**Improving Family Planning Stockout Data Quality and Reporting**

**Part 2: Understanding How to Apply the Active Site Rule**

English Script for the PowerPoint Slides

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| **Slide 1:** | *(Slide text only):*  Improving Family Planning Stockout Data Quality and Reporting  Part 2: Understanding How to Apply the Active Site Rule |
| **Slide 2:** | Welcome to Part 2 of our Active Site Rule training series. In video 1, we defined the rule and explored the benefits of removing inactive sites from stockout rate calculations. In this presentation, we will dive deeper into the elements to consider as you apply the rule. These elements are broken into the sections listed on this slide.  You can navigate between sections by using the links below:  Section 1: Family planning methods with one versus multiple products  Section 2: Annual and quarterly stockout rates  Section 3: Missing data points  Annex: Limitations and special situations  Advance to the next slide to begin the first section, “Family planning methods with one versus multiple products” |
| **Section 1**  **Slide 3:** | *(Slide text only):*  Section 1: Family planning methods with one versus multiple products  This segment will first discuss differences in annual and quarterly reporting for family planning methods and then demonstrate how these are affected by the Active Site Rule. |
| **Slide 4:** | *(Slide text only):*  Some family planning methods are available in different product types and formulations, which may vary by country. For a product like **male condoms, the stockout rate calculation considers this a single-product method.**  But for other methods, such as injectables, countries may offer one or multiple product types. The Active Site Rule must consider whether there are one or multiple product types for the method. |
| **Slide 5:** | *(Slide text only):*  This table demonstrates the family planning methods required to be reported for the average (annual) stockout rate and the Global Health Supply Chain (GHSC) quarterly stockout rate. |
| **Slide 6:** | *(Slide text only):*  There are several *tracer* family planning methods which may have two or three products offered by a country. These include:   * Injectable Contraceptives * Implantable Contraceptives * Combined Oral Contraceptives/Oral Hormonal Contraceptives * Emergency Oral Contraceptives (quarterly stockout rate only)   Note that slight differences apply in how products and methods are categorized and reported for the average (annual) stockout rate and the Global Health Supply Chain (or GHSC) quarterly stockout rate. |
| **Slide 7:** | *(Slide text only):*  Additionally, annual reporting is at the method level only, while quarterly reporting is both at the method and product level for applicable methods. |
| **Slide 8:** | *(Slide text only):*  Using the Active Site Rule to calculate the stockout rate for methods with multiple products  When there are multiple products offered for a method, the Active Site Rule for a health facility must first be assessed for each of the products separately before determining whether the health facility is inactive for the family planning method.  If no products within a method are active (offered), the health facility is inactive for that method. That method is not “offered” at the facility.  For example, if a health facility actively offers the injectable Norethisterone enanthate, it is considered an active site for offering injectables. |
| **Slide 9:** | *(Slide text only):*  Let’s take implantable contraceptives as an example. When applying the Active Site Rule and determining which facilities are active and inactive, there are several scenarios to consider for a given health facility. Recall that sites are determined to be ‘inactive’ for a product if the product has not been in stock or issued to clients for the previous consecutive 12 months. |
| **Slide 10:** | In the example of implantable contraceptives, these are the scenarios to consider for a health facility:   * **Scenario 1.** Both 1-rod and 2-rod implants are ‘active’ for the site. The site is ‘active’ for implantable contraceptives. * **Scenario 2.** 1-rod implants are ‘active’ for the site, but 2-rod implants are inactive. The site is still ‘active’ for implantable contraceptives. * **Scenario 3.** 1-rod implants are ‘inactive’ for the site, but 2-rod implants are ‘active’. The site is ‘active’ for implantable contraceptives. * **Scenario 4.** Both 1-rod implants and 2-rod implants are ‘inactive’ for the site. The site is therefore ‘inactive’ for implantable contraceptives and must be removed from the numerator and denominator of the stockout rate calculation for implantable contraceptives.   For methods that only have a single product reported, if that product is inactive, the site is inactive for that method. |
