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# Supervision and On-the-Job Training for Supply Chain Management at the Health Facility

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# Supervision and On-the-Job Training for Supply Chain Management at the Health Facility

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**Abstract**
Supervision guidelines serve as a resource for both supervisors and supervisees in how to prepare for a supervision visit, what to expect during a visit, and what follow-up actions should be taken post-visit. A sample supervision checklist complete with job aids provides county programs with ready-to-use guidelines that can easily be adapted and customized according to country-specific contexts.

Cover photo: Supportive supervision visit in Durun health facility (Bauchi State, Nigeria)

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# Acronyms

| | |
|---|---|
| AMC | average monthly consumption |
| FEFO | first-to-expire, first-out |
| LMIS | logistics management information system |
| MOS | months of stock |
| OJT | on-the-job training |
| SOH | stock on hand |
| SOP | standard operating procedure |

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# Introduction

Supervision is an important element of quality assurance for the performance of any health system. Supervision at the health facility level (and in fact at any level of the system) can alert program managers of potential problems within the logistics system (the system used for commodity management), which, once addressed, help strengthen the system and better ensure commodity availability. Supervision provides a unique opportunity for the supervisors to learn how health facility staff are performing routine commodity management functions, including commodity storage and inventory management, and how well logistics forms and reports are being completed (Supply Chain Management System 2008). During a supervision visit, the supervisor can also provide on-the-job training to facility personnel to help them improve their commodity management skills, with the goal of improving commodity management and commodity availability.

This document provides basic guidance and tools for supervision of health facility staff and on-the-job training for commodity management/logistics activities at the health facility level. The tools can be customized and tailored to specific program and country needs. Use of the tools will help the supervisor and facility staff to identify and address areas that need attention and subsequently improve staff and logistics system performance. These guidelines should be used along with any standard operating procedures (SOPs) that are already used at the country level. Finally, these guidelines are specific to commodity management and logistics; they can be combined with other available tools or resources that focus on other areas of health facility operations, such as client service, service provision, or management and administration.

This guide is divided into three main sections:

1. "Supportive Supervision and On-the-Job Training" (OJT) defines and provides general information about supportive supervision and OJT.
2. "On-the-Job Training for Supply Chain Management" provides general information on supply chain management and conducting OJT on supply chain management functions. This information can be implemented during a supportive supervision visit.
3. Appendices A-M include resources, guidelines, and job aids that the supervisor can use to provide OJT in areas of supply chain management when conducting a supportive supervision visit.

# Supportive Supervision and On-the-Job Training

Supervision is a key component of effective management and should be implemented to enhance all aspects of health systems operations, including logistics management. When combined with OJT, supervision can help to improve individual and system performance and can be a conduit for continuous improvement.

## What is Supportive Supervision?

Programs frequently conduct external supervision in which a supervisor visits a health facility. As the supervisors are usually pressed for time and have multiple priorities, most of the visit is spent reviewing service statistics and some operational components at the health facility, leaving little time for interacting with supervisees to develop a collaborative approach for addressing issues and encouraging two-way communication (USAID | DELIVER PROJECT 2007).

**Key Characteristics of Supportive Supervision**

- Establishes performance objectives
- Focuses on problem solving and monitoring performance objectives
- Empowers supervisees to improve their own performance
- Emphasizes teamwork
- Provides feedback and recommendations
- Motivates and empowers staff
- Encourages participatory decisionmaking

While traditional supervision is conducted by the supervisor-in-charge, and generally focuses on job performance evaluation alone, supportive supervision is more of a facilitative process, with two-way communication between the supervisor and the supervisee; it motivates and empowers facility health workers to improve their own performance. It emphasizes continuous improvement and promotes quality standards. As a result, supportive supervision is more likely to have a positive impact on the overall performance of the health facility personnel (USAID | DELIVER PROJECT 2007).

During a supportive supervision visit, the supervisor, together with his/her supervisees, establishes clear program goals and objectives, jointly develops performance standards to monitor supervisees' performance against established expectations, and addresses any issues or concerns, as well as future plans of action. Supportive supervision acknowledges the need in providing clear expectations, feedback, resources, and recognition to the staff so they can excel at their jobs. Literature review on supervision shows that effective supervisors are those who can be "empathetic, offer support, flexible, knowledgeable, are interested in supervision, respectful, focused and practical (Kilminster and Jolly 2000)." Studies have also shown that incorporating OJT, ongoing quality improvement, and problem solving can lead to better outcomes in health workers' performance (MAQ Initiative 2002).

## What is On-the-Job Training?

OJT is an alternative to classroom training, which often requires bringing staff to a formal training workshop, involving great cost and forcing the worker to be absent from the work site. OJT, on the other hand, occurs at the supervisee's place of work—the supervisee learns on the job, while doing the job. OJT also allows for much more interaction and real work together as well as a less formal atmosphere. However, it also requires the supervisor who is acting in the capacity of a trainer to be prepared and ready to manage the more direct interaction (Supply Chain Management System 2009).

OJT can be used to transfer knowledge and skills to newly hired staff; to refresh previously trained staff on basic principles of the system; or as a supportive supervision tool/activity. It can assist health facility staff improve their performance by demonstrating the correct way to do a task. OJT should be an integral part of supportive supervision to ensure that supervisees are well trained and knowledgeable.

**When Conducting OJT**

- Listen and be receptive to questions
- Be patient and allow for mistakes
- Provide positive feedback
- Engage the learner
- Build on what the learner already knows
- Ask questions: ask the learner to teach you
- Discuss with the learner what they have learned

Effective OJT should take place as soon as a performance need is identified. A performance need can be the result of many things, but OJT addresses performance needs that are the result of the following:

- The lack of knowledge or skills
- Knowledge or skills that need to be refreshed or reinforced.

Supervisors can take advantage of various opportunities to conduct OJT, whether during regularly scheduled meetings, during routine supervision visits, or on an as-requested or as-needed basis (Supply Chain Management System 2009).

## How to Support Staff When the Supervisor is Not Present

As mentioned previously, traditional supervision assumes that supervision can only occur at the supervisee's place of work. Site visits are time-consuming and expensive, and prevent supervisors from visiting health facilities on a routine basis. Other competing priorities might keep supervisors from visiting health facilities as often as they should. Due to such limitations, supervision visits are sometimes rushed, and supervisors do not get to spend the time needed to conduct a comprehensive supervision visit. Supervisees might feel neglected or afraid to share all of their concerns with the supervisor within a limited time frame. There may also be critical performance issues that need to be addressed, or an immediate need for OJT that can get overlooked when supervision visits are cut short (USAID | DELIVER PROJECT 2007).

It is therefore important to consider other ways of providing supportive supervision. As stated previously, supportive supervision is not limited to site visits. Instead, it allows supervisors to maintain effective communication with their staff through other means.

*Meetings:* A lot can be accomplished during regular staff meetings or any kind of meeting as long as the meeting has established objectives that need to be accomplished. A meeting needs to have a purpose and an agenda that addresses the objectives of the meeting. During such meetings, key

issues related to supervision can be addressed. For example, staff could be asked to bring stock information and copies of their reports and requisition forms; they could be asked to raise any concerns that require the supervisor's attention. If further remedial action is needed, OJT can be scheduled with the supervisee at a later date, or during the meeting itself, if appropriate. The resources in Appendix M can be used to guide the discussion (USAID | DELIVER PROJECT 2007).

*Regular monitoring calls:* Two-way communication does not have to be in person. In fact, supervision can be even more effective when it is combined with routine monitoring phone calls. The majority of people own cell phones, which has tremendously helped improve communication channels between staff at all levels. Supervisors can take advantage of mobile technology to remotely monitor and supervise health facility staff. Cell phones can be used for texting reminders for submitting reports and requisitions, confirming receipt of reports, or sending any relevant news to health facility staff. Supervisors can set routine phone calls with their supervisees to discuss topics that they would normally discuss during a face-to-face meeting. Supervisors should use the supervision checklist as a guide even during routine monitoring calls.

