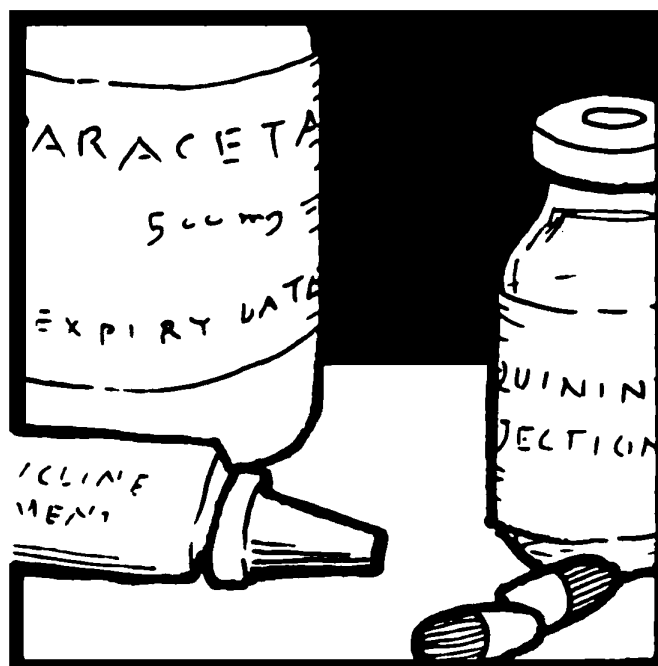


DRUG SUPPLY MANAGEMENT TRAINING



HANDBOOK

FOR

DRUG SUPPLY MANAGEMENT

AT THE

FIRST-LEVEL HEALTH FACILITY



World Health Organization
Division of Child Health and Development

 **BASICS**

The Drug Supply Management Training materials were prepared by World Health Organization's Division of Child Health and Development in collaboration with Basic Support for Institutionalizing Child Survival, a project of USAID, through contracts with ACT International, Atlanta, USA, and Dr. Richard Laing, Management Sciences for Health, Boston, USA.

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INTRODUCTION

First-level health facilities, also known as primary care clinics, require the use of drugs and supplies. It takes a team effort to manage the drug supply. It involves all facility staff: the doctors, nurses, health workers and store-keepers. Each staff member should know how to correctly manage the drug supply at the facility.

What is included in drug supply management at the first-level health facility?

Drug supply management has seven main components.



HOW THE DRUG STORE IS PREPARED



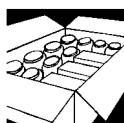
HOW SUPPLIES ARE ORGANISED



HOW RECORDS ARE KEPT



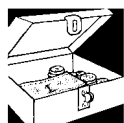
HOW SUPPLIES ARE ORDERED



HOW SUPPLIES ARE RECEIVED



HOW DRUGS ARE DISPENSED



HOW PAYMENT IS RECEIVED

World drug experts identified the basic tasks to correctly manage each drug supply component. The tasks are called the standard procedures of drug supply management. The procedures simplify the management of the drug supply.

The *Handbook for Drug Supply Management at the First-level Health Facility* describes each component and explains its standard procedures. Each chapter explains how the component fits into the drug supply. There is an annex at the back of the handbook. It contains drug supply checklists and forms to use at your facility.

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The handbook is a reference that may or may not be used in conjunction with a Drug Supply Workshop. The workshop is for first-level health workers who manage the drug supply at their facilities. The workshop participant learns the standard procedures of drug supply management and how to implement them at his facility.

Upon return to his facility, the participant should explain the standard procedures to his co-workers. All facility staff should rotate through the drug store and dispensary to learn the procedures. The facility's drug supply will then be managed correctly with or without the health worker who attended the workshop.

The workshop may be followed by a Field Training. The Field Training is on-site follow-up at each participant's facility. During the visit, participants are helped as they improve their drug supply management.

If you participate in a workshop, you and your facility staff should use this handbook as a reference in your store and dispensary.

If you do not participate in a workshop, use this handbook to improve your drug supply management. Different countries have different ways to manage drugs. Some of the procedures may be slightly different than your current drug supply practices. Ask a higher level drug supply authority if they recommend any minor changes to the standard procedures in the handbook.



HOW THE DRUG STORE IS PREPARED

Drugs and supplies are expensive and valuable. They need care or they may deteriorate. If drugs deteriorate, they may lose their potency or have adverse effects on patients.

Drugs and supplies should always be stored in a proper storage space. Your facility should have a room that can be locked, is in good condition and is well organised. That room will be your store. It should be separate from where you dispense drugs. You should keep all supplies in the store and take (issue) drugs daily from the store to a dispensing area.

illustration

TO PREPARE A STORE AT YOUR HEALTH FACILITY

1. Choose a secured room at your health facility to be the store.

Keeping supplies in a store makes it easy for you to always know what supplies you have. It is also an easy way to keep supplies safe.

The store should be large enough to fit all of the supplies. It should be a secured room or, in the case of a very small facility, a locking cabinet.

To secure the store:

a. Double-lock your store.

Put two locks on the door of the room or cabinet. The locks should have separate keys.

Give keys only to persons who are responsible for the supplies in the store. Keep an extra set of keys in a safe place.

b. Keep the store locked at all times when it is not in use.

2. Keep your store in good condition.

Extreme temperatures, light or humidity may deteriorate your supplies. Heat affects liquids, ointments and suppositories. Some drugs, such as injectables and eye or ear drops, spoil very quickly when exposed to light. Tablets and capsules can easily absorb water from the air making them sticky and causing them to deteriorate.

To keep your store in good condition:

a. Inspect the physical structure of the store regularly.

Repair any damages to the roof, walls, door, windows and floor.

b. Control the temperature in the store.

Check that there is a ceiling in the store. If there is no ceiling, build one. You could use cardboard from discarded boxes.

Allow warm air to escape. Open the door and windows while someone is in the store. Put air vents in the walls or ceiling. Use screens to keep out insects. *Secure all openings with grills or bars to prevent theft.*

If you have a fan, use it. Keep it in good working condition.

c. Control the light in the store.

If light enters the store through windows, block the direct light. Either paint the windows white or hang curtains.

d. Control humidity and prevent water damage.

Check that there is good drainage. There should be drainage channels around your store. The roof should have gutters. *Secure drainage areas.*

Allow air to move freely. *Secure air vents and windows.*

Repair leaks as soon as they occur to reduce moisture and water damage.

Containers of tablets and capsules may be packed with a sachet of desiccant (non-edible drying crystals). The desiccant keeps the inside of the container dry. Do NOT open the sachet. Keep the sachet in the container. Keep the container closed except when dispensing drugs.

e. Keep the store free of pests.

Some common pests are rats, roaches, ants and wasps. Spilled items may attract pests. Clean spills and remove broken containers immediately.

3. Keep your store clean and organised.

In a clean and organised store, it is easy to find supplies. The supplies are likely to be in good condition and ready to be used.

To organise the store:

a. Clean the store and keep it tidy.

Dust contaminates supplies and makes labels difficult to read. Spills and breakages collect dirt.

Mop the floor, dust the shelves and wipe down the walls regularly.

b. Store supplies on shelves.

Using shelves is an easy way to organise supplies.

If there are no shelves in your store, make temporary shelves from boxes or from stacked bricks and boards. Place the boxes or boards on pallets. Do NOT put boxes or boards directly on the floor. The floor may be wet. Moisture may rot the cardboard or wood.

Boxes and boards should be regarded as a temporary measure while you wait for adequate shelves to be made.

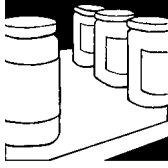
c. If there is a refrigerator, keep it in good condition.

Use the refrigerator to store heat-sensitive drugs and supplies. Do NOT keep staff food in the refrigerator. Opening and closing the door may lower the temperature and cause drugs to deteriorate.

