Workforce Effectiveness Tool
Frequently Asked Questions

1. **Do I need to be an excel expert to use this tool?**
   - Basic excel working knowledge is required to prepare the data in appropriate input format. The tool has been designed step wise, with dropdowns and color coding to make it easier to follow and use. Although the user will require working knowledge of formulas like "vlookup" to input the data. The user can make themselves familiar with these formulas through basic YT tutorial videos for them.

2. **Are there any recommendations or advice for how to prepare my data for easy input into the model?**
   - As all situations are different, we recommend that user works with the model owner to ensure efficient data cleaning and data formatting for conducive data inputs and appropriate result interpretation.

3. **What is exact use case for the tool?**
   - This tool was created to be a resource in decision making across supply chains, because of that there is not one-use case but many. We suggest you review the technical review recording, and seek technical assistance for thought partnership on how this tool can be used in your supply chain operations

4. **Can the model be used for supply chain with more than 4 levels?**
   - The model output has been pre-set with SCOR categories, for 4 levels of supply chain and a maximum of 5000 nodes per level. The model has been designed in a way to be replicable for any number of practical levels or nodes. The model can be updated by xxx on request as and when use case arises.

5. **Are Step 5 on Phase 1 ("consumption data") and Step 5 on Phase 3 ("average units") interconnected?**
   - Yes, throughout the model the user is required to maintain consistency of demand, consumption and units being referred to. The total units being handled at a site for which staffing is required is the consumption data and smaller groups of these units will be handled together for activities entered in Phase 3 – Step 5.

6. **How does the model account for workers giving time to other programs than the one being staffed for?**
   - The model assumes that the workforce staffing is being done for only the products for which consumption data has been entered. The model recommendations can be interpreted in a manner to mitigate this ambiguity. For example, the suggested workforce by the model will require 100% of their time to meet the selected objective. In case the workers share their time across multiple programs the staffing at that node should be bumped up in proportionate manner.

7. **What assumptions does the model take on staff abilities and process performance?**
   - The model doesn't make any assumptions on staff ability and process performance. The output is completely dependent on user inputs in Phase 3 on staff capability and their efficiency. This is done to give an unbiased recommendation across geographies and programs.

8. **What if the workers are mostly health workers and not supply chain workers? How is that impact on efficiency captured?**
   - The impact of efficiency of workers in covered in Phase 3 of model where average timings for each activity are recorded. The activities being taken care of by not so trained professionals should have higher average time then ideally required.

9. **Can the model give staffing for monthly requirements or seasonal requirements?**
   - The timeline for the output completely depends on the data entered through the model. If the consumption data, supply chain KPIs data and Activities data is entered at monthly level, the recommended staffing is for that particular month.

10. **How does one interpret the Under/Over/Adequate staffed results on Output?**
    - The column is to give indicative staffing reference for current staffing and optimized staffing suggested by tool. As a preset if the recommended staffing falls within 50% of buffer of recommended staffing, the output is "Optimally staffed". "Under-staffed" is highlighted if the current staffing is less than 50% of recommended staffing and "Over-staffed", if current staff exceeds recommended staffing by 50%

11. **When entering consumption data should it be for one product, one family of products, or the entire supply chain?**
    - This depends on how you plan to use the model. For example, if your goal for using the model is to understand where your staff should be placed to

minimize the HIV treatment gap, then you should enter the HIV product portfolio in Step 5 – Phase 1. This tool is a resource to help you run different scenario analysis to make better decisions. We do not advise the results of the tool to be taken at face value due to the complexity of the supply chain

12. **How do I use the weightages in my scenario planning?**
   - The weightages follow the objective selection step in Output scenario planning tab. The base optimization by the tool is done based on demand at each site, which is then redistributed based on Phase 2 KPIs. By setting weightages the user makes sure that for all objectives the staffing should at least be in line with demand at that node. The importance of meeting demand vs the objective selected is decided based on weightages. For eg: If Site A and Site B are only 2 nodes being optimized with demand 100 and 500 units respectively. Let's say Site A has 90% of total treatment gap and Site B has 10% of it, the higher the weightage is for Treatment gap minimization higher is the staff allocation for Site A, even with lower demand at that site.

13. **What is the purpose of the benchmark, and how should I use it in completing the subsequent phases?**
   - The benchmark suggested in Phase 2 is site at which the user is advised to collect Phase 3 data considering these sites have optimal working procedures. If the user is not satisfied with the suggested site, he/she has an option to select another site from dropdown for which Phase 3 data can be entered.

14. **What if the activities are dependent on number of transactions and not volume of products being handled?**
   - The activities in Phase 3 can be classified as volume dependent and volume independent covering the whole range of activities. Even if an activity doesn't fit into them directly, they should be linked to it at core. For example, Transactions will either be happening at regular intervals (monthly, weekly) or they'll be happening every time a fixed amount of product comes in.

15. **I am intimidated by the breadth of information required in Phase 3. What is the best way to find the data required?**
   - This tool can be used for tactical and strategic planning. We suggest the user first determine how they are planning to use this tool and that will determine the amount of details needed for Phase 3 inputs. Please note, there are many organizations who support countries with technical assistance in mapping supply chain activities. This could be helpful for more detailed analysis.

16. Can I use the outputs of the model as my staffing plan?
- We do not suggest nor encourage using this model as a generator of staffing plans. The model was created as a decision-making tool for supply chain managers to better understand the impact of staffing across their supply chain.

17. I have staffed my supply chain according to the model outputs, but I am still not seeing improvements in my supply chain performance indicators?
- If the KPIs are not improving based on your staffing, there could be other reasons for this. For example, stock outs could be due to forecasting errors or other upstream issues. It's important to look at the supply chain as a whole and understand how other external and internal factors affect each other. It is important to remember that this tool and its outputs should be used as a reference for resource staffing.

18. What data is required to use the Workforce Optimization Tool?
- The necessary minimum data is listed below. Additionally, the Workforce Optimization Tool lists out the data needed for each tab.

Supply Chain Mapping and Demand	• Supply chain hierarchy • Demand data
SDP Categorization	• SDP classification (e.g., hospital, clinic, post) • Current staffing plan
Performance Benchmark and SC KPI & Treatment Gap	• Stock out rate • Total population by level • Number of patients • Disease prevalence
Activities and Time	• Activity per level • Time to complete activity per level