

PRINCIPAL RECIPIENT MANAGEMENT DASHBOARD INSTALLATION AND SETUP GUIDE - ANNEXES 1-7

Version 2.0 R4 – August 15, 2017

Management tools for the whole-of-country approach

CCM Summary

Regional Dashboard

Principal Recipient Management Dashboard

Subrecipient Management Tool



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Principal Recipient Management Dashboard Installation and Setup Guide, Annexes 1-7— Version 2.0 R4
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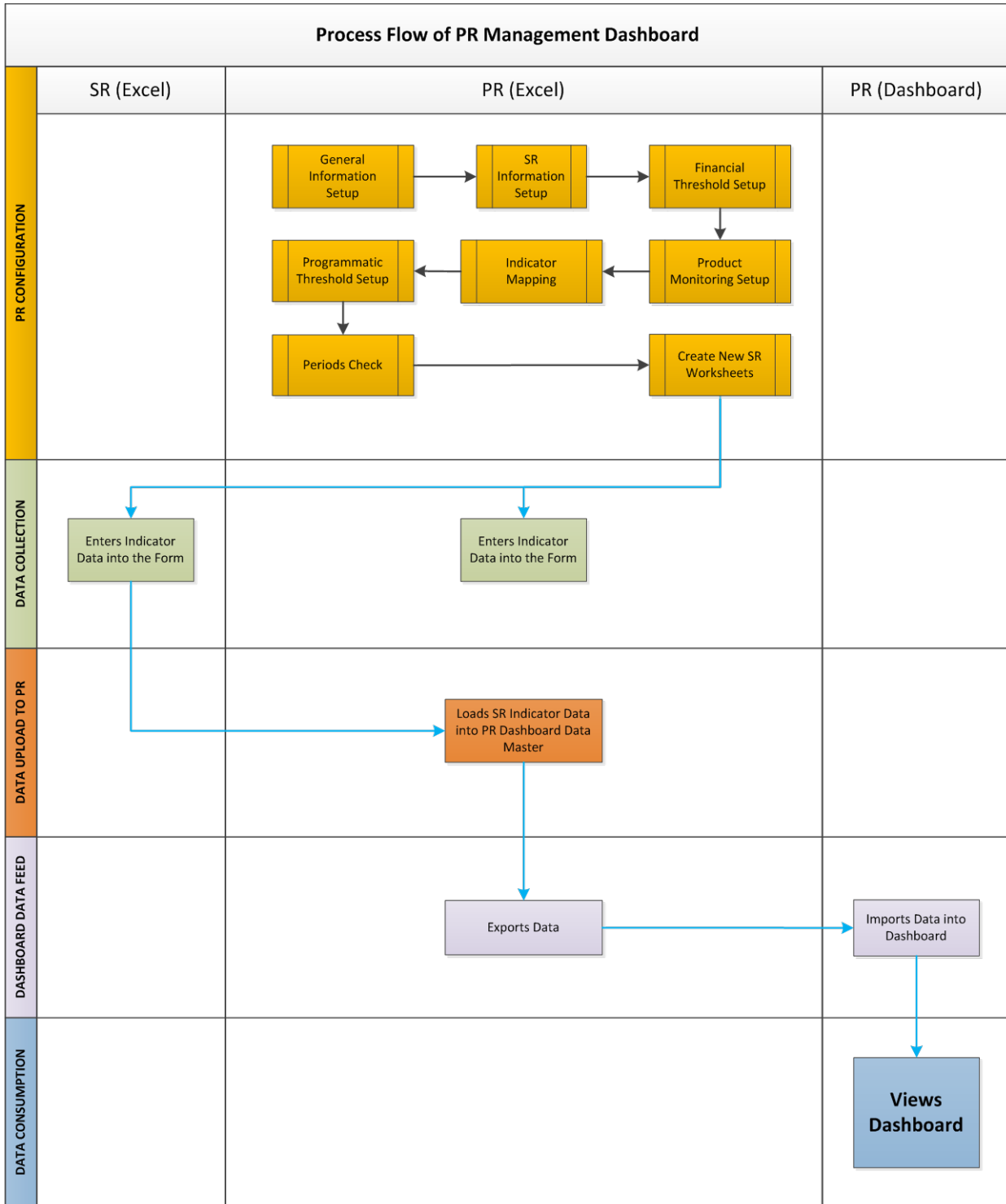
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ABBREVIATIONS AND ACRONYMS

| | |
|-------------|---|
| ACTs | artemisinin- based combination therapies |
| ANC | antenatal care |
| ART | antiretroviral treatment |
| AS/AQ | Artesunate Amodiaquine |
| CBO | community based organization |
| CMS | central medical stores |
| CP | condition precedent |
| CSS | community systems strengthening |
| DST | drug-susceptibility testing |
| EQA | external quality assurance |
| Global Fund | Global Fund to Fight AIDS, Tuberculosis and Malaria |
| HMIS | health management information system |
| IPT | intermittent presumptive treatment |
| IRS | indoor residual spraying |
| IT | information technology |
| ITN | insecticide-treated nets |
| IV | intravenous |
| LFA | local fund agent |
| LLIN | long-lasting insecticide-treated nets |
| MDR | multi-disease resistant |
| MSM | men who have sex with men |
| NTP | national TB program |
| OIG | Office of the Inspector General |
| OST | opiod substitution therapy |
| PLHIV | people living with HIV/AIDS |
| PMTCT | prevention of mother-to-child transmission |
| PPM | pooled procurement mechanism |
| PR | principal recipient |
| PSM | procurement and supply management |
| PUDR | Progress update and disbursement request |
| QA | quality assurance |
| RR-TB | Rifampicin resistant TB |
| SC | special condition |
| SR | subrecipient |
| SSR | sub-SR |
| TB | tuberculosis |
| TBA | time-bound action |
| TX | treatment |
| TG | Transgender |
| TGF | The Global Fund |

Annex 1. Process Flow of PR Management Dashboard



ANNEX 2. FINANCIAL MANAGEMENT INDICATORS

| No | Indicator Name | Indicator label in dashboard | What does the indicator seek to measure or monitor? | Calculation | Data source |
|-----------|-------------------------|------------------------------|--|--|--|
| F1 | Disbursement vs. budget | Fi2: Disbursement | To determine whether cumulative disbursements are on track with funds budgeted as at a given period | <p>Numerator: \$ Cumulative disbursements made by the Global Fund to the PR as at a given reporting period</p> <p>Denominator: \$ cumulative budget for the grant as at a given reporting period</p> | <p>PR records and bank records. Disbursements from the Global Fund will be shown as when they are recorded in the PR bank account.</p> <p>Disbursements by the Global Fund on behalf of the PR to voluntary pooled procurement (now known as pooled procurement) will be shown as at date advised by the Global Fund.</p> <p>Budget figures are those in the approved in the grant agreement as amended from time to time.</p> |
| F2 | Expenditures vs budget | Fi3: Expenditure | To determine whether cumulative expenditures as at a given period are in line with cumulative budget as at the same period | <p>Numerator: \$ cumulative expenditures as at a given reporting period</p> <p>Denominator: \$ cumulative budget as at a given</p> | <p>PR records and bank records.</p> <p>Expenditure to pooled procurement mechanism (PPM) will be shown as at date</p> |