Record the temperature daily. Check that there is enough space around the refrigerator so air can move freely.

d. Store narcotics and psychotropic drugs in a double-locked storage space.

**CLEAN AND PREPARE YOUR STORE
BEFORE YOU PUT MORE SUPPLIES ON THE SHELVES!**



HOW SUPPLIES ARE ORGANISED

The organisation of supplies in the store should accommodate the services offered at the health facility. Anyone who works in the store should be able to find supplies easily.

Similar supplies should be shelved together, arranged in alphabetical order by generic name. Items with a shorter shelf life (short expiry dates or older stock) should be placed in front of similar items with a longer shelf life (later expiry dates or newer stock).

illustration

TO ORGANISE DRUGS AND SUPPLIES IN YOUR STORE

1. Store similar items together on the shelves.

When organising supplies, "similar" refers to the route of administration (external, internal or injectable) and form of preparation (dry or liquid medicines).

Store drugs in the following groups: externals, internals, and injectables. Shelf tablets and capsules together. Shelf liquids and ointments together. Shelf other supplies together.

EXAMPLE:

STORING SIMILAR DRUGS

- In the Tolor Clinic store, there are tetracycline ointment and tetracycline tablets. The ointment is put on the skin (external) and the tablets are taken orally (internal). The health worker stores the ointment with the externals and the tablets with the internals.
- Also in the store, there are cotrimoxazole tablets and cotrimoxazole syrup. Both drugs are internals. The health worker shelves the tablets with the other tablets and capsules. The syrup is placed with other liquids.

If there are 3 or more shelves in your store, store your supplies in the following way:

| | |
|-------------------|---|
| TOP SHELVES | Store dry drugs (tablets, capsules, ORS packets). Use airtight containers. If the top shelf is near the ceiling or out of your reach, use that shelf to store items that are NOT sensitive to heat and are NOT used regularly. |
| MIDDLE SHELVES | Store liquids, including injectables and ointments. Do NOT put drugs below them. If liquids leak, drugs may spoil. |
| BOTTOM SHELVES | Store other supplies, such as surgical items, condoms and labels. Remember, do NOT store anything directly on the floor. |

Always store cold-chain items in the refrigerator.

2. Find the generic name of each drug in your store.

The generic name of a drug should be listed on its label. The generic name is different than the brand name. The generic name describes the drug. The brand name is given by the drug manufacturer. There may be many brand names for the same generic drug. See example below.

3. Arrange and label the supplies on the shelves.

Within each group, arrange the supplies in alphabetical order by generic name. Allow enough space for each item.

Group identical items in amounts that are easy to count, such as pairs or groups of five or ten. Store injectables in groups of ten. Print the generic name of each item on a label. Attach the label to the front of the items on the shelf.

When you organise your supplies in this way, it will be easy for you to see what and how much you have. You will be less likely to confuse items similar in appearance or name.

4. Store drugs with expiry dates by using FEFO (FIRST EXPIRY FIRST OUT) procedures.

The expiry date printed on a drug label tells when a drug expires; that is, when the drug no longer works. Expired drugs may be dangerous.

Manufacturers print dates on drug containers to show how long the drug will remain effective.

A drug may still be effective for a short time after the expiry date, but it is not guaranteed.

Check all drugs in your store for expiry dates. Remove all expired drugs from your store. Put drugs with shorter expiry dates in front of those with longer expiry dates. If drugs have the same expiry date, put the newly received drug behind those already on the shelves.

5. Store drugs without expiry dates by using FIFO (FIRST IN FIRST OUT) procedures.

Store items with no expiry dates in the order received. Put newly received items behind the items already on the shelves. There may be a manufacture date on the container. The date indicates older stock that should be used first.

6. Remove expired and poor quality drugs.

Expired or poor quality drugs may have adverse or reduced effects on patients. Some may have no effect at all. These drugs should be removed. Depending on your facility's policy, either return them to the medical supplier for destruction or burn them at your facility.

Also remove overstocked items and any items that are no longer used at your facility.

Keep a record of the removal of drugs, including date, time, witness and manner of removal. Keep the record on the item's stock card. (You will learn more about stock cards in the next chapter, How Records Are Kept.)

**ORGANISING YOUR STORE
MAKES YOUR JOB EASIER!**



HOW RECORDS ARE KEPT

To know what there is in stock, you have to keep accurate stock records.

To know how much there is of each item in stock, you have to keep accurate records.

To know when an item should be ordered, you have to keep accurate records.

Keeping records saves you time:

- ▶ You will know what you have in your store.
- ▶ You will know when you use supplies and what the supplies are used for.
- ▶ You will know how much stock you use on a regular basis.
- ▶ You will know when to order more.

Keeping records protects you:

If you are accused of theft or misuse of supplies, you will be able to refer to your records. Your records will document the movement of supplies. It will show that you are not responsible for the problem.

There are many different ways to keep records. The procedures recommended here include the use of stock cards. Stock cards can be made to fit any record-keeping system.

THE STOCK CARD

There should be a stock card for each item in your store. Keep the stock card with the item on the shelf. Use the stock card to track the movement of the item (that is, record when and how the item is used).

See the example stock card below. The top of the stock card lists:

- ▶ ITEM name, including form and strength
- ▶ CODE NUMBER that identifies the item
- ▶ UNIT + SIZE (container of the item + amount of item in the container)
- ▶ PRICE per unit
- ▶ REORDER LEVEL (number of units to order)

EXAMPLE: STOCK CARD

| ITEM: | | | | CODE NUMBER: | | | |
|--------------|---------------|-------------------|-----------|-----------------|------------------|---------|-----------|
| UNIT + SIZE: | | | PRICE: | | REORDER LEVEL: | | |
| DATE | RECEIVED FROM | QUANTITY RECEIVED | ISSUED TO | QUANTITY ISSUED | BALANCE IN STOCK | REMARKS | SIGNATURE |
| | | | | | | | |

There may be an item in your store of different forms (tablet, liquid or ointment), strengths (amoxicillin 250 mg tablets or 500 mg tablets) or unit sizes (bottle of 1000 tablets or bottle of 500 tablets). If so, there should be a separate stock card for each form, each strength and each unit size of the item. Do NOT use the same card for different forms, strengths or unit sizes of an item.

When you record on a stock card, use a pen to enter the ITEM, CODE NUMBER, and UNIT + SIZE. This information does not change. Use a pencil for the PRICE and REORDER LEVEL. The price and the reorder level of an item may change. (REORDER LEVEL will be taught in the next chapter, How Supplies Are Ordered.)

The stock card also has columns for recording information about the movement of the item:

- ▶ DATE of receipt or issue
- ▶ RECEIVED FROM, name of medical supplier that sent the item to your store
- ▶ QUANTITY RECEIVED, number of units received at the store
- ▶ ISSUED TO, name of dispensing area where item will be dispensed to patients
- ▶ QUANTITY ISSUED, number of units issued out of the store
- ▶ BALANCE IN STOCK, number of units remaining in the store
- ▶ REMARKS, important information about the movement of the item
- ▶ SIGNATURE of person who records the movement of the item

EXAMPLE: STOCK CARD

| ITEM: | | | | CODE NUMBER: | | | |
|--------------|---------------|-------------------|-----------|-----------------|------------------|---------|-----------|
| UNIT + SIZE: | | | PRICE: | | REORDER LEVEL: | | |
| DATE | RECEIVED FROM | QUANTITY RECEIVED | ISSUED TO | QUANTITY ISSUED | BALANCE IN STOCK | REMARKS | SIGNATURE |
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In the REMARKS column, record the balance brought forward from the previous card, the order requisition number and expiry date of items received, change in price, and information about the removal of expired, poor quality or overstocked items. Record any other information that is important to the management of the drugs and supplies at your facility.

Record every time you receive or issue an item. Record only one movement (that is, one receipt or one issue) per line. Record at the time of movement.

