEPFAR countries to identify stock imbalances. GHSC-PSM reports the data generated at this level on the status of first-line ARV drawdown, the transition to TLD,

¹¹ GHSC-PSM is collecting site-level data from Angola, Botswana, Cameroon, Haiti, Lesotho, Malawi, Mozambique, Namibia, Nigeria, Uganda, Zambia and Zimbabwe.

and HIV commodity stock-out risk to USAID and PEPFAR. These reports help mitigate imbalances and avoid rationing and waste, where possible, by raising awareness, identifying opportunities to shift GHSC-PSM shipments, and supporting redistribution within a country.

GHSC-PSM ensured access to and use of the data and improved capacity for data visualizations through a new Warehouse ADVISER dashboard. Updates are made to the dashboard monthly to provide full visibility into country HIV commodity inventory at the central and regional levels. This quarter, the project made Warehouse ADVISER available online through a limited-access web platform on the GHSC program website with easily navigable menus of global and country-specific information from warehouses in 18 countries.

Participation in Global Conferences and Meetings

In November, GHSC-PSM participated in the annual ARV Buyer Seller Summit hosted by USAID, PEPFAR, Global Fund and the Republic of South Africa's National Department of Health and attended by global HIV/AIDS partners. During the summit, GHSC-PSM presented on "Supply-Chain Optimization through End-to-End Data Visibility."

At the International Conference on AIDS and STIs in Africa held in Kigali, Rwanda in December, GHSC-PSM hosted a panel discussion on "Shifting to New and Improved Treatment Regimens: Lessons Learned from TLD Transition." More than 260 conference participants from 35 countries attended the session, ranging from service providers to government representatives, donors, researchers and more.

To ensure close coordination on TLD transition with key stakeholders, GHSC-PSM regularly shares data and facilitates technical coordination meetings that include the First-Line ARV Transition (FLAT) technical working group, ensuring alignment between GHSC-PSM and USAID on TLD demand, supply and delivery.

GHSC-PSM also participated actively in ARV Procurement Working Group (APWG) meetings such as the December 11, 2019, GHSC-PSM meeting for Q4 order finalization with the global partners. To secure on-time delivery, GHSC-PSM participated actively in ongoing quarterly meetings with pediatric treatment suppliers for lopinavir/ritonavir pallets and granules.

Country Support

In **Lesotho**, TLD distribution to all health facilities has been successful so far with no stockouts to date since it began in August 2019. What's more, a buffer stock of one-month consumption is available in 10 districts. GHSC-PSM worked with the district logistics officer (DLO) and district pharmaceutical officer to investigate a persistent stockout of HIV-ready-to-use therapeutic food (RUTF) or Plumpy Nut. After discovering the root cause—misuse and irrational prescribing of Plumpy Nut—the DLO nutritionist implemented a mentorship initiative with support from GHSC-PSM and in collaboration with health facilities, to train staff on how to properly dispense HIV-RUTF. After this intervention, stock levels of HIV-RUTF improved and are now in line with expectations.

B2. Malaria



The project has delivered enough anti-malarials to treat over **219 million infections**, including **12.1 million in Q1**.



30 countries¹² procured malaria medicines and commodities and **25 countries** received health supply-chain systems strengthening with malaria funding under the contract.



The project supported procurement of 8,659,000 long-lasting insecticide-treated nets (LLINs) for 7 countries to provide **protection from malaria for more than 17.3 million people**.



The project continued to provide technical leadership in **promoting malaria commodity market health** for commodity security and quality.

Under the PMI-funded malaria task order, GHSC-PSM supplies life-saving prevention and treatment medicines, rapid diagnostic tests (RDTs) and LLINs. The project offers partner countries new approaches to strategic planning, logistics, data visibility, analytics and capacity building. GHSC-PSM also provides technical guidance to strengthen global supply, demand, financing and the introduction of new malaria medicines and commodities.

Commodity Sourcing, Procurement and Delivery

GHSC-PSM's provision of malaria commodities this quarter entailed strategic sourcing, procurement, quality assurance (QA), distribution and support for transferring/redistributing stocks, as summarized below.

Sourcing and Procurement Strategies

Q1 FY 2020 marked an inflection point for the malaria task order, ushering in significant changes in data use, order processing, sourcing strategies, and market-shaping exercises. With the FY 2020 TO2 Call for Orders (the bulk of which were received in Q1 FY 2020), GHSC-PSM implemented a suite of new, data-driven strategies, processes, tools and communications protocols. These efforts were designed to deliver better overall value to recipients, support market objectives, and drive supply-chain efficiencies and responsiveness. Much of FY 2019 was focused on developing these new strategies and tools; Q1 FY 2020 marked the wholesale implementation of these new ways of doing business for the task order.

Across all major product categories, TO2 is moving away from conducting individual sourcing events and toward order allocation methodologies under fixed-price, long-term agreements. The construct of

¹² GHSC-PSM procured malaria commodities for the following countries: AFRICA: Angola, Benin, Burkina Faso, Burundi, Cameroon, Côte d'Ivoire, DRC, Ethiopia, Ghana, Guinea, Kenya, Liberia, Madagascar, Malawi, Mali, Mozambique, Niger, Nigeria, Rwanda, Senegal, Sierra Leone, South Sudan, Tanzania, Uganda, Zambia, Zimbabwe; ASIA: Burma, Cambodia, Laos PDR, Thailand

these contracts and sourcing strategies is tailored per commodity category, designed to seek better overall value, reap supply-chain efficiencies, and serve the needs of a given market.

Each strategy was operationalized by new processes that drive toward three key elements:

1. Using data to inform decision making, pursue efficiencies, and better meet in-country needs.
2. Providing increased visibility to all stakeholders along the value chain.
3. Systematizing decision making to reduce level of effort and codify the pursuit of overall best value into every step of ordering processing.

Notable process changes included:

- **Supplier-specific forecasts** for products under allocation methodologies.
- **Data-driven and systematic order validation** using forecast data, pipeline data, and supply plan reviews. TO2 uses these data to ensure that order processing progresses in a way that meets country need—whether that means expediting orders, adjusting orders to avoid stockouts or overstocks, or identifying red flags and discrepancies between data sets.
- **Proposed staggered deliveries.** For select products, TO2 proposes staggered delivery schedules based on potential freight savings, stock-on-hand and consumption data. This approach offers the following benefits:
 - Provides a consistent, smooth supply of product into country
 - Ensures the highest possible remaining shelf-life
 - Optimizes use of available pipeline and emergency funds
 - Smooths demand for suppliers
 - Eases logistics constraints at pickup, en route, upon arrival, and storage in country
 - Accommodates fluctuations in country demand by moving away from large, lump-sum annual orders
- **Order assignment under approved allocation methodologies.** GHSC-PSM is using the Order Assignment System (OASys) to automate predefined business rules and decision-making, based on preapproved sourcing strategies.
 - Reduces level of effort by automating business rules and decision-making on an allocation, instead of an order-by-order, basis
 - Identifies the optimal mode of shipment to hit target delivery dates while optimizing for cost-savings
 - Automates target award percentages by manufacturer to ensure market health
 - Reduces the likelihood of the project awarding more volume to one manufacturer than is feasible
- **Ocean as mode of shipment.** GHSC-PSM systematically evaluates every new order for cost effectiveness and feasibility of ocean as the mode of shipment, taking into consideration the ability to meet the need in country, given transit times and remaining shelf-life requirements.

In Q1, strategic sourcing of malaria commodities focused on:

- **Finalizing long-term, fixed price, agreements with suppliers of LLINs.** After completing a strategic tender for providing LLINs in FY 2019, GHSC-PSM awarded contracts to multiple vendors. In conjunction with the contracting efforts, in Q1, GHSC-PSM devised and obtained approval of a new allocation strategy that emphasizes overall best value, inclusive of goals to

maintain sufficient market health. GHSC-PSM will begin placing orders under the new agreements, and in accordance with the new allocation strategy, in Q2.

- **Finalizing long-term, fixed price, agreements with suppliers of sulfadoxine/pyrimethamine (SP).** Building on existing agreements with SP vendors, GHSC-PSM solicited fixed-priced agreements for multiple presentations of this important preventative pharmaceutical, for the first time, in FY 2019. Establishing fixed prices will help to improve planning by GHSC-PSM and its recipient countries in a market that has seen substantial price fluctuation in the past, while also reducing the tendering burden for the project and its suppliers. Enabled by fixed-price agreements, GHSC-PSM implemented this new allocation strategy and began placing orders under its terms in Q1.

Procurement and Deliveries

Since the start of the project, GHSC-PSM has procured malaria commodities for 30 countries (PMI countries and two USAID-designated malaria countries). Over the life of the project, GHSC-PSM has procured more than \$530 million in malaria medicines and commodities, including more than \$28 million this quarter.

OTD and OTIF. GHSC-PSM produced consistently high on-time delivery performance for malaria commodities during Q1, with an overall value of 91 percent OTD and 87 percent OTIF for the quarter.

Implementation of Ocean Strategy

Historically, with few approved exceptions by PMI, GHSC-PSM has shipped RDTs and pharmaceutical products used for PMI programs by air. In April, the project reported findings from a pilot study of shipping RDTs and malaria medicines by ocean to reduce freight costs. With PMI support, GHSC-PSM now plans to use ocean transit with a concurrent quality control (QC) testing model as a mode of shipment when feasible and more cost effective. In Q1, the project started assessing every order line to determine the optimal mode of shipment that meets the recipient country's programmatic and regulatory requirements and is deemed of best value. This is expected to yield substantial cost-savings on freight.

Global Collaboration on QA

GHSC-PSM began global quality assurance (QA) collaboration with the Global Fund in Q1. Both projects agreed to hold monthly virtual meetings on QA/QC topics for malaria products. The topics covered include product specifications, standard operating procedures (SOPs), test methods, out-of-specification test results and upcoming conferences and learning opportunities. The impetus for these meetings was GHSC-PSM's recognition that PMI and Global Fund have the same manufacturers and are under the same WHO guidance, are experiencing similar challenges and would benefit from discussions and feedback from each other.

Global Standards

At the end of Q1 FY 2020, GHSC-PSM had received Global Location Numbers (GLNs) for 74 percent of in-scope¹³ TO2 suppliers; Global Trade Item Numbers (GTINs) for 63 percent of in-scope TO2 trade items and confirmation that 60 percent of in-scope items comply with tertiary pack labeling requirement. Overall, a total of 48 percent of in-scope malaria commodities are Phase 1 compliant at the end of Q1 FY 2020.¹⁴

Sixty-four percent of in-scope malaria commodity suppliers are currently contracted with a Global Data Synchronization Network (GDSN) data pool, and GHSC-PSM is synchronizing product master data for 8.3 percent of malaria commodities. GHSC-PSM has also confirmed compliance with future secondary pack labeling requirements for 42.2 percent of TO2 trade items in advance of the upcoming Phase 3 deadline in June 2020.

Exhibit 5. Compliance with Future Secondary Pack Labeling Requirements




Tracer Category	Phase 1 Compliance (December 2018)	Phase 2 Compliance (December 2019)
Malaria RDTs	100%	0%
Artemisinin-Based Combination Therapies (ACTs)	60.5%	13.2%
Severe Malaria Medicines	44.8%	10.3%
SP	46.2%	7.7%
Seasonal Malaria Chemoprevention	44.4%	0%
Other Pharma	0%	0%
Grand Total	47.7%	8.3%

¹³ In-scope commodities are defined as pharmaceuticals, medical devices, sterile kits and laboratory reagents that are currently listed as saleable in the ARTMIS product catalog and have been purchased before. As of December 31, 2019, a total of 109 TO2 trade items are considered in scope for this requirement. Note that the number of items considered in scope, and therefore compliance rates, will fluctuate quarter to quarter because of changes in active contracts and introduction of new suppliers and trade items.

¹⁴ Note that these metrics are subject to frequent fluctuation because of the scoring methodology, which measures only actively purchased items under current contract. In this case, these metrics are lower than those presented in the previous report. The variation is because of the entrance of newly active items (from newly engaged suppliers) and a methodological update to the scoring logic for the TO2 report. Information provided for partially compliant items is not counted as compliant until all three components of Phase 1 compliance are satisfied.

In May 2019, GHSC-PSM kicked off the TraceNet working group tasked with establishing a GS1 global health procurement requirement to enable identification, data capture, and data exchange for LLINs. The team is chaired by representatives from USAID and Global Fund, and consists of representatives from GHSC-PSM, project field offices, GS1, manufacturers, and the vector control community. These stakeholders met in December 2019 and finalized the *Recommended Identification, Capture, and Data Sharing Specifications for Long-Lasting Insecticidal Nets* document. USAID and Global Fund jointly endorse the document, with listed contributors from 10 manufacturers. GHSC-PSM will support USAID in disseminating this document in Q2 and has planned several activities, including webinars and guideline development, to support LLIN manufacturers in its implementation in accordance with agreed-upon timelines.

Exhibit 6. Summary of LLIN Identify, Capture and Share Requirements as Agreed by the TraceNet Working Group

IDENTIFY				
ENTITY		REQUIREMENT	PHASE	
Trade items		Assign and provide TM GTINs for all levels of the trade item packaging hierarchy.	Phase 1	
Locations and/or legal entities		Assign and provide TM Global Location Numbers (GLNs) for sold-from, manufacture-from, and ship-from.	Phase 1	
CAPTURE				
PACKAGING LEVEL		REQUIREMENT	HUMAN READABLE INTERPRETATION (HRI)	PHASE
Bale		GS1-128 barcode symbology encoded with: <ul style="list-style-type: none">• (00) SSCC• (02) GTIN of contained items• (37) Count of contained items• (10) Batch/lot number• (11) Production date	Information printed in human readable form: <ul style="list-style-type: none">• (00) SSCC• (02) GTIN of contained items• (37) Count of contained items• (10) Batch/lot number• (11) Production date	Phase 2 for GTIN, count, batch/lot and production date Phase 3 for SSCC
Bag with LLIN		GS1 DataMatrix symbology encoded with: <ul style="list-style-type: none">• (01) GTIN• (10) Batch/lot number• (11) Production date	Information printed in human readable form: <ul style="list-style-type: none">• (01) GTIN• (10) Batch/lot number• (11) Production date	Phase 2
Individual LLIN		GS1 DataMatrix symbology encoded with: <ul style="list-style-type: none">• (01) GTIN• (10) Batch/lot number• (11) Production date• (21) Serial number	Information printed in human readable form: <ul style="list-style-type: none">• (01) GTIN• (10) Batch/lot number• (11) Production date• (21) Serial number	Phase 2 for GTIN, Batch/lot and production data Phase 3 for serial number
SHARE				
DATA TYPE		SCOPE	REQUIREMENT	PHASE
Master data		Trade items	Provide mandatory and required attribute data via the GS1 Global Data Synchronisation Network TM (GDSN [®])	Phase 2

Support for Prioritizing Orders and Transferring Stock

During FY 2019, GHSC-PM encountered an extended process of acquiring import waiver for artemether-lumefantrine (ALu) from the Republic of Kenya's regulatory authority while the products were ready for delivery. To avoid aging of the products and to respond to a request for early delivery from Sierra Leone, the project transferred some of the ALu from Kenya's order to Sierra Leone that relieved the risk of a stockout there.

In Q1, 27 countries submitted data to the Procurement Planning and Monitoring Report for malaria (PPMRm), with the Kingdom of Thailand reporting for the first time. The PPMRm collects and reports information on stock status and on host governments' and other donors' shipments. The visibility into stock status and shipment information enables PMI and GHSC-PSM and field offices to make decisions

on prioritizing, expediting, transferring or delaying procurements or shipments, and facilitates review of forecasts and supply plans to optimize procurements.

Based on PPMRm data, actions were taken at the global or national level, including:

- In Mali, the analysis of stock data helped identify that actual consumption of RDTs was much higher than forecasted, which nearly led to a stockout of RDTs at the central warehouse. Based on this information, the project is working to expedite a shipment to augment the central stock.
- In Uganda, ALu 6x2 20mg/120mg stocked out, while ALu 6x1 was overstocked at the Joint Medical Store. ALu 6x1 was substituted to bridge the needs of ALu 6x2. In the meantime, the project is expediting procurement of ALu 6x2 to fill the stock.

Support for Stockout Reduction Strategy

Following the project's initial analysis of data visibility and stock availability in Q4 FY 2019, in Q1 GHSC-PSM began developing an initial strategy to reduce stock-outs of malaria commodities. The project identified improving data visibility and data use as two key areas to include as the core of the strategic approach. The initial strategy also identified the need to track progress in increasing on-shelf availability, as well as the progress in effectively using available stock data to improve operations. Together, these aspects will serve as two key enablers in building global data visibility. In the upcoming phase of engagement, the project will establish a set of technical solutions to improve stock availability and pilot these solutions within select countries.

LLIN Distribution Support

In Q1 FY 2020, the project supported the preparation of large-scale LLIN campaigns and routine distribution as a key malaria prevention strategy. These massive initiatives ensure beneficiaries, particularly in high-impact areas, receive the nets they need in advance of the rainy season. Examples of our work in Q1 follow.

In **Burundi**, GHSC-PSM, in collaboration with the National Malaria Control Program (NMCP) conducted routine distribution of 171,400 LLINs to 41 health districts between October and December 2019. The project also procured 438,600 LLINs to fill the gap for the mass distribution campaign in December 2019.

Final Push to Deliver LLINs in Cameroon

In Q1, GHSC-PSM finalized the distribution of **2.7 million Global Fund-procured LLINs** to Cameroon's Far North Region

In **Ethiopia**, GHSC-PSM worked with the Ministry of Health (MOH) to finalize the mass distribution of LLINs. Between July and October 2019, a total 5.57 million LLINs were delivered to 2,485 health posts/kebeles, from which 5.23 million nets were distributed to about 2.63 million households benefiting about 9.2 million people in four regional states. To prepare for the next mass distribution of 3.1 million LLINs that is set to begin in Q2, the project organized a training for 32 participants from seven regional Ethiopia Pharmaceutical Supply Agency (EPSA) warehouses and three regional health bureaus. During the training, lessons and best practices from the previous campaigns were shared, participants became familiar with LLIN distribution methods and activities, and the regional health bureaus and EPSA warehouses prepared their plan to support the mass distribution campaign.

GHSC-PSM in **Sierra Leone** assisted the NMCP in providing universal access to free LLINs. To increase the overall proportion of pregnant women and children under five years of age using LLINs, this commodity was disseminated at pregnant women's first antenatal care (ANC) visit and at children's third expanded program on immunization (EPI) visit. GHSC-PSM also supported the first- and last-mile distribution of 179,950 LLINs across 13 districts and 1,262 health centers, respectively in Q1.

In **Zimbabwe**, on behalf of PMI, the project provided financial and technical support for transport and logistics for campaign and routine distribution of 110,750 LLINs in Q1.

Country Support

GHSC-PSM provided supply-chain systems strengthening for malaria medicines and commodities in 25 countries in Q1.¹⁵ Examples of our work in Q1 follow.

In the **Republic of the Union of Myanmar (Burma)**, GHSC-PSM highlighted its malaria supply-chain systems strengthening interventions at the Malaria Intervention Launching Ceremony hosted by the Ministry of Health and Sports of Burma (MoHS), with attendees from the MoHS, USAID and other key supply-chain stakeholders. At this ceremony, the project showcased current USAID and PMI-funded malaria interventions and quality malaria commodities being procured by the project. The project also demonstrated the use of an electronic logistics management information system (eLMIS).

In **Guinea**, to facilitate the operationalization of the interoperability system between e-SIGL¹⁶ and DHIS2, the project held a workshop for 14 MOH participants to transfer logistics data of all programs from the interoperability server to DHIS2 for the period January to September 2019. Participants developed tools that allow for visualizing and extracting eLMIS data in DHIS2. These activities enabled the development of guidelines outlining the roles and responsibilities of the MOH and information technology that will execute interoperability tasks. The project implemented standard operating procedures (SOPs) on how to use the interoperability system to transfer logistical data into DHIS2 by the end of October 2019.

In **Niger**, GHSC-PSM adapted the international call center, first implemented in South Sudan, to the Niger country context. Adapting this model in Niger required creative thinking, including translating the web-based application into French, installing the necessary equipment in the Niger office and conducting test calls. The call center will be used to collect stock level data at the service delivery point (SDP) level, necessary to successfully implement the last-mile distribution pilot. Also, the call center will be used for remote training and supervision during the rollout of the logistics management information system (LMIS).

Participation in Global Conferences and Events

During Q1, project staff represented TO2 at two global conferences, including the Global Health Supply Chain Summit (GHSCS) and the Annual Meeting of the American Society of Tropical Medicine and Hygiene (ASTMH). At GHSCS, three out of four accepted posters pertained to malaria technical assistance. Also, two out of four total oral presentations made by GHSC-PSM were related to malaria,

¹⁵ The countries for which GHSC-PSM provides technical assistance with malaria funding are Angola, Burkina Faso, Burma, Burundi, Cambodia, Cameroon, Ethiopia, Ghana, Guinea, Laos PDR, Liberia, Madagascar, Malawi, Mali, Mozambique, Niger, Nigeria, Rwanda, Sierra Leone, South Sudan, Tanzania, Thailand, Uganda, Zambia and Zimbabwe

¹⁶ SIGL: Système d'Information en Gestion Logistique

specifically on work in Cameroon to build a culture of decision-making based on big data and innovations in product master data management. Other topics included piloting the use of drones to deliver commodities in remote settings and implementing commodity security surveys in 36 countries.

The project had a 100 percent acceptance rate at ASTMH. The accepted poster from Ethiopia presented findings on whether severe malaria was being treated according to guidelines.

B3. Family Planning and Reproductive Health



GHSC-PSM delivered enough contraceptives to provide **60.5 million couple-years of protection over the life of the project, including 5.2 million in Q1.**



27 countries procured FP/RH commodities,¹⁷ and **health supply-chain systems-strengthening** support was provided to **20 countries** with FP/RH funding.



GHSC-PSM drafted its **first social marketing organization (SMO) engagement strategy** to improve and maintain visibility into the landscape and activities of USAID-funded SMOs.



GHSC-PSM submitted the first draft of the FY 2019 **Overview of Contraceptive and Condom Shipments report (C&C Report)** to USAID. The data showed overall reductions in quantities and total delivered value in FY 2019 of two popular contraceptive methods: implants and injectables.

The FP/RH task order serves as the primary vehicle through which USAID procures and provides FP/RH commodities for USAID's voluntary family-planning programs; offers technical assistance to improve supply systems and contraceptive security in partner countries; and provides technical leadership to strengthen global supply, increase financing and introduce new FP/RH commodities.

Addressing FP/RH Priorities

GHSC-PSM addressed USAID's FP/RH priorities by managing and continuously improving its global supply operations; partnering with countries to build self-reliant supply chains; and leading with knowledge and evidence. Below, GHSC-PSM provides examples of its work in these areas.

New Country Impact Indicators for FP/RH

In Q1, as part of a TO3 core-funded activity, GHSC-PSM began to generate a set of supply chain-related health outcome indicators to aid countries in their contraceptive security advocacy efforts. The indicators presented below were selected in collaboration with USAID and represent USAID contraceptive investment over the life-of-project data for all countries where the project has delivered contraceptive products. GHSC-PSM uses data from ARTMIS entered into Marie Stopes International's Impact 2 model¹⁸, an innovative tool that estimates the impact of reproductive-health programs, to calculate the indicators.

¹⁷ Per USAID guidance, all condom procurements are counted under the HIV/AIDS task order.

¹⁸ <https://www.mariestopes.org/what-we-do/our-approach/our-technical-expertise/impact-2/>

Exhibit 7: Global FP/RH Impact Indicators, Life of Project:

Estimated Impact of GHSC-PSM deliveries on FP/RH indicators to date	
Number of unintended pregnancies averted	29 million
Number of abortions averted	10.2 million
Number of maternal deaths averted	76 thousand
Number of child deaths averted	520 thousand
Direct healthcare costs saved	\$1.8 billion

Collaboration with Global Stakeholders

In Q1, the project continued to build global partners' awareness of and support for the U.S. Government's FP/RH priorities and programs and to support USAID's leadership in FP/RH commodity availability through the following activities.

Ouagadougou Partnership Meeting

Ouagadougou Partnership Member Countries:

- Benin
- Burkina Faso
- Côte d'Ivoire
- Guinea
- Islamic Republic of Mauritania
- Mali
- Niger
- Senegal
- Togo

GHSC-PSM participated in the 8th Ouagadougou Partnership Annual Meeting in Cotonou, Republic of Benin in December. The Partnership, made up of nine Francophone countries since 2011 (see box), is based on two principles:

1. Better coordination between donors to optimize their support to countries.
2. Collaboration and cooperation at national and regional levels to avoid high rates of unmet family-planning needs. This meeting is a forum for GHSC-PSM, regional organizations like WAHO, other donors (UNFPA, Gates, etc...), national programs and USAID implementing partners to harmonize support to strengthen in-country supply chains, a key element to availability of commodities.

This year's theme is a testament of the desire to close the gap on unmet needs by developing strategies to access youth and adolescents and scaling up high impact interventions.

The main objective of the Partnership is to reach at least 2.2 million additional FP users in the nine countries by 2020. Over the three-day meeting, several high level panels and plenary sessions focused on the progress toward FP2020 goals; policies and strategies for youth inclusion; advocacy, access and

demand of services for youth and adolescents; breaking the barriers to high impact interventions; country commitments to FP procurement financing, and more. GHSC-PSM advocated for the commodity security agenda in a space where resources are limited, and countries continue to rely heavily on donors to ensure availability of FP commodities.

Contraceptive Security Tracking

In Q1, GHSC-PSM continued validating data across 43 countries for the 2019 Contraceptive Security (CS) Indicators Survey and prepared to launch an updated version of the online dashboard in FY 2020 that includes new FY 2019 data. In November, GHSC-PSM presented findings from the 2017 CS Survey and discussed new data being collected in the 2019 survey at the Global Health Supply Chain Summit in Johannesburg, South Africa. GHSC-PSM will be publishing a report on its website in the next quarter to highlight findings from the 2019 survey and any notable changes since 2017. The project is also working on developing a dissemination plan to ensure that stakeholders making strategic, policy, and programming decisions around family planning and reproductive health commodities are aware of how to access the survey findings in the various formats in which they will be made available.

Pathways to Increasing Access to Hormonal Intrauterine System

In November, GHSC-PSM was among a small group of organizations that participated in the levonorgestrel-releasing intrauterine system coordination meeting in Washington, DC. At this meeting, donors and hormonal intrauterine system (IUS) suppliers and participating organizations provided program updates on efforts to increase access to the hormonal IUS and better understand market potential. As part of ongoing coordination, GHSC-PSM is working closely with key stakeholders as a member of the Market Shaping Committee to better understand current and potential future market demand.

Publishing the Contraceptives and Condoms Report

GHSC-PSM submitted the first draft of the *FY 2019 Overview of Contraceptive and Condom Shipments report (C&C Report)* to USAID. Preliminary analysis of the data suggests an overall decrease in total delivered value in FY 2019 compared to FY 2018. The downward trend was driven by a 24 percent decrease in contraceptives overall with significant decreases in the value and quantity of two popular contraceptive methods, implants and injectables because of global production constraints and savings driven by sound decisions on strategic sourcing. The Africa region, which comprises 87 percent of delivered value worldwide, was one of the main drivers with a 34 percent decrease in implants and a 22 percent decrease in injectable contraceptives. The final version of the report is slated to be published in January 2020.

Enhancing Visibility of Data on Family-Planning Supplies

GHSC-PSM continued to support the launch of the Global Family Planning Visibility and Analytics Network (Global FP VAN), the reproductive-health community's pioneering undertaking to increase

supply-chain visibility and improve collaboration across stakeholders. The Global FP VAN platform provides access to upstream order and shipment data, and supply planning information.

In November, GHSC-PSM co-facilitated a workshop in Lagos, Nigeria with the Clinton Health Access Initiative (CHAI) for 15 participants. Staff from the Federal Ministry of Health (FMOH), UNFPA, USAID, CHAI, and GHSC-PSM in Nigeria, learned how to use the Global FP VAN platform to access upstream order and shipment data, request actions from donors, and to share their inventory and supply plan data with Global FP VAN member organizations. Following the training, the FMOH scaled the supply plan and inventory data with partners through Global FP VAN to include all 13 contraceptive products, including condoms.

From pilot to scale: Global FPVAN in Nigeria

When the pilot launched in early 2019, Nigeria was sharing data on just two FP/RH products with the Global FP VAN.

As of Q1, the country is sharing information on 13 contraceptive products.



Training participants in Nigeria on how to use the Global FP VAN platform. *Photo Credit: Sanumi Dawodu*

Collaborating Globally to Avert Stock-outs and Expiries

In Q1, GHSC-PSM's Procurement Planning and Monitoring Report (PPMR) team received and processed reports from 79 country programs. Based on data on stock imbalances in the PPMR, the project worked with the Coordinated Assistance for Reproductive Health Supplies, or CARhs, group to:

- Create eight new shipments for Angola and the Republics of Benin, Niger, Senegal, and Togo.
- Postpone or cancel nine shipments to Liberia and the Republics of Chad and Guinea to reduce or avoid overstocks and prevent commodity expiries.

- Expedite four shipments to Burkina Faso, DRC, Guinea and the Republic of Madagascar to prevent or mitigate stock-outs.
- Achieve five transfers among programs in Côte d'Ivoire, Madagascar, Mali, Togo and United Republic of Tanzania. As a result, programs were able to replenish their stocks and increase cross-programs collaboration.

Also, donors responded to 47 information requests and 20 issues highlighted by programs through PPMR submissions, providing in-country counterparts with valuable information on upcoming shipments and requests for assistance.

Commodity Sourcing and Procurement

Addressing the Constrained Global Supply of FP/RH Products

The global supply markets of injectables and implants remain constrained because of some supplier production holds and systemic gaps between global supply and demand.

GHSC-PSM's activities, outlined below, have focused on reducing the risk of supply on these two commodity categories, all while trying to re-stabilize the supply of oral contraceptives.

Asian Supplier Management Trip

In November, GHSC-PSM conducted supplier management visits to key FP/RH commodity suppliers in the Asia region including Pregna, Mylan and Missionpharma/PT Tungal. The visits allowed the project to maintain visibility into supplier priorities and operations, review performance and discuss strategic and operational work. Also, GHSC-PSM conducted introductory market intelligence visits with new suppliers in the region to assess their potential value as future FP/RH suppliers.

Commodities Procured for FP/RH Programs

Consumable kits for implants
Contraceptive implants
Cyclebeads®
Injectables
Intrauterine devices
Oral contraceptive pills

FP/RH FY 2020 Sourcing Strategy Refresh

In Q1, GHSC-PSM updated the FP/RH commodity sourcing strategy to provide a strategic roadmap for procurement and associated activities in the near (one-year) and medium terms (three-year) that:

- Supports USAID's FP/RH programmatic and market health objectives
- Mitigates supply risk and ensures continuous supply
- Delivers cost-savings and significant value for money

The updated sourcing strategy focuses on the most important aspects of the approach to improve user engagement: procurement history and analytics; global supply landscape; market health; and sourcing goals.

Webinar on Sourcing in a Supply-Constrained Environment

In October, GHSC-PSM conducted an internal webinar to share the updated FP/RH sourcing strategy with more than a dozen field and home office staff, highlighting the constrained supply environment and the potential impact on field offices in 2020. The webinar also outlined what field staff can do to help

mitigate these impacts, including working with partners to better understand demand and systematically sharing months of stock, average monthly consumption, and additional contextual insights when placing orders.

Participating in the Coordinated Supply Planning (CSP) Emergency Meeting

In December, the CSP group members (see box) along with guests from Jhpiego, the UK Department for International Development (DFID), Bill and Melinda Gates Foundation (BMGF), Children's Investment Fund Foundation (CIFF) met at UNFPA's office in New York City for a day-long discussion on demand-supply gaps in the implants and injectables markets. The discussion included donor perspectives on introduction and scale-up efforts for the injectable depot-medroxyprogesterone acetate subcutaneous (DMPA-SC) and implants, the DMPA-SC supply outlook and the implications for the outlook of the generic alternative, DMPA-intra-muscular (DMPA-IM). GHSC-PSM plays a critical role in CSP's commodity allocation efforts by providing data and insight to the decision-making process then, in turn, implementing the outputs through its procurement.

The implants supply outlook focused mainly on one rod implant NXT, which is in a global supply shortage, but also looked across all three implant products, the allocation and prioritization principles and decision-making processes for DMPA-SC and implant products during periods of supply constraint, and the communication going forward regarding supply outlooks. The meeting's main objective was met as the diverse group of organizations that attended offered their perspectives on the public market for implants and injectables. This will help inform a wider group of stakeholders to discuss future operations to address the above-mentioned supply constraints in a follow-up meeting held in January 2020.

CSP Group Members

- USAID
- United Nations Population Fund (UNFPA)
- GHSC-PSM
- Bill and Melinda Gates Foundation (BMGF)
- Reproductive Health Supplies Coalition (RHSC)
- John Snow, Inc. (JSI)
- PATH
- CHAI

Tenders: Finalized Evaluation for DMPA and Implant Kits

GHSC-PSM finished evaluating bids received in response to a June 2019 solicitation for long-acting injectables DMPA-SC and DMPA-IM, and a solicitation for consumable kits for implants. GHSC-PSM finalized proposal evaluations in December and awards will be made in Q2 FY 2020. Through these tenders and associated expected contracts, the project expects to maintain a strong supplier base to ensure a continuous and best-value supply of commodities.

Social Marketing: Landscaping and Strategy Draft

Given the lack of visibility into activities related to procurement for SMOs, the project, along with USAID, identified the need for a SMO engagement strategy. The data gap is most noticeable when analyzing global forecasts, global supply constraints, SMO contracts and transitions, and social marketing branding regulations. In Q1, the project drafted a strategy that aims to optimize the GHSC-PSM social marketing (SM) supply chain. The overall objectives of the strategy are to:

- Improve and maintain visibility into the SM landscape and activities of USAID-funded SMOs
- Ensure visibility informs demand and supply planning, and procurement activities
- Facilitate the identification of disconnects and opportunities for proactive actions

Specifically, the strategy focuses on two activities:

- Mapping the SMO landscape and then developing a database for information including contract dates, product portfolios, brands and regulations, and registrations. A continuously updated database would help optimize the SM supply by identifying gaps, opportunities and proactive actions to mitigate risks.
- Thoroughly examining supply-constrained products, focusing on DMPA-IM, DMPA-SC, Combination 3 and specialty condoms, as well as the unique SMO regulations and requirements for branded and generic alternatives. This will help identify SMO product needs early and ensure better demand and supply planning.

Direct communication, previously a challenge, has been established with key SMO points of contact. The project is in the early phase of the strategy, gathering strategic information and successfully confirming orders and other data needed for monthly projections, review of demand and supply and order reconciliation meetings. The strategy is enabling the development of informed fulfillment plans for SM orders in countries including the People's Democratic Republic of Bangladesh, Mali, Senegal and Uganda; advocacy with suppliers and relevant stakeholders from visibility into SM needs and stock data. Also, contract dates, previously considered a gray area, are now known and tracked for most project SMOs to mitigate supply-chain disruptions such as SMO extensions or follow-ons/transitions.

Fulfilling Country Orders and On-Time Performance

GHSC-PSM continued to successfully fulfill USAID-supported countries' orders in a timely manner, achieving 89 percent OTD and 86 percent OTIF for the quarter. This was achieved thanks to strong integration among supply-chain activities and functions such as: close monitoring of country-level supply plans, inventory levels, and other demand signals; a strong sourcing strategy fed by market intelligence; effective vendor management of the supplier base; close monitoring of the project's supply, central stock, and allocation of country orders (procurement and fulfillment functions), all while engaging and coordinating with the FP/RH community to ensure the project's performance was meeting countries' needs.

Country Support

Below, we illustrate the technical assistance that GHSC-PSM provided to strengthen in-country¹⁹ supply chains for FP/RH commodities this reporting period.

In October 2019, the project deployed three Logistics Management Advisors (LMA) to seven counties in **Liberia** to assist the MOH where reporting rates for FP/RH commodities were between 0 and 45 percent. These LMAs are focused on improving supply-chain practices, inventory

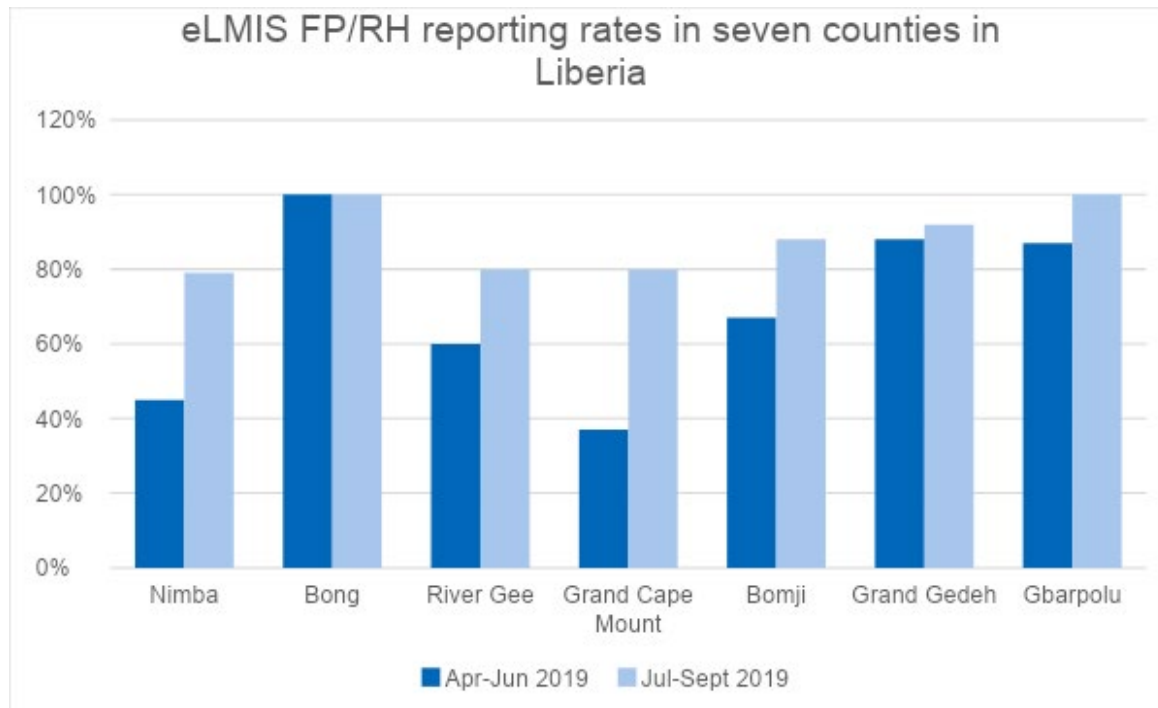
"Your two weeks spent with us in Nimba was very resourceful and we are optimistic that it has enabled you to have some insights into the challenges faced by the Supply Chain Unit and look forward to seeing more of such visit."

Ferris Kpokpa, Supply Chain Coordinator of Nimba county in Liberia

¹⁹ GHSC-PSM procured FP/RH commodities for the following countries: AFRICA: Angola, Benin, Burkina Faso, Burundi, DRC, Ethiopia, Ghana, Guinea, Liberia, Madagascar, Malawi, Mali, Mauritania, Mozambique, Niger, Nigeria, Rwanda, Senegal, Tanzania, Togo, Uganda, Zambia; LAC: Haiti; ASIA/NEAR EAST: Afghanistan, Bangladesh, Nepal, Yemen. The countries for which GHSC-PSM provides technical assistance with FP/RH funding are: AFRICA: Angola, Burkina Faso, Burundi, Ethiopia, Ghana, Guinea, Liberia, Madagascar, Malawi, Mali, Mozambique, Nigeria, Rwanda, South Sudan, Uganda, Zambia; LAC: Guatemala, Haiti; ASIA/NEAR EAST: Nepal, Pakistan

and data management and reporting from the clinics to the national level. The presence of the LMAs has bolstered the county health teams in developing and implementing last mile distribution plans and collecting proof of delivery as evidenced by data collected and analyzed in Q1 (See Exhibit 8). Proof of delivery was collected from 237 of out 239 service delivery points in those counties, considerably improving data visibility and information sharing of FP/RH products and essential medicines within the supply chain. The LMAs assisted the county health teams to align facilities providing FP/RH services in the eLMIS, leading to significantly improved data visibility from 37 percent to between 79 and 100 percent in the seven counties.

Exhibit 8. eLMIS Reporting Rates Before and After LMA Assistance



B4. Maternal, Newborn, and Child Health



In Q1 FY 2020, eight countries procured MNCH medicines and commodities and 16 countries received health supply-chain systems strengthening with MNCH support.



By the end of Q1, the project had procured more than **\$9.5 million in MNCH commodities over the life of the project.**



GHSC-PSM participated in several global collaboration and **technical events, including the Maternal Health Supplies Caucus Annual Meeting.**



The project continued to lead efforts to **improve the availability of quality oxytocin** in priority MNCH countries that have high maternal mortality.

Under the MNCH task order, GHSC-PSM supports efforts to end preventable child and maternal deaths by increasing access to quality-assured medicines and supplies for MNCH. In collaboration with USAID, the project provides global technical leadership on MNCH commodities and ensures that supply-chain management considerations are included in global dialogue and initiatives. During this reporting period, GHSC-PSM focused on three key areas: (1) improving the availability of quality oxytocin, (2) ensuring the availability of MNCH medicines and commodities, and (3) providing global technical leadership.

Improving the Availability of Quality Oxytocin

Oxytocin, the recommended product for preventing and treating postpartum hemorrhage, is a heat-sensitive uterotonic that requires transport and storage under refrigerated conditions, i.e., cold chain. Storing oxytocin at room temperature or higher can result in product degradation. Keeping oxytocin within a proper temperature range is a common challenge in many countries where cold chain infrastructure is limited. GHSC-PSM supports country-level advocacy efforts for improved storage and management of oxytocin and provides ongoing technical assistance to improve temperature monitoring and storage practices.

In Q1 FY 2020, GHSC-PSM began a new oxytocin quality-related activity in **Mozambique**. The project is assessing current oxytocin procurement and management practices to understand the potential impact of long storage durations at ambient temperatures on product quality using modelled data. The project anticipates concluding this activity in FY 2020, at which time GHSC-PSM will present results to relevant in-country stakeholders.

Ensuring the Availability of Quality-assured MNCH Commodities within the Public and Private Sectors

Improving the Availability of Priority Newborn and Child Health Commodities in Mali

Increasing global availability of amoxicillin dispersible tablets (DT), co-packed oral rehydration salts (ORS) and zinc, and appropriate neonatal resuscitation equipment has been identified as a crucial step in reducing preventable child and newborn deaths. However, uptake and use of amoxicillin DT and co-packed ORS and zinc have been limited.

In Mali, GHSC-PSM assessed factors that affect the availability of these commodities and in Q1 FY 2020 shared the findings and recommendations with key government and partner stakeholders. Just four days after receiving GHSC-PSM's recommendations, the government of Mali adopted government protocols for pneumonia treatment that list amoxicillin DT as the preferred treatment. This policy change should serve to catalyze transition to the dispersible formulation in the public health system. Le Comité Technique de Coordination et de Suivi de la Gestion des Médicaments Essentiels (CTCSGME), a GHSC-PSM-supported and government-led body that coordinates the different supply chain agencies in the Malian government, plans to meet in the coming months to agree on a plan that responds to **the opportunities identified in the assessment**.



Increasing access to affordable, easy-to-administer newborn and child health commodities in priority countries is key to reducing preventable child deaths. *Photo credit: Bobby Neptune/GHSC-PSM*

Study on MNCH Commodity Quality Through Zambian Wholesalers

In Q1, GHSC-PSM completed a report on the ability of domestic wholesalers to ensure quality for MNCH commodities in Zambia in support of USAID's Journey to Self-Reliance initiative. The report considers three facets of quality: (1) quality in procurement, (2) storage and (3) distribution. The assessment found that domestic wholesalers have established quality systems and can address the components of quality to varying degrees. Some international wholesalers are transparent and can verify quality through internal and external audits, while others may rely on external regulatory bodies for quality verification. The report also explores opportunities for continuing to improve the quality of MNCH products sourced by private wholesalers in Zambia. Once finalized, the report will be shared with the Zambian MOH, through other networks including the Child Health Task Force and Reproductive Health Supplies Coalition, and on the GHSC-PSM website and other public-facing channels.

Improving Availability of Information on MNCH Commodities

The End Use Verification (EUV) survey collects data on commodity availability, storage conditions, and factors that affect commodity availability at service delivery points. Typically, the EUV is implemented in countries where national LMISs are either unavailable or do not include consistent data on commodities. Originally, the EUV was developed to collect data on malaria commodities. However, over the past two years, GHSC-PSM has expanded the EUV to include MNCH and FP/RH commodities to improve availability of these products.

In Q1, several GHSC-PSM field offices collected and analyzed data and submitted EUV reports.

- **Liberia** conducted EUV data collection in November 2019.
- **Ethiopia** completed data validation, cleaning and analysis of its August 2019 EUV survey, with submission of a final report pending.
- The **Mali** EUV team received in-person analysis training for its September 2019 survey, with a final report pending.
- The **Zambia** team received virtual training on data extraction from SurveyCTO—a cloud-based survey tool—for its August 2019 EUV survey; the final report is also pending.
- Final EUV reports for **Ghana** (in September 2019) and **Nigeria** (in August 2019) were submitted to USAID. Nigeria plans to conduct the next quarter's EUV in January 2020.

Because data on MNCH commodities are rarely managed in national LMISs, these EUV surveys continue to yield important insights into the availability of critical lifesaving MNCH commodities in these countries.

Providing Global Technical Leadership and Coordination in MNCH

MNCH Forecasting and Supply Planning Technical Leadership

In 2014, a consortium of technical reproductive, maternal, newborn and child health (RMNCH) and supply chain experts, under the UN Commission on Life-Saving Commodities for Women and Children, developed RMNCH quantification guidance for supply chain managers in low- and middle-income countries (LMICs). The guidance details key requirements, considerations and algorithms for LMICs in quantifying RMNCH commodities. The guidance was updated in 2016 and is now under technical revision. In Q1 FY 2020, GHSC-PSM's forecasting and supply planning (FASP) team conducted a detailed review of the 2016 guidance and provided feedback to USAID's Medicines, Technologies, and Pharmaceutical Services (MTaPS) program, the implementing partner leading the revision. GHSC-PSM will continue to provide FASP support and technical feedback as the document is prepared for release in 2020.

Maternal Health Supplies Caucus

GHSC-PSM continues to provide leadership and support to the Reproductive Health Supplies Coalition's Maternal Health Supplies Caucus. In October 2019, GHSC-PSM presented findings from a

End-use Verification for MNCH Commodities

In Q1, GHSC-PSM supported:

- Collecting EUV data in **Liberia**
- Analyzing EUV data (through training) in **Ethiopia, Mali and Zambia**
- Finalizing EUV reports in **Ghana and Nigeria**

recent oxytocin quality-related activity that was carried out in **Ghana**. Findings and discussions focused on changing the tendering process, improving cold chain storage capacity, and aligning insurance reimbursement prices.

Country Support

GHSC-PSM provided supply-chain systems strengthening for MNCH commodities in 16 countries²⁰ and procured MNCH commodities for 8 countries²¹ in Q1.

Federal Democratic Republic of Nepal's LMIS Goes Digital

The national health system in **Nepal** was recently decentralized, enabling provincial governments to make decisions that are more representative of their local health needs. Supporting this shift, GHSC-PSM is assisting the Government of Nepal's transition from a paper-based LMIS to a computer-based/electronic system, or eLMIS. This will help improve forecasting and quantification of medicines and other health commodities, especially at provincial-, district-, and local-level governments and health facilities.

Since 2018, GHSC-PSM has worked with Nepal's provinces to collect paper-based LMIS reports from more than 5,000 health facilities and enter them into the new eLMIS. In Q1 FY 2020, the project trained district-level staff on eLMIS, enabling them to take ownership of their data and make informed forecasting and quantification decisions. Through GHSC-PSM's work to have MNCH commodities added to the National List of Essential Medicines and the eLMIS, visibility into stock availability and consumption trends has increased, enabling more informed procurement decisions on MNCH commodities and reliable supply at these levels.

Throughout FY 2019 and in Q1 FY 2020, GHSC-PSM worked with Province 5 on MNCH commodity quantification, and in Q1 started work with Provinces 3 and 4. GHSC-PSM also trained local stakeholders in Province 5 on eLMIS and quantification, enabling staff to review and track stock levels and shipments independently. The project has planned similar capacity-building activities for the remaining provinces in future quarters of FY 2020.

²⁰ The countries for which GHSC-PSM provides technical assistance with MNCH funding are: AFRICA: Burkina Faso, Ethiopia, Ghana, Guinea, Liberia, Madagascar, Malawi, Mali, Mozambique, Nigeria, Rwanda, Zambia; LAC: Guatemala, Haiti; ASIA: Nepal, Pakistan

²¹ Countries that received procurement support for MNCH: DRC, Ghana, Haiti, Liberia, Mali, Mozambique, Rwanda, Zambia.

B5. Other Emerging Health Threats



In Q1, GHSC-PSM conducted technical assistance activities in El Salvador to build the capacity of MOH supply-chain teams to **prepare for future outbreaks of infectious diseases** such as Zika.

GHSC-PSM is working with Ministries of Health across Latin America and the Caribbean to provide critical Zika diagnostic and prevention supplies. GHSC-PSM is also building resilient supply chains that are equipped to face the challenges of emerging public health threats when they arise.

Supporting the Zika Response

GHSC-PSM procures and delivers commodities to help pregnant women throughout Latin America and the Caribbean avoid contracting Zika, an arbovirus and sexually transmitted infection that can cause severe birth defects when women are infected during pregnancy. The project is equipping MOHs with male condoms and mosquito repellent, and providing them with technical assistance, improving their capacity to resist Zika's spread. Throughout FY 2020, the project will be winding down Zika activities and in Q1 began processing final orders in Ecuador and El Salvador for condoms and repellent that were procured to stop the spread of Zika.

Emergency Supply-Chain Preparedness

GHSC-PSM has worked with seven countries²² in Latin America and the Caribbean to strengthen their emergency supply chain (ESC) capabilities.

In November 2019, GHSC-PSM, at the request of USAID, presented on its Zika Emergency Supply Chain work in Latin America and the Caribbean to introduce the Zika Emergency Supply Chain Playbook for USAID colleagues who are not directly involved, but might be interested in the work. The presentation was interactive and simulation-based to effectively demonstrate what occurs during the in-country ESC workshops. It provided valuable insights to attendees on the process and benefits of this work.

Caribbean

This quarter, GHSC-PSM began discussions with four Caribbean countries on their interest in ESC technical assistance. Pending formal agreements, the work is expected to begin in Q3 FY 2020.

Dominican Republic

After initial discussions with key stakeholders in the USAID/Dominican Republic Mission and the MOH, GHSC-PSM took the lead in developing SOPs and manuals for the country's ESC program operations. This will include a comprehensive management checklist and key performance indicators to monitor the supply chain's preparedness for emergency response. These materials will support a forthcoming presidential decree to officially establish a body solely responsible for developing and managing an ESC

²² In Q1 FY 2020, GHSC-PSM wrapped up its ESC support to the Dominican Republic and El Salvador. The project is providing ongoing support to Ecuador, Jamaica, Peru, St. Lucia, and St. Vincent and the Grenadines, and will begin ESC work in partnership with the Organisation of Eastern Caribbean States in Q2 FY 2020.

strategy. This action by the Dominican government will support sustainable ESC work, ensuring its continuity even with changes in political administration. GHSC-PSM will work with local partners to carry out this work and ensure that technical capacity is available in the country after the GHSC-PSM activities conclude.

El Salvador

A five-week ESC workshop was conducted by GHSC-PSM and partners in El Salvador in November and December 2019. Throughout the workshop, participants developed and strengthened protocols and plans for how the Salvadoran government will handle ESC operations for Zika and other needs, including the ongoing dengue outbreak.

Republic of Peru and Ecuador

ESC activities are scheduled to kick off in Peru and Ecuador early in 2020. GHSC-PSM is working with the countries' MOHs to define the scope and agree on specific implementation timelines.



The *Emergency Supply Chain Playbook* has become a useful tool as countries ready their health supply chains in facing emerging threats like Zika, Ebola or dengue.

PROGRESS BY OBJECTIVE

CI. Global Commodity Procurement and Logistics



Procured \$258 million in health commodities in Q1. Procurement values have reached nearly **\$2 billion for the life of the project**.



