



Republic of Kenya

MINISTRY OF HEALTH

**STANDARD OPERATING  
PROCEDURES AND JOB AIDS FOR  
REPRODUCTIVE HEALTH  
COMMODITY MANAGEMENT**

**Division of Reproductive Health  
MAY 2013**



REPUBLIC OF KENYA

**MINISTRY OF HEALTH**

# **Standard Operating Procedures and Job Aids for Reproductive Health Commodity Management**

**Division of Reproductive Health**

**Revised: May 2013**



MSH/Health Commodities and Services Management

## **FOREWORD**

The National Reproductive Health Strategic Plan (2009-2015) is the framework that guides policies and strategies for effective provision of Reproductive Health services. The Division of Reproductive Health is mandated to plan, implement and monitor reproductive health programs as guided by the 1994 ICPD plan of action to help governments strengthen their capacity to:

“Ensure that by 2015 all primary health care and family planning facilities are able to provide, directly or through referral, the widest achievable range of safe and effective family planning and contraceptive methods...”

The effective provision of Family planning services requires that RH/FP commodities are managed professionally and against time-tested standards. Therefore, the development of Standard Operating Procedures (SOPs) and Job Aids for reproductive health commodity management is an important step for DRH to ensure effective provision of RH services at all levels

These SOPs and Job Aids seek to provide public health workers with easy-to-use procedures and guides for effective management of RH/FP commodities at all levels. It is anticipated that they will improve the overall quality of RH services especially in priority areas such as Maternal Health and Family Planning.

We wish to appreciate the contributions and efforts of all individuals, organizations and stakeholders who gave their valuable support during the development process.

Dr. Bashir Issak

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## **Purpose of the Document**

This document is a consolidation of standard operating procedures (SOPs) and Job Aids focussing on management of reproductive health commodities at district and facility levels.

The purpose of these SOPs and Job Aids is to

- Help to ensure the quality and consistency of commodity management activities
- Serve as useful tools for training new members of staff since they provide detailed work instructions
- Clarify roles and responsibilities
- Serve as quick reference when in need of clarification.
- Harmonize RH/FP services in all districts and facilities nationally.

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## Acronyms

SOP	Standard Operating Procedure
MOPHS	Ministry of Public Health and Sanitation
FP	Family Planning
CMU	Commodity Management Unit
CCSS	Contraceptive Commodity Security Strategy
AOP	Annual Operating Plan
KDHS	Kenya Demographic Health Survey
DRH	Division of Reproductive Health
DPF	District Pharmaceutical Facilitator
RH	Reproductive Health
KEMSA	Kenya Medical Supplies Authority
CYP	Couple Years of Protection
CPR	Contraceptive Prevalence Rate
DRHC	District Reproductive Health Coordinator
MCH	Maternal and Child Health
OPD	Out Patient Department
DAR	Daily Activity Register
HIV	Human Immuno-deficiency Virus
ARV	Anti-Retro Viral
TB	Tuberculosis
ADR	Adverse Drug Reactions
MOH	Ministry of Health
SDP	Service Delivery Point
CDRR	Contraceptive Data Report and Request Form
CHW	Community Health Worker
CBD	Community Based Distribution
CHEW	Community Health Extension Worker
DMoH	District Medical Officer of Health
SORF	Standard Order and Report Form
PMTCT	Prevention of Mother to Child Transmission
RHT&ST	Reproductive Health Training and Supervisory Team
FBO	Faith Based Organization
NGO	Non-Governmental Organization
DHMT	District Health Management Team
CCC	Comprehensive care Clinic
YFC	Youth friendly centre
VCT	Voluntary Counselling and Testing
LMU	Logistics Management Unit
AMC	Average Monthly Consumption

<b>SOP Title: Dispensing of Reproductive Health/Family Planning (RH/FP) Commodities to clients</b>	
<b>Procedure Number: GEN/1</b>	
Number of pages: 2	
Date Written: December 2008	Date Last Reviewed: May 2013.

### **1. Objective**

To describe the procedure for counselling and dispensing of RH/FP commodities to clients

### **2. Responsible Persons**

2.1. The staff responsible for dispensing of RH/FP commodities e.g. Staff at MCH/FP, OPD, wards, Pharmacy and Comprehensive Care Centres

### **3. Tools Needed**

3.1. Daily Activity Register (DAR) for contraceptives (MOH 512)

3.2. Demonstration tray (assorted FP methods)

3.3. Anatomical models/mannequin e.g. Madam Zoe, Little Emma, arm model, uterine and penile models

3.4. Counselling checklist

3.5. Family Planning charts

3.6. FP Commodities quick reference chart.

3.7. Client File

3.8. Follow up card / Mother and Baby Booklet

3.9. FP Checklists

### **4. Procedure**

4.1. In a private area, follow these guidelines to counsel the client.

4.1.1. Introduce yourself: Give your name and position. Explain to the client how you will be responsible for making sure they have adequate supply of RH/FP commodities and address their concerns in case of any problems.

4.1.2. Check what the client already knows about the contraceptive: Ask the client questions to see how much they already understand about the contraceptive if the client is new to the contraception method.

4.1.3. If the client is new, give all the necessary information related to specific method

- Make sure that client understands how the contraception method works
- Assess the client for the need of counselling and testing for HIV.
- Give contraceptive name and describe appearance
- Give route of administration For example, “Take these pills by mouth with a glass of water.”
- Give directions: explain to the client how to use the specific contraceptive method
- Give information on the side effects of the contraceptive
- Ask the client if he/she is on other medication e.g. If a client on ARVs or TB therapy and wants to use pills, there is a likelihood of drug interaction hence need to choose a different method or use of dual protection if the client insists on pills.
- Ask if the client has any questions or concerns about the contraceptive method
- Give the client a suitable method and emphasize on the use and date of the next visit.

4.1.4. If the client is a revisit,

- Check how the client has been taking the contraceptive.
- Enquire about any side effects, adverse drug reactions (ADRs) and any other concern
- Ask the client when she took the last dose and when eligible for the next dose
- Assess the client for the need of counselling and testing for HIV.
- Resupply the client with the contraceptive and emphasize on the use and the date of the next revisit.

4.2. Make entries for the dispensed contraceptive in the daily activity register and other relevant records.

## **5. Storage of Tools and Records**

5.1. The daily activity register and other relevant records shall be kept for easy retrieval and stored securely in the facility for at least 2 years.

<b>SOP Title: Redistributing Short Expiry and Excess Reproductive Health/Family Planning (RH/FP) Commodities</b>	
<b>Procedure Number: GEN/2</b>	
Number of pages: 2	
Date Written: December 2008	Date Last Reviewed: May 2013.

### **1. Objectives**

- To describe the procedure for redistributing RH/FP commodities with short-expiry (all stocks with less than six months to expiry)
- To describe the procedure for redistributing excess RH/FP commodities (More than 6 Months of Stock)

### **2. Responsible Persons**

2.1. Staff in charge of managing the RH/FP commodities or his/her designated proxy.

2.2. DPF or his/her designated proxy

2.3. DRHC or his/her designated proxy

### **3. Tools Needed**

3.1. Issue and Receipt voucher (S12). Where S12 is not available facilities may use the Counter Requisition and Issue Voucher (S11)

3.2. Counter Receipt Voucher (S13)

3.3. Chart to Track Expiry Dates of RH/FP commodities

3.4. Bin Cards or Stock Cards

3.5. Daily Activity Register (DAR) for Contraceptives (MOH 512)

### **4. Procedure:**

4.1. Identify RH/FP commodities with short expiry by conducting monthly physical stock count and by using the chart to track expiry dates of RH/FP commodities.

4.2. Separate stock with short expiry from the rest of the stock and determine how much can be consumed by the facility and how much needs to be redistributed to other facilities.