If your health facility pays for supplies, you should know the price of each item in your store. If you know the price, you will be able to calculate the value of an item's stock in the store and the cost of the stock to be ordered. You will also know the approximate differences in prices of similar items. For example, tablets cost less than similar liquid preparations.

To calculate the value of the stock in the store:

- ▶ Multiply the **BALANCE IN STOCK** by the current **PRICE** per unit.

EXAMPLE:

The balance in stock of amoxicillin 250 mg tablets is **12 bottles**. The current price per bottle is **\$25.55**. The value of amoxicillin 250 mg stock is **\$306.60**.

$$12 \text{ bottles} \times \$25.55 = \$306.60$$

To calculate the cost of stock to be ordered:

- ▶ Multiply the number of units to be ordered by the current **PRICE** per unit.

EXAMPLE:

The health worker orders **10 bottles** of amoxicillin 250 mg tablets from the supplier. The current price per bottle is **\$25.55**. The cost of the order is **\$255.50**.

$$10 \text{ bottles} \times \$25.55 = \$255.50$$

When the price of an item changes, erase the price from the stock card. Write the new price on the card in pencil. Use the new price to calculate the value of the stock or the cost of the stock to be ordered.

This information is important if you are responsible for your facility's drug supply budget.

TO KEEP ACCURATE STOCK RECORDS

- 1. Make a stock card for each item in your store.**
- 2. Keep the stock card with the item on the shelf.**

You could attach the card to the front of the shelf near the label of the item. You could place the card with the containers of the item on the shelf.

3. Record on the stock card every time you receive or issue an item.

Use a pen. This information does not change. Record at the time of movement. Do NOT wait until the end of the clinic session, the day, the week, or the month.

a. Record an item received at the store.

When you receive an item at the store, put it in its place on the shelves. Record its movement on its stock card.

1. Record the DATE of receipt.
2. Record where the item was RECEIVED FROM.
3. Record the QUANTITY RECEIVED in units.
4. Add the QUANTITY RECEIVED to the previous BALANCE IN STOCK.

EXAMPLE:

On 6 December, there is **1 bottle** of amoxicillin 250 mg tablets in stock. The health worker receives **12 bottles** in a delivery from the medical supplier. The new **BALANCE IN STOCK** is **13 bottles**.

$$\mathbf{1\ bottle + 12\ bottles = 13\ bottles}$$

5. Record the new BALANCE IN STOCK.
6. Record the requisition number of the order and the expiry date of the item in the REMARKS column.

b. Record an item issued out of the store.

When an item goes out of the store to a dispensing area, the item should always be a whole unit. Do NOT issue partial units.

1. Record the DATE of issue.
2. Record where the item was ISSUED TO.
3. Record the QUANTITY ISSUED in units.
4. Subtract the QUANTITY ISSUED from the previous BALANCE IN STOCK.

EXAMPLE:

On 20 December, there are **13 bottles** of amoxicillin 250 mg tablets in stock. The health worker finds **1 bottle** of amoxicillin that has expired. She sends (issues) the bottle back to the medical supplier. The new BALANCE IN STOCK is **12 bottles** of amoxicillin 250 mg tablets.

$$\mathbf{13\ bottles - 1\ bottle = 12\ bottles}$$

5. Record the new BALANCE IN STOCK.
6. Record any significant information about the movement of the item in the REMARKS column.

4. Always keep an accurate running tally of the number of units in the BALANCE IN STOCK column.

You may have partial units remaining at the end of the clinic session. If so, do NOT put them back into the store. Lock them in the dispensary until the next session.

5. Count your stock at regular intervals, such as once a month.

Count the number of units of each item in your store regularly. This is called a physical count. At the first-level health facility, make a physical count of each item once a month.

a. Review the information on the top of the stock card.

Check that the information is current and correct.

b. Make a physical count of an item.

1. Draw a double line after the last entry on the card. You may use a different colour (red) for this and the following entries on the card.
2. Record the DATE of the count. Write the words "physical count" across the columns. See example below.
3. Count the actual number of units (e.g., bottles) of the item. The number of units that you count is the physical count.
4. Record the physical count number in the BALANCE IN STOCK column. If the physical count and the previous balance are not the same, write "discrepancy" and note how many are missing in the REMARKS column.
5. Draw a double line across the stock card after the physical count information. The double lines highlight the physical count information.

EXAMPLE: STOCK CARD

| ITEM: | | | | CODE NUMBER: | | | |
|--------------|---------------|-------------------|-----------|-----------------|------------------|----------------|-----------|
| UNIT + SIZE: | | | | PRICE: | | REORDER LEVEL: | |
| DATE | RECEIVED FROM | QUANTITY RECEIVED | ISSUED TO | QUANTITY ISSUED | BALANCE IN STOCK | REMARKS | SIGNATURE |
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If the physical count and the previous balance are not the same, INVESTIGATE. There may be more items or fewer items on the shelf than noted on the stock card. Someone may have forgotten to record a movement on the stock card. Check who was on duty. Check who had access to keys. Watch for any unusual or suspicious activity over the next few days.

If a stock card is missing, INVESTIGATE. Make a new stock card. Note that it is a replacement card in the REMARKS column. If you find the old stock card, copy the information from the replacement card to the old one. Then, destroy the replacement card.

Keep completed stock cards for two to five years. The cards contain useful information about the supplies used at your facility, and any changes in use due to seasons, epidemics, or other causes.

Stock cards are essential to the management of the drug supply. You will refer to the information recorded on the cards as you manage all of the drug supply components.

For a quick reference on record-keeping procedures, see the **Stock Card Checklist** in the annex. Display the checklist in your store to inform staff members how to keep records. Encourage staff to follow the procedures.

**KEEPING ACCURATE RECORDS
MAKES YOUR JOB EASIER!**



HOW SUPPLIES ARE ORDERED (BASED ON PAST CONSUMPTION)

The management of the drug supply works best when supplies are available. Supplies are more likely to be available if ordered regularly. Supplies should be ordered based on their use (consumption). If you order supplies based on consumption, you will have the supplies you need when you need them.

This chapter describes an ordering method that is reliable. It has been used effectively in many countries. However, if there is a satisfactory method already in place at your facility, use that method and use it consistently.

TO ORDER SUPPLIES BASED ON PAST CONSUMPTION

1. Calculate the average monthly consumption of each item in your store.

The **average monthly consumption** of an item is the number of units that your facility is likely to use during a month. Some months you may use more; some months you may use less. The **average** is the quantity that is usually used during a month.

HOW TO CALCULATE AN AVERAGE

MATH REVIEW

- Look at a set of numbers: 1, 5, 6
- Count the numbers in the set: 3 numbers
- Add the numbers in the set: $1 + 5 + 6 = 12$
- The answer (sum) is 12.
- Divide the sum (12) by the numbers in the set (3): $12 \div 3 = 4$
- The answer (4) is the average.

- EXERCISES**
1. Tell your trainer how you would calculate the average of the following set of numbers: 7, 5, 0, 8
 2. Calculate the average of the following numbers:
5, 4, 5, 3, 3, 2, 1, 1, 2, 2, 3, 5

(Answers are on page 24.)

To calculate average monthly consumption:

a. Count the number of units issued during a month.

See the example stock card on the next page. The QUANTITY ISSUED column is circled. The number of units issued is the number of units consumed.

EXAMPLE:**STOCK CARD**

| ITEM: | | | | CODE NUMBER: | | | |
|--------------|---------------|-------------------|-----------|-----------------|------------------|---------|-----------|
| UNIT + SIZE: | | | PRICE: | | REORDER LEVEL: | | |
| DATE | RECEIVED FROM | QUANTITY RECEIVED | ISSUED TO | QUANTITY ISSUED | BALANCE IN STOCK | REMARKS | SIGNATURE |
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Count the number of units issued for as many months as you have records.

A 12-month count is adequate. Counting for 24 or 36 months (2 or 3 years) gives a better picture of use. The number will vary from month to month. Consumption depends on the demand for the item.