Delivered 1,080 line-item orders this quarter, with a value of more than **\$170.5 million**.



Delivered 93 percent of line items on-time, based on the defined on-time window (within the period 14 days before or seven days after the agreed delivery date). **Delivered 86 percent on-time, in-full**.

CIa. Global Supply Chain: Focused on Safe, Reliable, Continuous Supply

GHSC-PSM's procurement strategy seeks to continuously identify opportunities to pursue three main objectives:

1. Reduce response/cycle times, lead times, and transaction costs
2. Increase on-time deliveries
3. Balance price, delivery and quality (i.e., achieve best value)

In Q1, the project continued to maintain strong OTD and OTIF while advancing market strategies and managing overall implementation.

The Global Supply Chain at a Glance

- **83 countries** served
- **4,119 products** in the catalog provided by **325 suppliers**
- Five international freight forwarders responsible for **6,972 shipping lanes**

More Health Commodities Through Market Dynamics, Strategic Sourcing and Supplier Management

Data-Driven Order Processing and Sourcing Strategies for Malaria Commodities

Q1 marked an inflection point for the task order 2 (TO2), ushering in significant changes in data use, order processing, sourcing strategies, and market-shaping exercises. With the FY 2020 TO2 Call for Orders, the bulk of which were received in Q1 FY 2020, GHSC-PSM implemented a suite of new, data-driven strategies, processes, tools and communications protocols designed to deliver better overall value to recipients, support market objectives and drive supply chain efficiencies and responsiveness.

Notable process changes include:

- **Supplier-specific forecasts** for products under allocation methodologies.
- **Data-driven and systematic order validation** using forecast data, pipeline data and supply plan reviews.
- **Staggered delivery schedules** based on potential freight savings, stock-on-hand and consumption data.
- **Order assignment under approved allocation methodologies** using the Order Assignment System (OASys) to automate pre-defined business rules and decision-making, based on pre-approved sourcing strategies.
- **Ocean as mode of shipment** for all product categories, based on cost-savings and feasibility.

Development of an Innovative Service and Maintenance Model to Improve Visibility and Accountability Across the GeneXpert Network in Nigeria

In Nigeria, GHSC-PSM made significant gains in QI by working with a point-of-care provider of HIV, viral-load, EID and TB testing services and supplies. An innovative service-level agreement was negotiated and signed to bring visibility and accountability to servicing and maintaining the supplier's network in Nigeria. This is the first time that the global community has been able to negotiate such an agreement across partners. Other international donors, partners and the supplier are using the GHSC-PSM contract to pursue a surcharge-based model in other countries.

Revised ARV Sourcing Strategy to Improve Value

In Q1, the project finalized a new ARV sourcing event focused on assessing product quality and supply risk (focused on supply risk of the key starting materials and active pharmaceutical ingredients (APIs)), supplier performance, registration portfolio, price, and product availability. GHSC-PSM also adopted a revised allocation strategy for all non-TLD ARVs that involves a cascading allocation methodology by country and supplier. This strategy streamlines the procurement and award process, creates a healthier environment for suppliers to succeed, and helps minimize costs by bundling products with late-stage APIs. The sourcing event also analyzed proposed pricing against key APIs starting material pricing to ensure best value for USAID. A key driver of the revised strategy was to enable the stable and predictable allocation by supplier, informed by the security of their APIs and country registrations, so they could efficiently manufacture and procure key raw materials to better meet demand. The project completed 11 IDIQ modifications based on this new strategy to cover FY 2020. One new ARV supplier was onboarded but is still pending USFDA approval for supply eligibility.

The project continued implementing a quarterly TLD procurement strategy. This strategy has delivered tremendous benefits to PEPFAR-supported countries transitioning to TLD as the preferred first-line ARV. GHSC-PSM now has five registered TLD suppliers with a combined capacity exceeding 5.5 million

90-count packs monthly. This has enabled GHSC-PSM to fast-track deliveries, especially for countries working to accelerate their MMD, such as Côte d'Ivoire, Mozambique and Nigeria.

Lastly, in the Q1 TLD request for quotations, GHSC-PSM sent a strong market signal for suppliers to work to extend the shelf-life of TLD to 36 months. GHSC-PSM now has clear and aggressive timelines for suppliers to seek this shelf-life extension and will work with suppliers to further accelerate the timelines where possible. Longer product shelf-life will increase flexibility of supply across PEPFAR programs.

Manufacturer Meetings to Enhance Market Understanding and Supplier Relationships

In addition to GHSC-PSM's continued implementation of a supplier performance framework that includes KPIs and quarterly business reviews with major suppliers, focused on achieving continuous improvement and best value, project staff met with suppliers at key events and at their facilities as highlighted below:

- **2019 Annual ARV Buyer Seller Summit.** GHSC-PSM participated in the 4th Annual ARV Buyer Seller Summit held in Washington, DC, in November. The project presented in multiple plenary sessions, providing a summary of global supply chain activities and priorities, an updated procurement forecast, and a summary of project efforts to increase point-of-care data visibility. GHSC-PSM and USAID, along with representatives from GHSC-QA and OGAC, also held numerous meetings with individual manufacturers to discuss critical topics, such as new product approvals and production facility regulatory updates.
- **CPhI Europe and Malaria Commodity Supplier Visits.** In November, GHSC-PSM attended the CPhI Worldwide conference in Frankfurt, Germany. The event brought together stakeholders throughout the pharmaceutical supply chain, including finished-product manufacturers who supply to GHSC-PSM as well as API manufacturers who supply their finished product to suppliers. The event provided an opportunity to meet with multiple suppliers in a short period and to leverage learnings from subsequent meetings. GHSC-PSM also toured three supplier (two key existing, one potential) facilities in India and Switzerland to better understand their manufacturing and logistical operations, discuss current and future business, and assess viability of potential vendor-stored inventory arrangements. The meetings served to strengthen relationships with suppliers and better establish expectations moving forward, while also increasing GHSC-PSM knowledge of supplier operations and constraints.
- **Biweekly Business Review and OTD Review Meetings with Key Laboratory Supply Chain Partners.** GHSC-PSM formally launched bimonthly meetings with key viral-load and laboratory-consumable suppliers to review orders and operational procedures and performance, including on-time delivery and country registration issues. During the meetings, the project reviews data from the order-monitoring tool that was developed to communicate and monitor goods availability performance for lab shipments across PEPFAR countries

Quarterly TLD Results in Significant Savings

In Q1 alone, GHSC-PSM obtained a weighted average price reduction of \$0.60 per 90-count pack from the previous quarter (–2.5 percent), representing a cost-savings of \$4.1 million for the latest RDC restocking order. Since enacting this strategy, GHSC-PSM has realized a 12.5 percent price drop for TLD, with the current price for a TLD 90-count bottle down to \$16.50.

- **FP/RH Commodity Supplier Visits.** In November, GHSC-PSM conducted supplier management visits to key FP/RH suppliers in Asia to maintain strong visibility into supplier priorities and operations, review performance, and discuss strategic and operational work. GHSC-PSM also conducted introductory, market intelligence visits with additional suppliers to assess their potential value as future FP/RH suppliers.
- **Pharmaceutical Contract Consolidation.** In December, GHSC-PSM consolidated all contracts with a major pharmaceutical supplier under one universal Basic Ordering Agreement (BOA), thus ensuring a critical lever in generating more value by changing the contractual mechanism and its governance conditions. The consolidated BOA will enable closer collaboration and contract governance between GHSC-PSM and the supplier across task orders and commodity groups. Implementing this best practice will be leveraged as a catalyst in determining negotiation power, incrementally enhancing supplier performance, and optimizing cost of doing business.

South Africa Regional Distribution Center Visits

During Q1, GHSC-PSM hosted visits to the project's South Africa RDC by the Bureau Environmental Officer (BEO) of USAID Global Health and USAID and GHSC-PSM staff who were in-country for the Global Health Supply Chain Summit. In touring the facilities, these visitors learned about the RDC bond store's procedures for export products. The visit was a success, as exemplified by the BEO's comment, "you got this down." GHSCS participants also visited the highly automated fine-pick, warehouse where products for the South African market are stored, including VMMC kits for GHSC-PSM.

Data Planning Process for Critical Products

In Q1, the project continued to work closely with USAID in transitioning new HIV pediatric medicines. This transition presents new challenges because of the limited supply base, different rates of adoption between countries, varying bottle sizes of the same product, various possible pharmaceutical regimens, and multiple presentations with up to four APIs per product. To visualize, monitor and plan for different transition scenarios, the project rolled out a new process for triangulating data from ARTMIS on actual orders with information collected from country supply plans. This supply planning data include actual and forecasted consumption/dispensing/issues, shipments and inventory on hand. The ability to visualize the status of individual products by SKU or those aggregated from different package sizes will make it easier to prioritize those orders that need to be shipped with minimal delay when the new regimens are introduced and those that can wait.

Insights gleaned will also assist in determining which countries may require more technical support during pediatric ARV transitions. While this procedure is being piloted with ARV pediatric products, it is applicable to transitions for use with other strategic products.

Quality Assurance (QA)

QA for HIV, FP/RH and MNCH Commodities

In Q1, GHSC-PSM continued to focus on the two key 2020 workplan activities:

- I. Enhance/integrate the incident management system (AssurX) to capture all incidents including those that occur during QA/QC testing and support supplier evaluation.

2. Review QA-related work instructions and SOPs for streamlining and optimization.

The project also continues to collaborate with GHSC-QA to maintain communication flow, identify areas of mutual concern and solutions, and ensure QA requirements are incorporated into GHSC-PSM systems as applicable.

In Q1 FY 2020, GHSC-PSM QA conducted a quality awareness training for GSC staff with a focus on incident reporting and adherence to procedures while reinforcing that quality is everyone's responsibility. Also, GHSC-PSM QA, in collaboration with GHSC-QA, streamlined QA documentation requirements for procuring laboratory supplies to reduce cycle time, a key FY2020 strategic goal.

QA for Malaria Commodities

In Q1 FY 2020, the Quality Assurance Management System (QAMS) was incorporated into the ARTMIS platform. PMI staff were given access to the system and trained in its use.

GHSC-PSM teams worked in collaboration with PMI to support the ocean shipment strategy as the default mode for shipping commodities by assessing the risk associated with performing QC testing concurrent with shipments. This activity supports the project's goal of reducing transaction costs.

GHSC-PSM began to hold monthly meetings on QA/QC topics for malaria products with Global Fund's headquarters' QA team. Topics covered include discussions of product specifications, SOPs, test methods out of specification test results, and conferences and learning opportunities. The impetus of these meetings is GHSC-PSM QA's recognition that PMI and the Global Fund have the same manufacturers, are under the same WHO guidance, and experience similar challenges and therefore would benefit from discussions and feedback.

QA Cost-Savings

Continued implementation of GHSC-PSM's risk-based reduced testing protocol led to **\$18,614 in savings** in Q1 FY 2020.

Deliver/Return

Haiti Unrest

In Q1 FY 2020, Haiti suffered massive fuel shortages and a civil unrest, delayed flight schedules and a countrywide standstill and closure of many government facilities, including customs, which negatively affected clearance and duty waiver processes. At times, the GHSC-PSM's Haiti office was forced to close for consecutive days because of safety concerns.

This situation had a huge impact on GHSC-PSM deliveries to Haiti, with 19 air and six ocean shipments held at the airport and ocean port while customs offices were closed. When the cargo was cleared, the third-party logistics (3PL) providers could not complete delivery, as armed gangs blocked the route to the warehouse. The field office and 3PLs communicated and coordinated constantly in a dedicated effort to deliver commodities while dealing with this complex situation. December was a more stable month, and the duty waiver and clearance processes returned to normal.

Vietnam TLD

In Q1, four orders of TLD valued at US\$750,000 were delivered to Vietnam within a record-breaking 64-day timeframe, from production and waiver processing through delivery scheduled for the first week in December 2019. Two flights serviced two locations containing a total of 64 pallets weighing 12,848

kgs. This was an incredible effort by the manufacturer and several GHSC-PSM teams in the Netherlands, United States, and Vietnam. The project communicated the urgency to the 3PL provider, who then tentatively booked these orders with the airline to reserve space. Close management of the waiver over the eight-week period meant a quick turnaround when the duty waiver was received. Once production was complete and the green light received from the field office, the 3PL shipped the TLD orders to Vietnam, which received their orders as planned.

Nigeria TLD

In October the Nigeria field office notified the project of an urgent need for TLD as a result of rising consumption rates as the country ramped up its transition to this drug. The project worked to advance the goods availability date (GAD) on an upcoming order to ship sooner with a delivery target of the first week in November. Previously scheduled maintenance caused temporary warehouse closures in Abuja and Lagos and prevented the project from obtaining the product sooner.

GHSC-PSM delivered almost 600,000 bottles by air in just four weeks. In total, 383 pallets were shipped through 25 shipments. The estimated value of the goods delivered was \$9,364,968.84. No damage was reported during this complicated operation, which used multiple warehouses and multiple airports to meet the required delivery date.

Decentralized Procurement

GHSC-PSM uses decentralized procurement (DCP)—management of procurements such as goods and services through local suppliers—as a targeted strategy to bring procurement closer to beneficiaries, thereby lowering transaction costs and reducing lead times, increasing on-time delivery and achieving best value.

In Q1 FY2020 the Zambia field office began implementing DCP for essential medicines, leveraging the training they received in June 2019 on using HQ-negotiated LTAs.

Global Standards and Traceability

In January 2018, GHSC-PSM introduced a new procurement requirement for suppliers of pharmaceuticals, medical devices, laboratory reagents, and sterile kits to progressively identify and label their commodities in accordance with GS1 global standards for health care. The requirement also includes exchange of product master data through the GS1 GDSN. To provide suppliers with the time needed to make necessary investments for compliance, the requirement has a phased implementation approach. The first phase was mandated with a December 30, 2018 deadline. In Phase 1, suppliers needed to submit the GLNs, identifying their business entities, and GTINs, identifying their items and various levels of packaging. They also needed to label the tertiary pack trade item with a barcode encoded with the GTIN, batch/lot, and expiration date. In Phase 2, suppliers needed to submit master data for their products through the GDSN by December 30, 2019.

The Benefits of DCP

On-time delivery can be easier to achieve when procuring from local sources rather than international markets, which are subject to the variability of importation approvals.

Delivery lead times may be shorter compared to international sourcing.

Reduced cycle time as procurement (supply) and demand are in the same hands (and time zone) of the field office.

As of the end of Q1 FY2020, GHSC-PSM had received GLNs for 53 percent of in-scope²³ manufacturers; GTINs for 60 percent of in-scope trade items; and confirmation that 54 percent of all in-scope items comply with the tertiary pack labeling requirement. Overall, approximately 41 percent of in-scope commodities were Phase I compliant at the end of Q1 FY 2020, marking a 12-percentage point increase in Phase I compliance from Q4 FY 2019.

Also, by the end of Q1 FY 2020, 56 percent of GHSC-PSM's in-scope suppliers were contracted with a GDSN data pool, and GHSC-PSM is synchronizing master data for 5.6 percent of trade items across several health areas, including HIV/AIDS pharmaceuticals, laboratory equipment and reagents, VMMC kits, malaria pharmaceuticals, contraceptive implants, IUDs and essential medicines. The number of suppliers with a signed GDSN contract is a strong indicator that compliance will grow significantly in Q2 as suppliers work to load and synchronize their product master data with GHSC-PSM.

Exhibit 9. Phases I and 2 Compliance

Commodity Subcategory	Phase I Compliance (December 2018)	Phase 2 Compliance (December 2019)
HIV		
Female Condoms	100.0%	0.0%
HIV/AIDS Pharmaceuticals	90.2%	11.6%
Laboratory Consumables	5.6%	0.0%
Laboratory Equipment	28.6%	28.6%
Laboratory Reagents	29.1%	4.9%
Male Condoms	77.9%	0.0%
VMMC Kits	28.6%	14.3%
VMMC Supplies	0.0%	0.0%
Malaria		
Malaria Pharmaceuticals	44.7%	8.7%

²³ In-scope commodities are defined as pharmaceuticals, medical devices, sterile kits and laboratory reagents that are currently listed as saleable in the ARTMIS product catalog and have been purchased before. As of December 31, 2019, a total of 883 trade items in the product catalog are considered in scope for this requirement. Note that the number of items considered in scope, and therefore compliance rates, will fluctuate quarter to quarter because of changes in active contracts and introduction of new suppliers and trade items.

Malaria RDTs	100.0%	0.0%
FP/RH		
Contraceptive Implants	100.0%	44.4%
Injectable Contraceptives	100.0%	0.0%
Intrauterine Devices	100.0%	100.0%
Oral Contraceptives	88.9%	0.0%
Cross-Cutting		
Essential Medicines	10.3%	2.8%
Medical Supplies	3.6%	0.0%
Other Global Health Commodities	0.0%	0.0%
Others	0.0%	0.0%
Grand Total	41.1%	5.8%

GHSC-PSM has also confirmed compliance with future secondary pack labeling requirements for 27 percent of in-scope trade items in advance of the upcoming Phase 3 deadline in June 2020.

CIb. Project Performance

In this section, GHSC-PSM summarizes findings on key indicators of global supply-chain performance. More detail on these and other indicators is provided in Annex A.

Timeliness of Delivery

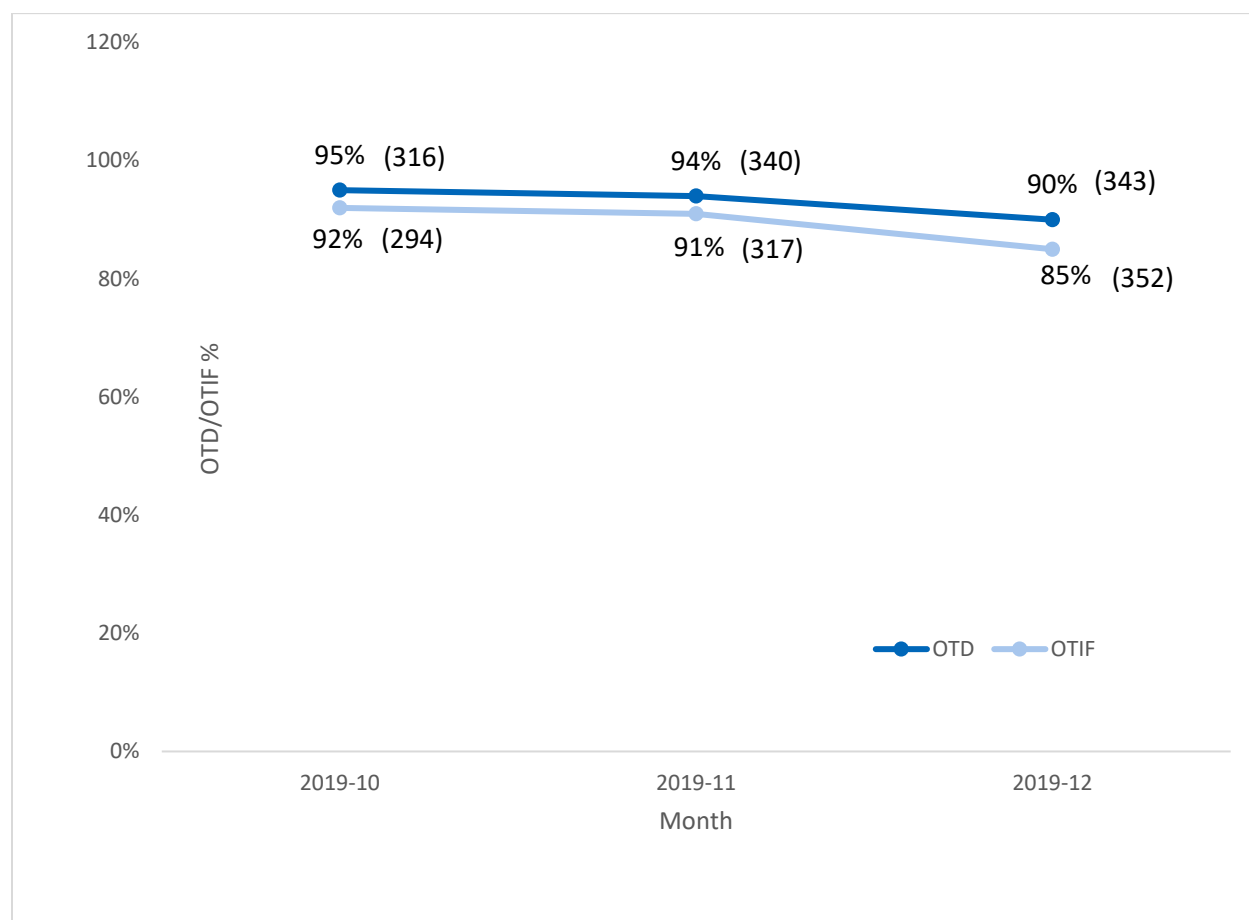
GHSC-PSM measures on-time delivery in two ways:

1. OTD is the number of on-time deliveries as a percentage of *expected* deliveries in the period.
2. The OTIF rate reflects the number of on-time deliveries as a percentage of all *actual* deliveries in the period.

OTD is a more accurate reflection of recent performance, while OTIF is a lagging indicator, as late orders due in prior periods get delivered.

In Q1, GHSC-PSM continued to drive efficiencies in global supply-chain processes, while sustaining the timeliness of our deliveries. We averaged 93 percent OTD, and 86 percent OTIF, with a backlog of 0.7 percent of annual volume.

Exhibit 10. OTD and OTIF Over the Quarter



C2. Systems Strengthening Technical Assistance



In Q1 FY 2020, GHSC-PSM **assisted 45 countries** with health supply-chain systems strengthening and **supported 33 country or regional offices**.



GHSC-PSM provided **technical feedback on 139 supply plans** to strengthen national supply planning capabilities.



GHSC-PSM **shared expertise, knowledge and lessons learned** from interventions that work. The Guinean MOH traveled to the Republic of Mali to learn about installing prefabricated warehouses. In Niger, the project began piloting the Call Center, an approach first deployed in South Sudan.

GHSC-PSM's strategic goal is for every country to have a locally led health supply chain that is integrated, optimized, accountable, agile, lean and able to sustainably supply quality products to all citizens. To support this, headquarters-based health supply-chain systems-strengthening technical specialists work with field teams to define systems-strengthening strategies that are appropriate to the local context and that can be realistically achieved. Emphasis is placed on automated data capture and real-time end-to-end data visibility, pharmaceutical-grade infrastructure, and efficient distribution across countries. Each supply chain should be managed by supply chain professionals dedicated to quality improvement, and, where possible, strategies developed to outsource functions to accountable private-sector providers.

Different health areas fund supply-chain systems-strengthening assistance in each country. The costs of technical assistance and supply-chain systems-strengthening activities are proportionally shared across health task orders (HIV, malaria, FP/RH and MNCH). Cost-sharing formulas are reviewed annually to verify that each health area's share of the total cost for technical assistance remains equitable. Systems-strengthening efforts associated with health area-specific activities (e.g., LLIN distribution for malaria or viral-load scale-up for HIV) are supported entirely by the relevant health area.

C2a. Activities and Achievements

The project strengthens health supply chain systems by bringing tailored assistance to yield important achievements and results. Following are highlights of where and how GHSC-PSM applied health supply-chain systems-strengthening approaches in specific countries this quarter.

Warehousing and Distribution

GHSC-PSM continues to improve country warehousing and distribution systems through 22 field offices. Our approaches seek to improve data-driven decision-making across the supply chain, optimize in-country warehouse networks, and increase efficiencies in warehousing, distribution and waste management operations.

From the global level, GHSC-PSM supports warehousing, distribution and logistics with a few key activities:

- **Activity-Based Costing.** GHSC-PSM provided the Joint Medical Store in **Uganda** with important tools to track productivity, labor and transportation costs for medicines and other health commodities. The tools and training bring Uganda closer to becoming a lean warehouse operator and understanding true cost associated with warehousing and distribution.
- **Support for Contracting Best Practices.** In Q1, the project assisted **Nigeria** in reviewing and developing their 3PL warehouse services agreement; provided the Republic of **Indonesia** with warehouse rental specifications for a request for proposals for an outside storage contract; and supported **Haiti** in developing new guidelines for a cold chain 3PL contract, and more.
- **Unmanned Aerial Vehicles.** GHSC-PSM procured and onboarded a new drone services provider in **Malawi** and obtained approvals for long-range medical delivery flights. The new subcontractor has already completed 126 flights carrying 24 patient viral-load, TB and EID samples; 10 test results; and 14 other items, including family-planning product order forms, pharmacy reports, and malaria medicines.
- **Temperature and Data Logging.** In Q1, the project provided temperature and data loggers to accompany international health commodity shipments from Asia and Europe to destinations

such as **Burkina Faso, Ghana, and Zimbabwe**. Ultimately, the data collected will be analyzed to improve international and local shipment modalities and will supplement an article to be published pending data-sharing agreements with the appropriate government ministries.

- **Transportation Information Tool (TransIT®)**. Along with USAID, GHSC-PSM staff met with the Digital Impact Alliance (DIAL) to begin discussions and planning around making TransIT, an electronic tool that transmits real-time proof of delivery to health facilities, an open source solution. Further discussions around governance planning and product sustainability will continue in Q2. In Q1, **eSwatini** became the latest GHSC-PSM country to adapt and deploy the tool successfully. The tool is also used in Angola, Cameroon, Mozambique and Zimbabwe.

At the country level, GHSC-PSM supported warehousing, distribution and logistics in a variety of ways, depending on the specific needs of the location.

Waste management is a critical component of the supply chain, ensuring medicines and other hazardous health commodities are disposed of properly, and freeing up space for viable supplies. In Q1, GHSC-PSM assisted **eSwatini's** CMS in disposing expired and damaged medical supplies that had been accumulating since 2013. In the absence of an appropriate disposal site, CMS was exploring the possibility of sending the waste to South Africa for disposal at an estimated cost of \$26,000 USD. GHSC-PSM searched for alternative methods and found a recycling company a few hundred meters away from CMS that could accommodate the waste. To date, CMS has sent more than 2,000 kg of expired commodities at no cost to CMS. The project continues work with CMS to ensure products are stored in the appropriate conditions and inventory is managed to prevent damage and expiry. In addition, GHSC-PSM continues to build staff CMS capacity in forecasting and supply planning to promote the efficient utilization of available resources and curb wastage.

Waste Management Saves Space and Money in eSwatini

To date, CMS has disposed of over 2,000 kg, or **more than two tons**, of expired commodities at **no cost** to CMS.

In **Lesotho**, GHSC-PSM optimized delivery routes by organizing commodities into categories during the requisition processing phase. For example, commodities in category A are centrally procured with donor support, and include medicines and other health products for HIV, TB, FP, nutrition, labs and opportunistic infections. Category B products are budgeted for and procured by individual districts or facilities. Lesotho's central medical store, the National Drug Service Organization (NDSO), can procure category B products and sell them to private facilities, unlike category A products that are donor funded and cannot be sold. Previously, the NDSO was delivering laboratory commodities, such as viral-load tests, separate to other category A products. This was negatively impacting patients who want to pick up ARV medication and take a viral-load test during the same facility visit, only to find one or the other was not available. Furthermore, the NDSO was making a separate, unnecessary trip to deliver lab commodities. Now, when districts review orders from health facilities, they are grouped into categories correlated to optimized routes and submitted to NDSO for processing. During a Q1 review meeting, participants reported that the optimized route, which has been consistently used in Leribe district since June 2018, has significantly improved the availability of health products and reduced common errors, including duplicate product orders for the same service delivery point.

In December, GHSC-PSM in **Mali** hosted MOH officials from **Guinea** to share insights on building prefabricated warehouses. Visitors included a civil engineer, the Operations Director of Catholic Relief Services, the warehouse manager of Guinea's Central Medical Stores and a representative from the MOH division of infrastructure and equipment. Following an overview of the successful implementation

in Mali and discussion on prefabricated warehouses, the team took part in a site visit. This enabled representatives from Guinea to learn from Mali's experience with everything from managing the construction of prefabricated warehouses to coordinating work among multiple donors, suppliers and government entities and ultimately transforming the supply chain through improved storage capability and conditions and compliance with international standards. GHSC-PSM provided information on the donor cost structure of the prefabricated warehouse, management strategy for managing multiple contracts simultaneously and a maintenance plan for the prefabricated warehouse.

Workforce Development

GHSC-PSM strengthens public health supply chain workforces through 17 field offices. These interventions build sustainable workforces through professionalization and systematic approaches to workforce development, putting countries on a path to self-reliance.

At the global level, GHSC-PSM finalized the *Supply Chain Management Professionalization Framework* white paper. Competent, qualified supply-chain management professionals are increasingly in-demand in the private and public sectors. GHSC-PSM believes a “whole of supply-chain management (SCM) labor market” approach is needed, starting with a competency framework. Developed with People that Deliver (PtD) and the South African Production and Inventory Control Society (SAPICS), this study explores perceived needs as well as the similarities and differences between existing government and private sector SCM competency frameworks, which could serve as the core of an SCM professionalization framework. GHSC-PSM will continue working with PtD and SAPICS to develop the recommendations from this paper for country application in FY 2020.

In December, the project held a webinar titled *Health Supply Chain Management Capacity Development is NOT Training! So what is it then?* Training is the most common activity suggested to address competency gaps but training alone is not enough. Rather, a systematic approach to workforce development is required, as laid out in the *PtD Theory of Change for SCM*. The webinar:

- Explained why there is a need to systematically improve human resource (HR) capacity and systems to improve HR performance in supply chain teams
- Used the *PtD Theory of Change for SCM* (HR4SCM ToC) to understand the four essential pathways to optimize workforce performance in SCM and the actions required to strengthen these pathways

Over 63 participants from a wide range of organizations joined the webinar from around the world, including Cameroon, Copenhagen, India, Kenya, Malawi, Nigeria, Senegal, Tanzania and Uganda.

In **Rwanda**, GHSC-PSM, in collaboration with the University of Rwanda, launched the *Transformational Leadership and Change Management program* for 27 participants from BUFMAR (Le Bureau des Formations médicales agréées du RWANDA), a faith-based SCM organization, and faith-based hospitals served by BUFMAR. The program focuses on developing leadership and change management competencies and will enable BUFAMR executive and management staff to lead, advocate for, monitor and support activities to strengthen SCM and health outcomes in the facilities they serve. Participants are supported in applying their learning and implementing the three-to five-month action plans they developed during the initial workshop to their work. Before graduating, students will report on the outcomes of their action plans and lessons learned. Examples of workplace actions include improving hospital eLMIS systems, developing SCM SOPs and improving order fill rates. The program is due for completion in Q3 FY 2020.

In **Burma**, GHSC-PSM worked with the Ministry of Health and Sports (MOHS) to develop curricula for a health SCM certificate course for the University of Public Health Myanmar. In December, the project presented the draft curricula to the MOHS officials, and the course outline, methodology and content were finalized. The MOHS made institutionalization of this certificate course a priority for FY 2020, to improve the capacity and availability of skilled public-sector human resources for the health supply chain. GHSC-PSM also helped define a competency-based course framework, content and delivery methodology. With the project's support, the course will launch in Q2 FY 2020.

Management Information Systems

GHSC-PSM strengthened country supply chain information systems through 25 field offices. Although at different levels of supply chain maturity, these countries are on a path to developing end-to-end data visibility, with data-driven mechanisms to support evidence-based decision making.

In **Burkina Faso**, GHSC-PSM coordinated with the MOH's Pharmacy Department to complete a training for 29 hospital pharmacists on the integrated LMIS. Since 2017, USAID, through GHSC-PSM, has provided financial and technical support to the Pharmacy Department to roll out the integrated LMIS to the health facility level, including trainings for 345 head nurses. The trainings ensure the integrated LMIS is operational in all health facilities and hospitals and ultimately improves management of health commodities and data reporting.

In **Ethiopia**, a national study conducted by the MOH in 2018 on the pharmaceuticals management information system (PMIS) showed that out of 205 ART sites visited, 8 percent had a paper-based and computerized PMIS, while 47 percent did not have any type of system for patient and drug information management, and more than 52 percent of facilities did not have the "yellow sheet," a registration card that captures ARV medication regimens for individual patients that is needed to record information in the ARV register daily.

To address the gap, in Q1 GHSC-PSM conducted a baseline assessment of recording and reporting systems in 164 ART facilities in Addis Ababa in coordination with the City Administration Health Bureau. The assessment revealed poor systems for documentation, monitoring of medication errors, timely tracing and acting on lost-to-follow-up clients, and the generation of data for decision making. One major bottleneck discovered was limited access to PMIS tools, including the yellow sheet, ARV registers and patient tracking charts. As a result, the project printed more than 200,000 copies of the yellow sheet and has already distributed over 90,000 to ART sites. Throughout FY 2020, GHSC-PSM will provide site-level support, beginning with 100 ART sites in Addis Ababa and cascading to 100 more in following quarters on how to use the PMIS tools and report to higher-level health administration units for improved supply chain management, leading to better availability of ARVs and treatment outcomes for patients.

Governance, Financing and Leadership

With GHSC-PSM's support, countries achieve a responsive health supply chain system led by a strong team with managerial capacity, institutionalized checks and balances, robust governance oversight, open civil society involvement, and cost-effective and transparent financing mechanisms. GHSC-PSM strengthens governance, financing and leadership through 12 field offices.

Since Q3 FY 2019, GHSC-PSM has been providing support to the government of **Burkina Faso** through the One Health approach by setting up a system to efficiently manage and deliver commodities needed to respond to emergency outbreaks. GHSC-PSM provided financial and technical support to the

government of Burkina Faso to finalize the *National Supply Chain Plan in Emergency and Disaster Situations*. In Q1, GHSC-PSM, in collaboration with the MOH's Pharmacy Department and the World Bank, organized a stakeholder workshop to validate the plan. The final version will be submitted to the MOH for official approval in Q2.

In **Haiti**, GHSC-PSM supports the MOH and its partners in establishing an integrated public health supply chain system (SNADI). This is challenging, given political instability in the country and the presence of several parallel supply chains operating without MOH involvement. Despite these difficulties, the project and MOH continue to advance SNADI and in Q1 established a technical committee to serve as a stakeholder coordination mechanism with a mission to coordinate and lead implementation of the SNADI structure. The committee has produced a five-year plan for the transition from multiple parallel supply chains to the proposed integrated system. GHSC-PSM is helping develop an integrated paper-based LMIS as part of efforts to generate evidence to inform decisions about creating the SNADI. This national harmonized tool will contribute to the MOH vision of managing the national supply chain of essential medicines, and eventually put in place a national central warehouse (CENADI) for the country.

Forecasting and Supply Planning

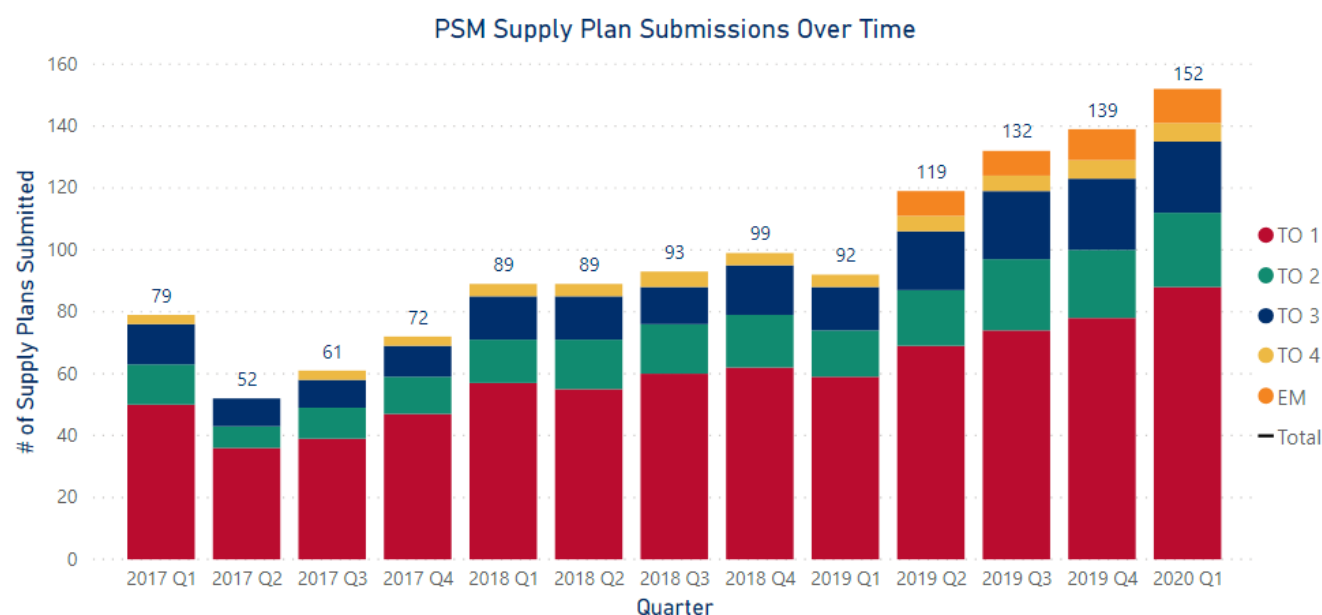
GHSC-PSM continues to provide FASP support in 26 countries to help institutionalize processes so countries move from relying on external technical support to developing their own fully integrated FASP capabilities as part of the journey to self-reliance.

In Q1, all field offices were required to use the Supply Plan Review Automation Tool developed by GHSC-PSM and report the results to project headquarters. This ensures technical ownership of supply plan reviews by field staff, decreases review cycle time, and provides the Global Supply Chain with faster access to procurement-ready supply plans to inform procurement planning.

Supply Plans

Countries continued to increase the number of supply plans updated and submitted them to GHSC-PSM, enhancing visibility into demand and assisting the project in meeting country needs. For Q1, GHSC-PSM received 152 supply plans.

Exhibit 11. GHSC-PSM Supply Plan Submissions Over Time (Core Plans: TO 1, 2, 3, 4)



To ensure the continuous availability of health commodities in **eSwatini**, GHSC-PSM helped the MOH with forecasting and supply planning of HIV, TB, malaria, FP/RH and noncommunicable disease medicines and other health commodities. The exercise estimated commodity needs for the next three years, including cost. For the first time, the results informed the budgeting process led by MOH's planning unit by highlighting funding gaps in FY 2019 and FY 2020 funding allocations. This information is enabling the MOH to advocate for more funds from the Ministry of Finance and to better mobilize and use resources from the donor community.

In **Niger**, GHSC-PSM is piloting a Call Center, a low-cost intervention based on private-sector approaches, to provide unprecedented access to stock data in challenging environments. The Call Center was first implemented in South Sudan, and in Q1 was adapted to the local context in Niger. Using sophisticated information technology equipment, callers from intermediate delivery points and health facilities proactively connect with stock managers around the country to document stock status of key commodities. GHSC-PSM and partners use the data to identify supply risks of health commodities and act to address them, so communities don't go without the vital medicines and other commodities they need. In Q1, the project translated the web-based application into French, installed the necessary equipment in the Niger office, and conducted test calls. The Call Center will be used to collect stock data at the service delivery point level necessary for last-mile distribution. The center will also be used for remote training and supervision during the rollout of the LMIS.

Emergency Supply Chain Management

GHSC-PSM partnered with Ethiopian Public Health Institute (EPHI) and Ethiopian Pharmaceutical and Supply Agency (EPSA) in conducting a series of emergency supply chain (ESC) management workshops with key stakeholders. The workshops employed the Global Health Supply Chain Program-developed *ESC Playbook*. This playbook is a toolkit for learning key ESC concepts; understanding what protocols are necessary for an effective ESC program; and developing a set of tailored emergency response materials, such as job aids, for efficient government response to public health emergencies. It includes a simulation to put into practice the steps required to respond during an emergency like Ebola or cholera outbreak.

In **Ethiopia**, the simulations allowed stakeholders to consider how governance structure and stockpiling issues can affect emergency response. As a result, an emergency procurement list was developed, and a major decision point was raised for EPHI and EPSA regarding setting thresholds to stop issuance of certain emergency commodities when critically low levels of stock are reached, so that stockouts can be avoided.

Procurement

Procurement of pharmaceuticals and medical supplies accounts for as much as 40–60 percent of health system expenditures in low- and middle-income countries. GHSC-PSM helps countries analyze the enabling environment for procurement at the policy and institutional levels, improve procurement efficiencies and reduce procurement delays. The project provides procurement systems strengthening through 23 field offices for procurement financed by national government or using the national government's legal framework.

Global Standards and Traceability

In November, the project raised awareness and advocated for GS1 standards in **Zimbabwe**. GHSC-PSM met individually with key stakeholder groups, including the Ministry of Health and Child Care (MoHCC), NatPharm, United Nations Development Programme (UNDP) and United Nations Children's Fund to discuss challenges and potential areas for implementing standards. Also, in collaboration with the Medicines Control Authority of Zimbabwe, the project reviewed the Southern African Development Community Harmonized Product Labeling Guideline being developed by the Zazibona product labeling working group and advocated for a standardized set of identifiers and data carriers in alignment with the donor community guidance. This activity culminated in an educational workshop including 30 representatives across the public and private sectors. The aim of the workshop was to:

- Further define the objectives of Zimbabwe's health sector
- Build a deeper understanding of the technical aspects of GS1 standards and their relevance to Zimbabwe's objectives
- Lay the foundation for the sequencing and dependencies for implementation, including the need for strong governance, operational improvements and technology investments

At the conclusion of the workshop, participants reached consensus to develop a technical working group to proceed with the next phase, including planning for a national vision and strategy workshop in Q2. The workshop will inform ongoing activities and provide clear direction for all stakeholders and in support of an upcoming Global Fund grant application in March 2020.

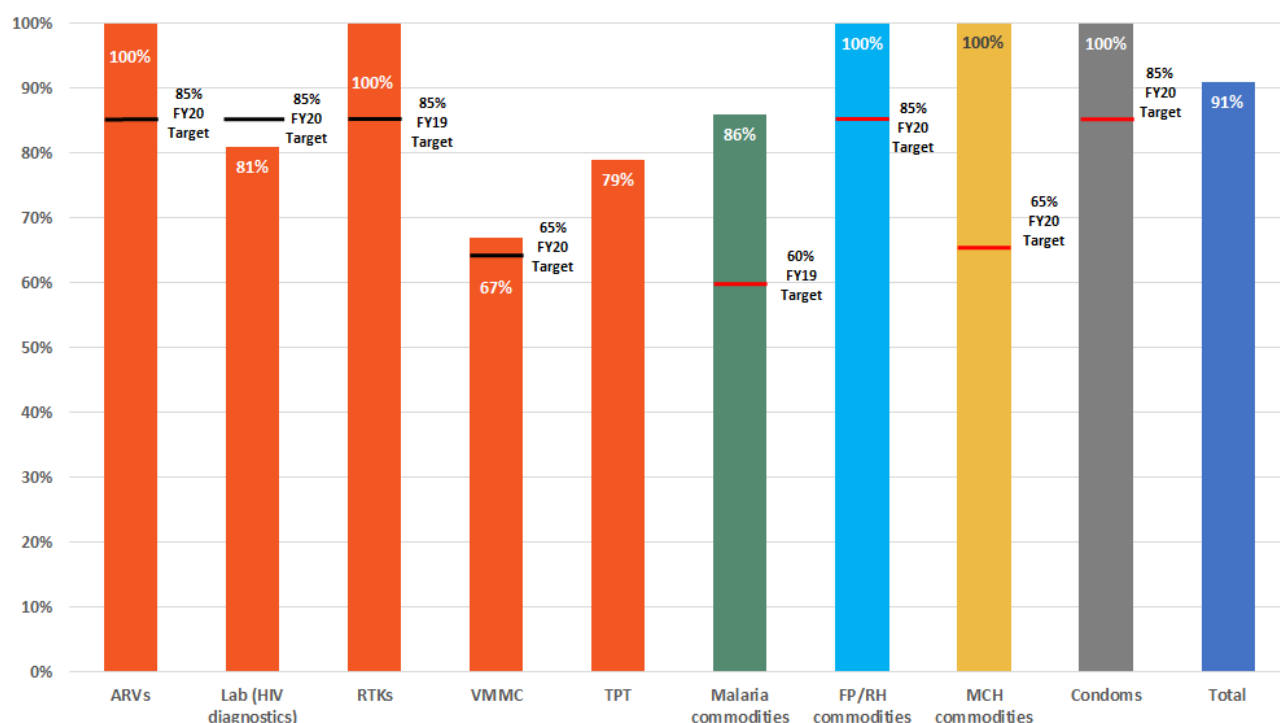
C2b. Project Performance

GHSC-PSM collects and analyzes data on a variety of indicators of national health supply-chain systems to understand the environments in which we operate and to help us calibrate our work. These indicators also help establish priorities for our health supply-chain systems strengthening support and, over time, will allow us to assess the outcomes of our technical assistance. Values for the indicators are provided in Annex A. To facilitate understanding of progress in each country, health supply-chain systems strengthening indicators are presented country by country and include important contextual information for each country. Dashboards with these country-specific indicators are made available to GHSC-PSM field offices to explore with national stakeholders.

Quarterly Supply Plan Updates

Exhibit 12 presents results for one indicator—percentage of countries conducting quarterly supply plan updates—that is critical to ensuring procurements are planned well ahead so that adequate stock levels can be maintained in the supply chains the project supports.

Exhibit 12. Percentage of Required Supply Plans Submitted During Q1 by Commodity Group²⁴



Under the quantification paradigm supported by GHSC-PSM, supply plans take a regularly updated, forward-looking 18-month view of demand. This **comprehensive, systematic and long-term approach to supply planning** provides visibility into monthly demand even if a single quarterly update is not submitted.

Countries develop and submit supply plans to GHSC-PSM for up to eight commodity groups. Supply plans are the source of country-level procurements, based on projections of consumption and inventory levels. In Q1, GHSC-PSM received 152 supply plans from 34 countries, including 129 of 141 required plans.²⁵

GHSC-PSM monitors supply plans quarterly to identify common errors and omissions across countries or commodity categories to assess results from earlier improvement efforts and to identify areas for additional guidance and mentoring. The quality of the plans is assessed against 14 criteria, with the reviews generating actionable recommendations for improvement. The supply plan reviews identify issues with future orders, enabling field offices to take preemptive actions to mitigate impact.

²⁴ No FY 2020 target was proposed for TPT as this is new to GHSC-PSM

²⁵ Some supply plans that GHSC-PSM receives are not required because GHSC-PSM does not have a presence in the country or because GHSC-PSM does not procure the items covered by those plans. These additional plans nonetheless provide the project with insight on the market size and scope for various commodities and can be shared with global stakeholders.

Capacity Building

The number of people trained provides a basic illustration of where the project is focusing its capacity-building resources and where it might expect related supply chain outcomes to improve. A high number of individuals were trained in Q1, with a total of 1,666 trainees (627 women and 1,039 men).

Most trainings were cross-cutting, meaning they addressed topics relevant to multiple health areas. By funding source, 25 percent were trained with HIV/AIDS funding; 50 percent with malaria funding; 16 percent with FP/RH funding; and 9 percent with MNCH funding. Trainings focused on warehousing and inventory management, LMIS, governance and finance, transportation and distribution, and human resources capacity development.

C3. Global Collaboration



The project **ramped up strategic collaborations** with partners like UNFPA and the Global Fund focused on leveraging each other's knowledge and experience to assure quality health commodities.



GHSC-PSM had a **strong showing at various high-profile conferences** including GHSCS, ICASA, and ASTMH.



Project data informed **global market shaping** activities for numerous commodities (e.g., male condoms, pediatric ARVs, hormonal intrauterine system), and close collaboration with other procurers to allocate scarce supply of several commodities (e.g., implants and injectables) enabled the global health community to meet country needs.

The scale, scope and complexity of managing a global supply chain require the project to collaborate with many global and local partners to ensure the availability of medicines and health commodities. By integrating our work across health sectors and sharing information, resources, activities and capabilities, we can achieve together what we could never achieve alone. GHSC-PSM's global collaboration in Q I focused on strategic engagement, market dynamics and other research, awareness and advocacy efforts.

Strategic Engagement

As described throughout this report, GHSC-PSM engages actively with other global players to promote the availability of medicines and commodities. We do so by providing supply-chain expertise to important global fora, working with global partners to allocate scarce supply, promoting harmonization of and adherence to standards and practices, and working to manage commodity stock information as a global good. Our contributions are recapped below.

Collaborations With UNFPA

The project worked closely with USAID and UNFPA on auditing a suspended condom manufacturer and coordinated with them to share findings related to labor law violations. GHSC-PSM also worked with UNFPA to build a comprehensive database of country condom registrations.

Quality Assurance Collaboration with the Global Fund

In Q I, GHSC-PSM and the Global Fund established an agreement to conduct monthly virtual meetings on QA/QC topics, including malaria product specifications, standard operating procedures (SOPs), test methods, out-of-specification test results and upcoming conferences and learning opportunities.

MNCH Forecasting and Supply Planning Technical Leadership

In Q I FY 2020, GHSC-PSM conducted a detailed review of the 2016 reproductive, maternal, newborn and child health (RMNCH) quantification guidance for supply chain managers in low- and middle-income countries (LMICs) and provided feedback to MTaPS, the implementing

partner leading a revision of the guidance. GHSC-PSM will continue to provide FASP support and technical feedback as the document is prepared for release in 2020.

- **Hormonal IUS Coordination Meeting, Washington, DC (November 2019).** At this meeting, donors, hormonal IUS suppliers, and participating organizations provided program updates on efforts to increase access to hormonal IUS and better understand market potential. As part of ongoing coordination, GHSC-PSM is working closely with key stakeholders as a member of the Market Shaping Committee to better understand current and potential future market demand.
- **ARV Buyer Seller Summit, Washington, DC (December 2019).** GHSC-PSM participated in the annual ARV Buyer Seller Summit hosted by USAID, PEPFAR, Global Fund and South Africa's Department of Health and attended by global HIV/AIDS partners. During the summit, GHSC-PSM presented on "Supply Chain Optimization Through End-to-End Data Visibility."
- **8th Ouagadougou Partnership Annual Meeting, Cotonu, Benin (December 2019).** At this three-day meeting, several high-level panels and plenary sessions focused on progress toward FP2020 goals; policies and strategies for youth inclusion; advocacy, access and demand of services for youth and adolescents; breaking the barriers to high-impact interventions; country commitments to FP procurement financing, and more. GHSC-PSM advocated for the commodity security agenda in a space where resources are limited and countries continue to rely heavily on donors to ensure availability of FP commodities.
- **Coordinated Supply Planning (CSP) Emergency Meeting, New York, NY (December 2019).** GHSC-PSM, along with fellow CSP group members (CHAI, JSI, PATH, RHSC, UNFPA, and USAID) and guests from JPHIEGO, the UK Department for International Development (DFID), Bill and Melinda Gates Foundation (BMGF), and Children's Investment Fund Foundation (CIFF) met to discuss demand-supply gaps in the implants and injectables markets. These meetings are helping engage a wider group of stakeholders in discussions around future operations to address supply constraints. A follow-up meeting will take place in January 2020.
- **Maternal Health Supplies Caucus, Ghana (October 2019).** GHSC-PSM presented findings from a recent oxytocin quality-related activity in Ghana. Findings and discussions focused on changing the tendering process, improving cold chain storage capacity, and aligning insurance reimbursement prices. These contributions are informing MNCH policy considerations for decision-makers in similar country contexts.

Global Standards and Traceability

In January 2019, the Global Drug Facility, Global Fund, UNDP, UNFPA and USAID co-published a joint procurement requirement for global standards in the *Global Standards Technical Implementation Guideline for Global Health Commodities, V2.1*. This requirement covers specifications for trade item and location identification, data capture, and data sharing, which includes serialization of pharmaceuticals by 2022.

Global Traceability Visioning Workshop, Washington, DC (December 2019). The project, along with USAID, hosted discussions with suppliers and global health community stakeholders on how to manage serialization and other traceability-related "big data" across donors and countries. The workshop explored these issues and served to inform what the community should consider in advance of the onslaught of serialization data. Several new ideas emerged to support donors, their procurement

agents, and countries to manage and exchange these data. GHSC-PSM is synthesizing outputs from this meeting for dissemination among participants and will support USAID in evaluating next steps.

