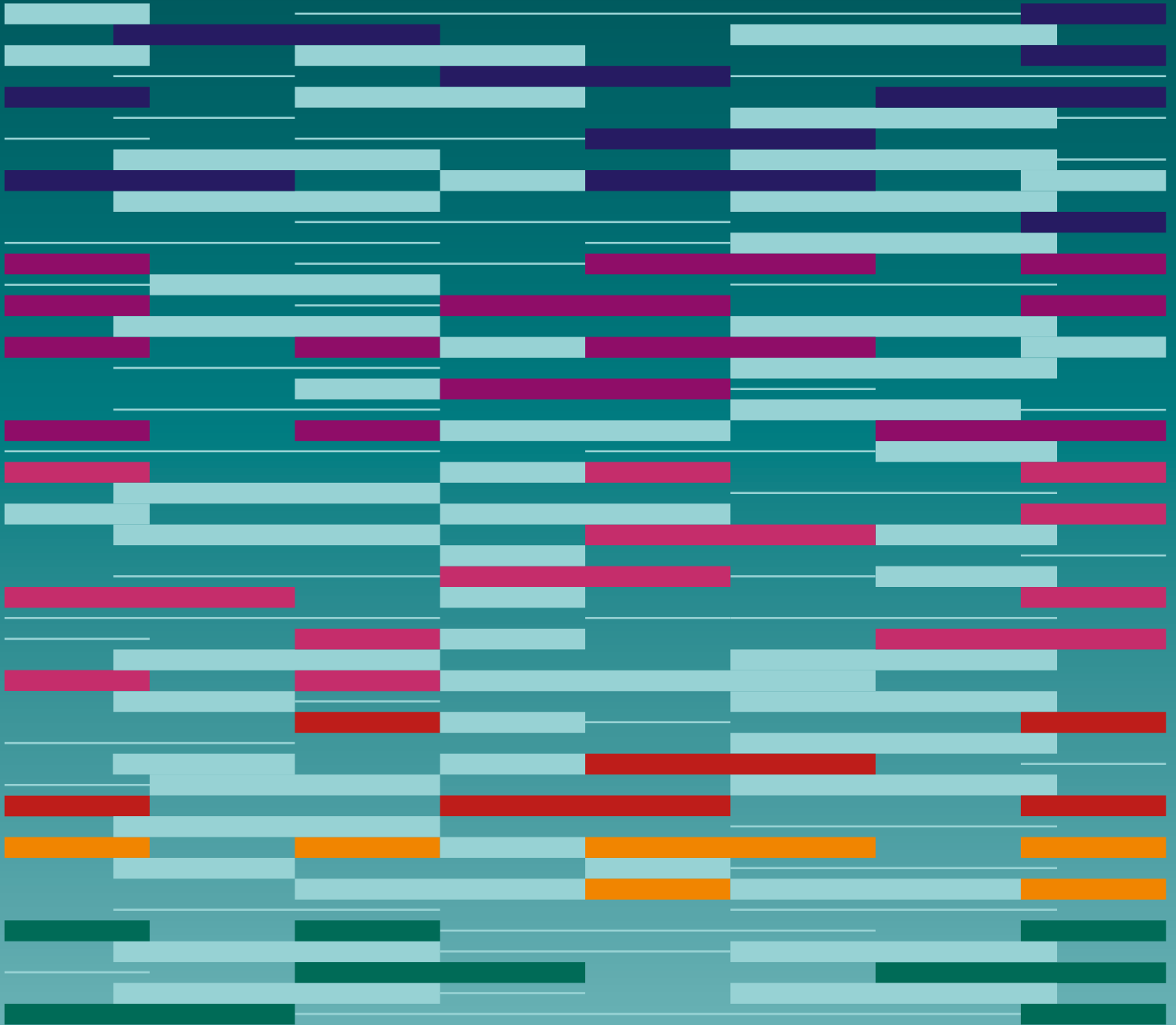


THE COUNTRY COORDINATING MECHANISM GRANT OVERSIGHT TOOL: SET-UP AND MAINTENANCE GUIDE



FEBRUARY 2010



TABLE OF CONTENTS

CHAPTER 1: INTRODUCTION	4
1.1 Purpose	4
1.2 Grant oversight dashboards for Country Coordinating Mechanism oversight	4
1.3 Grant oversight dashboards: background	4

CHAPTER 2: USE OF THIS GUIDE – THE DASHBOARD PROCESS	6
2.1 What's in this manual?	6
2.2 Introducing grant oversight dashboards	6
2.2.1 Selecting grants for Country Coordinating Mechanism oversight dashboards	6
2.2.2 Validating dashboards for use by the Country Coordinating Mechanism	6
2.2.3 Assigning ongoing responsibility for dashboard tasks	6

CHAPTER 3: GETTING STARTED: USING THE GENERIC DASHBOARD TEMPLATE TO SET UP A GRANT DASHBOARD	8
3.1 The generic Country Coordinating Mechanism grant oversight template	8
3.2 The generic grant oversight dashboard	8
3.3 Before starting data entry	8
3.3.1 Selecting Indicators	8
3.3.2 Making decisions about other indicators	9
3.4 Deciding on the grant oversight dashboard reporting period	9

CHAPTER 4: CUSTOMIZING THE GENERIC TEMPLATE FOR EACH GRANT DASHBOARD	10
4.1 Protecting and unprotecting worksheets	10
4.2 The data entry sheet	10
4.2.1 The data entry sheet: grant information	11
4.2.2 Information reporting period	11
4.3 The data entry sheet: finance information	12
4.4 The data entry sheet: management information	14
4.4.1 Updating the drop-down menu lists	16
4.4.2 Conditional formatting	17
4.5 The data entry sheet: programmatic information	17
4.6 The grant detail page: adding the country flag	18
4.7 Consistency checks	18

CHAPTER 5: THE GRANT DASHBOARD PAGES IN DETAIL	19
5.1 Menu	19
5.2 Grant detail	19
5.3 Finance	20
5.4 Management	21
5.5 Programmatic	23
5.6 Recommendations	24
5.7 Actions	25

CHAPTER 6: MAINTAINING THE DASHBOARD	26
6.1 Updating the oversight tool and naming the versions	26
6.2 Printing and distribution	26
6.3 Presenting the oversight tool during Country Coordinating Mechanism meetings	28
6.4 Optional: posting the dashboards on a website	28
6.5 Archiving periodic Country Coordinating Mechanism reports	28

ANNEX 1: GRANT DASHBOARD INDICATORS	29
ANNEX 2: MANAGEMENT INDICATOR M6	32
ANNEX 3: GRANT DASHBOARD PROGRAMMATIC INDICATORS TABLE	34

Providing oversight to grant implementation is considered an essential function of the Country Coordinating Mechanism (CCM) and is important to ensure that the grants are implemented as planned and reach people in need of interventions. The core principle of oversight is to ensure that resources are being used efficiently and effectively for the benefit of the country. Oversight requires the CCM to understand how the grants are working, follow progress and challenges, and make recommendations to the Principal Recipient (PR) on improving performance. The CCM is responsible for understanding grant implementation at the macro level, but does not need to immerse itself in the micro level, which is the responsibility of the PR.

However, CCM members often have busy schedules and the information they have to review is considerable, since CCMs are often overseeing a number of grants, leading to a situation of information overload.

The CCM oversight tool is an instrument created to support CCMs in their oversight activities. It is designed to provide user-friendly, timely and well-synthesized information to the CCM, enabling CCM members to make informed decisions based on valid data.¹

1.1 PURPOSE

The CCM Grant Dashboard Set-up and Maintenance Guide has been prepared for CCMs, PRs, technical support experts and other partners created to support Global Fund grant oversight. It provides step-by-step instructions for setting up individual grant dashboards using the generic CCM grant oversight template and for maintaining those individual dashboards for ongoing oversight by the CCM. The guide explains the process beginning with data gathering and customization of the generic template to the presentation of the dashboards and through to the final archiving of dashboard reports.

1.2 DASHBOARDS FOR GRANT OVERSIGHT

Dashboards are summary reports that communicate key information to CCMs in a concise and visual way and reduce the amount of information CCM members must review for each grant: three pages display financial, management, and programmatic indicators, while two additional pages are provided for the CCM and its oversight body² to make comments, propose recommendations and record decisions about actions to investigate and solve problems blocking a grant's performance.

The grant oversight tool provides information using a series of charts, graphs and tables that are easy to interpret. Because the dashboard is updated each reporting cycle, the CCM can follow trends over time. The CCM is also able to make comparisons of data between grants since financial and management indicators are the same for all dashboards.

Finally, grant dashboards can enable busy CCM members to focus on the most important indicators of implementation and performance.

Thus, the purpose of an oversight tool is to:

- Provide CCM members with key financial, management and programmatic information for grant oversight.
- Facilitate the oversight process through the visual/graphic presentation of key data.
- Provide signals through the use of standardized color schemes and thresholds to flag warning signs for areas that require attention.
- Support CCM members to ensure they are better informed to make decisions about investigation, problem solving and follow-up.
- Stimulate dialogue between CCM members and PRs about management and performance.

Dashboards alone cannot improve CCM oversight. If a CCM is interested in improving capacity to enable it to carry out more effective oversight, it may wish to consider the following:

1. A CCM substructure and procedures for oversight.
2. Timely and appropriate information of good quality.
3. A minimum investment of human and financial resources.
4. Capacity-building sessions for CCM members to improve their skills to analyzing information, investigating problems, and identifying solutions.
5. Dialogue with the PRs.

If your CCM is interested in improving its grant oversight responsibilities, it may wish to consider introducing grant dashboards.

1.3 GRANT OVERSIGHT DASHBOARDS: BACKGROUND

Like the instrument panel on the dashboard of a car, CCM dashboards present a quick, timely and comprehensible overview of a grant implementation status. Instead of speed, engine revolutions per minute, engine temperature, oil and petrol levels, the CCM dashboard displays key financial, management and programmatic information about grant implementation. With CCM dashboards, which present key grant performance indicators in consistent formats, CCM members can easily spot changes and trends. And like the dashboard inside a car, CCM dashboards display the equivalent of warning lights that come up when there is a problem. It uses colored lights, graphs, bars, and numbers to signal information such as expenditures, medication stock levels, number of staff hired by the PR and performance against grant agreement targets. The CCM would then **interpret** those signals. When a **warning signal** appears—a red light or a low bar—the CCM may want to ask questions of the PR or **investigate** to determine whether a problem exists and work with the PR to **decide what course of action to take** to solve the problem or accelerate slow performance.

¹ This guide is complementary to the CCM Grant Dashboard User's Guide which provides suggestions to CCMs on how to use dashboards for analysis of grant performance as part of an oversight strengthening process. This second guide will also be made available by the Global Fund on its website.

² For the purpose of this guide this is referred to as an oversight committee.

The private sector has been using dashboards to monitor the performance of businesses or projects for some time. In 2006, Eduardo Samayoa, a staff member of Management Sciences for Health (MSH) in Guatemala who had worked with the private sector, decided to experiment with dashboards for Global Fund grants. His first dashboards were designed for NicaSalud, a PR in Nicaragua.³ These dashboards were originally intended for grant management purposes rather than grant oversight. Following his lead in 2007, other MSH colleagues and consultants adapted the Nicaragua dashboard for use as an oversight tool by the CCMs in Nigeria, Tanzania, and Zanzibar. The report on this work can be found on the Global Fund website at: www.theglobalfund.org/documents/ccm/LessonsLearnedReport-MSHDashboard.pdf.

Since late 2007, under the Grant Management Solutions project led by MSH, grant dashboards have been extended to all grants in Nigeria and to the CCM in Honduras, with variants for PR management in Indonesia, Honduras and the Philippines. Results from Nicaragua and Tanzania were presented at the 2008 HIV/AIDS Implementers' Conference in Kampala, Uganda, and at the 2008 International AIDS Society biannual conference in Mexico City, Mexico.⁴

In 2008, the Global Fund and the Grant Management Solution's project agreed to conduct a pilot to test methodology that would aid CCM members to strengthen their ability to oversee a nation's entire portfolio of grants, including introduction of a generic dashboard template for customization to specific grants. This pilot was carried out from February through September 2009, with the gracious collaboration of the CCMs and PRs in Ghana, Mali, Mongolia, Morocco, Namibia and Peru.⁵ We thank them for their participation. The full feasibility report for this pilot will be posted on the Global Fund website.