After calculating the consumption for a few years, you will notice changes in use during different seasons of the year, epidemics, and for other reasons.

b. Add the number of units issued for each month counted.

The sum is the amount of the item consumed at your facility during the months counted.

c. Divide the sum by the number of months counted.

The answer is the average monthly consumption. It is the quantity usually consumed at your facility over the time period counted (for example, 3 months, 12 months, 24 months).

If an average monthly consumption is any part ($\frac{1}{4}$, $\frac{1}{2}$, etc.) of a whole number (1, 2, 3), round up to the next whole number ($\frac{1}{4}$ becomes 1, $2\frac{1}{2}$ becomes 3). Part of a unit, such as half of a bottle of aspirin, cannot be ordered. Therefore, always count to the next whole number.

If you are keeping records for the first time, calculate the average monthly consumption after 3 months. Calculate again after 6 months. Calculate again after 12 months.

Calculating the average monthly consumption does not work well if there are months when the item is not available (that is, not available at your facility or not available from the medical supplier). If this is your situation, calculate the average monthly consumption only during those months that the item is available.

Keep your records accurate. Update the average monthly consumption every year. Add the number of units of each item issued monthly during that year to the previous year's total. Divide the total number of units by the total number of months counted.

Updated counts and averages give a clear picture of past consumption. They show periods of increased or decreased use that may be due to seasonal changes, epidemics or other reasons specific to your area.

2. Determine how often your facility receives deliveries.

The **frequency of deliveries** varies from place to place:

- ▶ Supplies may be delivered to you on a predictable schedule, such as monthly.
- ▶ Someone from your facility may regularly collect supplies from a medical supplier, such as the district hospital or a central medical store.
- ▶ Supplies may be delivered to you irregularly or when conditions allow.
- ▶ Deliveries may be affected by weather conditions or transportation problems.

A **monthly** delivery or collection method is recommended. It is a reliable way to have supplies available when they are needed. It is not recommended that supplies be delivered weekly, irregularly or as conditions allow. If this happens at your facility, try to change to supplies being delivered or collected monthly.

To determine the frequency of deliveries:

- a. **Note how often (such as, every month, every 2 months, every 3 months) your facility receives supplies from the medical supplier.**

Also note when (such as, the first day of every month, the last Monday of every 2 months) your facility receives supplies. This information is useful when you are organising the work to take place in your store.

- b. **Determine the reorder factor for your facility.**

The **reorder factor** is a number that you will use to calculate the reorder level and ordering amount of each item.

The following reorder factors are recommended for first-level facilities. If you use the appropriate factor for your facility, you will reorder less frequently. You will likely have the supplies in stock when you need them.

REORDER FACTORS

- ▶ The reorder factor is 3 if supplies are delivered once a month.
- ▶ The reorder factor is 5 if supplies are delivered every 2 months.
- ▶ The reorder factor is 7 if supplies are delivered every 3 months.
- ▶ The reorder factor is 9 if supplies are delivered every 4 months.

3. Calculate the reorder level of each item in your store.

The **reorder level** of an item indicates the following ordering information:

- ▶ When you should reorder an item
- ▶ The number of units of the item that you should reorder
- ▶ The number of units of the item that will likely be consumed at your facility over a predetermined period of time

To calculate reorder level:

- a. Calculate the average monthly consumption of an item (see page 29).
- b. Note the reorder factor for the frequency of deliveries at your facility.
- c. Multiply the item's average monthly consumption by the reorder factor.

The answer is the reorder level. Record the reorder level in the appropriate space on top of the stock card. Use a pencil. A reorder level may change due to changes in demand or the frequency of deliveries.

EXAMPLE: CALCULATING THE REORDER LEVEL

At Talor Clinic, supplies are delivered every month. The reorder factor is 3. The average monthly consumption of cotrimoxazole pediatric tablets is 3 bottles. The reorder level of cotrimoxazole is **9** bottles.

$$\begin{array}{ccccccc} & \mathbf{3} & & \mathbf{x} & & \mathbf{3} & & \mathbf{=} & & \mathbf{9} \\ \text{average monthly consumption} & & & & & \text{reorder factor} & & & & \text{reorder level} \end{array}$$

If supplies were delivered **every 2 months**, the reorder factor would be **5**. The reorder level of cotrimoxazole would be **15** bottles.

$$\begin{array}{ccccccc} & \mathbf{3} & & \mathbf{x} & & \mathbf{5} & & \mathbf{=} & & \mathbf{15} \\ \text{average monthly consumption} & & & & & \text{reorder factor} & & & & \text{reorder level} \end{array}$$

If supplies were delivered **every 3 months**, the reorder factor would be **7**. The reorder level of cotrimoxazole would be **21** bottles.

$$\begin{array}{ccccccc} & \mathbf{3} & & \mathbf{x} & & \mathbf{7} & & \mathbf{=} & & \mathbf{21} \\ \text{average monthly consumption} & & & & & \text{reorder factor} & & & & \text{reorder level} \end{array}$$

If supplies were delivered **every 4 months**, the reorder factor would be **9**. The reorder level of cotrimoxazole would be **27** bottles.

$$\begin{array}{ccccccc} & \mathbf{3} & & \mathbf{x} & & \mathbf{9} & & \mathbf{=} & & \mathbf{27} \\ \text{average monthly consumption} & & & & & \text{reorder factor} & & & & \text{reorder level} \end{array}$$

Use the appropriate **reorder factor** to calculate the **reorder levels** of all of the items in your store. This is important. Reorder levels guarantee you will have enough of the items you need even if a scheduled delivery is missed.

If there is a change in average monthly consumption of an item, erase the number on the stock card. Calculate the new reorder level. Record the new reorder level on the card. Remember to use the new number when ordering supplies.

4. Determine when and how much to order.

On the day of the month that your facility orders supplies, check the balance of each item in your store against that item's reorder level. Order any items with a balance below the reorder level.

ALWAYS order the number of units indicated by the REORDER LEVEL.

To determine when and how much to order:

a. Check the BALANCE IN STOCK recorded on the stock card for each item.

Look at the stock card for an item in the store. Read how many units of the item you have in stock in the BALANCE IN STOCK column. Check that it is the same as the number of units on the shelf.

b. Compare the BALANCE IN STOCK to the REORDER LEVEL.

c. Decide if it is time to reorder. Decide how much to order.

- ▶ If the balance is more than or equal to the REORDER LEVEL, it is NOT time to reorder that item. Do NOT order the item.
- ▶ If the balance is less than the REORDER LEVEL, it is time to order the item. Place an order for the REORDER LEVEL amount of the item.

EXAMPLE: DETERMINING WHEN AND HOW MUCH TO ORDER

The REORDER LEVEL of cotrimoxazole pediatric tablets is **15 bottles**.

WHEN TO ORDER

- If there are **16 or more bottles** of cotrimoxazole in stock, do NOT order at this time.
The BALANCE IN STOCK is more than the reorder level.
- If there are **15 bottles** of cotrimoxazole in stock, do NOT order at this time.
The BALANCE IN STOCK is equal to the reorder level.
- If there are **14 or less bottles** of cotrimoxazole in stock, place an order.
The BALANCE IN STOCK is less than the reorder level.

HOW MUCH TO ORDER

- If there are **14 or less bottles** of cotrimoxazole in stock, order the reorder level.
The reorder level of cotrimoxazole is 15 bottles.

Do NOT follow the above procedures when ordering supplies to treat a seasonal disease (such

as malaria or diarrhoea), an epidemic, or other emergency.

- ▶ For a seasonal disease, order enough of the appropriate supplies well in advance of when you think the disease season will begin. Do NOT order the reorder level. Base your needs on how much you used during the previous season.
 - ▶ For an epidemic or emergency, estimate what and how much you will need. Place an emergency order.
 - ▶ For transportation problems or poor weather conditions, avoid delivery delays by planning ahead.