GHSC-PSM continues to promote USAID's thought leadership on adopting GS1 standards in global and national supply chains by sharing our work—including developments, emerging good practices, and advocacy for support from global stakeholders—at global forums, including:

GS1 Global Healthcare Conference, New Delhi, India (November 2019). The project presented along with USAID as part of a panel on donor organizations implementing GS1 standards. The presentation outlined GHSC-PSM's progress to date in implementing global standards in the global supply chain, compliance recognition and enforcement, successes, challenges, and lessons learned. One-on-one supplier meetings before, during, and after the conference provided an opportunity to engage with global standards implementers and leadership from several GHSC-PSM's suppliers to discuss individual challenges and progress. The discussions provided a holistic view into suppliers' processes for global standards and allowed suppliers to pose their questions to GHSC-PSM as they implement global standards within their own organizations.

OpenHIE Community Conference, Addis Ababa, Ethiopia (November 2019). Also in November, the project participated in the OpenHIE's Community Conference. OpenHIE is a global community of practice dedicated to improving the health of the underserved through open and collaborative development and support of country-driven, large-scale health information sharing architectures. The project attended to learn, inform and align the GHSC-PSM implementation guidance for global standards and traceability with interoperability and data exchange standards being adopted by USAID-supported countries. This event will also inform the activity to assess applicability of the GS1 GLNs for facility and vendor management.

Additional Participation in Global Fora

Global Health Supply Chain Summit, Johannesburg, South Africa (November 2019)

At this year's Summit the project had a significant presence, with four posters, four oral presentations, a side event titled, "Maximizing global health supply chain impact using data and analytics, entrepreneurship and ensuring accessibility for all," featuring project leadership and the Mozambique country office, and a data analytics workshop led by GHSC-PSM. GHSC-PSM's presentations included the following:

- How mapping the pharmaceutical institutions is driving regulatory change in Guinea (poster)
- Vendor-managed inventory for condoms and VMMC helps to reduce lead time (poster)
- In Mali, the marriage between two systems brings data harmony (poster)

Tackling "Big Data" Challenges in Global Health Supply Chains

Participants in the Global Traceability Visioning Workshop included representatives from:

AmerisourceBergen
Digital Square
Global Fund
GS1
PATH
RxGPS Alliance
The World Bank
UNFPA
USAID
USAID Ethiopia Mission
USAID Nigeria Mission

- After the storm: key learnings from disaster response following Cyclone Idai in Mozambique (poster)
- Starting small and thinking big: building data-driven decision-making culture in supply chain management in Cameroon (oral presentation)
- Innovations in product master data management: a necessity for efficient supply chains (oral presentation)
- Piloting unmanned aerial vehicles for health commodity transportation and delivery in remote settings (oral presentation)
- Commodity security surveys in 36 countries (oral presentation)

Annual Meeting of the American Society of Tropical Medicine and Hygiene, National Harbor, MD (November 2019)

Project staff from Ethiopia presented a poster titled, “Assessment and response of artesunate injectables in Ethiopia.” The poster outlines their findings and actions from an assessment of whether severe malaria was being treated according to guidelines.

International Conference on AIDS and STIs in Africa (ICASA), Kigali, Rwanda (December 2019)

GHSC-PSM hosted a panel discussion on “Shifting to new and improved treatment regimens: lessons learned from TLD transition.” The session was attended by more than 260 conference participants from 35 countries who ranged from service providers to government representatives, donors, researchers and more. Also, 72 percent of abstracts submitted by GHSC-PSM were accepted, a notable achievement given the highly scientific nature of this conference and limited space for supply chain topics.



GHSC-PSM staff at the International Conference on AIDS and STIs in Africa, November 2019. Photo credit: Rogers Kigenza, GHSC-PSM

Collaboration with Other USAID GHSC Projects

As a member of the GHSC program family, GHSC-PSM interacts regularly with the other GHSC projects. Below we summarize examples of collaboration with other GHSC projects in Q1.

- GHSC-PSM participated in discussions with USAID, GHSC-QA and CDC to standardize dried blood spot (DBS) kits. The goal is for all partners to align on a certain set of standard DBS kits, which will be used for all countries.

- The project continues to provide forecasting and supply planning as well as country logistics support to GHSC-RTK. Each month, GHSC-PSM shares regional- and central-level stock data we collect with GHSC-RTK to guide RTK procurement planning.
- GHSC-PSM continues to work collaboratively with GHSC-QA to maintain communication flow, identify areas of mutual concern and solutions, and ensure QA requirements are incorporated into GHSC-PSM systems as applicable.
- In collaboration with GHSC-QA, the project streamlined QA documentation requirements for procuring laboratory supplies to reduce cycle time, a key FY 2020 strategic goal.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

Global Supply Chain M&E Indicator Performance

FY2020 Quarter 1, October - December 2019

Delivery Impact to Date



Number of ACT treatments delivered

219,097,350



Number of Couple Years Protection delivered

60,518,430



Person-years of ARV treatment delivered

7,746,659

Delivery (OTIF, OTD and Backlog)	Cycle Time	Quality Assurance (TO2 only)	Procurement	Registration
Supply Plan Error	Forecast Error	Supply Plan Submissions	Warehousing	Vendor Performance
HIV Complete Quarterly Results (TO1)	Malaria Complete Quarterly Results (TO2)	FP/RH Complete Quarterly Results (TO3)	MNCH & Zika Complete Quarterly Results (TO4)	

Fiscal Year 2020 Key Performance Overview - IDIQ

	FY 2020 Q1	FY 2020 Q2	FY 2020 Q3	FY 2020 Q4	FY 2020
Reporting Period (Quarter) Start Date	10/01/19	01/01/20	04/01/20	07/01/20	10/01/19
Reporting Period (Quarter) End Date	12/31/19	03/31/20	06/30/20	09/30/20	09/30/20
Global Supply Chain					
A1a. Percentage of line items delivered on time and in full, within the minimum delivery window	89%				
A1b. Percentage of line items delivered on time, within the minimum delivery window	93%				
A3. Cycle time (average) – # days per shipment	228				
A4. Inventory turns (average number of times inventory cycles through GHSC-PSM-controlled global facilities) – ratio	Annual Indicator				
A5. Total landed cost (logistics costs)	Semiannual Indicator		Semiannual Indicator		
A13. Percentage of batches of product showing nonconformity (out of specification percentage)	1.2%				

Important: Key performance metrics on this page are intended to provide an overall snapshot of the project's performance. They may conceal nuances of TO and/or country performance and must be interpreted in light of individual TO and/or country performance of more granular data.

Fiscal Year 2020 Key Performance Overview - IDIQ

			FY 2020 Q1	FY 2020 Q2	FY 2020 Q3	FY 2020 Q4	FY 2020
Reporting Period (Quarter) Start Date			10/01/19	01/01/20	04/01/20	07/01/20	10/01/19
Reporting Period (Quarter) End Date			12/31/19	03/31/20	06/30/20	09/30/20	09/30/20
In Country							
B1.	Stockout rate at SDPs		16.9%				
B2.	Percentage of stock status observations in storage sites where commodities are stocked according to plan, by level in supply system		24.1%				
B3.	SDP reporting rate to the logistics management information system (LMIS)		76.5%				
C1.	Number of people trained – #	TO-Specific Trainings Combined	935				
		Cross-TO Trainings	731				
		All Trainings (TO-Specific & Cross-TO)	1,666				

Important: Key performance metrics on this page are intended to provide an overall snapshot of the project's performance. They may conceal nuances of TO and/or country performance and must be interpreted in light of individual TO and/or country performance of more granular data.

Fiscal Year 2020 Key Performance Overview By Task Order

Indicator		IDIQ FY20 Target	Task Order 1 HIV/AIDS					Task Order 2 Malaria					Task Order 3 PRH					Task Order 4 – MNCH					
			FY20 Target	2019 Q2	2019 Q3	2019 Q4	2020 Q1	FY20 Target	2019 Q2	2019 Q3	2019 Q4	2020 Q1	FY20 Target	2019 Q2	2019 Q3	2019 Q4	2020 Q1	FY20 Target	2019 Q2	2019 Q3	2019 Q4	2020 Q1	
Global Supply Chain																							
A1a	Percentage of line items delivered on time and in full, within the minimum delivery window <i>(Total number of line items delivered)</i>	80%	80%	81% 1062	85% 1114	83% 878	90% 879	80%	92% 202	88% 270	91% 205	87% 147	80%	91% 44	93% 92	85% 40	86% 51	80%	81% 330	83% 245	89% 9	100% 3	
A1b	Percentage of line items delivered on time within the minimum delivery window <i>(Total number of ADDs in the quarter)</i>	80%	80%	89% 1003	92% 1085	91% 817	94% 872	80%	93% 203	97% 264	97% 207	91% 147	80%	85% 46	100% 93	94% 36	89% 54	80%	81% 332	85% 241	91% 11	100% 1	
A3	Cycle time (average) – days per line item delivered	225	213	204	219	217	201	295	341	324	322	372	RDC: 263 DD: 268	RDC 254 DD: 293	RDC 314 DD: 238	RDC 381 DD: 237	RDC 268 DD: 280	206	397	454	219	306	
A4	Inventory turns – ratio	NA	4	6.6			Annual	4	3.9			Annual	3	1.4			Annual	NA	No inventory held				

A2: See Task Order 2 QA-specific indicators below. This indicator is not reported for TO1, TO3, and TO4 because QA processes for these task orders are managed by the GHSC-QA project.
Fiscal Year targets represent desired indicator result aggregated over the full fiscal year.

Indicator		IDIQ FY20 Target	Task Order 1 HIV/AIDS					Task Order 2 Malaria					Task Order 3 PRH					Task Order 4 – MNCH				
			FY20 Target	2019 Q2	2019 Q3	2019 Q4	2020 Q1	FY20 Target	2019 Q2	2019 Q3	2019 Q4	2020 Q1	FY20 Target	2019 Q2	2019 Q3	2019 Q4	2020 Q1	FY20 Target	2019 Q2	2019 Q3	2019 Q4	2020 Q1
A5	Total landed cost (logistics costs)	16.5%	9.8%	9.2%	8.4%	Semi annual	33.8%	33.3 %	34.7%	Semi annual	15.2%	16.6 %	14.4%	Semi annual	30.0%	16.2 %	36.2%	Semi annual				
A6a	Absolute percent supply plan error, with variants annual absolute percent error and supply plan bias And	See Forecast and Supply Plan Performance pages for detailed indicator results																				
A6b	Absolute percent forecast error, with variants annual absolute percent error and forecast bias																					
A7	Temporary waiver percentage	NA	NA	Not required for TO1 per M&E Plan				NA	5%	10%	10%	9%	NA	NA	3%	10%	6%	NA	Not required for TO4 per M&E Plan			
A8	Average percentage of shelf life remaining for warehoused commodities, weighted by the value of each commodity’s stock	NA	78%	82%	80%	77%	83%	70%	66%	59%	71%	74%	78%	86%	83%	83%	83%	NA	No inventory held			
A10	Percentage of product procured using a framework contract (framework contract percentage)	NA	83%	71%	81%	87%	91%	73%	68%	19%	57%	37%	95%	100 %	100 %	100 %	100 %	75%	61%	88%	100 %	57%
A16	Percentage of backlogged line	<5%	<5%	2%	2%	0.4%	0.8%	<5%	0.3%	1%	0.5%	0.7%	<5%	2%	0%	0.4%	0.0%	<5%	0.6%	2%	0%	0.0%

A9, A11, A12: These indicators have been removed from the GHSC-PSM M&E Plan with approval from USAID.

A13, A14, A15: See Task Order 2-specific indicator results below. These indicators are not reported for TO1, TO3, and TO4 because QA processes for these task orders are managed by the GHSC-QA project.

Fiscal Year targets represent desired indicator result aggregated over the full fiscal year.

Indicator		Task Order 2 Malaria				
		FY20 Target	2019 Q2	2019 Q3	2019 Q4	2020 Q1
A2	Percentage of QA processes completed within the total estimated QA lead times	80%	80%	74%	100%	94%
A13	Percentage of batches of product for which the final result is showing nonconformity (out of specification percentage)	<1%	0.0%	0.0%	0.0%	1.2%
A14b	Average vendor rating score – QA labs	NA	74%	80%	85%	90%
A15	Percentage of QA investigation reports submitted within 30 calendar days of outcome determination (QA investigation report submission)	90%	100%	50%		Semiannual
Indicator		Crosscutting				
A14a	Average vendor rating score – Suppliers	NA	76%	74%	71%	80%
A14c	Average vendor rating score – Freight Forwarders	NA	86%	84%	84%	85%
C4	Percentage of required files submitted to BI&A in the reporting period	NA	84%	NA	NA	NA
C5	Percentage of required files timely submitted to BI&A in the reporting period	NA	81%	NA	NA	NA
Indicator		Task Order 1 HIV/AIDS				
C6	Average percent variance between GHSC-PSM ARTMIS and GHSC-BI&A calculations of key supply chain indicators for Task Order 1	NA	0.3%	NA	NA	NA

Fiscal Year targets represent desired indicator result aggregated over the full fiscal year. For certain performance indicators GHSC-PSM and USAID have agreed that targets are not appropriate, either because performance is not fully within project control, to avoid unwanted incentives, or because there is insufficient data to set targets at this time. For more detail, please see Annex C of the GHSC-PSM Monitoring and Evaluation Plan (11 Feb 2019). C4, C5, C6: Reporting for these indicators is no longer required following FY2019 Q2.

Indicator		Task Order 1 HIV/AIDS				Task Order 2 Malaria					Task Order 3 PRH					Task Order 4 – MNCH					Crosscutting					
			2019 Q2	2019 Q3	2019 Q4	2020 Q1		2019 Q2	2019 Q3	2019 Q4	2020 Q1		2019 Q2	2019 Q3	2019 Q4	2020 Q1		2019 Q2	2019 Q3	2019 Q4	2020 Q1		2019 Q2	2019 Q3	2019 Q4	2020 Q1
In country Context, Performance, and Sustainability																										
B1	Stockout rate at SDPs		10%	11%	9%	10%		12%	13%	12%	16%		13%	15%	19%	20%		NA					NA			
B2	Percentage of stock status observations in storage sites where commodities are stocked according to plan, by level in supply system		36%	37%	36%	31%		22%	26%	22%	23%		16%	18%	15%	19%		NA					NA			
B3	SDP reporting rate to the logistics management information system (LMIS)		88%	84%	87%	81%		87%	76%	73%	81%		71%	78%	82%	78%		63%	71%	74%	64%		NA			
B4	Average rating of in-country data confidence at the central, subnational, and SDP levels – (0-9 scale)		5.7			Ann ual		7.0			Ann ual		6.4			Ann ual		6.7			Ann ual		NA			
B5	Percentage of required annual forecasts conducted	See country-specific indicator pages for detailed data for this indicator (reported annually).																								
B6	Percentage of required supply plans submitted to GHSC-PSM during the quarter	See Supply Plan Submission and country-specific indicator pages for detailed data for this indicator.																								

Targets for in-country performance indicators are set at the country level. Targets are not required for context indicators.

Indicator		Task Order 1 HIV/AIDS				Task Order 2 Malaria					Task Order 3 PRH				Task Order 4 – MNCH				Crosscutting						
		2019 Q2	2019 Q3	2019 Q4	2020 Q1		2019 Q2	2019 Q3	2019 Q4	2020 Q1		2019 Q2	2019 Q3	2019 Q4	2020 Q1		2019 Q2	2019 Q3	2019 Q4	2020 Q1		2019 Q2	2019 Q3	2019 Q4	2020 Q1
In country Context, Performance, and Sustainability																									
B7	Percentage of total spent or budgeted on procurement of commodities for public sector services by funding source	See country-specific indicator pages for detailed data for this indicator (reported annually).																							
B8	Percentage of targeted supply chain activities in which the host country entity has achieved technical independence with GHSC-PSM technical assistance.	See country-specific indicator pages for detailed data for this indicator (reported annually).																							
B9	Supply chain technical staff turnover rate	See country-specific indicator pages for detailed data for this indicator (reported annually).																							
B10	Percentage of countries that have a functional logistics coordination mechanism in place		75%		Annual		72%		Annual		69%		Annual		67%		Annual		NA						
B11	Percentage of leadership positions in supply chain management that are held by women		NA				NA				NA				NA				31%		Annual				

Targets for in-country performance indicators are set at the country level. Targets are not required for context indicators.

Indicator		Task Order 1 HIV/AIDS				Task Order 2 Malaria				Task Order 3 PRH				Task Order 4 – MNCH				Crosscutting			
		2019 Q2	2019 Q3	2019 Q4	2020 Q1	2019 Q2	2019 Q3	2019 Q4	2020 Q1	2019 Q2	2019 Q3	2019 Q4	2020 Q1	2019 Q2	2019 Q3	2019 Q4	2020 Q1	2019 Q2	2019 Q3	2019 Q4	2020 Q1
In country Context, Performance, and Sustainability																					
B12	Absolute percent consumption forecast error, with forecast bias variant	See country-specific indicator pages for detailed data for this indicator (reported annually).																			
C1	Number of innovations (including operations research studies) that were developed, implemented, or introduced and are related to the health commodity market or supply chain best practices	8	0	6	3	2	0	1	0	4	1	1	2	0	2	0	0	11	5	8	6
C2	Number of people trained	993	942	1246	192	198	667	379	711	85	192	324	32	1005	389	11	0	948	3073	6930	731
C7a	Percentage of product lost due to expiry while under GHSC-PSM control	See Warehouse Performance and country-specific indicator pages for detailed data for this indicator.																			
C7b	Percentage of product lost due to theft, damage, or other causes while under GHSC-PSM control	See 3PL and Commodity Vendor Performance and country-specific indicators pages for detailed data for this indicator.																			

Targets for in-country performance indicators are set at the country level. Targets are not required for context indicators.
 C3: This indicator has been removed from the GHSC-PSM M&E Plan with approval from USAID. C4, C5, and C6, are reported in the Global Supply Chain section above.

Indicator		Task Order 1 HIV/AIDS				Task Order 2 Malaria				Task Order 3 PRH				Task Order 4 MNCH				Crosscutting								
			2019 Q2	2019 Q3	2019 Q4	2020 Q1		2019 Q2	2019 Q3	2019 Q4	2020 Q1		2019 Q2	2019 Q3	2019 Q4	2020 Q1		2019 Q2	2019 Q3	2019 Q4	2020 Q1					
In country Context, Performance, and Sustainability																										
C8	Number of global advocacy engagements in support of improved availability of essential health commodities		2	0		Semi annu al		4	1		Semi annu al		9	7		Semi annu al		0	3		Semi annu al		6	5		Semi annu al
C10	Percentage of GHSC-PSM-procured or supported molecular instruments that remained functional during the reporting period		69%	71%	76%	79%		NA				NA				NA				NA						
C11	Supply chain policies, regulations, strategies, or SOPs developed or updated with GHSC-PSM assistance	See country-specific indicator pages for detailed narratives for this indicator.																								

Targets for in-country performance indicators are set at the country level. Targets are not required for context indicators.
 C9: This indicator has been removed from the GHSC-PSM M&E Plan with USAID approval.

Delivery Performance

Current Reporting Period

2020-Q1



A1a. On-time, In-Full Delivery

Task Order ▲	Total # of Line Items Delivered	OTIF	OTIF Target
TO1	879	90%	80%
TO2	147	87%	80%
TO3	51	86%	80%
TO4	3	100%	80%
Total	1,080	89%	80%

A1b. On-time Delivery

Task Order ▲	Total # of Line Items with ADDs in the quarter	OTD	OTD Target
TO1	872	94%	80%
TO2	147	91%	80%
TO3	54	89%	80%
TO4	1	100%	80%
Total	1,074	93%	80%

A16. Backlog Percentage

Task Order ▲	Total # of line items with ADDs in the last 12 months	Backlog	Backlog target
TO1	3,742	0.8%	5%
TO2	816	0.7%	5%
TO3	229	0.0%	5%
TO4	585	0.0%	5%
Total	5,372	0.7%	5%

Analysis ▲

Delivery performance for family planning commodities remained strong at the opening of FY 2020, with all metrics performing well against their targets.

Delivery performance for HIV remained consistent and strong at the opening of FY 2020, with all metrics performing well against their targets. ARVs (adult and pediatric) performed better than the task order overall, reaching their highest levels so far at 89 percent OTIF and 98 percent OTD.

Delivery performance for malaria commodities remained strong at the opening of FY 2020, with all metrics performing well against their targets. The malaria task order has maintained notably high OTD rates, with performance above 90 percent in five consecutive quarters. For all pharmaceutical product categories, OTD performance has been 99 percent since FY 2019 Q3.

TO4 had very few deliveries planned this quarter, all of which were delivered on time and in full. There is no outstanding backlog for TO4 line items. Deliveries are expected to ramp up again in the second half of FY 2020, with large orders of essential medicines planned for DRC.

Data notes ▼

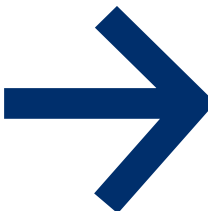
See "Indicator Details" pages in this report for more information.

Quarterly indicator targets are effective beginning FY2018 Q4.

Line items are considered on time if they are delivered between 14 calendar days before and up to 7 calendar days after the agreed delivery date.

All male and female condom and lubricant deliveries are reported under TO1.

See next page for
break down by
product category



Delivery Performance

Current Reporting Period

2020-Q1



Task Order	A1a. OTIF rate		A1b. OTD rate		A16. Backlog percentage	
	OTIF	Total # of Line Items Delivered	OTD	Total # of Line Items with ADDs in the quarter	Backlog	Total # of line items with ADDs in the last 12 months
TO1	90%	879	94%	872	0.8%	3,742
Adult ARV	92%	118	98%	116	0.3%	389
Condoms	77%	30	85%	27	0.0%	200
Food and WASH			0%	1	100.0%	1
HIV RTK	50%	2	50%	2	0.0%	2
Laboratory	89%	526	92%	517	0.9%	2,090
Other Non-Pharma	99%	68	96%	75	0.7%	401
Other Pharma	94%	36	97%	34	0.4%	240
Other RTK	100%	3	100%	3	0.0%	8
Pediatric ARV	87%	70	97%	70	0.8%	262
TB HIV	89%	9	80%	10	0.0%	21
Vehicles and other equipment					0.0%	5
VMMC	100%	17	100%	17	2.4%	123
TO2	87%	147	91%	147	0.7%	816
ACTs	96%	67	97%	69	0.0%	361
Laboratory	75%	4	0%	3	4.5%	67
LLINs	82%	34	86%	29	2.1%	97
mRDTs	89%	19	100%	20	0.0%	116
Other Non-Pharma	0%	2	0%	2	4.3%	23
Other Pharma	100%	1	100%	1	0.0%	9
Severe Malaria Meds	67%	15	89%	18	0.0%	75
SMC					0.0%	22
SP	100%	5	100%	5	0.0%	46

Task Order	A1a. OTIF rate		A1b. OTD rate		A16. Backlog percentage	
	OTIF	Total # of Line Items Delivered	OTD	Total # of Line Items with ADDs in the quarter	Backlog	Total # of line items with ADDs in the last 12 months
TO3	86%	51	89%	54	0.0%	229
Combined Oral Contraceptives	71%	14	80%	15	0.0%	34
Copper-Bearing Intrauterine Devices					0.0%	22
Emergency Oral Contraceptives	100%	1	100%	1	0.0%	11
Implantable Contraceptives	88%	16	89%	18	0.0%	63
Injectable Contraceptives	100%	11	100%	11	0.0%	49
Other Non-Pharma	100%	2	100%	2	0.0%	20
Progestin Only Pills	75%	4	75%	4	0.0%	25
Standard Days Method	100%		100%	3	0.0%	5
TO4	100%	3	100%	1	0.0%	585
Laboratory					0.0%	52
Other Non-Pharma	100%	2			0.0%	220
Other Pharma	100%	1	100%	1	0.0%	305
Other RTK					0.0%	3
TB HIV					0.0%	5

Data notes



See "Indicator Details" pages in this report for more information.

Quarterly indicator targets are effective beginning FY2018 Q4.

Line items are considered on time if they are delivered between 14 calendar days before and up to 7 calendar days after the agreed delivery date.

All male and female condom and lubricant deliveries are reported under TO1.

Cycle Time Performance

Current Reporting Period

2020-Q1



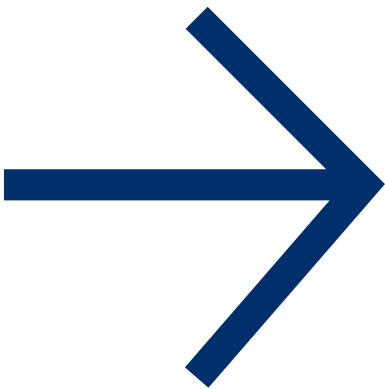
A3. Average overall cycle time

Task Order	# of line items delivered	Average Cycle Time	Cycle time target
▲			
TO1	879	201	216
TO2	147	374	295
TO3	51	273	
TO4	3	306	206
Total	1080	228	228

A3. Average overall cycle time (with TO3 Targets)

Task Order	# of line items delivered	Average Cycle Time	Cycle time target
TO3	51	273	
Direct drop fulfillment	21	280	260
Warehouse fulfillment	30	268	250

See next page for break downs by process segment, product category, fulfillment channel, and transportation mode



Task Order	Analysis
▲	
TO1	Cycle times for the pick up and deliver segments exclude any deliveries shipped under C and D Incoterms. These deliveries are handled by suppliers, meaning that pick up dates are not relevant or available, and pick up/deliver segments cannot be calculated. Due to the large line item volume of these types of orders for TO1, the pick up and deliver segment data reported for TO1 direct drops represents only about 50 percent of all TO1 direct drops.
TO1	End-to-end cycle times for HIV deliveries fell to 201 days this quarter, more than two weeks below the target of 216 days. Overall, cycle times for segment processes have remained generally consistent over time. Cycle time for direct drop orders, comprising 91 percent of TO1 deliveries this quarter, is similarly consistent, at 199 days. Overall cycle times for warehouse fulfillments is typically longer, although this quarter's performance has improved by an average of 44 days, with the greatest reduction in pick up processes. The main difference between direct drop and RDC fulfillments continues to be the "Process PO/DO" segment, with the long segment times for DO processing suggesting early order placement and some wait time for approved orders to be released closer to their agreed delivery dates.
TO2	Average cycle time for quality assurance was 36 days, a decrease from the previous period (47 days).
TO2	Cycle time for malaria deliveries rose this quarter, to an average of 374 days. This includes a few extreme outliers, such as two line items for Cambodia that were placed more than two years in advance of their requested delivery dates. In general, nearly two-thirds of line items delivered this quarter were ordered more than a year before their agreed delivery dates, an ordering pattern that is typical for malaria orders and which accounts for TO2's longer end-to-end cycle times. There were improvements to clarifications, sourcing and PO processing times, while manufacture and pick up times increased. Average USAID approval time also increased this quarter, driven by lengthy approval times for two outlier orders. a large ACT order for DRC and LLIN orders for Burma. A large DRC ACT orders was on hold during this time due to a budget reconciliation process. An LLIN order for Burma was on hold at this stage during procurement policy discussions between PMI, the mission, and the recipient. A final contributing factor for the overall cycle times includes TO2's strategy for increased ocean shipping, which has longer delivery times. Ocean shipping accounted for 55 percent of line items delivered this quarter, up from 13 percent in Q4.
TO3	Cycle times for family planning warehouse fulfillments fell to a level this quarter that is more consistent with the first half of FY 2019, returning to more consistent performance after deliveries of some extreme outliers in FY 2019 Q3 and Q4.
TO3	Direct drop orders saw an increased cycle time this quarter, with increases in early stage processes including sourcing, PO processing, and manufacturing time. Pick up and deliver times, however, both decreased.
TO4	TO4 average cycle time rose to 306 days this quarter, although it should be noted that this represents only three line items delivered (insect repellent for Zika prevention in Paraguay and essential medicines for Ghana). The insect repellent line items were processed and approved quickly, but required a long hold in the PO processing stage while importation and customs clearance requirements were confirmed.

Data notes

Quarterly indicator targets are effective beginning FY2018 Q4.

Overall cycle time is defined as the number of days between when a customer order is submitted to when the shipment is actually delivered to the customer, inclusive of the start/end days and all holds or other dwell times. The project is implementing new dwell tracking procedures, with the intent of reporting dwell-adjusted cycle time by FY2020

Data on overall cycle start and end dates are complete for all line items delivered this quarter. However, internal milestone data may not be complete for some line items. In these cases, line items with incomplete data are excluded from the segment averages. For this reason, the sum of all segments may not be equal to the overall average per task order and fulfillment channel, especially in earlier reporting periods

Cycle Time Performance

Current Reporting Period

2020-Q1

A3. Average overall cycle time by product group, fulfillment channel, and transportation mode (TO1, TO2, and TO3)

Fulfillment Channel Task Order	Direct Drop Fulfillment				Warehouse Fulfillment			Total
	Air	Land	Multiple	Sea	Air	Land	Sea	
TO1	191	177	489	316	171	233	272	201
Adult ARV	238		471	249	165	215	332	240
Condoms	167	826	506	358	167		254	371
HIV RTK	78							78
Laboratory	170	183		319				178
Other Non-Pharma	241	106		319				165
Other Pharma	172	559		338	36			303
Other RTK	203							203
Pediatric ARV	232			299	211	282	211	235
TB HIV	221			254				232
VMMC	131	87		150	89		91	113
TO2	324	550		388		449		374
ACTs	320			415		456		379
Laboratory	258							258
LLINs		560		344				370
mRDTs	278			464				396
Other Non-Pharma	522			470				496
Other Pharma	329							329
Severe Malaria Meds	359			258				332
SP	397	512				423		430
TO3	203		346	327	279	369	233	273
Combined Oral Contraceptives			346	284	437	369	201	282
Emergency Oral Contraceptives	235							235
Implantable Contraceptives	190			535	275		318	343
Injectable Contraceptives	165			193	217		176	183
Other Non-Pharma				176				176
Progestin Only Pills					278		340	294
Standard Days Method	267			192				242

A3. Average overall cycle time by product group, fulfillment channel, and transportation mode (TO4)

Fulfillment Channel Product Category	Direct Drop Fulfillment Sea	Total
Other Non-Pharma	330	330
Other Pharma	259	259
Total	306	306

Data notes

▲ Data on overall cycle start and end dates are complete for all line items delivered this quarter. However, internal milestone data may not be complete for some line items. In these cases, line items with incomplete data are excluded from the segment averages. For this reason, the sum of all segments may not be equal to the overall average per task order and fulfillment channel, especially in earlier reporting periods.

Overall cycle time is defined as the number of days between when a customer order is submitted to when the shipment is actually delivered to the customer, inclusive of the start/end days and all holds or other dwell times. The project is implementing new dwell tracking procedures, with the intent of reporting dwell-adjusted cycle time by FY2020.

Quarterly indicator targets are effective beginning FY2018 Q4.

Average cycle times by process segment

Fulfillment channel	Clarify and Source	USAID Approval	Process PO/DO	Manufacture/Prepare and Pick Up Order	Manufacture	Pick Up	Deliver
Direct drop fulfillment	61	8	42		70	34	31
TO1	52	3	44		67	25	26
TO2		42	22		84	63	44
TO3		3	70		73	16	43
TO4	17	7	130		80	53	86
Warehouse fulfillment	87	3	99	38	0	73	24
TO1	65	3	95	34			25
TO2		3	175	37	0	73	4
TO3		2	88	47			28
Total	64	8	48	86			30

Quality Assurance Performance (TO2 only)

Current Reporting Period

2020-Q1



A2. QA processes completed within required lead times

Task Order	Total # of QA processes completed	% QA Processes On Time	A2 Target
TO2	48	94%	80%
ACTs	14	100%	80%
LLINs	18	100%	80%
mRDTs	1	100%	80%
Other Pharma	2	50%	80%
Severe Malaria Meds	8	100%	80%
SMC	2	0%	80%
SP	3	100%	80%

A13. Out-of-specification percentage

Task Order	Total # of batches tested	Out-of-specification percentage	A13 Target
TO2	163	1.2%	1%
ACTs	37	2.7%	1%
LLINs	24	0.0%	1%
mRDTs	1	0.0%	1%
Other Pharma	2	0.0%	1%
Severe Malaria Meds	31	0.0%	1%
SMC	38	0.0%	1%
SP	30	3.3%	1%

Data notes



All QA activities for TO2 are conducted by GHSC-PSM. All QA activities for TO1, TO3, and TO4 are managed by the USAID GHSC-QA contract. GHSC-QA may be contacted for data related to these TOs.

Exceptional procedures outside of routine QA testing and clearance are excluded from indicator A2. This includes consignments requiring QA investigations, method transfers, non-PMI procurements, post-shipment quality control, and LLIN shipments requiring witnessing of loading and/or sealing of goods.

Quarterly indicator targets are effective beginning FY2018 Q4.

Ref	Analysis
A02	Performance for TO2 QA laboratory vendors remained strong this quarter, with 94 percent of routine processes completed within the required lead times. While overall number of consignments requiring QA was down this quarter, some of the consignments were large, especially in the SMC category. This caused some congestion for those products that delayed timely completion of the necessary processes. Looking forward, the TO2 QA team is working closely with the malaria procurement team to plan method transfers to accommodate upcoming testing demand, especially for AL products and artesunate injectables.
A13	The project confirmed two instances of out-of-specification findings this quarter. The first involved SP for a country that requires sole-source procurement from a domestic manufacturer who is not WHO-prequalified. GHSC-PSM procured through a wholesaler, which implemented extra testing and necessary precautions due the higher risk of using a non-prequalified supplier. The wholesaler has put the supplier on hold until the manufacturing concerns at the root of the quality finding are resolved. Batches that passed QA testing were shipped to fulfill the order, and the country is not at risk of stocking out. The second finding was for a lot of ASAQ, which failed a hardness test. All other lots in the consignment passes and were delivered to the country.
A14b	QA lab performance overall has improved from 85 to 90 percent, while customer service scores decreased from 96 to 88 percent. The scorecard weightings this quarter have been adjusted to place more emphasis on on-time provision of lab test reports (up from 42.5 to 47.5 percent of the score), and less emphasis on ensuring exact invoice accuracy upon initial submission (down from 15 to 10 percent of the score).

Warehouse Performance and Product Losses

Current Reporting Period

2020-Q1



A8. Shelf life remaining

Task Order	Inventory Balance	% Shelf Life Remaining	Shelf life target
TO1	\$104,788,078	82%	78%
TO2	\$21,697,296	69%	70%
TO3	\$58,668,600	84%	77%
Total	\$185,153,973	78%	

Ref	Analysis
A08	GHSC-PSM's remaining shelf life indicators focuses on all items that are in the RDC as part of the ACT emergency stockpile. At the close of Q1, the project had just under \$147,000 in emergency ACTs in stock, with a remaining shelf life of 74 percent. This a decrease from last quarter but still above the target of 70 percent.
A08	Overall shelf life remaining for family planning items was 83 percent, which is unchanged from the previous quarter. This continues a consistent performance above the target of 78 percent. The overall inventory balance in the RDC decreased by \$2.5 million.
A08	Shelf life remaining for HIV products increased this quarter to 83 percent, up from 77 percent the previous quarter. This increase surpasses the target of 78 percent. The increase is largely driven by a significant increase in fresh 90-pill bottles of TLD, with about \$10 million of product landing in the RDC this quarter.
C07a	TO1 had expiries of some ARVs this quarter. The expiries occurred due to direct drop stock order canceled by a country that was re-routed back to the RDC. Due to country-specific labeling requirements, reallocation of the stock was not possible. The total loss represents less than 0.01 percent of the average inventory balance.
C07a	TO2 had no expiries during the quarter.
C07a	TO3 had expiries of combined oral contraceptives this quarter. The expiry in the RDC was driven by significant reduction in global demand since 2017. The product is approved by the COR for destruction. The total loss represents less than 2 percent of the overall average inventory balance for TO3. As mentioned in previous quarterly reports, this expiry was anticipated for some time.
C07b	The most common forms of product loss continue to be damage or discrepancies that occur during transit through the global supply chain, which affect relatively small proportions of GHSC-PSM's order volume. These types of losses are typical for large supply chain operations. In one larger incident, a portion of a shipment of 500,000 LLINs bound for South Sudan was reported missing after a visibly damaged shipping container was left in Mombasa to undergo inspection. Upon first inspection, a portion of the container's LLINs were reported missing (valued \$3,734). While the container awaited release in Mombasa, the project received word that additional LLINs were missing (valued at \$34,848). The 3PL accepted responsibility for all missing LLINs and the project received reimbursement in October 2019

C7a and C7b. Product loss due to expiry, theft, damage and other causes while in GHSC-PSM control

Task Order	Country	Type of Loss	Product Group	Loss Value	Loss Denominator	% Loss
TO2	RDC	Damage	ACTs	\$3,189	\$6,020,957	0.05%
TO2	Sierra Leone	Damage	ACTs	\$1,296	\$428,334	0.30%
TO1	Ethiopia	Damage	ARVs	\$320	\$2,193,441	0.01%
TO1	RDC	Damage	ARVs	\$84	\$49,876,336	0.00%
TO3	RDC	Damage	Combined oral contraceptives	\$232	\$3,601,295	0.01%
TO2	RDC	Damage	Severe Malaria Meds	\$26	\$5,489,667	0.00%
TO2	RDC	Damage	SMC	\$15	\$5,489,667	0.00%
TO1	RDC	Expiry	ARVs	\$1,750	\$29,207,876	0.01%
TO3	RDC	Expiry	Combined oral contraceptive	\$146,016	\$11,166,572	1.31%
TO1	RDC	Missing product	Condoms	\$71	\$49,876,336	0.00%
TO2	South Sudan	Missing product	LLINs	\$38,582	\$2,500,000	1.54%

Data notes

Average inventory balance (A4 and C7a denominator) is calculated using the ending balance at the close of each month.

Expired inventory is excluded from shelf life calculations (A8). It is reported under product loss.

Quarterly indicator targets are effective beginning FY2018 Q4. Per the project M&E plan, no targets are required for product loss indicators (C7a and C7b).

Task Order 1 inventory includes all condoms. GHSC-PSM does not hold any inventory for Task Order 4.

Procurement Performance

Current Reporting Period

2020-Q1



A10. Framework contract percentage

Task Order ▲	Procurement total	Framework contract percentage	Framework contract target
TO1	\$220,675,763	91%	80%
TO2	\$28,334,121	37%	40%
TO3	\$8,942,405	100%	95%
TO4	\$38,522	57%	75%
Total	\$257,990,810	85%	NA

A10. Product-level detail

Task Order	Framework contract percentage	Procurement total
TO1	91%	\$220,675,763
Adult ARV	100%	\$143,929,639
Condoms	100%	\$1,727,835
Laboratory	48%	\$34,498,314
Other Non-Pharma	14%	\$2,507,807
Other Pharma	100%	\$476,942
Other RTK	12%	\$268,520
Pediatric ARV	100%	\$27,209,936
TB HIV	100%	\$4,080,335
VMMC	100%	\$5,976,433
TO2	37%	\$28,334,121
ACTs	100%	\$1,409,599
Laboratory	93%	\$23,633
LLINs	0%	\$17,723,550
mRDTs	99%	\$2,366,673
Other Non-Pharma	100%	\$139,552
Other Pharma	100%	\$15,000
Severe Malaria Meds	100%	\$900,318
SMC	100%	\$5,351,715
SP	100%	\$404,080

A10. Product-level detail

Task Order	Framework contract percentage	Procurement total
TO3	100%	\$8,942,405
Combined Oral Contraceptives	100%	\$812,367
Implantable Contraceptives	100%	\$5,031,420
Injectable Contraceptives	100%	\$2,894,063
Standard Days Method	100%	\$204,555
TO4	57%	\$38,522
Laboratory	57%	\$38,522

Analysis



HIV procurement value rose substantially this quarter, driven by a massive push in adult and pediatric ARV procurement both to stock the RDCs and to fulfill direct drop orders to countries. The framework contract percentage for HIV products rose to 91 percent with the boost from ARV procurements, all of which are executed under IDIQs. Within the laboratory category, framework contracting held steady at 48 percent. Use of framework contracts for lab varies from quarter to quarter depending on the countries and products that release orders. Moving forward, however, the highest value procurements for viral load and EID testing will fall under central framework contracts, reducing non-framework procurements in this commodity area.

Malaria procurement value rose slightly this quarter, while framework contracting fell to 37 percent. This is due to an increase in procurement volume for LLINs, the value of which increased more than 80 percent from FY 2019 Q4 to FY 2020 Q1. As of the end of the quarter, long-term agreements for LLINs are now in place, with the first POs expected to be issued in Q2. The new procurement mechanism should drive increases in this indicator throughout the remainder of the fiscal year.

Procurements for maternal, child health and Zika commodities were minimal this quarter, totaling less than \$40,000. Procurements included medical supplies purchased under a basic ordering agreement (framework) and rapid diagnostic tests for hepatitis C, purchased using a simplified purchase agreement (non-framework).

TO3 continues to procure all items under framework contracts, per the sourcing strategy for these commodities.

Data notes



Procurement totals are equal to the total value of all line items procured from vendors each period. This includes Purchase Orders and warehouse Replenishment Orders. Distribution Orders released from the RDCs to countries are not counted, as these quantities are already included when the items are first purchased as Replenishment Orders.

Framework contracts include indefinite delivery, indefinite quantity contracts (IDIQs), blanket purchase agreements (BPAs), and basic ordering agreements (BOAs). Non-framework contracts include firm fixed price and fixed unit price subcontracts, simplified purchase agreements, and other types of one-off purchase orders.

Commodities are considered "purchased" if the "PO Released for Fulfillment Date" in ARTMIS falls within the reporting period.

Registration Waivers

A7. Temporary registration waiver percentage

Task Order	Temporary registration waiver percentage	Total # of line items delivered
TO2	8.8%	147
ACTs	0.0%	67
LLINs	0.0%	34
mRDTs	0.0%	19
Severe Malaria Meds	86.7%	15
SP	0.0%	5
Laboratory	0.0%	4
Other Non-Pharma	0.0%	2
Other Pharma	0.0%	1
SMC		0
TO3	5.9%	51
Implantable Contraceptives	0.0%	16
Combined Oral Contraceptives	7.1%	14
Injectable Contraceptives	18.2%	11
Progestin Only Pills	0.0%	4
Standard Days Method	0.0%	3
Other Non-Pharma	0.0%	2
Emergency Oral Contraceptives	0.0%	1
Copper-Bearing Intrauterine Devices		0
Total	8.1%	198

Analysis

The use of temporary registration waivers to import malaria products dipped slightly this quarter. All of the products requiring a waiver were severe malaria medicines, encompassing line items delivered to eight different countries.

The use of temporary registration waivers to import family planning items fell to 5.9 percent of line items this quarter. This represents two line items of DMPA-IM for Haiti, and one combined oral contraceptives line item for Afghanistan. In the case of Haiti, there is currently no functional registration agency or body in place. Any unregistered products will continue to require the use of waivers, as new registrations cannot be processed. For oral contraceptives in Afghanistan, and many other countries, a decrease in demand (in favor of LARCs) has led many manufacturers to deprioritize registration efforts for OCs. GHSC-PSM and GHSC-QA are working strategically to communicate USAID priorities and forecast demand to help vendors target their registration efforts, but the need to use occasional waivers for this group of products is likely to continue.

Supply Plan Submissions

Current Reporting Period

2020-Q1



B6. Quarterly supply plan submission rate to GHSC-PSM HQ

Product Group	# of supply plans required	Supply plan submission rate	Submission target
ARVs	18	100%	85%
Condoms	18	100%	85%
FP commodities	18	100%	85%
Lab (HIV diagnostics)	16	81%	85%
Malaria commodities	28	86%	75%
MCH commodities	7	100%	65%
RTKs	17	100%	85%
TPT	14	79%	
VMMC	6	67%	65%
Total	142		

Analysis

Malaria supply plan submissions reached their highest rate since the expanded mandate, with 86 percent of countries submitting the required plans. The four countries that did not submit in time included two non-GHSC-PSM-presence countries and two countries with very small regional field offices.

Supply plan submissions for family planning commodities and condoms remained strong this quarter, with 100 percent of supply plans submitted for both product groups.

Supply plan submissions for HIV product categories was strong this quarter, with 100 percent of require plans submitted for ARVs, RTKs, and condoms. Submissions for VMMC exceeded the target as well. Submissions for lab items continues to be very close to the target, with plans missing from only three countries. USAID also introduced a new category of required supply plans this quarter, for tuberculosis preventive treatment (TPT) products. Fourteen countries are now required to submit a TPT supply plan to GHSC-PSM headquarters, 70 percent of which were able to do so this quarter.

Supply plan submissions for maternal and child health commodities maintained performance at 100 percent this quarter. This quarter, one new country, Malawi, was added to the list of countries that are required to submit for MCH.

Supply Plan and Forecast Performance

Current Reporting Period

2020-Q1



A6a. Supply plan error - HIV Products

Product Category ▲	Supply plan/ forecast error	Supply plan/ forecast bias	4-quarter error	Annual APE Target	4-quarter bias
Adult ARV	19%	10%	10%	26%	7%
Condoms	35%	10%	14%	34%	9%
Laboratory	22%	13%	26%	29%	26%
Pediatric ARV	39%	-4%	12%	26%	-2%

A6a. Supply plan error - Malaria products

Product Category ▲	Supply plan/ forecast error	Supply plan/ forecast bias	4-quarter error	Annual APE Target	4-quarter bias
ACTs	210%	-210%	41%	35%	-41%
mRDTs	7%	7%	28%	35%	-28%

A6b. Forecast error - Family Planning products

Product Category ▲	Supply plan/ forecast error	Supply plan/ forecast bias	4-quarter error	Annual APE Target	4-quarter bias
Combined Oral Contraceptives	2%	2%	17%	30%	17%
Copper-bearing Intrauterine Devices	0%	0%	33%	30%	-33%
Implantable Contraceptives	0%	0%	23%	30%	23%
Injectable Contraceptives	16%	16%	38%	30%	38%
Progestin Only Pills	0%	0%	3%	30%	3%

Analysis

The project had notable forecasting success for family planning this quarter, achieving 0 percent error for copper-bearing IUDs, progestin-only pills, and implants, and only 2 percent error for combined oral contraceptives. Progestin-only pills and IUDs had few orders and small volumes, which are easier to plan and manage, but the low error rates for COCs and implants were achieved in the context of supply constraints and increased uncertainty. The team credits the global allocation process managed by the Coordinated Supply Planning Group (CSP) of the Reproductive Health Supplies Coalition, as well as improved proactive order management between GHSC-PSM field offices and headquarters. While not as low as other products, the quarterly error rate for injectables also fell this quarter, from 76 percent to 16 percent. Variance was driven by orders for Angola and Bangladesh, which went through numerous revisions of requested delivery dates and order quantities due to funding complications and demand clarifications. Finally, condoms saw an elevated error rate this quarter due to unplanned orders from DRC. Despite this, the rolling four-quarters error measure fell to just 2 percent, as increased ordering this quarter made up for lower demand in previous quarters.

Supply plan error for HIV laboratory items fell to its lowest rate, at only 4 percent. On a rolling four-quarters basis, error is down to 9 percent. Performance on this indicator has been steadily improving over the life of the project, as the HQ and field office planning team have worked together to refine guidance and tools to better plan for these orders. The Office of the Global AIDS Coordinator (OGAC) has also been supportive and shared guidance with USAID Missions to drive better use of FASP tools for lab commodities.

Supply plan error for condoms increased this quarter due to large unplanned orders originating from DRC. Overall, the overordering this quarter had the effect of narrowing four-quarters error to only 2 percent, as the increased demand this quarter balanced out lower demand in the last two periods.

Supply plan error for adult ARVs rose this quarter, as the project mobilized to meet accelerated demand for TLD. Requests exceeded the planned totals, with several countries placing TLD orders that were not initially in supply plans or were significantly larger than planned. This was driven mainly by the push for a faster than anticipated transition to multi-month dispensing (MMD) presentations. In light of the increased demand, the project pursued a modified rollout and fulfillment strategy across vendors and project teams, including Strategy, Procurement, and Plan, to schedule deliveries to meet the demand and prevent lack of product scenarios. Supply plan error for pediatric ARVs was consistent with the previous quarter. Variance for these products has been elevated, as pediatric regimens are also undergoing their own transitions at this time, causing plans and orders to shift.

Supply plan error for ACTs spiked this quarter, due mainly to large shifts in planned orders for Burundi. Following changes in national malaria treatment guidelines, Burundi converted all its planned orders of ASAQ to AL. The team also staggered their delivery requests over the course of the year, instead of clustering them all in Q1 as initially planned. This was in response to new malaria procurement guidance, which proposes staggered deliveries of some products to achieve more consistent supply, highest possible shelf life, and smoother order and logistics processing. The upshot of these changes was high supply plan error in the short term, which may continue as countries adapt to the new guidelines. However, the project expects improved outcomes in the longer term.

For mRDTs, supply plan error fell to only 7 percent, with orders slightly exceeding planned quantities. After a few quarters of overforecasting, the boost in demand this quarter helped bring down the four-quarters rolling error rate to 28 percent, within the targeted range.

Vendor Performance

Current Reporting Period

2020-Q1



A14a-c. Average vendor rating score

Vendor Type ▲	Average vendor rating
Commodity Supplier	80%
Freight Forwarder	85%
QA Lab	90%

Analysis



Supplier OTIF performance improved noticeably this quarter from 71 to 80 percent, breaking above the trend line from the previous year.

Freight forwarder (3PL) performance stayed constant, ticking up from 84 to 85 percent overall. Spot quote turnaround time saw a notable decrease from 75 to 59 percent, however. One 3PL was not participating in quotes for most of the quarter, leading to a higher volume for the other vendors in a quarter that saw many complex orders.

QA lab performance overall has improved from 85 to 90 percent, while customer service scores decreased from 96 to 88 percent. The scorecard weightings this quarter have been adjusted to place more emphasis on on-time provision of lab test reports (up from 42.5 to 47.5 percent of the score), and less emphasis on ensuring exact invoice accuracy upon initial submission (down from 15 to 10 percent of the score).

Data notes

Per the GHSC-PSM M&E plan, targets are not required for vendor performance indicators.