4.3. Contact nearest ordering point or high volume service delivery point to request for redistribution of short-expiry stock.

4.4. Raise an Issue and Receipt voucher (S12) or any other appropriate issuing document for redistribution

4.5. Endorse the issuing document with signature, name and facility stamp and retain the appropriate copies. Retain the original of the issuing document.

4.6. Send the short-expiry stock to the destination facility accompanied by the appropriate copies of the distribution document.

4.7. Send a copy of the distribution document to the supplies department in your facility

4.8. Update corresponding bin cards or stock cards and daily activity register

4.9. Request for the endorsed 3rd copy of the S-12 from the receiving facility

Note: RH/FP commodities with short expiry should be received according to the **procedure for receiving RH/FP commodities at the store**

## 5. Storage of Tools

5.1. S12 document has six pages.

- Retain the original copy and file it chronologically for easy retrieval.
- The second and fourth copy will remain in the receiving facility
- Receive the endorsed triplicate from the receiving facility and file it chronologically together with the original copy of the S-12.
- The fifth copy shall be sent to your accounting department.
- The sixth copy remains in the book.

5.2. The Chart to Track the Expiry Dates of RH/FP commodities should be hung on a wall in the storage area and should be visible at all times.

5.3. Place bin/stock cards next to the corresponding products at all times. Filled up bin/stock cards shall be filed chronologically by commodity name in the store.

5.4. Daily Activity Register for contraceptives shall be stored in a locked cabinet for confidentiality and kept in the facility for a minimum of two years.

<b>SOP Title: Distribution of RH/FP Commodities between Facilities</b>	
<b>Procedure Number: GEN/3</b>	
Number of pages: 2	
Date Written: December 2008	Date Last Reviewed: May 2013.

### 1. Objective

To describe the procedures and good practices for distribution of RH/FP commodities between facilities (SDPs)

### 2. Responsible Persons

2.1. In-charge of issuing facility

2.2. In-charge of requisitioning or receiving facility

2.3. District Reproductive Health Coordinator (or designated proxy)

### 3. Tools Needed

3.1. Bin cards or stock cards, DAR

3.2. Transaction records or any authorized order (Counter Requisition and Issue Voucher (S11), Issue voucher, etc)

### 4. Procedure

4.1. Verify the stocks available at the facility using the bin cards/stock cards, DAR and by conducting a physical count.

4.2. Examine the S11 or authorized order note to check the validity, completeness and accuracy of the order.

- Where available, the FCDRR of the requisitioning facility may be checked to verify the quantity requested against the actual consumption and service statistics.

4.3. Based on the quantities ordered by the requisitioning facility, the Facility in-charge of the issuing facility shall authorize the order (on S11, voucher) based on available stocks.

- In the event that the stock available is inadequate to meet the order, ration the stock to the requisitioning facility

4.4. Retrieve and pack the requested quantities of commodities ordered by the requisitioning facility and complete the S11. Update the bin card/stock card or DAR.

4.5. The Facility in-charge shall then endorse the S11 or equivalent document with their signature and date, and dispatch the consignment with the appropriate copy of the issuing document. Provide a copy to district RHC as soon as possible.

## **5. Storage of Tools**

5.1. The S11 document has three copies:

- The original remains with the issuing facility
- The duplicate goes to the receiving facility
- The triplicate is the book copy (*Note: all used S11 booklets should be surrendered to the issuing government office while requesting for new ones*).

5.2. All the orders/requesting documents (e.g. S11, authorized orders) shall remain in the issuing facility, filed chronologically for easy retrieval and stored securely (under lock and key).

<b>SOP Title: Distribution of RH/FP Commodities from the facility for Community Based Distribution</b>	
<b>Procedure Number: GEN/3</b>	
Number of pages: 2	
Date Written: December 2008	Date Last Reviewed: May 2013.

## **2. Objective**

To describe the procedures and good practices for distribution of RH/FP commodities to Community Health Workers (CHWs) for Community Based Distribution (CBD) from a facility

## **2. Responsible Persons**

2.1. In-charge of issuing facility

2.2. Community Health Worker (CHW) linked to the facility

2.3. Community Health Extension Worker (CHEW) linked to the facility

2.4. District Community Strategy Coordinator

## **3. Tools Needed**

3.1. Bin cards or stock cards

3.2. Daily Activity Register (DAR)

3.3. Transaction records or any authorized order (Counter Requisition and Issue Voucher (S11), Issue voucher, etc)

3.4. CHEW summary sheet (MOH 515)

## **4. Procedure**

4.1. Verify the stocks available at the facility using the bin cards/stock cards and DAR by conducting a physical count.

4.2. Examine the order from the CHW to check the validity, completeness and accuracy of the order.

4.3. Based on the quantities ordered by the CHW, the Facility in-charge of the issuing facility shall authorize the order based on available stocks.

- In the event that the stock available is inadequate to meet the order, ration the stock to the CHW

4.4. Retrieve and pack the requested quantities of commodities ordered and complete the DAR. Update the bin card/stock card.



4.5. The Facility in-charge shall then endorse the order document with their signature and date, and give the commodities to the CHW. Provide a copy to the CHEW as soon as possible.

4.6. The CHEW summarises all commodities dispensed by the CHWs in the CHEW summary (MOH 515) on a monthly basis.

## **5. Storage of Tools**

5.1. All the orders/ requesting documents shall remain in the issuing facility, filed chronologically for easy retrieval and stored securely (under lock and key).

<b>SOP Title: Documentation for Disposal of Reproductive Health/Family Planning (RH/FP) Commodities</b>	
<b>Procedure Number: GEN/4</b>	
Number of pages: 2	
Date Written: December 2008	Date Last Reviewed: May 2013

### 1. Objective

To describe the procedure for documenting damaged, expired or other unusable RH/FP commodities set aside for disposal.

### 2. Responsible Persons

2.1. Board of Survey/ Facility Procurement and Disposal committee.

Members of this committee include:

- The Public Health Officer and the staff in charge of the RH/FP commodities store or his/her designated proxy and a witness.
- The staff in charge of **dispensing** RH/FP commodities or his/her designated proxy and a witnessing staff member.
- The staff member in-charge of the hospital stores
- The procurement officer
- The District Pharmaceutical Facilitator (DPF)

### 3. Tools Needed

3.1. Report of the Board of Survey on Stores (Unserviceable and Surplus to Requirements) (F.O. 58) (Appendix 4)

3.2. Bin Cards or stock cards

3.3. Daily Activity Register for contraceptives (MOH 512)

3.4. Counter Receipt Voucher (S13) or other appropriate document.

### 4. Procedure (refer to Disposal Act):

4.1. The staff member in charge of the RH/FP commodities store (or designated proxy) separates damaged or expired commodities from the rest of the stock, labels them and makes the necessary adjustments to the bin/stock cards.

4.2. The staff member in charge of dispensing RH/FP commodities separates and removes damaged or expired commodities (including patient returns) from the dispensing area and makes the necessary adjustments in the daily activity register

4.3. The staff member in charge of facility stores raises an S13 or other appropriate document for receipt of the damaged or expired commodities and endorses the document as the receiving officer.

4.4. The staff member in charge of the facility store keeps all RH/FP commodities stocks set aside for destruction and completes the Report of the Board of Survey on Stores (Unserviceable and Surplus to Requirements) (F.O. 58)

4.5. The DMOH, Pharmacist and Accountant endorse the F.O. 58 with their signature, official designation and date. 4.6. The facility in charge forwards the original copy of the completed F.O. 58 to the Permanent Secretary, Ministry of Health, as appropriate, through the relevant channels and awaits feedback.