| No | Indicator Name | Indicator label in dashboard | What does the indicator seek to measure or monitor? | Calculation | Data source |
|-----------|--|--------------------------------|---|---|---|
| | | | | reporting period | advised by the Global Fund. Expenditure for the grant will be the sum of PR only expenditure and SR expenditures (including disbursements by the SRs to SSRs.) |
| F3 | Completeness and timeliness of financial reporting | Fi5: Financial reports overdue | To determine whether financial reports contain all required data and are submitted on time | # late and incomplete financial reports submitted by SRs to PR per period | PR records |
| F4 | Audit monitoring | Ext Audit | To monitor completion of external audit recommendations | # of audit recommendations completed within agreed timeframe; # not completed but within timeframe; # recommendations not completed and outside timeframe | PR records and audit report(s) |
| F5 | Financial overview of grant | Cumulative by Quarter | To provide an overview of cumulative budget, disbursements and expenditure for the grant by reporting period. | Cumulative figures for grant budget, Global Fund disbursement, and grant expenditure shown for each reporting period. | PR financial records. Global Fund disbursements are recorded as when they are recorded in the PR bank account. |
| F6 | Expenditure rate of individual SRs | Expenditure against Budget % | To provide a profile of how closely their expenditure for each period adheres to | Numerator: expenditure for a given reporting period for the individual SR, including | SR financial records. SR disbursements to SSRs are shown as when they are |

| No | Indicator Name | Indicator label in dashboard | What does the indicator seek to measure or monitor? | Calculation | Data source |
|----|-------------------------------------|------------------------------|---|--|--|
| | | | the period budget. | <p>disbursements by the SR to SSRs.</p> <p>Denominator: budget for the same reporting period for the individual SR, including for disbursements by the SR to SSRs.</p> | recorded by the SR as having been disbursed. |
| F7 | Financial overview by SR | | To provide SR expenditure, disbursement and budget by period for highlighted SR. | Bar graph showing for each reporting period for the highlighted SR the budget, the expenditure level (including disbursements by the SR to SSRs), and the disbursement from the PR to the SR. | <p>SR financial records.</p> <p>SR disbursements to SSRs are shown as when they are recorded by the SR as having been disbursed.</p> |
| F8 | Cumulative financial overview by SR | | To provide cumulative SR expenditure, disbursement and budget by reporting period for highlighted SR. | Bar graph showing for each reporting period for the highlighted SR the cumulative budget, the cumulative expenditure level (including disbursements by the SR to SSRs), and the cumulative disbursement from the PR to the SR. | <p>SR financial records.</p> <p>SR disbursements to SSRs are shown as when they are recorded by the SR as having been disbursed.</p> |

ANNEX 3. GENERAL MANAGEMENT INDICATORS

| No | Indicator Name | Indicator label in dashboard | What does the indicator seek to measure? | Data elements used to calculate the indicator | Data source |
|----|--|---------------------------------|--|---|---|
| G1 | Execution of supportive supervision or monitoring visits | Supervision Visits Past Due | To monitor execution of planned supportive supervision activities | <p>Target: # planned supportive supervision visits conducted per period</p> <p>Actual: # supportive supervision visits not conducted per period</p> | Supervision reports; supervision plan |
| G2 | Timely implementation of major recommendations identified during supportive supervision or monitoring visits. Major recommendations are defined by the PR. | Implem Supervis recomb Past Due | Responsiveness of the PR and SR to correct program weaknesses | # of key recommendations emerging from supervisory visits which are overdue for implementation | PR/SR progress reports; supervision visit reports |
| G3 | Timeliness of SR programmatic reporting | Program Reports Past Due | Timeliness of SR/implementing agency programmatic reports submitted to PR | # late and incomplete programmatic reports submitted by SRs to PR per period | SR and implementing agency records |
| G4 | Key personnel hired and ready to implement grant | Key Positions Vacant | Availability of key personnel for grant implementation. Key staff involved senior managerial and technical staff at PR and lead SR levels. | <p>Actual: # vacant key positions</p> <p>Target: # total key positions at PR and lead SR</p> | PR and SR org charts; PR and SR budgets; Program implementation reports; HR records |

| No | Indicator Name | Indicator label in dashboard | What does the indicator seek to measure? | Data elements used to calculate the indicator | Data source |
|----|--|------------------------------|---|---|---|
| | | | | levels | |
| G5 | Conditions precedent (CPs) met within timelines | CPs | CPs formally cleared by the Global Fund Secretariat | # CPs fulfilled as scheduled; #CPs not fulfilled but on schedule; # CPs not fulfilled and behind schedule. | PR/SR Program implementation reports ; progress update and disbursement request (PUDR) ; Management Letters ; Grant Agreement |
| G6 | Special Conditions (SCs) and Time bound actions met within timelines | SCs and TBAs | SCs and TBAs formally cleared by the Global Fund Secretariat | # SCs & Time-Bound Actions (TBAs fulfilled) as scheduled; #SCs & TBAs not fulfilled but on schedule; # SCs & TBAs not fulfilled and behind schedule. | PR/SR program implementation reports ; PUDR ; Management Letters |
| G7 | PR has fulfilled Office of the Inspector General (OIG) recommendations, if any | OIG | Critical and important OIG recommendations as advised by the Global Fund Secretariat are implemented in a timely manner | # OIG recommendations fulfilled as scheduled; # OIG recommendations not fulfilled but on schedule; #OIG recommendations not fulfilled and behind schedule | PR reports and communication with Global Fund Secretariat; Global Fund management letters with priority recommendations |

ANNEX 4. PROCUREMENT AND SUPPLY MANAGEMENT INDICATORS

| No | Indicator Name | Indicator label in dashboard | What does the indicator seek to measure or monitor? | Data elements used to calculate the indicator | Data source |
|-----------|--|---|---|---|--|
| P1 | Timely execution of health product procurement | Product Procurement Product Past Due | To monitor execution of procurement as per the procurement plan | # of products whose procurement is overdue | Purchase orders of PR, SR or of Central Medical Stores (CMS) |
| P2 | Number of lots that failed quality assurance (QA) testing | Products Quality Test failed | To verify that QA testing is being implemented according to the QA plan | Number of lots tested that failed to meet quality standards | National Regulatory authority or communications to PR from external lab contracted to conduct QA tests |
| P3 | Value of health product procurement made as emergency orders | Value of Emergency Orders | To monitor efficiency of procurement and supply management | Numerator: value of health product procurement made as emergency orders | Purchase Orders of PR or of CMS |
| P4 | Number of late deliveries | # Sites w/ Prodct Deliv Past Due | Availability of health products | Actual: Number of sites that received orders in and full and on time Planned: Number of sites that placed orders | PR records or CMS records; National Disease Program |

| No | Indicator Name | Indicator label in dashboard | What does the indicator seek to measure or monitor? | Data elements used to calculate the indicator | Data source |
|----|---|------------------------------|--|---|---|
| P5 | Number of treatment sites that experienced stock outs of key products during a given period of time | Sites with Stockouts | Availability of health products | <p>Actual: Number of facilities providing treatment that experienced a stock out of any key health product.</p> <p>Denominator: All health facilities which stock health products.</p> | Reception documentation at treatment site level |
| P6 | Available stock at national level (= current M6) | Stocks | Availability of health products – risk of stock outs | The PR enters the current number of months of stock on hand of a product (available at the national level of the supply system) into the data-entry application. The data-entry application then compares the stock on hand with the safety stock (expressed in months) that was entered for each product during configuration. The resulting colors in the dashboard indicate whether available stock is insufficient, within acceptable limits, or excessive. | CMS; Logistics Management Information System |

| No | Indicator Name | Indicator label in dashboard | What does the indicator seek to measure or monitor? | Data elements used to calculate the indicator | Data source |
|----|---|-------------------------------|--|---|---|
| P7 | Number of health facilities submitting reports on health product status according to the defined reporting schedule | # Site Stock Reports Past Due | Functioning of the pharmaceutical and health product management information system | Numerator: # late and incomplete pharmaceutical and health product status reports programmatic reports submitted by facilities or treatment sites submitting according to the defined reporting schedule | PR records or CMS records; National Disease Program |
| P8 | Budget approved for PSM costs compared to what is spent and committed for the same costs | Exp + Comt PSM Cost Budget | Compliance with budget allocation for PSM Costs (e.g. pallets, shelving) | Numerator: Cumulative expenditure and commitments for PSM costs Denominator: Cumulative budget approved for PSM costs | PR/SR financial reports |
| P9 | Budget approved for health products and equipment compared what is spent and committed for the same products | Exp + Comt H Prd+Eqp Bdgt | Compliance with budget allocation for health products | Numerator: Cumulative expenditures and commitments for health products and equipment Denominator: Cumulative budget approved for health products and equipment | PR/SR financial reports |

| No | Indicator Name | Indicator label in dashboard | What does the indicator seek to measure or monitor? | Data elements used to calculate the indicator | Data source |
|-----|---|------------------------------|---|--|-------------------------|
| P10 | Budget approved for Pharmaceuticals compared to what is spent and committed | Exp + Comt Pharma Bdgt | Compliance with budget allocation for pharmaceutical products | <p>Numerator: Cumulative expenditures and commitments for pharmaceutical products</p> <p>Denominator: Cumulative budget approved for pharmaceutical products</p> | PR/SR financial reports |