Complete Quarterly Results (TO1)

Reporting Period

2020-Q1

▼

A1a. OTIF rate

A1b. OTD rate

A16. Backlog percentage

A10. Framework contracting

Task Order	OTIF	Total # of Line Items Delivered	OTD	Total # of Line Items with ADDs in the quarter	Backlog	Total # of line items with ADDs in the last 12 months	Framework contract percentage	Procurement total
TO1	90%	879	94%	872	0.8%	3,742	91%	\$220,675,763
Adult ARV	92%	118	98%	116	0.3%	389	100%	\$143,929,639
Condoms	77%	30	85%	27	0.0%	200	100%	\$1,727,835
Food and WASH			0%	1	100.0%	1		
HIV RTK	50%	2	50%	2	0.0%	2		
Laboratory	89%	526	92%	517	0.9%	2,090	48%	\$34,498,314
Other Non-Pharma	99%	68	96%	75	0.7%	401	14%	\$2,507,807
Other Pharma	94%	36	97%	34	0.4%	240	100%	\$476,942
Other RTK	100%	3	100%	3	0.0%	8	12%	\$268,520
Pediatric ARV	87%	70	97%	70	0.8%	262	100%	\$27,209,936
TB HIV	89%	9	80%	10	0.0%	21	100%	\$4,080,335
Vehicles and other equipment					0.0%	5		
VMMC	100%	17	100%	17	2.4%	123	100%	\$5,976,433
Total	90%	879	94%	872	0.8%	3,742	91%	\$220,675,763

A6a and A6b. Absolute percent supply plan or forecast error

A6 Indicator	Supply plan/ forecast error	Supply plan/ forecast bias	4-quarter error	4-quarter bias
A6a - Supply plan error				
Adult ARV	64%	64%	23%	23%
Laboratory	4%	4%	9%	9%
Pediatric ARV	36%	36%	17%	17%
A6b - Forecast Error				
Condoms	51%	51%	2%	2%

B6. Quarterly supply plan submissions

Product Group	Supply plan submission rate	# of supply plans required
ARVs	100%	18
Condoms	100%	18
Lab (HIV diagnostics)	81%	16
RTKs	100%	17
VMMC	67%	6

A3. Cycle time (average)

Fulfillment Channel	Direct Drop Fulfillment				Warehouse Fulfillment			Total
Task Order	Air	Land	Multiple	Sea	Air	Land	Sea	
TO1	191	177	489	316	171	233	272	201
Adult ARV	238		471	249	165	215	332	240
Condoms	167	826	506	358	167		254	371
HIV RTK	78							78
Laboratory	170	183		319				178
Other Non-Pharma	241	106		319				165
Other Pharma	172	559		338	36			303
Other RTK	203							203
Pediatric ARV	232			299	211	282	211	235
TB HIV	221			254				232
VMMC	131	87		150	89		91	113
Total	191	177	489	316	171	233	272	201

C7a and C7b. Product loss due to expiry, theft, damage, and other causes

Country	Type of Loss	Product Group	Loss Value	Loss Denominator	% Loss
Ethiopia	Damage	ARVs	\$320	\$2,193,441	0.01%
RDC	Damage	ARVs	\$84	\$49,876,336	0.00%
RDC	Expiry	ARVs	\$1,750	\$29,207,876	0.01%
RDC	Missing product	Condoms	\$71	\$49,876,336	0.00%

A8. Shelf life remaining

% Shelf Life Remaining	Inventory Balance
83%	\$29,038,930

Crosscutting indicators

A14. Average vendor ratings

Vendor Type	Average vendor rating
Commodity Supplier	80%
Freight Forwarder	85%

Complete Quarterly Results (TO2)

Reporting Period

2020-Q1

▼

	A1a. OTIF rate		A1b. OTD rate		A16. Backlog		A7. Waiver percentage		A10. Framework contracting		A2. QA processes on time		A13 Out-of-spec		A15. QA reports	
Task Order	OTIF	Total # of Line Items Delivered	OTD	Total # of Line Items with ADDs in the quarter	Backlog	Total # of line items with ADDs in the last 12 months	Temporary registration waiver percentage	Total # of line items delivered	Framework contract percentage	Procurement total	% QA Processes On Time	Total # of QA processes completed	Out-of-specification percentage	Total # of batches tested	Report submissions	# of reports due
TO2	87%	147	91%	147	0.7%	816	8.8%	147	37%	\$28,334,121	94%	48	1.2%	163		
ACTs	96%	67	97%	69	0.0%	361	0.0%	67	100%	\$1,409,599	100%	14	2.7%	37		
Laboratory	75%	4	0%	3	4.5%	67	0.0%	4	93%	\$23,633						
LLINs	82%	34	86%	29	2.1%	97	0.0%	34	0%	\$17,723,550	100%	18	0.0%	24		
mRDTs	89%	19	100%	20	0.0%	116	0.0%	19	99%	\$2,366,673	100%	1	0.0%	1		
Other Non-Pharma	0%	2	0%	2	4.3%	23	0.0%	2	100%	\$139,552						
Other Pharma	100%	1	100%	1	0.0%	9	0.0%	1	100%	\$15,000	50%	2	0.0%	2		
Severe Malaria Meds	67%	15	89%	18	0.0%	75	86.7%	15	100%	\$900,318	100%	8	0.0%	31		
SMC					0.0%	22		0	100%	\$5,351,715	0%	2	0.0%	38		
SP	100%	5	100%	5	0.0%	46	0.0%	5	100%	\$404,080	100%	3	3.3%	30		
Total	87%	147	91%	147	0.7%	816	8.8%	147	37%	\$28,334,121	94%	48	1.2%	163		

A3. Cycle time (average)

Fulfillment Channel Task Order	Direct Drop Fulfillment			Warehouse Fulfillment Land	Total
	Air	Land	Sea		
TO2	324	550		388	449
ACTs	320			415	456
Laboratory	258				258
LLINs		560		344	370
mRDTs	278			464	396
Other Non-Pharma	522			470	496
Other Pharma	329				329
Severe Malaria Meds	359			258	332
SP	397	512			423
Total	324	550		388	449

A14. Average vendor ratings

Crosscutting indicators

Vendor Type	Average vendor rating
Commodity Supplier	80%
Freight Forwarder	85%

C7a and C7b. Product loss due to expiry, theft, damage, and other causes

Country	Type of Loss	Product Group	Loss Value	Loss Denominator	% Loss
RDC	Damage	ACTs	\$3,189	\$6,020,957	0.05%
Sierra Leone	Damage	ACTs	\$1,296	\$428,334	0.30%
RDC	Damage	Severe Malaria Meds	\$26	\$5,489,667	0.00%
RDC	Damage	SMC	\$15	\$5,489,667	0.00%
South Sudan	Missing product	LLINs	\$38,582	\$2,500,000	1.54%

A6a. Absolute percent supply plan error

A6 Indicator	Supply plan/ forecast error	Supply plan/ forecast bias	4-quarter error	4-quarter bias
A6a - Supply plan error				
ACTs	210%	-210%	41%	-41%
mRDTs	7%	7%	28%	-28%

B6. Quarterly supply plan submissions

Product Group	Supply plan submission rate	# of supply plans required
Malaria commodities	86%	28

A8. Shelf life remaining

% Shelf Life Remaining	Inventory Balance
74%	\$146,664

A14. Average vendor rating - QA labs

Average vendor rating
254%

Complete Quarterly Results (TO3)

Reporting Period

2020-Q1



Task Order	A1a. OTIF rate		A1b. OTD rate		A16. Backlog percentage		A10. Framework contracting	
	OTIF	Total # of Line Items Delivered	OTD	Total # of Line Items with ADDs in the quarter	Backlog	Total # of line items with ADDs in the last 12 months	Framework contract percentage	Procurement total
TO3	86%	51	89%	54	0.0%	229	100%	\$8,942,405
Combined Oral Contraceptives	71%	14	80%	15	0.0%	34	100%	\$812,367
Copper-Bearing Intrauterine Devices					0.0%	22		
Emergency Oral Contraceptives	100%	1	100%	1	0.0%	11		
Implantable Contraceptives	88%	16	89%	18	0.0%	63	100%	\$5,031,420
Injectable Contraceptives	100%	11	100%	11	0.0%	49	100%	\$2,894,063
Other Non-Pharma	100%	2	100%	2	0.0%	20		
Progestin Only Pills	75%	4	75%	4	0.0%	25		
Standard Days Method	100%	3	100%	3	0.0%	5	100%	\$204,555
Total	86%	51	89%	54	0.0%	229	100%	\$8,942,405

A6b. Absolute percent forecast error

A6 Indicator	Supply plan/ forecast error	Supply plan/ forecast bias	4-quarter error	4-quarter bias
A6b - Forecast Error				
Combined Oral Contraceptives	2%	2%	17%	17%
Condoms	51%	51%	2%	2%
Copper-bearing Intrauterine Devices	0%	0%	33%	-33%
Implantable Contraceptives	0%	0%	23%	23%
Injectable Contraceptives	16%	16%	38%	38%
Progestin Only Pills	0%	0%	3%	3%

A7. Temporary Waiver Percentage

Task Order	Temporary registration waiver percentage	Total # of line items delivered
TO3	5.9%	51
Combined Oral Contraceptives	7.1%	14
Copper-Bearing Intrauterine Devices		0
Emergency Oral Contraceptives	0.0%	1
Implantable Contraceptives	0.0%	16
Injectable Contraceptives	18.2%	11
Other Non-Pharma	0.0%	2
Progestin Only Pills	0.0%	4
Standard Days Method	0.0%	3
Total	5.9%	51

A3. Cycle time (average)

Fulfillment Channel	Direct Drop Fulfillment			Warehouse Fulfillment			Total
Task Order	Air	Multiple	Sea	Air	Land	Sea	
TO3	203	346	327	279	369	233	273
Combined Oral Contraceptives		346	284	437	369	201	282
Emergency Oral Contraceptives	235						235
Implantable Contraceptives	190		535	275		318	343
Injectable Contraceptives	165		193	217		176	183
Other Non-Pharma			176				176
Progestin Only Pills				278		340	294
Standard Days Method	267		192				242
Total	203	346	327	279	369	233	273

C7a and C7b. Product loss due to expiry, theft, damage, and other causes

Country	Type of Loss	Product Group	Loss Value	Loss Denominator	% Loss
RDC	Damage	Combined oral contraceptives	\$232	\$3,601,295	0.01%
RDC	Expiry	Combined oral contraceptive	\$146,016	\$11,166,572	1.31%

B6. Quarterly supply plan submissions

Product Group	Supply plan submission rate	# of supply plans required
Condoms	100%	18
FP commodities	100%	18

A8. Shelf life remaining

% Shelf Life Remaining	Inventory Balance
83%	\$11,020,556

Crosscutting indicators

A14. Average vendor ratings

Vendor Type	Average vendor rating
Commodity Supplier	80%
Freight Forwarder	85%

Complete Quarterly Results (TO4)

Reporting Period

2020-Q1

▼

A1a. OTIF rate

A1b. OTD rate

A16. Backlog percentage

A10. Framework contracting

Task Order	OTIF	Total # of Line Items Delivered	OTD	Total # of Line Items with ADDs in the quarter	Backlog	Total # of line items with ADDs in the last 12 months	Framework contract percentage	Procurement total
T04	100%	3	100%	1	0.0%	585	57%	\$38,522
Laboratory					0.0%	52	57%	\$38,522
Other Non-Pharma	100%	2			0.0%	220		
Other Pharma	100%	1	100%	1	0.0%	305		
Other RTK					0.0%	3		
TB HIV					0.0%	5		
Total	100%	3	100%	1	0.0%	585	57%	\$38,522

B6. Quarterly supply plan submissions

Product Group	Supply plan submission rate	# of supply plans required
MCH commodities	100%	7

Crosscutting indicators

A14. Average vendor ratings

Vendor Type	Average vendor rating
Commodity Supplier	80%
Freight Forwarder	85%

A3. Cycle time (average)

Task Order	Direct Drop Fulfillment	Total
T04	306	306
Other Non-Pharma	330	330
Other Pharma	259	259
Total	306	306

Indicator Details

Check out the [GHSC-PSM IDIQ M&E Plan](#) for complete details on all our indicators.

Delivery Indicators

Indicator Code	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
A01a	On Time, In Full Delivery (OTIF) - Percentage of line items delivered on time and in full, within the minimum delivery window (within -14/+7 calendar days of the agreed delivery date (ADD))	Number of line items delivered to the recipient on time and in full during the quarter	Total number of line items delivered to the recipient during the quarter	ARTMIS	Quarterly	Lines items are considered on-time and in-full if the full ordered quantity of the line item is delivered to the recipient within the -14/+7 day delivery window. If the line item is partially delivered within the window, it may be considered on-time but not in-full.
A01b	On Time Delivery (OTD) — Percentage of line items delivered on time, within the minimum delivery window (within -14/+7 calendar days of the agreed delivery date (ADD))	Number of line items with an ADD during the quarter that were delivered to the recipient on time	Total number of line items with an ADD during the quarter	ARTMIS	Quarterly	
A16	Percentage of backlogged line items	Number of line items with an ADD on or before the reporting period end date, within a rolling 12-month period, that have not been cancelled or put on hold and that are currently undelivered and late	Total number of line items with an ADD on or before the reporting period end date, within a rolling 12-month period, that have not been cancelled or put on hold	ARTMIS	Quarterly	

Cycle time Indicators

Indicator Code	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
A03	Cycle time (average)	Sum of cycle time for all line items delivered during the quarter	Count of all line items delivered during the quarter	ARTMIS	Quarterly	Overall cycle time is defined as the number of days between when a customer order is submitted to when the shipment is actually delivered to the customer, inclusive of the start/end days and all holds or other dwell times. The project is implementing new dwell tracking procedures, with the intent of reporting dwell-adjusted cycle time by FY2020.

Indicator Details

Check out the [GHSC-PSM IDIQ M&E Plan](#) for complete details on all our indicators.

Quality Assurance Indicators

Indicator Code	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
A02	Percentage of QA processes completed within the total estimated QA lead times (on-time completion rate for QA processes)	Number of consignments complying with the pre-established QA lead times during the quarter	Total number of consignments requiring QA processes that were cleared for shipment during the quarter	QA Database	Quarterly	Consignment is defined as a shipment of commodities, including one or more line items. QA process transactions are managed at the consignment level, regardless of the number of line items in the consignment.
A13	Percentage of batches of product for which the final result is showing nonconformity (out of specification percentage)	Total number of batches of product showing nonconformity during the quarter	Total number of batches tested during the quarter	QA Database	Quarterly	
A14b	Average vendor rating score - QA lab services	Sum of all key vendor ratings.	Number of key vendors from whom GHSC-PSM procured lab testing services during the quarter	QA scorecard	Quarterly	All vendors are equally weighted in the overall score, regardless of procurement volume from each vendor.
A15	Percentage of quality assurance Investigation reports submitted within 30 calendar days of outcome determination (QA investigation report submission)	Number of QA investigation reports submitted to PMI within 30 days of outcome determination	Total number of QA investigation reports due during the reporting period	QA Database, email submissions	Semiannual	

Procurement Indicators

Indicator Code	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
A07	Percentage of line items imported using a temporary registration waiver (temporary waiver percentage)	Number of line items that were imported using a temporary registration waiver	Total number of line items delivered to the recipient during the quarter	Supplier registration bidding documentation	Quarterly	
A10	Percentage of product procured using a framework contract (framework contract percentage)	Value of product purchased through framework contracts during the quarter	Total value of commodities purchased during the quarter	ARTMIS	Quarterly	

Indicator Details

Check out the [GHSC-PSM IDIQ M&E Plan](#) for complete details on all our indicators.

Forecast and Supply Planning Indicators

Indicator Code ▲	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
A06a	Absolute percent supply plan error, with variants annual absolute percent error and supply plan bias	Absolute value of the differences between the actual quantities with requested delivery dates during the quarter minus the quantities planned for delivery according to country supply plans	Sum of the actual quantities with requested delivery dates during the quarter	ARTMIS, Country Supply Plans	Quarterly	Supply plan error is currently calculated for adult and pediatric ARVs, HIV lab products, ACTs, and malaria rapid diagnostic tests. Planned quantities are drawn from an aggregation of country supply plans submitted in the prior quarter, including only the quantities that are forecasted to be procured through GHSC-PSM. Actual quantities are derived based on the requested delivery dates for products included in customer ROs submitted to ARTMIS.
A06b	Absolute percent forecast error, with variants annual absolute percent error and forecast bias	Absolute value of the differences between the actual quantities with requested delivery dates during the quarter minus the quantities planned for delivery according to the global demand forecast	Sum of the actual quantities with requested delivery dates during the quarter	ARTMIS, Country Supply Plans, PPMR, other sources	Quarterly	Forecast error is currently calculated for condoms and contraceptives. Forecasted or planned quantities are drawn from the GHSC-PSM global demand forecasts for each product, which are based on an aggregation of country supply plans submitted in the prior quarter and additional inputs, such as country order history, data from coordinated planning groups, and global market dynamics indicators. Actual quantities are derived based on the requested delivery dates for products included in customer ROs submitted to ARTMIS.

Warehouse Indicators

Indicator Code ▲	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
A04	Inventory turns (average number of times inventory cycles through GHSC-PSM controlled global facilities)	Total ex-works cost of goods distributed from GHSC-PSM-controlled global inventory stocks (in USD) within the fiscal year	Average monthly inventory balance (in USD)	Inventory extract	Annual	
A08	Average percentage of shelf life remaining for warehoused commodities, weighted by the value of each commodity's stock (product at risk percentage)	Percentage of shelf life remaining at the end of the quarter, weighted by value of commodities, summed across all products	Total value of commodities, summed across all products, at the end of the quarter	Inventory extract	Quarterly	Shelf life requirements vary by country and by product.

Indicator Details

Check out the [GHSC-PSM IDIQ M&E Plan](#) for complete details on all our indicators.

3PL and Commodity Vendor Indicators

Indicator Code	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
A14a	Average vendor rating score - Commodity suppliers	Sum of all key vendor ratings	Number of key vendors from whom GHSC-PSM procured products/commodities during the quarter	ARTMIS	Quarterly	Scorecards are compiled on one-month lag, i.e. Q1 data represents vendor performance from Sept-Nov. Supplier OTIF is currently reported for high value and/or high risk suppliers. Only suppliers for which one or more order line items were fulfilled in this reporting period were included. All vendors are equally weighted in the overall score, regardless of procurement volume from each vendor.
A14c	Average vendor rating score - Freight forwarders	Sum of all key vendor ratings	Number of key vendors from whom GHSC-PSM procured freight forwarding services during the quarter	3PL scorecard	Quarterly	To allow complete data collection, freight forwarder scorecards are conducted on a one-month lag (i.e. Q1 data represents performance from Sept-Nov, rather than Oct-Dec). Overall score is weighted by delivery volume, such that vendors who deliver a greater number of shipments will have a relatively greater impact on the result.

Product Loss Indicators

Indicator Code	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
C07a	Percentage of product lost due to expiry while under GHSC-PSM control (product loss percentage)	Total value of product lost due to expiry during the quarter	Average inventory balance (in USD) during the quarter	Inventory reports	Quarterly	Expiries from the Regional Distribution Centers (RDCS) are presented in the GSC section of this report. Expiries that occur in warehouses that GHSC-PSM manages in countries are reported in the country-specific sections of this report.
C07b	Percentage of product lost due to theft, damage, or other causes, while under GHSC-PSM control (product loss percentage)	Total value of product lost due to theft, damage, or other causes during the quarter	For losses in transit: Total value (in USD) of product delivered during the quarter For losses in storage: Average inventory balance (in USD) during the quarter	GHSC-PSM Continual Improvement system reports	Quarterly	Product losses due to incidents are reported only after the actual value of the loss has been determined, which may be later than the quarter in which the incident took place or was first reported to GHSC-PSM Continual Improvement.

Indicator Details

Check out the [GHSC-PSM IDIQ M&E Plan](#) for complete details on all our indicators.

GHSC-BI&A Data Sharing Indicators

Indicator Code ▲	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
C04	Percentage of required files submitted to GHSC-BI&A in the reporting period	Number of required files submitted to BI&A during the quarter	Total number of files required for submission to BI&A during the quarter	GHSC-BI&A File Submission dashboard	Quarterly	Data requirements, including file types, data elements, submission formats, and frequency, are governed by the BI&A Information Specification for Implementing Partners (the "Infospec"). Exceptions may be specified by USAID.
C05	Percentage of required files timely submitted to GHSC-BI&A in the reporting period.	Number of required files timely submitted to BI&A during the quarter	Total number of files required for submission to BI&A during the quarter	GHSC-BI&A File Submission dashboard	Quarterly	Data requirements, including file types, data elements, submission formats, and frequency, are governed by the BI&A Information Specification for Implementing Partners (the "Infospec"). Exceptions may be specified by USAID.
C06	Average percent variance between GHSC-PSM ARTMIS and GHSC-BI&A calculations of key supply chain indicators for Task Order 1	Absolute value of GHSC-BI&A Order Performance indicator value minus GHSC-PSM ARTMIS dashboard indicator value	GHSC-PSM ARTMIS indicator value	ARTMIS, GHSC-BI&A Order Performance dashboard	Quarterly	The two indicators used to asses this variance are: 1) on-time delivery, 2) count of order lines with ADDs in the current period

Indicator Details

Check out the [GHSC-PSM IDIQ M&E Plan](#) for complete details on all our indicators.

Total Landed Cost

Indicator Code ▲	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
A05	Total Landed Cost (as a percentage of total value of commodities delivered to recipients)	Sum of all freight and logistics costs (in USD) paid by GHSC-PSM during the reporting period	Sum of the value of all commodities delivered to recipients during the reporting period	ARTMIS, Monthly Financial Statement	Semiannual	The project will also report a variant of this indicator that includes all HQ supply chain operations costs in the numerator. Quality assurance costs will be excluded from all task orders, as QA costs are not paid by GHSC-PSM for all task orders. A version of the indicator including QA costs will be reported for Task Order 2 only.

Global Advocacy Engagments

Indicator Code ▲	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
C08	Number of global advocacy engagements in support of improved availability of essential health commodities	Number of global advocacy engagements in support of improved availability of essential health commodities	NA	Project work plans, narrative reports	Semiannual	

Indicator Details

Check out the [GHSC-PSM IDIQ M&E Plan](#) for complete details on all our indicators.

Delivery Impact Indicators

Indicator Code	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
NA	Number of ACT treatments delivered	Sum of ACT treatments delivered to countries, where a treatment is equal to one blister strip		ARTMIS	Quarterly	Includes malaria treatments delivered over the life of the project, with “full dose” based on WHO-recommended treatment guidelines. Specific medicines counted are limited to those used only for treatments, and not primarily as prophylaxis. Specifically, it includes Artemether/Lumefantrine, Artesunate/Amodiaquine, and Arteminol/Piperaquine formulas.
NA	Number of Couple Years Protection delivered	Total of contraceptive method units delivered to countries, multiplied by the couple-years protection conversion factors per method, summed across all contraceptive methods delivered.		ARTMIS and USAID/MEASURE CYP conversion factors	Quarterly	CYP is a standard indicator calculated by multiplying the quantity of each contraceptive method distributed by a conversion factor to yield an estimate of the duration of contraceptive protection provided per unit of that method. The CYP for each method is then summed for all methods to obtain a total CYP figure. CYP conversion factors are based on how a method is used, failure rates, wastage, and how many units of the method are typically needed to provide one year of contraceptive protection for a couple. The calculation takes into account that some methods, e.g., condoms and oral contraceptives, may be used incorrectly and then discarded, or that intrauterine devices (IUDs) and implants may be removed before their life span is realized. This GHSC-PSM measure includes all condoms, IUDs, and hormone (oral, injectable, and implantable) contraceptives delivered over the life of the project, with the conversion factor provided by USAID/MEASURE (see https://www.usaid.gov/what-we-do/global-health/family-planning/couple-years-protection-cyp for details).
NA	Person-years of ARV treatment delivered	Sum of the monthly treatment units of adult first-line ARV treatments delivered to countries , divided by 12		ARTMIS	Quarterly	This report only includes Adult Efavirenz/Lamivudine/Tenofovir (TLE, Nevirapine/Lamivudine/Zidovudine (NLZ), and Dolutegravir/Lamivudine/Tenofovir (TLD). Doses for calculating treatments are based on World Health Organization (WHO)-recommended guidelines. The calculation of patient-years allows GHSC-PSM to monitor effectiveness and efficiency by a standard unit.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country

All



SDP Stockout Rates by Country - Overall

FY Quarter

2020-Q1

GHSC-PSM Support	Angola	Botswana	Burkina Faso	Burma	Burundi	Cambodia	Cameroun	Eswatini	Ethiopia	Ghana	Guinea	Haiti	Indonesia	Kenya	Lesotho	Liberia	Malawi	Mali	Mozambique	Namibia	Nepal	Nigeria	Pakistan	Rwanda	Sierra Leone	Zambia	Zimbabwe
Supported	32.1%	4.6%	18.2%		0.7%	7.8%	16.7%	3.6%	10.0%	6.9%	8.6%	0.6%	2.1%	38.7%	5.6%	27.4	6.0%	4.4%	15.1%	2.3%	12.8%	9.7%	35.2%	1.6%		31.7%	10.8%
Not Supported	0.0%				12.8%				2.2%												10.2%						

Out-of-Cycle	Uganda			
Country	Stockout rate	Country	Stockout rate	
Nepal	12.0%	Uganda	6.4%	

Data Notes

Out-of-Cycle refers to countries that report on a full quarter delay due to the reporting and data processing time required in country.

Uganda is reported separately because its overall result includes a composite stockout rate (AL inability to treat). Composite stockout rates for AL inability to treat and PRH methods are excluded from other countries' overall results, so as to prevent double-counting of products included in the composites. For more details on the Uganda case, see "SDP Stockout Rates by Country - Malaria" in the following pages.

SDP Stockout Rates by Country - HIV/AIDS

GHSC-PSM Support	Not Supported			Supported																		
Task Order	Burma	Cameroon	Namibia	Angola	Botswana	Burkina Faso	Burundi	Cameroun	Eswatini	Ethiopia	Ghana	Haiti	Indonesia	Lesotho	Malawi	Mozambique	Namibia	Nigeria	Rwanda	Uganda	Zambia	Zimbabwe
TO1-HIV/AIDS	0.0%	22.0%	2.2%	26.2%	4.6%	13.6%	1.7%	12.4%	3.6%	8.9%	15.6%	0.9%	2.1%	5.6%	3.3%	8.5%	2.3%	13.2%	1.1%	10.2%	15.1%	7.2%
1st line adult ARV	0.0%	17.0%	0.0%	5.6%	0.0%	0.0%	0.4%	1.0%	0.0%	0.4%	8.2%	0.8%	1.7%	0.0%	0.8%	0.5%	0.0%	4.6%	0.8%	12.3%	3.3%	1.2%
2nd line adult ARV	0.0%	5.6%	2.3%	29.4%	0.0%	0.0%	11.6%	4.0%	2.5%	6.0%	40.7%	0.8%	2.6%	1.0%	6.4%	4.0%	0.0%	9.6%	1.3%	10.6%	7.5%	6.0%
Pediatric ARV	0.0%	22.6%	2.3%	26.7%	3.0%	0.0%	10.4%	19.6%	5.9%	6.6%	23.9%	0.0%	0.0%	4.0%	7.7%	2.9%	0.0%	23.8%	0.6%	11.8%	14.4%	3.5%
First RTK		25.4%	0.0%	0.0%	19.0%	5.9%	1.1%	22.1%		7.0%	22.3%	0.0%	0.0%	1.0%	2.7%	13.8%	0.0%	6.8%	0.9%	1.6%	7.4%	7.2%
Second RTK		28.4%	7.0%	0.0%	4.8%	5.9%	0.7%	27.4%		17.4%	23.9%	4.7%	2.3%	3.5%	1.5%	20.0%	5.0%	9.6%	0.8%	4.2%	5.1%	7.9%
Tie-breaker RTK			4.7%							16.5%			6.3%	32.4%			10.0%	10.2%		20.6%		18.7%
Viral load reagent	0.0%				14.3%	0.0%			0.0%	0.0%				0.0%		0.0%		8.3%	0.0%	0.0%	23.5%	0.0%
Viral load consumable	0.0%				0.0%	0.0%			0.0%	26.4%								0.0%	0.0%			
EID reagent	0.0%				50.0%	0.0%				21.1%				0.0%		0.0%		8.3%	0.0%	0.0%	0.0%	0.0%
EID consumable	0.0%				9.5%	9.1%				24.2%								0.0%	0.0%			
Male condoms (HIV)			0.0%	22.2%	0.0%	6.9%	0.2%		6.5%	5.8%	5.9%	0.0%		2.4%	1.4%	7.5%	0.0%	22.8%	1.8%		25.9%	3.9%
Female condoms (HIV)			0.0%	100.0%	0.0%	20.9%	0.0%				23.6%			2.6%	3.2%	29.8%	0.0%	10.2%	2.1%		43.9%	7.8%
RUTF														3.8%								

SDP Stockout Rates by Country - Malaria

Table 1. Overall malaria stockout rates with product breakdown

GHSC-PSM Support Task Order	Not Supported		Supported															
	Cameroon	Sierra Leone	Angola	Burkina Faso	Burundi	Cambodia	Cameroon	Ethiopia	Guinea	Kenya	Liberia	Malawi	Mali	Mozambique	Nigeria	Rwanda	Zambia	Zimbabwe
TO2-Malaria	10.0%	10.2%	32.2%	17.2%	0.5%	7.8%	17.8%	15.0%	6.7%	44.0%	33.2%	2.3%	5.1%	21.6%	7.8%	1.5%	26.4%	16.2%
AL 6x1	16.5%	18.7%	25.0%	36.3%			30.7%	19.6%	17.2%	57.6%	61.2%	0.3%	3.5%	20.4%	5.7%	1.6%	19.7%	26.7%
AL 6x2	19.6%	7.5%	25.0%	16.1%			38.0%	17.0%	8.4%	46.5%	45.9%	1.5%	6.5%	28.5%	5.5%	2.2%	26.1%	16.0%
AL 6x3	20.3%	6.0%	16.7%	16.6%			29.9%	22.2%	6.0%	40.7%	34.1%	1.2%	5.2%	32.8%	13.9%	2.1%	14.4%	20.0%
AL 6x4	12.4%	4.8%	8.3%	16.7%			28.1%	9.5%	4.4%	29.1%	48.2%	1.3%	5.0%	21.0%	6.6%	1.4%	22.0%	18.6%
AS/AQ 100/270mgx3	9.7%		38.3%		1.0%						24.7%				2.7%			
AS/AQ 100/270mgx6	10.9%		29.9%		0.2%						34.1%				2.8%			
AS/AQ 25/67.5mg	9.4%		47.1%		0.3%						27.1%				2.5%			
AS/AQ 50/135mg	9.4%		37.3%		0.6%						57.6%				2.1%			
mRDT	9.9%	11.1%	15.8%	7.1%	0.4%	7.8%	11.2%	10.1%	2.4%	81.2%	9.4%	0.9%	6.2%	7.1%	8.0%	0.4%	10.2%	3.5%
SP	6.4%	15.3%	16.5%	4.6%	0.7%		7.6%		1.5%	9.1%	7.1%	4.9%	2.2%	12.5%	6.0%		75.0%	6.6%
LLINs	9.7%	8.7%		23.2%	0.0%		5.2%				15.3%	6.4%	10.5%	37.5%	37.1%			

Table 2. Inability to treat with AL (Composite stockout rate of four AL presentations)

GHSC-PSM Support Task Order	Not Supported	Supported													
	Sierra Leone	Angola	Burkina Faso	Ethiopia	Guinea	Kenya	Liberia	Malawi	Mali	Mozambique	Nigeria	Rwanda	Uganda	Zambia	Zimbabwe
TO2-Malaria															
AL inability to treat	1.7%	0.0%	3.8%	0.6%	0.6%	13.8%	12.9%	0.3%	0.7%	4.1%	1.6%	0.0%	2.9%	3.5%	3.3%

Table 3. Malaria stockout rates for Uganda

GHSC-PSM Support Task Order	Supported Uganda
TO2-Malaria	2.9%
AL inability to treat	2.9%
mRDT	2.9%

Data Notes

Table 1:

Overall malaria stockout rates are calculated as an aggregation of stock observations across all malaria products. AL inability to treat is excluded from the overall result, as AL presentations are already factored in individually.

Table 2:

AL inability to treat is presented for each country that uses AL, separately from the overall results in Table 1.

Table 3:

In Uganda, health facilities report on all presentations of AL as a single item, equivalent to AL inability to treat. Stockout data is not available by individual presentation. As a result, GHSC-PSM incorporates AL inability to treat into Uganda's TO2 overall stockout rate to ensure that these essential products are represented.

SDP Stockout Rates by Country - Family Planning

In GHSC-PSM-supported regions

Table 1. Family planning stockout rates - Product level

Task Order	Burkina Faso	Burundi	Ethiopia	Ghana	Guinea	Haiti	Kenya	Liberia	Malawi	Mali	Mozambique	Nigeria	Pakistan	Rwanda	Uganda	Zambia
TO3-PRH	18.7%	0.4%	8.5%	5.1%	11.0%	0.3%	33.8%	18.5%	10.7%	3.9%	15.1%	11.7%	35.2%	2.1%	3.9%	50.7%
Combined oral contraceptive with iron	7.2%	0.6%	9.0%	7.8%	14.5%	0.0%		12.0%	5.5%	16.7%		10.5%	40.9%	3.1%		55.2%
Combined oral contraceptive	17.1%															
DMPA-Subcutaneous injectable	20.2%															
NET-En Injectable	17.7%															
DMPA-Intramuscular injectable	100.0%															
1-rod implant	6.9%															
2-rod implant	26.9%															
Emergency contraceptive, 2 tablets	18.0%															
Progestin only pills	7.1%															
Copper-bearing IUD	67.8%															
Calendar-based awareness methods	7.2%	0.0%	6.8%	1.9%	13.5%	1.4%	16.8%	8.4%	22.1%	1.0%	13.0%	7.3%	34.7%	1.8%	3.9%	59.6%
Male condoms (FP)	52.5%		13.2%	2.6%			36.0%		10.7%			17.5%		1.8%		58.9%
Female condoms (FP)	6.1%	0.0%	6.3%	2.0%	11.3%	0.0%	20.0%	19.3%	17.8%	0.9%	9.1%	13.7%		2.1%		54.4%
	43.9%															
	27.7%	0.0%	13.9%	9.6%	13.1%		49.6%	7.2%	5.2%	2.0%	11.8%	7.4%		3.7%		53.1%
	17.6%	3.0%	3.3%	22.7%	3.1%	0.0%	33.8%	50.0%	4.1%	1.0%	6.6%	3.1%	13.2%	4.2%		35.8%
	23.2%															
	0.5%															
	21.7%															
	1.6%															
	0.6%															
	6.9%	0.2%	5.8%	5.9%	10.3%	0.0%	34.7%	8.4%	1.4%	2.1%	7.5%	22.8%	42.7%	0.4%		25.9%
	20.9%															
	23.6%															
	38.6%															
	3.2%															
	5.7%															
	29.8%															
	10.2%															
	2.1%															
	43.9%															

Table 2. Family planning stockout rates - Method level

Tracer Product	Burkina Faso	Burundi	Ethiopia	Ghana	Guinea	Haiti	Kenya	Liberia	Malawi	Mali	Mozambique	Nigeria	Pakistan	Rwanda	Uganda	Zambia
Combined oral methods	7.2%	0.6%	9.0%	7.8%	14.5%	0.0%	17.1%	12.0%	5.5%	16.7%	20.2%	10.5%	40.9%	3.1%		55.2%
Injectable contraceptives	0.0%	0.0%	6.8%	1.5%	13.5%	1.4%	16.8%	8.4%	2.4%	1.0%	13.1%	5.1%	34.7%	1.8%	3.9%	51.9%
Implantable contraceptives	0.0%	0.0%	1.5%	1.5%	11.3%	0.0%	9.4%	19.3%	5.4%	0.9%	9.1%	9.8%		0.4%		46.4%
Emergency oral contraceptives			0.0%	10.6%			62.5%		57.5%		43.9%					
Progestin-only methods	27.7%	0.0%	13.9%	9.6%	13.1%		49.6%		5.2%	2.0%	11.8%	7.4%		3.7%		53.1%
Copper-bearing IUD	17.6%	3.0%	3.3%	22.7%	3.1%	0.0%	33.8%	50.0%	4.1%	1.0%	6.6%	3.1%	13.2%	4.2%		35.8%
Calendar-based awareness methods	23.2%					0.5%			21.7%		1.6%			0.6%		
Male condoms (FP)	6.9%	0.2%	5.8%	5.9%	10.3%	0.0%	34.7%	8.4%	1.4%	2.1%	7.5%	22.8%	42.7%	0.4%		25.9%
Female condoms (FP)	20.9%			23.6%				38.6%		3.2%	5.7%	29.8%	10.2%	2.1%		43.9%

Data Notes

The PRH "method level" (Table 2) refers to the percentage of facilities stocked out of all products offered within a given method. The stockout rate at the "product" level (Table 1) refers to the percentage of sites stocked out of that particular product (depending on what is offered at a particular facility). A facility could be stocked out of one product and not stocked out at the method level. Only product-level stock observations are factored into overall performance at the task order level, to prevent double-counting between products and methods.

FY Quarter

2020-Q1

Out-of-Cycle

Task Order	Nepal
TO3-PRH	12.0%
Combined oral contraceptive with iron	14.2%
Combined oral contraceptive	
DMPA-Subcutaneous injectable	
NET-En Injectable	
DMPA-Intramuscular injectable	8.8%
1-rod implant	
2-rod implant	15.4%
Emergency contraceptive, 2 tablets	
Progestin only pills	
Copper-bearing IUD	18.4%
Calendar-based awareness methods	
Male condoms (FP)	9.3%
Female condoms (FP)	

Out-of-Cycle

Tracer Product	Nepal
Combined oral methods	14.2%
Injectable contraceptives	8.8%
Implantable contraceptives	15.4%
Emergency oral contraceptives	
Progestin-only methods	
Copper-bearing IUD	18.4%
Calendar-based awareness methods	
Male condoms (FP)	9.3%
Female condoms (FP)	

Stocked According to Plan Rates by Country

Country	Stocked according to plan	Overstocked	Understocked	Stocked out
Angola	5%	8%	44%	43%
Botswana	17%	17%	58%	8%
Burkina Faso	43%	29%	29%	
Burma	39%	35%	25%	2%
Burundi	37%	12%	44%	7%
Cambodia	26%	16%	47%	12%
Cameroon	12%	12%	45%	30%
Eswatini	14%	53%	33%	0%
Ethiopia	14%	42%	27%	17%
Ghana	21%	32%	19%	28%
Guinea	29%	25%	32%	14%
Haiti	48%	27%	21%	3%
Indonesia	17%	25%	58%	0%
Kenya		16%	33%	51%
Lesotho	45%	6%	48%	0%
Liberia	42%	17%	38%	4%
Malawi	64%	9%	23%	5%
Mali	15%	23%	29%	33%
Mozambique	34%	24%	35%	6%
Namibia	23%	17%	46%	15%
Nigeria	23%	3%	73%	
Pakistan	13%	38%	13%	38%
Rwanda	40%	26%	33%	1%
Thailand			100%	
Uganda	26%	32%	33%	9%
Vietnam			100%	
Zambia	36%	24%	32%	8%
Zimbabwe	6%	44%	50%	0%

Data Notes

Above data shows observations from the central and first subnational storage levels for which data is available in each country. Data on individual country pages may include additional supply chain levels.

LMIS Reporting Rates by Country

Country	Not Supported	Supported
Angola		78%
Botswana		100%
Burkina Faso		66%
Burma	90%	
Burundi		80%
Cambodia		99%
Cameroon	48%	70%
Eswatini		89%
Ethiopia		89%
Guinea		97%
Haiti		99%
Indonesia		100%
Kenya		97%
Lesotho		100%
Liberia		55%
Malawi		97%
Mali		93%
Mozambique		76%
Namibia	93%	90%
Nepal		25%
Nigeria		96%
Pakistan		82%
Rwanda		96%
Sierra Leone	75%	
Uganda		95%
Zambia		83%
Zimbabwe		50%

FY Quarter

2020-Q1

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country

Angola



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
TO1-HIV/AIDS	122	26.2%
1st line adult ARV	18	5.6%
2nd line adult ARV	17	29.4%
Pediatric ARV	15	26.7%
First RTK	18	0.0%
Second RTK	18	0.0%
Male condoms (HIV)	18	22.2%
Female condoms (HIV)	18	100.0%
Total	122	26.2%

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
TO2-Malaria	3,721	32.1%
AL 6x1	12	25.0%
AL 6x2	12	25.0%
AL 6x3	12	16.7%
AL 6x4	12	8.3%
AL inability to treat	12	0.0%
AS/AQ 100/270mgx3	679	38.3%
AS/AQ 100/270mgx6	679	29.9%
AS/AQ 25/67.5mg	679	47.1%
AS/AQ 50/135mg	679	37.3%
mRDT	691	15.8%
SP	254	16.5%
Total	3,721	32.1%

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
Total		

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO1-HIV/AIDS	18	100%
TO2-Malaria	887	78%
Total	905	78%

Ref Analysis

B1	<p>TO1: In Q1 FY 2020, GHSC-PSM made changes on the supported SDP sites for TO1. Previously, GHSC-PSM reported on nine PEPFAR-supported SDPs within Luanda province. PEPFAR requested that the project support 18 SDPs in four provinces: Benguela (6 SDPs), Cunene (4), Huambo (4) and Lunda Sul (4). This change to directly support these four provinces and the increase of SDPs represents a new challenge for the project, necessitating a new baseline for stockout rates of HIV tracer products. The change of the PEPFAR targeted sites was supported by the Angolan First Lady initiative, "Nascer Livre para Brilhar" (To be Born Free to Shine). Regarding HIV tracer products, HIV-most used first-line ARV: One SDP had stockout of this product. The stockout was attributed to the distance and bad road conditions caused by the flood in Cunene province For HIV most-used second-line ARV, from 17 SDPs reporting, five (29 percent) were stocked out. for HIV-most used first-line pediatric ARV, of the 15 SDPs reporting, 4 (27 percent, with 3 from Lunda Sul and 1 from Benguela) presented out of stock due to distribution delays from higher levels. None of the 18 SDPs reported stockouts of any RTK. For male condoms, of the 18 SDPs reporting, 4 (3 SDPs in Lunda Sul and 1 in Cunene) had a stockout due to the non-timely execution of the distribution plan from the provincial to SDP level.</p> <p>TO2: In Q1, all four AL presentations saw a reduction in stockout rates from last quarter in all 12 national hospitals. Below we show the performance of this quarter compared the previous quarter. AL 6x1: 50 percent in the previous quarter and 25 percent in this quarter; AL 6x2: 60 percent in the previous quarter and 25 percent in this quarter; AL 6x3: 40 percent in the previous quarter and 17 percent in this quarter; AL 6x4: 30 percent in the previous quarter and 8 percent in this quarter; RDT: 17 percent in the previous quarter and 17 percent in this quarter; SP: 16 percent in the previous quarter and 0 percent in this quarter. There was no inability to treat reported in all 12 hospitals. Looking to PMI priority provinces, of the 875 SDPs expected to report, 679 reported compared to 703 in the previous quarter, a decrease of 24 of SDPs reporting in this period. The average stockout result for all ASAQ presentations was 23 percent in the previous quarter vs. 38 percent during this quarter. These data are from the November reporting. Looking at the SDPs in the six PMI provinces; AS/AQ 25/67.5mgx3: 27 percent in the previous quarter and 47 percent in this quarter; AS/AQ 50/135mgx3: 22 percent in the previous quarter and 37 percent in this quarter; AS/AQ 100/270mgx3: 25 percent in the previous quarter and 38 percent in this quarter; AS/AQ 100/270mgx6: 17 percent in the previous quarter and 30 percent in this quarter; RDT: 10 percent in the previous quarter and 16 percent in this quarter; SP: 36 percent in the previous quarter and 17 percent in this quarter.</p>
B3	<p>TO1: All 18 project-supported SDPs reported by the deadline or up to one week after. This reporting rate was calculated using the month of November 2019. It is important to mention that during the initial data quality assessment from summer of 2019, no SDPs in these newly selected PEPFAR provinces were using the supply chain management reporting tools. TO2: Of the 887 SDPs that are expected to report during this quarter, a total of 691 SDPs were reported, representing an 80 percent reporting rate versus 72 percent the previous period. Of those SDP that reported, 688 reported by the deadline or one week later, 3 reported between two weeks and one month after the deadline, and 196 did not report.</p>

Warehouse stock status and product losses

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	80	33%	50%	0%	18%
TO1-HIV/AIDS	14	21%	14%	0%	64%
TO2-Malaria	30	3%	97%	0%	0%
TO3-PRH	36	61%	25%	0%	14%
Subnational level 1	1,274	44%	43%	5%	7%
TO1-HIV/AIDS	84	21%	63%	1%	14%
TO2-Malaria	542	30%	60%	7%	3%
TO3-PRH	648	58%	27%	4%	10%
Total	1,354	43%	44%	5%	8%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref Analysis

B2

TO1: At the central level, only two stock observations were conducted this quarter instead of the typical three. Overall stocked according to plan rates at central level decreased from 29 percent to 0 percent. The majority of the shift was into overstocked, which is at 64 percent for TO1. There was a corresponding drop in the stocked out rate from 67 percent last quarter to 21 percent this quarter. This high figure is driven by female condoms, which are still reported but no longer procured. At the subnational level, stocked according to plan rates decreased from 14 percent to just 1 percent. Stockout rates increased from 13 percent to 21 percent. With such a large overstock at central and low stock at the subnational levels, a distribution plan has been created to furnish the PEPFAR focus provinces with ample supply of ARVs.

TO2: At the central level, stocked according to plan rates decreased to 0 percent from 9 percent. Ninety-seven percent of observations were understocked, up from 79 percent last quarter. However, the stockout rate remained at just 3 percent. The only product that had a stockout observation was AL 6x4. Looking at the sub-national 1 level, stocked according to plan rates increased slightly from 6 percent to 7 percent. Understocked rates remain unchanged at 60 percent. During the quarter under review, no distribution of ASAQs took place in the six provinces supported by PMI. GHSC-PSM's efforts to update malaria product supply plans quarterly in line with best supply chain practices are not being leveraged by GOA through the Ministry of Health. GHSC-PSM is expecting the delivery of ASAQ in mid-January. The expected quantities will cover 3.6 months of stock. With these added quantities, the number of stockouts are expected to be reduced at SDPs in the next quarter.

TO3: During this quarter, there was no significant change from the previous quarter. At the central level, of 36 stock status observations on 12 products selected to track contraceptives, no products were stocked according to plan. In total, 19 (53 percent) out of 36 observations were stocked out, 5 (13 percent) out of 36 were overstocked and 12 (33 percent) understocked. However 4 percent of observations at the first subnational level were stocked according to plan. We still continue to observe the increase of the contraceptive stockout rate, which is a consequence of the fact that during FY 2019, neither donors nor the Ministry of health handled contraceptive procurement. At the end of December, only four types of contraceptives were found at the central level (microgynon, IUD, Jadelle and Depo). For a more in depth look at the figures, please refer to the complete results and denominators page of the Angola section of the annex.

C7

Nothing to report this quarter.

Supply plans, innovations, and strategic activities

Total Innovations implemented this quarter

0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
		GHSC-PSM Angola does not have any innovations to report this quarter.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
ARVs	Yes
Condoms	Yes
FP commodities	Yes
Lab (HIV diagnostics)	No
Malaria commodities	Yes
RTKs	Yes

Analysis

All required supply plans were submitted this quarter except for HIV lab commodities. Moving forward, Angola will no longer be submitting a supply plan for HIV lab commodities

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

C2. Number of people trained by sex

Sex	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	Total
Female	6	14	2	22
Male	6	14	2	22
Total	12	28	4	44

C2. Number of people trained by supply chain level

Supply Chain Level	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	Total
Subnational level 1	12	28	4	44
Total	12	28	4	44

C2. Number of people trained by funding source and type

Type	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	Total
Cross-TO	6	28	4	38
TO-specific	6			6
Total	12	28	4	44

C2. Number of people trained by technical area

Supply Chain Function	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	Total
MIS	6	28	4	38
Warehousing and Inventory Management	6			6
Total	12	28	4	44

Analysis



In total, 44 professionals were trained this quarter. For TO1, six health professionals benefited from an inventory management training session in Huambo province. In a three-way cross-task order effort, 38 health professionals benefited from an MIS training session at Cunene and Cuando Cubango provincial warehouses.

Molecular Instruments and HIV Tracer Products

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

Analysis

Angola does not report on this indicator.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Efavirenz 300/300/600 mg
2nd line adult ARV	Lopinavir/Ritonavir
Pediatric ARV	Abacavir/Lamivudine 60/30 mg
First RTK	Determine
Second RTK	Uni-Gold
Tie-breaker RTK	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	26.2%	122
1st line adult ARV	5.6%	18
2nd line adult ARV	29.4%	17
Pediatric ARV	26.7%	15
First RTK	0.0%	18
Second RTK	0.0%	18
Male condoms (HIV)	22.2%	18
Female condoms (HIV)	100.0%	18
TO2-Malaria	32.2%	3,709
AL 6x1	25.0%	12
AL 6x2	25.0%	12
AL 6x3	16.7%	12
AL 6x4	8.3%	12
AS/AQ 100/270mgx3	38.3%	679
AS/AQ 100/270mgx6	29.9%	679
AS/AQ 25/67.5mg	47.1%	679
AS/AQ 50/135mg	37.3%	679
mRDT	15.8%	691
SP	16.5%	254
Total	32.1%	3,831

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO2-Malaria		
AL inability to treat	0.0%	12

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	100%	18
TO2-Malaria	78%	887

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	0%	18%	50%	33%	80
TO1-HIV/AIDS	0%	64%	14%	21%	14
TO2-Malaria	0%	0%	97%	3%	30
TO3-PRH	0%	14%	25%	61%	36
Subnational level 1	5%	7%	43%	44%	1,274
TO1-HIV/AIDS	1%	14%	63%	21%	84
TO2-Malaria	7%	3%	60%	30%	542
TO3-PRH	4%	10%	27%	58%	648
Total	5%	8%	44%	43%	1,354

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country	▼	FY Quarter	▼
Angola	▼	2020-Q1	▼

C2. Number of people trained

Task Order	Female	Male	Total
TO1-HIV/AIDS	6	6	12
TO2-Malaria	14	14	28
TO3-PRH	2	2	4
Total	22	22	44

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Condoms	1	1
FP commodities	1	1
Lab (HIV diagnostics)	1	0
Malaria commodities	1	1
RTKs	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country



Botswana



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
TO1-HIV/AIDS	260	4.6%
1st line adult ARV	33	0.0%
2nd line adult ARV	33	0.0%
Pediatric ARV	33	3.0%
First RTK	21	19.0%
Second RTK	21	4.8%
Viral load reagent	14	14.3%
Viral load consumable	14	0.0%
EID reagent	4	50.0%
EID consumable	21	9.5%
Male condoms (HIV)	33	0.0%
Female condoms (HIV)	33	0.0%
Total	260	4.6%

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
Total		

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO1-HIV/AIDS	33	100%
Total	33	100%

Ref Analysis

B1	The average stockout rate for HIV tracer products decreased from 8.3 percent in the final quarter of FY 2019 to 4.6 percent in the first quarter of FY 2020. This quarter marks the successful transition from TLE and LPV/r as the most used first- and second-line adult ARVs previously to TLD. TLD is thus now the traced adult ARV commodity in both instances. None of the 33 sites supported by GHSC-PSM reported a stockout of TLD during this period. Only one facility reported a stockout of the most commonly used first-line pediatric ARV. The stockout rates for HIV lab tracer commodities improved, decreasing from 27.1 percent in FY2020 Q4 to 11.3 percent in FY2020 Q1. In the previous quarter, delayed shipments by local suppliers led to a central stockout of viral load reagents and supplies with downstream impacts at the facility level. Overdue shipments were delivered to the central store by the end of September 2019, and stockout rates have since improved. Conversely, a reported increase in the stockout rates of the first RTK (Determine HIV 1/2) partially reflects data particularities around reporting rates, which decreased in this period, as well as facility-level processes pertaining to stock approaching expiry. In total, four of 21 (19 percent) of reporting facilities reported a stockout of Determine HIV 1/2 though all four had simply moved stock from storage spaces to testing units. Finally consistent with previous quarters no stockouts were reported concerning male and female condoms.
B3	Consistent with the previous quarter, all 33 of the prioritized list of facilities (GHSC-PSM supported facilities) successfully submitted their ARV LMIS report to CMS (1,005). Among those reporting, tardiness increased slightly in Q1 2020 (15.2 percent reporting between one and two weeks after deadline) compared to the past quarter (3 percent), due to competing priorities at the CMS and less time for follow up by the focal staff.

Warehouse stock status and product losses

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	36	8%	58%	17%	17%
TO1-HIV/AIDS	36	8%	58%	17%	17%
Total	36	8%	58%	17%	17%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref Analysis

- B2

At the central level, tracer products were frequently observed to be understocked. The most common adult ARV (TLD) was reported to be understocked in two of three observations, while the most commonly used first-line pediatric ARV was understocked in all three observations. Similarly, RTKs were observed to be understocked in all instances for this period due to extended delays in shipments. Finally, central stock levels were also understocked for viral load and consumables and declined from past quarters for viral load and EID reagents due to the ongoing introduction of new machines that require other reagents. Three commodities were observed to have been stocked out centrally in one instance (each) during the quarter: male condoms, viral load reagent,and viral load consumable.
- C7

GHSC-PSM does not have custody of any products in Botswana and therefore does not report on product losses.

Supply plans, innovations, and strategic activities

Total Innovations
implemented
this quarter

0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
Crosscutting		None to report this quarter.

Country		FY Quarter	
Botswana		2020-Q1	

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
ARVs	Yes
RTKs	Yes

Analysis

Supply plans for ARV and RTK commodities were successfully prepared and submitted to HQ for FY 2020 Q1. Through the technical assistance of GHSC-PSM, a pipeline database for ARV and RTKs was developed for monitoring stocks and to serve as early warning tool for prompting supply plan and procurement decisions.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies, or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

C2. Number of people trained by sex

Sex	Total
Total	

C2. Number of people trained by supply chain level

Supply Chain Level	Total
Total	

C2. Number of people trained by funding source and type

Type	Total
Total	

C2. Number of people trained by technical area

Supply Chain Function	Total
Total	

Analysis

▲
No trainings to report this quarter.