## **5. Storage of Tools**

5.1. A copy of the completed F.O. 58 shall be retained and filed at the facility store for easy retrieval.

5.2. All facilities should forward a copy to the DMOH and District Procurement Officer

<b>SOP Title: Receiving RH/FP commodities at the Store</b>	
<b>Procedure Number: GEN/5</b>	
Number of pages: 2	
Date Written: December 2008	Date Last Reviewed: May 2013.

### **1. Objective**

To describe the procedure for receiving RH/FP commodities at the store (bulk store, facility store or other store holding RH/FP commodities)

### **2. Responsible Persons**

2.1. Staff in charge (or designated proxy) of the bulk store, facility store or other store holding RH/FP commodities.

### **3. Tools Needed**

3.1. Delivery documents e.g.

- Delivery note,
- Packing list,
- Invoice,
- Issue and Receipt voucher (S12),
- Counter requisition and issue voucher (S11),
- or Counter receipt voucher (S13),
- Proof of delivery (POD) form).

3.2. Bin card (S5) or Stock card (S3)

3.3. Order form used to request for the supply of the RH/FP commodities (SDP-CDRR, DCDRR, KEMSA Standard Order & Report Form (SORF) or other).

### **4. Procedure**

The designated/authorized staff shall:

4.1. Only accept RH/FP commodities that are accompanied by an appropriate delivery document (e.g. delivery note, packing list, S12, S11, S13).

4.2. Meet the delivery personnel and countercheck that the number of packages indicated on the delivery document matches the number of packages delivered.

4.3. Inspect and check the shipment against the delivery documents and corresponding order form for the following discrepancies:

- Requirements from the order that have not been met
- Items listed on the order form or delivery document that are missing from the shipment
- Items received that were not ordered or were not listed on the delivery documents
- Broken, cracked, or leaking vials where seals are broken
- Broken pills
- Commodities that arrive past their expiry date
- Commodities that have no labels, inadequate or illegible labeling
- Inappropriate storage conditions during transportation
- Any other discrepancies.

4.4. Record any discrepancies on the Packing slip or other delivery document and append your signature, have a witness also countersign and note the date.

4.5. Endorse the delivery documents with name, signature, date, and stamp. Retain the original copy at the facility and return copies 3 and 4 to the supplier agency or issuing facility.

4.6. Where applicable, prepare a List of any unusable or excess commodities and set them aside. Notify the supplier immediately for exchange, withdrawal or re-distribution.

4.7. Record each RH/FP commodity received in its respective bin/stock card. Clearly indicate the

- Date of receipt
- Receipt document number (S12, S11, etc)
- Quantity received
- Stock Balance, and any other relevant information specified in the bin/stock card.

4.8. Store RH/FP commodities according to the **Procedure for Storage of RH/FP commodities**.

## 5. Storage of Tools

5.1. Delivery documents and Receiving documents shall be filed chronologically by date for easy retrieval in the store.

5.2. The S12 document has six copies:

- Copies 1 and 6 remain with the supplier or issuing facility.
- The receiving facility receives the 2nd, 3rd, 4th and 5th copies of the S-12 and signs them.
- The facility retains the endorsed 2<sup>nd</sup> copy of the S-12 in the store and files it by date for easy retrieval
- The endorsed third, fourth and fifth copies are returned to the supplier or issuing facility. After which the third copy is reverted to the facility for verification of reception of commodities and then returned to the supplier or issuing facility.

5.3. Order form used to request for the supply of the RH/FP commodities (SDP-CDRR, D-CDRR, KEMSA Standard Order and Report Form (SORF) or other) shall be filed chronologically by date for easy retrieval.

<b>SOP Title: Storage of Reproductive Health/Family Planning Commodities</b>	
<b>Procedure Number: GEN/6</b>	
Number of pages: 3	
Date Written: December 2008	Date Last Reviewed: May 2013.

### 1. Objective

To describe the procedures and good practices for storage of RH/FP commodities

### 2. Responsible Persons

2.1. Facility in-charge

2.2. Staff in charge (or designated proxy) of the RH/FP Commodities bulk store, facility store or other store.

2.3. Staff in charge of dispensing RH/FP Commodities or his/her designated proxy

### 3. Tools Needed

3.1. Bin Cards or stock cards

3.2. Temperature Logs

3.3. Minimum and Maximum Thermometer

### 4. Procedure

4.1. Record quantities of all RH/FP Commodities in bin cards or stock cards upon receipt.

4.2. Update **Chart to track expiry dates of RH/FP Commodities** according to **Procedure for tracking expiry dates of RH/FP Commodities.**

4.3. Ensure that heat sensitive items (where applicable) are stored in a cool room, refrigerator or cold room as soon as possible upon receipt.

#### 4.4. Storage Areas

4.4.1. Store RH/FP commodities in a clean, well ventilated room that is free from pests.

4.4.2. Protect RH/FP commodities from direct exposure to sunlight by using shades/curtains/paint on windows or by keeping cupboards shut.

4.4.3. Protect RH/FP commodities from moisture by ensuring that there is adequate drainage and that there are no leaking roofs or ceilings.

4.4.4. Limit access to storage areas to authorized persons and keep storage areas locked when not in use. Designated authorized staff shall keep keys to storage areas in their possession at all times while on duty, and hand over appropriately.

4.4.5. Place bulky commodities on pallets. **NO COMMODITIES SHOULD HAVE DIRECT CONTACT WITH THE FLOOR.**

4.4.6. Ensure easy access to functional fire equipment and train staff on how to use them.

#### **4.5. Stock Arrangement**

4.5.1. Arrange RH/FP Commodities on shelves in chronological order.

4.5.2. Arrange RH/FP Commodities on shelves using **FEFO** (first to expire, first out) principle.

4.5.3. Place bin/stock cards next to the corresponding commodities at all times.

4.5.4. Arrange bulky cartons on pallets with arrows pointing up and with labels, dates and manufacturers names clearly visible. If it is not possible, write the commodity name and expiry date clearly on the visible side.

4.5.5. Stack bulky cartons on pallets at least 10 cm off the floor, 30 cm away from walls and other stacks and no more than 2.5 m high to avoid crushing.

4.5.6. Store RH/FP Commodities away from flammable products or poisons.

#### **4.6. Monitoring Temperature**

4.6.1. Maintain a functional min-max thermometer in the RH/FP commodities bulk store and dispensing areas.

4.6.2. Assign one staff member on a permanent or rotational basis to monitor and record temperature of RH/FP commodities storage areas.

4.6.3. Check the temperature of the RH/FP commodities bulk store and the dispensing areas **TWICE daily** in the morning and in the afternoon.

4.6.4. Check the temperature of the refrigerators and/or cold room **ONCE daily** (where applicable).

4.6.5. Record the temperature in Temperature Control Logs.

#### Note:

Acceptable temperature range for the storage areas are: 18–25°C

Cold Storage (where applicable) refrigerator temperature: 2–8°C

4.6.6. Report temperatures not within acceptable range to the staff in charge or his/her proxy **IMMEDIATELY.**

- 4.6.7. Where applicable check to ensure that the RH/FP commodities bulk store air-conditioning system or fan is working effectively on a daily basis.
- 4.6.8. Report any problems with air conditioning or fans to the staff in charge or his/her proxy IMMEDIATELY.

## **5. Storage of Tools**

- 5.1. Place bin/stock cards next to the corresponding commodities at all times. Filled up bin/stock cards shall be filed chronologically by commodity name in the RH/FP commodity bulk store.
- 5.2. A temperature log (where applicable) for the cold room or refrigerator shall be affixed on the door of the cold room or refrigerator in clear view at all times.
- 5.3. Temperature logs for the dispensing area and bulk store shall be hung on the wall next to the minimum-maximum thermometer and are in clear view at all times.
- 5.4. Filled-up temperature logs shall be filed chronologically by date and kept in the dispensing area or bulk store as is applicable.