ANNEX 5. DATA DEFINITIONS FOR FINANCIAL, MANAGEMENT AND PROCUREMENT AND SUPPLY MANAGEMENT INDICATORS

The following tables contain the detailed data definitions for all Finance, General Management and Procurement and Supply Management indicators in the data-entry application and should be used by the PR to verify that the correct data is being recorded and that data is being recorded at the correct level (PR, SR or both). Each group of indicators is highlighted in a different color.

FINANCE AND GENERAL MANAGEMENT DATA ITEMS IN PR DATA ENTRY WORKSHEET

| ObjectID | Data Item | Data Entry Definition |
|----------|---------------------------|---|
| Fi1 | Budget TGF => PR | Grant budget by period in grant agreement or updated as approved by the Global Fund. Where grant budget periods are longer than dashboard reporting periods, budget should be allocated between dashboard periods in a manner appropriate to planned expenditure. This is recorded only at the PR level of the data-entry application. |
| Fi2 | Disbursement TGF => PR | Disbursements from the Global Fund to the PR received into the PR's bank account during the dashboard reporting period, or, where the Global Fund advises direct disbursements for VPP on behalf of the PR, in accordance with the timing advised by the Global Fund Secretariat. This is recorded only at the PR level of the data-entry application. |
| Fi3 | Expenditure PR only | Expenditure during the period for the PR alone. Disbursements to and expenditure by SRs are not to be included. This is recorded only at the PR level of the data-entry application. |
| Fi4 | Financial reports planned | Financial reports by SRs to the PR due during the reporting period. To ensure that only data validated by the PR are entered for this indicator, this information is entered only at the PR level, not at the SR level of the data-entry application. |
| Fi5 | Financial reports overdue | Financial reports by SRs to the PR due during the reporting period, which were not submitted with all required data on time. To ensure that only data validated by the PR are entered for this indicator, this information is entered only at the PR level, not at the SR level. |
| Fi6 | Audit actions fulfilled | Number of recommendations from the most recent annual external audit report of the PR which have been fulfilled. If the external audit of the PR includes subgrants to other |

| ObjectID | Data Item | Data Entry Definition |
|----------|---|--|
| | | implementing partners, that information may be included. This is recorded only at the PR level of the data-entry application. |
| Fi7 | Audit actions not fulfilled but within deadline | Number of recommendations from the most recent annual external audit report of the PR which have not been fulfilled but are within the deadline for fulfillment. If the external audit of the PR includes subgrants to other implementing partners, that information may be included. This is recorded only at the PR level of the data-entry application. |
| Fi8 | Audit actions not fulfilled and past the deadline | Number of recommendations from the most recent annual external audit report of the PR which have not been fulfilled and are beyond the deadline for fulfillment. If the external audit of the PR includes subgrants to other implementing partners, that information may be included. This is recorded only at the PR level of the data-entry application. |
| Ma9 | Supervision visits planned | Number of supervision visits by the PR planned for the reporting period. This information is recorded only at the PR level of the data-entry application. |
| Ma10 | Supervision visits not performed | Number of supervision visits by the PR planned for the reporting period, which have not been conducted. This information is recorded only at the PR level of the data-entry application. |
| Ma11 | Supervision actions recommended | Number of major recommendations for action from supervisory or monitoring visits advised up till the end of the reporting period. Recommendations may entail action by the PR and/or by SRs. Where PR action is entailed, the action should be recorded against the relevant SR, not the PR. To ensure that only data validated by the PR is entered for this indicator, this information is entered only at the PR level, not at the SR level of the data-entry application. |
| Ma12 | Supervision recommendations past due | Number of major recommendations for action advised from supportive supervisory or monitoring visits which are still outstanding as at the end of the reporting period. Recommendations may entail action by the PR and/or by SRs. To ensure that only data validated by the PR is entered for this indicator, this information is entered only at the PR level, not at the SR level of the data-entry application. |
| Ma13 | Programmatic reports planned | Programmatic reports by SRs to the PR due during the reporting period. To ensure that only data validated by the PR is entered for this indicator, this information is entered only at the PR level, not at the SR level of the data-entry application. |

| ObjectID | Data Item | Data Entry Definition |
|----------|---|--|
| Ma14 | Programmatic reports past due | Programmatic reports by SRs to the PR due during the reporting period, which were not submitted with all required data on time by the agreed deadline. To ensure that only data validated by the PR is entered for this indicator, this information is entered only at the PR level, not at the SR level of the data-entry application. |
| Ma15 | Key positions planned | <p>Number of key positions planned and budgeted for to fulfill the PR role under the grant as at the end of the reporting period. Usually these positions will be within the PR alone (often within a project management unit), however in those cases where the PR functions have been delegated to a lead SR it would be appropriate to include relevant key positions in lead SRs as well.</p> <p>(In such cases, data may be entered for the entire grant solely in the PR data entry sheet, or may be entered both within the PR data entry sheet for key positions within the PR alone, plus in the relevant SR data entry sheets, in which case the number shown for the grant will be an aggregate figure.)</p> <p>Typically the key positions will relate to management of the specific grant. In cases where the PR manages several grants and undertakes management in an integrated manner, however, it would be appropriate to record the total number of key positions for performance of the PR role for all grants managed by the integrated unit.</p> |
| Ma16 | Key positions Open | Number of key positions planned to fulfill the PR role under the grant, which are vacant at the end of the reporting period. This information may be entered either at the PR level only, or may be entered for whichever implementer (PR or SR) the key position is vacant in. |
| Ma17 | CPs fulfilled | Number of Conditions Precedent identified in the Grant Agreement, which have been fulfilled to the satisfaction of the Global Fund. This information is entered at the PR level only. |
| Ma18 | CPs not fulfilled but still within deadline | Number of Conditions Precedent identified in the Grant Agreement, which have not been fulfilled but are still within the deadline for fulfillment as specified in the Grant Agreement. This information is entered at the PR level only. |
| Ma19 | CPs not fulfilled and past the deadline | Number of Conditions Precedent identified in the Grant Agreement, which have not been fulfilled and are beyond the deadline for fulfillment as specified in the Grant Agreement. This information is entered at the PR level only. |