Molecular Instruments and HIV Tracer Products

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

Analysis

GHSC-PSM Botswana does not procure or support molecular instruments in the country.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Dolutegravir 300/300/50mg
2nd line adult ARV	Tenofovir/Lamivudine/Dolutegravir 300/300/50mg
Pediatric ARV	Lopinavir/Ritonavir 125mg
First RTK	Determine
Second RTK	Uni-Gold
Tie-breaker RTK	ELISA Confirmatory Test
Viral load reagent	Cobas Ampliprep/Cobas taqman HIV-1 test 48 tests
Viral load consumable	Cobas Ampliprep/CobasTaqman Wash reagent 5.1L
EID reagent	Kit CAP-G/CTM HIV 1-Qual v2.0 (CEIVD), 48 Tests
EID consumable	Dried Blood Spot Collection Kit

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	4.6%	260
1st line adult ARV	0.0%	33
2nd line adult ARV	0.0%	33
Pediatric ARV	3.0%	33
First RTK	19.0%	21
Second RTK	4.8%	21
Viral load reagent	14.3%	14
Viral load consumable	0.0%	14
EID reagent	50.0%	4
EID consumable	9.5%	21
Male condoms (HIV)	0.0%	33
Female condoms (HIV)	0.0%	33
Total	4.6%	260

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
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See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	100%	33

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	17%	17%	58%	8%	36
TO1-HIV/AIDS	17%	17%	58%	8%	36
Total	17%	17%	58%	8%	36

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country	FY Quarter
Botswana	2020-Q1

C2. Number of people trained

Task Order	Total
Total	

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
RTKs	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
----------------------------------	--

For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

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Country M&E Indicator Performance

Country

Burkina Faso



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
TO1-HIV/AIDS	3,578	13.6%
1st line adult ARV	17	0.0%
2nd line adult ARV	17	0.0%
Pediatric ARV	14	0.0%
First RTK	17	5.9%
Second RTK	17	5.9%
Viral load reagent	3	0.0%
Viral load consumable	3	0.0%
EID reagent	3	0.0%
EID consumable	11	9.1%
Male condoms (HIV)	1,738	6.9%
Female condoms (HIV)	1,738	20.9%
Total	3,578	13.6%

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
TO2-Malaria	8,952	15.5%
AL 6x1	1,119	36.3%
AL 6x2	1,119	16.1%
AL 6x3	1,119	16.6%
AL 6x4	1,119	16.7%
AL inability to treat	1,119	3.8%
mRDT	1,119	7.1%
SP	1,119	4.6%
LLINs	1,119	23.2%
Total	8,952	15.5%

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
TO3-PRH	17,380	18.7%
Combined oral contraceptive with iron	1,738	7.2%
DMPA-Subcutaneous injectable	1,738	17.7%
DMPA-Intramuscular injectable	1,738	7.2%
1-rod implant	1,738	52.5%
2-rod implant	1,738	6.1%
Progestin only pills	1,738	27.7%
Copper-bearing IUD	1,738	17.6%
Calendar-based awareness methods	1,738	23.2%
Male condoms (FP)	1,738	6.9%
Female condoms (FP)	1,738	20.9%
Total	17,380	18.7%

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO1-HIV/AIDS	17	100%
TO2-Malaria	2,169	52%
TO3-PRH	2,197	79%
TO4-MCH	2,197	79%
Total	6,580	70%

Ref Analysis

- B1

This quarter, GHSC-PSM Burkina Faso began reporting on HIV/AIDS and family planning commodities for the first time. For HIV/AIDS commodities, the project conducted a rapid data collection in the 17 PEPFAR-supported health facilities. Family planning (including condoms) stock status was analyzed from the Department of Family Health’s (DSF) weekly surveillance report in 1,738 sites this quarter. The ministry of health is advocating for the inclusion of family planning and HIV/AIDS logistics data to be included in the Endos (DHIS2) platform.
- B1

TO1: The stockout rate for HIV/AIDS commodities was 14 percent among the 17 PEPFAR sites where data were collected. There were zero stockouts of any ARVs. First and second RTKs were each stocked out at 6 percent, while 21 percent of sites were stocked out of female condoms. Among the 17 PEPFAR sites, 11 collect samples for EID testing (1 of which was stocked out of consumables/6 percent) which are sent to three sites with labs for testing. All three of the labs had EID and viral load reagents in stock.
- B1

TO2: Stockout rates of malaria commodities dropped slightly, from 19 percent to 17 percent, although some of this may be due to the data source change from the End Use Verification (EUV) survey last quarter to the LMIS this quarter. Stockout rate percentages were high for individual presentations of AL (16 percent, 17 percent and 36 percent), but inability to treat was 4 percent. AL 6X1 continues to face high stockouts (36 percent) due to health facilities favoring it over the other presentations. Stockouts of SP and RDTs were relatively low, while stockouts of LLINs were at 23 percent. The National Malaria Control Program is taking stock of the LLINs remaining from the 2019 campaign in order to obtain authorization to use them for routine distribution to mitigate facility stockouts. There is also an upcoming delivery of LLINs now expected for February 2020, earlier than expected.
- B1

TO3: The stockout rate for family planning commodities was 19 percent, among the 1,738 sites that reported. There were high stockouts of 1-rod implants (53 percent), progestin-only pills (28 percent), calendar-based awareness methods (23 percent) and female condoms (21 percent).
- B3

Reporting rates for malaria commodities began to recover this quarter after the end of the health worker strike, up to 52 percent. For SDPs providing HIV/AIDS services, all 17 (100 percent) of the PEPFAR-supported sites reported. Among the 2,197 family planning/MNCH sites, 79 percent reported. It is important to note that there are three different data sources used for TO1, TO2, and TO3/TO4, as discussed under B1.

Warehouse stock status and product losses

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	7		29%	43%	29%
TO2-Malaria	7		29%	43%	29%
Total	7		29%	43%	29%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref Analysis

- B2

Stocked according to plan improved notably over the last few quarters, from 29 percent, 14 percent, and 0 percent for the last three quarters, respectively, to 43 percent this quarter. AL 6x1 and 6X4 were stocked according to plan, as were LLINs. AL 6X2 is understocked due to a delivery being postponed by the Government of Burkina Faso. The government redirected the funds toward security issues. The next shipment is expected in March. AL 6X3 is overstocked, and preparations are being made to transfer this stock to facilities in need to ensure it does not expire No products were stocked out.
- B2

Warehouse stock status data are currently only available for malaria commodities.
- C7

GHSC-PSM does not have custody of any products in Burkina Faso and therefore does not report on product losses.

Supply plans, innovations, and strategic activities

Total Innovations implemented this quarter

0

New technologies

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
GHSC-PSM Burkina Faso does not have any innovations to report this quarter.		

Country	FY Quarter
Burkina Faso	2020-Q1

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
Malaria commodities	Yes

Analysis

The malaria commodity quarterly supply plan was updated and submitted to GHSC-PSM headquarters.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

▼

Burkina Faso

▼

FY Quarter

▼

2020-Q1

▼

C2. Number of people trained by sex

Sex	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Female	3	12	1	1	17
Male	7	26	2	2	37
Total	10	38	3	3	54

C2. Number of people trained by supply chain level

Supply Chain Level	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Central	4	15	1	1	21
Subnational level 1	6	23	2	2	33
Total	10	38	3	3	54

C2. Number of people trained by funding source and type

Type	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Cross-TO	10	38	3	3	54
Total	10	38	3	3	54

C2. Number of people trained by technical area

Supply Chain Function	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Forecasting and Supply Planning	4	15	1	1	21
MIS	6	23	2	2	33
Total	10	38	3	3	54

Analysis



Twenty-one members of the logistics technical coordination committees at the central level were trained in forecasting and supply planning for malaria, HIV/AIDS, family planning/reproductive health, tuberculosis, and nutrition (16 men and 5 women). At the regional level, 33 hospital personnel (21 men and 12 women) were trained on integrated LMIS, which included data collection in the three new tasks orders within which the project is operating.

Molecular Instruments and HIV Tracer Products

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

Analysis

GHSC-PSM does not support any molecular instruments in Burkina Faso and therefore does not report on this indicator.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/emtricitabine/Efavirenz 300/200/600 mg
2nd line adult ARV	Abacavir/Lamivudine 600/300 mg + Lopinavir/ritonavir 200/50 mg
Pediatric ARV	Zidovudine/Lamivudine/Névirapine 60/30/50 mg
First RTK	Determine HIV
Second RTK	SD Bioline HIV
Viral load reagent	Abbott RealTime HIV-1 Amplification Reagent Kit
Viral load consumable	Consumables for manual and automatic extraction
EID reagent	Abbott RealTime HIV-1 Qualitative Amplification Reagent Kit
EID consumable	DBS kit

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	13.6%	3,578
1st line adult ARV	0.0%	17
2nd line adult ARV	0.0%	17
Pediatric ARV	0.0%	14
First RTK	5.9%	17
Second RTK	5.9%	17
Viral load reagent	0.0%	3
Viral load consumable	0.0%	3
EID reagent	0.0%	3
EID consumable	9.1%	11
Male condoms (HIV)	6.9%	1,738
Female condoms (HIV)	20.9%	1,738
TO2-Malaria	17.2%	7,833
AL 6x1	36.3%	1,119
AL 6x2	16.1%	1,119
AL 6x3	16.6%	1,119
AL 6x4	16.7%	1,119
mRDT	7.1%	1,119
SP	4.6%	1,119
LLINs	23.2%	1,119
TO3-PRH	18.7%	17,380
Combined oral contraceptive with iron	7.2%	1,738
DMPA-Subcutaneous injectable	17.7%	1,738
DMPA-Intramuscular injectable	7.2%	1,738
1-rod implant	52.5%	1,738
2-rod implant	6.1%	1,738
Progestin only pills	27.7%	1,738
Copper-bearing IUD	17.6%	1,738
Calendar-based awareness methods	23.2%	1,738
Male condoms (FP)	6.9%	1,738
Female condoms (FP)	20.9%	1,738
Total	18.2%	25,315

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO2-Malaria		
AL inability to treat	3.8%	1,119
TO3-PRH		
Combined oral methods	7.2%	1,738
Injectable contraceptives	0.0%	1,738
Implantable contraceptives	0.0%	1,738
Progestin-only methods	27.7%	1,738

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	100%	17
TO2-Malaria	52%	2,169
TO3-PRH	79%	2,197
TO4-MCH	79%	2,197

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	43%	29%	29%		7
TO2-Malaria	43%	29%	29%		7
Total	43%	29%	29%		7

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country	▼	FY Quarter	▼
Burkina Faso	▼	2020-Q1	▼

C2. Number of people trained

Task Order	Female	Male	Total
TO1-HIV/AIDS	3	7	10
TO2-Malaria	12	26	38
TO3-PRH	1	2	3
TO4-MCH	1	2	3
Total	17	37	54

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Malaria commodities	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country



Burma



Service Delivery Point Stockouts and Reporting Rates

For countries with data available from GHSC-PSM non-supported regions

Country	▼	FY Quarter	▼
Burma	▼	2020-Q1	▼

B1. Stockout rate at service delivery points - SDPs located in supported regions

GHSC-PSM Support	Stockout rate	# SDP stock observations
Total		

B1. Stockout rate at service delivery points - SDPs located in non-supported regions

GHSC-PSM Support	Stockout rate	# SDP stock observations
Not Supported	0.0%	18
TO1-HIV/AIDS	0.0%	18
1st line adult ARV	0.0%	3
2nd line adult ARV	0.0%	3
Pediatric ARV	0.0%	2
Viral load reagent	0.0%	3
Viral load consumable	0.0%	3
EID reagent	0.0%	2
EID consumable	0.0%	2
Total	0.0%	18

B3. LMIS reporting rate

GHSC-PSM Support	Total # of SDPs required to report	Reporting rate
Not Supported	10	90%
Total	10	90%

Ref Analysis

B1	GHSC-PSM continued its technical support to three ART centers (Mingalardon specialist hospital and Waibargi specialist hospital in Yangon, and Naypyitaw 1,000-bed hospital) for quarterly ARV stock monitoring, and four viral load PCR sites (National Health Laboratory and Mingalardon specialist hospital in Yangon, Public Health Laboratory in Mandalay and Magway hospital Lab) for quarterly stock monitoring of viral load commodities. In FY 2020 Q1, all three ART centers and three out of four Abbot viral load sites provide stock monitoring reports and two (of the total two labs in country) have functioning stock monitoring /EWS system.
B3	As result there are no ART sites viral load labs or EID labs that had stockouts of any tracer commodities in FY 2020 Q1 GHSC-PSM in Burma has shifted activities in the new fiscal year and is no longer supporting LMIS in three regions (Ayeyarwaddy, Bago and Magway).As it is no longer supporting the LMIS, GHSC-PSM has lost visibility into those data systems. Moving forward, reporting rates will only reflect those HIV facilities that are reporting for the B1 stockout indicator. This means a significant decrease in the overall number of facilities reporting. This quarter, 9 of 10 facilities were able to submit reports by the deadline.

Warehouse stock status and product losses

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	6	17%		83%	
TO1-HIV/AIDS	3			100%	
TO2-Malaria	3	33%		67%	
Subnational level 1	100	1%	26%	36%	37%
TO1-HIV/AIDS	61		23%	43%	34%
TO2-Malaria	39	3%	31%	26%	41%
Total	106	2%	25%	39%	35%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref Analysis

- B2

For TO1, HIV/AIDS: Burma is submitting data at the central and subnational level-1,. The central level stock observations are all within the NAP central warehouses. Within the first subnational level, there are government facilities and NGO partner warehouses. This level includes stock observatiosn from NAP government subnational warehouses as well as NAP partners UNION, Alliance, IOM, MSI, MDM, MSFCH, PSI. Due to an annual data review with the government, only partner data from UNION is accessible this quarter. Consequently, there are fewer observations than normal this quarter. This issue will be resolved in time for Q2 reporting. For central level TO1 commodities, all tracer first-line adult ARV drugs, first-line child ARVs and second-line ARVs are stocked according to plan. For sub-national 1, stocked according to plan rates have decreased from 64 percent to 43 percent this quarter. TO2 has a similar mixture of observations. The central level includes the NMCP warehouse while the subnational level-1 contains both NMCP regional warehouses and observations from NGO partners, namely Defeat Malaria. From observations in Nov. 2019, the central level is stocked out of LLINs as is the sub-national level. Since then, GHSC-PSM subsequently delivered 300,000 LLINs in December 2019 to correct this issue. At the sub-national level, stocked according to plan rates have decreased to 25.6 percent from 51 percent, with a corresponding increase in overstocked rates.
- C7

Nothing to report this quarter.

Supply plans, innovations, and strategic activities

Total Innovations implemented this quarter

0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
		GHSC-PSM Burma does not have any innovations to report this quarter.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
Malaria commodities	Yes

Analysis

▼

All required supply plans were submitted this quarter.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description

Training for supply chain partners

C2. Number of people trained by sex

Sex	Total
Total	

C2. Number of people trained by supply chain level

Supply Chain Level	Total
Total	

C2. Number of people trained by funding source and type

Type	Total
Total	

C2. Number of people trained by technical area

Supply Chain Function	Total
Total	

Analysis

▲
No trainings to report this quarter.

Molecular Instruments and HIV Tracer Products

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

Analysis

Burma does not report on this indicator.

HIV Tracer Products	
Tracer Product	Exact Product Name
1st line adult ARV	Efavirenz/Lamivudine/Tenofovir DF 600/300/300 mg
2nd line adult ARV	Lopinavir/Ritonavir 200/50 mg
Pediatric ARV	Abacavir/Lamivudine 60/30 mg
Viral load reagent	Abbott RealTime HIV-1 Amplification Reagent Kit – Quantitative
Viral load consumable	2.0 ml skirted base cryovials with knurls
EID reagent	Abbott RealTime HIV-1 Amplification Reagent Kit – Qualitative
EID consumable	Tube, screw cap, conical, 50ml set, box/500

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (Non-GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	0.0%	18
1st line adult ARV	0.0%	3
2nd line adult ARV	0.0%	3
Pediatric ARV	0.0%	2
Viral load reagent	0.0%	3
Viral load consumable	0.0%	3
EID reagent	0.0%	2
EID consumable	0.0%	2
Total	0.0%	18

B1. Composite stockout rates (Non-GHSC-PSM-supported regions)

Task Order	Stockout rate	# of SDPs that reported
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See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	90%	10

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	83%			17%	6
TO1-HIV/AIDS	100%				3
TO2-Malaria	67%			33%	3
Subnational level 1	36%	37%	26%	1%	100
TO1-HIV/AIDS	43%	34%	23%		61
TO2-Malaria	26%	41%	31%	3%	39
Total	39%	35%	25%	2%	106

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country  FY Quarter 

Burma  2020-Q1 

C2. Number of people trained

Task Order	Total
Total	

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Malaria commodities	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
1	100%
2	100%
3	100%
4	100%
5	100%
6	100%
7	100%
8	100%
9	100%
10	100%
11	100%
12	100%
13	100%
14	100%
15	100%
16	100%
17	100%
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90	100%
91	100%
92	100%
93	100%
94	100%
95	100%
96	100%
97	100%
98	100%
99	100%
100	100%

For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.


GLOBAL HEALTH SUPPLY CHAIN PROGRAM


Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Burundi 



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

Burundi

FY Quarter

2020-Q1

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
TO1-HIV/AIDS	2,581	1.7%
1st line adult ARV	672	0.4%
2nd line adult ARV	95	11.6%
Pediatric ARV	183	10.4%
First RTK	661	1.1%
Second RTK	287	0.7%
Male condoms (HIV)	594	0.2%
Female condoms (HIV)	89	0.0%
Total	2,581	1.7%

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
TO2-Malaria	5,529	0.5%
AS/AQ 100/270mgx3	811	1.0%
AS/AQ 100/270mgx6	834	0.2%
AS/AQ 25/67.5mg	759	0.3%
AS/AQ 50/135mg	817	0.6%
mRDT	828	0.4%
SP	708	0.7%
LLINs	772	0.0%
Total	5,529	0.5%

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
TO3-PRH	3,863	0.4%
Female condoms (HIV)	89	0.0%
Combined oral contraceptive with iron	685	0.6%
DMPA-Intramuscular injectable	688	0.0%
2-rod implant	661	0.0%
Emergency contraceptive, 2 tablets	387	0.0%
Progestin only pills	455	0.0%
Copper-bearing IUD	304	3.0%
Male condoms (FP)	594	0.2%
Total	3,863	0.4%

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO1-HIV/AIDS	958	76%
TO2-Malaria	958	85%
TO3-PRH	930	80%
Total	2,846	80%

Ref	Analysis
B1	Stockout rates in Burundi contine to be low for family planning and malaria commodities, at less than one percent of sites stocked out on average for these health areas. Under the HIV program, stockouts remain low, at 1.7 percent overall. However, this does represent an increase from the previous quarter. This was partly driven by an uptick in stockouts of second line adult ARVs and pediatric ARVs, and partly due to a dip in the reporting rate for HIV products.
B3	Reporting on family planning and malaria products rose this quarter, up from 73 and 78 percent, respectively, in the previous quarter. The HIV reporting rate dropped, from 87 to 76 percent. This drop was due mainly to a system constraint. While the country has transitioned from TLE to TLD for its first line adult ARV, the reporting forms in DHIS2 did not yet reflect this change at the time of reporting this quarter. This led to fewer sites completing reports for HIV products.

Warehouse stock status and product losses

Country

Burundi

FY Quarter

2020-Q1

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	58	5%	48%	32%	14%
TO1-HIV/AIDS	29	0%	48%	41%	10%
TO2-Malaria	20	10%	65%	10%	15%
TO3-PRH	9	11%		67%	22%
Subnational level 1	1,023	7%	44%	37%	12%
TO1-HIV/AIDS	448	13%	36%	40%	11%
TO2-Malaria	575	2%	50%	35%	12%
Total	1,081	7%	44%	37%	12%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	<p>The overall (central and district) stocked according to plan rate for HIV products rose from 36 percent to 40 percent. This quarter, Burundi's tracer products for adult first- and second-line ARVs transitioned to TLD and abacavir/lamivudine, respectively. At the central level, good supply of these commodities helped improve the overall stocked according to plan rates, as they replaced understocked products that were transitioning out last quarter. No stockouts were observed at the central level. At the district level, stockouts dropped from 18 percent to 13 percent, with some increases in understocking as the system manages product transitions down to all levels.</p> <p>Malaria stock status remained consistent from the previous quarter, with stocked according to plan and overstocking rates holding steady. At the central level, the stocked according to plan rate fell to 10 percent, with another 10 percent of observations stocked out. At the district level, stockouts fell to only 3 percent, with understocking increasing slightly. This is in the context of the planned phase out of ASAQ as the country's first-line ACT treatment, which is expected to be replaced by AL beginning in Q2. Understocks are therefore expected at this time.</p> <p>For family planning, stock status saw a marked improvement, from 22 percent to 67 percent of observations stocked according to plan. Consumption of male and female condoms and emergency oral contraceptives returned these products to recommended levels after being overstocked last quarter. Only one products, DMPA-SC, was stocked out at the central level, and no items were understocked.</p> <p>To maintain and improve stock status performance, GHSC-PSM is strengthening awareness of district management teams to improve reporting from district pharmacies; mobilizing the leadership at the district health offices to complete logistics data entry in DHIS2, in partnership with DSNIS; monitoring district compliance with the requisition schedule; supporting supervision activities related to the improvement if LMIS data; and continuing to collaborate with the health programs during ARV and ACT product transitions.</p>
C7	There were no product losses in GHSC-PSM custody to report this quarter.

Supply plans, innovations, and strategic activities

Total Innovations
implemented
this quarter

0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
GHSC-PSM Burundi does not have any innovations to report this quarter.		

Country

▼

Burundi

▼

FY Quarter

▼

2020-Q1

▼

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
ARVs	Yes
Condoms	Yes
FP commodities	Yes
Lab (HIV diagnostics)	Yes
Malaria commodities	Yes
RTKs	Yes

Analysis

Burundi submitted all six required supply plans to GHSC-PSM headquarters this period.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

▼

Burundi

▼

FY Quarter

▼

2020-Q1

▼

C2. Number of people trained by sex

Sex	Total
Total	

C2. Number of people trained by supply chain level

Supply Chain Level	Total
Total	

C2. Number of people trained by funding source and type

Type	Total
Total	

C2. Number of people trained by technical area

Supply Chain Function	Total
Total	

Analysis



There was no training activity to report in Burundi this quarter.

Molecular Instruments and HIV Tracer Products

Country

Burundi

FY Quarter

2020-Q1

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

Analysis

GHSC-PSM does not manage or support maintenance for any molecular instruments in Burundi.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Dolutegravir 300/300/50mg
2nd line adult ARV	Abacavir/Lamivudine 600/300 mg
Pediatric ARV	Abacavir/Lamivudine 60/30 mg
First RTK	Determine
Second RTK	STAT-PAK Dipstick
Tie-breaker RTK	Not reported
Viral load reagent	Not reported
Viral load consumable	
EID reagent	Not reported
EID consumable	

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	1.7%	2,581
1st line adult ARV	0.4%	672
2nd line adult ARV	11.6%	95
Pediatric ARV	10.4%	183
First RTK	1.1%	661
Second RTK	0.7%	287
Male condoms (HIV)	0.2%	594
Female condoms (HIV)	0.0%	89
TO2-Malaria	0.5%	5,529
AS/AQ 100/270mgx3	1.0%	811
AS/AQ 100/270mgx6	0.2%	834
AS/AQ 25/67.5mg	0.3%	759
AS/AQ 50/135mg	0.6%	817
mRDT	0.4%	828
SP	0.7%	708
LLINs	0.0%	772
TO3-PRH	0.4%	3,863
Female condoms (HIV)	0.0%	89
Combined oral contraceptive with iron	0.6%	685
DMPA-Intramuscular injectable	0.0%	688
2-rod implant	0.0%	661
Emergency contraceptive, 2 tablets	0.0%	387
Progestin only pills	0.0%	455
Copper-bearing IUD	3.0%	304
Male condoms (FP)	0.2%	594
Total	0.7%	11,973

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO3-PRH		
Combined oral methods	0.6%	685
Injectable contraceptives	0.0%	688
Implantable contraceptives	0.0%	661
Emergency oral contraceptives	0.0%	387
Progestin-only methods	0.0%	455

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	76%	958
TO2-Malaria	85%	958
TO3-PRH	80%	930

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	32%	14%	48%	5%	56
TO1-HIV/AIDS	41%	10%	48%	0%	29
TO2-Malaria	10%	15%	65%	10%	20
TO3-PRH	67%	22%		11%	9
Subnational level 1	37%	12%	44%	7%	1,023
TO1-HIV/AIDS	40%	11%	36%	13%	448
TO2-Malaria	35%	12%	50%	2%	575
Total	37%	12%	44%	7%	1,079

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

▼

Burundi

▼

FY Quarter

▼

2020-Q1

▼

C2. Number of people trained

Task Order	Total
Total	

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Condoms	1	1
FP commodities	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
RTKs	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country

Cambodia



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

Cambodia

FY Quarter

2020-Q1

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
TO2-Malaria	972	7.8%
mRDT	972	7.8%
Total	972	7.8%

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
Total		

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO2-Malaria	972	99%
Total	972	99%

Ref Analysis

B1	This is the first quarter for which Cambodia is reporting on the stockout rate indicator. While there is data available for TO2, please note that we do not have data readily available for TO1 at the subnational level just yet. The stockout rate for TO2 was at 7.8 percent. This encompasses RDTs as the only tracer products being reported for this quarter. Factors contributing to the stockout rate include stockout in October at the central level, which directly affected the quantity distributed to the subnational level as distribution takes place on a quarterly basis from the central to the subnational level.
B3	This is the first quarter for which Cambodia is reporting on the LMIS reporting rate indicator. The reporting rate was very high at 99 percent for TO2.

Warehouse stock status and product losses

Country

▼

Cambodia

▼

FY Quarter

▼

2020-Q1

▼

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	5	20%	20%		60%
TO1-HIV/AIDS	4	25%			75%
TO2-Malaria	1		100%		
Subnational level 1	53	11%	49%	28%	11%
TO2-Malaria	53	11%	49%	28%	11%
Total	58	12%	47%	26%	16%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref Analysis

B2 This is the first quarter for which Cambodia is reporting on the stocked according to plan indicator. TO 1 is being reported at the central level and not at the subnational level this quarter for which it shows 25 percent stock outs and 75 percent overstock of products. The tracer products being reported for TO1 are 1st and 2nd line ARVs and pediatric ARVs. The 75 percent overstock indicates that there was over 9 months of stock at the central level. TO2 is being reported at both the central and subnational level. At the central level there is 100 percent understock which could be caused by procurement delays, forecasting errors or longer lead times. Whereas at the subnational level there is 11 percent products stocked out, 50 percent understocked, 28 percent stocked according to plan and 11 percent overstocked. The 50 percent understock is caused by low stock or stockout at the national level during the time of distribution. The tracer products being reported for TO2 are RDTs.

C7 GHSC-PSM in Cambodia does not report on this indicator

Supply plans, innovations, and strategic activities

Total Innovations implemented this quarter

Type of innovationNumber of innovations

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
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Country

Cambodia

FY Quarter

2020-Q1

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
Malaria commodities	No

Analysis

Supply plans were not updated or submitted to GHSC-PSM HQ for malaria commodities this quarter since the field office has just recently received the FASP training and were not able to submit supply plans for this quarter. However, the FO aims to submit supply plans for the next quarter

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description

Training for supply chain partners

Country

Cambodia

FY Quarter

2020-Q1

C2. Number of people trained by sex

Sex	TO1-HIV/AIDS	TO2-Malaria	Total
Female	3	3	6
Male	14	10	24
Total	17	13	30

C2. Number of people trained by supply chain level

Supply Chain Level	TO1-HIV/AIDS	TO2-Malaria	Total
Central	17	13	30
Total	17	13	30

C2. Number of people trained by funding source and type

Type	TO1-HIV/AIDS	TO2-Malaria	Total
TO-specific	17	13	30
Total	17	13	30

C2. Number of people trained by technical area

Supply Chain Function	TO1-HIV/AIDS	TO2-Malaria	Total
MIS	17		17
Strategy and Planning		13	13
Total	17	13	30

Analysis

In Q1 FY20, GHSC-PSM Cambodia conducted 3 trainings covering 30 participants in total (24 Male, 6 Female). The trainings focused on Strategy and Planning and MIS and were conducted at the central level. There were 17 participants at the MIS trainings which were funded by TO1 and 13 participants at the strategy and planning training which were TO2 funded. The details of these trainings are (1) Quarterly PSM-Sub-Working-Group Meeting for Malaria to review the Terms of Reference and discuss the Malaria supply chain related issues in Cambodia; (2) LMIS Partner Coordination Meeting to discuss the current status of mSupply, LMIS, pilot project and prepare for site assessments including interview, questionnaire and orientation to evaluate pilot projects; and (3) LMIS Partner Coordination Meeting to review the findings from mSupply pilot site assessment and prepare for result dissemination

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO2-Malaria	7.8%	972
mRDT	7.8%	972
Total	7.8%	972

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
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See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO2-Malaria	99%	972

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	60%	20%	20%	5	
TO1-HIV/AIDS	75%		25%	4	
TO2-Malaria			100%	1	
Subnational level 1	28%	11%	49%	11%	53
TO2-Malaria	28%	11%	49%	11%	53
Total	26%	16%	47%	12%	58

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

▼

FY Quarter

▼

Cambodia

▼

2020-Q1

▼

C2. Number of people trained

Task Order	Female	Male	Total
TO1-HIV/AIDS	3	14	17
TO2-Malaria	3	10	13
Total	6	24	30

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Malaria commodities	1	0

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Cameroon 



Service Delivery Point Stockouts and Reporting Rates

For countries with data available from GHSC-PSM non-supported regions

Country

Cameroon

FY Quarter

2020-Q1

B1. Stockout rate at service delivery points - SDPs located in supported regions

GHSC-PSM Support	Stockout rate	# SDP stock observations
Supported	16.7%	2,732
TO1-HIV/AIDS	12.4%	558
1st line adult ARV	1.0%	210
2nd line adult ARV	4.0%	75
Pediatric ARV	19.6%	56
First RTK	22.1%	122
Second RTK	27.4%	95
TO2-Malaria	17.8%	2,174
AL 6x1	30.7%	163
AL 6x2	38.0%	221
AL 6x3	29.9%	177
AL 6x4	28.1%	349
mRDT	11.2%	448
SP	7.6%	434
LLINs	5.2%	382
Total	16.7%	2,732

B1. Stockout rate at service delivery points - SDPs located in non-supported regions

GHSC-PSM Support	Stockout rate	# SDP stock observations
Not Supported	12.8%	11,688
TO1-HIV/AIDS	22.0%	2,747
1st line adult ARV	17.0%	1,131
2nd line adult ARV	5.6%	36
Pediatric ARV	22.6%	31
First RTK	25.4%	1,207
Second RTK	28.4%	342
TO2-Malaria	10.0%	8,941
AL 6x1	16.5%	413
AL 6x2	19.6%	219
AL 6x3	20.3%	133
AL 6x4	12.4%	678
AS/AQ 100/270mgx3	9.7%	589
AS/AQ 100/270mgx6	10.9%	741
AS/AQ 25/67.5mg	9.4%	532
AS/AQ 50/135mg	9.4%	799
mRDT	9.9%	1,910
SP	6.4%	1,996
LLINs	9.7%	931
Total	12.8%	11,688

B3. LMIS reporting rate

GHSC-PSM Support	Total # of SDPs required to report	Reporting rate
Supported	1,047	70%
Not Supported	11,367	48%
Total	12,414	50%

Ref Analysis

- B3GHSC-PSM in Cameroon reported data from the DHIS2 for HIV/AIDS commodities for the first time this quarter. The project has also begun reporting on supported and non-supported sites because DHIS2 has stock data for the entire country. For HIV/AIDSs, the supported sites that GHSC-PSM in Cameroon is reporting on has changed from FY2019 to FY2020. In FY2019, the project was supporting just over 900 high and low volume sites in the Centre and Littoral regions. Starting in FY2020, GHSC-PSM in Cameroon is now supporting nearly 300 high volume sites throughout the country. Not of all these sites have received supervision visits and training yet, which is partially why the reporting rate for this program area decreased this quarter. As for malaria, the reporting rate increased this quarter because the project provided support for data entry into DHIS2 in the supported regions and facilities have been increasingly using DHIS2 because they are seeing the benefit of reporting the data.
- B1GHSC-PSM in Cameroon reported supported and non-supported sites for the first time since SDP stock data for the entire country is now available in DHIS2. For HIV/AIDSs, the project is reporting on the nearly-300 supported PEPFAR sites throughout the country. At these sites, the overall HIV/AIDSs stock out rate of 12.4 percent can largely be attributed to the phasing out of AZT/3TC/NVP 60/30/50 mg as the most used first line pediatric ARV and the stock out of RTKs in country due to delay in disbursement of government funding for the procurement of these commodities, which extends procurement lead times. For most used first line ARV, ABC/3TC 120/60 mg, which is the product GHSC-PSM in Cameroon reports on, is the recommended treatment to use; however, some facilities continue to use AZT/3TC/NVP 60/30/50 mg as their first choice for treatment. This product is being phased out. As such, not all facilities are stocking ABC/3TC 120/60 mg yet, despite treatment guidelines requesting facilities to make the change. For malaria, the overall stock out rate of 17.8 percent can largely be attributed to the high stock out rate of all four presentations of Alu in the supported regions of North and Far North. This is due to the stock out of Alu at the RFHP because of delays in procuring these commodities because of import waivers. AS/AQ is not reported in PMI-supported regions, but is reported in non-supported regions, because AS/AQ is no longer managed in these regions and the remaining stock balance was redistributed to non-PMI regions in early 2019.

Warehouse stock status and product losses

Country

Cameroon

FY Quarter

2020-Q1

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	45	51%	33%	9%	7%
TO1-HIV/AIDS	15	27%	53%	20%	0%
TO2-Malaria	30	63%	23%	3%	10%
Subnational level 1	186	25%	48%	13%	13%
TO1-HIV/AIDS	150	21%	50%	16%	13%
TO2-Malaria	36	42%	42%	0%	17%
Total	231	30%	45%	12%	12%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref Analysis

B2	GHSC-PSM in Cameroon was able to report on the stock status of malaria commodities at the central level for the first time this quarter. Overall, the rate at which commodities were stocked according to plan was low, at 12 percent, which can largely be attributed to a delay in government funding to procure commodities and, for malaria commodities, the delay in procurement due to import waivers that need to be obtained. These delays have also been attributed to the overall stockout rate of 30 percent
C7	GHSC-PSM in Cameroon did not have any product loss to report this quarter.

Supply plans, innovations, and strategic activities

Country

Cameroon

FY Quarter

2020-Q1

Total Innovations implemented this quarter0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
GHSC-PSM Cameroon does not have any innovations to report this quarter.		

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
ARVs	Yes
Lab (HIV diagnostics)	No
Malaria commodities	Yes
RTKs	Yes
TPT	Yes

Analysis

GHSC-PSM in Cameroon updated and submitted four of their required supply plans for the quarter. The lab supply plan is being worked on but has not been submitted yet.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

Cameroon

FY Quarter

2020-Q1

C2. Number of people trained by sex

Sex	Total
Total	

C2. Number of people trained by supply chain level

Supply Chain Level	Total
Total	

C2. Number of people trained by funding source and type

Type	Total
Total	

C2. Number of people trained by technical area

Supply Chain Function	Total
Total	

Analysis

GHSC-PSM in Cameroon did not have any trainings to report this quarter.

Molecular Instruments and HIV Tracer Products

Country

Cameroon

FY Quarter

2020-Q1

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

Analysis

GHSC-PSM in Cameroon does not report on molecular instruments.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Efavirenz 300/300/600 mg
2nd line adult ARV	Abacavir/Lamivudine 600/300 mg
Pediatric ARV	Zidovudine/Lamivudine/Nevirapine 60/30/50 mg
First RTK	Determine
Second RTK	OraQuick, Shanghi
Tie-breaker RTK	Not reported
Viral load reagent	Not reported
Viral load consumable	Not reported
EID reagent	Not reported
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	12.4%	558
1st line adult ARV	1.0%	210
2nd line adult ARV	4.0%	75
Pediatric ARV	19.6%	56
First RTK	22.1%	122
Second RTK	27.4%	95
TO2-Malaria	17.8%	2,174
AL 6x1	30.7%	163
AL 6x2	38.0%	221
AL 6x3	29.9%	177
AL 6x4	28.1%	349
mRDT	11.2%	448
SP	7.6%	434
LLINs	5.2%	382
Total	16.7%	2,732

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
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See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	83%	296
TO2-Malaria	66%	751

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	9%	7%	33%	51%	45
TO1-HIV/AIDS	20%	0%	53%	27%	15
TO2-Malaria	3%	10%	23%	63%	30
Subnational level 1	13%	13%	48%	25%	186
TO1-HIV/AIDS	16%	13%	50%	21%	150
TO2-Malaria	0%	17%	42%	42%	36
Total	12%	12%	45%	30%	231

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

Cameroon

FY Quarter

2020-Q1

C2. Number of people trained

Task Order	Total
Total	

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Lab (HIV diagnostics)	1	0
Malaria commodities	1	1
RTKs	1	1
TPT	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country

Eswatini



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

▼

Eswatini

▼

FY Quarter

▼

2020-Q1

▼

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
TO1-HIV/AIDS	112	3.6%
1st line adult ARV	22	0.0%
2nd line adult ARV	40	2.5%
Pediatric ARV	17	5.9%
First RTK	0	
Second RTK	0	
Viral load reagent	1	0.0%
Viral load consumable	1	0.0%
EID reagent	0	
EID consumable	0	
Male condoms (HIV)	31	6.5%
Female condoms (HIV)	0	
RUTF	0	
Total	112	3.6%

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
Total		

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO1-HIV/AIDS	45	89%
Total	45	89%

Ref Analysis

- B1

The stockout rate for HIV tracer commodities in FY 2019 Q4 was 3.6 percent (4/112), an improvement from 4.7 percent in the previous quarter. Four instances of stockouts were recorded: male condoms in two SDPs, the most used pediatric first-line ARV in one, and the second-line adult ARV in one. It is important to note that fewer facilities were captured in this reporting quarter (112 reporting SDPs compared to 252 last quarter), reflecting holiday delays in both reporting and CTS recording.
- B3

1. The rate of reporting of SDPs into the commodity tracking system (CTS) stood at 88.9 percent (40/45) for FY 2020 Q1. This performance is an improvement from a rate of 77.8 percent (35/45) in the previous quarter.
- B3

2. It is important to note that the central medical store (CMS) does not directly track the reporting rates of SDPs. Reporting rates for this indicator are inferred from the presence or absence of monthly stock statuses within the CTS. Each quarter, the tracer commodity for which the most monthly stock statuses are available is used to sum the indicator's numerator. In FY 2020 Q1, the most monthly stock statuses were available for the most-used second-line ARV. The high instance of reporting and requisition submissions for this tracer commodity may reflect concerns about low stock of TLD (and TLE) at the central stores and thus facilities' desire to reorder before a potential central level stockout. In the previous quarter, the tracer commodity with most recorded instances of stock statuses was the most used first-line adult ARV. Recorded statuses for this tracer, however, declined from 35 SPDs in FY 2019 Q4 to 22 in this quarter, likely due to general reporting delays from holiday personnel shortages.
- B3

3. Finally, this indicator specifically tracks reporting rates for the ART/PMTCT report and requisitions form specifically, which includes ARVs. Forty-five SDPs are required to submit this form each month. Additional reporting and requisition forms exist in Eswatini's system. Two others include TO1 tracer commodities - the FP form (which includes male condoms) and the lab form (which includes HIV RTKs, viral load reagent and consumables). A larger number of SDPs are required to report on male condoms, 282 as opposed to 45 for ART/PMTCT. In FY 2020 Q1, a much smaller percentage of required SDPs successfully reported on male condoms - 31 of 282, or 11 percent, which is consistent with past trends. Throughout the system, there are notable delays in SDPs in submitting their commodity reports to the data management unit at the CMS, reflecting transport challenges, unclear reporting channels, and weak regional support structures to support timely reporting. Reporting is an area targeted for strengthening through mentorship and supervision in the upcoming year

Warehouse stock status and product losses

Country

Eswatini

FY Quarter

2020-Q1

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	36	0%	33%	14%	53%
TO1-HIV/AIDS	36	0%	33%	14%	53%
Total	36	0%	33%	14%	53%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref Analysis

- B2

The most-used first-line ARVs (tenofovir/lamivudine/dolutegravir (300/300/50)) was the only commodity consistently stocked according to plan across all three central level stock status observations in FY 2020 Q1. This was followed by the most used first-line pediatric ARV (abacavir/lamivudine (60/30mg)), which was stocked according to plan in two of three observations. About half of the TO1 tracer commodities were consistently overstocked centrally during this quarter, including RTKs, male condoms, RUTF, viral load reagent and viral load consumables. In the case of RTKs, this may reflect efforts to support overly optimistic HIV SURGE activities. Four tracer commodities were consistently understocked in FY 2020 Q1: the most commonly used second-line adult ARV, female condoms, EID reagent and EID consumable.
- C7

No products are stored under GHSC-PSM Eswatini control.

Supply plans, innovations, and strategic activities

Country

▼

Eswatini

▼

FY Quarter

▼

2020-Q1

▼

Total Innovations implemented this quarter

New approaches1

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
TO1-HIV/AIDS	New approaches	There has been a longstanding challenge of accumulation of expired medicines and medical and nutritional supplies at the CMS and facilities throughout Eswatini, dating back to 2013. As part of a larger portfolio of waste management actions supported by GHSC-PSM, GHSC-PSM worked with the animal nutrition department of Ministry of Agriculture to determine whether some of the expired nutritional commodities could be used for animal feed production, an innovative initiative that would reduce the costs of disposing of the expired commodities. GHSC-PSM, in conjunction with the animal nutrition department, has recruited the assistance of the Ministry of Agriculture Research Center to test the expired nutritional products for suitability for animal feed production and is currently mobilizing reagents for this testing. This innovative use of expired product is part of a diverse portfolio of waste management actions supported by GHSC-PSM - including evacuation of waste to neighboring South Africa and a no-cost recycling partnership with a local company - that will substantially reduce the burden of accumulated waste throughout the system.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
ARVs	Yes
Condoms	Yes
Lab (HIV diagnostics)	Yes
RTKs	Yes
TPT	Yes
VMMC	No

Analysis

Quarterly forecasts were successfully conducted and submitted to HQ for ARVs, condoms, TPT, RTKs and lab commodities in FY 2020 Q1. As of time of reporting, plans for submitting the outstanding supply plan for VMMC are in place. Due to the absence of MOH counterparts during the holiday period, delayed timelines for supply plans submissions were negotiated.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

Eswatini

FY Quarter

2020-Q1

C2. Number of people trained by sex

Sex	TO1-HIV/AIDS	Total
Female	41	41
Male	27	27
Total	68	68

C2. Number of people trained by supply chain level

Supply Chain Level	TO1-HIV/AIDS	Total
Subnational level 1	18	18
SDP	50	50
Total	68	68

C2. Number of people trained by funding source and type

Type	TO1-HIV/AIDS	Total
TO-specific	68	68
Total	68	68

C2. Number of people trained by technical area

Supply Chain Function	TO1-HIV/AIDS	Total
Human Resources Capacity Development	50	50
Warehousing and Inventory Management	18	18
Total	68	68

Analysis

GHSC-PSM facilitated two trainings in FY 2020 Q1 in the areas of warehousing and inventory management and human resources capacity development. Fifty participants (21 men, 29 women) were trained in HRCD (pharmacy and therapeutics committee training), and 18 participants (6 men, 12 women) trained in warehousing and inventory management, totaling 68 participants trained in the quarter (41 men, 27 women).

Molecular Instruments and HIV Tracer Products

Country

Eswatini

FY Quarter

2020-Q1

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

Analysis

GHSC-PSM Eswatini does not procure or support molecular instruments in the country.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Dolutegravir (300/300/50mg)
2nd line adult ARV	Atazanavir/Ritonavir (300/100mg)
Pediatric ARV	Abacavir/Lamivudine (60/30mg) (ABC/3TC)
First RTK	Determine HIV 1/2
Second RTK	Unigold HIV KIT
Tie-breaker RTK	None
Viral load reagent	CAP/CTM HIV-1 Monitor V2.0
Viral load consumable	CAP K TIPS
EID reagent	HIV-1 Qualitative Test
EID consumable	HIV-1 Qual Spex

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	3.6%	112
1st line adult ARV	0.0%	22
2nd line adult ARV	2.5%	40
Pediatric ARV	5.9%	17
First RTK		0
Second RTK		0
Viral load reagent	0.0%	1
Viral load consumable	0.0%	1
EID reagent		0
EID consumable		0
Male condoms (HIV)	6.5%	31
Female condoms (HIV)		0
RUTF		0
Total	3.6%	112

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
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See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	89%	45

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	14%	53%	33%	0%	36
TO1-HIV/AIDS	14%	53%	33%	0%	36
Total	14%	53%	33%	0%	36

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

▼

Eswatini

▼

FY Quarter

▼

2020-Q1

▼

C2. Number of people trained

Task Order	Female	Male	Total
TO1-HIV/AIDS	41	27	68
Total	41	27	68

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Condoms	1	1
Lab (HIV diagnostics)	1	1
RTKs	1	1
TPT	1	1
VMMC	1	0

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Ethiopia 



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

▼

Ethiopia

▼

FY Quarter

▼

2020-Q1

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B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
TO1-HIV/AIDS	5,007	8.9%
1st line adult ARV	923	0.4%
2nd line adult ARV	463	6.0%
Pediatric ARV	861	6.6%
First RTK	603	7.0%
Second RTK	506	17.4%
Tie-breaker RTK	491	16.5%
Viral load reagent	19	0.0%
Viral load consumable	235	26.4%
EID reagent	19	21.1%
EID consumable	149	24.2%
Male condoms (HIV)	738	5.8%
Total	5,007	8.9%

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
TO2-Malaria	3,219	11.2%
AL 6x1	450	19.6%
AL 6x2	458	17.0%
AL 6x3	383	22.2%
AL 6x4	737	9.5%
AL inability to treat	854	0.6%
mRDT	337	10.1%
Total	3,219	11.2%

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
TO3-PRH	6,578	8.5%
Combined oral contraceptive with iron	940	9.0%
DMPA-Intramuscular injectable	1,039	6.8%
1-rod implant	906	13.2%
2-rod implant	682	6.3%
Emergency contraceptive, 2 tablets	809	10.6%
Progestin only pills	617	13.9%
Copper-bearing IUD	847	3.3%
Male condoms (FP)	738	5.8%
Total	6,578	8.5%

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO1-HIV/AIDS	1,239	92%
TO2-Malaria	1,059	81%
TO3-PRH	1,173	93%
TO4-MCH	1,173	76%
Total	4,644	86%

Ref Analysis

B1	GHSC-PSM will provide additional site-level support to SDPs to improve commodity management and data recording practices, and support to EPSA to implement SOPs for inventory management and tracking the movement of priority health commodities from central EPSA down to SDPs.
B1	Stockout rates overall did not shift notably since last quarter.
B1	TO1: A few commodities contributed to the slight uptick in TO1 stockouts from 7 percent to 9 percent. Stockouts of second-line adult ARVs and pediatric ARVs increased from 0 percent to 6 percent and 0 percent to 7 percent, respectively. Stockouts of viral load consumables increased from 19 percent to 26 percent, while stockouts of EID consumables increased from 16 percent to 24 percent. EID consumables were stocked out due to the expiry of the commodity at facility and branch warehouses. On the other hand, stockouts of EID reagents improved significantly from 47 percent to 21 percent, and all three RTKs continue to show improvements in stock availability.
B1	TO2: The average stockout rate for TO2 products was 15 percent, which was nearly unchanged since last quarter. However, the rate of SPDs unable to treat malaria with AL (“inability to treat”) was low at 0.6 percent. The major reason for the stockouts of AL is the recurrent delay in EPSA’s procurement that leads to shortages of AL at the national level. There are shipments expected to arrive in country in March 2020 for AL 6x1, 6x2, and 6x3. Two shipments are also expected to arrive in country at end of January 2020 and the beginning of March 2020, respectively.
B1	TO3: The stockout rate for family planning commodities remained unchanged since last quarter at 9 percent. The relatively high stockouts of one-rod implants (13 percent) and progestin-only pills (14 percent) can be partly attributed to poor data quality of the RRF forms. An assessment conducted by GHSC-PSM found that many health facilities were failing to account for commodities in the dispensary when they were stocked out in the store room.
B3	Out of the 18 EPSA regional hubs, Shire, Negele Borena and Jigjiga had highest reporting rates (100 percent); all hubs achieved a reporting rate of 93 percent and above. GHSC-PSM continued to strengthen regular data quality analysis practices and use of the analysis results to identify low performing service delivery points for more follow-up and support, including improved monitoring of SDPs’ reporting rates.
B3	The LMIS reporting rates remained high across all four task orders, with a decrease in TO4 reporting from 81 percent to 76 percent. GHSC-PSM revised/updated the list of reporting facilities included in its database to remove 11 facilities that stopped providing services (e.g. some military facilities moved to other locations), facilities that were rarely reporting, and those providing only PMTCT services. On the other hand, the project added 40 new facilities that provide all four programs.

Warehouse stock status and product losses

Country

Ethiopia

FY Quarter

2020-Q1

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	24	9%	70%	9%	13%
TO1-HIV/AIDS	11	18%	55%	9%	18%
TO2-Malaria	5		100%		
TO3-PRH	8		63%	25%	13%
Subnational level 1	360	18%	24%	15%	44%
TO1-HIV/AIDS	126	2%	15%	23%	60%
TO2-Malaria	90	36%	34%	12%	18%
TO3-PRH	144	19%	23%	8%	50%
Total	384	17%	27%	14%	42%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
TO1	Global	Transit	Damage	ARVs	\$320	\$2,193,441	0.01%

Ref Analysis

- B2

At a program level, these trends were more pronounced for malaria (100 percent of commodity observations understocked at the central warehouse) and HIV/AIDS (60 percent of commodity observations overstocked at the regional level). For ARVs, stocked according to plan increased across the two levels from 14 percent to 32 percent.
- B2

At the regional branches, 36 percent of malaria commodity observations were stocked out.
- B2

Overall, there has not been a notable shift in the rate of stocked according to plan this quarter. However, across warehouse levels, stockouts increased from 9 percent to 17 percent this quarter. Across program areas, the central warehouse was largely characterized by understocking (70 percent), while regional branch warehouses tended more toward overstocking (44 percent).
- B2

Several activities are targeting improvements in this area, including supporting the EPSA to strengthen its inventory management system (cyclical and annual inventory) and to triangulate consumption and service data, and working with EPSA to review inventory levels in accordance with the existing warehousing and distribution capacity.
- C7

GHSC-PSM does not have custody of any products in Ethiopia and therefore does not report on product losses.

Supply plans, innovations, and strategic activities

Total Innovations implemented this quarter

New technologies0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
GHSC-PSM Ethiopia does not have any innovations to report this quarter.		