What's in the Global Fund website package?

The CCM grant oversight dashboard tool package contains four items that are the results of this background work:⁶

The generic grant oversight dashboard template, a workbook in Microsoft Excel® (compatible with both versions 2003 and 2007)

- The CCM grant oversight dashboard set-up and maintenance guide
- The executive summary of the CCM oversight strengthening and grant dashboard feasibility pilot report
- Technical support for CCM oversight strengthening and introduction of grant dashboards: a summary of the support process for CCMs.

³ The Leadership, Management and Sustainability program is financed through USAID Cooperative Agreement number GPO-A-00-05-00024-00, as part of the U.S. government technical assistance effort for grants of the Global Fund to Fight AIDS, Tuberculosis and Malaria.

⁴ Moshi A, Heise K, Wood T, et al J, "Strengthening Global Fund Structures and Processes: Experience From Tanzania." Panel presentation, 2008 HIV/AIDS Implementers' Conference, Kampala, Uganda. Pechevis M, Wilson G, Severo C, Stinson W, Perry C, Samayoa S, "Strengthening Management and Oversight of Global Fund Grants: Lessons Learned from a Pilot Experience with Executive Dashboards in Tanzania." Panel presentation, 2008 HIV/AIDS Implementers' Conference, Kampala, Uganda. Samayoa E, Decima E, Severo C, Bass J, Perry C, "NicaSalud's Early Warning System Global Fund Grant Dashboard: Management Strengthening of Nicaragua's Principal Recipient Through Improved Reporting and Accountability." Poster presentation, 2008 IAC Global AIDS Conference, Mexico City, Mexico.

⁵ Work was also begun in Madagascar but was interrupted by national events. We thank the Country Coordinating Mechanism of Madagascar for its interest in the pilot.

⁶ A fifth document, the *CCM Grant Dashboard User's Guide*, will be added to the package in the coming months.

CHAPTER 2: USE OF THIS GUIDE

THE DASHBOARD PROCESS

2.1 WHAT IS IN THIS MANUAL?

The CCM Grant Dashboard Set-up and Maintenance Guide is a practical “how to” manual for use **during introduction** of grant dashboards and for ongoing use throughout the oversight cycle.

This manual is divided into six chapters as follows:

- Chapter 1: Introduction (Primary users: all stakeholders)
- Chapter 2: How to Use This Manual
- Chapter 3: Getting Started: Using the Generic Grant Oversight Dashboard Template
- Chapter 4: Customizing Grant Oversight Dashboards
- Chapter 5: The Grant Oversight Dashboard in Detail
- Chapter 6: Maintaining the Grant Dashboards

Three annexes provide additional information:

- Annex 1: Grant Oversight Dashboard Indicators
- Annex 2: Pharmaceutical Procurement Indicator M6
- Annex 3: Grant Oversight Dashboard Programmatic Indicators Table

The guide can be printed in either color or black and white on A4 paper. It is recommended to review the generic template on the screen of a computer using Microsoft Excel® 2003 or 2007 to view formulae and links.

2.2 INTRODUCING OVERSIGHT DASHBOARDS

A CCM strengthening its oversight process may be focusing on various areas. It may be in the process of defining new oversight roles and procedures. It may be building the skills of CCM members and of the CCM secretariat staff to carry out oversight. It may be mobilizing experts and other resources to enhance its ability to analyze information, identify and resolve problems. It may be improving its dialogue with the PRs regarding implementation and results. Often, the CCM will be working with technical support providers - internal or external consultants - over a period of months to carry out these reforms.

As part of these efforts, the introduction of grant dashboards will involve defining new responsibilities and assigning those responsibilities to specific persons within the local Global Fund community. In general, these responsibilities can be divided into two stages, each of which has several steps:

- Stage 1: Setting up the grant dashboards initially and modifying them for different phases within the grant life cycle
- Stage 2: Ongoing maintenance and production of grant dashboards for oversight activities.

At this initial stage of dashboard introduction, CCMs may create a working group or task force to guide this work. The CCM will probably ask the PRs to identify monitoring and evaluation (M&E) officers or program managers to participate in the set-up discussions and contribute information on the grants. The CCM may also mobilize technical experts and development partners to participate in work sessions to select indicators and discuss draft dashboards. The key suggested steps for this stage are:

- The decision about which grants will receive a dashboard
- The selection of programmatic indicators for each grant dashboard from the grant's performance framework (this step is described fully in Chapter 3)
- The review of draft or preliminary dashboards
- The validation of the grant dashboards
- Delegation of the dashboard maintenance tasks to specific staff or consultants (see also Chapter 6 for detailed tasks).

(For more detailed suggestions about strengthening CCM oversight and introducing grant dashboards, please see the *CCM Grant Dashboard User's Guide*.)

2.2.1 Selecting grants for CCM oversight dashboards

The CCM, in consultation with the PRs, will select the grants for which dashboards will be prepared. Given the level of effort required to create a customized dashboard for a particular grant, they are most useful for grants that are in their first or second year of either Phase 1 or Phase 2 of the Global Fund grant life cycle.

There should be a one-to-one correspondence between dashboards and grant agreements (i.e. there should be a unique dashboard for every PR and for every grant).

The CCM may wish to use the following discussion guidelines to decide which grants will receive dashboards:

2.2.2 Validating dashboards for use by the CCM

Once grant oversight dashboards have been developed, the CCM will formally review and validate them during a regular or extraordinary meeting and document the validation in the CCM meeting minutes.

2.2.3 Assigning ongoing responsibility for dashboard tasks

The CCM assigns responsibilities for updating, printing, presenting, and archiving grant oversight dashboards to available in-country staff or service providers. For the purpose of this guide they are referred to as “dashboard technicians”. Dashboard technicians may be monitoring and evaluation officers or program officers of the PRs or sub-recipients or sub-sub-recipients. They may be qualified staff of the CCM secretariat, contracted service providers or staff of technical support partners who have agreed to provide this help. Each CCM will make its own arrangement with the PRs for carrying out these tasks. The following box contains sample terms of reference for these tasks.

DISCUSSION GUIDELINES FOR ESTABLISHING A GRANT OVERSIGHT DASHBOARD

Questions	Grants	No. of PRs	Create a Dashboard?
Which grants are in Phase 1 or Year 3 (i.e. beginning of Phase 2)?	<i>List grants</i>	<i>List PRs.</i>	Dashboards may be created for these grants.
Which grants are in Year 4 or Year 5 (end of Phase 2) and will not go to RCC?	<i>List grants</i>	<i>List PRs.</i>	Dashboards probably not needed.
Which grants in Year 4 or Year 5 may go to the Rolling Continuation Channel?	<i>List grants</i>	<i>List PRs.</i>	May want to create a dashboard
Which new grants are about to be signed and have final performance frameworks?	<i>List grants</i>	<i>List PRs</i>	Dashboards may be created for these grants if all final documentation for the grant is available and the final targets and indicators have been approved by the Global Fund.
Are there any newly approved proposals for which pre-signature arrangements are still underway?	<i>List diseases</i>	<i>List PRs</i>	Not yet ready for dashboards.

THE DASHBOARD TECHNICIAN: ONGOING TASKS

The CCM delegates the tasks of data entry, data checking, and transmission of the grant oversight dashboard to one or more available in-country staff who act as dashboard technicians. The options suggested below should support decision-making on the selection of dashboard technicians:

1. CCM, in consultation with PRs, could agree to engage a service provider as a dashboard technician for all oversight tools. The service provider may be a civil society organization or a nongovernmental organization (e.g. in Tanzania a sub-recipient has been retained as service provider for dashboards).
2. CCM, in consultation with PRs, could agree to assign the role of a dashboard technician to its M&E officers, for example the person who produces the ongoing progress update/disbursement request (PU/DR).
3. A development partner or private sector collaborator may agree to take on the task of dashboard technician as part of its contribution to the CCM or in response to a request from the CCM.

Formal terms of reference for the dashboard technicians may include (for example):

- a) Periodic data collection from PRs.
- b) Periodic data input and data checks for completeness and coherence.
- c) Periodic back-up and safeguards of the dashboard tool and data.
- d) Transmission of the periodic dashboards to the CCM secretariat according to timelines.
- e) Support for oversight committee meetings on dashboard use.
- f) Support for orientation of new members of the CCM to use grant oversight dashboards.
- g) Support for modification of dashboards for new phases of the grants.
- h) Support for creation of additional dashboards for new grants.

Some of these tasks may also be assigned to the CCM secretariat.

Suggested qualifications for selecting staff to assume the responsibilities of a dashboard technician include:

- Competency in Microsoft Excel®, file safeguarding, internet use.
- Training in M&E or program oversight/performance monitoring.
- Access to financial and technical program staff of the PR.
- Equipped with a computer with Microsoft Excel® 2003 or 2007, connected to the internet and capable of storing periodic data files.

CHAPTER 3: GETTING STARTED: USING THE GENERIC DASHBOARD TEMPLATE TO SET UP A GRANT DASHBOARD

This chapter is addressed to the persons who have been given the responsibility of setting up an oversight dashboard for a grant.

Setting up a dashboard for a grant involves:

- Downloading the generic grant dashboard template from the Global Fund website www.theglobalfund.org/en/ccm/
- Saving a copy of the template for each grant, giving the copy a new name
- Selecting programmatic indicators
- Making decisions about management indicators
- Obtaining information from the PR
- Entering data in the customized dashboard for each grant
- Checking the dashboard data for consistency

This chapter outlines these processes in detail.

DASHBOARD RESOURCE REQUIREMENTS

The minimum resources needed for a successful dashboard set-up are as follows:

- An individual with competency in Microsoft Excel® and, if possible, knowledge of M&E.
- A computer with Microsoft Excel® 2003 or 2007 and internet access.
- A (color) printer

3.1 THE GENERIC TEMPLATE FOR COUNTRY COORDINATING MECHANISM GRANT OVERSIGHT

The generic CCM grant dashboard template is a Microsoft Excel® based workbook ready to be customized for any Global Fund grant.

The workbook is compatible with both Microsoft Excel® 2003 and 2007 and can be downloaded from the Global Fund website.

The template is generic in that it does not contain any grant-specific data. It must be customized for each grant according to the process described in this chapter. The template already contains the financial and management indicators for which data will be entered. However, the programmatic indicators must be selected and entered as described below. Furthermore, when the template is opened, and before any data is entered, no graphics will appear on the dashboard pages. Once data is entered, the graphics will appear automatically.

3.2 THE GENERIC GRANT OVERSIGHT DASHBOARD

The generic grant oversight template contains nine worksheets (the worksheet labels appear in **bold** below):

- A **Menu** sheet with active buttons (links to all other pages).
- A **list of indicators** sheet that describes all indicators, measurements, and

sources of information. Whereas the finance and management indicators are already defined, definitions for the grant-specific programmatic indicators must be entered when setting up the dashboard (see Annex 1 and Annex 3).

- A **data entry** sheet to be completed at each dashboard period
- A **grant detail** sheet that provides key grant information. This sheet is automatically generated from the information entered in the data entry sheet.
- Detailed **financial, programmatic** and **management** graphic display sheets that are automatically generated from the information in the data entry page. These are the key dashboard pages that are reviewed.
- A **recommendations** sheet (linked with the financial, programmatic, and management pages) where recommendations for solutions to problems are recorded.
- An **actions** sheet with the recommendations, linked actions, timelines and responsibilities for resolution. This is where CCM action decision points are to be entered.

3.3 BEFORE STARTING DATA ENTRY

Before data entry can begin for each grant, decisions must be made about which indicators to use and how best to adapt the indicators to ensure they are specific and relevant to the grants. These decisions are best made through a group discussion process, including representatives of the CCM, of the PR and of other stakeholders involved in grant oversight.

This guide offers examples of and recommendations for key indicators based upon pilot study lessons learned. Of course CCMs may choose different indicators than presented here, but these are preferred in a spirit of saving time and resources.

The dashboard contains financial, management, and programmatic indicators. The **financial** and **management indicators** are pre-defined in the generic CCM grant oversight dashboard. All that is required when setting up the dashboard for a grant is to collect and insert grant-specific data for these indicators.

3.3.1 Selecting programmatic indicators

Programmatic indicators are specific to each grant and are listed in the “Performance Framework” of the grant agreement. The grant oversight dashboard contains a subset of up to ten programmatic indicators from the performance framework that can be selected to inform the CCM about the programmatic grant performance.