| ObjectID | Data Item | Data Entry Definition |
|----------|--|--|
| Ma20 | TBA + SC fulfilled | Total number of Time Bound Actions advised in Management Letters by the Global Fund Secretariat from routine performance review since grant commencement and Special Conditions identified in the Grant Agreement which have been fulfilled to the satisfaction of the Global Fund. This information is entered at the PR level only of the data-entry application. |
| Ma21 | TBA + SC not fulfilled but still within deadline | Total number of Time Bound Actions advised in Management Letters by the Global Fund Secretariat from routine performance review since grant commencement and Special Conditions identified in the Grant Agreement which have not been fulfilled but are still within the deadline for fulfillment as specified in the Management Letter or the Grant Agreement. This information is entered at the PR level only of the data-entry application. |
| Ma22 | TBA + SC not fulfilled and past the deadline | Total number of Time Bound Actions advised in Management Letters by the Global Fund Secretariat from routine performance review since grant commencement and Special Conditions identified in the Grant Agreement which have not been fulfilled and are beyond the deadline for fulfillment as specified in the Management Letter or Grant Agreement. This information is entered at the PR level only of the data-entry application. |
| Ma23 | Number of OIG directives fulfilled | Number of directives or recommendations arising from an OIG review of the grant were notified by the Global Fund Secretariat for action that have been fulfilled to the satisfaction of the Global Fund. This information is entered at the PR level only of the data-entry application. |
| Ma24 | OIG directives not fulfilled and still within deadline | Number of directives or recommendations arising from an OIG review of the grant which were notified by the Global Fund Secretariat for action that have not been fulfilled but are still within the deadline for fulfillment as specified in the Management Letter from the Global Fund. This information is entered at the PR level only of the data-entry application. |
| Ma25 | OIG directives not fulfilled and past deadline | Number of directives or recommendations arising from an OIG review of the grant that were notified by the Global Fund Secretariat for action that have not been fulfilled and are beyond the deadline for fulfillment as specified in the Management Letter from the Global Fund. This information is entered at the PR level only of the data-entry application. |

FINANCE AND GENERAL MANAGEMENT DATA ITEMS IN SR DATA ENTRY WORKSHEET

| ObjectID | Data Item | Data Entry Definition |
|----------|--------------------------------------|--|
| Fi1 | Budget PR => SR | Budget in the Sub-agreement between the PR with the individual SR for the relevant reporting period. This is recorded only in the SR level of the data-entry application |
| Fi2 | Disbursement PR => SR | Disbursement by the PR to the SR that was received into the SR bank account during the reporting period. This is recorded only in the SR level of the data-entry application. |
| Fi3 | Expenditure | Expenses reported by each SR including disbursements to their SSRs during the reporting period. This is recorded only in the SR level of the data-entry application. |
| Fi4 | Financial reports planned | Financial reports by SRs to the PR due during the reporting period. To ensure that only data validated by the PR are entered for this indicator, this information is entered only at the PR level, not at the SR level of the data-entry application. |
| Fi5 | Financial reports overdue | Financial reports by SRs to the PR due during the reporting period that were not submitted with all required data on time. To ensure that only data validated by the PR are entered for this indicator, this information is entered only at the PR level, not at the SR level of the data-entry application. |
| Ma11 | Supervision actions recommended | Number of major recommendations for action from supportive supervisory or monitoring visits advised up till the end of the reporting period. Recommendations may entail action by the PR and/or by SRs. To ensure that only data validated by the PR are entered for this indicator, this information is entered only at the PR level, not at the SR level of the data-entry application. |
| Ma12 | Supervision recommendations past due | Number of major recommendations for action advised from supportive supervisory or monitoring visits that are still outstanding at the end of the reporting period. Recommendations may entail action by the PR and/or by SRs. To ensure that only data validated by the PR are entered for this indicator, this information is entered only at the PR level, not at the SR level of the data-entry application. |
| Ma13 | Programmatic reports planned | Programmatic reports by SRs to the PR due during the reporting period. To ensure that only data validated by the PR are entered for this indicator, this information is entered |

| ObjectID | Data Item | Data Entry Definition |
|----------|-------------------------------|--|
| | | only at the PR level, not at the SR level of the data-entry application. |
| Ma14 | Programmatic reports past due | Programmatic reports by SRs to the PR due during the reporting period that were not submitted with all required data on time. To ensure that only data validated by the PR are entered for this indicator, this information is entered only at the PR level, not at the SR level of the data-entry application. |
| Ma15 | Key positions planned | Number of key positions planned to fulfill the PR role under the grant delegated to the SR at the end of the reporting period. This will only be recorded at the SR level of the data-entry application where the decision is made to collect disaggregated data for this item. |
| Ma16 | Key positions open | Number of key positions planned to fulfill the PR role under the grant delegated to the SR that are vacant at the end of the reporting period. This will be recorded at the level of the SR in the data-entry application where it is decided to collect disaggregated data for this item. |

PROCUREMENT AND SUPPLY MANAGEMENT DATA ITEMS IN PR OR SR DATA ENTRY WORKSHEET

| ObjectID | Data Item | Data Entry Definition |
|----------|--|--|
| PS26 | No. of health products ordered with a purchase order | Total products ordered using a purchase order. This data may be recorded at the PR level [if the Pooled Procurement Mechanism (PPM) is being used or if the PR is doing the procurement]. The data may also be recorded at the SR level if the Central Medical Stores (CMS) is doing the procurement. |
| PS27 | No. of health products procurement overdue | Total products overdue (not received at the agreed time) in a purchase order. This data may be recorded at the PR level (if PPM is being used or if the PR is the one doing the procurement) or at the SR level (if the CMS is doing the procurement). |
| PS28 | No. of product quality control tests performed | Number of quality control tests performed. This data may be recorded at the PR level (if PPM is being used or if the PR is the one doing the procurement) or at the SR level (if the CMS is doing the procurement). |

| ObjectID | Data Item | Data Entry Definition |
|----------|--|---|
| PS29 | Number of product quality control tests failed | Number of quality control tests failed. This can be recorded at the PR level (if PPM is being used or if the PR is the one doing the procurement) or at the SR level (if the Central Medical Stores is doing the procurement) of the data-entry application. |
| PS30 | Value of emergency orders | Value of emergency orders (orders made outside the schedule of procurement plan) within a certain period of time. This data may be recorded at the PR level (if PPM is being used or if the PR is the one doing the procurement) or at the SR level (if the CMS is doing the procurement). |
| PS31 | No. of treatment sites that placed orders | Number of sites that have placed an order to receive pharmaceuticals or health products. The PR is normally the entity which receives the orders and the entity which authorizes the Central Medical Stores to deliver to the sites. This information should be recorded at the PR level in the data-entry application. |
| PS32 | No. of treatment sites that did not receive orders in full and on time | Number of sites that have received what they ordered full and on time. The PR is normally the entity which receives the orders and the entity which authorizes the Central Medical Stores to deliver ordered items. The PR should also be the entity which receives feedback from the sites on whether the orders were received in full and on time. This information should be recorded at the PR level in the data-entry application. |
| PS33 | No. of sites providing treatment services | Number of sites providing treatment services (ART, TB, TB/HIV or Malaria). This information should be recorded at the PR or SR level in the data-entry application. |
| PS34 | No. of sites providing treatment services that have stockouts | Number of sites providing treatment services (ART, TB or Malaria) with stock outs. This information can be recorded at both the PR and SR levels in the data-entry application. |
| PS 35-54 | Actual stock level - Product [1-20] | Actual status of a particular product. This information could be recorded at either the PR and/or the SR level, depending on which entity stores the products. Typically the Central Medical Stores is the SR that stores pharmaceuticals or health products, although it could also be a non-governmental entity. This indicator is therefore entered at the PR or SR level, or both, if responsibility for storing pharmaceuticals and health products is shared among various entities. |
| PS55 | No. of sites expected to report on stocks | Number of sites expected to send reports on stock status. The PR receives these reports and therefore reports this information. This indicator is therefore only entered in the PR column in the data-entry application. |
| PS56 | No. of sites with stock reports past due | Number of sites expected to send reports on stock status that are late (past due) in sending the reports. The PR is the one who receive those reports so the PR is the one |