Country

Ethiopia

FY Quarter

2020-Q1

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
ARVs	Yes
Condoms	Yes
FP commodities	Yes
Lab (HIV diagnostics)	Yes
Malaria commodities	Yes
RTKs	Yes
TPT	Yes

Analysis

GHSC-PSM updated the required quarterly supply plans for HIV RTKs, ART monitoring laboratory commodities, male condoms, malaria control program commodities, and family planning commodities during the FY 2020 Q1 reporting period. All of the quarterly supply plan updates were submitted to GHSC-PSM headquarters, meeting 100 percent of the supply plan submission expectations, including the addition of two new program areas for which data were collected. Also, supply plans were updated and shared with the home office this quarter: ARVs and Tuberculosis Preventative Treatment (TPT)

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

Ethiopia

FY Quarter

2020-Q1

C2. Number of people trained by sex

Sex	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Female	1	32	1	1	35
Male	11	92	9	5	117
Total	12	124	10	6	152

C2. Number of people trained by supply chain level

Supply Chain Level	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Central	12	38	10	6	66
Subnational level 1		86			86
Total	12	124	10	6	152

C2. Number of people trained by funding source and type

Type	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Cross-TO	12	6	10	6	34
TO-specific		118			118
Total	12	124	10	6	152

C2. Number of people trained by technical area

Supply Chain Function	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Quality Assurance	12	6	10	6	34
Transportation and Distribution		118			118
Total	12	124	10	6	152

Analysis

GHSC-PSM provided training for 152 supply chain professionals (117 men and 35 women) on the following thematic areas:

- 1. LLIN distribution campaign training for 32 participants at the central level (27 men and 5 women)
- 2. LLIN distribution campaign training for 86 participants at the regional level (60 men and 26 women)
- 3. Basic quality management system (QMS) training for 10 EPSA staff (8 men and 2 women)
- 4. QMS audit training for 24 EPSA staff (22 men and 2 women)

Molecular Instruments and HIV Tracer Products

Country

▼

Ethiopia

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FY Quarter

▼

2020-Q1

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C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

90%

Analysis

Out of the 20 molecular instruments, 18 remained functional throughout the quarter. Performance remained the same as last quarter, at 90 percent. There were machine failures at Debrebirhan hospital and Hawassa RL. The service was interrupted for a total of 16 working days. down from 59 days last quarter.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir disoproxil fumarate -Lamivudine- Dolutegravir 300+300+50MG/tablet (TLD)
2nd line adult ARV	Atazanavir/Ritonavir 300/100 mg
Pediatric ARV	Lamivudine/Zidovudine/Nevirapine 30/60/50 mg
First RTK	Stat-Pack, 20 tests
Second RTK	Abon, 40 tests
Tie-breaker RTK	SD Bioline, 25 tests
Viral load reagent	Molecular, m2000 Real Time PCR, HIV-1 Amplification Reagent Kit, 96 tests, Quantitative, (4 Packs x 24) Assays Molecular, COBAS, TaqMan, CAP/CTM HIV v2.0, Quantitative, 48 Tests Plasma preparation tube of 100 (for plasma based test)
Viral load consumable	Dry Blood Spot (DBS) kit sample collection bundle of 20 tests
EID reagent	Molecular, m2000 RealTime PCR, HIV-1 Qualitative Amplification Reagent Kit, 96 Tests Molecular, COBAS TaqMan, AmpliPrep, HIV-1, Qualitative, 48 Tests,
EID consumable	Dry Blood Spot (DBS) kit sample collection bundle of 20 tests

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	8.9%	5,007
1st line adult ARV	0.4%	923
2nd line adult ARV	6.0%	463
Pediatric ARV	6.6%	861
First RTK	7.0%	603
Second RTK	17.4%	506
Tie-breaker RTK	16.5%	491
Viral load reagent	0.0%	19
Viral load consumable	26.4%	235
EID reagent	21.1%	19
EID consumable	24.2%	149
Male condoms (HIV)	5.8%	738
TO2-Malaria	15.0%	2,365
AL 6x1	19.6%	450
AL 6x2	17.0%	458
AL 6x3	22.2%	383
AL 6x4	9.5%	737
mRDT	10.1%	337
TO3-PRH	8.5%	6,578
Combined oral contraceptive with iron	9.0%	940
DMPA-Intramuscular injectable	6.8%	1,039
1-rod implant	13.2%	906
2-rod implant	6.3%	682
Emergency contraceptive, 2 tablets	10.6%	809
Progestin only pills	13.9%	617
Copper-bearing IUD	3.3%	847
Male condoms (FP)	5.8%	738
Total	10.0%	13,212

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO2-Malaria		
AL inability to treat	0.6%	854
TO3-PRH		
Combined oral methods	9.0%	940
Injectable contraceptives	6.8%	1,039
Implantable contraceptives	1.5%	996
Emergency oral contraceptives	10.6%	809
Progestin-only methods	13.9%	617

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	92%	1,239
TO2-Malaria	81%	1,059
TO3-PRH	93%	1,173
TO4-MCH	76%	1,173

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	9%	13%	70%	9%	23
TO1-HIV/AIDS	9%	18%	55%	18%	11
TO2-Malaria			100%		5
TO3-PRH	25%	13%	63%		8
Subnational level 1	15%	44%	24%	18%	342
TO1-HIV/AIDS	23%	60%	15%	2%	126
TO2-Malaria	12%	18%	34%	36%	90
TO3-PRH	8%	50%	23%	19%	144
Total	14%	42%	27%	17%	365

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

▼

Ethiopia

▼

FY Quarter

▼

2020-Q1

▼

C2. Number of people trained

Task Order	Female	Male	Total
TO1-HIV/AIDS	1	11	12
TO2-Malaria	32	92	124
TO3-PRH	1	9	10
TO4-MCH	1	5	6
Total	35	117	152

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Condoms	1	1
FP commodities	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
RTKs	1	1
TPT	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
20	90%

For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.


GLOBAL HEALTH SUPPLY CHAIN PROGRAM


Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Ghana 



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

▼

FY Quarter

▼

Ghana

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2020-Q1

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B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
TO1-HIV/AIDS	5,403	15.6%
1st line adult ARV	440	8.2%
2nd line adult ARV	440	40.7%
Pediatric ARV	440	23.9%
First RTK	440	22.3%
Second RTK	440	23.9%
Male condoms (HIV)	2,452	5.9%
Female condoms (HIV)	751	23.6%
Total	5,403	15.6%

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
TO3-PRH	21,252	5.1%
Combined oral contraceptive with iron	1,594	7.8%
NET-En Injectable	2,952	4.5%
DMPA-Intramuscular injectable	4,653	1.9%
1-rod implant	3,157	2.6%
2-rod implant	3,649	2.0%
Progestin only pills	1,489	9.6%
Copper-bearing IUD	555	22.7%
Male condoms (FP)	2,452	5.9%
Female condoms (FP)	751	23.6%
Total	21,252	5.1%

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
Total		

Ref Analysis

B1	The overall stockout rate for HIV/AIDS and family planning products remained consistent with the previous quarter. For HIV/AIDS commodities, the stockout rate for most used second-line ARV and most used first-line pediatric ARV continues to be high, 41 percent and 24 percent, respectively, because most facilities do not have clients that are on second-line or pediatric regimens, so those facilities prefer not to stock those products to avoid expiries. These facilities are expected to manage these ARV products accordance to national policy. For family planning products, copper bearing IUDs and female condoms both saw stock out rates higher than 20 percent. These high stock out rates can als o be attributed to the fact that facilities prefer to not stock the products because there is low demand for them.
B3	GHSC-PSM in Ghana will begin to report this indicator in FY 2020 Q2.

Warehouse stock status and product losses

Country

▼

FY Quarter

▼

Ghana

▼

2020-Q1

▼

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	81	23%	19%	17%	41%
TO1-HIV/AIDS	21	5%	19%	33%	43%
TO2-Malaria	30	37%	17%	17%	30%
TO3-PRH	30	17%	17%	20%	47%
Subnational level 1	810	29%	19%	21%	32%
TO1-HIV/AIDS	210	12%	30%	28%	30%
TO2-Malaria	300	42%	18%	16%	24%
TO3-PRH	300	25%	13%	20%	42%
Total	891	28%	19%	21%	32%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref Analysis

B2	The overall rate at which products were stocked according to plan increased slightly, from 17 percent last quarter to 21 percent this quarter, because all three program areas saw an increase in their individual program area’s stocked according to plan rates at the regional level.
C7	GHSC-PSM in Ghana did not have any product loss to report this quarter.

Supply plans, innovations, and strategic activities

Country

Ghana

FY Quarter

2020-Q1

Total Innovations implemented this quarter0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
		GHSC-PSM Ghana does not have an innovation to report this quarter.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
ARVs	Yes
Condoms	Yes
FP commodities	Yes
Lab (HIV diagnostics)	No
Malaria commodities	Yes
RTKs	Yes

Analysis

GHSC-PSM in Ghana submitted five of the six required supply plan updates this quarter.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

▼

Ghana

▼

FY Quarter

▼

2020-Q1

▼

C2. Number of people trained by sex

Sex	Total
Total	

C2. Number of people trained by supply chain level

Supply Chain Level	Total
Total	

C2. Number of people trained by funding source and type

Type	Total
Total	

C2. Number of people trained by technical area

Supply Chain Function	Total
Total	

Analysis

▲
GHSC-PSM in Ghana did not have any trainings to report this quarter.

Molecular Instruments and HIV Tracer Products

Country

Ghana

FY Quarter

2020-Q1

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

Analysis

GHSC-PSM in Ghana does not report on molecular instruments.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Efavirenz 300/300/600 mg
2nd line adult ARV	Lopinavir/Ritonavir 200/50 mg
Pediatric ARV	Zidovudine 60 mg + Lamivudine 30 mg Tablet + Nevrapine 10mg/ml or Nevirapine 50mg dispersible tablet
First RTK	First Response
Second RTK	OraQuick
Tie-breaker RTK	Genscreen (ELISA test)
Viral load reagent	CAP/CTM HIV v2.0, Quantitative, 48 Tests
Viral load consumable	Not reported
EID reagent	CAP CTM HIV Qual 48 tests
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	15.6%	5,403
1st line adult ARV	8.2%	440
2nd line adult ARV	40.7%	440
Pediatric ARV	23.9%	440
First RTK	22.3%	440
Second RTK	23.9%	440
Male condoms (HIV)	5.9%	2,452
Female condoms (HIV)	23.6%	751
TO3-PRH	5.1%	21,252
Combined oral contraceptive with iron	7.8%	1,594
NET-En Injectable	4.5%	2,952
DMPA-Intramuscular injectable	1.9%	4,653
1-rod implant	2.6%	3,157
2-rod implant	2.0%	3,649
Progestin only pills	9.6%	1,489
Copper-bearing IUD	22.7%	555
Male condoms (FP)	5.9%	2,452
Female condoms (FP)	23.6%	751
Total	6.9%	23,452

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO3-PRH		
Combined oral methods	7.8%	1,594
Injectable contraceptives	1.5%	4,884
Implantable contraceptives	1.5%	4,085
Progestin-only methods	9.6%	1,489

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
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B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	17%	41%	19%	23%	75
TO1-HIV/AIDS	33%	43%	19%	5%	21
TO2-Malaria	17%	30%	17%	37%	30
TO3-PRH	20%	47%	17%	17%	30
Subnational level 1	21%	32%	19%	29%	750
TO1-HIV/AIDS	28%	30%	30%	12%	210
TO2-Malaria	16%	24%	18%	42%	300
TO3-PRH	20%	42%	13%	25%	300
Total	21%	32%	19%	28%	825

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

▼

FY Quarter

▼

Ghana

▼

2020-Q1

▼

C2. Number of people trained

Task Order	Total
Total	

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Condoms	1	1
FP commodities	1	1
Lab (HIV diagnostics)	1	0
Malaria commodities	1	1
RTKs	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.


GLOBAL HEALTH SUPPLY CHAIN PROGRAM


Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Guinea 



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

Guinea

FY Quarter

2020-Q1

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
TO2-Malaria	3,470	5.8%
AL 6x1	495	17.2%
AL 6x2	498	8.4%
AL 6x3	500	6.0%
AL 6x4	500	4.4%
AL inability to treat	503	0.6%
mRDT	503	2.4%
SP	471	1.5%
Total	3,470	5.8%

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
TO3-PRH	2,430	11.0%
Combined oral contraceptive with iron	413	14.5%
DMPA-Intramuscular injectable	401	13.5%
2-rod implant	424	11.3%
Progestin only pills	381	13.1%
Copper-bearing IUD	393	3.1%
Male condoms (FP)	418	10.3%
Total	2,430	11.0%

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO2-Malaria	517	98%
TO3-PRH	465	96%
Total	982	97%

Ref	Analysis
B1	Guinea’s overall stockout rate has improved from 9.3 percent in FY19Q4 to 8.6 percent in FY20Q1. The stockout rate for TO2 has gone down slightly from 7.2 percent in Q4 19 to 6.7 percent in Q1 20. It’s a similar case for TO3 where stockout rates went from 11.8 percent in Q4 19 to 11 percent in Q1 20. Factors affecting TO2 stockout are the high stockout rate for Alu 6X1 at 17.2 percent. Actions taken to address this issue are negotiating an early partial delivery by end of February instead of waiting until the scheduled next delivery in July 2020. Also, deliveries of Alu 6X1 to health facilities are being rationed. Additionally, given that only 1 percent facilities were stocked out of all AL formulations, the PNLP recommended that health facilities use available formulations for other age groups for treatment. For TO3, the improvement in stock-out rate can be explained by higher availability of contraceptives at both central and regional levels which made it possible for regional warehouses to provide quantity ordered in October 2019 to health facilities. Another explanation is that remaining stocks from the national FP awareness campaign were kept in health facilities.
B3	The LMIS reporting rate continues to perform well and is consistent with last quarter's reporting rate at 97 percent for FY 2019 Q4 and FY 2020 Q1. The reporting rates of 98 percent for TO2 and 96 percent for TO3 show that Guinea is close to meeting its LOP targets.

Warehouse stock status and product losses

Country

Guinea

FY Quarter

2020-Q1

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	12	25%	33%	25%	17%
TO2-Malaria	6	33%	67%		
TO3-PRH	6	17%		50%	33%
Subnational level 1	72	13%	32%	29%	26%
TO2-Malaria	36	17%	28%	36%	19%
TO3-PRH	36	8%	36%	22%	33%
Total	84	14%	32%	29%	25%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	The overall rate of stocked according to plan at both the central and regional level for this quarter is 29 percent, which shows an improvement compared to the 25 percent in FY 2019 Q4. TO2: The percentage of warehouses at both supply chain levels stocked according to plan for malaria products decreased from 36 percent in FY 2019 Q4 to 31 percent in FY 2020 Q1. This decrease could be due to the low availability observed of certain antimalarial products (AL6, AL18, SP) at the central warehouse to supply the regional warehouses according to their needs. This situation requires the accelerated delivery of these items to strengthen the stock tracking process in the regional warehouses initiated by GHSC-PSM's regional technical advisor. There is an ongoing discussion with HQ to receive 60,000 blisters in FY 2020 Q2 to address the issue of understocked and stocked out levels of Alu 6X1. TO3: The overall improvement on this indicator is due to a significant improvement on availability of TO3 commodities. The stocked according to plan levels increased from 14 percent to 26 percent over the reporting period.
C7	There is no product loss from theft, damage or expiry to report in this period.

Supply plans, innovations, and strategic activities

Country

Guinea

FY Quarter

2020-Q1

Total Innovations implemented this quarter

Type of innovationNumber of innovations

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
GHSC-PSM Guinea does not have any innovations to report this quarter.		

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
Condoms	Yes
FP commodities	Yes
Malaria commodities	Yes

Analysis

The supply plans for TO2, TO3 and condoms were updated in December 2019. The central warehouse, PCG and health facilities inventory data of September 2019 was used in addition to consumption data from health facilities to update the supply plan. To address the stockout issues of ALu 6X1, it was suggested that an earlier delivery of February 2020 be agreed upon instead of the original planned delivery of July 2020. GHSC-PSM is working closely with the MOH to ensure timely procurement of products.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

Guinea

FY Quarter

2020-Q1

C2. Number of people trained by sex

Sex	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Female	5	3	2	10
Male	24	12	7	43
Total	29	15	9	53

C2. Number of people trained by supply chain level

Supply Chain Level	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Central	29	15	9	53
Total	29	15	9	53

C2. Number of people trained by funding source and type

Type	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Cross-TO	18	15	9	42
TO-specific	11			11
Total	29	15	9	53

C2. Number of people trained by technical area

Supply Chain Function	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Strategy and Planning	29	15	9	53
Total	29	15	9	53

Analysis

The trainings that took place this quarter focused on strategy and supply planning and were all conducted at the central level. There was one TO2-specific training, and the others were cross-TO trainings, incorporating TO2, TO3 and TO4. The number of people trained by sex shows that males were in the majority. Also the number of people trained by source and funding type shows that TO2 has the largest number of participants. The content of the trainings this quarter varied, with topics such as the use of eLMIS to enhance MOH staff technical abilities to use the platform for better interpretation of logistics data. Trainings also included strengthening data visibility and operationalization of data produced through eLMIS for MOH staff and finally trainings on the interoperability between eSIGL and DHIS2

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO2-Malaria	6.7%	2,967
AL 6x1	17.2%	495
AL 6x2	8.4%	498
AL 6x3	6.0%	500
AL 6x4	4.4%	500
mRDT	2.4%	503
SP	1.5%	471
TO3-PRH	11.0%	2,430
Combined oral contraceptive with iron	14.5%	413
DMPA-Intramuscular injectable	13.5%	401
2-rod implant	11.3%	424
Progestin only pills	13.1%	381
Copper-bearing IUD	3.1%	393
Male condoms (FP)	10.3%	418
Total	8.6%	5,397

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO2-Malaria		
AL inability to treat	0.6%	503
TO3-PRH		
Combined oral methods	14.5%	413
Injectable contraceptives	13.5%	401
Implantable contraceptives	11.3%	424
Progestin-only methods	13.1%	381

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO2-Malaria	98%	517
TO3-PRH	96%	465

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	25%	17%	33%	25%	12
TO2-Malaria			67%	33%	6
TO3-PRH	50%	33%		17%	6
Subnational level 1	29%	26%	32%	13%	72
TO2-Malaria	36%	19%	28%	17%	36
TO3-PRH	22%	33%	36%	8%	36
Total	29%	25%	32%	14%	84

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

Guinea

FY Quarter

2020-Q1

C2. Number of people trained

Task Order	Female	Male	Total
TO2-Malaria	5	24	29
TO3-PRH	3	12	15
TO4-MCH	2	7	9
Total	10	43	53

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Condoms	1	1
FP commodities	1	1
Malaria commodities	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country ▼

Haiti ▼



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

▼

FY Quarter

▼

Haiti

▼

2020-Q1

▼

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
TO1-HIV/AIDS	853	0.9%
1st line adult ARV	128	0.8%
2nd line adult ARV	128	0.8%
Pediatric ARV	128	0.0%
First RTK	128	0.0%
Second RTK	128	4.7%
Male condoms (HIV)	213	0.0%
Total	853	0.9%

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
TO3-PRH	1,278	0.3%
Combined oral contraceptive with iron	213	0.0%
DMPA-Intramuscular injectable	213	1.4%
2-rod implant	213	0.0%
Copper-bearing IUD	213	0.0%
Calendar-based awareness methods	213	0.5%
Male condoms (FP)	213	0.0%
Total	1,278	0.3%

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO1-HIV/AIDS	132	100%
TO3-PRH	219	99%
Total	351	99%

Ref	Analysis
B1	Stockout rates remained steady at under 1 percent for both task orders. However, 5 percent of SDPs (six sites) reported a stockout of second RTKs. Three sites (1.4 percent) reported stockouts of injectable contraceptives. The stockouts of RTKs stemmed from a stock shortage at the central warehouse. There were also stockouts of first and second-line ARVs (one site each), and of calendar-based awareness methods (one site).
B1	The ongoing political unrest has hampered commodity distribution, but GHSC-PSM-supported facility stock levels so far have not been negatively impacted.
B1	The project is working to ensure that backorders for sites are executed within 48-72 hours after receipt of products. Additionally, it is rolling out a new module in February for its database, SYGDOCC, to manage products close to their expiration date.
B3	The reporting rate was at 100 percent for TO1 sites and 99 percent for TO3 sites. When looking at timeliness of reporting, however, there was a slight drop for both task orders, from 91 percent to 86 percent for TO1 and from 95 percent to 85 percent for TO3, in terms of sites that reported within one week of the due date. All other sites reported within two weeks of the due date, with the exception of four TO1 sites and three TO3 sites which did not report.

Warehouse stock status and product losses

Country

▼

FY Quarter

▼

Haiti

▼

2020-Q1

▼

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	36	3%	21%	48%	27%
TO1-HIV/AIDS	18	6%	33%	44%	17%
TO3-PRH	18		6%	44%	50%
Total	36	3%	21%	48%	27%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
TO1	Central	Storage	Expiry	ARVs, RTKs, laboratory, opportunistic infections, medical supplies	\$96,394	\$8,938,741	1.08%
TO3	Central	Storage	Expiry	Combined oral contraceptives	\$17	\$1,087,933	0.00%

Ref	Analysis
B2	Stocked according to plan improved considerably this quarter, from 27 percent to 48 percent.
B2	TO1: Among TO1 commodities, 33 percent of observations were understocked and 6 percent (second RTKs, Unigold) were stocked out. The Unigold RTK stockout and understocking, continuing from last quarter, was due to increased consumption due to the new targeted testing strategy (“index testing”) being applied in facilities.
B2	TO3: Among family planning commodities, 50 percent were overstocked. Condoms were overstocked due to the late receipt of three orders in August. Understocking of IUDs and calendar-based methods were due to decreasing demand.
C7	Among HIV/AIDS commodities, \$96,394 of ARVs, RTKs, laboratory commodities, and opportunistic infection medications expired in the central warehouse, representing 1 percent of the average inventory balance for TO1.
C7	For family planning commodities, only \$17 worth of combined oral contraceptives expired.

Supply plans, innovations, and strategic activities

Country

Haiti

FY Quarter

2020-Q1

Total Innovations implemented this quarter

0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
GHSC-PSM Haiti does not have any innovations to report this quarter.		

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
ARVs	Yes
Condoms	Yes
FP commodities	Yes
Lab (HIV diagnostics)	Yes
MCH commodities	Yes
RTKs	Yes
TPT	Yes

Analysis

All seven of the required supply plans were updated and submitted to GHSC-PSM headquarters, including in the new area of tuberculosis preventive treatment (TPT).

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

▼

Haiti

▼

FY Quarter

▼

2020-Q1

▼

C2. Number of people trained by sex

Sex	Total
Total	

C2. Number of people trained by supply chain level

Supply Chain Level	Total
Total	

C2. Number of people trained by funding source and type

Type	Total
Total	

C2. Number of people trained by technical area

Supply Chain Function	Total
Total	

Analysis



No people were trained this quarter.

Molecular Instruments and HIV Tracer Products

Country

▼

Haiti

▼

FY Quarter

▼

2020-Q1

▼

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

88%

Analysis

For the reporting period, seven of eight (88 percent) molecular instruments remained functional during the entire quarter, while one machine was out of service for 13 days due to a burnout of the electrical board.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	TDF/3TC/EFV 300/300/600 mg
2nd line adult ARV	ATV/r 300/100 mg
Pediatric ARV	AZT/3TC/NVP 60/30/50 mg
First RTK	Determine
Second RTK	Uni-Gold
Tie-breaker RTK	Not reported
Viral load reagent	Not reported
Viral load consumable	Not reported
EID reagent	Not reported
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	0.9%	853
1st line adult ARV	0.8%	128
2nd line adult ARV	0.8%	128
Pediatric ARV	0.0%	128
First RTK	0.0%	128
Second RTK	4.7%	128
Male condoms (HIV)	0.0%	213
TO3-PRH	0.3%	1,278
Combined oral contraceptive with iron	0.0%	213
DMPA-Intramuscular injectable	1.4%	213
2-rod implant	0.0%	213
Copper-bearing IUD	0.0%	213
Calendar-based awareness methods	0.5%	213
Male condoms (FP)	0.0%	213
Total	0.6%	1,918

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO3-PRH		
Combined oral methods	0.0%	213
Injectable contraceptives	1.4%	213
Implantable contraceptives	0.0%	213

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	100%	132
TO3-PRH	99%	219

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	48%	27%	21%	3%	33
TO1-HIV/AIDS	44%	17%	33%	6%	18
TO3-PRH	44%	50%	6%		18
Total	48%	27%	21%	3%	33

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

▼

FY Quarter

▼

Haiti

▼

2020-Q1

▼

C2. Number of people trained

Task Order	Total
Total	

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Condoms	1	1
FP commodities	1	1
Lab (HIV diagnostics)	1	1
MCH commodities	1	1
RTKs	1	1
TPT	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
8	88%

For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Indonesia 



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

Indonesia

FY Quarter

2020-Q1

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
TO1-HIV/AIDS	236	2.1%
1st line adult ARV	58	1.7%
2nd line adult ARV	39	2.6%
Pediatric ARV	17	0.0%
First RTK	46	0.0%
Second RTK	44	2.3%
Tie-breaker RTK	32	6.3%
Total	236	2.1%

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
Total		

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO1-HIV/AIDS	58	100%
Total	58	100%

Ref	Analysis
B1	This quarter, GHSC-PSM in Indonesia began reporting on all PEPFAR-supported sites in Jakarta province, increasing the total number of SDPs reporting from 12 to 58. The overall HIV/AIDS stockout rate increased this quarter to 2.1 percent, with three of the six products (most-used first-line ARV, most-used second-line ARV, and second RTK) reporting one SDP being stocked out and one product reporting two SDPs stocked out of the product (tie-breaker RTK).
B3	For the first time, GHSC-PSM in Indonesia reported on all 58 PEPFAR-supported sites in Jakarta province. All 58 sites reported to SIHA.

Warehouse stock status and product losses

Country

Indonesia

FY Quarter

2020-Q1

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	6	0%	67%	33%	0%
TO1-HIV/AIDS	6	0%	67%	33%	0%
Subnational level 1	6	0%	50%	0%	50%
TO1-HIV/AIDS	6	0%	50%	0%	50%
Subnational level 2	30	0%	13%	67%	20%
TO1-HIV/AIDS	30	0%	13%	67%	20%
Total	42	0%	26%	52%	21%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	While the rate that HIV/AIDS products were stocked according to plan decreased at the provincial level from 17 percent last quarter to 0 percent this quarter, the overall rate that HIV/AIDS products were stocked according to plan increased this quarter from 45 percent to 52 percent. This increase was due to an increase in the overall stocked according to plan rate at the district level. There were no observations of products being stocked out this quarter
C7	GHSC-PSM in Indonesia does not report on the product loss indicator.

Supply plans, innovations, and strategic activities

Country

Indonesia

FY Quarter

2020-Q1

Total Innovations implemented this quarter0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
TO1-HIV/AIDS		GHSC-PSM Indonesia does not have any innovations to report this quarter.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
---------------	-------------------------------

Analysis

GHSC-PSM in Indonesia is not required to submit supply plans.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

Indonesia

FY Quarter

2020-Q1

C2. Number of people trained by sex

Sex	TO1-HIV/AIDS	Total
Female	46	46
Male	25	25
Total	71	71

C2. Number of people trained by supply chain level

Supply Chain Level	TO1-HIV/AIDS	Total
Subnational level 1	71	71
Total	71	71

C2. Number of people trained by funding source and type

Type	TO1-HIV/AIDS	Total
TO-specific	71	71
Total	71	71

C2. Number of people trained by technical area

Supply Chain Function	TO1-HIV/AIDS	Total
Forecasting and Supply Planning	71	71
Total	71	71

Analysis



Seventy-one people were trained on conducting HIV commodity forecasting.

Molecular Instruments and HIV Tracer Products

Country

Indonesia

FY Quarter

2020-Q1

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

Analysis

GHSC-PSM in Indonesia does not report on molecular instruments.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Efavirenz 300/300/600 mg
2nd line adult ARV	Lopinavir/ritonavir (LPV/r) 200/50mg
Pediatric ARV	Zidovudine (ZDV) 100mg
First RTK	SD Bioline, Fokus
Second RTK	Fokus and Intec
Tie-breaker RTK	Vikia and Oncoprobe
Viral load reagent	Abbott
Viral load consumable	Abbott
EID reagent	Abbott
EID consumable	Abbott

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	2.1%	236
1st line adult ARV	1.7%	58
2nd line adult ARV	2.6%	39
Pediatric ARV	0.0%	17
First RTK	0.0%	46
Second RTK	2.3%	44
Tie-breaker RTK	6.3%	32
Total	2.1%	236

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
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See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	100%	58

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	33%	0%	67%	0%	6
TO1-HIV/AIDS	33%	0%	67%	0%	6
Subnational level 1	0%	50%	50%	0%	6
TO1-HIV/AIDS	0%	50%	50%	0%	6
Subnational level 2	67%	20%	13%	0%	30
TO1-HIV/AIDS	67%	20%	13%	0%	30
Total	52%	21%	26%	0%	42

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

Indonesia

FY Quarter

2020-Q1

C2. Number of people trained

Task Order	Female	Male	Total
TO1-HIV/AIDS	46	25	71
Total	46	25	71

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
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C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Kenya 



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

Kenya

FY Quarter

2020-Q1

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
TO2-Malaria	8,316	39.7%
AL 6x1	1,188	57.6%
AL 6x2	1,188	46.5%
AL 6x3	1,188	40.7%
AL 6x4	1,188	29.1%
AL inability to treat	1,188	13.8%
mRDT	1,188	81.2%
SP	1,188	9.1%
Total	8,316	39.7%

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
TO3-PRH	7,688	33.8%
Combined oral contraceptive	961	17.1%
DMPA-Intramuscular injectable	961	16.8%
1-rod implant	961	36.0%
2-rod implant	961	20.0%
Emergency contraceptive, 2 tablets	961	62.5%
Progestin only pills	961	49.6%
Copper-bearing IUD	961	33.8%
Male condoms (FP)	961	34.7%
Total	7,688	33.8%

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO2-Malaria	1,188	100%
TO3-PRH	1,110	94%
Total	2,298	97%

Ref

Analysis

- B1

Stockout rates for tracer commodities increased sharply in FY 2020 Q1 for reasons distinct to the task orders (TOs). Stockouts for malaria products (TO2) increased across the board. High stockout rates for all four AL presentations led to a rise in the reported inability to treat, from 4 percent of SDPs last quarter to 14 percent in FY 2020 Q1. Reported stockout rates increased especially for mRDTs, from 52 percent in the previous quarter to 81 percent in this quarter, reflecting pervasive challenges in the commodity pipeline, delays in deliveries, and some seasonal uptick in demand. At the same time, the reported stockout rates also increased for family planning (TO3) products (from 9 percent to 34 percent). In this case, however, the reported FY 2020 Q1 rates are not directly comparable to past quarters because of significant programmatic changes. In FY 2020 Q1, Afya Ugavi (GHSC-PSM Kenya) concluded its family planning activities in the initial three focus counties (Turkana, Samburu and Baringo) to begin support in five new counties (Kitui, Kakamega, Kisumu, Migori and Uasin Gishu). The number of relevant family planning facilities increased fourfold, from 256 in the original three counties to 1,110 facilities expected to report on family planning SDPs in the new five counties. The stockout rates for family planning commodities in the new five counties were higher than those reported in past quarters in the original three focus counties for all commodities. Sixty-three percent of facilities in FY 2020 Q1 reported stockouts of emergency oral contraceptives; 50 percent of progestin-only pills; 35 percent of male condoms; 17 percent of combined and/or injectable oral contraveptives, and 9 percent of implantable contraceptives.
- B3

The reporting rates for facilities in Afya Ugavi-supported (GHSC-PSM) regions remained high in FY 2020 Q1. Nearly all (99.6 percent) of required facilities successfully submitted malaria reports into DHIS2, as did 94 percent of supported facilities required to submit family planning reports. In the case of family planning, the counties supported by Afya Ugavi changed in FY 2020 Q1. This resulted in an increase in the number of facilities required to report, from 256 to 1,110. In FY 2020, 1,045 (94 percent) of the newly supported facilities successfully submitted FP reports; however, only 961 of these reports included usable data.

Warehouse stock status and product losses

Country

Kenya

FY Quarter

2020-Q1

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	45	51%	33%		16%
TO2-Malaria	18	72%	22%		6%
TO3-PRH	27	37%	41%		22%
Total	45	51%	33%		16%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	In FY 2020 Q1, no tracer commodities were observed to be stocked according to plan centrally. The central medical stores (KEMSA) ran out of all tracked malaria commodities (except sulphadoxine pyrimethamine [SP] tablets) during the quarter under review because of delays in getting PMI-funded commodities in-country. This situation has since been resolved, and PMI-funded commodities were received in mid-December 2019. The majority of family planning tracer commodities were also observed to be stocked out or understocked centrally during this quarter. Two exceptions were POPs and COCs, whose stock levels were determined to be above recommended levels in all three observations in the quarter. The Government of Kenya has planned to procure DMPA, levonorgestrel 75 mg implant, emergency oral pills, and copper-bearing IUDs to address the persistent understocking and central stockouts of these family planning commodities.
C7	There is no product loss from theft, damage or expiry to report in this period.

Supply plans, innovations, and strategic activities

Country

Kenya

FY Quarter

2020-Q1

Total Innovations implemented this quarter0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
GHSC-PSM Kenya does not have any innovations to report this quarter.		

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
Malaria commodities	Yes

Analysis

The malaria commodities quarterly supply plan was successfully prepared and submitted to HQ in FY 2020 Q1, as expected.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies, or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

Kenya

FY Quarter

2020-Q1

C2. Number of people trained by sex

Sex	TO3-PRH	Total
Female	11	11
Male	15	15
Total	26	26

C2. Number of people trained by supply chain level

Supply Chain Level	TO3-PRH	Total
Subnational level 2	26	26
Total	26	26

C2. Number of people trained by funding source and type

Type	TO3-PRH	Total
TO-specific	26	26
Total	26	26

C2. Number of people trained by technical area

Supply Chain Function	TO3-PRH	Total
Forecasting and Supply Planning	26	26
Total	26	26

Analysis



Afya Ugavi (GHSC-PSM in Kenya) conducted trainings on FASP for 26 health managers (15 men and 11 women) in one of the new FP-focus counties. Trainings have now been held in four of the five new FP-focus counties, and a final training is planned for the remaining county in the next quarter.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO2-Malaria	44.0%	7,128
AL 6x1	57.6%	1,188
AL 6x2	46.5%	1,188
AL 6x3	40.7%	1,188
AL 6x4	29.1%	1,188
mRDT	81.2%	1,188
SP	9.1%	1,188
TO3-PRH	33.8%	7,688
Combined oral contraceptive	17.1%	961
DMPA-Intramuscular injectable	16.8%	961
1-rod implant	36.0%	961
2-rod implant	20.0%	961
Emergency contraceptive, 2 tablets	62.5%	961
Progestin only pills	49.6%	961
Copper-bearing IUD	33.8%	961
Male condoms (FP)	34.7%	961
Total	38.7%	14,816

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO2-Malaria		
AL inability to treat	13.8%	1,188
TO3-PRH		
Combined oral methods	17.1%	961
Injectable contraceptives	16.8%	961
Implantable contraceptives	9.4%	961
Emergency oral contraceptives	62.5%	961
Progestin-only methods	49.6%	961

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO2-Malaria	100%	1,188
TO3-PRH	94%	1,110

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central		16%	33%	51%	45
TO2-Malaria		6%	22%	72%	18
TO3-PRH		22%	41%	37%	27
Total		16%	33%	51%	45

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

▼

FY Quarter

▼

Kenya

▼

2020-Q1

▼

C2. Number of people trained

Task Order	Female	Male	Total
TO3-PRH	11	15	26
Total	11	15	26

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Malaria commodities	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.


GLOBAL HEALTH SUPPLY CHAIN PROGRAM


Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Lesotho 



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

Lesotho

FY Quarter

2020-Q1

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
TO1-HIV/AIDS	1,600	5.6%
1st line adult ARV	208	0.0%
2nd line adult ARV	204	1.0%
Pediatric ARV	175	4.0%
First RTK	201	1.0%
Second RTK	201	3.5%
Tie-breaker RTK	182	32.4%
Viral load reagent	5	0.0%
EID reagent	1	0.0%
Male condoms (HIV)	124	2.4%
Female condoms (HIV)	117	2.6%
RUTF	182	3.8%
Total	1,600	5.6%

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
Total		

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO1-HIV/AIDS	210	100%
Total	210	100%

Ref	Analysis
B1	The overall stockout rate for HIV/AIDS commodities decreased this quarter. Inventory management at SDPs has improved since the supply chain management policy has been implemented. Though there was an overall decrease in stockout rates, several products still saw some stockouts. The most notable is the tie-breaker RTK, which saw a 32 percent stockout rate this quarter. After a prolonged stockout of the product at the central medical store, product arrived into the country in October 2019. Though SDPs could order the product, some SDPs did not adjust their final order quantity and still requested 0 units of the product. Tie-breaker RTKs are a slow-moving product and generally have minimal or no consumption at SDPs.
B3	The LMIS reporting rate was near perfect, with just one facility not reporting on time this quarter.

Warehouse stock status and product losses

Country

Lesotho

FY Quarter

2020-Q1

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	33	0%	48%	45%	6%
TO1-HIV/AIDS	33	0%	48%	45%	6%
Total	33	0%	48%	45%	6%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	While the rate of HIV/AIDS commodities stocked according to plan decreased slightly from 48 percent to 45 percent, there were no stockouts observed. Several products were understocked as the central warehouse waited for deliveries to be made.
C7	GHSC-PSM in Lesotho does not report on product loss.

Supply plans, innovations, and strategic activities

Country

Lesotho

FY Quarter

2020-Q1

Total Innovations implemented this quarter0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
GHSC-PSM Lesotho does not have any innovations to report this quarter.		

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
TPT	Yes

Analysis

For the first time, GHSC-PSM in Lesotho was required to submit a supply plan. The TPT supply plan was submitted to HQ.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

Lesotho

FY Quarter

2020-Q1

C2. Number of people trained by sex

Sex	Total
Total	

C2. Number of people trained by supply chain level

Supply Chain Level	Total
Total	

C2. Number of people trained by funding source and type

Type	Total
Total	

C2. Number of people trained by technical area

Supply Chain Function	Total
Total	

Analysis

GHSC-PSM in Lesotho did not have any trainings to report this quarter.

Molecular Instruments and HIV Tracer Products

Country

Lesotho

FY Quarter

2020-Q1

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

Analysis

GHSC-PSM in Lesotho does not report on molecular instruments.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Efavirenz 300/300/600 mg
2nd line adult ARV	Lopinavir/Ritonavir 200/50 mg
Pediatric ARV	Abacavir/Lamivudine 60/30 mg
First RTK	Determine
Second RTK	Uni-Gold
Tie-breaker RTK	Bioline
Viral load reagent	COBAS, TaqMan, CAP/CTM HIV v2.0, Quantitative, 48 Tests
Viral load consumable	Not reported
EID reagent	COBAS TaqMan AmpliPrep, HIV-1 Qualitative Test, v2.0, 48
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	5.6%	1,600
1st line adult ARV	0.0%	208
2nd line adult ARV	1.0%	204
Pediatric ARV	4.0%	175
First RTK	1.0%	201
Second RTK	3.5%	201
Tie-breaker RTK	32.4%	182
Viral load reagent	0.0%	5
EID reagent	0.0%	1
Male condoms (HIV)	2.4%	124
Female condoms (HIV)	2.6%	117
RUTF	3.8%	182
Total	5.6%	1,600

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
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See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	100%	210

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	45%	6%	48%	0%	33
TO1-HIV/AIDS	45%	6%	48%	0%	33
Total	45%	6%	48%	0%	33

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

Lesotho

FY Quarter

2020-Q1

C2. Number of people trained

Task Order	Total
Total	

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
TPT	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.


GLOBAL HEALTH SUPPLY CHAIN PROGRAM


Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Liberia 



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

▼

Liberia

▼

FY Quarter

▼

2020-Q1

▼

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
TO2-Malaria	1,020	31.5%
AL 6x1	85	61.2%
AL 6x2	85	45.9%
AL 6x3	85	34.1%
AL 6x4	85	48.2%
AL inability to treat	85	12.9%
AS/AQ 100/270mgx3	85	24.7%
AS/AQ 100/270mgx6	85	34.1%
AS/AQ 25/67.5mg	85	27.1%
AS/AQ 50/135mg	85	57.6%
mRDT	85	9.4%
SP	85	7.1%
LLINs	85	15.3%
Total	1,020	31.5%

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
TO3-PRH	601	18.5%
Combined oral contraceptive with iron	83	12.0%
DMPA-Subcutaneous injectable	10	100.0%
DMPA-Intramuscular injectable	83	8.4%
2-rod implant	83	19.3%
Progestin only pills	83	7.2%
Copper-bearing IUD	10	50.0%
Calendar-based awareness methods	83	21.7%
Male condoms (FP)	83	8.4%
Female condoms (FP)	83	38.6%
Total	601	18.5%

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO1-HIV/AIDS	512	51%
TO2-Malaria	727	61%
TO3-PRH	710	52%
TO4-MCH	710	52%
Total	2,659	54%

Ref

▲

Analysis

B1

GHSC-PSM and the Ministry of Health Supply Chain Management Unit (MOH-SCMU) conducted an end user verification survey in November 2019. The results showed elevated stockout rates across all ACT presentations, ranging from 27 percent to 61 percent. The share of sites that were stocked out of all four presentations of AL was 13 percent, an increase from 7 percent at the last round of the EUV in FY 2019 Q3. Rates for rapid diagnostics tests and SP were better, with both showing less than 10 percent stockouts and both improving from the previous survey. Overall, the stockout rate across all malaria products remained consistent with the previous survey, at 33 percent of observations stocked out. When asked about the reasons for stockouts, 58 percent of facilities reported that products had been ordered but not received. Staff at SDPs also pointed to storage management challenges, including not enough space to store commodities and too few staff trained in stock management.

Survey results showed improvements in family planning stockout rates, with the overall stockout rate falling from 37 percent to 19 percent across FP products. Notable improvements included combined oral contraceptives, which fell from 68 percent to 12 percent, male condoms (29 percent to 8 percent), and progestin-only pills (29 percent to 7 percent). The highest reported stockout rate was DMPA-SC, which is still in a pilot phase and which was only assessed in 10 sites (compared to 83 for other products) but which was stocked out at all of them.)

B3

GHSC-PSM is including an LMIS reporting rate for Liberia for the first time this quarter. The Minsitry of Health, with support from partners including GHSC-PSM, has rolled out a new eLMIS platform over the last year. Under the new system, service deliver points will keep monthly logistics records, as they currently do, and send these paper-based forms to the county level at the end of every quarter. County health team staff then enter the SDP data into an online platform, where it will become visible to decision-makers along the supply chain. The reporting rate for this quarter therefore represents reporting of stock data from the July-September timeframe. (October-December data will not be reported or available until FY2020 Q2). About 50 percent of service delivery points' data was entered into the system this quarter for HIV family planning and maternal and child health For malaria the rate was slightly higher with 61 percent of SDP's data available.

Warehouse stock status and product losses

Country

▼

FY Quarter

▼

Liberia

▼

2020-Q1

▼

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	24	4%	38%	42%	17%
TO1-HIV/AIDS	5		20%	20%	60%
TO2-Malaria	11	9%	36%	45%	9%
TO3-PRH	8		50%	50%	
Total	24	4%	38%	42%	17%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	Stocked according to plan data for the quarter is drawn from central-level stock status observations from mid-January 2020. The project is also reporting on HIV commodities for the first time, including ARVs and RTKs. The most used first line adult ARV (currently TLE while the country is phasing in TLD) is stocked according to plan, first RTKs are understocked, and the remaining HIV tracer products are currently overstocked. Among malaria commodities, 45 percent of products are stocked according to plan, an increase from the previous quarter. Rate of overstocking and understocking have declined, with only the adult presentation of ASAQ reported stocked out. Stocked according to plan rates have also improved for family planning products, reaching a rate of 50 percent compared to 15 percent in the previous period. Incoming deliveries of 2-rod implants, progestin-only and combined oral contraceptives, and standard days methods helped to improve stock status of these items and of family planning products overall.
C7	There were no product losses in GHSC-PSM custody to report this quarter.

Supply plans, innovations, and strategic activities

Total Innovations
implemented
this quarter

New approaches 2
New products 1

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
Crosscutting	New approaches	The project supported the deployment of Logistics Management Advisors (LMAs) to the counties during the quarter, which has started yielding benefits with improvement in supply chain data visibility and activities of the county health teams on supply chain activities. LMAs supported the county health teams to develop distribution plans and collected 263 proofs of delivery, which were used to validate the completion of distribution. LMAs are also providing hands-on support to the county health teams to improve e-LMIS data entry and mentoring, while developing distribution plans that guide prompt completion of distribution activities within the county. Efforts of the LMAs contributed to the project's first reporting of an LMIS reporting rate this quarter, illustrating the benefits of this approach for the supply chain. While overall rates might be low for the current period, the LMAs' continuous engagement with the county health authorities are expect to lead to reporting rate increases in coming periods. GHSC-PSM's B3 indicator will serve as a verifier for this innovation.
Crosscutting	New approaches	This quarter, GHSC-PSM supported the implementation of direct distribution of commodities to facilities in Margibi county. Traditionally, commodities have been delivered from the central medical store to county depots. Under the direct approach, which the MOH and GHSC-PSM have been using in Montserrado county, delivery teams bring commodities directly to the health facilities. From December 2-5, 2019, three teams were dispatched in Margibi to simultaneously deliver products to health facilities in two districts. The direct distribution approach has helped to increase the availability of commodities at health facilities within the country.
TO1-HIV/AIDS	New products	GHSC-PSM has supported the transition of first line adult ARV treatment to tenofovir/lamivudine/dolutegravir (TLD). Distributions of TLD began in September. GHSC-PSM will continue to support and monitor the transition as TLD overtakes TLE as Liberia's most used first line regimen

Country

Liberia

FY Quarter

2020-Q1

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
Condoms	Yes
FP commodities	Yes
Malaria commodities	Yes

Analysis

Supply plans for all three required product groups were completed and sent to GHSC-PSM headquarters as required.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description

There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Molecular Instruments and HIV Tracer Products

Country

Liberia

FY Quarter

2020-Q1

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

Analysis

GHSC-PSM does not manage or support maintenance for any molecular instruments in Liberia.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Efavirenz 300/300/600 mg
2nd line adult ARV	Lopinavir/ritonavir 250mg
Pediatric ARV	Lamivudine/Zidovudine/Nevirapine 60/30/50mg
First RTK	Determine HIV1/2
Second RTK	Bioline HIV1/2
Tie-breaker RTK	Unigold
Viral load reagent	Not reported
Viral load consumable	Not reported
EID reagent	Not reported
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO2-Malaria	33.2%	935
AL 6x1	61.2%	85
AL 6x2	45.9%	85
AL 6x3	34.1%	85
AL 6x4	48.2%	85
AS/AQ 100/270mgx3	24.7%	85
AS/AQ 100/270mgx6	34.1%	85
AS/AQ 25/67.5mg	27.1%	85
AS/AQ 50/135mg	57.6%	85
mRDT	9.4%	85
SP	7.1%	85
LLINs	15.3%	85
TO3-PRH	18.5%	601
Combined oral contraceptive with iron	12.0%	83
DMPA-Subcutaneous injectable	100.0%	10
DMPA-Intramuscular injectable	8.4%	83
2-rod implant	19.3%	83
Progestin only pills	7.2%	83
Copper-bearing IUD	50.0%	10
Calendar-based awareness methods	21.7%	83
Male condoms (FP)	8.4%	83
Female condoms (FP)	38.6%	83
Total	27.4%	1,536

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO2-Malaria		
AL inability to treat	12.9%	85
TO3-PRH		
Combined oral methods	12.0%	83
Injectable contraceptives	8.4%	83
Implantable contraceptives	19.3%	83

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	51%	512
TO2-Malaria	61%	727
TO3-PRH	52%	710
TO4-MCH	52%	710

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	42%	17%	38%	4%	24
TO1-HIV/AIDS	20%	60%	20%		5
TO2-Malaria	45%	9%	36%	9%	11
TO3-PRH	50%		50%		8
Total	42%	17%	38%	4%	24

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

▼

FY Quarter

▼

Liberia

▼

2020-Q1

▼

C2. Number of people trained

Task Order	Female	Male	Total
TO2-Malaria	6	8	14
Total	6	8	14

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Condoms	1	1
FP commodities	1	1
Malaria commodities	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.


GLOBAL HEALTH SUPPLY CHAIN PROGRAM


Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Malawi 



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

Malawi

FY Quarter

2020-Q1

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
TO1-HIV/AIDS	4,282	3.3%
1st line adult ARV	606	0.8%
2nd line adult ARV	529	6.4%
Pediatric ARV	600	7.7%
First RTK	656	2.7%
Second RTK	654	1.5%
Male condoms (HIV)	637	1.4%
Female condoms (HIV)	600	3.2%
Total	4,282	3.3%

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
TO2-Malaria	5,227	2.0%
AL 6x1	669	0.3%
AL 6x2	660	1.5%
AL 6x3	661	1.2%
AL 6x4	670	1.3%
AL inability to treat	664	0.3%
mRDT	668	0.9%
SP	637	4.9%
LLINs	598	6.4%
Total	5,227	2.0%

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
TO3-PRH	5,095	10.7%
Combined oral contraceptive with iron	613	5.5%
DMPA-Subcutaneous injectable	259	6.9%
DMPA-Intramuscular injectable	574	22.1%
1-rod implant	568	10.7%
2-rod implant	456	17.8%
Emergency contraceptive, 2 tablets	252	57.5%
Progestin only pills	576	5.2%
Copper-bearing IUD	560	4.1%
Male condoms (FP)	637	1.4%
Female condoms (FP)	600	3.2%
Total	5,095	10.7%

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO1-HIV/AIDS	680	98%
TO2-Malaria	680	99%
TO3-PRH	680	94%
TO4-MCH	680	92%
Total	2,720	96%

Ref	Analysis
B1	<p>Overall stockout rates remained consistent from the previous quarter, with slight decreases across all health programs. For HIV products, there were notable reductions in stockouts of first-line adult ARVs, first RTKs, and male condoms, while stockouts for pediatric ARVs increased. The project is continuing to support the MOH in conducting HIV stock monitoring and supportive supervision to ensure SDP commodity security.</p> <p>On the malaria side, stockouts have fallen across all AL presentations, mRDTs and SP. The National Malaria Control Program and the project conducted distributions of AL treatments, mRDTs, SP and LLINs, leading to reduced stockouts of the products.</p> <p>For family planning products, Malawi is now reporting on DMPA-SC, which is now in routine use in addition to DMPA-IM. The stockout rate for the subcutaneous product is relatively low, at 7 percent, with higher stockouts for DMPA-IM, at 22 percent. As a method, however, the stockout rate for injectables was only 2 percent. Stockout rates for both 1- and 2-rod implants are elevated, at 11 percent and 17 percent, but both of these are improvements over the previous quarter. Shipments of 1-rod implants and DMPA-IM have now been received at the central level, which is expected to improve SDP-level commodity availability in the coming quarter. Stockouts of emergency oral contraceptives are quite high, at over 50 percent, while stockouts of combined oral contraceptives and copper-bearing IUDs remain low.</p>
B3	<p>LMIS reporting rates remain high in Malawi, with rates approaching 100 percent for the HIV and malaria programs. Reporting for family planning and maternal and child health is also strong, with both programs exceeding 90 percent of sites reporting. GHSC-PSM is providing ongoing and enhanced training to health facility staff in LMIS functionality and reporting. It also continuing to support the MOH with airtime for reporting. The project's regional commodity logistics offices are also working with district MOH staff to conduct follow-up supportive supervision at health facilities to maintain high reporting rates</p>

Warehouse stock status and product losses

Country

Malawi

FY Quarter

2020-Q1

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	48	5%	23%	64%	9%
TO1-HIV/AIDS	14		29%	71%	
TO2-Malaria	14			100%	
TO3-PRH	20	10%	50%	20%	20%
Total	48	5%	23%	64%	9%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	<p>The stocked according to plan rate for HIV products is strong, at 71 percent, with all ARV and RTK tracer products stocked between minimum and maximum levels. Male and female condoms were understocked.</p> <p>All malaria commodities were stocked according to plan this quarter. At the close of Q1, Pipeline analysis showed that most malaria commodities were in full supply, with adequate coverage for the next 12 months. GHSC-PSM has supported the MOH in reviewing quarterly supply plans, which helped NMCP with resupply decision making to ensure availability of commodities for the peak malaria season, commencing in January 2020. Looking ahead, the project is closely monitoring estimated delivery dates for upcoming LLIN orders, which have been delayed due to supplier constraints. The team will watch to determine whether emergency supplies will be necessary to prevent a central-level stockout.</p> <p>Family planning products were more likely to be in short supply this quarter, with only 20 percent of stock observations within min/max levels (including DMPA-SC and 1-rod implants). Emergency oral contraceptives are stocked out, with understocks of male and female condoms, progestin-only pills, copper-bearing IUDs, and DMPA-IM. Incoming shipments of oral contraceptives and male condoms are expected to improve stock status of these items in Q2. GHSC-PSM supports the MOH in updating the Pipeline database and conducting quarterly supply plan review meeting to ensure continuous availability for family planning products.</p>
C7	<p>There were no product losses or expiries in GHSC-PSM custody to report this quarter.</p>

Supply plans, innovations, and strategic activities

Total Innovations
implemented
this quarter

New approaches
1

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
Crosscutting	New approaches	The project supported the Malawi Ministry of Health (MOH) with installation of an automatic data transfer feature between OpenLMIS and DHIS2. This work was completed in December 2019 when the first batch of data was auto-shared from OpenLMIS to DHIS2 on December 1, 2019. This is expected to enhance supply chain data visibility and quality.