The CCM oversight committee, in consultation with the PR, should select the indicators that it considers most important to be included in the dashboard. It is recommended that, if the performance framework has any or several “Top 10” indicators⁷ for the disease, they should all be selected for the dashboard. The Top 10 indicators are weighted more heavily in the Global Fund’s rating of the grant.

Of the selected performance indicators, the oversight committee is encouraged to highlight the three most important indicators for presentation in greater detail. These indicators will receive a special display on the dashboard to track trends in performance.

The CCM may decide that, for some specific grants, some indicators other than the top 10 may be crucial to monitoring the progress of the grant. In such instances, these indicators may be also included.

3.3.2 Making decisions about other indicators

In addition to choosing programmatic indicators, decisions need to be made about three other indicators.⁸

- **M2: Status of key management positions:** A decision must be made about the number of PR management positions that are considered key to grant implementation. Thus, the total number of key positions that are planned for the grant will have to be decided.
- **M4: Progress on contractual arrangements with sub-recipients:** The expected number of days for disbursement to and reporting from sub-recipients and sub-sub-recipients will have to be defined in consultation with the PR.
- **M6: Difference between current and safety stock:** This indicator is associated with the supply of priority health products and pharmaceuticals. The current and safety stock of the four most important or critical health products and pharmaceuticals will be tracked on the management page of the dashboard. Such products could be essential drugs or products whose supply is challenging. Before data entry can begin, a decision has to be made about the following:
 - Selection of the four (4) products (or product combinations) to be monitored.
 - The unit amount required per patient per day.
 - The “safety stock” for the product expressed in months of treatment.
 - Level at which the product can be considered in overstock.
- **F4: Latest PR reporting and disbursement cycle:** For this indicator, a decision has to be made about the expected number of days that the PR should take to send disbursements to the sub-recipients, after receiving a disbursement from the Global Fund.

For the first dashboard, not all data for the selected indicators may be available. In particular, data for indicator M6 might not be available in such detail. However, it is one of the most important indicators that will help prevent stock-outs or overstocks.

3.4 DECIDING ON REPORTING PERIODS

The decision on how often to update and present dashboards is taken for each individual grant. While several PRs might report to the Global Fund on a six-monthly basis, for purposes of oversight, the CCM might prefer to receive dashboard reports and convene the oversight committee every quarter.

⁷ This refers to the Global Fund's Top 10 Indicators for routine Global Fund reporting and for medium-term outcome and impact measurement. See www.theglobalfund.org/en/me/guidelines_tools/?lang=en#ti for details.

⁸ See Annex 1 for detailed indicator definitions. These indicators are also explained in Section 5.3, Entering data.

CHAPTER 4: CUSTOMIZING THE GENERIC TEMPLATE FOR EACH GRANT DASHBOARD

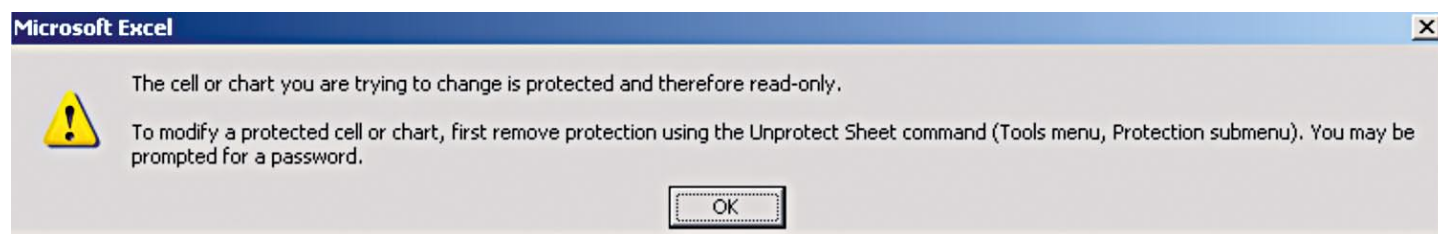
This chapter provides instructions for customizing the generic template for a single grant. The instructions can be carried out as many times as needed to create dashboards for all grants in a country or region.

Once the grant-specific indicators have been selected as described in Chapter 3, customization of the generic dashboard can begin. A copy of the generic dashboard should be saved using a naming convention that is easily understood by all users, such as the name of the grant and the date that customization begins. All changes should be made to that single copy, which becomes the grant oversight dashboard.

4.1 PROTECTING AND UNPROTECTING WORKSHEETS

All worksheets in the generic oversight dashboard workbook are protected. This protection limits data entry to only certain specific fields, thereby safeguarding information or data.

If the user attempts to enter information in protected cells, Microsoft Excel® shows the following error message:



Although we do not recommend unprotecting sheets, the user may need to change titles or important information. To do so, please follow the instructions below:

Unprotecting the worksheet

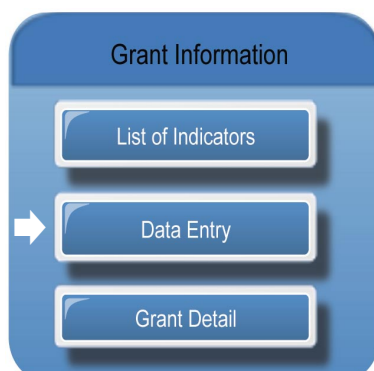
1. Go to the **Tools** menu / select **Unprotect / Unprotect Sheet**. (In Microsoft Excel® 2007, go to **Review**, and select **Unprotect Sheet**).
2. Enter the password: DB (in uppercase letters, this is the password for all protected sheets).
3. Click on OK.

Protecting the worksheet

1. Go to the **Tools** menu / select **Protect / Protect Sheet**.
2. Enter the password: DB (in uppercase letters)
3. Confirm password: DB (in uppercase letters)
4. Click on OK.

4.2 THE DATA ENTRY SHEET

To start populating the dashboard click on "Data Entry"



The data entry sheet is used to capture the data related to grant details, financial, management and programmatic indicators.

Please note that only colored cells will allow data entry. Other cells are protected. Data entered into the colored cells automatically generate graphs and charts throughout the other worksheet, including the grant detail, finance, management, and programmatic display pages.

Please refer to the list of indicators in Annex 1 and 2 if unsure about what data should be entered.

The different sections of the data entry page are described below in order to facilitate the data entry process.

4.2.1 The data entry sheet: grant information

Grant information			
Country:	Fictitia	Title of the Grant:	Fighting AIDS in Fictitia
Grant No.:	FIC-910-G01-H	Component:	HIV / AIDS
Principal Recipient:	Fictician MoH	Total Funding:	10,000,000
Start Date:	1-Jan-10	Round:	Round 9
Latest Rating:	B1	Phase:	Phase 1
		Local Fund Agent:	CA (Crown Agents)
		Fund Portfolio Manager:	Michael Olszak

In this section the user will enter grant-specific details as specified in the grant agreement or on the Global Fund website (www.theglobalfund.org/en). Most of the information will not change throughout the life of the grant. If available, the latest grant rating is to be updated every reporting cycle.⁹ Information such as the Local Fund Agent and the Fund Portfolio Manager is to be entered once and updated if a change occurs.

Country: Select the country or regional coordinating mechanisms from the drop-down menu.

Title of the Grant: Enter the program title of the grant as it appears in the grant agreement.

Grant No.: Enter the identification number for this grant as it appears in the grant agreement.

Component: Select the component for the grant from the drop-down menu.

Total Funding: Enter the approved funding for the phase of the grant as it appears in the grant agreement.

Principal Recipient: Enter the name of the PR.

Round: Enter the round under which the grant was approved. For example, Round 5.

Phase: From the drop-down menu select Phase 1, Phase 2 or RCC as appropriate.

Start Date: Enter the official start date of this grant as it appears in the grant agreement. The format for the date is dd/mm/yy (e.g. 21/Jul/08).

Local Fund Agent: Enter the name of the organization designated by the Global Fund to serve as the Local Fund Agent in the country.

Latest Rating: Enter the latest grant rating assigned by the Global Fund to the grant (this is available from the Grant Performance Report on the country page of the Global Fund's website).

Fund Portfolio Manager: Enter the name of the Global Fund Portfolio Manager.

4.2.2 Information reporting period

Information reporting period			
Report Period:	P4	From:	1-Jan-11
		To:	1-Apr-11
		Date of entry of information:	1-May-11
Prepared by:	John Smith, CCM Secretariat		

The following reporting period information should be entered each time the dashboard tool is updated.

Report Period: Enter the period for which data are being reported. For example, enter P4 if the oversight period is period 4. There are a maximum of 12 periods listed here. It is possible to change the drop-down menu list to start at a later period. This may occur, for example, if the grant is in Phase 2 and the CCM would like to start the oversight dashboard from period 9 (P9) to coincide with the PU/DR periods. To customize the drop-down menu list see section 4.1 on unprotecting worksheets and section 4.5.1 on updating lists for details.

From: Enter the start date of the dashboard reporting period.

To: Enter the end date of the dashboard reporting period.

Date of entry of information: Enter the date on which data entry for the dashboard was finished. If the dashboard data were entered over several days, enter the last day on which data was entered.

Prepared by: Enter the name of the person and/or institution that prepared the dashboard.

⁹ The latest rating is available from the Fund Portfolio Manager and/or from the Grant Performance Report on the Global Fund website.

CUSTOMIZING THE GENERIC TEMPLATE

4.3 THE DATA ENTRY SHEET: FINANCE INFORMATION

Enter financial data in the brown cells only. See Annex 1 for detailed definitions, measurement, and data sources of indicators.

F1: BUDGET AND DISBURSEMENTS BY GLOBAL FUND

Currency of the grant: Select the currency of the grant (\$ or €) as it appears in the grant agreement from the drop-down menu. (The currency will automatically appear, once selected as described above).

This indicator shows the cumulative budgeted amounts against actual Global Fund disbursements.

The period for which the dashboard is being prepared will be automatically highlighted.

Budget: Enter the grant budget for all periods of the current grant phase. These data can be entered at the start of the phase for all periods.

Disbursements by Global Fund: Enter the actual amount disbursed by the Global Fund to the PR during each period.

Cumulative budget and cumulative disbursements: You cannot enter data here. These data cells are protected and automatically sum the budget and disbursements based on pre-defined formulae. The graph F1 on the finance page is generated from these data.

F2: BUDGET AND ACTUAL EXPENDITURES BY GRANT OBJECTIVE

This table consists of three columns: "Grant Objective", "Cumulative Budget" and "Cumulative Expenditures"

Grant Objectives: Enter the objectives for the grant, which are available from the performance framework of the grant agreement. For some grants, the objectives are described in great detail; it is recommended to briefly summarize them such that each objective appears in the graph F2 on the finance page.

Cumulative Budget: Enter the cumulative budget (up to and including the dashboard period) for each objective for the grant.

Cumulative Expenditures: Enter cumulative expenditures for each objective up to the dashboard period, including committed amounts for each objective.

Ensure that figures have been entered correctly and that cumulative budget data between F1 and F2 match. If there is a mismatch the warning box on the sheet will turn red.

Disbursed by Global Fund: This row has two cells for entering information. In the column "Prior to reporting period", please enter the total disbursements that the Global Fund has made prior to the period being analyzed. In column "Current period" please enter the disbursements made for the grant oversight period.

F2: BUDGET AND ACTUAL EXPENDITURES BY GRANT OBJECTIVE		
Grant Objective	Cumulative Budget (in \$)	Cumulative Expenditures (in \$)
Access to ARV	2,500,000	2,500,000
Test for HIV	1,000,000	1,200,000
Distribution of condoms	2,500,000	2,100,000
Improve coordination	1,000,000	1,000,000
TOTAL	7,000,000	6,800,000

F3: DISBURSEMENTS AND EXPENDITURES

PR expenditure and disbursement: In the column “Prior to reporting period” please enter all cumulative expenditures and disbursements made by the PR prior to the period being analyzed. Enter all line items that had been budgeted, including the purchase of drugs and equipment. As part of expenditures, also consider the amounts for which the PR has made commitments. The same concept must be applied in the column “Reporting period”, but only for the period being analyzed. The last column sums the cumulative amounts prior to this period and the amount during the current period. This cell is protected.