*When collecting supplies:* If facility staff travel to a higher-level facility to collect supplies, an additional opportunity is provided for supervisors and supervisees to interact and discuss commodity management. Facility staff can be required to bring logistics management information system (LMIS) forms with them for review and submission, and supervisors can take the opportunity to answer any questions on commodity management or to correct any errors on the forms.

# On-the-Job Training for Supply Chain Management

In addition to other areas that may receive emphasis during a supervisory visit to the health facility, such as quality of care, customer service, accounting, and general management, part of the visit should focus on supply chain management: the functions that are required in order to assure the availability of the health products that are needed to provide service to clients. While time constraints may prohibit the supervisor from dealing with every element of commodity management, one or more key areas can be observed during each supportive supervision visit, and OJT related to those areas can be provided.

**Key Components of Supervision/OJT in Logistics Management**

- Assess storage conditions
- Conduct physical inventory
- Review of logistics records (stock cards, LMIS)
- Assess stock status

Key areas for commodity management can include the following:

- **Health commodity storage,** which ensures that products are stored correctly.

  Proper storage of health commodities will help to maintain product quality and decrease the likelihood that products will be damaged or that they will expire before they can be used. By following a few simple guidelines, product quality can be maintained and losses can be minimized.

  During supportive supervision, visit the storage area with the person who manages health commodities. Verify that storage guidelines are being followed. If the guidelines are not being followed, discuss what action needs to be taken or what improvements can be made with the storeroom manager. Often, improvements can be made at little or no cost.

  Related to storage, a visual inspection of several products can also be completed. For instance, several products in bulk form (bottles of 500 or 1,000 tablets or capsules), several products in individually packed form (blister packs), and several products in liquid form may be chosen. Visual inspection will help to ensure not only that storage conditions are being met, but also that product quality is maintained for individual products.

  Refer to the job aids for reviewing storage conditions and performing visual inspection in Appendices C and D.

- **Quality of recordkeeping and reporting,** which ensures that health commodities are correctly accounted for and that accurate data is available for decisionmaking.

  To help with commodity management and decisionmaking, basic LMIS forms should be used at the facility. Forms include records, on which data is recorded, that are kept and used at the health facility, and reports, which are used to move data and information from the health facility to the higher levels of the system.

During your visit, review logistics forms with the person who maintains them. Ensure that forms are used correctly and that they are completed correctly and on time. Verify that the information from the facility records is correctly transferred to facility reports and that any calculations are correct. This will help to ensure that health commodities are correctly accounted for and that the data included in reports and used for decisionmaking is accurate.

Refer to the job aid for reviewing LMIS forms in Appendix E.

- **Stock status and commodity availability**, which ensures that inventory control procedures are being followed so that health products are available in quantities that will correctly meet customer needs while avoiding overstocks.

  The main purpose of commodity management is to ensure that there is always enough product on hand to meet the needs of clients. First and foremost, this means that commodities are always in stock and that there are no commodity stockouts. Commodity management also means that the commodity manager knows when to take action in order to ensure that adequate quantities are available and when to take action to avoid a stockout. A commodity manager should never wait for a stockout before taking action for re-supply! Good commodity management will also ensure that there is not too much stock at the facility. Having too much stock can lead to expiries and therefore wasted resources.

  During the supportive supervision visit, stock levels should be reviewed and action taken as needed. Reviewing stock status will involve conducting physical inventory, determining months of stock (MOS) available, and comparing available stock to the maximum and minimum stock levels to ensure that stock is roughly between the maximum and the minimum. If a maximum/minimum system is not used, then MOS should be enough to get through to the next regularly scheduled re-supply.

  Refer to the job aids for monitoring stock status in Appendix J.

For topics not specifically covered in the job aids/appendices noted previously, use the job aid "Planning an On-the-Job Training Session" in Appendix M. This job aid will help you to define the objectives for the OJT session and then identify how the learning will take place and be verified after the OJT session.

## How to Conduct On-the-Job Training

The following tips will help the supervisor provide OJT (Supply Chain Management System 2009).

**1. Be prepared.** The supervisor should be well prepared and know exactly what s/he wants to accomplish and how. An OJT curriculum should be developed (or may already exist) based on the country-specific SOPs. The supervisee(s) should expect the best possible learning experience, as well as answers to their questions. Therefore, good preparation is essential.

**2. Pick the best time for OJT.** Supervisors should actively look for opportunities where they can incorporate OJT in the supervisee's day-to-day activities. However, it should not take place when there is a need for the supervisee to be attending to patients. S/he needs to be fully engaged and ready; therefore, it is essential to pick a time that is conducive to learning.

**3. Set the climate for learning.** Before engaging the supervisee in a discussion, exercise, or some other kind of learning activity, be sure to explain the usefulness of learning the subject at hand. If

s/he does not understand the purpose of the training, s/he may not make a genuine effort to learn. Emphasize the practical advantages of the training.

**4. Start with what the supervisee already knows.** An important principle of helping adults learn is understanding that they have a lot of life experiences; therefore, adults should not be taught with the same approaches as those used with children. Their experiences need to be recognized and acknowledged. It is always best to assess how much the supervisee already knows about the subject at hand. Questions such as, "Have you had any experience or training in this subject area?" and "If so, what did you learn?" can be invaluable to the supervisor conducting OJT. Not only is it important to acknowledge what the supervisee already knows, but it can save a lot of time if the supervisee already has a solid foundation on which the supervisor can further build.

**5. Give the supervisee an opportunity to learn in the best way.** Each supervisee has different abilities and talents. Each will learn things in different ways at different speeds. For example, a skill that one supervisee learns easily may be difficult for another. Likewise, some supervisees will learn better through self-study, while others will need direct assistance from you. It is important to keep this in mind and to tailor learning based on the learning style and abilities of each supervisee.

**6. Assess learning regularly to ensure competence.** A very important part of your role as a mentoring trainer is to make sure that supervisees are acquiring the competencies to carry out their job responsibilities. For example, supervisees who are responsible for managing commodities should learn how to manage inventory, balance stock cards, maintain the storeroom in accordance with the storage guidelines, etc. Then, they should be assessed regularly to ensure that the information has been learned, retained, and applied.

It cannot be overemphasized that preparation is the key to successful OJT. In fact, the more prepared the supervisor is, the more success s/he is likely to enjoy. The following are some additional things to keep in mind when mentoring supervisees. The supervisor should consciously review the following checklist of 10 important considerations and mark a tick (✓) each time s/he prepares to conduct an OJT session (Supply Chain Management System 2009).