<b>SOP Title: Tracking Expiry Dates of Reproductive Health/Family Planning Commodities</b>	
<b>Procedure Number: GEN/7</b>	
Number of pages: 2	
Date Written: December 2008	Date Last Reviewed: May 2013.

### **1. Objective:**

To describe the procedure for tracking the expiry dates of Reproductive Health/Family Planning (RH/FP) Commodities in order to alert staff on short expiry Reproductive Health Commodities.

### **2. Responsible Persons**

2.1. Facility in-charge

2.2. Staff in charge (or designated proxy) of the RH/FP Commodities bulk stores, facility stores or other stores holding RH/FP Commodities.

### **3. Tools Needed**

3.1. Chart to Track the Expiry Dates of RH/FP Commodities: This is a laminated re-usable chart designed to hang on the wall in the storage area

3.2. Erasable Marker Pen

### **4. Procedure**

4.1. Track the expiry date of commodities every month and each time a commodity is received.

4.2. The Chart to Track Expiry Dates of RH/FP Commodities is designed to be reusable. Use an erasable marker pen. DO NOT USE A PERMANENT MARKER. If you use a permanent marker, you will need to use spirit or other ink removers to erase the entries.

4.3. The chart has three columns for three years. The first column should be used for the current year and the other two for the following two consecutive years. Fill in the corresponding years.

4.4. At the beginning of each year, delete the old year and shift the originally second and third years to become the first and second years then add the third year.

4.5. Write the name of the commodity by generic name in the column marked "Commodity name". In the next column each commodity has space to list up to three different batches or lot numbers. If you have more than three batches/lots, record the three that expire first.

4.6. When commodities are received, check the batch/lot number and enter the new batch/lot number on the chart if not already entered.

4.7. Mark the month when the commodity expires (in the correct year column) using a bold **X**.

4.8. Take action 6 months prior to the expiry date by dispensing or re-distributing the short-expiry (first to expire) commodities.

4.9. Once the short-expiry commodity has been removed from stock, erase the entry from the chart and replace it with the next batch to expire.

4.10. If a commodity is to expire after the three years covered on the chart, do not enter it on the chart. Wait until it is within three years expiry then enter the details of the commodity accordingly.

4.11. To help with chart maintenance, keep two separate charts, one for syrups (e.g. PMTCT ARV liquids) and another for pills/injectables/implants, etc.

4.12. You may need to use more than one chart, depending on the number of commodities and storage areas.

## **5. Storage of Tools**

5.1. The Chart to Track the Expiry Dates of RH/FP commodities should be hung on a wall in the storage area and should be visible at all times.

<b>SOP Title: Supportive Supervision for Reproductive Health/Family Planning (RH/FP) Commodity Management</b>	
<b>Procedure Number: GEN/8</b>	
Number of pages: 2	
Date Written: December 2008	Date Last Reviewed: May 2013.

### **1. Objectives**

To describe the procedure for conducting supportive supervision for RH/FP commodity management

### **2. Responsible Persons**

- 2.1. DRH program managers and officers
- 2.2. County Health Management Team (CHMT)
- 2.3. District Health Management Team (DHMT)
- 2.4. Officer in-charge of facility

### **3. Tools Needed**

- 3.1. Supportive Supervision Checklists
- 3.2. County and District Supportive Supervision Schedule
- 3.3. Supportive Supervision Interview Form/Questionnaire
- 3.4. Guideline on How to Lead a Problem Solving Discussion

### **4. Procedure:**

- 4.1. Plan for the Supportive Supervision (SS) visits:
  - Create schedule of visits (include dates and frequency)
  - Identify focal activities for the visits
  - Identify contact persons for the visits
  - Assemble SS tools(forms and checklist) and materials
  - Select members of the SS team

4.2. Conduct the supervisory visit. Activities for the visit will include:

- Assessment on red flag items, human resource capacity, data management, commodity supply and storage
- Discussion on problem solving for identified gaps
- On Job Training (OJT)
- Performance Monitoring
- Feedback

4.3. Complete supervisory summary reports. Contents in these summary reports for each area assessed will include:

- Facility score for each area (HR, Data management, supply and storage, Red flag)
- Gap(s) identified and underlying cause
- Action required to close the gap(s)
- Expected results after action is taken
- Responsible person for the action
- Resources needed to take action
- Timeframe for the action.

*NB: The Red flag checklist enables the supervisor to quickly identify problems that if uncorrected would cause significant constraints to service delivery. The checklist contains red flag items specifically looking at availability of tracer commodities, staff absenteeism, broken equipment and lack of stock cards or bin cards.*

Include statement on reporting gaps to higher levels where necessary.

## **5. Storage of Tools**

5.1. Depending on the level of supervision team, copies of the summary reports shall be stored from that level downwards

E.g. Supervision by the national (DRH) team to facility level would require storage for summary reports as follows;

- National –Retains original Copy
- County-keeps triplicate
- District-Keeps Quadruplicate
- Facility-keeps duplicate

<b>SOP Title: Providing Feedback to Support Reproductive Health/Family Planning (RH/FP) Commodity Management</b>	
<b>Procedure Number: GEN/9</b>	
Number of pages: 2	
Date Written: December 2008	Date Last Reviewed: May 2013.

### **1. Objectives**

To describe the procedure for providing feedback to support RH/FP commodity management

### **2. Responsible Persons**

2.1. DRH Head, program managers and officers

2.2. County Health Management Team (CHMT)

2.3. District Health Management Team (DHMT)

2.4. Officer in-charge of facility

### **3. Tools and Resources Needed**

3.1. Service Delivery Point (SDP) Contraceptive Consumption Data Report and Request Form

3.2. District Contraceptive Consumption Data Report and Request Form (DCDRR)

3.3. Communication facilities e.g. courier, email, telephone and postal services

3.4 Standard Order Form for RHF's

3.5 Standard Order Form for Hospitals

3.6. Functional LMIS.

### **4. Procedure:**

4.1. Analyze the submitted reports (SDP CDRR, DCDRR and SORFs) and compile a written summary feedback report

4.2. Provide feedback on

- FP Commodity Logistics and service data reports. This should include feedback on reporting rates for districts and facilities, timeliness, accuracy and completeness of reporting. The report should also inform the target site on how to correct errors in their reports.

- Stock status: this should include information on overstocked and under stocked sites as well as those sites that are below the emergency order point so that the target sites can take measures to address the problem e.g. through commodity redistribution

*Note: Emergency Order Points (E.O.P) are based on remaining Months of Stock (MOS) as follows: Central level E.O.P = 9 MOS, District Store E.O.P = 1 MOS, SDP E.O.P = 1 MOS*

- Any relevant information on commodities from the National level
- Supervision findings from summary reports. Refer to the support supervision SOP

4.3. Conduct review meetings for performance of facilities, districts and provinces. This will be used to commend good performance and also create a forum for poor performing facilities, districts or provinces to learn on where and how to improve. Good performing facilities or districts can be chosen as mentors.

4.4. Provide the target site with action points so that they can formulate interventions for the problems identified.

## **5. Storage of Tools**

5.1. The level providing feedback sends the original feedback report to the target site, a copy to immediate supervisors of the target site and also retains a copy.

<b>SOP Title: Conducting a Physical count for RH/FP commodities at the Store</b>	
<b>Procedure Number: DS/1</b>	
Number of pages: 3	
Date Written: December 2008	Date Last Reviewed: May 2013.

### 1. Objective

To describe the procedure for conducting a physical count of RH/FP commodities at the store.

**(This applies to: District stores, selected FBO and NGO stores)**

Purpose:

- Verify the quantity of usable stock available for distribution (Usable stock is stock that is not expired or damaged)
- Identify discrepancies between actual supplies and the stock balance on the bin card or stock card
- Detect damaged or expired commodities
- Provide an opportunity for store re-organization.