Disbursed to sub-recipients: In the column “Prior to reporting period” enter the cumulative disbursements that the PR has made to sub-recip-

ients. In the column “Reporting period” enter the disbursements that the PR has made to sub-recipients during the oversight tool period. The last column sums the cumulative amounts prior to this period and the amount disbursed during the current period. This cell is protected.

Sub-recipient expenditures: In the column “Prior to reporting period” enter all the cumulative expenditures that sub-recipients have made prior to the period being analyzed, and in the column “Reporting period” enter those that apply to the dashboard period. The last column sums the cumulative amounts prior to this period and the amount during the current period. This cell is protected.

F3: DISBURSEMENTS AND EXPENDITURES			
	Prior to reporting period	Current reporting period	Total spent and disbursement (in \$)
Disbursed by Global Fund	3,800,000	3,000,000	6,800,000
PR expenditure and disbursement	3,800,000	3,000,000	6,800,000
Disbursed to SRs	2,500,000	2,000,000	2,100,000
SR expenditures	2,300,000	1,800,000	1,000,000

F4: LATEST PRINCIPAL RECIPIENT REPORTING AND DISBURSEMENT CYCLE

This table measures the number of days it took the PR to send the PU/DR and to receive the latest disbursement from the Global Fund.

Days taken to submit final PU/DR to LFA: In the column “Expected (days)” enter the expected number of calendar days (as stipulated in the grant agreement) it should take the PR to send a final PU/DR to the LFA. In the column “Actual (days)”, enter the actual number of days it took to carry out these actions.

Days taken for disbursement to reach PR Enter the expected and actual number of calendar days it took the PR to receive the latest disbursement from the Global Fund in its account.

Days taken for disbursement to reach sub-recipients: Enter the number of days expected for the disbursement to reach sub-recipients from the PR. For “Actual (days)”, enter the average of the number of days it took for the latest disbursement to reach all sub-recipients, since all sub-recipients usually do not receive a disbursement on the same date.

F4: LATEST PRINCIPAL RECIPIENT REPORTING AND DISBURSEMENT CYCLE		
Last fund disbursement: Number of calendar days		
	Expected (days)	Actual (days)
Days taken to submit final PU/DR to LFA	45	55
Days taken for disbursement to reach PR	45	45
Days taken for disbursement to reach SRs	12	20

CUSTOMIZING THE GENERIC TEMPLATE

4.4 THE DATA ENTRY SHEET: MANAGEMENT INFORMATION

Enter management data in the blue-colored cells only.

See Annex 1 for detailed definitions, measurement, and data sources indicators.

See Annex 2 for details on how to calculate indicator M6.

M1: STATUS OF CONDITIONS PRECEDENT AND TIME-BOUND ACTIONS

Conditions precedent (CPs): Enter the number of CPs the PR has fulfilled; the number of CPs that remain unfulfilled but are within the deadline, and the number of CPs that remain unfulfilled and are past the deadline.

Time-bound actions (TBAs): Enter the number of TBAs the PR has fulfilled; the number of TBAs that remain unfulfilled but are within the deadline; and the number of TBAs that remain unfulfilled and are past the deadline.

The total column is protected and sums all CPs and TBAs on the grant that must be fulfilled in order to receive disbursements.

M1: STATUS OF CONDITIONS PRECEDENT AND TIME-BOUND ACTIONS				
	Fulfilled	Not fulfilled, but within deadline	Not fulfilled, and past the deadline	Total
Conditions precedents (CPs)	5	3	2	10
Time Bound Actions (TBAs)	4	1	1	6

M2: STATUS OF KEY PR MANAGEMENT POSITIONS

PMU (program management unit): Enter the number of key management positions planned for the grant; the number of

positions that are currently filled, and the number of positions that are currently vacant.

M2: STATUS OF KEY PR MANAGEMENT POSITIONS			
	Planned	Filled	Vacant
PMU	8	6	2

M3: CONTRACTUAL ARRANGEMENTS (SUB-RECIPIENTS)

Enter the number of organizations that have been identified as potential sub-recipients to participate in the grant; record the number of organizations that have been assessed in order to participate in the project; record the number

of sub-recipients that have been approved; indicate the number of sub-recipients that have already signed contracts or memorandums of understanding and enter the number of sub-recipients that receive funds.

M3: CONTRACTUAL ARRANGEMENTS					
	Identified	Assessed	Approved	Signed	Receiving Funding
SRs	22	15	11	9	7

M4: NUMBER OF COMPLETE REPORTS RECEIVED ON TIME

From the sub-sub-recipients to the sub-recipients and/or from sub-recipients to the PR:

Enter the number of complete reports received in time. (It is important that the reports meet the conditions for “complete” (with attachments and supporting documents) and “on time.”)

Enter the total number of reports the PR or lead sub-recipient expects to receive on the basis of agreements with sub-recipients or sub-sub-recipients.

M4: NUMBER OF COMPLETE REPORTS RECEIVED ON TIME				
	Date	# Expected	# received	Pending
SSR to SR	1-Mar-10	13	8	5
SRs to PR	1-Mar-10	7	4	3

M5: BUDGET AND PROCUREMENT OF HEALTH PRODUCTS AND HEALTH EQUIPMENT, MEDICINES AND PHARMACEUTICALS

Budget Approved: Enter the total budget approved for purchasing medications and health products. These quantities should include category 4 and category 5 of the Global Fund expenditure categories¹⁰ in the grant phase’s budget as approved by the Global Fund. Because this budget cannot be divided for each period, the *total value approved for the phase* should be entered under each period.

Expenditures: Enter the amount spent in that particular period on category 4 and category 5.

The other three rows are protected and display the cumulative figures (budget approved, obligations, expenditures) which are automatically calculated from the data entered. They are cumulative up to the dashboard period.

Obligations: Enter the amount of the budget that has been obligated but has not yet been spent in that period.

M5: BUDGET AND PROCUREMENT OF HEALTH PRODUCTS AND HEALTH EQUIPMENT, MEDICINES AND PHARMACEUTICALS					
	P1	P2	P3	P4	P5
Budget Approved*	705,003	321	32	32	321
Obligations	75,062	321	321	321	32
Expenditures	680,000	600,543	134,657	234,654	321
Budget Approved*	705,324	705,324	705,356	705,388	705,709
Obligations cumulative	75,062	75,383	76,704	76,025	76,057
Expenditures cumulative	680,000	1,280,543	1,415,200	1,649,854	1,650,175

*Includes only category 4 and 5 of Enhanced Financial Reporting (health products and health equipment; medicines and pharmaceuticals)

¹⁰ Category 4: Health Products and Health Equipment; Category 5: Medicines and Pharmaceutical Products

CUSTOMIZING THE GENERIC TEMPLATE

M6: DIFFERENCE BETWEEN CURRENT AND SAFETY STOCK

For a detailed description of this indicator, see Annex 2. Please ensure that all data are available before beginning to enter data.

Component: Select the component for the grant from the drop-down menu.

Products: Based on the decision of the CCM oversight committee, select up to four pharmaceutical products (drugs, bed nets, etc.). Enter one product per row.

The drop-down menu list might not contain the products chosen. In order to add the product to the drop-down menu list, go to the setup sheet and update the list for products (see section 4.5.1 on updating drop-down lists below for details).

Number of tablets per patient per day: Enter the unit amount of product required per patient per day. If it is not a tablet, enter the unit amount. Enter these amounts for each of the four products in the corresponding cells.

Total patients in treatment: Enter the total number of patients in treatment. Enter these numbers for each of the four products in the corresponding cells.

For malaria, enter the number of patients expected to receive treatment.

Current stock in central warehouse: Enter the current level of stock of the product already in the country or region.

Level of safety stock: Enter the level established as safety stock expressed in months of treatment for the product, as decided by the disease program and/or central medical stores.

M6: DIFFERENCE BETWEEN CURRENT AND SAFETY STOCK							
Component	Products	(1) Number of tablets per patients per day (Review country treatment guidelines)	(2 = 1 x 30) Monthly treatment (Tablets per patient x 30 days)	(3) Total patients in treatment	(4 = 2 x 3) Total # tab/pills required for all patients per month	(5) Current stock in central warehouse (that does not expire within the next 3 months)	(6 = 5 / 4) Stock level expressed in months of treatment for all current patients
HIV / AIDS	Product 1	2	60	1,000	60,000	500,000	8.3
	Product 2	3	90	500	45,000	100,000	2.2
	Product 3	3	90	40	3,600	2,000	0.6

4.4.1 Updating the drop-down menu lists

The CCM grant oversight dashboard is supported by a worksheet containing a series of predefined lists to facilitate data entry. The lists are contained in a “hidden setup” sheet.

To enter additional information, it is necessary to first unprotect the worksheet by following the instructions provided in section 4.1 above on “Protecting and unprotecting worksheets”.

The data can be replaced or new data can be added to the lists.

The list will only show information entered within the cells containing borders.

To unhide a worksheet in Microsoft Excel® 2003:

1. Select **Format** from the menu.
2. Go to **Sheet**.
3. Select **Unhide**.
4. Select **Setup** and click **OK**.

To unhide a worksheet in Microsoft Excel® 2007

1. Right click on a worksheet tab.
2. Select **Unhide**.
3. Select **Setup** and click **OK**.

4.4.2 Conditional formatting

For the management indicator M6 it might be necessary to change the formatting of the final column in the table if the color purple has not been established to signal an overstock.

First the CCM (in consultation with the PR and central warehouse) has to determine what is considered overstock for a particular product (having greater than 18 or 24 months of stock of product at the central level) and then the change can be made on the management page.

On the management sheet:

1. Unprotect the sheet following the instructions in section 4.1.
2. Click on the four cells in the column "Difference between current and safety stock".
3. Click on conditional formatting on toolbar.
4. Select highlight cell rules; select greater than.
5. In the box enter the number of months above which the product is considered in "overstock".
6. Select custom format and select fill color for purple.
7. Click okay.
8. Protect sheet (using the password "DB").

4.5 THE DATA ENTRY SHEET: PROGRAMMATIC INFORMATION

Data can only be entered in yellow cells.

Programmatic Information: Enter performance data in every yellow cell.

Programmatic indicators (Performance Framework)	Code	Directly Tied?		P1	P2	P3	P4	P5	P6	P7	P8
Number of health facilities with sufficient capacity to deliver services for HIV/AIDS	1.1	Yes	Target	15	17	19	21				
			Achieved	13	14	16	19				
Number of people receiving VCT services according to national guidelines	3.2	No	Target	500	1,500	4,500	6,000				
			Achieved	130	500	1,182	2,990				
Number of chronically ill adults receiving home based care kits	4.1	Yes	Target	0	300	600	1,000				
			Achieved	0	0	150	389				
Number or HIV positive people receiving ARV treatment	1.3	Yes	Target	65	90	150	300				
			Achieved	0	70	105	201				
		Yes	Target								
		Yes	Achieved								
		Yes	Target								
		Yes	Achieved								
		Yes	Target								
		Yes	Achieved								
		Yes	Target								
		Yes	Achieved								

Programmatic indicators: Up to ten indicators can be entered; the CCM, in consultation with the PR, chooses indicators that are of greatest importance to be monitored. Up to three key indicators can be selected to monitor their trend in the first three rows.

Code: Enter the indicator code from the performance framework in the grant agreement.

Directly Tied?: Enter "Yes" if the indicator is directly tied to the grant, or "No" if it is not directly tied to the grant, as indicated in the performance framework of the grant agreement.

Target: Enter the target value for the period. The figures should be cumulative, as specified in the performance framework.

Achieved: Enter the "cumulative" achieved value for each indicator.

Do not enter data beyond this point – the rows below will be populated automatically and are necessary for generating the trend graphs for the three key indicators on the programmatic page.

4.6 THE GRANT DETAIL PAGE – ADDING THE COUNTRY FLAG

<http://www.crwflags.com/fotw/flags/>

Dashboard: Fictitia - HIV / AIDS

Country:	Fictitia	Title of the Grant:	Fighting AIDS in Fictitia				
Component:	HIV / AIDS	Grant No.:	FIC-910-G01-H	Start Date:	1-Jan-10	Total Funding:	\$10,000,000
Round:	Round 9	Phase:	Phase 1	Principal Recipient:	Fictician MoH		
Report Period:	P4	from:	1-Jan-11	to:	1-Apr-11	Latest Rating:	B1
Local Fund Agent:	CA (Crown Agents)			Fund Portfolio Manager:	Michael Olszak		
Prepared by:	John Smith, CCM Secretariat			Report preparation date:	1-May-11		

The grant detail page includes a blank space in which you may wish to insert a flag, logo, etc (For easy insertion of national flags please follow the instructions below).¹¹

- Locate the upper left corner of the grant detail page, click on the hyperlink in cell A3 to access a website that contains country flags.
- Search for the name of your country from the list and click on the country name.
- An image of the country flag will appear. Right-click on the flag image and click on **Copy Image**.
- Return to the grant dashboard.
- Click on cell A3 and paste in the flag image.
- Resize the image as required.