**Guidelines for Giving Feedback**

- Plan how you will give feedback.
- Feedback must be expressed in a supportive and respectful way.
- Feedback must be about both the strengths and weaknesses of the supervisee.
- Each weakness must be accompanied by concrete recommendations for improvement as well as strengths.
- Make specific statements; support general statements with specific examples. Use descriptive rather than judgmental language.
- Be direct, clear, and to the point.
- Focus on behavior that the received can do something about.
- Feedback should be well timed. Providing feedback long after the supervisory visit will not have the same effect as feedback provided during and at the end of the supervisory visit.
- Only provide constructive feedback.

| Things to Think About When Conducting OJT | ✓ |
|---|---|
| 1. Be prepared for open communication. Listen to the supervisees carefully. Be receptive to questions. Encourage them to make a list of questions as they do their own preparations. Make time for answering these questions. | |
| 2. Be patient. Allow for mistakes. Mistakes, when handled with good professional guidance from you, can be very valuable learning opportunities for the supervisees. | |
| 3. Be sure to provide positive feedback. Use constructive criticism. Provide the supervisees with specific ways to improve their performance. For example, if someone is not managing commodities according to first-to-expire, first-out (FEFO) guidelines, work with them to reorganize the storeroom by expiration dates and ask them how not following FEFO would have impacted their stock. | |
| 4. If you are working with more than one supervisee, engage them all, whenever possible, even if it is just observing. It will help build a team atmosphere. | |
| 5. Start with what the supervisee knows and build on that, but also do not be afraid of passing on your own knowledge and skills related to the subject at hand. What is important is that you do not take over and simply start lecturing. Try to make it a two-way interaction. | |
| 6. Every once in a while, ask the supervisees to teach you something. Let them think about it and organize themselves to teach. Teaching is a very useful way of learning a skill thoroughly. | |
| 7. Quiz the supervisees often. Do this throughout the mentoring session. It can be as simple as asking a question. Reinforce what they have learned through having them continuously describe, explain, identify, list, show you how to perform the function, etc. | |
| 8. Be sure to keep track of what they have been trained on. Do not wait until the end of the session to assess learning. It is easier to conduct continuous assessment. | |
| 9. Discuss with the supervisees what they have learned. Ask them how it will be used in their work. Encourage them to refer to their SOPs and other written guidelines when needed. Remind them that all the information on performing various logistics functions including their roles and responsibilities can be found in the SOP manual. | |
| 10. Ask them if there is anything they do not understand or anything they need to enable them to successfully complete the task they have learned. | |

# Conclusion

A supportive supervision visit combined with OJT is an excellent opportunity to increase the knowledge and skills of the health commodity manager at the facility. Reviewing some basic commodity management tasks during a visit and providing feedback and guidance will not only reinforce the importance of good commodity management practices, but will also help to ensure that health commodities are always available and in good quality to meet the needs of the clients.

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## Appendix A

# Before, During, and After the Supervision/On-the-Job Training Visit

Suggested here is a process for a supervision/OJT visit to health facilities. The visit should be conducted based on objective criteria established in the SOPs, agreed-upon job descriptions, and objectives of the visit. Due to time constraints, a supervisor might not be able to review all supply chain functions for all commodities. In that case, select a set of tracer commodities for completing the various checks outlined in the OJT tools.

A health facility may receive either a scheduled or an unscheduled visit from the supervisor-in-charge. These guidelines should prepare the facilities for such visits. The guidelines serve as a resource to help both supervisors and supervisees know what is expected of supervisees, what to expect during a visit, and what follow-up actions should be taken after the visit.

## Prior to the Visit

The following should be undertaken before the visit takes place:

- Develop a plan for the visit (i.e., what reports to review, any spot checks of the data or information that needs to be collected, plan for any OJT to be conducted (see "On-the-Job Training for Supply Chain Management").
- Arrange for transport and allowances for the visit.
- Notify facilities of the visit. Agree on the duration of the visit with the supervisee to ensure enough time is allocated for the visit.
- Review any notes or action items from the previous visit.
- Prepare a list of questions or concerns that are most critical and should be addressed during the visit.
- Make copies of the relevant job aids in the appendices from this document.
- Obtain two copies of the current SOP manual, if applicable.

## During the Visit

During the visit, the following actions should be addressed:

- Meet with the supervisee-in-charge of the facility to inform him/her of the purpose of the visit, and ask for permission to visit with the staff.
- Make any necessary introductions.
- Explain the objective(s) of the visit.
- Enquire and verify if the SOPs are available in the facility and used. (If not, provide a copy and refer to the copy during the visit/OJT.)
- Review OJT tools with the supervisee (see the appropriate appendices) and identify which supply chain management aspects will be addressed during the visit.
- Conduct the visit focusing on the supply chain management aspects that were selected for the visit. Priority areas should include the following:
  - Health commodity storage
  - Quality of recordkeeping and reporting
  - Stock status and commodity availability.

## Completing the Visit

At the end of the visit, the supervisor should ensure the following tasks have been completed:

- The OJT tools used during the visit have been completed in their entirety.
- Feedback report (see Appendix L) is provided to the health facility and another copy is taken for filing and future reference at the higher level.
- Supervisee has reviewed and signed the report.

The information from this visit can be combined with information from other visits to create a report that summarizes key findings. These findings can then be shared with higher levels (e.g., district, province, regional, and central) and other stakeholders. The purpose of this report is to aggregate and highlight key points from the facility visits, including areas of improvement and their corresponding recommendations.

## Follow-Up After the Visit

After the visit, the following should be completed:

- Provide ongoing supervision and support, such as reviewing reports and addressing data quality or data use questions/issues.
- Follow-up on any issues that were discussed during previous visits, such as the need for supplies or equipment, any training needs that were discussed, or any corrective action that is needed.

## Appendix B

# Supervision Checklist for Visits to Health Facilities

Checklists help supervisors acknowledge strengths and target areas for improvement. Supervisory checklists should contain key observable features and components of the logistics program that should be routinely monitored to ensure that the most important resources are in place and activities carried out correctly and on schedule. What follows is a checklist of considerations for conducting a supervisory visit. These can be customized based on country context.

| **Identifying Information** | |
|---|---|
| **Name and title of supervisor(s) conducting visit** | |
| **Name of facility** | |
| **Facility code** | |
| **Date of visit** | |
| **Date of last visit** | |
| **Facility contact details:** | |
| **Telephone number** | |
| **Fax** | |
| **Email** | |

| **Staff Contact Details (Person(s) Supervised/Participated in OJT)** | | |
|---|---|---|
| **Name** | **Title** | **Mobile/Email** |
| | | |
| | | |
| | | |

| **Purpose of the Visit** | • To ensure that planned logistics activities are being carried out properly and according to schedule<br>• To ensure that all records are correctly maintained and reports are submitted in a timely manner<br>• To ensure that established logistics guidelines and procedures are being followed<br>• To ensure that logistics personnel are doing their jobs properly, and if not, why not<br>• To improve the performance of logistics personnel. |
|---|---|

**Instructions:** Indicate which of the activities listed below were reviewed with the health facility worker(s) during this visit. Provide any additional explanation in the comments section and attach copies of any related OJT tools that were used during the visit.

| **Health Commodity Storage** | | | | |
|---|---|---|---|---|
| | | **Yes** | **No** | **Comments** |
| 1. | Visit the storage area(s) and verify that storage guidelines are being followed. | | | |
| 2. | If specific products were involved, indicate which product(s): | | | |
| 3. | Conduct visual inspection of health commodities. | | | |
| 4. | If yes, indicate which product(s) were involved: | | | |
| **Quality of Recordkeeping and Reporting** | | | | |
| | | **Yes** | **No** | **Comments** |
| 5. | Review stockkeeping records. | | | |
| 6. | If yes, indicate which product(s) were involved: | | | |
| 7. | Review facility report. | | | |
| 8. | If yes, indicate the time period covered by the report or the date of the report. | | | |

| | | | | |
|---|---|---|---|---|
| | | | | |
| 9. | Review a facility requisition form. | | | |
| 10. | If yes, indicate the time period covered by the report or the date of the report. | | | |
| **Monitoring Stock Status** | | | | |
| 11. | Conduct physical inventory. | | | |
| 12. | If yes, indicate which product(s) were involved: | | | |
| 13. | Complete a stock status form. | | | |
| 14. | If yes, indicate which product(s) were involved: | | | |
| 13. | If low stock levels or stockouts were found, indicate what actions were taken or what actions are going to be taken: | | | |
| 14. | If expired or soon-to-expire products were found, indicate what actions were taken or what actions are going to be taken: | | | |
| **References** | | | | |
| 15. | Does the facility have a copy of the SOPs manual? *(If no, provide a copy or arrange for a copy to be provided.)* | | | |
| **Additional Comments:** | | | | |
| Write any comments about the supervisee or facility's performance for the logistics system. (Indicate how problems reported in previous supervision feedback form have been resolved and which problems are still outstanding). | | | | |