Country

Malawi

FY Quarter

2020-Q1

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
Condoms	Yes
FP commodities	Yes
Malaria commodities	Yes
MCH commodities	Yes
VMMC	Yes

Analysis

Supply plans for VMMC, malaria, family planning and condoms were all submitted to the project headquarters as required.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

Malawi

FY Quarter

2020-Q1

C2. Number of people trained by sex

Sex	TO1-HIV/AIDS	TO2-Malaria	Total
Female	1	1	2
Total	1	1	2

C2. Number of people trained by supply chain level

Supply Chain Level	TO1-HIV/AIDS	TO2-Malaria	Total
SDP	1	1	2
Total	1	1	2

C2. Number of people trained by funding source and type

Type	TO1-HIV/AIDS	TO2-Malaria	Total
Cross-TO	1	1	2
Total	1	1	2

C2. Number of people trained by technical area

Supply Chain Function	TO1-HIV/AIDS	TO2-Malaria	Total
MIS	1	1	2
Total	1	1	2

Analysis

GHSC-PSM trained two health facility staff on the use of OpenLMIS as part of ongoing efforts to improve supply chain data entry and reporting. The project is continuing to reinforce LMIS competencies by conducting on-site training at health facilities that targets the most relevant staff, that is, those who are responsible for entering data into the system.

Molecular Instruments and HIV Tracer Products

Country

Malawi

FY Quarter

2020-Q1

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

Analysis

GHSC-PSM does not manage or support maintenance for any molecular instruments in Malawi.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Dolutegravir 300/300/50mg
2nd line adult ARV	Atazanavir/Ritonavir 300/100 mg
Pediatric ARV	Zidovudine/Lamivudine/Nevirapine 60/30/50 mg
First RTK	Determine
Second RTK	Uni-Gold
Tie-breaker RTK	Not reported
Viral load reagent	Not reported
Viral load consumable	Not reported
EID reagent	DBS Bundles for Early infant diagnosis (EID) and Viral Load testing
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	3.3%	4,282
1st line adult ARV	0.8%	606
2nd line adult ARV	6.4%	529
Pediatric ARV	7.7%	600
First RTK	2.7%	656
Second RTK	1.5%	654
Male condoms (HIV)	1.4%	637
Female condoms (HIV)	3.2%	600
TO2-Malaria	2.3%	4,563
AL 6x1	0.3%	669
AL 6x2	1.5%	660
AL 6x3	1.2%	661
AL 6x4	1.3%	670
mRDT	0.9%	668
SP	4.9%	637
LLINs	6.4%	598
TO3-PRH	10.7%	5,095
Combined oral contraceptive with iron	5.5%	613
DMPA-Subcutaneous injectable	6.9%	259
DMPA-Intramuscular injectable	22.1%	574
1-rod implant	10.7%	568
2-rod implant	17.8%	456
Emergency contraceptive, 2 tablets	57.5%	252
Progestin only pills	5.2%	576
Copper-bearing IUD	4.1%	560
Male condoms (FP)	1.4%	637
Female condoms (FP)	3.2%	600
Total	6.0%	12,703

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO2-Malaria		
AL inability to treat	0.3%	664
TO3-PRH		
Combined oral methods	5.5%	613
Injectable contraceptives	2.4%	572
Implantable contraceptives	5.4%	462
Emergency oral contraceptives	57.5%	252
Progestin-only methods	5.2%	576

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	98%	680
TO2-Malaria	99%	680
TO3-PRH	94%	680
TO4-MCH	92%	680

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	64%	9%	23%	5%	44
TO1-HIV/AIDS	71%		29%		14
TO2-Malaria	100%				14
TO3-PRH	20%	20%	50%	10%	20
Total	64%	9%	23%	5%	44

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

Malawi

FY Quarter

2020-Q1

C2. Number of people trained

Task Order	Female	Total
TO1-HIV/AIDS	1	1
TO2-Malaria	1	1
Total	2	2

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Condoms	1	1
FP commodities	1	1
Malaria commodities	1	1
MCH commodities	1	1
VMMC	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.


GLOBAL HEALTH SUPPLY CHAIN PROGRAM


Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Mali 



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

▼

FY Quarter

▼

Mali

▼

2020-Q1

▼

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
TO2-Malaria	6,417	4.3%
AL 6x1	926	3.5%
AL 6x2	817	6.5%
AL 6x3	724	5.2%
AL 6x4	745	5.0%
AL inability to treat	1,073	0.7%
mRDT	817	6.2%
SP	944	2.2%
LLINs	371	10.5%
Total	6,417	4.3%

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
TO3-PRH	6,566	3.9%
Combined oral contraceptive with iron	918	16.7%
DMPA-Intramuscular injectable	996	1.0%
2-rod implant	949	0.9%
Progestin only pills	608	2.0%
Copper-bearing IUD	875	1.0%
Calendar-based awareness methods	794	1.6%
Male condoms (FP)	867	2.1%
Female condoms (FP)	559	5.7%
Total	6,566	3.9%

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO1-HIV/AIDS	137	40%
TO2-Malaria	1,279	96%
TO3-PRH	1,279	96%
TO4-MCH	1,279	96%
Total	3,974	94%

Ref

▲

Analysis

B1	The stockout rate at SDPs went up slightly from Q4 2019 to Q1 2020, with an increase of 1.9 percent for TO2 and 0.6 percent for TO3. Nonetheless targets were met for this quarter. Several factors contributed to the performance this quarter. Positive factors include close monitoring of stock, resulting in transferring stock from the central to district levels as needed and updating the supply plans every quarter. Negative factors affecting some of the TO3 products such as microgynon, which was stocked out at 17 percent, include both understock and stockout at the central, regional and district levels. Additionally, the family planning campaign, whose objective is to increase use of FP/RH, may have contributed to stockout levels due to subsequent increases in consumption. The campaign took place in October 2019 in all health districts.
B3	The LMIS reporting rate for TO2, TO3, TO4 for this quarter was at 96 percent, whereas the reporting rate for TO1 was at 40 percent. This is, however, an improvement from last quarter, which was at 24 percent. Overall the reporting rate was 82 percent, which is slightly shy of the targeted 88 percent for FY 2020.

Warehouse stock status and product losses

Country

▼

FY Quarter

▼

Mali

▼

2020-Q1

▼

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	14	29%	43%	7%	21%
TO2-Malaria	6	33%	50%		17%
TO3-PRH	8	25%	38%	13%	25%
Subnational level 1	70	34%	26%	17%	23%
TO2-Malaria	30	53%	30%	10%	7%
TO3-PRH	40	20%	23%	23%	35%
Total	84	33%	29%	15%	23%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	This quarter, up to 17 percent of tracer products at regional warehouses were stocked according to plan in comparison to 7 percent at central warehouses. Taking into consideration products for TO2 at the regional level, 53 percent products were stocked out; 30 percent understocked; and 7 percent overstocked. At the central level 33 percent were stocked out; 50 percent understocked; and 17 percent overstocked. For TO3 at the regional level, 20 percent were stocked out; 23 percent understocked; and 35 percent overstocked. At the central level, 25 percent were stocked out; 38 percent understocked; and 25 percent overstocked. For TO2, the low levels of stock of AL (6X1) at the regional level and SP 500/25 at both central and regional levels contributed to the stockout levels. Orders are in process so that these products are available at both levels. Also, the distribution and transit route for TO2 products entails that products going to SDPs from the central level warehouses go through regional warehouses without being stocked, as they are considered as "transit" warehouses.
C7	GHSC-PSM Mali does not report on this indicator

Supply plans, innovations, and strategic activities

Total Innovations
implemented
this quarter

New approaches
1

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
Crosscutting	New approaches	This quarter, GHSC-PSM worked collaboratively with the Pharmacie Populaire du Mali, (PPM) and Resolve Solutions to develop a maintenance plan for the prefabricated warehouse. A workshop was held in October 2019 at the prefabricated warehouse during which the team analyzed the current state of the warehouse and equipment, and then refined the maintenance plan including the frequency at which maintenance would take place. The workshop also addressed training and recruitment needs within PPM and the roles and responsibilities of all actors involved in warehouse management. An annual maintenance budget has since been developed, as well as maintenance monitoring tools used every week by PPM to check the functionality of equipment and materials installed in the warehouse.

Country

▼

Mali

▼

FY Quarter

▼

2020-Q1

▼

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
Condoms	Yes
FP commodities	Yes
Malaria commodities	Yes
MCH commodities	Yes

Analysis

Supply plans were updated for TO2, TO3, TO4 and condoms this quarter and sent to GHSC-PSM HQ. Technical working groups (TWGs) on quantification for the various health elements met this quarter to review the supply plans and determine when products need to be delivered to ensure an uninterrupted supply chain. Through GHSC-PSM's technical assistance and the TWGs meetings, orders have been able to go through, be canceled or be delayed depending on the stock level.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description

There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

▼

Mali

▼

FY Quarter

▼

2020-Q1

▼

C2. Number of people trained by sex

Sex	Total
Total	

C2. Number of people trained by supply chain level

Supply Chain Level	Total
Total	

C2. Number of people trained by funding source and type

Type	Total
Total	

C2. Number of people trained by technical area

Supply Chain Function	Total
Total	

Analysis

▲
GHSC-PSM Mali did not have any trainings to report on this quarter

Molecular Instruments and HIV Tracer Products

Country

Mali

FY Quarter

2020-Q1

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

Analysis

GHSC-PSM Mali does not report on this indicator

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Efavirenz 300/300/600 mg
2nd line adult ARV	Lopinavir/Ritonavir 200/50 mg
Pediatric ARV	Abacavir/Lamivudine 60/30 mg
First RTK	Alere Ag/AB Combo
Second RTK	Bioline
Tie-breaker RTK	First Response
Viral load reagent	M2000 RT amplification reagent
Viral load consumable	pipet tip 1000 µL
EID reagent	Ampliprep Cobas Taqman HIV-1 qualitative test
EID consumable	SPU Roche

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO2-Malaria	5.1%	5,344
AL 6x1	3.5%	926
AL 6x2	6.5%	817
AL 6x3	5.2%	724
AL 6x4	5.0%	745
mRDT	6.2%	817
SP	2.2%	944
LLINs	10.5%	371
TO3-PRH	3.9%	6,566
Combined oral contraceptive with iron	16.7%	918
DMPA-Intramuscular injectable	1.0%	996
2-rod implant	0.9%	949
Progestin only pills	2.0%	608
Copper-bearing IUD	1.0%	875
Calendar-based awareness methods	1.6%	794
Male condoms (FP)	2.1%	867
Female condoms (FP)	5.7%	559
Total	4.4%	11,910

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO2-Malaria		
AL inability to treat	0.7%	1,073
TO3-PRH		
Combined oral methods	16.7%	918
Injectable contraceptives	1.0%	996
Implantable contraceptives	0.9%	949
Progestin-only methods	2.0%	608

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	40%	137
TO2-Malaria	96%	1,279
TO3-PRH	96%	1,279
TO4-MCH	96%	1,279

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	7%	21%	43%	29%	14
TO2-Malaria		17%	50%	33%	6
TO3-PRH	13%	25%	38%	25%	8
Subnational level 1	17%	23%	26%	34%	70
TO2-Malaria	10%	7%	30%	53%	30
TO3-PRH	23%	35%	23%	20%	40
Total	15%	23%	29%	33%	84

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

▼

FY Quarter

▼

Mali

▼

2020-Q1

▼

C2. Number of people trained

Task Order	Total
Total	

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Condoms	1	1
FP commodities	1	1
Malaria commodities	1	1
MCH commodities	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country

Mozambique



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

▼

FY Quarter

▼

Mozambique

▼

2020-Q1

▼

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
TO1-HIV/AIDS	5,462	8.5%
1st line adult ARV	1,470	0.5%
2nd line adult ARV	503	4.0%
Pediatric ARV	855	2.9%
First RTK	774	13.8%
Second RTK	775	20.0%
Viral load reagent	28	0.0%
EID reagent	11	0.0%
Male condoms (HIV)	734	7.5%
Female condoms (HIV)	312	29.8%
Total	5,462	8.5%

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
TO2-Malaria	6,374	19.0%
AL 6x1	897	20.4%
AL 6x2	885	28.5%
AL 6x3	864	32.8%
AL 6x4	911	21.0%
AL inability to treat	945	4.1%
mRDT	887	7.1%
SP	670	12.5%
LLINs	315	37.5%
Total	6,374	19.0%

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
TO3-PRH	4,097	15.1%
Combined oral contraceptive	654	20.2%
DMPA-Subcutaneous injectable	279	26.9%
DMPA-Intramuscular injectable	851	13.0%
2-rod implant	286	9.1%
Emergency contraceptive, 2 tablets	98	43.9%
Progestin only pills	519	11.8%
Copper-bearing IUD	364	6.6%
Male condoms (FP)	734	7.5%
Female condoms (FP)	312	29.8%
Total	4,097	15.1%

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO1-HIV/AIDS	2,590	84%
TO2-Malaria	996	65%
TO3-PRH	996	65%
TO4-MCH	996	65%
Total	5,578	74%

Ref	Analysis
B1	The overall stockout rate for all three program areas increased this quarter. For HIV/AIDs, the increase can partially be attributed to the increase in stock out rate for female condoms. While the product was mostly stocked at provincial and central warehouses, there may have been distribution issues to health facilities. For malaria, all four presentations of Alu saw a stockout rate of 20 percent or more due to an increase in demand because it is the rainy season and also due to reporting challenges with some health facilities not accounting for quantities in the dispensary when counting their ending balance. For family planning, the stockout rate of 15 percent can largely be attributed to the high stockout rate of emergency contraceptives, which was stocked out in the country for several months, a shortage of DMPA-IM due to a global API shortage, and a disruption in the production of DMPA-SC due to a quality investigation that impacted the delivery of the product in country. Emergency contraceptives arrived to the central warehouse in December 2019 but has not reached the lower levels yet
B3	The reporting rate decreased this quarter across all program areas because some facilities were unable to report due to internet problems and issues with facilities synchronizing with the system.

Warehouse stock status and product losses

Country

▼

FY Quarter

▼

Mozambique

▼

2020-Q1

▼

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	69	2%	43%	35%	21%
TO1-HIV/AIDS	21	0%	52%	24%	24%
TO2-Malaria	21	0%	38%	48%	14%
TO3-PRH	27	4%	48%	30%	19%
Subnational level 1	822	7%	35%	34%	25%
TO1-HIV/AIDS	252	5%	40%	29%	26%
TO2-Malaria	246	3%	35%	35%	27%
TO3-PRH	324	9%	28%	35%	27%
Total	891	6%	35%	34%	24%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	While the stocked according to plan rates at the central and provincial levels remained consistent with the previous quarter, some rates for individual program areas decreased. For HIV/AIDS products, the stocked according to plan rate decreased at both the central and provincial levels. This decline can be attributed to the transition from TLE to TLD, the delay in delivery of ATV/r which was originally scheduled for October 2019, and transportation and logistics issues for delivering RTKs to the provincial level.
C7	GHSC-PSM in Mozambique did not have any product loss to report this quarter.

Supply plans, innovations, and strategic activities

Total Innovations
implemented
this quarter

0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
GHSC-PSM Mozambique does not have any innovations to report this quarter.		

Country

▼

FY Quarter

▼

Mozambique

▼

2020-Q1

▼

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
ARVs	Yes
Condoms	Yes
FP commodities	Yes
Lab (HIV diagnostics)	Yes
Malaria commodities	Yes
MCH commodities	Yes
RTKs	Yes
VMMC	Yes

Analysis

GHSC-PSM in Mozambique has updated and submitted all required supply plans for over two years.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

▼

FY Quarter

▼

Mozambique

▼

2020-Q1

▼

C2. Number of people trained by sex

Sex	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Female	4	3	11	8	26
Male	7	2	9	6	24
Total	11	5	20	14	50

C2. Number of people trained by supply chain level

Supply Chain Level	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Central		2	9	6	17
Subnational level 1	11	3	11	8	33
Total	11	5	20	14	50

C2. Number of people trained by funding source and type

Type	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Cross-TO		5	20	14	39
TO-specific	11				11
Total	11	5	20	14	50

C2. Number of people trained by technical area

Supply Chain Function	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Human Resources Capacity Development	11	2	9	6	28
Warehousing and Inventory Management		3	11	8	22
Total	11	5	20	14	50

Analysis



Three trainings were conducted in FY 2020 Q1. Eleven lab technicians received training on Ampliprep/Taq96, 21 teachers were trained in a training of trainers on the warehouse and inventory management SOP, and 17 technicians from CMAM (central level) were certified on a supply chain management course.

Molecular Instruments and HIV Tracer Products

Country

▼

Mozambique

▼

FY Quarter

▼

2020-Q1

▼

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

32%

Analysis

Out of the 28 molecular instruments, 19 experienced service disruption during the quarter. These instruments were out of service for periods rangng from 2 to 34 days.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Efavirenz/Lamivudine/Tenofovir 600/300/300 mg
2nd line adult ARV	Atazanavir/Ritonavir (300/100mg)
Pediatric ARV	Lamivudine/Nevirapine/Zidovudine 30/50/60mg, dispersible tablets, 60 Tabs
First RTK	Determine Kit 100 Tests
Second RTK	Uni-Gold Kit 20 tests
Tie-breaker RTK	Not reported
Viral load reagent	Abbot RealTime HIV-1 Aplification Reagent Kit Quant, 4 x 24 tests
Viral load consumable	Not reported
EID reagent	KIT CAP-G/CTM HIV-QUAL 48T CE IVD
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	8.5%	5,462
1st line adult ARV	0.5%	1,470
2nd line adult ARV	4.0%	503
Pediatric ARV	2.9%	855
First RTK	13.8%	774
Second RTK	20.0%	775
Viral load reagent	0.0%	28
EID reagent	0.0%	11
Male condoms (HIV)	7.5%	734
Female condoms (HIV)	29.8%	312
TO2-Malaria	21.6%	5,429
AL 6x1	20.4%	897
AL 6x2	28.5%	885
AL 6x3	32.8%	864
AL 6x4	21.0%	911
mRDT	7.1%	887
SP	12.5%	670
LLINs	37.5%	315
TO3-PRH	15.1%	4,097
Combined oral contraceptive	20.2%	654
DMPA-Subcutaneous injectable	26.9%	279
DMPA-Intramuscular injectable	13.0%	851
2-rod implant	9.1%	286
Emergency contraceptive, 2 tablets	43.9%	98
Progestin only pills	11.8%	519
Copper-bearing IUD	6.6%	364
Male condoms (FP)	7.5%	734
Female condoms (FP)	29.8%	312
Total	15.1%	13,942

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO2-Malaria		
AL inability to treat	4.1%	945
TO3-PRH		
Combined oral methods	20.2%	654
Injectable contraceptives	13.1%	862
Implantable contraceptives	9.1%	286
Emergency oral contraceptives	43.9%	98
Progestin-only methods	11.8%	519

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	84%	2,590
TO2-Malaria	65%	996
TO3-PRH	65%	996
TO4-MCH	65%	996

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	35%	21%	43%	2%	63
TO1-HIV/AIDS	24%	24%	52%	0%	21
TO2-Malaria	48%	14%	38%	0%	21
TO3-PRH	30%	19%	48%	4%	27
Subnational level 1	34%	25%	35%	7%	750
TO1-HIV/AIDS	29%	26%	40%	5%	252
TO2-Malaria	35%	27%	35%	3%	246
TO3-PRH	35%	27%	28%	9%	324
Total	34%	24%	35%	6%	813

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

▼

FY Quarter

▼

Mozambique

▼

2020-Q1

▼

C2. Number of people trained

Task Order	Female	Male	Total
TO1-HIV/AIDS	4	7	11
TO2-Malaria	3	2	5
TO3-PRH	11	9	20
TO4-MCH	8	6	14
Total	26	24	50

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Condoms	1	1
FP commodities	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
MCH commodities	1	1
RTKs	1	1
VMMC	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
28	32%

For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country

Namibia



Service Delivery Point Stockouts and Reporting Rates

For countries with data available from GHSC-PSM non-supported regions

Country

Namibia

FY Quarter

2020-Q1

B1. Stockout rate at service delivery points - SDPs located in supported regions

GHSC-PSM Support	Stockout rate	# SDP stock observations
Supported	2.3%	130
TO1-HIV/AIDS	2.3%	130
1st line adult ARV	0.0%	20
2nd line adult ARV	0.0%	20
Pediatric ARV	0.0%	20
First RTK	0.0%	20
Second RTK	5.0%	20
Tie-breaker RTK	10.0%	20
Male condoms (HIV)	0.0%	5
Female condoms (HIV)	0.0%	5
Total	2.3%	130

B1. Stockout rate at service delivery points - SDPs located in non-supported regions

GHSC-PSM Support	Stockout rate	# SDP stock observations
Not Supported	2.2%	312
TO1-HIV/AIDS	2.2%	312
1st line adult ARV	0.0%	43
2nd line adult ARV	2.3%	43
Pediatric ARV	2.3%	43
First RTK	0.0%	43
Second RTK	7.0%	43
Tie-breaker RTK	4.7%	43
Male condoms (HIV)	0.0%	27
Female condoms (HIV)	0.0%	27
Total	2.2%	312

B3. LMIS reporting rate

GHSC-PSM Support	Total # of SDPs required to report	Reporting rate
Not Supported	46	93%
Supported	21	90%
Total	67	93%

Ref	Analysis
B1	Overall stockout rates fell this quarter, from 3.5 percent at supported sites to 2.3 percent. The rate also fell at non-supported sites. With an increase in technical staff, GHSC-PSM expanded the number of sites it supports this quarter, from 15 to 21 facilities. Among those supported facilities, only three reported stockouts of any HIV tracer products. For the products that did see stockouts, second RTKs and tie-breaker RTKs, GHSC-PSM worked with MoHSS pharmacy staff at the district level to redistribute existing stock of those products. The project also worked with CMS to expedite delivery of stocked out products. At the SDP level, the team continues to support sites to use the eLMIS for inventory management and timely ordering.
B3	The reporting rate reached 90 percent at supported SDPs this quarter. While the overall rate is high, there was a decrease in timely reporting, defined as within one week of the deadline. This was due to changes in the reporting template, which was updated to incorporate additional ARVs, including TLD and the new pediatric regimens. GHSC-PSM continues to support facilities and regions throughout the country in uploading reports from the systems to the MoHSS Pharmaceutical Management Information System (PMIS) Dashboard to improve visibility of stock and patient information and facilitate decision making at various levels.

Warehouse stock status and product losses

Country

Namibia

FY Quarter

2020-Q1

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	16		69%	13%	19%
TO1-HIV/AIDS	16		69%	13%	19%
Subnational level 1	32	22%	34%	28%	16%
TO1-HIV/AIDS	32	22%	34%	28%	16%
Total	48	15%	46%	23%	17%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	Stocked according to plan observations in Namibia remained consistent this quarter, with reductions in stockouts and increases of both under- and overstocked observations. Long procurement processes and a lack of supply contracts continue to be at the root of high rates of stockouts and understocking. Delays in deliveries by suppliers also contributed to low stock statuses this quarter. GHSC-PSM meets regularly with the CMS to review ARV and RTK stock status and to discuss future demand. The project also works with CMS to expedite orders where possible
C7	There were no product losses in GHSC-PSM custody to report this quarter.

Supply plans, innovations, and strategic activities

Total Innovations
implemented
this quarter

New approaches
1

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
TO1-HIV/AIDS	New approaches	In the quarter under review, GHSC-PSM developed version 2.2 of the Electronic Data Sync (EDS), a tool that facilitates data transfer between the main Electronic Dispensing Tool (EDT) at main sites and the EDT-lite used by nurses at lower-level facilities. The tool has features that enable the large database of the EDT to be stored on a memory stick. In the latest version, download/upload times have been reduced to less than five minutes, ensuring less interruption in the dispensing process. The new EDS can easily be downloaded from a secure link by any facility staff, and automatic updates are available through the same link. Redundant data can be overwritten, preventing old data from piling up and reducing the chances of duplication of patient records.

Country

▼

Namibia

▼

FY Quarter

▼

2020-Q1

▼

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
TPT	Yes

Analysis

Following a new mandate, Namibia is one of 14 countries now required to complete supply plans for tuberculosis preventive treatment (TPT). The supply plan was completed and sent to GHSC-PSM headquarters

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

Namibia

FY Quarter

2020-Q1

C2. Number of people trained by sex

Sex	TO1-HIV/AIDS	Total
Female	1	1
Male	2	2
Total	3	3

C2. Number of people trained by supply chain level

Supply Chain Level	TO1-HIV/AIDS	Total
SDP	3	3
Total	3	3

C2. Number of people trained by funding source and type

Type	TO1-HIV/AIDS	Total
TO-specific	3	3
Total	3	3

C2. Number of people trained by technical area

Supply Chain Function	TO1-HIV/AIDS	Total
Warehousing and Inventory Management	3	3
Total	3	3

Analysis



The project trained three staff on the use of inventory control cards and dispensing tools.

Molecular Instruments and HIV Tracer Products

Country

Namibia

FY Quarter

2020-Q1

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

Analysis

GHSC-PSM does not manage or support maintenance for any molecular instruments in Namibia.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir DF/Lamivudine/Efavirenz 300/300/400 mg
2nd line adult ARV	Atazanavir/Ritonavir 300/100 mg
Pediatric ARV	Abacavir/Lamivudine 60/30 mg
First RTK	Colloidal Gold Device HIV 1 /2
Second RTK	Uni-Gold HIV 1 /2
Tie-breaker RTK	Sure Check HIV 1 /2
Viral load reagent	Not reported
Viral load consumable	Not reported
EID reagent	Not reported
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	2.3%	130
1st line adult ARV	0.0%	20
2nd line adult ARV	0.0%	20
Pediatric ARV	0.0%	20
First RTK	0.0%	20
Second RTK	5.0%	20
Tie-breaker RTK	10.0%	20
Male condoms (HIV)	0.0%	5
Female condoms (HIV)	0.0%	5
Total	2.3%	130

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
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See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	90%	21

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	13%	19%	69%		16
TO1-HIV/AIDS	13%	19%	69%		16
Subnational level 1	28%	16%	34%	22%	32
TO1-HIV/AIDS	28%	16%	34%	22%	32
Total	23%	17%	46%	15%	48

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

Namibia

FY Quarter

2020-Q1

C2. Number of people trained

Task Order	Female	Male	Total
TO1-HIV/AIDS	1	2	3
Total	1	2	3

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
TPT	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.


GLOBAL HEALTH SUPPLY CHAIN PROGRAM


Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Nepal 



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

▼

Nepal

▼

FY Quarter

▼

Multiple selections

▼

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
TO3-PRH	11,615	12.0%
Combined oral contraceptive with iron	3,035	14.2%
DMPA-Intramuscular injectable	3,056	8.8%
2-rod implant	1,504	15.4%
Copper-bearing IUD	968	18.4%
Male condoms (FP)	3,052	9.3%
Total	11,615	12.0%

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO3-PRH	4,139	25%
TO4-MCH	4,139	25%
Total	8,278	25%

Ref	Analysis
B1	The stockout data for FP commodities are for the period April 15 to July 15, 2019. The stockout is calculated on a 75 percent reporting rate. Generally, the stockout situation has improved from last quarter. The lowest stockout this quarter was Depo (8.8 percent) which decreased from 10.8 percent last quarter. The highest was IUD (18.4 percent), which also decreased from 23.1 percent last quarter. Condoms, combined oral contraceptives and implants all showed decreases in stockout rates from the previous quarter as well. FSOs, LMIS officers and supply chain pharmacists are trying to ensure the stocks are available at the stores so that the service delivery points can supply the required quantity.
B3	In Nepal, on time reporting rate this quarter has decreased to 25 percent from 53 percent last quarter. One of the main reasons for the drastic drop in the timeliness reporting can be attributed to a requirement by the central government pushing provincial governments to enter LMIS data at the district level across all 77 districts or below. This caused significant delay as 55 districts needed to be trained and provided with an eLMIS data entry license before they could start entering the data. Twenty-two districts were already eLMIS sites with LMIS data entry privilege since last year. GHSC-PSM facilitated the provinces to organize the LMIS data entry training and distribution of user name and password to enable the districts to enter the data at the district level In Q1 GHSC-PSM provided data entry training and username and password to six of seven provinces The training and username and password distribution in the remaining province will be completed in Q2.

Warehouse stock status and product losses

Country

Nepal

FY Quarter

Multiple selections

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	5		40%		60%
TO3-PRH	5		40%		60%
Subnational level 1	20	5%	50%	5%	40%
TO3-PRH	20	5%	50%	5%	40%
Subnational level 2	337	8%	29%	13%	50%
TO3-PRH	337	8%	29%	13%	50%
Total	362	7%	31%	12%	49%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	The stock status at storage sites data was taken for the period April 15 to July 15, 2019. The stock status of FP commodities was analyzed for all three level of storage sites (central, provincial and district). The stock status at the central level largely remains unchanged, with 62 percent of products overstocked (up from 60 percent last quarter) and 38 percent of products understocked (down from 40 percent last quarter). Looking at lower levels of the system, the stocked according to plan rates from FP commodities at the sub-national 1 level decreased to just 6 percent from 13 percent the previous quarter. Those stock observations switched to understocked. At sub-national 2, stocked according to plan rates decreased to 13 percent from 18 percent last quarter. The project presents stock status at the EDP meeting each month and regularly monitors the dashboard to avoid stockouts.
C7	Nothing to report this quarter.

Supply plans, innovations, and strategic activities

Country

Nepal

FY Quarter

Multiple selections

Total Innovations implemented this quarter0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
GHSC-PSM Nepal does not have any innovations to report this quarter		

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
FP commodities	Yes

Analysis

All required supply plans were submitted this quarter.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

▼

Nepal

▼

FY Quarter

▼

Multiple selections

▼

C2. Number of people trained by sex

Sex	TO3-PRH	TO4-MCH	Total
Female	15	14	29
Male	107	96	203
Total	122	110	232

C2. Number of people trained by supply chain level

Supply Chain Level	TO3-PRH	TO4-MCH	Total
Central	4	2	6
Subnational level 1	20	18	38
Subnational level 2	98	90	188
Total	122	110	232

C2. Number of people trained by funding source and type

Type	TO3-PRH	TO4-MCH	Total
Cross-TO	122	110	232
Total	122	110	232

C2. Number of people trained by technical area

Supply Chain Function	TO3-PRH	TO4-MCH	Total
Human Resources Capacity Development	15	11	26
MIS	107	99	206
Total	122	110	232

Analysis

Altogether 232 people were trained on various activities in the reporting quarter. Two activities, LMIS data entry training and field staff training, were conducted based on need. LMIS data entry training had 174 participants, Room Rollout (MIS) had 26 participants, and field staff training which included field support officers, LMIS officers and supply chain pharmacists, had 32 participants.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO3-PRH	12.0%	11,615
Combined oral contraceptive with iron	14.2%	3,035
DMPA-Intramuscular injectable	8.8%	3,056
2-rod implant	15.4%	1,504
Copper-bearing IUD	18.4%	968
Male condoms (FP)	9.3%	3,052
Total	12.0%	11,615

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO3-PRH		
Combined oral methods	14.2%	3,035
Injectable contraceptives	8.8%	3,056
Implantable contraceptives	15.4%	1,504

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO3-PRH	25%	4,139
TO4-MCH	25%	4,139

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central		60%	40%		5
TO3-PRH		60%	40%		5
Subnational level 1	5%	40%	50%	5%	20
TO3-PRH	5%	40%	50%	5%	20
Subnational level 2	13%	50%	29%	8%	337
TO3-PRH	13%	50%	29%	8%	337
Total	12%	49%	31%	7%	362

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

▼

FY Quarter

▼

Nepal

▼

Multiple selections

▼

C2. Number of people trained

Task Order	Female	Male	Total
TO3-PRH	15	107	122
TO4-MCH	14	96	110
Total	29	203	232

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
FP commodities	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Niger 



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

▼

Niger

▼

FY Quarter

▼

2020-Q1

▼

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
Total		

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
Total		

Ref	Analysis
B1	The current system for reporting logistics data, DHIS2, does not provide the required breakdown of stockout rates by malaria products.
B3	The LMIS is not yet operational in Niger. Cascade training will be rolled out in January 2020, with an expected launch of the LMIS in February 2020.

Warehouse stock status and product losses

Country

▼

FY Quarter

▼

Niger

▼

2020-Q1

▼

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Total					

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	The current system in Niger does not provide storage-level stock status data. However, the new LMIS being rolled out includes these data.
C7	GHSC-PSM Niger does not report on this indicator.

Supply plans, innovations, and strategic activities

Total Innovations implemented this quarter

New technologies

0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
Crosscutting	New technologies	GHSC-PSM Niger does not have any innovations to report this quarter.

Country

Niger

FY Quarter

2020-Q1

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
Malaria commodities	Yes

Analysis

A supply plan for malaria commodities was developed and submitted to GHSC-PSM headquarters for the first time this quarter.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
GHSC-PSM Niger participated in the development of the national supervision grid under the aegis of PSI, which harmonized the different grids into a single grid. The project also participated in a training-of-trainers for the eLMIS and is part of the training team responsible for the Tahoua region.

Training for supply chain partners

Country

▼

Niger

▼

FY Quarter

▼

2020-Q1

▼

C2. Number of people trained by sex

Sex	Total
Total	

C2. Number of people trained by supply chain level

Supply Chain Level	Total
Total	

C2. Number of people trained by funding source and type

Type	Total
Total	

C2. Number of people trained by technical area

Supply Chain Function	Total
Total	

Analysis

▲
No people were trained this quarter.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
Total		

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
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See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
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B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Total					

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

▼

FY Quarter

▼

Niger

▼

2020-Q1

▼

C2. Number of people trained

Task Order	Total
Total	

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Malaria commodities	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Nigeria 



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

▼

Nigeria

▼

FY Quarter

▼

2020-Q1

▼

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
TO1-HIV/AIDS	13,804	13.2%
1st line adult ARV	1,488	4.6%
2nd line adult ARV	720	9.6%
Pediatric ARV	651	23.8%
First RTK	1,411	6.8%
Second RTK	1,356	9.6%
Tie-breaker RTK	1,051	10.2%
Viral load reagent	12	8.3%
Viral load consumable	12	0.0%
EID reagent	12	8.3%
EID consumable	12	0.0%
Male condoms (HIV)	3,783	22.8%
Female condoms (HIV)	3,296	10.2%
Total	13,804	13.2%

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
TO2-Malaria	34,314	7.1%
AL 6x1	3,512	5.7%
AL 6x2	3,499	5.5%
AL 6x3	3,488	13.9%
AL 6x4	3,504	6.6%
AL inability to treat	3,534	1.6%
AS/AQ 100/270mgx3	2,219	2.7%
AS/AQ 100/270mgx6	1,973	2.8%
AS/AQ 25/67.5mg	2,171	2.5%
AS/AQ 50/135mg	2,097	2.1%
mRDT	3,504	8.0%
SP	3,195	6.0%
LLINs	1,618	37.1%
Total	34,314	7.1%

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
TO3-PRH	31,812	11.7%
Combined oral contraceptive with iron	3,821	10.5%
DMPA-Subcutaneous injectable	2,111	18.0%
NET-En Injectable	3,969	7.1%
DMPA-Intramuscular injectable	3,935	7.3%
1-rod implant	2,824	17.5%
2-rod implant	2,627	13.7%
Progestin only pills	3,776	7.4%
Copper-bearing IUD	1,670	3.1%
Male condoms (FP)	3,783	22.8%
Female condoms (FP)	3,296	10.2%
Total	31,812	11.7%

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO1-HIV/AIDS	1,678	96%
TO2-Malaria	3,740	97%
TO3-PRH	4,412	95%
Total	9,830	96%

Ref	Analysis
B1	Stockout rates for tracer commodities remained static or increased slightly for all reported program areas in FY 2020 Q1. Among HIV commodities (TO1), stockout rates increased from 11 percent in the previous quarter to 13 percent in this quarter. Stockouts of first-line ARVs increased sharply for pediatrics (from 11 percent in the previous quarter to 24 percent in Q1), but remained static for adults (at 5 percent). Stockouts of pediatric ARVs is partially due to the ongoing transition to ABC/3TC (60/30 mg) regimen for pediatric patients. A considerable improvement was seen in the observed stockouts of viral load and EID reagent, which dropped from 100 percent stockouts to just 8 percent in this quarter. The previous stockout was primarily due to a strategic shift in operations and an attendant surge in consumption.
B1	TO2: Stockout rates for TO2/malaria tracer commodities increased from 6 percent in FY 2019 Q4 to 8 percent in FY 2020 Q1. AL inability to treat remains low at just 2 percent, reflecting the sustained supply of ACTs. Conversely, reported stockout rates for LLINs remained volatile. After an improvement in rates between Q3 (43 percent) and Q4 (17 percent) of FY2019, LLIN stockout rates increased again in the first quarter of FY2020. More than a third of SDPs (37 percent) reported stockouts this quarter. TO3:
B1	Stockout rates for family planning commodities remained at 12 percent in FY 2020 Q1. Relatively low stockout rates were reported among high-used family planning methods (5 percent for injectable contraceptives, 10 percent for implantable contraceptives, and 10 percent for oral contraceptives). However 23 percent of facilities reported stockouts of male condoms, and 10 percent of female condoms.
B3	Reporting rates remained well above the 90 percent target in FY 2020 Q1, with 96 percent of required facilities successfully reporting on TO1 commodities, 97 percent on TO2, and 95 percent on TO3. It is important to note that the number of TO1 facilities considered supported by GHSC-PSM, and thus required to report on TO1 commodities, decreased considerably in this quarter (from around 3,000 facilities to just over 1,600). TO1 support is now focused on high-burden and targeted testing facilities. The number of supported facilities required to report on TO2 and TO3 commodities remained static, with over 3,700 supported facilities required to report on TO2 commodities, and over 4,400 facilities on TO3.

Warehouse stock status and product losses

Country

▼

FY Quarter

▼

Nigeria

▼

2020-Q1

▼

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	32		73%	23%	3%
TO1-HIV/AIDS	12		50%	50%	
TO2-Malaria	10		90%	10%	
TO3-PRH	10		80%	10%	10%
Total	32		73%	23%	3%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
TO1	Central	Storage	Expiry	RTKs, laboratory	\$104,348	\$26,236,032	0.40%
TO2	Central	Storage	Expiry	ACTs, RTKs	\$15,745	\$2,095,145	0.75%

Ref	Analysis
B2	In FY2020 Q1, three-fourths of tracer commodities were understocked on the date of observation at the Nigerian central medical store, including adult ARVs, ACTs, and most family planning tracer commodities. Sizable shipments of several HIV commodities (TO1) are expected in early 2020, in advance of planned last mile distributions. This includes 6 months of first line adult ARVs (expected by the end of February) and nearly 5 months of second line adult ARVs. Pediatric ARVs were stocked according to plan on the date of observation. Reduced stock of malaria commodities reflects a large issue of AS/AQ products to non-PMI facilities (with mission approval) in October and November of 2019 (less they become unusable) and the subsequent increased reliance on AL products in the absence of AS/AQ. Male condoms were the one family planning and reproductive health tracer commodity stocked according to plan on the date of observation in FY2020 Q1.
C7	In FY 2020 Q1, loss of product under GHSC-PSM control from theft, damage or expiry remained under 1 percent of product value. The project recorded expiration of \$104,347.67 worth of HIV commodities in Q1, or about 0.4 percent of the average inventory balance for TO1 commodities for the period. A total of \$15,644.66 worth of malaria commodities, or 0.8 percent of the average inventory balance for TO2 products were lost to expiries in the same period.

Supply plans, innovations, and strategic activities

Country

▼

Nigeria

▼

FY Quarter

▼

2020-Q1

▼

Total Innovations implemented this quarter0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
GHSC-PSM Nigeria does not have any innovations to report this quarter.		

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
ARVs	Yes
Condoms	Yes
FP commodities	Yes
Lab (HIV diagnostics)	Yes
Malaria commodities	Yes
RTKs	Yes
TPT	Yes

Analysis

All required quarterly supply plan updates (ARVs, Lab-HIV diagnostics, RTKs, malaria commodities, FP commodities and TPT) were conducted and submitted to GHSC-PSM HQ.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies, or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

▼

Nigeria

▼

FY Quarter

▼

2020-Q1

▼

C2. Number of people trained by sex

Sex	Total
Total	

C2. Number of people trained by supply chain level

Supply Chain Level	Total
Total	

C2. Number of people trained by funding source and type

Type	Total
Total	

C2. Number of people trained by technical area

Supply Chain Function	Total
Total	

Analysis

▲
No trainings to report this quarter.

Molecular Instruments and HIV Tracer Products

Country

Nigeria

FY Quarter

2020-Q1

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

82%

Analysis

In FY 2020 Q1, 12 (10 Roche CAP/CTM & 2 c8800) out of 61 machines supported by GHSC-PSM Nigeria reported downtime at some point in the quarter. A total of 168 days of downtime was recorded. Recorded causes of machine downtime included faulty thermocycler, hardware errors, consumable handling error, run abortion, faulty robotic head, instrument jam, idle mode and R-Tip malfunction. Overall, total machine downtime in Q1 of FY 2020 (168 days) is significantly lower than it was in Q4 of FY 2019 (219) a difference of 51 days.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Dolutegravir 300/300/50mg
2nd line adult ARV	Lopinavir /Ritonavir 200/50mg and 100/25mg
Pediatric ARV	Zidovudine/Lamivudine/Nevirapine 60/30/50 mg
First RTK	Determine
Second RTK	Uni-Gold
Tie-breaker RTK	STAT-PAK
Viral load reagent	Molecular, m2000 RT PCR, VL Plasma Quantitative, Reagents and Consumable Bundle, 960 Tests, Molecular, m2000 RealTime PCR, HIV-1 Amplification Reagent Kit, Quantitative, 4 Packs x 24 Assays, Molecular, COBAS, TaqMan, CAP/CTM HIV v2.0, Quantitative, 48 Tests
Viral load consumable	Ktube
EID reagent	Molecular, m2000 RT PCR, EID Qualitative, Reagents and Consumable Bundle, 960 Tests, Molecular, COBAS TaqMan, AmpliPrep, HIV-1, Qualitative, 48 Tests,
EID consumable	K tube

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	13.2%	13,804
1st line adult ARV	4.6%	1,488
2nd line adult ARV	9.6%	720
Pediatric ARV	23.8%	651
First RTK	6.8%	1,411
Second RTK	9.6%	1,356
Tie-breaker RTK	10.2%	1,051
Viral load reagent	8.3%	12
Viral load consumable	0.0%	12
EID reagent	8.3%	12
EID consumable	0.0%	12
Male condoms (HIV)	22.8%	3,783
Female condoms (HIV)	10.2%	3,296
TO2-Malaria	7.8%	30,780
AL 6x1	5.7%	3,512
AL 6x2	5.5%	3,499
AL 6x3	13.9%	3,488
AL 6x4	6.6%	3,504
AS/AQ 100/270mgx3	2.7%	2,219
AS/AQ 100/270mgx6	2.8%	1,973
AS/AQ 25/67.5mg	2.5%	2,171
AS/AQ 50/135mg	2.1%	2,097
mRDT	8.0%	3,504
SP	6.0%	3,195
LLINs	37.1%	1,618
TO3-PRH	11.7%	31,812
Combined oral contraceptive with iron	10.5%	3,821
DMPA-Subcutaneous injectable	18.0%	2,111
NET-En Injectable	7.1%	3,969
DMPA-Intramuscular injectable	7.3%	3,935
1-rod implant	17.5%	2,824
2-rod implant	13.7%	2,627
Progestin only pills	7.4%	3,776
Copper-bearing IUD	3.1%	1,670
Male condoms (FP)	22.8%	3,783
Female condoms (FP)	10.2%	3,296
Total	9.7%	69,317

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO2-Malaria		
AL inability to treat	1.6%	3,534
TO3-PRH		
Combined oral methods	10.5%	3,821
Injectable contraceptives	5.1%	4,008
Implantable contraceptives	9.8%	2,983
Progestin-only methods	7.4%	3,776

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	96%	1,678
TO2-Malaria	97%	3,740
TO3-PRH	95%	4,412

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	23%	3%	73%		30
TO1-HIV/AIDS	50%		50%		12
TO2-Malaria	10%		90%		10
TO3-PRH	10%	10%	80%		10
Total	23%	3%	73%		30

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

▼

FY Quarter

▼

Nigeria

▼

2020-Q1

▼

C2. Number of people trained

Task Order	Total
Total	

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Condoms	1	1
FP commodities	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
RTKs	1	1
TPT	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
61	82%

For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Pakistan 



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

▼

Pakistan

▼

FY Quarter

▼

2020-Q1

▼

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
TO3-PRH	36,720	35.2%
Combined oral contraceptive with iron	10,278	40.9%
DMPA-Intramuscular injectable	10,228	34.7%
Copper-bearing IUD	5,962	13.2%
Male condoms (FP)	10,252	42.7%
Total	36,720	35.2%

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO3-PRH	12,490	82%
Total	12,490	82%

Ref	Analysis
B1	Stockouts are much lower in Baluchistan (10 percent) and Sindh (7 percent) provinces, and in fact both have decreased since last quarter. In Punjab, there was a slight decrease in stockouts, from 41 percent to 39 percent. The stockout rate in Punjab is driven by high stockouts of condoms (48 percent), combined oral contraceptives (47 percent) and injectable contraceptives (38 percent).
B1	The stockout rate remains high, at 35 percent. This is driven by increasingly high stockouts in KP province (91 percent, up from 73 percent in the previous quarter) due to delays in procurement. The department has now completed the procurement process for some contraceptives, while for others it is still in process. Combined oral contraceptives have arrived in the central warehouse and are undergoing quality control tests. Procurement of condoms is in its final stages, and they are expected to arrive at the central warehouse in mid-February. For intrauterine devices, the bidding process was completed, but the qualified manufacturer pulled out at the final stage due to the political situation in the country, and the process will need to be restarted.
B1	This quarter, the new active site rule for family planning products was applied, meaning that all SDPs which had neither product in stock nor consumption in the previous 12 months for a particular product were removed from the stockout calculations for that product.
B3	The SDP reporting rate to the LMIS remained constant at 82 percent, while the denominator of sites required to report decreased from 14,023 to 12,490 due to removal of inactive sites (see the “active site rule” discussed for indicator B1). The reporting rate for Sindh and KP provinces continues to hover around 100 percent, while for Baluchistan and Punjab it was 82 percent and 74 percent, respectively.

Warehouse stock status and product losses

Country

▼

FY Quarter

▼

Pakistan

▼

2020-Q1

▼

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Subnational level 1	16	38%	13%	13%	38%
TO3-PRH	16	38%	13%	13%	38%
Subnational level 2	1,112	56%	22%	10%	12%
TO3-PRH	1,112	56%	22%	10%	12%
Total	1,128	55%	22%	10%	13%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	At the provincial level (supported sites in KP, Punjab, Baluchistan and Sindh), stocked according to plan decreased from 25 percent to 13 percent, while stockouts also decreased from 44 percent to 38 percent. To see more detailed analyses at the provincial level, please visit the Pakistan LMIS website at: www.lmis.gov.pk .
B2	Trends from last quarter continued, with a high portion of observations (55 percent) stocked out, and only 10 percent stocked according to plan. This was driven by high stockouts at the district level (56 percent, from district stores in Punjab, KP, Baluchistan and Sindh), which carried through across all of the tracer products. Decreased stocks of commodities stemmed from the low interest from multinational pharmaceuticals in participating in the advertised tenders by the provincial governments.
C7	GHSC-PSM does not have custody of any products in Pakistan and therefore does not report on product losses.

Supply plans, innovations, and strategic activities

Total Innovations implemented this quarter

New technologies2

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
TO3-PRH	New technologies	The project team has developed and implemented a web-based LMIS inventory management module in district headquarters, Tehsil headquarters hospitals, and in the district stores of medicines and FP products in four pilot districts of Khyber Pakhtunkhwa including Charsadda, Lakki Marwat, Mohamad Agency and Swat. Before this tool, there was no visibility into inventory management in these sites now it is visible in real time through a clickable dashboard. This IM module will help to provide real-time insights into the medicine store via a clickable dashboard. The GHSC-PSM project provided on-the-job training to the district store keepers and data entry operators on the newly developed IM module. The project also provided support in the provision of IT equipment to these hospitals and district stores. The GHSC-PSM project team is planning to roll out the LMIS down to the facility level for complete end-to-end data visibility and complete supply chain automation.
TO3-PRH	New technologies	The project team has worked to develop a formatted summary report in LMIS which will help improve data validity by applying stockout business rules for inclusion/exclusion of facilities from stockout reporting during the analysis phase. As per the stockout business rules, all SDPs that are reporting into LMIS for the previous 12 consecutive months and reporting zero consumption and zero stock on hand will be excluded from stockout calculation. Elimination of dormant facilities from stockout analysis will help in providing the real situation of stock in health facilities. The project team is further working to integrate these business rules into a cLMIS DevResults report to automatically exclude dormant facilities from stockout calculations during analysis and provide an accurate stock situation at the SDP level.

Country

▼

Pakistan

▼

FY Quarter

▼

2020-Q1

▼

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group <div>▲</div>	Supply Plan Submission Status
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Analysis

Pakistan does not report on this indicator.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
The project designed, developed and consulted on district supply chain packages on FASP, MIS, warehousing storage, IS/LMIS, and others.

Training for supply chain partners

Country

▼

Pakistan

▼

FY Quarter

▼

2020-Q1

▼

C2. Number of people trained by sex

Sex	TO3-PRH	Total
Female	3	3
Male	3	3
Total	6	6

C2. Number of people trained by supply chain level

Supply Chain Level	TO3-PRH	Total
Subnational level 1	6	6
Total	6	6

C2. Number of people trained by funding source and type

Type	TO3-PRH	Total
TO-specific	6	6
Total	6	6

C2. Number of people trained by technical area

Supply Chain Function	TO3-PRH	Total
MIS	6	6
Total	6	6

Analysis



The GHSC-PSM project team has conducted capacity building training of Ministry of National Health Services, Regulations & Coordination (MoNHSR&C) and Population Programme Wing (PPW) staff on LMIS data use, as requested by the ministry. The training covered each of the cLMIS system modules in depth. A total of six participants (three women and three men) attended the training.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO3-PRH	35.2%	36,720
Combined oral contraceptive with iron	40.9%	10,278
DMPA-Intramuscular injectable	34.7%	10,228
Copper-bearing IUD	13.2%	5,962
Male condoms (FP)	42.7%	10,252
Total	35.2%	36,720

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO3-PRH		
Combined oral methods	40.9%	10,278
Injectable contraceptives	34.7%	10,228

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO3-PRH	82%	12,490

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Subnational level 1	13%	38%	13%	38%	16
TO3-PRH	13%	38%	13%	38%	16
Subnational level 2	10%	12%	22%	56%	1,112
TO3-PRH	10%	12%	22%	56%	1,112
Total	10%	13%	22%	55%	1,128

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

▼

FY Quarter

▼

Pakistan

▼

2020-Q1

▼

C2. Number of people trained

Task Order	Female	Male	Total
TO3-PRH	3	3	6
Total	3	3	6

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
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C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country

Rwanda



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

▼

FY Quarter

▼

Rwanda

▼

2020-Q1

▼

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
TO1-HIV/AIDS	3,373	1.1%
1st line adult ARV	533	0.8%
2nd line adult ARV	537	1.3%
Pediatric ARV	505	0.6%
First RTK	571	0.9%
Second RTK	507	0.8%
Viral load reagent	9	0.0%
Viral load consumable	9	0.0%
EID reagent	6	0.0%
EID consumable	6	0.0%
Male condoms (HIV)	503	1.8%
Female condoms (HIV)	187	2.1%
Total	3,373	1.1%

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
TO2-Malaria	2,896	1.2%
AL 6x1	451	1.6%
AL 6x2	456	2.2%
AL 6x3	434	2.1%
AL 6x4	507	1.4%
AL inability to treat	571	0.0%
mRDT	477	0.4%
Total	2,896	1.2%

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
TO3-PRH	3,418	2.1%
Combined oral contraceptive with iron	446	3.1%
DMPA-Intramuscular injectable	450	1.8%
1-rod implant	442	1.8%
2-rod implant	437	2.1%
Progestin only pills	324	3.7%
Copper-bearing IUD	310	4.2%
Calendar-based awareness methods	319	0.6%
Male condoms (FP)	503	0.4%
Female condoms (FP)	187	2.1%
Total	3,418	2.1%

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO1-HIV/AIDS	586	98%
TO2-Malaria	586	97%
TO3-PRH	586	92%
TO4-MCH	569	100%
Total	2,327	97%

Ref	Analysis
B1	This quarter the stockout rate at SDPs for TO1 was at a low of 1.1 percent. The rate for TO2 was 1.5 percent and for TO3 was 2.1 percent. These stockout rates are comparable and very similar to last quarter's, showing continued performance. GHSC-PSM continues to register improved data accuracy because of key interventions such as Quality Management Improvement Approach (QMIA) at district pharmacies (DPs) and service delivery points (SDPs) level and other supportive supervisions. QMIA, eLMIS performance reports, and monthly stock status updates have contributed to improved performance and reduction of stockouts. Very few SDPs reported on HIV-reagent, consumable and viral load reagent; this is because these are the only facility hubs in Rwanda that undertake these tests, so the other SDPs refer samples to them.
B3	The average Service Delivery Point reporting rate to the Logistics Management Information System (LMIS) was approximately 96.7 percent across all sites and across all TOs as reported from the e-LMIS system, showing 98 percent for TO1, 97 percent for TO2, 92 percent for TO3 and 100 percent for TO4. This shows that data is flowing into the e-LMIS with minimal bottlenecks attributed to timely data entry into e-LMIS by the SDPs as required.