4.7 DATA CONSISTENCY CHECKS

Once all data have been entered it is advisable to perform a data quality and data completeness check (e.g. by comparing data entered into the dashboard with information that appears in the related PU/DR, the latest Grant Performance Report, and the dashboard of the previous period). Checking against the previous dashboard and the Grant Performance Report on the Global Fund website will validate a great portion of the data and assure its integrity (i.e. the total PR expenditure has to be greater or equal to that in the previous period). If discrepancies or possible data errors occur, or information is missing, the dashboard technician should contact the PR to try to resolve these issues before the dashboard is ready for oversight review.

¹¹ For this you need to be connected to the Internet.

CHAPTER 5: THE GRANT DASHBOARD PAGES IN DETAIL

This chapter describes each of the dashboard pages (other than data entry) in more detail. This information will be useful to those creating the dashboards, but will also be useful to CCM members and others using the finished dashboards. For example, this chapter may be useful when orienting new CCM members or persons responsible for oversight.

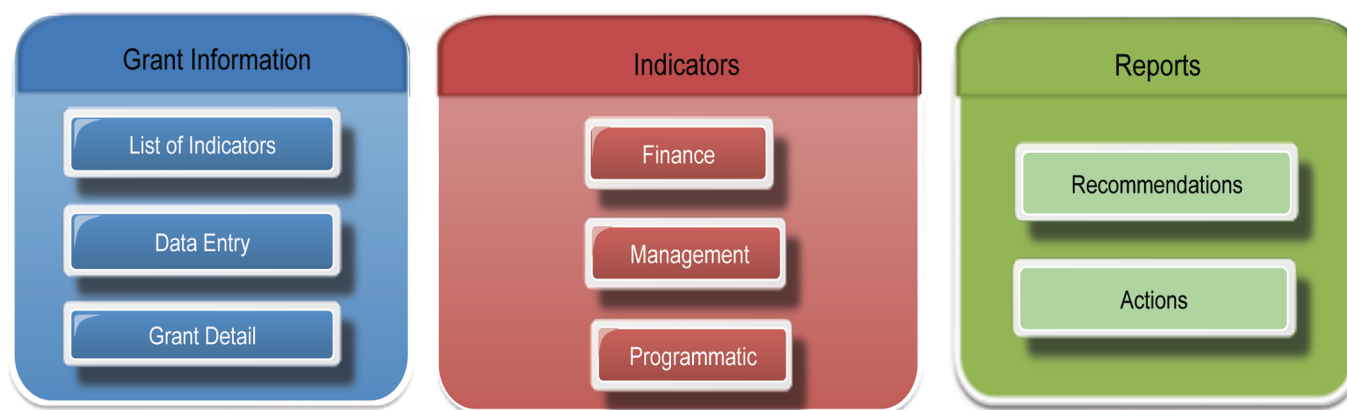
5.1 MENU

Dashboard: Fictitia - HIV / AIDS

HIV / AIDS Round 9, Phase 1

Grant No.: FIC-910-G01-H

Select the option you want to see:



The main menu gives access to all dashboard worksheets in the file and contains three different access menus:

1. The "Grant Information" menu gives access to the list of indicators, data entry and grant detail sheets.
2. The "Indicators" menu gives access to key financial, management and programmatic indicators for a given grant.
3. The "Reports" menu gives access to the recommendations and associated action sheets.

5.2 GRANT DETAIL

The grant detail page shows the name of the country, PR, grant number and other details of the particular grant to which the dashboard refers.¹²

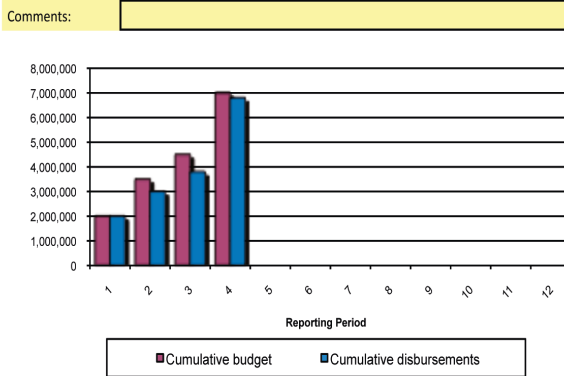
¹² Other pages of the dashboard are described in detail in Chapter 6.

5.3 FINANCE

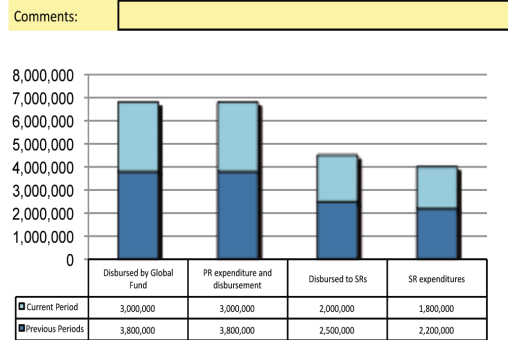
Fighting AIDS in Fictitia
Financial Indicators

To: 1-Apr-11

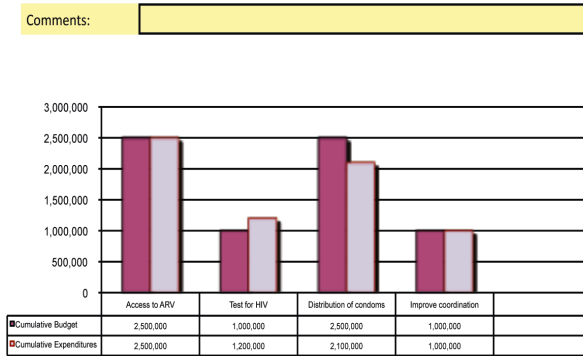
F1: Budget and disbursements by Global Fund - in (\$) Report Period: P4



F3: Disbursements and expenditures - in (\$) Report Period: P4



F2: Budget and actual expenditures by Grant Objective - in (\$) Report Period: P4



F4: Latest PR reporting and disbursement cycle Report Period: P4

Comments: PU/DR late to LFA

Last fund disbursement: Calendar days		
	Expected (days)	Actual (days)
Days taken to submit final PU/DR to LFA	45	55
Days taken for disbursement to reach PR	45	45
Days taken for disbursement to reach SRs	12	20

F1: BUDGET AND DISBURSEMENTS BY GLOBAL FUND.

F1 shows two bars per period. The first bar represents the cumulative budget up to and including the dashboard period and the second bar shows cumulative disbursements made by the Global Fund to the PR.

This aims to compare how much money was budgeted to reach the country and in what period, with how much has actually been disbursed to the PR and when.

F2: BUDGET AND ACTUAL EXPENDITURES BY GRANT OBJECTIVE.

F2 shows the cumulative budget for each objective and the cumulative amounts spent for each of the grant objectives. This aims to keep track of

the progress of the grant by objective and is intended to alert the user to implementation issues in specific areas of the grant.

F3: DISBURSEMENTS AND EXPENDITURES.

F3 shows the flow of funds from the Global Fund through the PRs to the sub-recipients. This chart is a little different in terms of presentation from F1 and F2—each bar shows the cumulative up to (but not including) the dashboard period as well as a hatched area on top that shows the amount for the dashboard period.

This graph intends to show how and when funds are moving from the Global Fund to the PR and then on to the sub-recipients and whether they are being spent; it would highlight any blockages in the flow of funds and prompt the CCM to investigate the reasons for the blockages.

F4: LATEST PR REPORTING AND DISBURSEMENT CYCLE

F4 aims to track the time taken by the PR to send in the final PU/DR to the Local Fund Agent and the time taken to receive the disbursement

from the Global Fund, as well as the time it took the PR to disburse to sub-recipients.

Delays in reporting cause disbursements to be held up. These delays could be due to various reasons, such as sub-recipient reports not being received in time, the PR reporting system being slow or the Local Fund Agent asking questions/clarifications about programmatic or finance data. In some cases, the PR might submit a complete PU/DR in time, but the disbursement from the Global Fund could be delayed. Or, even if the PR did receive the disbursement in time, it did not send the funds out to all its sub-recipients in the expected number of days - this would hold up implementation and reflect in the underachievement of targets.

The table shows the information in red when the actual days are greater than the expected days (meaning a delay in the reporting and disburse-

ment process) and in green when these processes took fewer or an equal number of days compared to the expected.

Comments: For each graph, key observations and findings can be entered in the yellow comment cells provided above each graph in the financial worksheet. An example of an observation may be: "Disbursements are on schedule, no major issue"; "Last disbursement to the sub-recipients delayed because sub-recipient reports were not received on time". It is advisable to keep comments brief in order to ensure that they fit in the box provided.

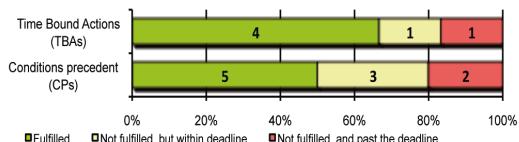
5.4 MANAGEMENT

Fighting AIDS in Fictitia Management Indicators

To: 1-Apr-11

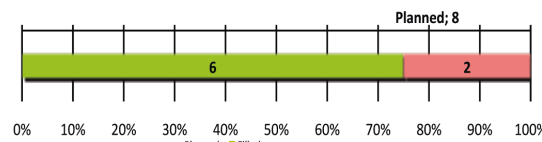
M1: Status of Conditions Precedent (CPs) and Time Bound Actions (TBAs) Report Period: P4

Comments: CPs on PMU staffing have not been met.



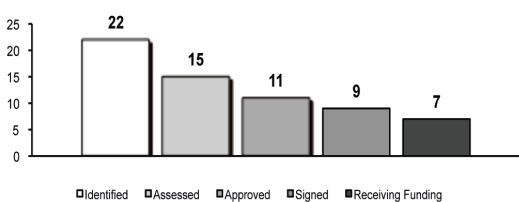
M2: Status of key PR management positions Report Period: P4

Comments: Recruitment process delayed due to cumbersome procedures.



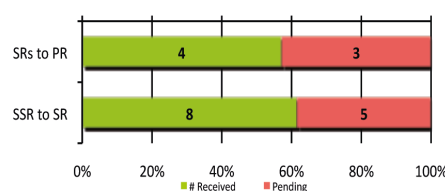
M3: Contractual arrangements (SRs) Report Period: P4

Comments: Administrative bottlenecks at PR level hinder finalization of MoUs with SRs



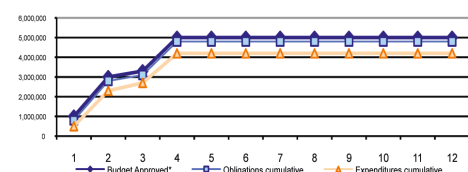
M4: Number of complete reports received on time Report Period: P4

Comments: SRs and SSRs are not familiar with reporting requirements



M5: Budget and Procurement of health products, health equipment, medicines and pharmaceuticals

Comments:



* Includes only EFR category 4 and 5 (Health products and health equipment & Medicines and Pharmaceuticals)

M6: Difference between current and safety stock Report Period: P4

Comments: Strong risk of stock-out for product 3. Product 2 needs to be monitored

Component	Products	Stock level expressed in months of treatment for all current patients	Months of safety stock	Difference between current stock and safety stock
HIV / AIDS	Please Select	8.3	4.0	4.3
	Please Select	2.2	1.0	1.2
	Please Select	0.6	1.0	-0.4
		0	0.0	

M1: STATUS OF CONDITIONS PRECEDENT AND TIME-BOUND ACTIONS.

M1 shows a stacked bar for CPs and a stacked bar for TBAs. Green corresponds to the CPs or TBAs that have been fulfilled, yellow is for those that have not been fulfilled but are within the deadline and red for those that

have not been fulfilled and are past the deadline set with the Global Fund. This is intended to alert the user to any outstanding management issues that could affect future disbursements and ratings of the grant.