## The following forms found in the appendices should be completed for a select number of health commodities.

- Storage of Health Commodities (Appendix C): Visit the storeroom or area(s) where health commodities are stored. Observe the storage area and the performance indicators. For any performance indicators that are not met, take corrective action as needed.
- Visual Inspection of Health Commodities (Appendix D): Select a few products and observe the visual inspection criteria for each product selected. For any criteria that are not met, take corrective action as needed.
- Verifying Logistics Management Information System Forms (Appendix E): Complete this form for a select number of commodities to determine data quality in the LMIS reports submitted.
- Completing the Stock Status Form (Appendix H): Complete this form for a select number of health commodities. Note: All commodities do *not* need to be assessed during the visit.
- Assessing Months of Stock and Commodity Availability (Appendix J): Use this job aid and the information gathered with the stock status form to determine if the facility is holding adequate quantities of the products whose stock status is being assessed.
- Supervision Facility Feedback Form (Appendix L): Use this form to provide feedback to the facility on their strengths and areas that need improvement, and suggested actions that should be taken to address those weaknesses.

## Appendix C

# Storage of Health Commodities

| | |
|---|---|
| **Task:** | Assessing storage conditions at the health facility |
| **Completed by:** | Supervisor |
| **Purpose:** | To determine if the health commodities are being stored according to good storage practices |
| **When to perform:** | During the supervision visit |
| **Materials needed:** | |

**Note**
Review the performance indicators with the person who manages the health commodity storage area. For any problems found during the review, use the "Action to Take" information to provide OJT to address the problem.

| Performance Indication | | Conform? | | What to Look For | Action to Take |
|---|---|---|---|---|---|
| | | Yes | No | | |
| 1. | Is the storage area absent of insects and rodents? | | | There should not be dead insects or rodent droppings in the storeroom; there should be no holes in the boxes/cartons that would indicate insects or rodents.<br><br>Food and drinks should not be kept in the storeroom. | Clean the storage area; use an environmentally safe insecticide; set rodent traps; remove food and drinks from the storage area. |
| 2. | Is the storage area well ventilated (ambient temperature < 40°C)? | | | The room should feel relatively cool and not warm.<br><br>Refer to a thermometer if possible. | Cover windows to avoid excess light; install ventilation (vents in the walls, fans).<br><br>Separate the stacks of products to improve air flow. |
| 3. | Is the storage area well lit? | | | The room should not appear to be too dark.<br><br>Box/carton labels, stock cards, etc., should be easy to read. | Install lighting, if possible. |

| | | | | | |
|---|---|---|---|---|---|
| 4. | Are products stored out of direct sunlight? | | | There should be little or no direct sunlight coming into the storage area. If there is direct sunlight coming in, the sunlight should not shine on the boxes/cartons. | Cover windows to avoid excess light.<br><br>Move boxes/cartons away from direct sunlight. |
| 5. | Is the storage area dry and free of water penetration? | | | There should be no water or moisture on the floor, water marks on the walls, water stains on the ceiling, or wet or damp boxes/cartons. | Remove any standing water; repair floors, walls, or ceilings as needed. |
| 6. | Is fire safety equipment available (fire extinguisher, sandbags, or other)? | | | Fire extinguisher, bucket of sand, or other fire safety equipment should be visible and easily accessible. | Relocate existing equipment so it is easy to access.<br><br>Install and train facility staff to use fire safety equipment. |
| 7. | Are latex products (gloves and condoms) stored away from electric motors and fluorescent lights? | | | Boxes/cartons of latex products should not be placed near electric motors or fluorescent lights. | Move latex products away from electric motors or fluorescent lights. |
| 8. | If required for products stored at this facility, is cold chain equipment in place and operational? | | | Freezer, refrigerator, and/or cold box should be present and functioning properly.<br><br>Cold chain products should be stored in the appropriate place. | Repair and/or install cold chain equipment.<br><br>Relocate products to other existing cold chain equipment within the facility. |
| 9. | Are narcotics and controlled substances stored in a secure location? | | | Narcotics and controlled substances should be kept under lock and key (locked cabinet, locked storage area, locked office).<br><br>Personnel requiring access to narcotics and controlled substances have access when the products are needed. | Install secure storage for narcotics and controlled substances or move to existing secure storage.<br><br>Ensure that health personnel have access to the secure storage area when products are needed. |
| 10. | Are commodities stored by brand or specialty? | | | Commodities should be arranged in the storeroom in a logical manner: by program, by product type, or alphabetically by generic/brand name. | Arrange products in a logical manner: by program, by product type, or alphabetically by generic/brand name. |

| | | | | | |
|---|---|---|---|---|---|
| 11. | Are cartons stored on shelves or pallets? | | | Cartons should be kept off of the floor using pallets or shelves. | Install pallets, boarding, and other method so that cartons are not stacked directly on the floor. |
| 12. | Are expiry dates visible? | | | Expiry dates should be visible without having to pick up or turn the cartons. | Arrange cartons so that expiry dates are easily visible. |
| 13. | Are cartons stored with arrows pointing up? | | | Arrows marked on cartons should be pointed up (↑). | Arrange cartons so that arrows are pointed up. |
| 14. | Are products stored to promote the use of FEFO? | | | Products with an earlier expiration date should be stored on top of and/or in front of products with a later expiration date. | Arrange cartons so that those with an earlier expiration date are stored on top of and/or in front of products with a later expiration date. |
| 15. | Are commodities stored away from insecticides, chemicals, hazardous materials, old files, office supplies, and equipment? | | | Items other than commodities should be stored separately from commodities to avoid damage, contamination, etc. | Move insecticides, chemicals, hazardous materials, old files, office supplies, and equipment to another location away from the health commodities. |
| 16. | Are any expired, damaged, or other unusable commodities stored away from usable commodities? | | | Expired, damaged, or other unusable commodities should not be stored together with usable commodities. They should be stored in a separate room or a separate area of the storeroom. | Move expired products to another location away from the usable health commodities. |

## Appendix D

# Visual Inspection of Health Commodities

Using the checklist, go through and visually inspect a selection of products (bulk packaging/individual packaging, tablets/capsules/suspensions) that are kept in the storeroom. If a product meets the visual inspection criteria, put a ✓ in the "Yes" box. If a product does not meet the visual inspection criteria, use the next form for suggested action to take.

After you have completed this checklist and, if applicable the related action sheet, review your findings with the health facility worker.

| **Visual Inspection Criteria** | **Product:** | | **Product:** | | **Product:** | | **Action to Take** |
|---|---|---|---|---|---|---|---|
| | **Yes** | **No** | **Yes** | **No** | **Yes** | **No** | |
| Outer packaging is intact *(not torn, dented, broken, damaged by water, insects, etc.)*. | | | | | | | Inspect the inner contents to ensure quality condition and either repackage or separate damaged products as appropriate. |
| Individual packaging and tablets/capsules/syrups/kits are in good condition *(not crumbled, crushed, broken, discolored, expired, unusual odor, etc.)*. | | | | | | | Determine if the products need to be removed from inventory. If so, remove the products from inventory, update the stockkeeping record, and if possible, determine how the products became damaged. Resolve the problem, if possible. |
| Product name is listed clearly on the carton or box. | | | | | | | Have the facility staff member use a marking pen to write the missing information on the outside of the carton or box. |
| Date of manufacture or expiration is listed clearly on the carton or box. | | | | | | | |
| Lot number is visible and is listed clearly on the carton or box. | | | | | | | |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Manufacturer's name is listed clearly on the carton or box. | | | | | | | |