If the rainy season is soon and roads will be flooded, you will need supplies to reach the facility before the rains begin. Either order extra supplies or order earlier than planned. Determine your needs based on past consumption.

5. Place an order for the supplies needed at your facility.

Your facility may have a fixed schedule (every Monday, the last Monday of each month) for ordering supplies. You may order irregularly, such as when an item falls below its reorder level. Whatever your system, follow the procedures below to place an order.

a. Make a written request for supplies.

A requisition form is an easy way to list the supplies that you need. See the example form on page 25. If your facility does not have a requisition form, there is a copy of the form in the annex.

The requisition form is used by the person who orders the supplies AND by the medical supplier who fills the order and sends the supplies to the health facility. Every request should have a serial requisition number. The requisition number tracks orders.

b. Complete your facility's order information accurately.

However you place your order, print clearly so that anyone can read your order.

Note the date of the order. Include the name and address of your medical supplier.

Specify the name of each item in the ITEM column, including its strength and form. Specify its UNIT + SIZE. Record the CODE NUMBER if the number is available in a medical supplier's catalogue or list. If not, leave the CODE NUMBER blank. In the QUANTITY column, record the reorder level of the item. Sign the form.

c. Send or deliver your order to the medical supplier.

**IF YOU ORDER SUPPLIES BASED ON PAST CONSUMPTION,
YOU WILL HAVE THE SUPPLIES YOU NEED
WHEN YOU NEED THEM!**

Answers to exercises on page 17:

Tell your trainer how you would you calculate the average of 7, 5, 0 and 8.

- Count the numbers in the set: *4 numbers*
- Add the numbers in the set: $7 + 5 + 0 + 8 = 20$
- Divide the sum by the numbers in the set: $20 \div 4 = 5$
- The answer is the average: 5

Calculate the average of 5, 4, 5, 3, 3, 2, 1, 1, 2, 2, 3, 5

- Count the numbers in the set: *12 numbers*
- Add: $5 + 4 + 5 + 3 + 3 + 2 + 1 + 1 + 2 + 2 + 3 + 5 = 36$
- Divide the sum (36) by the numbers in the set (12): $36 \div 12 = 3$
- The average is 3.



HOW SUPPLIES ARE RECEIVED

When supplies are delivered to the health facility, the person who receives the delivery should check that the shipment (that is, the goods that were sent from the supplier) contains what was ordered. That person should check that no supplies have been lost or stolen, and that the items in the shipment are of good quality and not expired.

Discrepancies in orders are common. They include missing or over-issued supplies, or items that are expired, damaged or of poor quality. Discrepancies should not be ignored.

TO RECEIVE A SHIPMENT OF SUPPLIES

1. Receive the supplies in person.

All shipments should be received by a staff member at the time of delivery.

2. Check the outside of the boxes for theft.

Briefly review the requisition form that came with the order. Check that the number of boxes is the same as the number listed on the requisition form.

Check if any of the boxes have been opened. The bottom of a box may be carefully opened and small items removed. Someone may empty the contents from a bottle, place the empty bottle back into the carton, and carefully reseal the bottom of the box.

Checking the number and quality of boxes may discourage someone from stealing supplies from your order. If you discover that something was taken, you may be able to determine when it happened and who is responsible.

3. Keep a record of deliveries.

Delivery trucks often carry orders for several facilities on a delivery route. Boxes intended for your facility may be delivered to another facility. Boxes may disappear. Keeping records of deliveries helps you find and correct problems that may occur.

a. Record delivery information each time you receive supplies.

Keep the delivery information organised. See the example delivery form below.

EXAMPLE: DELIVERY FORM

| DATE | REQUISITION NUMBER | ISSUE VOUCHER NUMBER | DELIVERY PERSON NAME + SIGNATURE | VEHICLE REG. NO. | NO. OF BOXES | STAFF MEMBER SIGNATURE |
|------|--------------------|----------------------|----------------------------------|------------------|--------------|------------------------|
| | | | | | | |
| | | | | | | |

Record the following information:

- ▶ DATE of delivery
- ▶ REQUISITION NUMBER, number that identifies the order that you placed
- ▶ ISSUE VOUCHER NUMBER, if available:
A medical supplier may assign a new serial number to the order. The number identifies the order that was sent. The number may also be called a PACKING NOTE NUMBER.
- ▶ DELIVERY PERSON NAME + SIGNATURE
- ▶ VEHICLE REGISTRATION NUMBER (or license number of the vehicle)
- ▶ NUMBER OF BOXES in the order
- ▶ STAFF MEMBER SIGNATURE, health worker who receives the supplies

Use a pen. This information does not change.

If your facility does not have a delivery form, you could make a form on a page in your facility's visitor book.

Always keep delivery information in a safe place. (There is a copy of the delivery form in the annex.)

b. Ask the delivery person to sign the form before he leaves the facility.

Do NOT sign for the delivery person. His signature is proof that he delivered the supplies to your facility.

4. Check the supplies received against the items on the requisition form.

Remove the supplies from the box. Read the requisition form. Review the items ordered and the items and quantities dispatched. Check that you receive what you ordered.

If items are missing, order them again. If fewer supplies were received than were ordered, keep and use them. You should plan to reorder the items soon.

If you receive items that were not ordered or that are not listed on the requisition form, follow your health facility's policy for returning them.

You may be able to keep and use extra items if they are recommended by the Ministry of Health for use at the first-level facility. Check with the person in charge at your facility. If keeping the extra items means that your store will be overstocked or that drugs with shorter expiry dates will expire before you use them, return those items to the supplier.

5. Check the expiry dates of all items.

Do NOT accept expired items. Either return them to the supplier or burn them. Expired items may harm a patient or have no effect on the patient at all.

6. Check the basic quality of the items in the delivery.

To check for signs of damage or deterioration:

a. Check refrigerated items.

Refrigerated items should be stored first. If refrigerated items are not packed in cold packs, do NOT accept them. Return those items to the supplier.

b. Check the colour of drugs and vaccines.

If drugs or vaccines are discoloured, they have deteriorated. Do NOT accept them.

c. Check for broken containers. Check for leaks.

Carefully remove broken containers. If there is a leak, remove any supplies damaged from the leak.

d. Check for unsealed or unlabelled items.

Someone may have tampered with unsealed items. It is dangerous to use unlabelled items. Do NOT accept them.

Open sealed containers only if you suspect deterioration. Once opened, check the quality:

e. Check for unusual odours of tablets and capsules.

If tablets and capsules have unusual odours, they may have deteriorated. Do NOT accept them.

f. Check tablets and capsules.

Pour tablets or capsules onto a clean surface, such as a counting tray or a table covered with paper.

Check for broken, powdery or sticky tablets and capsules. Check for cracked or swollen capsules. Do NOT accept any tablets or capsules that are damaged.

g. Check injectable liquids.

Shake the vial. Hold the vial to the light. Clear liquids should have no particles that reflect light. If a vial has small particles, the drug has deteriorated. Do NOT accept the vial.

Poor quality drugs or drugs that have been tampered with may be dangerous. Return those items to the supplier.

When you finish checking the items in the delivery, sign the requisition form. Keep the form on file at your facility. Put any damaged goods or poor quality drugs in a box to return to the supplier. Return those supplies at the earliest opportunity.

7. Document all discrepancies.

Discrepancies include drugs and supplies that are missing or over-issued, expired, damaged or of poor quality. Sometimes discrepancies are not noticed until after the delivery. If you find a discrepancy, tell the person in charge and record it in writing.

Ideally, your facility should have a discrepancy report form. (See example form on next page. There is a copy of the discrepancy report form in the annex.) A discrepancy report form is an easy way to document discrepancies.

If you do not have a form, write a letter about the discrepancy and send it to the appropriate authority. Report missing or over-issued supplies, expired drugs, any breakages or other poor quality items. Send a copy of the form or letter to the medical supplier who shipped you the supplies. Keep a copy on file at your facility.