M2: STATUS OF KEY PR MANAGEMENT POSITIONS.

M2 shows the number of key management positions filled as the green bar and the number of current vacancies in red. Turnover of staff at PRs is one

of the main problems that affect grant performance and is an issue that the CCM could keep track of and address if any problems arise.

M3: CONTRACTUAL ARRANGEMENTS (SUB-RECIPIENTS)

M3 shows five bars, corresponding to the number of sub-recipients identified, assessed and approved by the PR, the number of sub-recipients that have signed contracts or memorandums of understanding and the number of sub-recipients that receive funds from the PR. These numbers are cumulative for the phase. The numbers approved, signed and receiving funds

should be equal by the end of the year 1. Since sub-recipients are often the main implementers of the grant, this indicator shows the progress the PR has made in making contractual arrangements with them and ensuring timely implementation.

M4: NUMBER OF COMPLETE REPORTS RECEIVED ON TIME

M4 has two bars. The upper bar shows the completeness of reporting by the sub-recipients to the PR. The lower bar shows the completeness of reporting by sub-sub-recipients to sub-recipients, if the grant has sub-sub-recipients. The PR collects data on grant performance from the sub-recipi-

ents who, in turn, collect it from the sub-sub-recipients. If the reports were not received on time, the PR cannot send complete PU/DRs to the Global Fund. Moreover, if some sub-recipients are routinely unable to send reports on time, this is an issue in which the CCM could intervene.

M5: BUDGET AND PROCUREMENT FOR HEALTH PRODUCTS AND HEALTH EQUIPMENT, MEDICINES AND PHARMACEUTICALS

This chart monitors the budget and expenditure on procurement of health products, health equipment, medicines and pharmaceutical products, (categories under those headings in the Global Fund expenditure categories). Such expenditure generally accounts for a significant portion of the grant budget; it is important to monitor progress along this aspect of implementation.

The first item in the graph is the approved budget for these purchases for the phase. It is not possible to disaggregate the approved budget for each reporting period of reporting and hence it is presented here for the entire phase.

The second item is the cumulative obligated amount; this is the amount of funding committed once a procurement process has been adjudicated.

By the end of the phase, the amount obligated should equal or approach the approved budget if the implementation of the grant has been progressing on schedule.

The third item is the cumulative expenditure on these items. Since procurement is not a continuous process (sometimes taking place only annually) and there is often a time lag between placing an order and receiving the goods, the cumulative amount actually spent might not equal the amount obligated by the end of the phase. It is, however, important for the CCM to see that steady progress is being made. Thus any big gaps between obligations and expenditures will have to be explained.

M6: DIFFERENCE BETWEEN CURRENT AND SAFETY STOCK

This indicator is a snapshot of the *difference* between the *current stock* of a specific product of a particular dose (medicine in single, fixed-dose combination, bed nets, diagnostic kits, etc.), expressed in monthly needs (number of months of treatment available) for all patients in the program, and the *safety or buffer stock*¹³ (in months) established by the disease program, warehouse system or essential drugs program.

The indicator provides a warning if any product is approaching low levels of stock (yellow) or if it is below the safety stock levels (red). It will turn purple if there is a potential overstock.

At the moment, if the difference between current and safety stock is greater than 18 months, the cell turns purple. However, this level will vary for each product (for tuberculosis and malaria drugs, it could be 24 months). The color can be changed via conditional formatting (see section on data entry for details).

When essential drugs and commodities do not reach the country or implementation levels, often the reasons for stock-outs are varied and

difficult for the PR to address by itself. Possible causes may be:

- Challenges to procure or to import (e.g. delayed tenders, slowness in finalizing purchase orders, international queues or shortages).
- Blockages in securing value-added tax (VAT) or custom waivers.
- Inadequate stock maintenance in central stores.
- Untimely restocking requests from the field; slow responses from central and/or regional stores.
- Challenging stock maintenance at facility level.
- Funding blockages (e.g. due to late submission of PU/DRs).

If the CCM is aware of potential or actual issues with stocks, it can take action at higher levels and ensure continuous supply of products.

Comments: For each graph, key observations and findings can be entered in the yellow comment cells provided above each graph in the management worksheet.

¹³ Safety stock is defined as the buffer, cushion or reserve stock kept on hand to protect against stock-outs caused by delayed deliveries or markedly increased demands (MSH/WHO, Managing Drug Supply, 1997, page 332).

5.5 PROGRAMMATIC

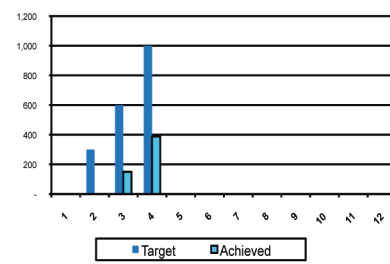
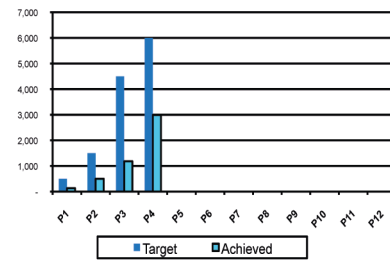
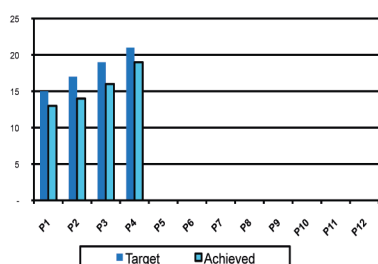
Dashboard: Fictitia - HIV / AIDS

Phase 1
Latest Rating: **B1**

Fictician MoH
Fighting AIDS in Fictitia
Programmatic Indicators

Report Period: P4
From: 1-Jan-11
To: 1-Apr-11

Number of health facilities with sufficient capacity to deliver services for HIV/AIDS	Number of people receiving VCT services according to national guidelines	Number of chronically ill adults receiving home based care kits
Comment: Overall good results, but effort needs to be sustained	Comment: Delay in setting up VCT centers	Comment: Underperforming, need to catch up on training of service deliverers and outreach campaigns



Indicators	Target	Achieved	0% - 59%	60% - 89%	> 90%	Comments
Number of health facilities with sufficient capacity to deliver services for HIV/AIDS	21	19		90%		
Number of people receiving VCT services according to national guidelines	6,000	2,990	50%			
Number of chronically ill adults receiving home based care kits	1,000	389	39%			
Number of HIV positive people receiving ARV treatment	300	201		67%		Efforts to catch up on initial delays are showing signs of improvement.
	0	0	0%			
	0	0	0%			
	0	0	0%			
	0	0	0%			
	0	0	0%			
	0	0	0%			

At the top of the page there are three graphs. These graphs present the three indicators (top 3) that were deemed crucial to grant performance and were selected to be tracked more closely by the CCM in consultation with the PR. The graphs present quarterly targets and achievements.

appear below the graphs. Any underachievement of target (0–59 percent: red, 60–89 percent: yellow) shows up and requires comment. Overachievement (i.e. greater than 125 percent of target) should also be commented on by the oversight committee.

The complete list of the ten indicators (including the three displayed above) selected from the Grant Performance Framework (in the grant agreement)

Comments: For each indicator, key observations and findings can be entered in the yellow comment cells.

5.6 RECOMMENDATIONS

Fighting AIDS in Fictitia

To: 1-Apr-11

Recommendations

Are all funds reaching implementation levels and being spent according to budget?

Financial	Summary Comments	Recommendations
F1		
F2		
F3		
F4	PU/DR late to LFA	Train SRs and SSRs on reporting to ensure timely reporting to PR.

Are procurement and hiring on schedule?

Management	Summary Comments	Recommendations
M1	CPs on PMU staffing have not been met.	Finalize recruitment as a priority.
M2	Recruitment process delayed due to cumbersome procedures.	Finalize recruitment as a priority. Review procedures to avoid future bottlenecks.
M3	Administrative bottlenecks at PR level hinder finalization of MoUs with SRs	Discuss with Head of Office ways forward to accelerate MoUs with SRs.
M4	SRs and SSRs are not familiar with reporting requirements	Conduct training workshops on reporting for SRs and SSRs.
M5		
M6	Strong risk of stock-out for product 3. Product 2 needs to be monitored	Collaborate with central warehouse to improve stock monitoring.

Are technical targets being achieved?

Programmatic	Summary Comments	Recommendations
P1 - trend	Overall good results, but effort needs to be sustained	Continue the good work!
P2 - trend	Delay in setting up VCT centers	Develop and implement a detailed action plan to catch up on establishment of VCTs.
P3 - trend	Underperforming, need to catch up on training of service deliverers and outreach campaigns.	Conduct workshops / capacity building events for service deliverers and ensure that ICE material is ready for distribution.
P1		
P2		
P3		
P4	Efforts to catch up on initial delays are showing signs of improvement.	Continue the efforts and coordinate with new established VCTs to ensure treatment services can be delivered.
P5		
P6		
P7		
P8		
P9		
P10		

The comments provided on the finance, management and programmatic pages appear automatically on the recommendations page for each graph/indicator.

The oversight group that reviews the dashboard report would provide recommendations based on each comment.

5.7 ACTIONS

Dashboard: Fictitia - HIV / AIDS

Round 9 Phase 1
Latest Rating: B1

Fictician MoH
Fighting AIDS in Fictitia
Decisions and Actions

Report Period: P4
From: 1-Jan-11
To: 1-Apr-11

What is the overall status of this grant implementation?

	Key Recommendations from Oversight Group(s)	CCM Decision	Due Date	Person Responsible
Current Reporting Period	Finalize recruitment as a priority. Review procedures to avoid future bottlenecks.			
	Conduct training workshops on reporting for SRs and SSRs			
	Collaborate with central warehouse to improve stock monitoring.			
	Develop and implement a detailed action plan to catch up on establishment of VCTs.			

Actions to Implement / Previous Period

What is the overall status of this grant implementation?

	CCM Decision	Action Taken	Date	Person Responsible
Previous Reporting Period				

The question "What is the overall status of this grant implementation?" is to be answered in the yellow box (for the current reporting period).

The oversight group selects up to five key recommendations for CCM discussion and documents the related CCM decision out of recommendations provided and the person or organization responsible and a due date for taking action on the CCM decision should be identified during the CCM meeting.

CCM decisions on previous periods and progress against actions can be reviewed and documented in the section "Actions to Implement/Previous Period". If there has been a delay in taking action, the CCM may document this to ensure further monitoring.

Once the development of dashboards has been completed, the CCM should decide on permanent arrangements for the maintenance of the oversight tool. Main activities that may need to be assigned are:

- Periodic (quarterly or semi-annually, depending on the dashboard cycle chosen) update of each dashboard and data quality checks.
- Printing and/or electronic distribution of the dashboard reports.

- Entering into the dashboard the CCM decisions and responsibility for the actions to be taken.
- Archiving the dashboards using a naming convention based on grant numbers, dates and version numbers.
- Revising dashboards for different phases of the grant.
- Setting up new dashboards for newly signed grants.

6.1 UPDATING THE OVERSIGHT TOOL AND NAMING THE VERSIONS

The dashboard is prepared in each oversight cycle as decided by the CCM. After the dashboard has been set up the first time, it can be updated with data from the latest reporting period (previous dashboard and cross-checking with grant performance report on the Global Fund website). The file is saved as the dashboard for the latest period. Be sure to use the latest file each time you begin to update the data.

To avoid confusion, a naming convention for the dashboard file should be decided upon; e.g. the file name could be the respective grant number plus an abbreviated reference for the reporting period and version number.

6.2 PRINTING AND DISTRIBUTION

How do you print worksheets from the dashboard?

The oversight tool contains six report sheets that can be printed and distributed to CCM members (and other interested stakeholders).