# Appendix E

# Verifying Logistics Management Information System Forms

| | |
|---|---|
| **Task:** | Verifying LMIS forms |
| **Completed by:** | Supervisor |
| **Purpose:** | To determine the quality of data recorded in the LMIS forms<br>To ensure that information reported in the most recent LMIS report matches the information recorded on facility forms |
| **When to perform:** | During a supervision visit; when receiving/reviewing reports or commodity requisitions |
| **Materials needed:** | Stock cards, the most recent LMIS report, pen, and calculator |

**Note**
For any problems found during the review, use the "Action to Take" information to address the problem.

## Stock Cards

Note: The questions below reflect the sample stock card that follows and will need to be adapted based on the format and content of the stock card that you use. The questions cover many of the elements that are typically found in a stock card. The questions should be applied to a sampling of products managed by the health facility.

| Performance Indicator | | Conform? | | What to Look For | Action to Take |
|---|---|---|---|---|---|
| | | Yes | No | | |
| 1. | Is there a stock card for each product that is managed at the health facility? | | | There should be one stock card for each product by form, presentation, or strength (e.g., paracetamol 100-mg tabs, paracetamol 250-mg capsules, and paracetamol suspension are considered as three different products; each should have its own stock card.)<br><br>At larger facilities there may be one stock card for each lot number. | Open a stock card for the product.<br><br>Conduct physical inventory and write the opening balance on the stock card. |

| | | | | | |
|---|---|---|---|---|---|
| 2. | Is the stock card up to date? | | | The stock card should have been updated the last time products were received, issued, or dispensed. | Remind the facility worker to record each transaction when the transaction takes place. |
| 3. | Does the stock card record regular physical inventories? | | | Physical inventory should be conducted and recorded on the stock card on a regular basis (usually monthly or quarterly, depending on the SOPs). | Remind the facility worker to conduct physical inventory on a regular basis and to record the results of the physical inventory on the stock card. |
| 4. | Does the stock card record all stock movements? | | | The stock card should be completed each time products are received, issued, or dispensed. | Remind the facility worker to record each transaction when the transaction takes place. |
| 5. | Does the stock card record expired, damaged, or otherwise unusable products that were removed from inventory?<br><br>If yes, does the stock card show the reason why the products were removed from inventory? | | | If there products were damaged or expired, or otherwise became unusable, the quantities should be noted on the stock card and the products should be removed from stock.<br><br>The reason why products were removed from inventory should be noted on the stock card. | Remind the facility worker to record all losses and adjustments and to note the reason for the loss or adjustment. |
| 6. | Is the stock card filled out correctly? | | | The stock card should not contain math errors.<br><br>When products are received, the new balance should equal the previous balance *plus* the quantity received.<br><br>When products are issued, dispensed, or removed from stock due to damage, expiry, etc., the new balance should equal the previous balance *minus* the quantity issued, dispensed, or removed from stock. | Show the facility worker how to add or subtract the current transaction and the previous balance.<br><br>Perform some practice calculations with the facility worker.<br><br>Provide a calculator if possible. |
| 7. | Does the current stock on hand (SOH) balance written on the stock card equal the physical count of the products? | | | The current SOH balance should equal the physical count noted on the stock card. | Remind the facility worker to conduct physical inventory on a regular basis and to record the results of the physical inventory on the stock card. |

| | | | | | |
|---|---|---|---|---|---|
| 8. | Does the stock card indicate that stock is always available? | | | If the SOH balance is zero, then it is a stockout and the product is not available.<br><br>Try to discover the reason for the stockout and find a solution to that problem.<br><br>If there is a stockout on the day of the visit, take action to obtain the commodity as soon as possible. | Remind the facility worker to monitor product availability and to place an emergency order if the SOH is too low (if it is near the emergency order point).<br><br>If the stockout is due to something other than facility management, address the problem to the appropriate person (supplier, facility manager, etc.). |

## Facility Report

Note: The questions below reflect the sample report that follows and will need to be adapted based on the format and content of the facility report. The questions cover many of the elements that are typically found in a facility LMIS report. The questions should be applied to each product listed in the report (or to a sampling of products listed in the report).

| Performance Indicator | | Conform? | | What to Look For | Action to Take |
|---|---|---|---|---|---|
| | | Yes | No | | |
| 1. | Does the beginning balance on the current report match the ending balance from the previous report? | | | Last month's/quarter's ending balance should be the same as this month's/quarter's beginning balance. | Show the facility worker how to transfer the ending balance from the previous report to the beginning balance of the current report. |
| 2. | Does the quantity received written on the report equal the total quantity of the product that was received during the reporting period? | | | The quantity received written on the report should equal the total quantity of the product that was received during the reporting period.<br><br>Refer to the stock card: the quantity received written on the report should be the sum of the quantities received written on the stock card (assuming that all stock receipts were written on the stock card). | Show the facility worker how to use the stock card to total the quantity received during the reporting period and write on the current report. |

| | | | | | |
|---|---|---|---|---|---|
| 3. | Does the quantity issued (or dispensed) written on the report equal the total quantity of the product that was issued (or dispensed) during the reporting period? | | | The quantity issued (or dispensed) written on the report should equal the total quantity of the product that was issued (or dispensed) during the reporting period.<br><br>Refer to the stock card: the quantity issued (or dispensed) written on the report should be the sum of the quantities issued (or dispensed) written on the stock card (assuming that all stocks issued [or dispensed] were written on the stock card). | Show the facility worker how to use the stock card to total the quantity issued during the reporting period and write on the current report. |
| 4. | Does the quantity listed as losses/adjustments written on the report equal the total quantity of losses/adjustments during the reporting period? | | | The losses/adjustments written on the report should equal the total of losses and adjustments for the product during the reporting period.<br><br>Refer to the stock card: the losses/adjustments written on the report should be the sum of the losses/adjustments written on the stock card (assuming that all losses/adjustments were written on the stock card). | Show the facility worker how to use the stock card to total the losses and adjustments and write on the current report. |
| 5. | Is the ending balance on the current report calculated correctly? | | | The ending balance on the report should equal the beginning balance *plus* quantities received *minus* quantities issued/dispensed *plus* or *minus* losses/adjustments. | Show the facility worker how to calculate the ending balance on the current report. |
| 6. | Is there a positive SOH balance? | | | If the SOH balance is zero, then it is a stockout and the product is not available.<br><br>Try to discover the reason for the stockout and find a solution to that problem.<br><br>If there is a stockout on the day of the visit, take action to obtain the commodity as soon as possible. | Remind the facility worker not to wait to the end of the month to order the product if the balance gets near or to zero.<br><br>Remind the facility worker of the procedure for placing an emergency order. |
| 7. | Is the report properly signed and, if applicable, approved? | | | The report should be signed and dated by the person who completed the report and, if applicable, the person should approve the report. | Remind the facility worker to sign and date the report. |

| | | | | | |
|---|---|---|---|---|---|
| 8. | Was the report filled out and submitted on time? | | | The report should be completed and submitted by the due date as specified by the SOPs. | Remind the facility worker of the process and timeline/deadline for completing and submitting the report. |

## Facility Requisition

Note: The questions that follow will need to be adapted based on the format and content of the facility requisition. The questions cover many of the elements that are typically found in a requisition. The questions should be applied to each product listed in the report (or to a sampling of products listed in the report).