| ObjectID | Data Item | Data Entry Definition |
|----------|--|---|
| | | who should record this information. This indicator is therefore only entered in the PR column in the data-entry application. |
| PS57 | Pharma Budget | Budget approved by the Global Fund in the PSM plan for pharmaceuticals. Definition of pharmaceuticals is that which is used by the Global Fund. This information is recorded only at the PR level and is therefore only entered in the PR column in the data-entry application. |
| PS58 | Pharma expenditures | Budget spent for pharmaceuticals. The spent value is the value of all ordered items that have been “closed” and settled. This information is recorded at the PR level and is therefore only entered in the PR column in the data-entry application. |
| PS59 | Pharma commitment | Budget committed for pharmaceuticals. The committed value is the value of all open purchases that are committed to vendors through confirmed purchase orders. This is the value of all items that are “open” and not yet “received” (and therefore not yet accrued). This information is recorded in the PR column of the data-entry application and is therefore only entered in the PR column of the data-entry application. |
| PS60 | Health Products + Equipment Budget | Budget approved by the Global Fund for health products and equipment in the PSM plan for this grant. This information is recorded at the PR level and is therefore only entered in the PR column in the data-entry application. |
| PS61 | Health Products + equipment expenditures | Budget spent for health products and equipment as defined by the Global Fund. This information is recorded at the PR level and is therefore only entered in the PR column in the data-entry application. |
| PS62 | Health Products + equipment commitment | Budget committed for health products and equipment. This information is recorded at the PR level and is therefore only entered in the PR column in the data-entry application. |
| PS63 | PSM Cost Budget | Budget approved by the Global Fund in the PSM plan for PSM costs. Definition of PSM costs is that which is used by the Global Fund. This information is recorded at the PR level and is entered into the data-entry application by the PR. |
| PS64 | PSM Costs Expenditures | Budget spent for PSM costs as defined by the Global Fund. Such costs do not include costs of medicines, health products or equipment. Examples would be the costs of pallets or shelving for storage of medicines. This information is recorded only at the PR level and is therefore entered into the data-entry application by the PR. |

| ObjectID | Data Item | Data Entry Definition |
|----------|----------------------|--|
| PS65 | PSM Costs commitment | Budget committed for PSM costs. Definition of PSM costs is that which is used by The Global Fund. This information is recorded only at the PR level and is therefore entered into the data-entry application by the PR. |

ANNEX 6. ADDITIONAL INFORMATION ON CALCULATING INDICATOR P6 ON AVAILABILITY OF STOCKS

This indicator is a **comparison of the current stock¹ of a specific product** (medicine in single, fixed-dose combination, bed nets, diagnostic kits, etc., expressed in number of months of treatment available), **with the safety or buffer stock²** (in months) established in the procurement and supply management (PSM) plan approved by the Global Fund for the same product.

This indicator will be calculated for the respective disease or component to which the grant is related (tuberculosis, HIV/AIDS, TB/HIV, malaria, health systems strengthening). The “products” selected for each disease component may include medicines, condoms, bed nets, and rapid diagnostic tests, necessary for program implementation. The PR may select up to 20 products that are purchased with the particular grant. It is strongly recommended that international nonproprietary names be used for each product, rather than brand names. Pediatric products should be presented and calculated separately than adult products.

Two examples are provided below on how to calculate this indicator—one is a regimen of antiretroviral treatment, and the second is a regimen of malaria treatment. Note that for tuberculosis (TB) grants, if the PR is not the national TB program, it will need to coordinate with the national TB program to determine the products to be displayed in the dashboard for DOTS programs, MDR TB treatment programs and for treatment of adverse drug reactions.

STEPS TO CALCULATING INDICATOR P6 FOR HIV/AIDS PRODUCTS

In the case of HIV/AIDS, products are managed by number of units, e.g., tablets. If the grant is not purchasing antiretroviral drugs but is procuring other products to be used in the program (e.g., diagnostic tests for HIV, medicines to treat sexually transmitted diseases, medicines for opportunistic infections or medicines to treat adverse drug reactions), the PR should prioritize selection of medicines likely to have problems with stock outs or overstocks, as the list of medicines could exceed the twenty spaces provided in the PR Management Dashboard

¹ “Current stock” is defined as the physical stock on hand that does not expire within the next three months.

² “Safety stock” is defined as “the amount of stock kept in reserve in case an item is unavailable from the supplier or for a sudden increase in demand. MSH [Management Sciences for Health]/WHO, *Managing Drug Supply*, 2012, Chapter 20, p. 11.

Calculation by disease area

HIV/AIDS

Product example: (AZT/3TC/NVP) fixed dose combination

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| <p>Step A: Calculate monthly need. In this case, the daily need per patient for this product is 2 tablets per day. One month's supply per patient = 2 tablets x 30 days = 60 tablets.</p> | <p>Explanation: This is the conversion of the number of units/tablets/pills needed per day into the units/tablets/pills needed per month for one patient. It is obtained by multiplying the number of pills/units of product needed per day by 30 for a single patient. The estimate of number of pills/kits needs to consider the dosage in which the product is purchased (for example, if a patient needs 500 mg/day, but pills are purchased in formulations of 250 mg, the number of pills needed per patient will be 2/day). If the entire treatment comes in one package (e.g., Coartem or TB kits), then this conversion is not necessary and one kit or package will be allocated per patient as a full treatment.</p> <p>Data source: The number of pills/kits/units of the product needed for a patient in one day are obtained from the Standard Treatment Guidelines for the disease. Standard treatment guidelines indicate the medicine (or medicines) to be used as first-line treatment, doses of each medicine (in individual presentation, co-packaged, or fixed-dose combination), or the number of kits when the full treatment comes in one single pack (e.g., artemisinin- based combination therapies (ACTs), or TB kits).</p> |
| <p>Step B: Define number of patients under the given protocol or regimen. In this case we have 1,000 patients on this antiretroviral treatment (ART) regimen.</p> | <p>Explanation: The number used is the total number of patients in treatment at present or the number of patients expected to require treatment per month.</p> <p>It is not the intention that this estimate account for incremental increases in the number of patients per month (for chronic diseases) that could result from increases in detection rate that will add patients to the ones currently in treatment if the disease is chronic.</p> <p>Data source: National disease program or national quantification committee to provide number of patients for each treatment protocol.</p> |
| <p>Step C: Calculate total monthly needs as (A) x (B) = 60 x 1,000 = 60,000 tablets</p> | <p>Note: This is the total number of units (in this case tablets) that the program needs to have on hand each month in order to serve the total number of patients in the program. This number is obtained by multiplying the results of steps A and B described above.</p> |
| <p>Step D: Define current stock level. The current stock level is found to be 280,000 pills.</p> | <p>Note: Current stock in the central warehouse (or at the highest level of the system) is defined as physical stock on hand that does not expire within the next three months.</p> |

Data sources:

The information on how many units are still available are obtained from the central warehouse of the Central Medical Stores. The data should be obtained periodically, if not monthly. The decision to set up this indicator at the highest level of the system is because it is uncertain that there will be information at other levels. At least knowing what remains at central level allows decision makers to reorder the product as soon as possible. If products are delivered directly to regions, however, the data for this number should be obtained from regional warehouses.

In general, if the PR is the entity doing the procurement, it should know when the products arrived and will have the information on hand. Also, the PR is expected to have information on which products have been distributed according to a distribution plan, which should allow the PR to estimate how much product remains at the central level warehouse.