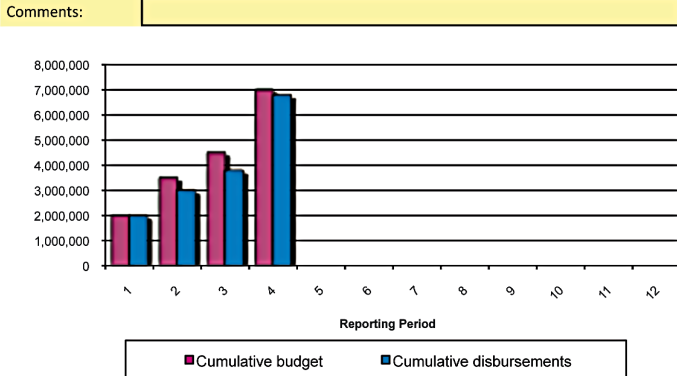
In order to facilitate this process, print areas of the respective report sheets have been named and saved as listed in the table below:

PAGE TO PRINT (6 PAGES)	NAME OF THE AREA
Grant Detail	PrintGD
Report on Financial Indicators	PrintF
Report on Management Indicators	PrintM
Report on Programmatic Indicators	PrintP
Recommendations	PrintR
Actions	PrintA

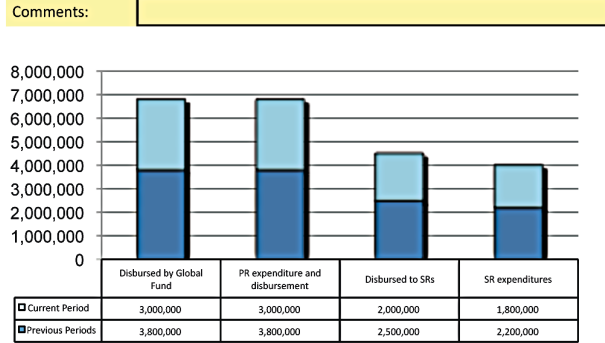
Fighting AIDS in Fictitia
Financial Indicators

To: 1-Apr-11

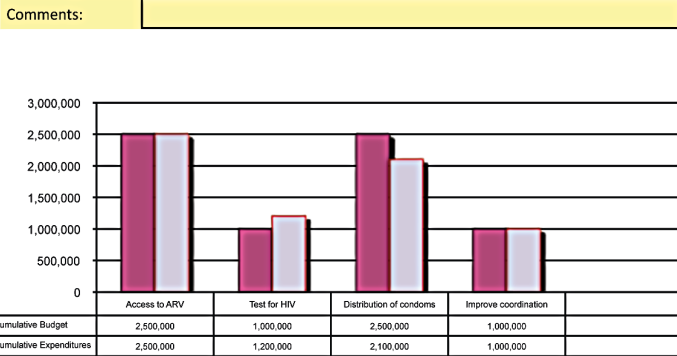
F1: Budget and disbursements by Global Fund - in (\$) Report Period: P4



F3: Disbursements and expenditures - in (\$) Report Period: P4



F2: Budget and actual expenditures by Grant Objective - in (\$) Report Period: P4



F4: Latest PR reporting and disbursement cycle Report Period: P4

Comments: PU/DR late to LFA

Last fund disbursement: Calendar days		
	Expected (days)	Actual (days)
Days taken to submit final PU/DR to LFA	45	55
Days taken for disbursement to reach PR	45	45
Days taken for disbursement to reach SRs	12	20

Printing the financial indicators report sheet.

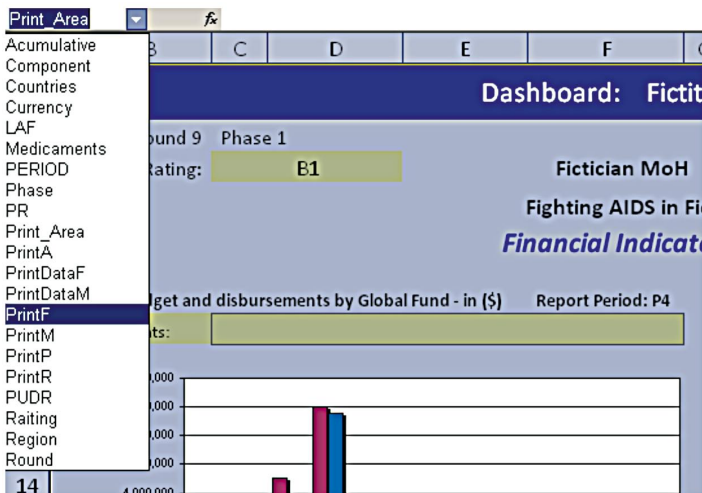
The entire process described for printing a sheet applies when printing all other worksheets in the file:

1. Select the worksheet for "Financial Indicators"
2. Click on the cell **Table of Names** in Microsoft Excel® 2003 (or **Name Box** in Microsoft Excel® 2007) located toward the upper left of the sheet, below the toolbar and above the data entry cells.

3. Select the name of the area to be printed from the drop-down menu: For the financial indicators report, select **PrintF** and the pre-defined print area for finance indicators will appear
4. Select **Print from the File** menu for the worksheet you wish to print. (Attention: please check first whether the print area has changed following data entry and adjust if necessary!)
5. Choose the printer to be used.
6. Click on **Selection** (by doing this you will print only the graphs that have been pre-selected).
7. Click on **OK**

The size of the page for printing is set to A4, and color printing is turned on. If you do not have a color printer, graphs will automatically print in varying shades of gray.

Repeat these steps for each of the report sheets to be printed. Each file containing the latest dashboard can be sent to CCM members and other users via email (as an attachment).



MAINTAINING THE DASHBOARD

6.3 PRESENTING THE OVERSIGHT TOOL DURING CCM MEETINGS

Many CCMs and oversight groups prefer to see the dashboards on a big screen during their meetings. Dashboards can be projected on a wall or screen using an LCD projector and a laptop computer. The CCM Secretariat or the dashboard technicians can be instructed to attend the meetings to run the computer, if needed. In this case, the Recommendations and

Actions pages can be completed by the Secretariat or technicians as the decisions are made. The CCM members or oversight members will see their remarks appear immediately on the completed pages. The completed pages can then be added to the minutes of the meeting. This procedure can accelerate feedback to the PRs.

6.4 OPTIONAL: POSTING THE DASHBOARDS ON A WEBSITE

Where a website exists, the CCM may wish to publish the final dashboards to make them available for implementers and other stakeholders. The easiest way to do this is to create images of the sheets using the same print areas described above and uploading them or copying them into your web pages using your content management system.

To create an image of the worksheet, we can use the same example as above for printing:

1. Select the worksheet for **Financial Indicators**
2. Click on the cell **Table of Names** in Microsoft Excel® 2003 (or Name Box in Microsoft Excel® 2007) located toward the upper left of the sheet, below the toolbar and above the data entry cells.
3. Select the name of the area to be printed from the drop-down menu: For the financial indicators report, select PrintF. Upon selecting the name, you will notice that the print area is automatically defined.
4. Select **Copy** from the **Edit** menu for the worksheet to create the image. (Attention: please check beforehand whether the print area has changed following data entry and adjust if necessary!)

5. In the Windows **Start** menu, go to **Programs** and then **Accessories** to open the **Paint** program.
6. Click on **Paste** in the Paint program, and it will paste the worksheet image into the drawing area.
7. To save the file, click on **File** and **Save As**. In the save menu, select the file location of your choice. At the bottom of the dialogue box, name your image file in the File Name box, and below that, in the **Save as** dialogue box, select **JPEG** (or another preferred image file type) from the drop-down menu.
8. Click on **Save**.

You may then upload this image file to your web page or paste it into your web page, depending on your website's content management system. Create images for each worksheet you wish to display on your website. The images may also be edited (such as cropping corners more precisely, compressing the file size, or resizing the image) prior to uploading them to your website. You may find Microsoft Office Picture Manager to be a useful program for such edits.

6.5 ARCHIVING PERIODIC CCM REPORTS

The grant dashboard for each period (as defined by the CCM) needs to be centrally archived once the actions and decisions of the CCM have been included in the updated report.

It is recommended that a separate sub-folder be created for each grant and saved in the respective grant-specific sub-folder.

It is recommended to have a file back-up system in place.

ANNEX 1: GRANT DASHBOARD INDICATORS

NAME	DEFINITION	MEASUREMENT	DATA SOURCES
Finance Indicators			
<p>F1: Budget and disbursements by Global Fund</p>	<p>Cumulative budget: Sum of the grant budget from period one (quarter, trimester, or semester) of the current phase, up to and including the dashboard reporting period.</p> <p>Cumulative disbursements by Global Fund: Sum of all the funds transferred by the Global Fund to either the PR or paid directly to suppliers (e.g. drugs, bed nets, condoms, equipment for the grant), up to and including the dashboard reporting period.</p>	<p>Currency of the grant (\$ or €). Cumulative: figures refer to budget and disbursements for all the periods of the phase up to and including the dashboard reporting period</p>	<p>PR banking or accounting information; Global Fund disbursement notification e-mails; PU/DR; Global Fund website.</p>
<p>F2: Budget and actual expenditures by grant objective</p>	<p>Cumulative budget per objective: Sum of the grant budget by objective, from period 1 of the current phase up to and including the dashboard reporting period.</p> <p>Cumulative expenditure per objective: Sum of amounts spent by objective directly by the PR plus the amounts transferred by the PR to all sub-recipients from the beginning of the phase up to and including the dashboard reporting period, by objective</p>	<p>Cumulative: figures refer to budget, disbursements or expenditure for all the periods of the phase up to and including the dashboard reporting period.</p>	<p>PR banking or accounting information; Global Fund disbursement notification emails; PU/DR; Global Fund website.</p>
<p>F4: Latest PR reporting and disbursement cycle</p>	<p>Days taken to submit acceptable PU/DR to Local Fund Agent: This indicator measures the number of calendar days it took the PR to send an acceptable PU/DR to the Local Fund Agent after the end of the period. An “acceptable” PU/DR would be one for which the Local Fund Agent did not require any further clarifications from the PR. The expected value is 45 days from the end of the period, as defined in the grant agreement. The actual value is the number of calendar days from the end date of the period to the date on which the PR sent the PU/DR to the Local Fund Agent which the Local Fund Agent found acceptable.</p> <p>Days taken for disbursement to reach PR: This indicator measures the number of calendar days it took the Global Fund to send the latest disbursement to the PR’s account after receipt of the acceptable PU/DR by the Local Fund Agent. The expected number is 45 days. The actual number is the number of days from the date of transmission by the PR to the Local Fund Agent of the acceptable PU/DR to the date the disbursement is received by the PR at its bank.</p> <p>Days taken for disbursement to reach sub-recipients: This indicator measures the average number of days for disbursements to be made to all the sub-recipients.</p> <p>The expected value for this indicator will be set locally by the PR and sub-recipients, preferably in the grant operations manual.</p> <p>The actual value is the average of the number of days from the receipt of the funds from the Global Fund by the PR to the date the funds are received by each sub-recipient. Different sub-recipients could receive funds on different dates and this indicator is the average across all sub-recipients for the latest disbursement.</p>	<p>Number of calendar days; it refers only to reporting period for which the latest disbursement was received and is not cumulative.</p>	<p>PR, Local Fund Agent, Global Fund e-mails and records; bank notification document or the notice of receipt by the PR to the Global Fund; sub-recipient reports to PR based on bank records.</p>

NAME	DEFINITION	MEASUREMENT	DATA SOURCES
Management Indicators			
M1: Status of conditions precedent and time-bound actions	<p>Number of conditions precedent (CPs) and time-bound actions (TBAs) fulfilled or unfulfilled.</p> <p>Within the “Unfulfilled” category, distinguish between those CPs and TBAs whose deadline has not passed and those for which the deadline has passed.</p>	Number, cumulative to the dashboard reporting period. Number of fulfilled CPs and/or TBAs plus unfulfilled CPs and/or TBAs should equal the total number set by the Global Fund on the grant.	PR records; grant programmatic reports.
M2: Status of key PR management positions	<p>Number of PR grant management positions planned, currently filled or vacant.</p> <p>Full-time equivalents of the managerial positions that are on the organizational chart (or otherwise planned) and directly responsible for ensuring grant implementation at the PR, and lead sub-recipients (if necessary). This will include new hires and current staff who are assigned to work on the grant’s management, as well as any staff seconded from other divisions or partner organizations.</p>	Number, in current reporting period.	PR records.
M3: Progress on contractual arrangements with sub-recipients	<p>Identified: Total number of potential sub-recipients identified by the PR for the phase. Assessed: Total number of potential sub-recipients assessed by the PR to determine whether they qualify to function as sub-recipients for the grant. Approved: Total number of sub-recipients that have been approved. Signed: Total number of sub-recipients that have signed agreements/contracts with the PR under the grant. Receiving funding: Total number of sub-recipients that are getting funds and/or supplies from the PR.</p> <p>Numbers of sub-recipients identified, assessed, approved, signed, and receiving funding are cumulative for the phase, with the following exceptions:</p> <p>If a sub-recipient does not need new approval in Phase 2, then approval in Phase 1 is counted.</p> <p>If a sub-recipient was signed in a previous phase but is not working in the current phase, that sub-recipient is no longer counted in Identified, Assessed, Approved.</p>	Number, cumulative to the reporting period. A sub-recipient is an institution or program with its own work plan, budget and programmatic targets.	PR records; sub-agreements/memorandums of understanding; CCM records.
M4: Number of complete reports received on time	<p>The total number of periodic reports with up-to-date financial, management and programmatic data received by the PR from sub-recipients and by sub-recipients from the sub-sub-recipients by the expected date. A “complete” report is one that contains all the data that the PR requires for the PU/DR.</p> <p>The expected date would be set by the PR in the sub-agreements.</p>	Number of reports received. The figure reflects only the period of reporting; it is not cumulative .	PR and sub-recipient records.