| Performance Indicator | | Conform? | | What to Look For | Action to Take |
|---|---|---|---|---|---|
| | | Yes | No | | |
| 1. | Is the average monthly consumption (AMC) calculated correctly? | | | The AMC should equal the sum of the months used to calculate AMC (based on SOPs) divided by the number of months used for the calculation (e.g., January + February consumption = 140 *divided by* 2 (months) = 70). | Show the health worker how to calculate the average monthly consumption.<br><br>Example:<br>130 + 110 + 125 = 365<br>365 ÷ 3 = 121.6 = 122 |
| 2. | Is the maximum stock quantity calculated correctly? | | | The maximum stock quantity should be equal to the AMC *multiplied by* the maximum stock level (expressed in MOS; e.g., AMC = 70 *multiplied by* 3 MOS maximum = 210 maximum stock quantity. | Show the health worker how to calculate the maximum stock quantity.<br><br>Example:<br>122 × 3 = 366 |
| 3. | Is the order quantity/issue quantity calculated correctly? | | | The order/issue quantity should equal the maximum stock quantity *minus* the current SOH (from the report or from physical inventory; e.g., maximum stock quantity = 210 *minus* 85 stock on had = order quantity of 125).<br><br>Note: Ensure that you are using the same unit of counting for all calculations. | Show the health worker how to calculate the order quantity.<br><br>Example:<br>366 – 120 = 246 |

## Appendix F

# Sample Stock Card

**Ministry of Health**
**Stock Card**

**NAME OF HEALTH FACILITY**_____*Mzinga Health Center*_____

**ITEM**_____*Male Condom*_____**CODE**__*MC001*_____

**UNIT**__*Piece/Each*___**MINIMUM STOCK**_*2 months*__**MAXIMUM STOCK**__*3 months*_

| Date | Transaction Reference | Received From/Issued To | Qty Received | Qty Issued | Losses/ Adjustment | Balance | Remarks | Signature |
|---|---|---|---|---|---|---|---|---|
| 27/2/08 | | Stocktaking | | | | 700 | | George |
| 6/3/08 | 03/DS/D/03 | Dispensary | | 500 | | 200 | | George |
| 19/3/08 | RMS/08/67 | RMS | 500 | | | 700 | | George |
| 26/3/08 | | Stockkeeping | | | -100 | 600 | Missing at Phys. Inv. | George |
| 10/4/08 | 04/DS/D/07 | Dispensary | | 500 | | 100 | | George |
| 18/4/08 | 04/DS/D/14 | Dispensary | | 100 | | 0 | | George |
| 23/4/08 | RMS/08/88 | RMS | 1000 | | | 1000 | | George |

# Appendix G

# Sample Report and Requisition Form

### Report and Requisition Form

Facility Code: *HC0392* Facility Name: *Makarana Health Center*
Type (government/nongovernmental organization/faith-based organization/other): *government*
Province/Region/District: *Eastern Region*
Date Submitted: *5 July 2009*
Reporting Period: *June 1* to: *June 30* Year: *2009*

| Product Number | Product Name | Unit of Issue | Opening Balance (A) | Received This Period (B) | Issued This Period (C) | Losses/ Adjust (D) | Ending Balance (E = A + B – C –/+ D | Maximum Stock Quantity (F = C x 3) | Quantity Needed (G= F-E) | Quantity Approved (H) |
|---|---|---|---|---|---|---|---|---|---|---|
| 001 | Male condoms | Piece | 141 | 219 | 189 | 0 | 171 | 567 | 396 | |
| 002 | Depo-Provera | Vial | 234 | 144 | 173 | 0 | 205 | 519 | 314 | |
| 003 | IUDs | Piece | 114 | 147 | 158 | –3 | 100 | 474 | 374 | |
| 004 | Implant | Injection | 178 | 144 | 174 | 0 | 148 | 522 | 374 | |
| 005 | Determine | Test | 202 | 75 | 120 | 0 | 157 | 360 | 203 | |
| 006 | SD Bioline | Test | 211 | 144 | 153 | 0 | 202 | 459 | 257 | |

| | | |
|---|---|---|
| Completed by: George | Title: Facility Worker | Date: 3 July 2009 |
| Verified by: | Title: | Date: |

## Appendix H

# Completing the Stock Status Form

| | |
|---|---|
| **Task:** | Completing the stock status form |
| **Completed by:** | Supervisor |
| **Purpose:** | To calculate the MOS for various commodities at the facility level.<br>To determine whether stocks are being managed appropriately at the facility level. |
| **When to perform:** | During a supervision visit |
| **Materials needed:** | Blank stock status form, stock cards from the facility, pen, and calculator |

Complete the stock status form for a sampling of products managed at the facility. You may select fast-moving products, essential products, or high-value products. You should select some products from each program (reproductive health, HIV, tuberculosis, etc.).

| Performance Indicator | | Conform? | | What to Look For | Action to Take |
|---|---|---|---|---|---|
| | | Yes | No | | |
| 1. | Select the products that will be included for the stock management review. | | | Not all products need to be assessed. The supervisor should select a few commodities that are considered essential for the supply chain being reviewed.<br><br>For example, for a family planning program, condoms, pills, injectables, implantable uterine devices, and implants are generally part of the product mix. For HIV tests, all tests should be included, and for antiretroviral drugs, both first and second line, including a pediatric formulation, should be included. If the health center provides services for several programs, then some products for each program should be assessed. | With the facility, decide on a select list of products to assess |

| | | | | | |
|---|---|---|---|---|---|
| 2. | Unit of count. | | | | Write the smallest unit of count for each commodity. For example, condoms are counted per piece, oral contraceptives are per cycle, injectables per vial, HIV tests per test kit, etc. |

| | | | | | |
|---|---|---|---|---|---|
| 3. | Physical Inventory—storeroom | | | Conduct a physical count for each commodity being assessed:<br>Count unopened/complete cartons first. Multiply the number of cartons by the number of boxes in the each carton. This will give you the total number of boxes.<br><br>Next, take the total number of boxes and multiply it with the total number of bottles/cycles/pieces per box. This will give you the total commodity available based on the smallest unit of count.<br><br>Similarly, count the boxes inside the open cartons. If an open carton contains unopened boxes, count the boxes and multiply the number by the number of bottles/cycles/pieces in a box. This will give you the total number of the commodity available in the unopened boxes.<br><br>Count all the units that are in open boxes.<br><br>Any product that has expired or is damaged is *not* considered part of the physical inventory and should not be included in the count.<br><br>Add up the total units of usable stock from the unopened cartons, unopened boxes, and in open boxes in the storeroom. That is your total physical inventory in the store room. | Show facility staff how to conduct physical inventory.<br><br>Example:<br>Total number of cartons of condoms = 5<br>Total number of boxes in each carton = 20<br>Total number of boxes = 5 x 20 = 100 boxes<br><br>Total number of boxes = 100<br><br>Total number of condoms per box = 125<br><br>Total number of condoms in unopened cartons = 100 x 125 = 12,500 condoms<br><br>10 boxes in one open carton<br>5 boxes in another open carton<br>Total number of boxes = 15<br><br>Total number of condoms per box = 125<br>Total number of condoms in open cartons = 15 x 125 = 1,875 condoms<br><br>Total in open boxes = 125 condoms<br><br>Unopened cartons = 12,500<br>Open cartons = 1,875<br>Open boxes = 125<br>TOTAL = 14,500 condoms |

| | | | | | |
|---|---|---|---|---|---|
| 4. | Stockout today? | | | See if there is a stockout on the day of the visit. | If there is a stockout today, write "Y."<br>If there is stock available today, write "N."<br>In case of a stockout, ask the facility staff for the reasons for stockout and make note of it in the supervision checklist. |
| 5. | Quantity of expired products | | | Write down the total quantity of products that have expired.<br><br>Remember, any expired product should *not* be part of the physical inventory, | Expired, damaged, or other unusable commodities should not be stored together with usable commodities. They should be stored in a separate room or a separate area of the storeroom. |
| 6. | Stock card available? | | | If there is a stock card for the product, write a "1" for Yes.<br>If the product does not have a stock card, write "0" for No. | |
| 7. | Stock card updated? | | | If the stock card has been updated within the last 30 days,[1] answer "1" for Yes or "0" for No. | Remind the facility staff about the importance of updating the stock cards on a daily basis. |
| 8. | Balance on stock card | | | If the stock card was last updated with the balance of zero and the facility has not received any resupply, consider the stock card up-to-date. | Record the last entry made in the "Balance" column on the stock card, including zero. |