If the warehouse maintains an electronic inventory system, the information will be readily available through reports produced by the system. If the electronic inventory system cannot produce reports, the PR could visit the warehouse with the list of the products that are purchased and determine current stock levels from the following data sources:

- Inventory cards, usually located in the shelves where the boxes of products are kept
- Entry and exit records in the warehouse that usually contain the balance of these activities
- A count of the boxes (accounting for the units or packages in each box) of the products

The PR should verify that only batches that still have at least three months of shelf life remaining are counted as current stock. Products with three months or less of shelf life should be used immediately. The Essential Medicines Program of the country and the national disease program shall determine the number of months of shelf life to ensure drug availability if the three month minimum shelf life default amount is not applicable. The three month default may not apply for example, when the product has a long lead time. Lead time is the interval required to complete a full procurement cycle. What if it takes three months to distribute the product from central to regional warehouses? Products arriving in country with three months of shelf life are as good as useless, as they will expire by the time they reach the regional level. Therefore using a default minimum expiration of six months for current stock would be more logical.

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| <p>Step E: Calculate available months of stock as (D)/(C) = 280,000 pills/60,000 pills per month = 4.7 months of stock available</p> <p>This number is entered for each product into the PR master data sheet of the data-entry application.</p> | <p>Note: This is obtained by dividing the current stock by the quantities of the product needed to serve all patients on treatment. This number is entered for each product into the PR master data sheet of the data-entry application.</p> |
| <p>Step F: Determine the safety stock. For this product, the National HIV/AIDS program has agreed with the National Essential Medicines program and the Central Medical Stores that the safety stock for this product is 2 months. The 2-month safety stock level for this product was written into the grant’s PSM plan that was approved by the Global Fund.</p> <p>This number is entered for each product in the data-entry application at the set-up phase –when the dashboard is being configured for the grant.</p> | <p>Note: Safety stock is measured in months of stock. As mentioned above, safety stock is the amount of stock that is held in reserve in case the supplier is not able to resupply the item on time, or to cater for unanticipated increases in demand for the product. Safety stock is determined by multiplying the average monthly consumption of the product (adjusted for stock outs) by the lead time in months (for the projected supplier or for the worst case scenario). It is important to note that each product mentioned in a PSM plan that is submitted to the Global Fund for approval must have a stated safety stock. Once the PSM plan is approved, the safety stock stated in the approved PSM plan is the number that should be entered for that product into the data-entry application at configuration.</p> <p>Data source: PSM plan approved by the Global Fund, National HIV/AIDS program, Central Medical Stores, National Essential Medicines program.</p> |

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| <p>Step G: Enter the current stock for the product into the data-entry application. The dashboard application automates the comparison of the current stock with the safety stock for the respective product. In this example, we can compare current stock to the safety stock by dividing (E) by (F)—4.7 divided by 2—which gives 2.35. This result would show as a green alert in the dashboard. This is because the PR currently has between two and four times the amount of safety stock available. The dashboard will therefore show the color green for this product.</p> | <p>Note: The comparison between current stock and safety stock is obtained by comparing the current stock (in months) to the safety stock (in months) entered for each respective product at configuration of the data-entry application.</p> <p>When the current stock entered in the data-entry application is sent to the dashboard application, the dashboard application compares the two numbers. If the current stock is less than or equal the safety stock, an alert will show in the dashboard (red). If the current stock is no more than twice the level of safety stock, the dashboard shows a yellow alert. If the current stock is at least twice the level of safety stock but less than four times the safety stock, this is considered to be a desirable result and a green alert will appear. When the current stock exceeds four times the safety stock, a purple alert shows, indicating overstock and, hence, risk of product expiry.</p> <p>Below is a summary of how to interpret the four possible colors that appear beside each product whose data is entered into the PR Management Dashboard.</p> <ul style="list-style-type: none">• Red: : When current stock is equal to or less than the level of safety stock• Yellow: When current stock is greater than the safety stock but less than twice the amount of safety stock• Green: When current stock equals between twice and four times the amount of safety stock• Purple: When current stock equals greater than four times the amount of safety stock |
|--|---|

STEPS TO CALCULATING INDICATOR P6 LEVEL FOR MALARIA PRODUCTS

Malaria programs manage products by number of treatments, not by individual units/pills. The table below summarizes how to determine the difference between current stock and safety stock for artesunate amodiaquine, an artemisinin combination treatment.

| Calculation by disease area | |
|--|---|
| Malaria | |
| Product example: Artesunate Amodiaquine (AS/AQ) | |
| <p>Step A: Calculate current stock. In this case, we will use a current stock level of 1, 200 AS/AQ treatments.</p> | <p>Note: Current stock in central warehouse (or at the highest level of the system) is defined as physical stock on hand that does not expire within the next three months.</p> <p>Data sources:</p> <p>The information on how many units are still available are obtained from the central warehouse of the Central Medical Stores. The data should be obtained periodically, if not monthly. The decision to set up this indicator at the highest level of the system is because it is uncertain that there will be information at other levels. At least knowing what remains at central level allows decision-making to reorder the product as soon as possible. If products are delivered directly to regions, however, the data for this number should be obtained from regional warehouses.</p> <p>In general, if the PR is the entity doing the procurement, it should know when the products arrived and will have the information on hand. Also, the PR is expected to have information on which products have been distributed according to a distribution plan, which should allow the PR to estimate how much product remains at the central level warehouse.</p> <p>If the warehouse maintains an electronic inventory system, the information will be readily available through reports produced by the system. If the electronic inventory system cannot produce reports, the PR could visit the warehouse with the list of the products that are purchased and determine current stock levels from the following data sources:</p> <ul style="list-style-type: none"> • Inventory cards, usually located in the shelves where the boxes of products are kept • Entry and exit records in the warehouse that usually contain the balance of these activities • A count of the boxes (accounting for the units or packages in each box) of the products |

| | |
|---|--|
| | <p>The PR should verify that only batches that still have at least three months of shelf life remaining are counted as current stock. Products with three months or less of shelf life should be used immediately. The Essential Medicines Program of the country and the national disease program shall determine the number of months of shelf life to ensure drug availability if the three month minimum shelf life default amount is not applicable. The three month default may not apply for example, when the product has a long lead time. Lead time is the interval required to complete a full procurement cycle. What if it takes three months to distribute the product from central to regional warehouses? Products arriving in country with three months of shelf life are as good as useless, since they will expire by the time they reach the regional level. Therefore using a default minimum expiration of six months for current stock would be more logical.</p> |
| <p>Step B: Determine expected monthly use. In this case we will assume an expected monthly use of 300 treatments.</p> <p>Expected number of patients for one month = Number of treatments</p> <p>Please note that this number reflects the average monthly consumption (AMC)</p> | <p>Note: Because malaria is an acute illness, the “expected monthly use” is an estimation of how many malaria cases are expected each month, which is normally based on historical epidemiological data.</p> <p>Total quantities of the product needed for the number of patients expected per month is equal to the expected number of patients for one month, since 1 patient = 1 treatment.</p> |
| <p>Step C: Calculate number of months of stock available as $(A)/(B) = 1,200/300 = 4$ months This number is entered for each product into the PR master data sheet of the data-entry application. Data can be entered for up to 20</p> | <p>Note: This is obtained by dividing the current stock by the quantities of the product needed to treat patients in one month. This number is entered for each product into the PR master data sheet of the data-entry application. Data can be entered for up to 20 products.</p> |