### 2. Responsible Persons

- 2.1. District Store personnel (or designated proxy)
- 2.2. District Public Health Nurse (DPHN) / District RH Coordinator (DRHC)
- 2.3. District Pharmaceutical Facilitator (DPF)
- 2.4. At FBO and NGO stores, the RH program manager (or designated proxy).

### 3. Tools Needed

- 3.1. Manual records (Bin card (S5) or stock card; Stock ledger card (S3)), Electronic records (where relevant)
- 3.2. Stock sheet (*Refer to Appendix 1*)

#### 4. Procedure

On a **monthly** basis, when discrepancies have been noted or suspected, or when appropriate, the district store personnel (or designated/authorized proxy) shall:

4.1. Physically count all RH/FP commodities available in the store:

- Count by hand every commodity by brand or dosage form.
  - Count the number of unopened or complete cartons and multiply by the number of units in a carton to determine the total number of units in every carton.
  - If an open carton contains unopened packs, count the number of packs and multiply by the number of units in the pack.
  - Count all the units that are in open packs, on racks/shelves and add them together.
  - **Note: Do not count stock that has already been issued to SDPs.**
  - Add the total units from unopened cartons and packs, open packs, on racks/shelves to give you the total number of units of the commodity available in your store (Quantity on Hand).
- Identify the usable stock for each RH/FP commodity
- Separate count and, label any expired, damaged or obsolete commodities
- Organize the commodities according to expiry dates and batch numbers to comply with FEFO
  - Mark the expiry dates clearly with large dark numbers on each face of every pack or carton.
  - For any commodity with batch (es) with less than 6 months to expiry, record on the stock sheet.

4.2. Reconcile the current stocks in the manual and electronic records (Bin/stock cards, Ledger cards and electronic ledgers) with the physical stock:

- Identify the discrepancies between the RH/FP commodity stock counted and the stock balance on the records, and adjust the records for any Losses and Adjustments.
- List any expired, damaged, or obsolete commodities. Arrange for their disposal following the laid down procedures (refer to **Documentation for disposal of RH/FP commodities**)
- Record the date of the physical count and the quantity counted on the bin cards or stock cards.

4.3. Calculate the Months of Stock (MoS) on hand for each RH/FP commodity and update the stakeholders, e.g. DPF, DRH, and KEMSA.



4.4. In the event of short-dated or over-stock of commodities (MoS more than **6** months), arrange with the DPF or DRH for re-distribution (refer to **Procedure for Re-distribution of RH/FP commodities**)

4.5. In the event of under-stock or stock-out of commodities (MoS less than **3** months), arrange for topping up or re-supply with DRH or KEMSA.

## **5. Storage of Tools**

5.1. Manual records (Bin card (S5) or stock card; Stock ledger card (S3)): shall be filed chronologically by date for easy retrieval in the store.

5.2. Electronic records: should have a backup facility

5.3. The Stock sheets should be filed by the store-personnel.

<b>SOP Title: Reporting and Requesting RH/FP commodities by the Districts from DRH using the DCDRR</b>	
<b>Procedure Number: DS/2</b>	
Number of pages: 3	
Date Written: December 2008	Date Last Reviewed: May 2013.

## 1. Objective

To describe the procedure used by the Districts for reporting and requesting RH/FP commodities from Division of Reproductive Health (DRH).

Applies to: District stores, selected FBOs and NGOs

## 2. Responsible Persons

2.1. District Pharmaceutical Facilitator (DPF)

2.2. The District Public Health Nurse (DPHN), District RH Coordinator (DRHC); staff member in charge (or his/her designated proxy) or the RH program manager at the FBO or NGO

2.3. In absence of the above, the District store personnel or a representative of the DMOH; at the FBO or NGO store, an assigned representative of the RH program manager.

## 3. Tools Needed

3.1. Blank form of the District Contraceptive Consumption Data Report and Request form (DCDRR)

3.2. Updated Stock ledger cards, Bin cards or Stock control cards

3.3. SDP Contraceptive Consumption Data Report and Request form (SDP-CDRR) already submitted by the facility in-charges of the reporting SDPs for the reporting period

3.4. National Integrated Form for Reproductive Health, HIV/AIDS, Malaria, TB and Child Nutrition MoH 711B

## 4. Procedure

### 4.1. Procedure for Districts for reporting and requesting RH/FP commodities

4.1.1. At the end of every calendar month, conduct a **Physical stock count** at the district (or FBO, NGO) store to obtain the stock on hand, days out of stock and RH/FP commodities less than 6 months to expiry date. Update the stock ledger cards/bin cards.

4.1.2. Complete the District CDRR according to instructions provided in the inner front cover page of the DCDRR book.

4.1.3. Using the stock ledger cards/bin cards, record the Beginning balance for the month. Aggregate the stock receipts and stock issues for the month, as well as the losses and adjustments. Record these totals on the D-CDRR. Record the physical stock as the Ending balance.

4.1.4. Using all the SDP-CDRRs from the reporting SDPs, sum up the total quantities of each RH/FP commodity dispensed for the reporting period to obtain the total (aggregate) consumption of RH/FP commodities. Also sum up the Ending balances of each RH/FP commodity to obtain the total (aggregate) Ending balance of the RH/FP commodities for the SDPs for the reporting period. Record these totals on the D-CDRR.

4.1.5. To calculate the Quantity required for each RH/FP commodity for the district, **multiply the aggregate consumption by 6, then subtract the Ending balance** for the district (or FBO, NGO) store. Record the figure in the Quantity Requested column. This will give you maximum stock up.

**Quantity requested = (Aggregate Quantity dispensed x 6) – Ending balance**

**Note: For both male and female condoms, multiply the “issues” by 6 and subtract the district store’s ending balance.**

4.1.6. In the event that the district store /facility was completely stocked out, then use historical issues or dispensed data to determine the Quantity required for each RH/FP commodity for your district.

## **4.2. Procedure for Districts for reporting Service statistics**

Using all the SDP-CDRRs from the reporting SDPs:

4.2.1. For each method, sum up the **New clients** and the **Revisits** for the reporting period to obtain the total (aggregate) New Clients and Revisits.

4.2.2. For each method, sum up the **change of method: from** and **to** for the reporting period to obtain the total (aggregate) Change of method: *from* and *to*.

4.2.3. Sum up the total number of new clients and Revisits across all methods. Also sum up the number of Natural Family planning *Counselling* and *Referrals*.

4.2.4. Sum up the total number of clients counselled and tested for HIV and those referred for counselling and testing, and their HIV status.

4.2.5. Aggregate the total number of clients who underwent sterilizations and cases on Emergency contraception.

4.2.6. Record the above totals on the DCDRR, then record SDP reporting rates as appropriate.

4.2.7. Provide any logistics or clinical comments as appropriate.

4.2.8. Record the name, designation, telephone number and signature of the officer completing the report, and the date. Send the original copy to KEMSA/LMU, the duplicate to the County Pharmacist for verification, and keep the book copy (triplicate).

4.2.9. Send the original copy of the DCDRR by courier/fax/email/post or hand deliver to KEMSA/LMU. Use the following address:

Kenya Medical Supplies Authority, Commercial Street

P. O. Box 47715 - 00100 Nairobi

Telephone: Land lines: 020-2034742/43 or 020-3922000

Mobiles: 0735 271483, 0728 960 961

Fax: 254-020-557335

4.2.10. If reporting and requesting electronically, e-mail the District CDRR using the following email address:

Email: [fp@kemsaco.ke](mailto:fp@kemsaco.ke)

4.2.11. Reports should be sent to reach KEMSA by the 15th of the following month

## **5. Storage of Tools**

5.1. The original copy of the DCDRR is sent to KEMSA

5.2. The duplicate is sent to the County Pharmacist.

5.3. The triplicate shall remain in the district store as the book copy.

<b>SOP Title: Issuing Reproductive Health/Family Planning (RH/FP) Commodities from District Stores</b>	
<b>Procedure Number: DS/3</b>	
Number of pages: 2	
Date Written: December 2008	Date Last Reviewed: May 2013.