| **Slide 11:** | *(Slide text only):*  Note that for methods that may have three products offered in the country, such as injectable contraceptives or oral hormonal contraceptives, there are more combinations, but the same principle holds: as long as at least one product is active at a site, the site is active for the family planning method and does not get removed from the numerator or denominator when calculating that method. |
| **Slide 12:** | Once you have eliminated any inactive sites for each family planning method, the next step is to calculate the stockout rate. Once again, a similar set of scenarios can play out when calculating the stockout rate itself for methods with multiple products. Here are the scenarios that must be taken into account, using implantable contraceptives again as an example, and looking at the stock situation for one point in time:  *(Only the first two scenarios are read aloud):*  For example:   * Facility A offers both 1-rod and 2-rod implants. The facility reports on both products, and both are in stock (10 units of one and 20 of the other). This facility is not stocked out of implantable contraceptives. * Facility B offers both 1-rod and 2-rod implants. The facility did not report on 1-rod implants this month and was stocked out of 2-rod implants (0 units in stock). This facility is stocked out of implantable contraceptives. |
| **Slide 13:** | *(Slide text only):*  In the previous example of implantable contraceptives, the formula for arriving at the stockout rate would be the following:  Facility B + Facility C + Facility E + Facility H **divided** by  Facility A + B + C + D + E + F + G + H  **Equals** a 50% stockout rate for implantable contraceptives in month X |
| **Section 2**  **Slide 14:** | *(Slide text only):*  Now that we have reviewed steps to apply the Active Site Rule and calculate the stockout rate for a single point in time for methods with one or multiple products offered, let’s look at how application of the rule changes for one quarter versus the average (annual) stockout rate. |
| **Slide 15:** | *(Slide text only):*  As we calculate, method-by-method, both the quarterly and annual stockout indicators, we must exclude any sites that were deemed inactive because they did not have any units in stock, issued, or ordered at any point *in the past 12 months*. |
| **Slide 16:** | For GHSC quarterly reporting, we start by applying the Active Site Rule to eliminate any inactive sites from the previous twelve months. In this example, we’ll use Fiscal Year Quarter 3, covering April, May, and June. The 12-month period for applying the Active Site Rule would be June through May of the following year. |
| **Slide 17:** | In this example, any facilities that did not report on the FP method in May (the middle month of the quarter) are also eliminated from the numerator and denominator, even if they were active in previous months. This is because the standard quarterly stockout rate definition is based on a point in time, not an average. That point in time is normally the ending balance of the middle month of the quarter. |
| **Slide 18:** | The USAID average annual stockout rate indicator is reported for the fiscal year, covering the months of October through September. Use this 12-month period when removing inactive sites prior to calculating the stockout rate. This time, since we are averaging ending stock balances from the entire 12-month period instead of just for one month, it is okay if a facility did not report in the most recent month or in a particular month. As long as the facility reported at some point during the 12-month period, it is considered “active” and can be included. However, the next section will demonstrate how the calculation changes if data is missing. |
| **Slide 19:** | Once facilities that were inactive in October through September are removed, the following formula is used to calculate the average annual stockout rate. |
| **Section 3**  **Slide 20:** | The Active Site Rule is best calculated using routine stock data from an LMIS. However, these data may not be complete. This section explores two ways in which data may be incomplete: non-reporting facilities and incomplete stock reports, and how to address these obstacles. |
| **Slide 21:** | Regardless of the frequency of stock reporting in a country, there is always the potential that in some periods, not all facilities report. As discussed on slide 18, non-reporting facilities do not prevent application of the Active Site Rule for the annual stockout rate calculation because the indicator is an average of all available data points. In the instances where a facility reported in some of the 12 months, use those available data points to assess whether it is active.  For quarterly stockout rates, the active site rule can also be assessed using data points from the months in which a facility did report. However, as discussed on slide 17, non-reporting facilities do affect the quarterly stockout rate calculation when they do not report in the reporting month. These facilities are dropped from the calculation. |