[1] Each program may decide how much time should be given to a facility for the stock card to be considered "updated." The range for most countries is updated day of the visit to updated within the last 30 days. Programs can change this accordingly.

| | | | | | |
|---|---|---|---|---|---|
| 9. | Difference between physical count and balance on stock card | | | Subtract physical count from balance on stock card (Column 3 – Column 8). | Record the difference on the stock status form.<br><br>This calculation shows the difference between the balance on the stock card and the result of the physical count.<br>If there is a difference, include a comment in the supervision facility feedback form. |
| 10. | Stockout in the most recent 3 months<br>. | | | Review the stock card to see if during the last three months, the "Balance" column on the stock cards lists "0." | If a "0" is recorded in balance column, write "1" for Yes.<br>If there is no "0" recorded, write a "0" for No. |
| 11. | Number of stockouts | | | Review the stock card to see if during the most recent three months, the "Balance" column on the stock cards lists "0."<br>If a "0" is recorded, count each time a "0" is entered in the "Balance" column and write the total number as your answer.<br>If there is no "0" recorded, meaning there was no stockout in the last three months; write "0" as your answer. | Example:<br>Condoms were stocked out during the following time periods:<br>From July 1 to July 15, the balance = 0<br>From July 25 to July 30, the balance = 0<br>From September 11 to September 20, the balance = 0<br><br>Total number of stockouts = 3 |

| | | | | | |
|---|---|---|---|---|---|
| 12 | Total number of days of stockout | | | Count the total number of days when a "0" is recorded in the "Balance" column until the date there is a positive "Balance" recorded during the most recent three months (i.e., there is an entry in the "Received" column). | Example:<br>Condoms were stocked out during the following time periods:<br>From July 1 to July 15, the balance = 0<br>From July 25 to July 30, the balance = 0.<br>From September 11 to September 20, the balance = 0.<br><br>There were no stockouts in August.<br><br>Total number of days of stockout:<br>July 1 to July 15 = 15 days<br>July 25 to July 30 = 6 days<br>September 11 to September 19 = 9 days<br>Total days of stockout = 30 days |
| 13. | Total issued | | | Write the total quantities issued in the most recent full three months. | Example: Total issued for condoms from July 1 to September 30, 2010<br><br>July: 500<br>August: 1,520<br>September: 1,372<br>Total issued = 3,392 |

| | | | | | |
|---|---|---|---|---|---|
| 14 | Number of days of data available | | | Record the number of days the issued data represents (it may be fewer than 90 days if you are looking at three months of data); record the days for which there is any data recorded, including 0. | Total number of days of data available = 90 days (total days in a 3 month period) – 30 days (days of stockout)<br><br>Number of days of data available = 60 days |

## Appendix I

# Stock Status Form

**Name of the Health Facility:** **Date:**

**Maximum Stock Level:** **Minimum Stock Level:** **Emergency Order Point:**

| Product | Units of Count | Physical Inventory — Storeroom | Stockout Today? (Y/N) | Quantity of Expired Products | Stock Card Available? (Y/N) | Stock Card Updated? (Y/N) | Balance on Stock Card | Difference Between Physical Count and Stock Card (Column 3 - Column 8) | Stockout Most Recent 3 Months (Y/N) | Number of Stockouts Most Recent 3 Months | Total Number of Days Stocked Out Most Recent 3 Months | Total issued most recent 3 months | Number of Days of Data Available Most Recent 3 Months |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 |
| | | | | | | | | | | | | | |
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## Appendix J

# Assessing Months of Stock and Commodity Availability

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|---|---|
| **Task:** | Assessing MOS and commodity availability |
| **Completed by:** | Supervisor |
| **Purpose:** | To determine if the health facilities are maintaining their stock levels within the established maximum/minimum levels; if the facility is understocked, overstocked, or adequately stocked<br>To determine how long the commodities will last (MOS)<br>To ensure that the enough stock is available to serve clients before the next order<br>To correct any overstocking or understocking after determining MOS |
| **When to perform:** | During the supervision visits when completing the supervision checklist |
| **Materials needed:** | Stock status form, which will have been completed by the supervisor during the visit just prior to this step, pen, and calculator |

**Note**
For any problems found during the review, use the "Action to Take" information to provide OJT to address the problem.

Complete the stock status form (Appendix I) for a sampling of products managed at the facility. You mat select fast-moving products, essential products, or high-value products. You should select some products from each program (reproductive health, HIV, tuberculosis, etc.).

After completing the stock status form, review the form using the questions in this job aid to evaluate commodity availability and commodity management at the facility.

| Performance Indicator | | Conform? | | What to Look For | Action to Take |
|---|---|---|---|---|---|
| | | Yes | No | | |
| 1. | Is there stock available for each product? (Is the answer "N" for stockout today?) | | | There should be products available on the day physical inventory is conducted (i.e., no stockouts).<br><br>If there is a stockout, find out the reason for the stockout and take action to obtain the product as soon as possible. | |

| | | | | | |
|---|---|---|---|---|---|
| 2. | Determining SOH | | | Before calculating MOS on hand, two other pieces of information are needed: SOH and AMC.<br><br>SOH *divided by* AMC = MOS | Show the health worker how to calculate MOS. |
| 3. | Review the physical inventory column from the stock status form for each commodity assessed. | | | Physical inventory or SOH can be calculated by doing a physical count for each commodity in the storeroom (already completed during the stock status exercise).<br>This provides the absolute quantity of stock available, also known as SOH. | Remind the facility worker to use the data on physical count already completed. |
| 4. | Calculate AMC | | | To determine AMC for the last three months, add the latest three months' consumption for a particular product, then divide by total number of months (in this case, three).<br><br>Total consumption for three months *divided by* three months = AMC | Show the facility worker an how to calculate consumption.<br>Example:<br>Consumption for condoms from July 1 to September 30, 2010<br><br>July = 500<br>August = 1,520<br>September = 1,372<br>Total = 3,392<br><br>AMC = 3,392/3 Months = 1,169.7 or 1,170<br><br>Note: When calculating AMC, always round up to the nearest whole number. |

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| 5. | Adjust for any stockouts in the AMC. | | | If there have been any stockouts in any of those three months, AMC will need to be adjusted to take into account the total number of days of stockout and adjust the total number of days of data available.<br>For example, if there is a stockout for a specific commodity for 30 days, then adjust the number of days of consumption data available to 60 days in order to reflect the true average consumption. | Show the facility worker an how to adjust for stockouts.<br><br>Example:<br>Condoms were stocked out during the following time periods:<br>July 1 to July 15<br>July 25 to July 30<br>September 11 to September 20<br><br>There were no stockouts in August.<br><br>Total number of days of stockout:<br>July 1 to July 15 = 15 days<br>July 25 to July 30 = 6 days<br>September 11 to September 19 = 9 days<br>Total days of stockout = 30 days<br><br>Total number of days of data available = 90 days (total days in a three-month period) – 30 days (days of stockout)<br><br>Number of days of data available = 60 days |

| | | | | | |
|---|---|---|---|---|---|
| 6. | Calculate average daily consumption | | | Take the total consumption and divide it by the days of data available to determine average daily consumption | Show the facility worker how to calculate average daily consumption:<br><br>Total consumption: Total issued during a select period of time in days divided by the total number of days equals average daily consumption<br><br>3,392/60 days = 56.33 per day |
| 7. | Calculate AMC | | | Take the average daily consumption and multiply it with 30 days to calculate AMC | Show facility worker how to calculate AMC<br><br>Average daily consumption multiplied by 30 = AMC<br><br>56.33 multiplied by 30 days = 1,690 |
| 8. | Calculate MOS | | | Determine MOS based on the following formula:<br><br>SOH *divided by* AMC = MOS | Show the facility worker how to calculate MOS.<br><br>SOH = 14,500 (from physical inventory)<br><br>AMC = 1,690<br><br>14,500 *divided by* 1,690 = 8.57 MOS<br>1,690 |