| | |
|---|---|
| <p>products.</p> | |
| <p>Step D: Establish the safety stock for AS/AQ. In this case, the National Malaria Program has decided that the safety stock for AS/AQ equals 2 months of stock.</p> <p>This number is entered for each product in the data-entry application when the dashboard is being configured.</p> | <p>Note: Safety stock is measured in months of stock. As mentioned above, safety stock is the amount of stock that is held in reserve in case the supplier is not able to resupply the item on time, or to cater for unanticipated increases in demand for the product. Safety stock is determined by multiplying the average monthly consumption of the product (adjusted for stock outs) by the lead time in months (for the projected supplier or for the worst case scenario). This number is entered for each product in the data-entry application when the dashboard is being configured.</p> <p>Data source: The entity within the health system responsible for supply chain management (e.g., the Central Medical Stores) coordinates with the national disease program and the national essential medicines program to define the safety stock for various products. In many countries, the safety stock is measured in units of the product, so it is necessary to convert these units into equivalent months of treatment by converting the level of safety stock into months of treatment which is done by dividing the safety stock in units by the amount needed for one month of treatment.</p> |
| <p>Step E: Enter the current stock for the product into the data-entry application. The dashboard application automates the comparison of the current stock with the safety stock for the respective product. In this example, we can compare current stock to the safety stock by dividing (C) by (D)–4 divided by 2—which gives us 2. This result would show as a green alert in the dashboard. This is because the PR currently has between two and four months of safety stock available. The dashboard will therefore show the colour green for this product.</p> | <p>Note: The comparison between current and safety stock is obtained by comparing the current stock to the safety stock entered for each respective product at configuration of the data-entry application.</p> <p>When the current stock entered in the data-entry application is sent to the dashboard application, the dashboard application compares the two numbers. If the current stock is less than or equal to the safety stock, an alert will show in the dashboard (red). If the current stock is no more than twice the level of safety stock, the dashboard shows a yellow alert. If the current stock is at least twice the level of safety stock but less than four times the safety stock, this is considered to be a desirable result and a green alert will appear. When the current stock exceed four times the safety stock, a purple alert shows, indicating overstock and hence, risk of product expiry.</p> <ul style="list-style-type: none"> • Red: When current stock is equal to or less than the level of safety stock • Yellow: When current stock is greater than the safety stock but less than twice the amount of safety stock • Green: When current stock equals between twice and four times the amount of safety stock • Purple: When current stock equals greater than four times the amount of safety stock. <i>What should be PR do in response to dashboard results?</i> <p>When the dashboard shows red, this should be interpreted as meaning that the number of treatments in stock in the central warehouse is below the level considered safe to ensure continuation of treatment without interruption. In this situation, the PR may want to request information from lower levels of the supply chain to ensure that there is product available until the central level gets the next shipment. If insufficient product is available to last until the next order, the PR would need to place an emergency shipment.</p> |

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| | <p>If the dashboard shows yellow, the PR should accelerate arrival of the next shipment of the product if possible, or place an order if none is in the pipeline. If the dashboard shows purple, the PR should first ensure that sufficient stock levels are available at lower levels of the supply chain and that there are no regional imbalances in availability of the product before deciding to delay further shipments from arriving in country.</p> |
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ANNEX 7. STANDARD OUTPUT AND COVERAGE PROGRAMMATIC INDICATORS OF THE GLOBAL FUND (AS OF OCTOBER 2014)[‡]

TUBERCULOSIS

| Indicator no. from Global Fund website | Indicator no. from PR dashboard data master file | TB Care and Prevention |
|--|--|--|
| DOTS-1a | Pr116 | Number of notified cases of all forms of TB (i.e., bacteriologically confirmed plus clinically diagnosed) |
| DOTS-1b | Pr118 | Number of notified cases of bacteriologically confirmed TB |
| DOTS-2a | Pr120 | Treatment success rate for all forms of TB (Number & %) |
| DOTS-2b | Pr122 | Treatment success rate for bacteriologically confirmed TB cases (Number & %) |
| DOTS-3 | Pr124 | Number of laboratories performing smear microscopy that show adequate performance on EQA (Number & %) |
| DOTS-4 | Pr126 | Number of reporting units reporting no stock-outs of anti-TB drugs on the last day of the quarter (Number & %) |
| DOTS-5 | Pr128 | Number of children <5 in contact with TB patients who began IPT |
| DOTS-6 | Pr130 | Number of TB cases (all forms) notified among key affected populations/high risk groups |
| DOTS-7a-c | Pr132 | Notified TB cases (all forms) contributed by non-NTP providers (Number & %) |

[‡] Please note that the Global Fund also has outcome and impact indicators in its standard indicators. However, these indicators are not measured as often (usually every 1-3 years), and as such, are not included in this list of standard indicators. The standard output and coverage indicators in this Annex are more conducive to routine program monitoring than are impact or outcome indicators. Should the PR wish to substitute a few of its outcome or impact indicators for the list of output or coverage indicators, it may do so by adding these indicators to the data-entry application by following the instructions in the manual.

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| Indicatr no. from Global Fund website | Indicator no. from PR dashboard data master file | MDR TB |
|---|---|--|
| MDR-TB-1 | Pr134 | Number of previously treated TB patients receiving DST (bacteriologically positive cases only) (Number & %) |
| MDR-TB-2 | Pr136 | Number of bacteriologically confirmed, drug resistant TB cases (RR-TB and/or MDR-TB) notified |
| MDR-TB-3 | Pr138 Pr140 | Number of cases with drug resistant TB (RR-TB and/or MDR-TB) that began second-line treatment (bacteriologically confirmed) Number of cases with drug resistant TB (RR-TB and/or MDR-TB) that began second-line treatment (presumptive cases) |
| MDR-TB-4 | Pr142 | Number of cases with drug resistant TB (RR-TB and/or MDR-TB) started on treatment for MDR-TB who were lost to follow up at six months (Number & %) |
| MDR-TB-5 | Pr144 | Number of DST laboratories showing adequate performance on External Quality Assurance (Number & %) |
| Indicator no. from Global Fund website | Indicator no. from PR dashboard data master file | TB/HIV |
| TB/HIV-1 | Pr146 | Number of TB patients with known HIV status |
| TB/HIV- | Pr148 | Number of HIV-positive TB patients given anti-retroviral therapy during TB treatment (Number & %) |
| TB/HIV-3 | Pr150 | Number of HIV-positive patients who were screened for TB in HIV care or treatment settings (Number & %) |
| TB/HIV-4 | Pr152 | Number of HIV-positive patients newly enrolled in HIV care settings starting IPT (Number & %) |
| M&E-1 | Pr154 | Number of HMIS or other routine reporting units submitting timely reports according to national guidelines (Number & %) |

MALARIA

| Indicator no. from Global Fund website | Indicator no. from PR dashboard data master file | Malaria Prevention |
|--|--|--|
| VC-4 | Pr156 Pr158 Pr160 | Proportion of targeted risk groups receiving ITNs (pregnant women) Proportion of targeted risk groups receiving ITNs (children<5 yrs) Proportion of targeted risk groups receiving ITNs (other risk groups) |
| VC-2 | Pr162 | Proportion of population at risk potentially covered by long lasting insecticidal nets (LLINs) distributed (Number & %) |
| VC-1 | Pr164 | Number of LLINs distributed - mass campaigns and continuous distribution (Number & %) |
| VC-5 | Pr166 | Number of households in targeted areas that received indoor residual spraying (IRS) during the reporting period (Number & %) |
| VC-6 | Pr168 | Proportion of population protected by IRS within the last 12 months |
| Indicator no. from Global Fund website | Indicator no. from PR dashboard data master file | Case Management |
| CM-1a | Pr170 Pr172 Pr174 | Number of suspected malaria cases that receive a parasitological test (by public sector health facilities) (Number & %) Number of suspected malaria cases that receive a parasitological test (by private sector sites) (Number & %) Number of suspected malaria cases that receive a parasitological test (in the community) (Number & %) |
| CM-2a-c | Pr176 | Number of confirmed malaria cases that received first-line antimalarial treatment according to national policy (by public sector health facilities) (Number & %) |