| **Slide 22:** | Even when a stock report is submitted for a facility, it may have missing data points. Let us consider how to apply the active site rule when a facility report is missing one or more of the following key data elements for method x. |
| **Slide 23:** | *(Slide text only):*  For the quarterly stockout rate, there are two main considerations when stock reports are incomplete due to missing data points.   1. If the stock on hand/ending balance is missing for the reporting month, this facility cannot be included in the stockout rate calculation. 2. When applying the active site rule for quarterly reporting, if there are missing data elements across the 12-month period, any of the data elements listed on slide 22 can be used to determine if the facility is active.   For example, if the stock on hand/ending balance is missing in one or more months, a non-zero amount of stock issued or stock ordered, or a non-zero average monthly consumption rate in any of the months is enough to determine that the facility is active.  Also note that while some other data elements may be missing for the reporting month or other months, stock on hand/ending balance is all that is needed to calculate the stockout rate. |
| **Slide 24:** | When applying the active site rule to the average annual stockout rate, if a facility is missing a particular data element for method x in one or more months, we can still assess whether that facility was active for method x using the remaining months and data points available. |
| **Slide 25:** | In countries where data is reported into the LMIS quarterly, rather than monthly or bi-monthly, availability of each data point becomes more important. In this case, the amount of data that is sufficient for determining whether a site is “active” or “inactive” may be determined on a case-by-case basis. However, the following rule is recommended to ensure a minimum level of data is available to assess a site’s activity over the 12-month period. |
| **Slide 26:** | For the average annual stockout rate in countries with quarterly LMIS reporting, it is recommended that the Active Site Rule be determined on the basis of at least three quarters of data for a given facility and FP method. Please refer to slide 22 for guidance on which data elements are required.  This should include stock reporting for Quarter 1 and for at least two other quarters, to ensure that the data includes the beginning of the 12-month period and enough of the period to make a clear determination of whether the facility was active. |
| **Slide 27:** | In this case, for the quarterly stockout rate, it is also recommended that the Active Site Rule be assessed based on data for Quarter 1 and at least two other quarters. However, the rules diverge in that one of these three quarters in which the data is available *must* be the reporting quarter. |
| **Annex**  **Slide 28:** | *(Slide text only):*  Although the Active Site Rule provides a consistent approach that uses available data to determine which sites are currently offering a family planning method, there are some situations that it may not capture and other limitations to keep in mind. |
| **Slide 29:** | *(Slide text only):*  Health facilities that maintain a small quantity of a product in stock for 12 months or more but do not dispense it, often due to low demand and/or lack of trained providers, would still be considered active according to the Active Site Rule. |
| **Slide 30:** | *(Slide text only):*  Poor data quality coming from an LMIS or HMIS, particularly missing data, could distort stockout rates, most likely showing artificially reduced stockout rates if distortion occurs. |
| **Slide 31:** | *(Slide text only):*  In the absence of additional country information on a site's status, a site that becomes inactive takes 12 months to be classified as such under the Active Site Rule. |
| **Slide 32:** | *(Slide text only):*  Health program goals may differ from supply chain goals. For those who are more focused on access to family planning methods for clients in the country, or on which sites *should* be offering a method, this rule that narrows the focus on currently active sites might not be as useful. |
| **Slide 33:** | *(Slide text only):*  The Active Site Rule is one way to make use of available data to better understand the stock situation of family planning methods in a country, and a consistent approach to USAID reporting. It is not the only way to measure or understand stockouts and is not a replacement for site visits or supervision, or a one-size-fits-all approach to stock management analysis. |
| **Slide 34:** | *(Slide text only):*  Thank you for watching this presentation on applying the Active Site Rule. |