### **1. Objective**

To describe the procedure for issuing RH/FP commodities from the district store to the service delivery points (SDPs)

### **2. Responsible Persons**

2.1. District Pharmaceutical Facilitator (DPF)

2.2. District Reproductive Health Coordinator or his/her designated proxy

2.2. Staff in charge of the district store or his/her designated proxy

2.3. Staff in charge of requesting RH/FP commodities from the service delivery point or his/her designated proxy

### **3. Tools Needed**

3.1. Counter Requisition and Issue Voucher (S11)

3.2. Bin Cards or stock cards

3.3. SDP-CDRR

### **4. Procedure**

4.1. Designated staff authorised to request the RH/FP commodities completes a counter requisition and issue voucher (S11) and SDP Contraceptive Consumption Data Report and Request (CDRR) form

4.2. The designated staff authorised to requisition RH/FP commodities endorses the S11 and SDP CDRR form with the date of requisition, their name, designation and signature and forwards the documents to the district store personnel.

4.3. The designated staff authorised to issue the stock at the district store verifies the contents of the S11 and SDP CDRR and retrieves the requested commodities.

4.4. The designated staff authorised to issue stocks at the district store updates bin/stock cards appropriately.

4.5. Designated staff authorised to issue stocks in the store completes the S11 or other appropriate document and endorses it with date, name and signature and dispatches the requested commodities to the relevant SDP accompanied by the appropriate copy of the document.

4.6. Designated staff authorised to receive the stock in the SDP checks the identity and quantities of commodities issued, against the quantities indicated in the S11 or other appropriate document and endorses the document with their name, designation, and signature.

4.7. Designated staff authorised to receive stocks in the SDP makes appropriate entries in the bin cards or stock cards and daily activity register for contraceptives.

## **5. Storage of Tools**

5.1. The S11 is to be completed in triplicate

- The original is retained in the district store for stock issued to the SDPs.
- Duplicate is carried and filed chronologically by the SDP staff.
- Triplicate remains in the S11 book and should be stored securely (under lock and key).

5.2. Where another document is used instead of the S-11, ensure that copies are stored as in 5.1 above.

5.3. Current bin/stock cards shall be kept next to the corresponding commodity. Filled up bin/stock cards shall be filed chronologically by commodity name in the district store

<b>SOP Title: Conducting a Physical count for RH/FP commodities at the SDP</b>	
<b>Procedure Number: SDP/1</b>	
Number of pages: 3	
Date Written: December 2008	Date Last Reviewed: May 2013.

## 1. Objective

To describe the procedure for conducting a physical count of RH/FP commodities at the Service Delivery Points (SDPs).

Applies to: all health facilities, including FBO, NGO and Private

Purpose:

- Verify the quantity of usable stock available for distribution (Usable stock is stock that is not expired or damaged)
- Identify discrepancies between actual supplies and the stock balance on the DAR or bin/stock card
- Detect damaged or expired commodities
- Provide an opportunity for stock re-organization.

## 2. Responsible Persons

2.1. Health facility in-charge (or designated proxy)

NB: For referral, County, District and Sub - district hospitals, the in-charge of the MCH/FP is responsible.

## 3. Tools Needed

3.1. Manual records (Bin card (S5) or stock card; Stock ledger card (S3)), Electronic records (where relevant)

3.2. Stock sheet (Refer to Appendix 1)

3.3. Daily Activity Register for contraceptives (DAR) – MoH 512.

## 4. Procedure

On a **monthly** basis, when discrepancies have been noted or suspected, or when appropriate, the designated/authorized facility staff shall:

4.1. Physically count all RH/FP commodities available at all service points within the facility:

- Count by hand every commodity by brand or dosage form.

- Count the number of unopened or complete cartons and multiply by the number of units in a carton to determine the total number of units in every carton.
- If an open carton contains unopened packs, count the number of packs and multiply by the number of units in the pack.
- Count all the units that are in open packs, on racks/shelves/cupboards and add them together.
- **Note: Do not count stock that has already been issued to clients or community health workers (CHWs).**
- Add the total units from unopened cartons and packs, open packs, on racks/shelves/cupboards to give you the total number of units of the commodity available in your facility (Quantity on Hand).
- Identify the usable stock for each RH/FP commodity
- Separate, count and Label any expired, damaged or obsolete commodities
- Organize the commodities according to expiry dates and batch numbers to comply with FEFO
  - Mark the expiry dates clearly with large dark numbers on each face of every pack or carton.
  - For any commodity with batch (es) with less than 6 months to expiry, record on your DAR and bin/stock card. Inform the District RH coordinator or RH programme manager.

#### 4.2. Reconcile the current stocks in the records (DAR and Bin/stock cards) with the physical stock:

- Identify the discrepancies between the RH/FP commodity stock counted and the stock balance on the records, and adjust the records for any Losses and Adjustments.
- List any expired, damaged, or obsolete commodities. Inform the District RH coordinator, District pharmaceutical Facilitator or RH programme manager to arrange for disposal following the laid down procedures (refer to **Documentation for disposal of RH/FP commodities**)
- Record the date of the physical count and the quantity counted on the DAR and bin/stock cards.

4.3. Calculate the Months of Stock on hand (MoS) for each RH/FP commodity and update the stakeholders, e.g. DPF, DRHC, and KEMSA.

*(Months of Stock = Quantity on Hand ÷ Average Monthly Consumption)*

4.4. In the event of short-dated or over-stock of commodities (MoS more than 6 months), arrange with the DPF, DRHC or KEMSA for re-distribution (refer to **Procedure for Re-distribution of RH/FP commodities**)



4.5. In the event of under-stock or stock-out of commodities (MoS less than **3** months), arrange for topping up or re-supply with the DRHC or KEMSA.

## **5. Storage of Tools**

5.1. DAR, Bin/stock card: shall be filed chronologically by date for easy retrieval in the store.

<b>SOP Title: Reporting and Requesting RH/FP commodities by the SDPs from the District stores using the SDP-CDRR</b>	
<b>Procedure Number: SDP/2</b>	
Number of pages: 4	
Date Written: December 2008	Date Last Reviewed: May 2013.

## 1. Objective

To describe the procedure used by the Service Delivery Points (SDPs) for reporting and requesting RH/FP commodities from the District stores.

Applies to:

- All Health facilities (SDPs) in a District, including FBOs, NGOs, Private.
- **Note:** Referral hospitals, PGHs, District and sub district hospitals and Rural Health Facilities are supplied directly by KEMSA.

## 2. Responsible Persons

- 2.1. The staff in-charge of RH/FP commodities
- 2.2. The Health facility officer in-charge (or his/her designated proxy).

## 3. Tools Needed

- 3.1. Blank form of the SDP Contraceptive Consumption Data Report and Request form (SDP-CDRR)
- 3.2. Updated Stock ledger cards, Bin cards or Stock control cards
- 3.3. Daily Activity Register for contraceptives (DAR) – MoH 512
- 3.4. Health facility form - MoH 711A (National Integrated Form for RH, HIV/AIDS, Malaria, TB and Child Nutrition)

## 4. Procedure

### 4.1. Procedure for SDPs for reporting and requesting RH/FP commodities

4.1.1. At the end of every calendar month, conduct a **Physical stock count** at the facility store to obtain the stock on hand, days out of stock and RH/FP commodities less than **6 months** to expiry date. Update the stock ledger cards/bin cards.