Documenting discrepancies protects you. If the appropriate authority and the medical supplier receive a number of discrepancy reports, the drug supply problem may eventually be resolved.

8. Store the supplies correctly.

After you check the shipment, place each item at its label in the store. Follow FEFO or FIFO procedures. Record the movement of each item on its stock card. Recording movement includes DATE, RECEIVED FROM, QUANTITY RECEIVED, BALANCE IN STOCK, REMARKS (requisition number and expiry date) and your SIGNATURE.

**ALWAYS CHECK EXPIRY DATES AND QUALITY
BEFORE YOU STORE YOUR SUPPLIES!**

EXAMPLE:

DISCREPANCY REPORT FORM

| | | | | |
|---|------------------|---------------------------|-----------|----------|
| HEALTH FACILITY: | | DATE: | | |
| RECEIVED BY: | | WITNESSED BY: | | |
| DETAILS OF SHIPMENT | | | | |
| REQUISITION NUMBER: | | TRANSPORTER: | | |
| NUMBER OF BOXES RECEIVED: | | NAME OF DELIVERY PERSON: | | |
| | | VEHICLE REGISTRATION : | | |
| DETAILS OF DISCREPANCIES | | | | |
| ISSUE VOUCHER | ITEM DESCRIPTION | CODE | UNIT+SIZE | QUANTITY |
| ITEMS MISSING / OVER-ISSUED MISSING OVER- | | | | |
| ISSUED | | | | |
| | | | | |
| EXPIRED ITEMS | | | | |
| | | | | |
| DAMAGED OR POOR QUALITY ITEMS | | | | |
| | | | | |
| OTHER DISCREPANCIES | | | | |
| | | | | |
| NAME (print): | | (signature): OFFICE HELD: | | |
| CC: | | | | |



HOW DRUGS ARE DISPENSED

When you dispense a drug to a patient, it is important that the patient receives:

- ▶ **THE CORRECT DRUG**
- ▶ **THE CORRECT AMOUNT OF THE DRUG**
- ▶ **THE CORRECT INFORMATION ON HOW TO TAKE THE DRUG**

Dispensing a drug to a patient consists of the following: checking the prescription, collecting, counting and packaging the drug, and dispensing the drug to the patient.

The dispenser should carefully and clearly explain to the patient how to take the drug. This is very important. Drugs are effective only if taken correctly. Then the dispenser should check that the patient understands how to take the drug. The patient should be able to repeat to the dispenser how he will take the drug.

In some health facilities, a health worker other than yourself may be the dispenser. Therefore, it is your responsibility to teach the following procedures to all health workers who dispense drugs at your facility.

TO PREPARE DRUGS AND SUPPLIES

- 1. Go into the store. Determine the supplies needed. Place the items on a tray. Take them to the dispensing area.**

Estimate the number of units of each item that will be needed for the day or the clinic session. Base the amount on past use. If necessary, ask someone with experience issuing supplies to help you.

Record the movement of each item that you issue out of the store on its stock card.

Once items are issued to a dispensing area, do NOT reissue them to the store. Keep them in the dispensing area. Secure the items between clinic sessions.

Prescribing drugs and dispensing drugs are separate activities. Prescribe drugs in the clinical area of the health facility. Dispense drugs from a dispensing area (or dispensary). Keep the areas

separate. Do NOT dispense to patients directly from the store!

In most small health facilities, a health worker prescribes drugs during the clinical consultation. Then he moves to the dispensary and dispenses the prescribed drugs to the patients.

The dispensary may be a room, part of a room, a cabinet or a dispensing trolley.

2. Keep supplies in the dispensing area organised.

Organise supplies as they are in the store: that is, by route of administration and by form. Arrange each group of items in alphabetical order by generic name.

TO DISPENSE A DRUG (OR OTHER ITEM)

3. Check that the prescription is appropriate for the patient.

Review the prescription. Find its generic name. If you cannot read it or have any questions, ask the person who wrote the prescription to explain it to you.

Check that the prescription is appropriate for the age, weight and sex of the patient. Also check that the drug prescribed is appropriate in form, strength and dosage.

If more than one item has been prescribed, do NOT combine them. Review and prepare one prescription at a time.

4. Collect a container of the item, and check its expiry date.

Some drugs look the same and may easily be confused. Read the generic name on the label of the container. Check that you collect the correct drug. Check that you also have the correct form, strength and unit size.

Also collect a drug envelope or small medicine bottle to package the item for the patient.

5. Label the package clearly with the patient's name, date, name of the item, quantity dispensed, and written instructions for the patient.

Record the information on the label. Then, attach the label or put the drugs in the package.

insert drug labels

Print clearly. Use pictures or numbers to record the dose. Include written instructions also. Patients who cannot read may know of someone who can read the instructions to them at home. After you record the information on the label, attach it to the empty package.

A clearly written label is important. When a patient returns to a facility with an old prescription, the health worker will be able to read it.

6. Open the container. Check the quality of its contents. Count the quantity needed in a clean, safe manner.

Once the container is opened, if drugs have an odd smell, they may have deteriorated. If tablets or capsules are cracked, broken, powdery or sticky, they are damaged. If capsules are swollen, softened or stuck together, they are damaged. Do NOT give patients poor quality drugs. Dispose of those drugs properly.

Count tablets or capsules using a counting tray. If you do not have a tray, you can make one from a sheet of paper or used x-ray film (see below), or you can use a clean surface covered with paper. Count the tablets or capsules with a clean spatula. Do NOT use your hands. You may contaminate both the drugs and your hands.

illustration

7. Put the prescribed amount of the drug into the package for the patient to take home.

Put the drug into its own labelled package using the tray and spatula (or measuring device for liquids). Do NOT mix prescriptions or drugs.

8. Put any extra tablets or capsules back into the appropriate container immediately.

If more than one drug has been prescribed, close one container before you open another container. Prepare all of the prescribed items before you dispense them to the patient.

9. Give the package to the patient. Teach the patient how to take the drug.

If the patient is a child, do the following steps with the mother (or caretaker).

Explain to the patient how to take the drug (see steps a through d below). If the patient has more than one prescription, dispense one item at a time.

a. Tell the patient the name of the drug, its form (tablet, syrup, etc.), what it is for, and the dosage.

The dosage includes:

- ▶ when to take the drug (for example, in the morning)
- ▶ how much of the drug to take (for example, 1/2 tablet)
- ▶ for how long to take the drug (for example, 2 days)
- ▶ how to take the drug (for example, with food)

You may display instructions about how to take the most common drugs on a dispensary wall. Then health workers would be more likely to give the same (and correct!) instructions to patients.

b. Show the patient how to prepare the dose. Give the patient practice.

If a dose is less than a whole tablet, show the patient how to divide the tablet. If it should be mixed with food, show how to crush the tablet and mix it with food.

If you are dispensing syrup, show how to measure the correct amount. Use the cap of the syrup bottle or show the patient common spoons to use.

Ask the patient to practice measuring the dose. Use the drug that you have already packaged for the patient to take home. When you are confident that the patient understands how to prepare the dose, ask the patient to take the first dose.

Watch the patient carefully and give feedback, as necessary.

c. Tell the patient to take all of the prescribed drugs.

Sometimes a patient may feel better before he finishes all of the drugs given to him. Tell the patient that even if he feels better he must take all of the drugs so he will stay well. This is especially true of antibiotics or antimalarials because bacteria or parasites may still be present.

d. Ask the patient to tell you how he will take the drug.

Each time you dispense a drug, check the patient's understanding.

If a patient answers correctly, compliment him! If not, explain the dosage to him again. Explain until he can answer you correctly.

If you are giving the patient more than one prescription, dispense one item at a time. Dispense the next item only after you are sure the patient knows how to take the drug you have just given him.