| | | | | | |
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| 9. | What are the MOS on hand? | | | MOS on hand should be between the maximum and the minimum stock levels for the facility (as established by the SOPs).<br><br>If the stock level is above the maximum, determine if those products risk expiry; if so, consider relocating a portion of the stock to another facility.<br><br>If the facility does not use maximum/minimum stock levels, verify that the MOS is more than the time before the next commodity order will be placed. If not, you may need to request the product sooner. | If the facility uses maximum and minimum stock levels, remind the facility worker what the maximum and minimum stock levels are.<br><br>Remind the health worker that MOS on hand should be between the maximum and the minimum stock levels.<br><br>For example, if the minimum is three and maximum is five, the stock levels should remain between three and five months.<br><br>If the stock level is below the minimum, instruct the health worker to monitor the stock levels carefully to ensure that a stockout will not occur.<br><br>If the stock level is at or below the emergency order point, place an emergency order for the product. |

# Appendix K

# Completing the Supervision Facility Feedback Form

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|---|---|
| **Task:** | Completing the supervision facility feedback form |
| **Completed by:** | Supervisor |
| **Purpose:** | To provide immediate feedback on the supportive supervision visit<br>To provide an opportunity to the supervisees to develop next steps for improvement in areas that need further strengthening, and to reinforce supervisee's strengths |
| **When to perform:** | During the supervision visits after completing the supervision checklist |
| **Materials needed:** | Blank supervision facility feedback form and supervision checklist for reference |

| Step | Action | Notes |
|---|---|---|
| 1. | Complete the basic facility identification information on the feedback form. | |
| 2. | Strengths observed during supervision: Write some of the supervisee's strengths observed during the visit. For example, was the storeroom maintained according to FEFO? Was it secured with a lock and key? Did the supervisee keep stock cards updated? Were you able to review all the LMIS reports for data quality? Were there any stockouts for any commodities?<br><br>Be specific when listing the strengths. | |
| 3. | General comments: Write any additional comments about the overall supportive supervision visit. | |
| 4. | Areas of improvement: Be specific. List a few areas of in which the supervisee could focus on improving knowledge of skills. Provide constructive feedback; do not be critical, but be specific. For example, improve storage conditions, recordkeeping, or assessing stock status on a routine basis. | |

| | | |
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| 5. | Suggested actions to address the issues: Provide specific actions that the supervisee can take. For example, focus on keeping the storeroom organized based on FEFO. Always secure storeroom with a lock and key with access limited only to personnel who need it. Update stockcard on a daily basis for all commodities that are issued. At the end of the month, calculate AMC to make sure enough stock is available and regularly order and report based on the established schedule. | |
| 6. | Who should take actions on recommendations: Write the name of the person responsible for particular action. For example, the pharmacist is responsible for keeping the storeroom under lock and key and updating stock card. | |
| 7. | Time frame required to complete the action: Each action should include a specific time frame within which it will be completed. | |

## Appendix L

# Supervision Facility Feedback Form

Date: _____

Name of health facility: _____

Feedback given by: _____

Name of health facility staff given feedback: _____

Strengths observed during supervision: _____

_____

_____

_____

_____

General comments: _____

_____

_____

_____

_____

| Areas for Improvement | Suggested Actions to Address the Issues | Who Should Take Action on Recommendations | Time Frame Required to Complete the Actions |
|---|---|---|---|
| | | | |
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Signed:

Health Facility Representative

Supervisor

## Appendix M

# Planning an On-the-Job Training Session

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|---|---|
| **Task:** | Planning an OJT session |
| **Completed by:** | Supervisor |
| **Purpose:** | To plan an OJT session for topics other than those specifically covered by other job aids in this manual |
| **When to perform:** | Prior to and during the supervision visit |
| **Materials needed:** | Copy of the SOPs manual, if applicable<br>Any materials related to the knowledge or skills to be developed during the OJT session |

Follow these steps to prepare for an OJT session:

| Step | Action | Notes |
|---|---|---|
| 1. | Identify the learning objective(s) for the OJT session. | Learning objectives should focus on something the supervisee should know or be able to do in order to adequately perform his or her job. The learning objective should focus on what the person will be able to do to demonstrate that the knowledge or skill has been acquired.<br>Sample objectives are:<br>Knowledge-based objectives:<br>At the end of the OJT session, the supervisee will be able to …<br>*Describe* (the process for…)<br>*Identify* (the steps to …)<br>Skills-based objectives:<br>At the end of the OJT session, the supervisee will be able to …<br>*Complete* (the form for…)<br>*Calculate* (the re-supply quantity for …) |

| | | |
|---|---|---|
| 2. | Identify how the learning objective will be achieved. Describe how the learning will take place. | Select one or more learning activities based on the information/skill that will be learned. Options include:<br>The supervisor provides information verbally to the supervisee.<br>The supervisor and supervisee review together the information in the SOPs manual.<br>The supervisor demonstrates the task for the supervisee.<br>The supervisee reviews, for example, a section in the SOP manual on his/her own. |
| 3. | Identify how the supervisee will demonstrate achievement of the learning objective. | For knowledge-based objectives, verification can involve having the supervisee describe, identify, or otherwise tell you the information covered by the objective.<br>For skills-based objectives, verification should involve having the supervisee perform the task covered by the learning objective. |
| 4. | Be ready to provide an opportunity for the supervisee to ask questions related to the information or skill covered during the learning activity. | Ensure that the supervisee fully understands the material that was covered. Answer any questions or have the supervisee repeat the task that was covered during the learning activity. |

# Appendix N

# Glossary

**Average monthly consumption (AMC)** is the total quantity of product consumed over the course of a month. It is calculating by determining total quantity consumed over a period of set period of time (e.g., three months) divided by the number of months. In cases where there is a stockout, AMC is adjusted to account for those stockouts over the set period of time.

**Mentoring** is a process for the informal transmission of knowledge, skills, and support perceived by the recipient as relevant to work, career, or professional development. Mentoring usually requires informal communication, usually face-to-face over a sustained period of time.

**Mentorship** refers to a developmental relationship in which a more experienced person helps a less experienced person (referred to as a protégé, apprentice, mentee, or person being mentored) develop in a specified capacity.

**Months of stock (MOS)** is the number of months a specific commodity will last based on the present consumption rate.[2] While reviewing stock status, it is important to determine how many MOS are available. For example, three MOS means that stock will last three months, as long as consumption remains at the current rate.

**Monitoring and supervision** are intrinsically related to one another. While **supervision** is the process of ensuring that staff has the knowledge and skills required to carry out their responsibilities effectively, **monitoring** involves overseeing program implementation. For example, a supervisor is responsible for both monitoring of the logistics activities while he/she supervises and supports the people that perform these functions.

**On-the-job training (OJT)** is job training that occurs in the workplace—an employee learns the job while doing the job. OJT is also called hands-on training. OJT includes helping someone improve his or her work performance by providing opportunities for the employee to do self-study or to observe the correct way to do a job task and then to practice doing it him- or herself under the guidance of the on-the-job trainer. OJT should take place on the job, with both the employee and the supervisor working together.

The **standard operating procedures (SOPs)** manual provides country-specific documentation on procedures and roles and responsibilities for the various personnel involved in the proper functioning of a logistics system. For supervisors, the SOPs provide guidance on information they should or should not collect during a supervisory visit, frequency of supervision visit, and the role and responsibilities of a health facility worker.

[2] The consumption rate used is usually calculated as an average of the last three months of consumption.

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