4.1.2. Complete the Facility CDRR according to instructions provided in the inner front cover page of the FCDRR book.

4.1.3. Using the stock ledger cards/bin cards, record the Beginning balance for the month. Aggregate the stock receipts and quantity dispensed for the month, as well as the losses and adjustments. Where there is more than one service point in the facility, aggregate for all the service points, e.g. Comprehensive care Clinic (CCC), MCH/FP, VCT offering FP services, Youth friendly centre (YFC). Record these totals on the SDP-CDRR. Record the physical stock as the Ending balance.

4.1.4. To calculate the Quantity required for each RH/FP commodity for the facility, **multiply the quantity dispensed (consumption) by 6, then subtract the Ending balance** for the facility. Record the figure in the Quantity Requested column. This will give you the maximum quantity required to stock up.

$$\text{Quantity requested} = (\text{Quantity dispensed} \times 6) - \text{Ending balance}$$

4.1.5. In the event that the facility was completely stocked out, then use historical dispensed data to determine the Quantity required for each RH/FP commodity for your facility.

*N.B. Historical data refers to the sum of the Quantity dispensed for the latest 3 consecutive months where there was consistent supply.*

Record the figure in the Quantity Requested column.

## **4.2. Procedure for SDPs for reporting Service statistics**

Using the data from the DARs of all the FP service points in the health facility:

4.2.1. For each method, sum up the **New clients** and the **Revisits** for the reporting period to obtain the total New Clients and Revisits.

4.2.2. For each method, sum up the **Change of method: from** and **to** for the reporting period to obtain the total Change of method: *from* and *to*.

4.2.3. Sum up the total number of New clients and Revisits across all methods. Also sum up the number of Natural Family planning *Counselling* and *Referrals*.

4.2.4. Sum up the total number of clients *counselled and tested for HIV* and those *referred for counselling and testing*, and their HIV status.

4.2.5. Aggregate the total number of clients who underwent *sterilizations* and cases on Emergency contraception.

4.2.6. Record the above totals on the SDP-CDRR as appropriate.

4.2.7. Provide any logistics or clinical comments as appropriate.

4.2.8. Record the name, designation, telephone number and signature of the officer completing the report, and the date.

4.2.9. To send reports:

- For SDPs reporting to a district, send the original and second copies to the District Pharmacist/ District Pharmaceutical Facilitator, and keep the book copy at your facility.

4.2.10. For SDPs, reports should be sent to reach the District by the 5th of the subsequent month.

## **5. Storage of Tools**

- 5.1. The original and duplicate of the FCDRR is sent to the District for SDPs.
- 5.2. The triplicate shall remain in the facility as the book copy.

<b>SOP Title: Issuing Reproductive Health/Family Planning (RH/FP) Commodities within a Service Delivery Point (SDP)</b>	
<b>Procedure Number: SDP/3</b>	
Number of pages: 2	
Date Written: December 2008	Date Last Reviewed: May 2013.

### **1. Objective**

To describe the procedure for issuing RH/FP commodities from the store to the dispensing area and other departments within the same facility (e.g. store to MCH/FP, Store to CCC, Stores to maternity etc)

### **2. Responsible Persons**

2.1. Staff in charge of the store or his/her designated proxy

2.2. Staff in charge of requesting RH/FP commodities from dispensing area or other department or his/her designated proxy

### **3. Tools Needed**

3.1. Counter Requisition and Issue Voucher (S11), or other appropriate document

3.2. Bin Cards or stock cards

3.3. Daily Activity Register for contraceptives (MOH 512)

### **4. Procedure**

The designated staff authorised to:

4.1. request the RH/FP commodities completes a counter requisition and issue voucher (S11), or other appropriate document

4.2. requisition RH/FP commodities endorses the S11 or other appropriate document with the date of requisition, their name, designation and signature and forwards the S11 or other appropriate document to the store.

4.3. issue the stock in the store verifies the contents of the S11 or other appropriate document and retrieves the requested commodities.

4.4. issue stocks in the store updates bin/stock cards appropriately.

4.5. issue stocks in the store completes the S11 or other appropriate document and endorses it with date, name and signature and dispatch the requested commodities to the relevant department accompanied by the appropriate copy of the document.

4.6. receive the stock in the dispensing area or other department checks the identity and quantities of commodities issued, against the quantities indicated in the S11 or other appropriate document and endorses the document with their name, designation, and signature.

4.7. receive stocks in the dispensing area makes appropriate entries in the daily activity register for contraceptives.

4.8. receive stocks in other departments make appropriate entries in the corresponding register or bin/stock cards in the department.

## **5. Storage of Tools**

5.1. The S11 is to be completed in triplicate

- The original is kept in the store for stock issued to the dispensing area and other departments.
- Duplicate is retained and filed chronologically by date in the dispensing area or other requesting department
- Triplicate remains in the S11 book.

5.2. Where another document is used instead of the S-11, ensure that copies are stored as in 5.1 above.

5.3. Current bin/stock cards shall be kept next to the corresponding commodity. Filled up bin/stock cards shall be filed chronologically by commodity name in the store

5.4. Daily Activity Register for contraceptives shall be stored chronologically by date in the dispensing area.

<b>SOP Title: Reporting and Requesting RH/FP commodities by the SDPs from KEMSA using the Standard Order and Report Form (SORF)</b>	
<b>Procedure Number: SDP/4</b>	
Number of pages: 2	
Date Written: December 2008	Date Last Reviewed: May 2013.

## 1. Objective

To describe the procedure used by the Service Delivery Points (SDPs) for reporting and requesting RH/FP commodities from KEMSA using the Standard Order and Report Form (SORF).

Applies to: Government health facilities that order RH/FP commodities from KEMSA using the SORF

## 2. Responsible Persons

- 2.1. The Health facility officer in-charge (or his/her designated proxy).
- 2.2. District Pharmaceutical Facilitator (DPF)
- 2.3. The District Medical Officer of Health (DMoH)

## 3. Tools Needed

- 3.1. Blank form of the KEMSA Standard Order and Report Form (SORF) – select the appropriate form for your facility i.e. Hospital or Rural Health Facility (RHF).
- 3.2. Updated Stock ledger cards, Bin cards or Stock control cards
- 3.3. Daily Activity Register for contraceptives (DAR) – MoH 512

## 4. Procedure

### 4.1. Procedure for RHF for reporting and requesting RH/FP commodities

- 4.1.1. At the end of every calendar month, conduct a **Physical stock count** at the health facility/SDP to obtain the Stock on hand, days out of stock, and RH/FP commodities less than **4 months** to expiry date. Update the stock ledger cards/bin cards.
- 4.1.2. Complete the Standard Order and Report Form (SORF) according to instructions provided by KEMSA.
- 4.1.3. Record the physical stock for each RH/FP commodity on the SORF under the column “Current stock (in units)”.
- 4.1.4. Using the DAR or stock ledger cards/bin cards, calculate the Average Monthly Consumption (AMC) as follows:

For each RH/FP commodity, get the total quantity dispensed over the last 3 months and divide by 3. Record the figures on the SORF under the column “AMC (units)”.

4.1.5. To calculate the quantity required for each RH/FP commodity for your facility,

Order Quantity = AMC multiplied by 4, and then subtract the Current stock.

**Order Quantity = (AMC x 4) - Current stock**

Record the figure in the column labelled “Order Qty (units)”.

***Please note: Contraceptives are zero-rated hence there is no need to calculate the Order cost.***

4.1.6. Record the name, designation, telephone and signature of the officer completing the SORF, and the date. The SORF should be checked by the Facility in-charge, and authorized as appropriate.