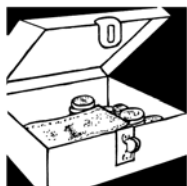
Drugs are effective only if patients take them correctly. Sometimes even clever patients do not understand how to take their drugs. Drugs taken incorrectly may be poisonous or fatal. Always check the patient's understanding.

10. Tell the patient to keep all drugs and medical supplies in a safe place at home, and out of the reach of children.

Tell the patient that drugs are expensive and need to be stored in a special place at home. The place must be cool, dark and dry, and safe from pests.

Recommend places in homes in your area where patients could store their drugs.

**WHEN YOU DISPENSE A DRUG,
TEACH THE PATIENT HOW TO TAKE THE DRUG!
CHECK THE PATIENT'S UNDERSTANDING!**



HOW PAYMENT IS RECEIVED

Health facilities have different methods of paying for drugs. This chapter describes the standard procedures for receiving payment from patients. It is for facilities where patients pay for the drugs dispensed to them.

If this is your situation, you may be the person responsible for money received at your facility. If so, you need a safe method to receive and keep your facility's money.

TO RECEIVE PAYMENT

1. Always sell the patient the full course of treatment.

A full course of treatment is the amount of the drug needed to remedy an illness. If you sell a patient less than the full course, he may not get better. If not taken completely, the drug may not be effective in treating the illness.

Explain to the patient that you will only sell the full course. If a patient does not have enough money to buy the prescribed items, decide which items are most important to treat the patient. Sell the lifesaving drugs (i.e., antibiotics, antimalarials, ORS) first. Then, sell the less crucial ones (i.e., antipyretics or cough syrup).

2. Keep a record of any payment you receive from patients.

Use numbered receipts to keep records of all items you sell to patients. Make two copies of each receipt, one for the facility and one for the patient.

If your facility does not have numbered receipts, you may be able to request a receipt book printed for your facility. If not, use the example here. Write the information on a sheet of paper. Cut at the dotted line. Give the patient his copy of the receipt.

| EXAMPLE: | PAYMENT RECEIPT |
|--|--|
| Date _____ 00001 Item _____ _____ _____ _____ Amount paid _____ | Date _____ 00001 (NAME OF YOUR HEALTH FACILITY) Item _____ _____ Amount Paid _____ |
| FACILITY'S COPY | PATIENT'S COPY |

You could keep payment records in a common receipt book. Use carbon paper to make a copy of receipts. Place the carbon paper between two pages in the receipt book. For each purchase, write the receipt information on the top page. The information will copy onto the page below. Remove one copy from the book and give it to the patient. Keep the other copy in the book.

3. Check the payment received against the receipt.

Make sure that the money you receive is the same as is written on the receipt. This procedure will protect you if there is a discrepancy with the money collected at the store.

4. Keep money in a secure place.

Put all money in a locking money box. Keep the box locked.

Some facilities have safes in the wall or in the floor. Other facilities have a secured drawer or locker. Keep the money box in a secured place at your facility.

5. Keep good records.

Keep an accurate record of the money received each day, such as on the example payment ledger below. Record the DATE, the name of the ITEM sold, the AMOUNT of money received for the item. Always keep a running BALANCE. (There are copies of the payment receipt and ledger forms in the annex.)

EXAMPLE: PAYMENT LEDGER

| DATE | ITEM | AMOUNT | BALANCE |
|------|------|--------|---------|
| | | | |
| | | | |
| | | | |

Keep your ledger and all receipts organised in a receipt book or simple filing system (file or boxes). Store them in a safe place.

6. Deposit all money in a bank, council office or post office regularly.

Deposit money every week, if possible. Ask for a deposit note that states when you deposited the money, the amount, and the balance of your facility's account. Check the balance against the written record you keep at your facility. Keep all deposit notes organised at your health facility.

ANNEX

Checklists and Forms for the First-level Facility

| | |
|---|----|
| 1. Physical Conditions Checklist | 43 |
| 2. Storage Procedures Checklist | 45 |
| 3. Stock Card Checklist | 47 |
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| 11. Payment Receipt | 63 |
| 12. Payment Ledger | 63 |
| 13. Payment Procedures Checklist | 65 |

PHYSICAL CONDITIONS CHECKLIST

How does your store match up to the ideal store? Tick () the YES box if the statement describes the conditions in your store. Tick NO if the statement does not describe your store. NO items will need to be implemented or improved.

YES NO

1. The store is separate from the dispensary; drugs are not dispensed to patients from the store.
2. The store is large enough to keep all of the supplies.
3. The door to the store has 2 locks; each lock has a separate key.
4. The store is kept locked at all times when not in use.
5. The store structure is in good condition; there are no cracks, holes or signs of water damage.
6. There is a ceiling in the store; the ceiling is in good condition.
7. Air moves freely in the store; fans and screens are in good condition.
8. The windows are painted white or have curtains; windows are secured and have grills.
9. The store is free of pests; there are no signs of pest infestations.
10. The store is tidy; shelves are dusted, floor is swept, and walls are clean.
11. Supplies are stored neatly on shelves or in boxes.
12. Shelves and boxes are raised off the floor, on pallets or on boards and bricks.
13. The refrigerator is in good condition; there is no staff food in the refrigerator.
14. Narcotics and psychotropic drugs are kept separate in a double-locked storage space.

STORAGE PROCEDURES CHECKLIST

How well organised is your store? Tick (☐) the YES box if the statement describes the organisation in your store. If not, tick NO. NO items need to be implemented or improved.

- | | YES | NO | |
|-----|--------------------------|--------------------------|---|
| 1. | <input type="checkbox"/> | <input type="checkbox"/> | Supplies are shelved in groups: externals, internals and injectables. |
| 2. | <input type="checkbox"/> | <input type="checkbox"/> | Tablets, capsules and other dry medicines (such as ORS packets) are stored in airtight containers on the upper shelves. |
| 3. | <input type="checkbox"/> | <input type="checkbox"/> | Liquids, ointments and injectables are stored on the middle shelves. |
| 4. | <input type="checkbox"/> | <input type="checkbox"/> | Supplies, such as surgical items, condoms and labels, are stored on the bottom shelves. |
| 5. | <input type="checkbox"/> | <input type="checkbox"/> | Cold-chain items are stored in the refrigerator. |
| 6. | <input type="checkbox"/> | <input type="checkbox"/> | Supplies are arranged on the shelves in alphabetical order by generic name. |
| 7. | <input type="checkbox"/> | <input type="checkbox"/> | Items are grouped in amounts that are easy to count. |
| 8. | <input type="checkbox"/> | <input type="checkbox"/> | There are no expired drugs in the store. |
| 9. | <input type="checkbox"/> | <input type="checkbox"/> | Drugs with shorter expiry dates are placed in front of those with later expiry dates. |
| 10. | <input type="checkbox"/> | <input type="checkbox"/> | For drugs with the same expiry date, newly received drugs are placed behind those already on the shelves. |
| 11. | <input type="checkbox"/> | <input type="checkbox"/> | Supplies with no expiry or manufacture date are stored in the order received. |
| 12. | <input type="checkbox"/> | <input type="checkbox"/> | Supplies with no expiry date but with a manufacture date are placed with later dates behind shorter dates. |
| 13. | <input type="checkbox"/> | <input type="checkbox"/> | There are no poor quality drugs on the shelves. |
| 14. | <input type="checkbox"/> | <input type="checkbox"/> | There are no overstocked or no longer used items on the shelves. |
| 15. | <input type="checkbox"/> | <input type="checkbox"/> | There is a record of the removal of drugs; the record includes date, time, witness and manner of removal. |

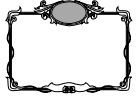
STOCK CARD CHECKLIST

How are stock cards used in your store? Tick (☐) the YES box if the statement is true. If not, tick NO. NO items need to be implemented or improved.