Warehouse stock status and product losses

Country

Rwanda

FY Quarter

2020-Q1

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	25		43%	43%	13%
TO1-HIV/AIDS	11		27%	55%	18%
TO2-Malaria	5		40%	60%	
TO3-PRH	9		67%	11%	22%
Subnational level 1	660	1%	33%	40%	26%
TO1-HIV/AIDS	240	2%	33%	45%	20%
TO2-Malaria	150	0%	34%	35%	31%
TO3-PRH	270	3%	35%	33%	29%
Total	685	1%	33%	40%	26%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	The overall stocked according to plan rate at both the central and regional levels was at 40 percent this quarter, which is a slight improvement from last quarter where the overall rate was at 37 percent. The stocked according to plan rate at both supply chain levels was 46 percent for TO1, 35 percent TO2 and 33 percent for TO3. As noted in B1, stockout rates at both levels were very low. Understock rates at both levels were comparable with 32 percent, 34 percent, 36 percent for TO 1, 2, 3 respectively. Similarly overstocked rates were comparable at 20 percent, 30 percent, 29 percent for TO 1, 2, 3 respectively. We note a relatively high level of understocked products for TO3 at the regional level which was due to the low acceptance and awareness regarding Female condom and calendar-based awareness method. Some District Pharmacies do no requet this product because of low demand from their SDPs.
C7	There is no product loss from theft, damage or expiry to report in this period.

Supply plans, innovations, and strategic activities

Total Innovations implemented this quarter

New approaches1

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
Crosscutting	New approaches	GHSC-PSM Rwanda reported on one innovation this quarter. This was support to BUFMAR (Bureau des Formations Médicales Agrées au Rwanda) on capacity building and leadership training on Supply Chain Management system. This entailed 27 participants from BUFMAR and affiliated health facilities attending a face-to-face training that took place in Nyamata where at the end of the training participants had to develop and finalize their workplace application capstone projects. Some of the capstone project action plans have already been submitted and shared with co-facilitators for review. The implementation of the capstone projects begin in January 2020. This is a unique innovation as (1) it is the first time GHSC-PSM Rwanda is supporting a faith based Organization that is considered as a private central store; (2) The Supply Chain leadership for change management is a new training approach.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
ARVs	Yes
Condoms	Yes
FP commodities	Yes
Lab (HIV diagnostics)	Yes
Malaria commodities	Yes
MCH commodities	Yes
RTKs	Yes
TPT	No

Analysis

Quarterly supply plans for all task orders were reviewed as planned and submitted to GHSC-PSM HQ. For TO1 this included ARVs, lab (HIV diagnostics) and RTKs. However it did not include TPT. For TO2 it included malaria commodities, for TO3 FP commodities and TO4 MCH commodities. This is consistent with last quarter where supply plans for all task orders were submitted and reviewed.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
<p>Another strategy developed this quarter came from GHSC-PSM participation in the Malaria Program Review and the development of the malaria strategic plan 2020-2024 which took place in November 2019. The aim of the workshop was to develop key strategies and activities on the 5 units of Malaria Program: Program Management, Vector control and Prevention; Case management; Epidemiology Monitoring, Evaluation & Operational research and Social and Behavior Change Communication</p> <p>This quarter the Mission approved support to BUFMAR as a Faith based central medical store for inspirational and situational SCM leadership training for change management. Hence, GHSM-PSM was requested to support the training workshop for BUFMAR staff, which included both management and technical teams. The training attracted some attention where Johnson & Johnson staff were present and supportive of the leadership training as private sector resource people and PtD representatives. USAID/W was also present to observe the training. The BUFMAR team was very engaged and actively participated in the entire training. The training was successfully completed and the participants came up with developed capstone projects to improve not only BUFMAR supply chain performance but also individual performance at the workplace. Some of the capstone project action plans have been submitted and shared with co-facilitators for review.</p>

Training for supply chain partners

C2. Number of people trained by sex

Sex	TO1-HIV/AIDS	Total
Female	1	1
Male	15	15
Total	16	16

C2. Number of people trained by supply chain level

Supply Chain Level	TO1-HIV/AIDS	Total
Central	16	16
Total	16	16

C2. Number of people trained by funding source and type

Type	TO1-HIV/AIDS	Total
TO-specific	16	16
Total	16	16

C2. Number of people trained by technical area

Supply Chain Function	TO1-HIV/AIDS	Total
Forecasting and Supply Planning	16	16
Total	16	16

Analysis

The trainings this quarter were held at the central level and focused on TO1 forecasting and supply planning. There were 16 participants in total. The trainings were predominantly attended by men, where the ratio between men and women was 15:1. The topics of the trainings included QUANTIMED, which capacitated participants to acquire capacity to run the quantification process. It also included a review exercise for the previous quantification and a 48-month forecast of HIV/AIDS was developed, as well as a 12-month supply plan using appropriate forecasting and supply planning tools. Other trainings topics were on Lab Training, which provided insights on the ForLab training, a quantification tool that will be used by the CPDS team in forecasting and supply planning of laboratory commodities. The training also intended to facilitate the CPDS team to own the quantification processes of laboratory commodities going forward. The quantification team will then ensure regular updates of the forecast and supply/procurement plans and ownership of the quantification activities by the MOH and Rwanda Biomedical Centre (RBC).

Molecular Instruments and HIV Tracer Products

Country

Rwanda

FY Quarter

2020-Q1

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

95%

Analysis

The percentage of molecular instruments that remained functional for this reporting period is 95 percent. There was just 1 Molecular Instrument with serial No: 293178 in Kibuye District Hospital that had a mechanical error and was unfunctional for a period of 13 days.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Efavirenz 300/300/600 mg
2nd line adult ARV	Atazanavir/Ritonavir 300/100 mg
Pediatric ARV	Abacavir/Lamivudine 60/30 mg
First RTK	Determine
Second RTK	STAT-PAK
Tie-breaker RTK	Not reported
Viral load reagent	COBAS TAQMQRN HIV-1 TEST V2.0/HI2CAP
Viral load consumable	COBAS AMPILPREP (CAP48)-K TIPS
EID reagent	CAP/TaqMan HIV-1 Qualitative v2.0, 48 Test
EID consumable	Cobas AmpliPrep/TaqMan Specimen Pre-Extraction (SPEX) reagent,5x78 mL

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	1.1%	3,373
1st line adult ARV	0.8%	533
2nd line adult ARV	1.3%	537
Pediatric ARV	0.6%	505
First RTK	0.9%	571
Second RTK	0.8%	507
Viral load reagent	0.0%	9
Viral load consumable	0.0%	9
EID reagent	0.0%	6
EID consumable	0.0%	6
Male condoms (HIV)	1.8%	503
Female condoms (HIV)	2.1%	187
TO2-Malaria	1.5%	2,325
AL 6x1	1.6%	451
AL 6x2	2.2%	456
AL 6x3	2.1%	434
AL 6x4	1.4%	507
mRDT	0.4%	477
TO3-PRH	2.1%	3,418
Combined oral contraceptive with iron	3.1%	446
DMPA-Intramuscular injectable	1.8%	450
1-rod implant	1.8%	442
2-rod implant	2.1%	437
Progestin only pills	3.7%	324
Copper-bearing IUD	4.2%	310
Calendar-based awareness methods	0.6%	319
Male condoms (FP)	0.4%	503
Female condoms (FP)	2.1%	187
Total	1.6%	8,426

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO2-Malaria		
AL inability to treat	0.0%	571
TO3-PRH		
Combined oral methods	3.1%	446
Injectable contraceptives	1.8%	450
Implantable contraceptives	0.4%	460
Progestin-only methods	3.7%	324

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	98%	586
TO2-Malaria	97%	586
TO3-PRH	92%	586
TO4-MCH	100%	569

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	43%	13%	43%		23
TO1-HIV/AIDS	55%	18%	27%		11
TO2-Malaria	60%		40%		5
TO3-PRH	11%	22%	67%		9
Subnational level 1	40%	26%	33%	1%	600
TO1-HIV/AIDS	45%	20%	33%	2%	240
TO2-Malaria	35%	31%	34%	0%	150
TO3-PRH	33%	29%	35%	3%	270
Total	40%	26%	33%	1%	623

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

▼

FY Quarter

▼

Rwanda

▼

2020-Q1

▼

C2. Number of people trained

Task Order	Female	Male	Total
TO1-HIV/AIDS	1	15	16
Total	1	15	16

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Condoms	1	1
FP commodities	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
MCH commodities	1	1
RTKs	1	1
TPT	1	0

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
19	95%

For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.


GLOBAL HEALTH SUPPLY CHAIN PROGRAM


Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Sierra Leone 



Service Delivery Point Stockouts and Reporting Rates

For countries with data available from GHSC-PSM non-supported regions

Country

Sierra Leone

FY Quarter

2020-Q1

B1. Stockout rate at service delivery points - SDPs located in supported regions

GHSC-PSM Support	Stockout rate	# SDP stock observations
Total		

B1. Stockout rate at service delivery points - SDPs located in non-supported regions

GHSC-PSM Support	Stockout rate	# SDP stock observations
Not Supported	10.2%	6,852
TO2-Malaria	10.2%	6,852
AL 6x1	18.7%	969
AL 6x2	7.5%	979
AL 6x3	6.0%	1,009
AL 6x4	4.8%	1,009
mRDT	11.1%	956
SP	15.3%	947
LLINs	8.7%	983
Total	10.2%	6,852

B3. LMIS reporting rate

GHSC-PSM Support	Total # of SDPs required to report	Reporting rate
Not Supported	1,388	75%
Total	1,388	75%

Ref	Analysis
B3	Seventy-five percent of facilities reported on time. Some facility personnel have not been trained to complete the paper-based LMIS so have not reported. There are upcoming LMIS data visibility and mentoring activities to improve the reporting rate.
B1	The stock out rate for all reported malaria products was over 5 percent. There was a distribution to health facilities from October to November 2019. The NMCP believes the stock out rates for products is due to poor data quality, rather than there actually being stock outs at all of those facilities. The NMCP is looking into this and there are plans to conduct additional training for health facility staff to address the poor data quality and reporting rate.

Warehouse stock status and product losses

Country

Sierra Leone

FY Quarter

2020-Q1

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Total					

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
TO2	Global	Transit	Damage	ACTs	\$1,296	\$428,334	0.30%

Ref	Analysis
B2	GHSC-PSM in Sierra Leone will begin reporting on this indicator in FY 2020 Q2.
C7	Ninety doses of Alu 6x2 were damaged during offloading from the port and loading to the warehouse.

Supply plans, innovations, and strategic activities

Country

Sierra Leone

FY Quarter

2020-Q1

Total Innovations implemented this quarter0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
GHSC-PSM Sierra Leone does not have any innovations to report this quarter.		

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
Malaria commodities	Yes

Analysis
GHSC-PSM in Sierra Leone updated and submitted the malaria supply plan for the quarter.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

Sierra Leone

FY Quarter

2020-Q1

C2. Number of people trained by sex

Sex	Total
Total	

C2. Number of people trained by supply chain level

Supply Chain Level	Total
Total	

C2. Number of people trained by funding source and type

Type	Total
Total	

C2. Number of people trained by technical area

Supply Chain Function	Total
Total	

Analysis

▲
GHSC-PSM in Lesotho did not have any trainings to report this quarter.

Complete Results and Denominators

B1. Stockout rate at service delivery points (Non-GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO2-Malaria	10.2%	6,852
AL 6x1	18.7%	969
AL 6x2	7.5%	979
AL 6x3	6.0%	1,009
AL 6x4	4.8%	1,009
mRDT	11.1%	956
SP	15.3%	947
LLINs	8.7%	983
Total	10.2%	6,852

B1. Composite stockout rates (Non-GHSC-PSM-supported regions)

Task Order	Stockout rate	# of SDPs that reported
------------	---------------	-------------------------

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (Non-GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO2-Malaria	75%	1,388

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Total					

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

Sierra Leone

FY Quarter

2020-Q1

C2. Number of people trained

Task Order	Total
Total	

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Malaria commodities	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.


GLOBAL HEALTH SUPPLY CHAIN PROGRAM


Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Thailand 



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

Thailand

FY Quarter

2020-Q1

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
Total		

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
Total		

Ref	Analysis
B1	Thailand does not report this indicator.
B3	Thailand does not report this indicator.

Warehouse stock status and product losses

Country

Thailand

FY Quarter

2020-Q1

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	1		100%		
TO2-Malaria	1		100%		
Total	1		100%		

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	This is the first quarter in which stock data from countries within the RDMA portfolio are reported. For this quarter, Thailand is reporting stock statuses of TO2 commodities at the central warehouse only. This quarter, mRDTs were understocked. More data will be gradually added in as cooperation with government counterparts allow.
C7	Thailand does not report this indicator.

Supply plans, innovations, and strategic activities

Country

Thailand

FY Quarter

2020-Q1

Total Innovations implemented this quarter0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
GHSC-PSM RDMA (Thailand and Laos) does not have any innovations to report this quarter.		

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
Malaria commodities	No

Analysis

GHSC-PSM was unable to submit the expected supply plan for malaria commodities this quarter. Continued discussions with the government may result in future submissions

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

Thailand

FY Quarter

2020-Q1

C2. Number of people trained by sex

Sex	Total
Total	

C2. Number of people trained by supply chain level

Supply Chain Level	Total
Total	

C2. Number of people trained by funding source and type

Type	Total
Total	

C2. Number of people trained by technical area

Supply Chain Function	Total
Total	

Analysis



Nothing to report this quarter.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
Total		

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
------------	---------------	-------------------------

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
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B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central			100%		1
TO2-Malaria			100%		1
Total			100%		1

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

Thailand

FY Quarter

2020-Q1

C2. Number of people trained

Task Order	Total
Total	

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Malaria commodities	1	0

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.


GLOBAL HEALTH SUPPLY CHAIN PROGRAM


Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Uganda 



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

Uganda

FY Quarter

2020-Q1

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
TO1-HIV/AIDS	891	10.2%
1st line adult ARV	211	12.3%
2nd line adult ARV	161	10.6%
Pediatric ARV	170	11.8%
First RTK	126	1.6%
Second RTK	119	4.2%
Tie-breaker RTK	102	20.6%
Viral load reagent	1	0.0%
EID reagent	1	0.0%
Total	891	10.2%

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
TO2-Malaria	893	2.9%
AL inability to treat	451	2.9%
mRDT	442	2.9%
Total	893	2.9%

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
TO3-PRH	129	3.9%
DMPA-Intramuscular injectable	129	3.9%
Total	129	3.9%

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO1-HIV/AIDS	218	100%
TO2-Malaria	657	98%
TO3-PRH	285	82%
Total	1,160	95%

Ref	Analysis
B1	Stockout rates have decreased by 1 percent (from 8 percent in FY 2019 Q4 to 7 percent in FY 2020 Q1) for TO1 commodities. Stockout rates remained at zero for both EID reagents and viral load reagents, a continuation of the previous quarter's performance. The stockout rate for first-line adult ARVs was 12.3 percent. This is probably due to the change from tenofovir/lamivudine/efavirenz to TLD as the most used first-line ARV. Regarding TO2 commodities, the overall stockout rate reduced from 5 percent in FY 2019 Q4 to 3 percent in FY 2020 Q1. However, the stockout rate for ACTs remained the same (3 percent) in FY 2020 Q1. The stockout rate for RDTs reduced from 3.7 percent in FY 2019 Q4 to 2.9 percent in FY 2020 Q1. TO3 commodities: Stockout rates for Depo reduced from 4.5 percent in FY 2019 Q4 to 3.9 percent in FY 2020 Q1. Joint Medical Store (JMS) continued to provide support to FP sites to make orders and submit timely reports.
B3	TO1: SDPs report directly in the web-based ARV ordering and reporting system (WAOS) that is managed by MOH. The data used for TO1 and TO2 for the last quarter was for FY 2019 Q4 because it was the last published report by the Uganda MOH. The general reporting rates increased from 87 percent in FY 2019 Q4 to 95 percent in FY 2020 Q1. The reporting rate for TO1 was 100 percent according to the last published report by the MOH. Generally, the number of SDPs required to report remained the same in Q3 and Q4, at 218. This high reporting rate is sustained due to continuous support to the SDPs to submit their ARV orders/reports online. TO2: The last published data showed that 98 percent of the SDPs reported. There was constant follow-up of the sites and verification of orders/reports to ensure that SDPs provide quality and timely reports. TO3: During the reporting period, the number of sites that received FP commodities reduced from 426 SDPs to 235. This is because a number of implementing partners and community-based organizations were dropped from the receiving list while those that are still receiving commodities on behalf of SDPs have not provided SDP specific information. Also, some SDPs are not registered in the national DHIS2 where the consumption data are retrieved However the reporting rate increased from 64 percent in FY 2019 Q4 to 82 percent in FY 2020 Q1.

Warehouse stock status and product losses

Country

Uganda

FY Quarter

2020-Q1

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	84	9%	33%	26%	32%
TO1-HIV/AIDS	36	14%	36%	28%	22%
TO2-Malaria	18	6%	56%	22%	17%
TO3-PRH	30	3%	17%	30%	50%
Total	84	9%	33%	26%	32%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	TO1: TO1 commodities stocked according to plan increased, from 21 percent in FY 2019 Q4 to 28 percent in FY 2020 Q1. This increase may be attributed to male condoms and second-line adult ARVs, which were stocked according to plan through the reporting period. It can also be attributed to TLD, which is now the most used ARV. The overstocks of the most-used first-line pediatric ARVs and second RTK is as a result of its low consumption. Second RTK consumption reduced, but the supply plan had a high target. Commodities that contributed to understocks like tie-breaker RTK, EID reagents and EID consumables (at 67 percent) were mainly the result of insufficient funds toward the end of the year. TO2 commodities stocked according to plan reduced from 39 percent in FY 2019 Q4 to 22 percent in FY 2020 Q1. This could be attributed to the upsurge of malaria cases in FY 2019 Q4, which increased by 29.5 percent and affected the stock levels. In addition, some orders had been put on hold because of previous consumption trends and stock levels. However, patients did not go without treatment. The overstocks of ALU 6X1 is a result of low consumption but it has no risk of expiry. The 67 percent stockout rate of ALU 6X2 was mainly due to mixing of the different pack sizes during treatment. However, stocks remained between two to four months of stock at facility level for ALU 6X2. The percent of TO3 commodities stocked according to plan reduced from 49 percent in FY 2019 Q4 to 30 percent in FY 2020 Q1. This is mainly because of most of commodities were distributed to a few implementing partners that work as intermediary storage points. There was also a delay in shipment of female condoms that affected the stock levels. Overstockes increased from 22 percent in FY 2019 Q4 to 50 percent in FY2020 Q1 but with no risk of stock expiry.
C7	Nothing to report this quarter.

Supply plans, innovations, and strategic activities

Total Innovations
implemented
this quarter

0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
GHSC-PSM Uganda does not have any innovations to report this quarter.		

Country

Uganda

FY Quarter

2020-Q1

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
ARVs	Yes
Condoms	Yes
FP commodities	Yes
Lab (HIV diagnostics)	Yes
Malaria commodities	Yes
RTKs	Yes
VMMC	Yes

Analysis

All required supply plans were submitted this quarter.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

Uganda

FY Quarter

2020-Q1

C2. Number of people trained by sex

Sex	Total
Total	

C2. Number of people trained by supply chain level

Supply Chain Level	Total
Total	

C2. Number of people trained by funding source and type

Type	Total
Total	

C2. Number of people trained by technical area

Supply Chain Function	Total
Total	

Analysis



Nothing to report this quarter.

Molecular Instruments and HIV Tracer Products

Country

Uganda

FY Quarter

2020-Q1

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

Analysis

Uganda does not report this indicator.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Efavirenz 300/300/600 mg
2nd line adult ARV	Lopinavir/Ritonavir 200/50 mg
Pediatric ARV	Zidovudine/Lamivudine/Nevirapine 60/30/50 mg
First RTK	Determine
Second RTK	STAT-PAK
Tie-breaker RTK	Bioline
Viral load reagent	COBAS Taqman, CAP/CTM HIV V2.0 Quantitative test, 48 test
Viral load consumable	DBS – VL collection kit
EID reagent	COBAS Taqman Ampliprep HIV-1 Qualitative test, 48 test
EID consumable	Dry blood spot (DBS) – EID collection kit

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	10.2%	891
1st line adult ARV	12.3%	211
2nd line adult ARV	10.6%	161
Pediatric ARV	11.8%	170
First RTK	1.6%	126
Second RTK	4.2%	119
Tie-breaker RTK	20.6%	102
Viral load reagent	0.0%	1
EID reagent	0.0%	1
TO2-Malaria	2.9%	442
mRDT	2.9%	442
TO3-PRH	3.9%	129
DMPA-Intramuscular injectable	3.9%	129
Total	7.5%	1,462

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO2-Malaria		
AL inability to treat	2.9%	451
TO3-PRH		
Injectable contraceptives	3.9%	129

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	100%	218
TO2-Malaria	98%	657
TO3-PRH	82%	285

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	26%	32%	33%	9%	78
TO1-HIV/AIDS	28%	22%	36%	14%	36
TO2-Malaria	22%	17%	56%	6%	18
TO3-PRH	30%	50%	17%	3%	30
Total	26%	32%	33%	9%	78

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

Uganda

FY Quarter

2020-Q1

C2. Number of people trained

Task Order	Total
Total	

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Condoms	1	1
FP commodities	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
RTKs	1	1
VMMC	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country

Vietnam



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

▼

Vietnam

▼

FY Quarter

▼

2020-Q1

▼

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
Total		

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
Total		

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
Total		

Ref	Analysis
B1	Vietnam does not report this indicator.
B3	Vietnam does not report this indicator.

Warehouse stock status and product losses

Country

▼

Vietnam

▼

FY Quarter

▼

2020-Q1

▼

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	6		100%		
TO1-HIV/AIDS	6		100%		
Total	6		100%		

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	In Vietnam, the stock status of both most used first-line and second-line ARVs (TLE 400 and LPV/r 200/50mg) were 100 percent understocked. This can be attributed to PEPFAR's commitment to transition away from procurement support for ARVs to Vietnam at the end of 2019. From 2020 onward, patients covered by PEPFAR will transition to the Social Health Insurance fund and National Targeted Program, whose stock is not reflected in these figures. Thus the stock observations of ARV showed as being under the desired stock level.
C7	Nothing to report this quarter.

Supply plans, innovations, and strategic activities

Country

▼

Vietnam

▼

FY Quarter

▼

2020-Q1

▼

Total Innovations implemented this quarter

0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
GHSC-PSM Vietnam does not have any innovations to report this quarter.		

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
ARVs	Yes

Analysis

All required supply plans were submitted this quarter.

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

▼

Vietnam

▼

FY Quarter

▼

2020-Q1

▼

C2. Number of people trained by sex

Sex	Total
Total	

C2. Number of people trained by supply chain level

Supply Chain Level	Total
Total	

C2. Number of people trained by funding source and type

Type	Total
Total	

C2. Number of people trained by technical area

Supply Chain Function	Total
Total	

Analysis



Nothing to report this quarter.

Molecular Instruments and HIV Tracer Products

Country

Vietnam

FY Quarter

2020-Q1

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

Analysis

Vietnam does not report this indicator.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Efavirenz 300/300/600 mg
2nd line adult ARV	Lopinavir/Ritonavir 200/50 mg
2nd line adult ARV	Not reported
First RTK	Not reported
Second RTK	Not reported
Tie-breaker RTK	Not reported
Viral load reagent	Not reported
Viral load consumable	Not reported
EID reagent	Not reported
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
Total		

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
------------	---------------	-------------------------

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
------------	----------------	------------------------------------

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central			100%		6
TO1-HIV/AIDS			100%		6
Total			100%		6

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

Vietnam

FY Quarter

2020-Q1

C2. Number of people trained

Task Order	Total
Total	

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country

Zambia



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

▼

FY Quarter

▼

Zambia

▼

2020-Q1

▼

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
TO1-HIV/AIDS	6,574	15.1%
1st line adult ARV	394	3.3%
2nd line adult ARV	372	7.5%
Pediatric ARV	327	14.4%
First RTK	1,652	7.4%
Second RTK	1,643	5.1%
Viral load reagent	17	23.5%
EID reagent	11	0.0%
Male condoms (HIV)	1,410	25.9%
Female condoms (HIV)	748	43.9%
Total	6,574	15.1%

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
TO2-Malaria	11,054	23.0%
AL 6x1	1,606	19.7%
AL 6x2	1,570	26.1%
AL 6x3	1,615	14.4%
AL 6x4	1,593	22.0%
AL inability to treat	1,685	3.5%
mRDT	1,652	10.2%
SP	1,333	75.0%
Total	11,054	23.0%

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
TO3-PRH	8,363	50.7%
Combined oral contraceptive with iron	1,456	55.2%
NET-En Injectable	853	67.8%
DMPA-Intramuscular injectable	1,293	59.6%
1-rod implant	576	58.9%
2-rod implant	1,010	54.4%
Progestin only pills	827	53.1%
Copper-bearing IUD	190	35.8%
Male condoms (FP)	1,410	25.9%
Female condoms (FP)	748	43.9%
Total	8,363	50.7%

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO1-HIV/AIDS	2,209	81%
TO2-Malaria	2,251	84%
TO3-PRH	2,251	84%
TO4-MCH	2,251	84%
Total	8,962	83%

Ref	Analysis
B1	The rates of stockouts among family planning tracer commodities increased substantially in this quarter - from 43 percent in the previous quarter to 50 percent in FY2020 Q1. Conversely, averaged stockout rates for HIV commodities increased only marginally (24% in FY2019 Q4 to 26% in FY2020 Q1) and those for malaria commodities remained static at 15%. Overall, stockouts were largely driven by national logistical and resource challenges in meeting distribution obligations from the central level to the last-mile. Other factors include the continued central stockout of FP products and sulphadoxine-pyrimethamine, due to procurement funding challenges.
B1	TO1: HIV/AIDS tracer commodities continued to average a 15 percent stockout rate. Logistic and resource challenges negatively impacted last-mile delivery and thus availability of the ARVs to some SDPs, especially hard-to-reach areas affected by the rainy season. Eight percent of facilities reported a stockout in one or more ARV tracer commodities. To address this, GHSC-PSM and implementing partners are redistributing commodities during technical support supervision visits. Slow implementation from universal to targeted testing may have contributed to the 7 percent stockout rate, while stockouts for viral load (4 of 17 sites, 24 percent) may be attributed to the quality control recall of the sample preparation reagents from all SDPs with the Cobas TaqMan 4800 platform by Biogroup. Overall, the TOs averaged stockout rate is impacted by high reported stockout rates of male (26 percent) and female (44 percent) condoms.
B1	TO2: Malaria tracer commodities averaged a 26 percent stockout rate, a slight increase from the previous quarter. Specific ACT formulas saw spikes in stockouts (ranging from 14 percent to 26 percent) due to low central stocks, which in turn reflect reductions in the amounts forecasted during the 2019 FASP process. Nonetheless, most patients were able to access treatment and FY 2020 Q1 continued to see a relatively low "inability to treat" rate of 4 percent. Other factors contributing to malaria product stockouts include seasonality, last-mile distribution challenges, and the continued central level stockout of sulfadoxine-pyrimethamine (which is not procured by GHSC-PSM). PMI has since reprogramed funds to procure some quantities of SP, to help alleviate the ongoing central stockout.
B1	TO4: Maternal and child health (MNCH) tracer commodities recorded increased stockouts with the average stockout rate of 51 percent in FY 2020 Q1. Stockouts are largely driven by limited funding by MOH and partners in procuring the MNCH-related commodities. In the case of amoxicillin, the commodity is centrally available but logistic and resource challenges make last-mile distribution challenging. Conversely, stockouts of oxytocin are due to low demand and limited use of the product by facilities without specialized health workers.
B3	The percentage of facilities reporting to the LMIS remained high, with more than 80 percent of facilities reporting in FY 2020 Q1. This quarter, the reporting rate for Task Orders 2, 3 and 4 was 84 percent, and 81 percent for TO1. GHSC-PSM Zambia supports reporting performance via desk reviews and providing remote technical assistance. The USG invests in eLMIS deployment and training in system use.

Warehouse stock status and product losses

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	72	8%	32%	36%	24%
TO1-HIV/AIDS	27		26%	30%	44%
TO2-Malaria	18	11%	33%	56%	
TO3-PRH	27	11%	41%	33%	15%
Total	72	8%	32%	36%	24%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	Across the task orders, 60 percent of stock status observations determined that tracer commodities were stocked according to plan or overstocked centrally. Three observations were conducted in FY2020 Q1, marking a return to normal data sharing after some challenges during a recent transition in warehouse management systems.
B2	TO1: HIV tracer commodities were determined to be overstocked in 44% of observations. This reflects a number of commodity specific dynamics. Overstock of pediatric ARVs reflects last-mile distribution challenges as a result of limited resources within MOH. The second RTK (SD Bioline) were overstocked after a downward adjustment in the forecast as a result of low issues to the facilities. PEPFAR policy to limit the use of determine has also contributed to low issues of Bioline. Simultaneous receipt of UNFPA (29 months) and Global Fund (11 months) shipments has resulted in the overstock of male condoms. Overstock of female condoms, conversely, reflects low demand at the facility-level and reverse logistics instituted by MOH that has retrieved some product pushed to SDPs and districts. Importantly, none of these products are at risk of expiry and no HIV tracer commodities were observed to be stocked out centrally in the quarter.
B2	TO2: Malaria tracer commodities were determined to be stocked according to plan in 56% of observations. A central stockout of Sulphadoxine-pyrimethamine was resolved in the final month of the quarter, after PMI reprogrammed funding to procure 6.7 months of stock of the product. AL 6x1 was centrally understocked in all observations this quarter due to a low forecast at the beginning of the year. Consumption has since proved higher than anticipated and new shipments Global Fund (2.9 months) and MOH (3.9 months) are expected to increase stock availability at the central level.
B2	TO3: Family planning commodities were observed to be of mixed stock statuses centrally. In addition to the overstock dynamics impact male and female condoms described in TO1, oral contraceptives were also frequently overstocked due to last-mile distribution challenges. Levonorgestrel implants were observed to be stocked out in one observation in the period due to funding challenges; however, a UNFPA shipment (6 2 months of product) was received in November 2019 replenishing supplies.
C7	There is no product loss from theft, damage or expiry to report in this period.

Supply plans, innovations, and strategic activities

Country

▼

Zambia

▼

FY Quarter

▼

2020-Q1

▼

Total Innovations implemented this quarter

New technologies1

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
Crosscutting	New technologies	<p>In line with its mandate to provide distribution center services for public health commodities in Zambia, medical stores limited processes orders by facility and hub for last mile delivery, thereby performing a vital function in the national health supply chain. However, this responsibility comes with a heavy workload. On average, MSL processes over 60 percent of shipments as individual boxes destined for specific facilities. As part of this function, strengthening security checks with efficiency is critical to risk management.</p> <p>In the past, MSL used to conduct the final stage of order processing through physical and manual checks, using a printed packing list. This process took between 12 to 24 hours depending on the size of the order being packed and the number of single cartons. Additionally, the manual process was difficult to complete with accuracy and efficiency.</p> <p>In the last two years, MSL has enhanced its utilization of technology to improve operations and meet increasing demand from public health initiatives such as UNAIDS 95-95-95. To this end, the senior management team of MSL, working with key partners in the health sector, is implementing a new warehouse management system (WMS), Warehouse Expert®. Working with MSL, the GHSC-PSM project trained all loading officers and private security officers in the new WMS. These efforts have led to effective use of the new WMS in facilitating faster security checks at the dispatch point through the use of bar code scanners, which link each box to the order and a dedicated loading gate and bay. The scanners use load IDs or carton IDs to ensure accuracy in loading the trucks, while the system updates the order status for each load in real time.</p> <p>This initiative has improved the level of data visibility at the point of loading trucks for both MSL's fleet and GHSC-PSM supported third-party logistics (3PL) trucks. It has been observed that within the last few weeks, the loading time has on average improved from 12 to 24 hours to the range of 3 to 6 hours, denoting an approximately 75 percent reduction in time. In addition, supervisors now have central level visibility per staff member into the final stage of loading each truck, which contributes to improving monitoring of productivity within the warehouse. It is envisioned that with other interventions, such as staging orders for dedicated lanes and loading gate, the loading time will improve even further to meet the industry standard of three hours.</p>

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
ARVs	Yes
Condoms	Yes
FP commodities	Yes
Lab (HIV diagnostics)	Yes
Malaria commodities	Yes
MCH commodities	Yes
RTKs	Yes
TPT	Yes

Analysis

All required quarterly supply plans (ARVs, Lab-HIV diagnostics, RTKs, malaria, FP and MNCH, condoms, and TPT commodities) were developed and submitted to the home office forecasting and supply planning team this quarter

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

▼

FY Quarter

▼

Zambia

▼

2020-Q1

▼

C2. Number of people trained by sex

Sex	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Female	75	7	28	3	113
Male	96	10	34	5	145
Total	171	17	62	8	258

C2. Number of people trained by supply chain level

Supply Chain Level	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Central	106	10	38	5	159
Subnational level 2	14	1	5	1	21
SDP	51	6	19	2	78
Total	171	17	62	8	258

C2. Number of people trained by funding source and type

Type	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Cross-TO	171	17	62	8	258
Total	171	17	62	8	258

C2. Number of people trained by technical area

Supply Chain Function	TO1-HIV/AIDS	TO2-Malaria	TO3-PRH	TO4-MCH	Total
Human Resources Capacity Development	171	17	62	8	258
Total	171	17	62	8	258

Analysis



GHSC-PSM trained 258 persons (145 men and 113 women) on the essential medicines/HIV/ARVs-logistics system in FY 2020 Q1. Participants in training were a mix of pre-service students (159) and MOH staff (99). The objective of the trainings was to equip participants with knowledge, skills, and competencies to manage laboratory, family planning, malaria, ARVs, HIV test kits, and essential medicines commodities.

Molecular Instruments and HIV Tracer Products

Country

Zambia

FY Quarter

2020-Q1

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

95%

Analysis

Ninety-five percent (35/37) of GHSC-PSM-supported molecular instruments were functional throughout the quarter while 5 percent (2/37) were non-functional. Cobas TaqMan 48 from Solwezi General Hospital in North-Western province was nonfunctional for 27 days of the quarter. This was due to the lack of communication between the computer and the machine. Biogroup has been contacted about the malfunction but the problem remains unresolved at time of reporting. In the meantime, the facility is using the GeneXpert and Hologic Panther platforms to test the EID and viral load samples, respectively. In Western Province, Cobas TaqMan 48 at Lewanika General Hospital was nonfunctional for seven days because of a software problem subsequently resolved.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Dolutegravir 300/300/50mg
2nd line adult ARV	Lopinavir 200mgs/Ritonavir 50mgs
Pediatric ARV	Lopinavir 80mgs/Ritonavir 20mgs
First RTK	Determine
Second RTK	Bioline
Tie-breaker RTK	Not reported
Viral load reagent	Cobas TaqMan 48/96: KIT CAP-G /CTM HIV-1 v2.0 Quantitative
Viral load consumable	Not reported
EID reagent	Cobas Taqman 48/96:HIV-1 Qualitative Test v2.0, 48 Tests
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	15.1%	6,574
1st line adult ARV	3.3%	394
2nd line adult ARV	7.5%	372
Pediatric ARV	14.4%	327
First RTK	7.4%	1,652
Second RTK	5.1%	1,643
Viral load reagent	23.5%	17
EID reagent	0.0%	11
Male condoms (HIV)	25.9%	1,410
Female condoms (HIV)	43.9%	748
TO2-Malaria	26.4%	9,369
AL 6x1	19.7%	1,606
AL 6x2	26.1%	1,570
AL 6x3	14.4%	1,615
AL 6x4	22.0%	1,593
mRDT	10.2%	1,652
SP	75.0%	1,333
TO3-PRH	50.7%	8,363
Combined oral contraceptive with iron	55.2%	1,456
NET-En Injectable	67.8%	853
DMPA-Intramuscular injectable	59.6%	1,293
1-rod implant	58.9%	576
2-rod implant	54.4%	1,010
Progestin only pills	53.1%	827
Copper-bearing IUD	35.8%	190
Male condoms (FP)	25.9%	1,410
Female condoms (FP)	43.9%	748
Total	31.7%	22,148

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO2-Malaria		
AL inability to treat	3.5%	1,685
TO3-PRH		
Combined oral methods	55.2%	1,456
Injectable contraceptives	51.9%	1,402
Implantable contraceptives	46.4%	1,142
Progestin-only methods	53.1%	827

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	81%	2,209
TO2-Malaria	84%	2,251
TO3-PRH	84%	2,251
TO4-MCH	84%	2,251

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	36%	24%	32%	8%	66
TO1-HIV/AIDS	30%	44%	26%		27
TO2-Malaria	56%		33%	11%	18
TO3-PRH	33%	15%	41%	11%	27
Total	36%	24%	32%	8%	66

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

▼

FY Quarter

▼

Zambia

▼

2020-Q1

▼

C2. Number of people trained

Task Order	Female	Male	Total
TO1-HIV/AIDS	75	96	171
TO2-Malaria	7	10	17
TO3-PRH	28	34	62
TO4-MCH	3	5	8
Total	113	145	258

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Condoms	1	1
FP commodities	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
MCH commodities	1	1
RTKs	1	1
TPT	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
37	95%

For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.


GLOBAL HEALTH SUPPLY CHAIN PROGRAM


Procurement and Supply Management

FY2020 Quarter 1

October - December 2019

Country M&E Indicator Performance

Country 

Zimbabwe 



Service Delivery Point Stockouts and Reporting Rates

In GHSC-PSM-supported regions

Country

▼

FY Quarter

▼

Zimbabwe

▼

2020-Q1

▼

B1. Stockout rate at service delivery points - HIV/AIDS

Task Order	# SDP stock observations	Stockout rate
TO1-HIV/AIDS	8,319	7.2%
1st line adult ARV	942	1.2%
2nd line adult ARV	923	6.0%
Pediatric ARV	911	3.5%
First RTK	1,087	7.2%
Second RTK	1,087	7.9%
Tie-breaker RTK	1,087	18.7%
Viral load reagent	6	0.0%
EID reagent	3	0.0%
Male condoms (HIV)	1,139	3.9%
Female condoms (HIV)	1,134	7.8%
Total	8,319	7.2%

B1. Stockout rate at service delivery points - Malaria

Task Order	# SDP stock observations	Stockout rate
TO2-Malaria	6,669	14.2%
AL 6x1	1,046	26.7%
AL 6x2	1,046	16.0%
AL 6x3	1,049	20.0%
AL 6x4	1,048	18.6%
AL inability to treat	1,056	3.3%
mRDT	1,043	3.5%
SP	381	6.6%
Total	6,669	14.2%

B1. Stockout rate at service delivery points - Family Planning

Task Order	# SDP stock observations	Stockout rate
Total		

B3. LMIS reporting rate

Task Order	Total # of SDPs required to report	Reporting rate
TO1-HIV/AIDS	1,806	51%
TO2-Malaria	1,705	49%
Total	3,511	50%

Ref	Analysis
B1	<p>The stockout rate for HIV products fell this quarter, from 10 percent to 7 percent overall. Notable improvements among HIV products included the tie-breaker RTK, which fell from 40 percent to 19 percent of sites stocked out. Resupply calculations for tie-breaker RTKs are now more accurate due to improvements in the available consumption data. The project also expects stockout rates for male condoms to continue to improve, following GHSC-PSM and NatPharm efforts to systematize picking and packing for condoms in FY 2019 Q4.</p> <p>The overall malaria stockout rate rose this quarter, increasing from 12 percent to 16 percent. This was driven by increased stockouts of all AL presentations, which also prompted an increase in sites unable to treat with AL (from 1 percent to 3 percent). Stockouts for SP and mRDTs decreased The project plans to continue monitoring NatPharm ordering and delivery schedules as well as participate in discussions of ZAPS operational and data quality issues at regional meetings</p>
B3	<p>For both malaria and HIV programs, roughly half of sites reported within the required timeframe. Reports from an additional 10 percent of sites were received late. The country continues to feel ripple effects from the accelerated push initiative in FY 2019 Q3, with some sites still behind schedule at the end of the year. Additionally, a lack of transportation resources this quarter hindered the ability of some ordering teams to collect reports. The project is working with NatPharm on delivery schedules and with MOHCC to ensure sufficient transportation resources for these activities.</p>

Warehouse stock status and product losses

Country

▼

FY Quarter

▼

Zimbabwe

▼

2020-Q1

▼

B2. Stocked according to plan

Supply Chain Level	Total Observations	Stocked out	Understocked	Stocked according to plan	Overstocked
Central	16	0%	50%	6%	44%
TO1-HIV/AIDS	10	0%	50%	10%	40%
TO2-Malaria	6	0%	50%	0%	50%
Total	16	0%	50%	6%	44%

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

TO	Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
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Ref	Analysis
B2	<p>The data shown here represent stock balances as of November 30, 2019. Closing balances from December were not available at the time of reporting due to NatPharm's annual stock take. For HIV products, stocked according to plan rates fell from 20 percent to 10 percent, with an increase in understocking. Understocked products included tie-breaker RKTs and EID and viral load reagents. An extra allocation of RTKs received approval and is scheduled to arrive in January. The reagent items are deliberately understocked because new incoming machines will require different reagents. Incoming shipments for both viral load and EID reagents will correct the stock status for these items for the current machines. Finally, adult first line ARVs are currently slightly understocked while TLE400 and TLD are in a transition stage. The stock levels are expected to stabilize if upstream supply remains normal.</p> <p>Understocking has also increased for malaria products, with three presentations of AL falling just below the minimum levels. In the previous quarter, these items were overstocked. With the malaria peak season beginning in December, these products were pushed out as consumption is expected to increase in the next quarter. The project is continuing to monitor anti-malarial medicines for the expected surge in consumption.</p>
C7	There were no product losses in GHSC-PSM custody to report this quarter.

Supply plans, innovations, and strategic activities

Total Innovations
implemented
this quarter

0

C1. Innovations implemented this quarter

Task Order	Type of innovation	Description
GHSC-PSM Zimbabwe does not have any innovations to report this quarter.		

Country

▼

Zimbabwe

▼

FY Quarter

▼

2020-Q1

▼

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	Supply Plan Submission Status
ARVs	Yes
Condoms	Yes
FP commodities	Yes
Lab (HIV diagnostics)	Yes
Malaria commodities	Yes
RTKs	Yes
TPT	Yes
VMMC	Yes

Analysis

Zimbabwe submitted all seven required supply plans this quarter, including a new required supply plan for tuberculosis preventive treatment (TPT).

C11. Supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance

Description
There are no new supply chain policies, regulations, strategies or SOPs developed or updated with GHSC-PSM assistance to report for this period.

Training for supply chain partners

Country

Zimbabwe

FY Quarter

2020-Q1

C2. Number of people trained by sex

Sex	TO1-HIV/AIDS	TO2-Malaria	Total
Female	3	255	258
Male	22	307	329
Total	25	562	587

C2. Number of people trained by supply chain level

Supply Chain Level	TO1-HIV/AIDS	TO2-Malaria	Total
Central	25	7	32
Subnational level 2		14	14
SDP		541	541
Total	25	562	587

C2. Number of people trained by funding source and type

Type	TO1-HIV/AIDS	TO2-Malaria	Total
Cross-TO	25	7	32
TO-specific		555	555
Total	25	562	587

C2. Number of people trained by technical area

Supply Chain Function	TO1-HIV/AIDS	TO2-Malaria	Total
Transportation and Distribution	25	562	587
Total	25	562	587

Analysis

▲ Zimbabwe has a village health worker (VHW) program that seeks to cover medicines availability gap between hard-to-reach communities and health facilities. Community-based health workers replenish their stocks of malaria medicines at the closes health facility to serve their local areas. The LMIS forms for this program were recently redesigned to improve VHW inventory visibility and accountability. GHSC-PSM trained a total of 500 village health workers and 55 nurses on the new system.

The project trained an additional 32 staff from the Ministry of Health and Child Care on the use of the TransIt software, a cloud-based transportation management system for improved distribution visibility.

Molecular Instruments and HIV Tracer Products

Country

▼

FY Quarter

▼

Zimbabwe

▼

2020-Q1

▼

C10. Percentage of GHSC-PSM managed molecular instruments that remained fucntional for the entire reporting period

Analysis

GHSC-PSM does not manage or support maintenance for any molecular instruments in Zimbabwe.

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Efavirenz 300/300/400 mg
2nd line adult ARV	Atazanavir/Ritonavir 300/100 mg
Pediatric ARV	Abacavir/Lamivudine 120/60 mg
First RTK	Determine
Second RTK	Chembio
Tie-breaker RTK	INSTI
Viral load reagent	Roche Ampliprep Automated kits VL
Viral load consumable	Not reported
EID reagent	Roche Ampliprep Automated kits EID
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Complete Results and Denominators

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Task Order	Stockout rate	# SDP stock observations
TO1-HIV/AIDS	7.2%	8,319
1st line adult ARV	1.2%	942
2nd line adult ARV	6.0%	923
Pediatric ARV	3.5%	911
First RTK	7.2%	1,087
Second RTK	7.9%	1,087
Tie-breaker RTK	18.7%	1,087
Viral load reagent	0.0%	6
EID reagent	0.0%	3
Male condoms (HIV)	3.9%	1,139
Female condoms (HIV)	7.8%	1,134
TO2-Malaria	16.2%	5,613
AL 6x1	26.7%	1,046
AL 6x2	16.0%	1,046
AL 6x3	20.0%	1,049
AL 6x4	18.6%	1,048
mRDT	3.5%	1,043
SP	6.6%	381
Total	10.8%	13,932

B1. Composite stockout rates

Task Order	Stockout rate	# of SDPs that reported
TO2-Malaria		
AL inability to treat	3.3%	1,056

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Task Order	Reporting rate	Total # of SDPs required to report
TO1-HIV/AIDS	51%	1,806
TO2-Malaria	49%	1,705

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	6%	44%	50%	0%	16
TO1-HIV/AIDS	10%	40%	50%	0%	10
TO2-Malaria	0%	50%	50%	0%	6
Total	6%	44%	50%	0%	16

B1 and B2 denominator note: For countries that report male and female condoms under both B1 and B2, total stock observations will be equal to the sum of all observations (i.e. SDPs that reported) for all tracer products, minus one set of observations for condoms.

Country

Zimbabwe

FY Quarter

2020-Q1

C2. Number of people trained

Task Order	Female	Male	Total
TO1-HIV/AIDS	3	22	25
TO2-Malaria	255	307	562
Total	258	329	587

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Condoms	1	1
FP commodities	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
RTKs	1	1
TPT	1	1
VMMC	1	1

C10. HIV molecular instrument functionality

# GHSC-PSM-supported instruments	% of instruments that functional for the entire period
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For complete results on innovations (C1), strategy, policy, and regulation activities (C11), and product losses (C7a and C7b), please see the specific pages for those indicators.

Indicator Details

Check out the [GHSC-PSM IDIQ M&E Plan](#) for complete details on all our indicators.

Indicator Code	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
B01	Stockout rate at SDPs	Number of SDPs that were stocked out of a specific tracer product according to the ending balance of the most recent logistics report (or on the day of site visit)	Total number of SDPs that reported/were visited in GHSC-PSM-supported countries that offer the tracer product	LMIS reports, End User Verification surveys, other country-specific stock data sources	Quarterly	Stockout rates are provide for all tracer products for which data is available, regardless of whether GHSC-PSM procures or delivers the product. Data is provided for the ending balance of the middle month of each quarter for most countries. "Composite stockouts" are presented for select malaria and family planning commodities, indicating where SDPs are stocked out of all products they offer within the same product type or contraceptive method. At the task order level, aggregated stockout rates are calculated based on all SDP stock observations summed across all tracer products for that TO. TO-level denominators will therefore be greater than the number of SDPs that reported in that health area.
B02	Percentage of stock status observations in storage sites, where commodities are stocked according to plan, by level in supply system	Number of stock status observations for a tracer product that are within the designated minimum and maximum quantities at storage sites	Total number of stock status observations for a tracer product at storage sites	Warehouse management information systems, partner stock reports	Quarterly	Stocked according to plan rates are provided for all tracer products for which data is available, regardless of whether GHSC-PSM procures, delivers, or manages inventory for the product. Stock "observations" are typically based on inventory reports and will include as many observations (monthly, quarterly) from as many storage locations as are available at the time of reporting.
B03	SDP reporting rate to the LMIS	Number of SDPs whose LMIS report(s) or order form(s) were received at the central level within 30 days of the specified in-country deadline	The total number of SDPs in country that are required to report	LMIS reports, other country-specific stock data sources	Quarterly	All sites that have submitted reports within 30 days of the country-specified deadline are considered "reporting" for this indicator. Some countries have limited access to SDP-level data and are reporting rates from a small number of sites. Number of sites reporting for each country is listed on the "Complete Results" page for each country.
B06	Percentage of required supply plans submitted to GHSC-PSM during the quarter	Number of required supply plans that were submitted to GHSC-PSM in the quarter	Total number of required supply plans	Country supply plans, FASP tracker	Quarterly	Supply plan submission expectations are determined in consultation with USAID, headquarters FASP team, and field office technical leads. Submission rates are only calculated for prioritized submissions. Additional supply plans beyond the requirements are often submitted to GHSC-PSM headquarters.

Indicator Details

Check out the [GHSC-PSM IDIQ M&E Plan](#) for complete details on all our indicators.

Indicator Code ▲	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
C01	Number of innovations (including operations research studies) that were developed, implemented, or introduced and are related to the health commodity market or supply chain best practices	Number of innovations (including operations research studies) that were developed, implemented, or introduced and are related to the health commodity market or supply chain best practices	NA	Field office reports, work plans	Quarterly	Innovations are reported in the quarter in which they are launched. Activities are considered innovations if they represent a significant advancement for the country. Similar activities may be reported from multiple countries.
C02	Number of people trained	Number of people trained. "People trained" refers to any type of participant, student, or learner in a training event, regardless of its duration	NA	Registration forms, attendance sheets	Quarterly	Training of USAID and GHSC-PSM personnel is excluded from this indicator. Participants may be counted more than once if they attend multiple discrete training activities.
C07a	Percentage of product lost due to expiry while under GHSC-PSM control (product loss percentage)	Total value of product lost due to expiry during the quarter	Average inventory balance (in USD) during the quarter	Inventory reports	Quarterly	Expiries from the Regional Distribution Centers (RDCS) are presented in the GSC section of this report. Expiries that occur in warehouses that GHSC-PSM manages in countries are reported in the country-specific sections of this report.
C07b	Percentage of product lost due to theft, damage, or other causes, while under GHSC-PSM control (product loss percentage)	Total value of product lost due to theft, damage, or other causes during the quarter	For losses in transit: Total value (in USD) of product delivered during the quarter For losses in storage: Average inventory balance (in USD) during the quarter	GHSC-PSM Continual Improvement system reports	Quarterly	Product losses due to incidents are reported only after the actual value of the loss has been determined, which may be later than the quarter in which the incident took place or was first reported to GHSC-PSM Continual Improvement.
C10	Percentage of GHSC-PSM-procured or supported molecular instruments that remained functional during the reporting period	Total number of GHSC-PSM-procured or supported molecular instruments that remained functional for the entire reporting period	Total number of molecular instruments in the country that were procured or are supported by GHSC-PSM	Lab instrument outage reports	Quarterly	
C11	Supply chain policies, regulations, strategies, or SOPs developed or updated with GHSC-PSM assistance	Description of major GHSC-PSM efforts around developing or updating supply chain policies, regulations, strategies, or SOPs	NA	Field office reports, work plans	Quarterly	