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|---|---|---|
| | Pr178 Pr180 | Number of confirmed malaria cases that received first-line antimalarial treatment according to national policy (by private sector sites) (Number & %) Number of confirmed malaria cases that received first-line antimalarial treatment according to national policy (in the community) (Number & %) |
| CM-3 | Pr182 Pr184 Pr186 | Number of estimated malaria cases (presumed and confirmed) that received first line antimalarial treatment (by public sector health facilities) (Number & %) Number of estimated malaria cases (presumed and confirmed) that received first line antimalarial treatment (by private sector sites) (Number & %) Number of estimated malaria cases (presumed and confirmed) that received first line antimalarial treatment (in the community) (Number & %) |
| CM-4 | Pr188 Pr190 | Number of health facilities without stock-outs of key commodities (Number & %) Number of community health workers (CHW) without stock outs of key commodities (Number & %) |
| Indicator no. from Global Fund website | Indicator no. from PR dashboard data master file | Prevention of Malaria in pregnancy |
| SPI-1 | Pr192 | Number of women attending antenatal clinics who received three or more doses of intermittent preventive treatment (IPT) for malaria (Number & %) |
| Indicator no. from Global Fund website | Indicator no. from PR dashboard data master file | Surveillance in elimination setting |
| CM-5 | Pr194 | Number of confirmed cases fully investigated (including case investigation form, focus investigation form and active case detection) |

| | | |
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| | Pr196 | Number of malaria foci fully investigated (malaria focus investigation form completed, including data from an entomological investigation) and registered (on register, with maps of each focus) (Number & %) |
| Indicator no. from Global Fund website | Indicator no. from PR dashboard data master file | Health Information System and Monitoring and evaluation (M&E) |
| M&E-1 | Pr198 | Number of HMIS or other routine reporting units submitting timely reports according to national guidelines (Number & %) |
| Does not appear in the Global Fund application | Pr200 | Number of reports received over the reports expected (Number & %) |

HIV/AIDS

| | | |
|---|---|---|
| Indicator no. from Global Fund website | Indicator no. from PR dashboard data master file | Treatment, care and support (for PLHAs) |
| TCS-1 | Pr66 | Number of adults and children currently receiving antiretroviral therapy among all adults and children living with HIV (Number & %) |
| TCS-2 | Pr68 | Number of people living with HIV that initiated ART with CD4 count of <200 cells/mm ³ |
| TCS-3 | Pr70 | Number of people that initiated ART, with an undetectable viral load at 12 months (<1000 copies/ml) |

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| TCS-4 | Pr72 | Number of health facilities with stock-outs of at least one required antiretroviral drug (Number & %) |
| TCS-5 | Pr74 | Proportion of undernourished PLHIV that received therapeutic or supplementary food at any point during the reporting period |
| Indicator no. from Global Fund website | Indicator no. from PR dashboard data master file | TB/HIV |
| TB/HIV -1 | Pr76 | Number of TB patients with known HIV status (Number & %) |
| TB/HIV-2 | Pr78 | Number of HIV-positive TB patients given anti-retroviral therapy during TB treatment (Number & %) |
| TB/HIV-3 | Pr80 | Number of HIV-positive patients who were screened for TB in HIV care or treatment settings (Number & %) |
| TB/HIV-4 | Pr82 | Number of HIV-positive patients newly enrolled in HIV care settings starting IPT (Number & %) |
| Indicator no. from Global Fund website | Indicator no. from PR dashboard data master file | Prevention of mother-to-child transmission (PMTCT) |
| PMTCT-1 | Pr 86 | Number of pregnant women who know their HIV status (Number & %) |
| PMTCT-2 | Pr 84 | Number of HIV-positive pregnant women who received antiretrovirals to reduce the risk of mother-to-child transmission (Number & %) |
| PMTCT-3 | Pr 88 | Number of infants born to HIV-positive women receiving a virological test for HIV within 2 months of birth (Number & %) |

| Indicator no. from Global Fund website | Indicator no. from PR dashboard data master file | Prevention among Key Populations (KPs) |
|--|--|--|
| KP-1a-e | Pr 92 | Number of key populations reached with HIV prevention programmes- defined package of services (sex workers/MSM/TG/PWID/others) (Number & %) |
| KP-2a-e | Pr 94 | Number of KPs reached with HIV prevention programmes- individual and/or smaller group level interventions (Number & %) |
| KP-3a-e | Pr 96 | Number of KPs that received an HIV test during the reporting period and who know their results (MSM/TG/sex workers/PWID/others) (Number & %) |
| KP-4 | Pr98 | Number of needles and syringes distributed per person who inject drugs per year by needle and syringe programmes (Number) |
| KP-5 | Pr100 | Number of individuals receiving OST who received treatment for at least 6 months (Number & %) |
| | | Prevention among general populations |
| GP-1 | Pr102 | Number of women and men aged 15+ who received an HIV test and know their results (Number) |
| GP-2 | Pr104 | Number of Individuals from targeted population reached through community outreach with standardized HIV prevention interventions |
| GP-3 | Pr106 | Number of new individuals who test positive for HIV, enrolled in care (pre-ART or ART) services (Number & %) |
| GP-4 | Pr90 | Number of antenatal care attendees tested for syphilis at first antenatal care visit (Number & %) |
| GP-5 | Pr108 | Number of male circumcisions performed according to national standards (Number) |

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| Indicator no. from Global Fund website | Indicator no. from PR dashboard data master file | Adolescents and Youth |
| YP-1 | Pr110 | Number of young people aged 10–24 years reached by life skills–based HIV education in schools (Number & %) |
| | | Health Information System and M&E |
| M&E-1 | Pr112 | Number of HMIS or other routine reporting units submitting timely reports according to national guidelines (Number & %) |
| Indicator no. from Global Fund website | | Development synergies |
| GP-6- | Pr114 | Number of orphaned and vulnerable children aged 0–17 years whose households received free basic external support in caring for the child according to national guidelines (Number & %) |

HEALTH SYSTEMS STRENGTHENING

| Indicator no. from Global Fund website | Indicator no. from PR dashboard data master file | Service Delivery |
|--|--|--|
| SD-1 | Pr202 | Number & distribution of health facilities per 10,000 population |
| SD-2 | Pr204 | Number of outpatients visits per 10,000 population |
| Indicator no. from Global Fund website | Indicator no. from PR dashboard data master file | Health Workforce |
| HW-1 | Pr206 Pr208 | Number of health workers per 10,000 population (report on community health workers as applicable) Number of community health workers per 10,000 |
| HW-2 | Pr210 Pr212 Pr214 Pr216 | Distribution of health workers (by specialization) Distribution of health workers (by region) Distribution of health workers (by place of work) Distribution of health workers (by sex) |
| HW-3 | Pr218 | Number of health workers newly recruited at primary health care facilities in the past 12 months, expressed as a percentage of planned recruitment targets |
| HW-4 | Pr220 | Annual rate of retention of service providers at primary health care facilities |

| | | |
|---|---|--|
| Indicator no. from Global Fund website | Indicator no. from PR dashboard data master file | Procurement and Supply chain management |
| PSM-1 | Pr222 | Percentage of health facilities reporting no stock-outs of essential medicines |
| Indicator no. from Global Fund website | Indicator no. from PR dashboard data master file | Monitoring and Evaluation |
| M&E-1 | Pr224 | Percentage of HMIS or other routine reporting units submitting timely reports according to national guidelines |
| M&E-3 | Pr226 | Percentage of deaths registered (as reported by civil or sample registration systems, hospitals, community-based reporting systems) among the total deaths for the same period and geographical region |
| Indicator no. from Global Fund website | Indicator no. from PR dashboard data master file | Healthcare Financing |
| HF-1 | Pr228 | Government expenditure on health as percentage of general government expenditure |

| Indicator no. from PR dashboard data master file | Community Systems Strengthening |
|--|--|
| Pr230 | Number of new CHW recruited in past 12 month (Number) |
| Pr232 | Annual retention rate Community Based Organization (CBO) service providers |

The Global Fund is working on an M&E framework for grants that include community systems strengthening (CSS), human rights and similar areas for which coverage indicators are difficult to measure over a short period. The CSS indicators in this list are illustrative only; PRs will work with Global Fund country teams to agree on CSS indicators suitable for their context.