YES NO

1. ☐ ☐ There is a stock card for each item in the store.
2. ☐ ☐ All information on the stock card is current and correct.
3. ☐ ☐ The stock card is kept with the item on the shelf.
4. ☐ ☐ Information is recorded on the stock card at the time of movement.
5. ☐ ☐ There is an accurate running tally kept in the BALANCE IN STOCK column.
6. ☐ ☐ A physical count is made at regular intervals, such as once a month.

REQUISITION FOR PHARMACEUTICAL SUPPLIES FORM

| Health Facility Office Stamp  | Health Facility: _____ _____ _____ Send requisition to: _____ (Medical Supplier) | REQUISITION NUMBER: 01390 | | | | | | |
|---|--|--|----------------------------------|---|--------------------|--|--|--|
| DATE: _____ | | FOR MEDICAL SUPPLIER USE ONLY ISSUE VOUCHER NUMBER <table border="1" style="width: 100%; height: 40px; border-collapse: collapse;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table> | | | | | | |
| | | | | | | | | |
| ITEM Only one item (one form, one strength) per line. | UNIT + SIZE | CODE NUMBER | QUANTITY | CODE NUMBER (if amended) | QUANTITY ISSUED | | | |
| | | | | | | | | |
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| | | | | | | | | |
| _____ (Requisitioner's Signature and Office) | Medical supplies, detailed above, are received in good condition and are of good quality. _____ (Recipient's Signature and Office) | DATE ORDER RECEIVED: _____ DATE ORDER COMPLETED: _____ | TOTAL # OF BOXES IN ORDER: | DATE OF DISPATCH: _____ _____ (Medical Supplier Signature and Office) | | | | |

ORDERING SUPPLIES CHECKLIST

Use this checklist if your facility orders supplies based on past consumption.

Answer (in pencil) the following questions. If delivery schedules change, erase and record the new delivery information. Keep the answers current.

1. When are supplies delivered? _____
2. How often are supplies delivered?

3. What is your facility's reorder factor? _____

Tick () the YES box if the statement is true. If not, tick NO. NO items need to be implemented or improved.

YES NO

4. The health worker knows how to calculate the average monthly consumption, that is:
 - a. Count the number of units issued during a month.
 - b. Add the total number of units issued for each month counted.
 - c. Divide the sum by the number of months counted.
5. The health worker calculates the reorder level by multiplying the average monthly consumption by the reorder factor.
6. The reorder level has been calculated for each item in the store.
7. The reorder level is recorded on each item's stock card.
8. The health worker knows it is time to reorder an item when its balance in stock is less than its reorder level.
9. The health worker knows to always order the reorder level.
10. The health worker makes a written request when ordering supplies.
11. All information on the request is complete, accurate and written clearly.

DISCREPANCY REPORT FORM

| | | | | |
|---|------------------|---------------------------|-----------|----------|
| HEALTH FACILITY: | | DATE: | | |
| RECEIVED BY: | | WITNESSED BY: | | |
| DETAILS OF SHIPMENT | | | | |
| REQUISITION NUMBER: | | TRANSPORTER: | | |
| NUMBER OF BOXES RECEIVED: | | NAME OF DELIVERY PERSON: | | |
| | | VEHICLE REGISTRATION : | | |
| DETAILS OF DISCREPANCIES | | | | |
| ISSUE VOUCHER | ITEM DESCRIPTION | CODE | UNIT+SIZE | QUANTITY |
| ITEMS MISSING / OVER-ISSUED MISSING OVER- | | | | |
| ISSUED | | | | |
| | | | | |
| EXPIRED ITEMS | | | | |
| | | | | |
| DAMAGED OR POOR QUALITY ITEMS | | | | |
| | | | | |
| OTHER DISCREPANCIES | | | | |
| | | | | |
| NAME (print): | | (signature): OFFICE HELD: | | |
| CC: | | | | |

RECEIVING SUPPLIES CHECKLIST

How are supplies received at your store? Tick (☐) the YES box if the statement is true. If not, tick NO. NO items need to be implemented or improved.

YES NO

1. A health worker receives deliveries in person.
2. The health worker checks the outside of the boxes at time of delivery.
3. The health worker keeps a record of deliveries, such as on a delivery form.
4. The delivery person signs the form before he leaves the facility.
5. The health worker checks the supplies received against the items listed on the delivery's requisition form.
6. The health worker checks expiry dates of all items.

The health worker checks for poor quality items, such as:

7. Poorly packaged refrigerated items
8. Discolouration of drugs and vaccines
9. Broken containers and supplies spoiled by leakage
10. Unsealed and unlabelled items

If deterioration is suspected, the health worker checks for:

11. Unusual odours of tablets and capsules
12. Damaged tablets or capsules
13. Injectables with small particles that reflect light
14. The health worker does not accept expired or poor quality items.
15. The health worker documents all discrepancies.
16. The health worker stores the supplies; the movement of each item is recorded on its stock card.

DISPENSING PROCEDURES CHECKLIST

How are supplies dispensed at your facility? Tick (☐) the YES box if the statement is true. If not, tick NO. NO items need to be implemented or improved.

- | | YES | NO | |
|-----|--------------------------|--------------------------|---|
| 1. | <input type="checkbox"/> | <input type="checkbox"/> | At the beginning of the day or clinic session, a health worker issues all items needed from the store to the appropriate dispensing area. |
| 2. | <input type="checkbox"/> | <input type="checkbox"/> | The health worker records the movement of each item on its stock card. |
| 3. | <input type="checkbox"/> | <input type="checkbox"/> | The items in the dispensary are organised in the same way as the items in the store. |
| 4. | <input type="checkbox"/> | <input type="checkbox"/> | The dispenser checks that the prescription is appropriate for the patient. |
| 5. | <input type="checkbox"/> | <input type="checkbox"/> | The dispenser collects a container of the prescribed item and checks its expiry date. |
| 6. | <input type="checkbox"/> | <input type="checkbox"/> | The dispenser collects a small container so the patient can take the drug home. |
| 7. | <input type="checkbox"/> | <input type="checkbox"/> | The dispenser labels the package with the patient's name, date, name of the item, quantity dispensed, and written instructions for the patient. |
| 8. | <input type="checkbox"/> | <input type="checkbox"/> | The dispenser opens the container and checks the quality of its contents. |
| 9. | <input type="checkbox"/> | <input type="checkbox"/> | The dispenser counts out the quantity prescribed in a safe manner. |
| 10. | <input type="checkbox"/> | <input type="checkbox"/> | The dispenser puts the correct amount of the drug in the package. |
| 11. | <input type="checkbox"/> | <input type="checkbox"/> | The dispenser puts back into the container any extra tablets or capsules; the container is closed before another container is opened. |
| 12. | <input type="checkbox"/> | <input type="checkbox"/> | The dispenser gives the package to the patient and tells him the name of the drug, what the drug is for, and dosage. |
| 13. | <input type="checkbox"/> | <input type="checkbox"/> | The dispenser shows or tells the patient how to prepare and take the dose. |
| 14. | <input type="checkbox"/> | <input type="checkbox"/> | The dispenser asks the patient to repeat the instructions. (Important!) |
| 15. | <input type="checkbox"/> | <input type="checkbox"/> | The dispenser tells the patient to keep all drugs and medical supplies in a safe place at home, and out of the reach of children. |

PAYMENT PROCEDURES CHECKLIST

Do patients pay for drugs at your facility? If so, use this checklist as a guide.

Tick (☐) the YES box if the procedure is followed. If not, tick NO. NO items need to be implemented or improved.

YES NO

1. The health worker charges the patient for the full course of treatment.

2. The health worker gives any patient who pays for medicines a numbered receipt.

3. A copy of the patient's receipt is kept at the health facility.

4. The health worker checks the amount of each payment received from a patient against the amount written on the receipt.

5. There is a secure place at the facility where all payments are kept.

6. There is a written record of the money received; it includes a running balance.

5. The health worker deposits all money received at the health facility in a bank, council office or post office.