NAME	DEFINITION	MEASUREMENT	DATA SOURCES
<p>M5: Budget and procurement of health products, health equipment, medicines, and pharmaceuticals</p>	<p>The budget approved for the current phase of the grant for the purchase of health products and equipment and pharmaceuticals and medicines (categories 4 and 5 in the new Enhanced Financial Report), and the cumulative amounts of financial obligations and expenditures up to the dashboard reporting period.</p> <p>Budget approved: Total approved budget for purchases (categories 4 and 5) for the entire phase of the grant. It does not include the amounts for fees, management, operational costs, etc.</p> <p>Cumulative obligations: Total of all order(s) placed and monies committed for these purchases by the PR up to and including the dashboard reporting period. Ideally, by the end of the phase, budget should equal obligations.</p> <p>Cumulative expenditure: Total of actual expenditures on category 4 and 5 up to and including the dashboard reporting period (whether paid by PR or authorized to be paid by another entity such as the Global Fund).</p> <p>Note: Category 6 of the Enhanced Financial Reporting will not be considered as part of the budget for pharmaceuticals. Category 6 has several expenditures that are difficult to disaggregate or quantify, such as warehousing costs, distribution costs (particularly when distribution is done by ministries of health), and others that are related to operational costs of the procurement and supply management component.</p>	<p>Currency of the grant (\$ or €)</p>	<p>Grant agreement approved budget (for categories 4 and 5 of Enhanced Finance Reporting in current phase); and PR financial data (for expenditures), and/or Procurement and Supply Management unit (for orders placed and funding committed or obligated).</p>
<p>M6: Difference between current and safety stock</p>	<p>The difference between the <i>current stock</i> of a specific product of a particular dose (medicine in single, fixed-dose combination, bed nets, diagnostic kits, etc.), expressed in monthly needs (number of months of treatment available) for all patients in the program, and the <i>safety or buffer stock</i> (in months) established by the disease program, warehouse system or essential drugs program.</p> <p>The table will show the difference in months in colors:</p> <ul style="list-style-type: none"> • RED: when the difference is negative or 0, showing that months of existing stock are lower than or equal to what has been established as months of safety stock • YELLOW: when there is more than the level of safety stock (>0) but less than 3 months (+3). • GREEN: when the difference is between 3 and 18 months. • VIOLET: When the difference shows that the level above the safety stock is greater than or equal to the number of months determined by country as indicating a potential overstock problem. <p>For a full description of how this indicator is calculated, please see Annex 2.</p>	<p>Number of months.</p>	<p>PR records; warehouse data.</p>

ANNEX 2: MANAGEMENT INDICATOR M6

This indicator is a snapshot of the *difference* between the *current stock* of a specific product of a particular dose (medicine in single, fixed-dose combination, bed nets, diagnostic kits, etc.) expressed in monthly needs (number of months of treatment available) for all patients in the program, and the *safety or buffer stock*¹⁴ (in months) established by the disease program, warehouse system or essential drugs program.

DESCRIPTION OF COLUMNS IN THE DATA ENTRY SHEET

Column B: Component: Refers to the type of disease or component to which this grant is related (tuberculosis, HIV, TB/HIV, malaria, health systems strengthening). Choose one component from the drop-down menu.

Column C: Products: The term “products” may include medicines, supplies (condoms, bed nets), lab tests/kits, reagents, or others that are necessary for program implementation. Each dashboard preparation team will have to select the key products that are purchased with funds for the particular grant. The recommendation is to choose only those products with more risk of stock-outs or overstocks and which consume the majority of the funds, or those used for the majority of the patients.

If the committee selecting the products wishes to use the data entry table for tracking all products, the table can be copied and introduced in a different spreadsheet. In the CCM dashboard, however, only products with the above mentioned characteristics should be included so that the CCM can make decisions to avoid potential stock problems.

- All medicinal products should be entered using international non-proprietary names — not brand names.
- All medicinal products should include the dosage in which they are purchased per row (if one product is purchased in different adult doses and pediatric doses, each dose must be entered in different rows because the calculation of the needs per patient will differ).
- For **HIV/AIDS** grants where the number of drugs purchased may be long, it is important to prioritize which drugs the CCM will track in the dashboard. Priority should be given to drugs taken by the majority of patients. A quantification committee in each country will have a better understanding of this, as the proportion of patients in each combination treatment had to be taken into account when quantifying the needs to be purchased. In countries where the grant is not purchasing antiretroviral drugs but other related products (diagnostic tests for HIV, or medicines for sexually transmitted infections, opportunistic infections, or for adverse drug reactions), it is important to choose only those that are more likely to have problems of stock-outs or overstocks and that need to be monitored and list them in the table. As mentioned above, if the PR wants to use the table to track more than four products, the table can be copied to a different spreadsheet. However, for the purpose of showing the data to the CCM, only those products with problems, or an elevated potential for problems, will be entered in the data entry sheet of the dashboard.
- If this is a TB grant and it includes **products for TB DOTS programs, and/or for DOTS Plus** (multidrug-resistant TB) or for adverse drug reactions, the dashboard team needs to work **with the national TB program** officers to establish the priority in terms of the products to be added.

Column D: Number of pills/kits/units of the product needed for a patient in one day (1). This information will be 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). Standard treatment guidelines allow calculation of the number of individual units of medicine or packages needed for one patient per day. For multidrug-resistant TB or DOTS-Plus, individualized protocols are already in use in some countries, and the Green Light Committee of the Stop TB Partnership is providing guidance on this.

Each country (region) has its own standard treatment guidelines that need to be consulted for each disease and for opportunistic infections, or to treat adverse reactions. The task force for dashboard introduction will need the information from the experts of the national control program, and the experts from the essential medicines unit, besides the information from the PR on this. In the case of non-standard treatments, it might be more difficult to get the information needed.

The information needs to be paired with the dosage in which the product was 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.

Column E: Units expressed in one month of treatment for one patient (2): 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. This number is programmed to be calculated automatically in the dashboard and does not need to be entered.

Column F: Total number of patients in treatment at present (or expected to need treatment per month) (3). Although this estimate does not intend to account for the increase in detection rate that will add patients to the ones currently in treatment if the disease is chronic, we are using the current number of patients already in treatment or the expected number of cases (in case of malaria) as a proxy of how many patients we will have per month.

Column G: Total quantities of the product needed for all current patients (or those expected per month) (4). By multiplying the units/tablets of product needed for one patient for one month (Column E or (2)) by the number of patients in treatment (Column F or (3)), we obtain the number of units of the product of that particular dosage we will need to meet the needs of treatment of patients for one month.

¹⁴ “Safety stock” is defined as the buffer, cushion, or reserve stock kept on hand to protect against stock-outs caused by delayed deliveries or markedly increased demands (MSH/WHO, Managing Drug Supply, 1997, page 332).

Column H: Current stock in central warehouse (or at the highest level of the system) that does not expire in three months (5). The information on how many units are still available in the central warehouse, or in the regional warehouses (if the products are delivered directly to regions) should be obtained periodically, if not monthly, by the procurement and supply management unit of the PR. 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.

In general, if the PR is doing the procurement, it will know when the products arrived and will have the information on hand. Also, the PR is expected to have information when the products are distributed according to a distribution plan, and this will allow them to estimate how much is remaining in the central level warehouse.

If the warehouse maintains an electronic inventory system, the information will be readily available. If not, the PR could visit the warehouse with the list of the products that are purchased and obtain the data from these different 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

NOTE: When collecting information on available stock, always remember to look at the expiration dates of the product. This is to avoid counting as available products those that may expire in the next few months. The task force for dashboard introduction (working with the Essential Medicines Board and the national program) may decide to consider as “available” only the batches that still have at least three months of shelf life remaining. The Essential Medicines Board and the national disease program shall determine the number of months of shelf life to ensure drug availability. However, the lead time¹⁵ (interval to complete a full procurement period) will need to be taken into account. If the distribution to the next level will take three months and the products arrived with no shelf life, then it might not be useful to consider a three-month expiration batch as available for any purpose.

If products have less than three months of shelf life, they should be used immediately. In that case, it would be important to know how fast an emergency order may take to refill the stock. This case highlights the importance of an intervention by the CCM members to speed up the process.

This information needs to be available every quarter – if not monthly – to ensure that there is still stock available, and whether the safety stock level is being reached to start requesting the next shipment. **With these products it is not possible to wait for the warehouse to conduct an annual inventory to obtain the information.**

Column I: Stock level expressed in months of treatment available for the current number of patients in treatment (or expected to be) (6). This is obtained by dividing the volume of stock currently available (5) by the total quantities of the product needed to treat all patients in one month (4). It provides the number of months of treatment available to the program at the moment of inventory. This number is programmed to be calculated automatically in the dashboard and does not need to be entered.

Column J: Safety stock also expressed in months of treatment (7). The safety stock is buffer, cushion, or reserve stock kept on hand to protect against stock-outs caused by delayed deliveries or markedly increased demands. Going below the safety stock without having submitted an order for the product jeopardizes a program as the time for reordering and receiving the product may be longer than expected and could lead to stock-outs.

Each supply system in coordination with the national program and the essential medicine department defines what is considered as safety stock. In many places, the safety stock is established in units of the product, but it can be converted into how many months of treatment it is equivalent to. To convert the level of safety stock into months of treatment, we divide the safety stock in units by the amount needed for one month of treatment (in our table the latter is estimated in Column G). This result of the division is entered into Column J in the data entry spreadsheet.

Column K: Difference between the current stock level expressed in months and the safety stock expressed in months. If the difference is a negative number it means that the number of treatments in stock in our main warehouse is below the level considered safe to ensure continuation of treatment without interruption. In that case, the PR may want to request information from other levels of the system to ensure that there is product available until the central level gets the next shipment.

The results will appear in management sheet of the dashboard in the form of colors representing the number of months of stock availability:

- **RED:** When current stock is equal to or less than the level of safety stock.
- **YELLOW:** When current stock is greater than the level of safety stock (>0) but less than three months.
- **GREEN:** When the difference between current stock and safety stock is greater than three but less than 18 months.
- **PURPLE:** When the difference between current stock and safety stock is greater than or equal to the number months the country (or region) has decided would be considered overstock for that particular product. In the case of HIV drugs, it could be 18 months; for TB and malaria drugs, 24 months.

¹⁵ Lead time is the interval needed to complete the procurement cycle. It begins at the time the need for new stock is recognized and ends when that stock is received and available for issue (MSH/WHO, Managing Drug Supply, 1997, page 182).

ANNEX 3: GRANT DASHBOARD PROGRAMMATIC INDICATORS TABLE

Finance and management indicators are already defined by the dashboard, but definitions for grant-specific programmatic indicators must be chosen by the CCM. Use the table below to list the ten programmatic indicators that have been selected for the grant dashboard. Please make as many copies of this annex as there are dashboards. Label each table with the name, round, disease of the grant. These updated tables can be distributed to CCM members, PRs, dashboard technicians and others who will use the dashboards.

List the title of the programmatic indicator in Column 1 (Name). In Column 2 (Definition), define the indicator; in Column 3 (Measurement), explain how the indicator will be measured; and in Column 4 (Data Sources), indicate the source of the information to be obtained in order to measure the programmatic indicator.

NAME	DEFINITION	MEASUREMENT	DATA SOURCES
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