4.1.7. Send the original copy to KEMSA through the appropriate channels and keep the book copy at your facility.

Kenya Medical Supplies Authority, Commercial Street

P. O. Box 47715 - 00100 Nairobi

Telephone: Land lines: 020-2034742/43 or 020-3922000

Mobiles: 0735 271483, 0728 960 961

Fax: 254-020-557335

4.1.8. Reports should be sent to reach KEMSA by the 15th of the month following the end of the quarter

## **5. Storage of Tools**

5.1. The original copy (white copy) of the SORF is sent to KEMSA’s Customer Care department.

5.2. The duplicate of the SORF shall remain in the facility as the book copy.



## APPENDICES

### 1. *Physical Stock Sheet:*

Name and Description Of Commodity	Unit of Count	Stock Records Quantity (from Bin Card or Stock Card)	Physical Count	Expiry Date
Low dose Pills (COCs)	Cycles			
POPs	Cycles			
IUCDs	Sets			
Injectables	Vials			
Implants- 1 rod	Sets			
Implants- 2 rod	Sets			
Male Condoms	Pieces			
Female Condoms	Pieces			
Emergency Contraceptive Pills	Doses			

## 2. Consumption Data Report and Request form for District Stores

ORIGINAL

### MINISTRY OF HEALTH DISTRICT CONTRACEPTIVES CONSUMPTION DATA REPORT AND REQUEST FORM

Province: \_\_\_\_\_ County: \_\_\_\_\_ District: \_\_\_\_\_

Full Store Name: \_\_\_\_\_

Report of Month: \_\_\_\_\_ Beginning: \_\_\_\_\_ 20 \_\_\_\_\_ Ending: \_\_\_\_\_ 20 \_\_\_\_\_

Contraceptive	DISTRICT STORE DATA						AGGREGATE SDP DATA		QUANTITY REQUESTED (For District Store Only)	
	Beginning Balance	Received This Month	Issued	Losses	Adjustments		Ending Balance	Aggregate SDP: Dispensed		Aggregate SDP: Ending Balance
					Positive	Negative				
Combined Oral contraceptive Pills										
Progestin only pills										
Injectables										
Implants (1-Rod)										
Implants (2-Rod)										
Emergency Contraceptive pills										
IUCDs										
Male Condoms										
Female Condoms										
Cycle Beads										
Others										

CLIENT STATISTICS		
FP Method	Aggregate New Clients	Aggregate Revisits
Combined oral contraceptive Pills		
Progestin only pills		
Injectables		
Implants (1-Rod)		
Implants (2-Rod)		
IUCDs		
Male Condoms		
Female Condoms		
Cycle Beads		

SDP REPORTING RATES		
Expected Reports	Received Reports	Reporting Rate

Comments: (Logistics only) \_\_\_\_\_

Submitted by: \_\_\_\_\_

Name

Telephone

Signature

Date

Monthly Report & Request for Contraceptives – District Stores  
Send the original to the Logistics Management Unit and the duplicate copy to the Provincial Pharmacist. Leave the triplicate copy in the CDRR booklet at your Office. Revised December 2012

### 3. Consumption Data Report and Request form for Facilities

**MINISTRY OF HEALTH  
SDP CONTRACEPTIVES CONSUMPTION  
DATA REPORT AND REQUEST FORM**

**ORIGINAL**

Province: \_\_\_\_\_ County \_\_\_\_\_ District: \_\_\_\_\_

Full SDP Name: \_\_\_\_\_ MFL No.: \_\_\_\_\_

Facility Type: Dispensary  H/C  SDH  DH  PGH  Referral Hosp.

Agency: GOK  FBO  NGO  Private

Reporting Month: \_\_\_\_\_ Beginning \_\_\_\_\_ 20 \_\_\_\_\_ Ending \_\_\_\_\_ 20 \_\_\_\_\_

Contraceptive	Beginning Balance	Received This Month	Dispensed	Losses	Adjustment		Ending Balance	Quantity Requested
					Positive	Negative		
Combined Oral contraceptive Pills								
Progestin only pills								
Injectables								
Implants (1-Rod)								
Implants (2-Rod)								
Emergency Contraceptive pills								
IUCDs								
Male Condoms								
Female Condoms								
Cycle Beads								
Others								
<b>SERVICE STATISTICS (Indicate only the number of Clients issued with Contraceptives)</b>					New Clients		Natural FP Counseling	
	New Clients	Revisits	Change of method from _____ to _____		Revisits		Natural FP Referrals	
Combined oral contraceptive Pills								
Progestin only pills								
Injectables								
Implants (1-Rod)								
Implants (2-Rod)								
IUCDs								
Male Condoms								
Female Condoms								
Cycle Beads								
Others								
					<b>HIV COUNSELING AND TESTING</b>			
					Counseled and Tested	Referred for Counseling and Testing	Known HIV Status	
							1	2
						Sterilization		
						Males		
						Females		
						Referrals		
					Cases for Emergency Pills			

Comments: (Logistics & Clinical) \_\_\_\_\_

Submitted by: \_\_\_\_\_

Designation: \_\_\_\_\_ Name \_\_\_\_\_ Telephone: \_\_\_\_\_

Date: \_\_\_\_\_ Signature \_\_\_\_\_

Monthly Report & Request for Contraceptives - Service Delivery Points

Revised December 2012

Send the original and duplicate copies to the District Medical Officer of Health (DMOH) for the attention of the relevant officers. Leave the triplicate copy in the CDRR booklet at your facility.

#### 4. Form for disposal of Unusable commodities

REPUBLIC OF KENYA

F.O. 58

#### REPORT OF THE BOARD OF SURVEY ON STORES (UNSERVICEABLE AND SURPLUS TO REQUIREMENTS)

Ministry of .....

..... Department

Station .....

N.B. Column Nos. 1 to 6 to be completed by the Department prior to the assembly of the Board.

1	2	3	4	5	6	7	8	9	10				
ITEM No.	ARTICLE	QUANTITY	DATE OF PURCHASE	ORIGINAL VALUE	State whether Unserviceable or Surplus	BOARD'S REPORT ON CONDITION	RECOMMENDATION OF BOARD FOR DISPOSAL	ESTIMATED LOCAL SALEABLE VALUE IF SALE IS RECOMMENDATION	REMARKS				
..... ..... Date ..... Station .....			..... Chairman ..... Member ..... Member ..... Member Date ..... Station .....			DECISION OF:- <table border="1"> <tr> <td>ACCOUNTING OFFICER</td> <td>TREASURY</td> </tr> <tr> <td>.....  <i>Accounting Officer</i>                      Date.....</td> <td>.....  <i>for Ministry of Finance</i>                      Date.....</td> </tr> </table>				ACCOUNTING OFFICER	TREASURY	..... <i>Accounting Officer</i> Date.....	..... <i>for Ministry of Finance</i> Date.....
ACCOUNTING OFFICER	TREASURY												
..... <i>Accounting Officer</i> Date.....	..... <i>for Ministry of Finance</i> Date.....												

### 5. Temperature Control Log

Facility: \_\_\_\_\_

Location: \_\_\_\_\_

Month/Year: \_\_\_\_\_

Acceptable temperature range: Room (18-25°C)

Refrigerator (2-8°C)

Date	A.M. Time	Recorded Temp (°C)	Acceptable Yes/No	Initials	P.M. Time	Recorded Temp (°C)	Acceptable Yes/No	Initials

## ***6. Guidelines and Preparations for Support Supervision***

### **1. Preparation for the visit**

- Develop objectives for your visit.
- Liaise with C/DHMT for logistics at least 2 weeks prior to visit.
- Notify health facility staff about the objectives and date of your visit.
- Review the previous reports and the recommendations made for the health facilities to be visited.
- Prepare your tools for supervision
  - Supervision check list
  - Stationery
  - SOPs manual
  - Calculator
- Review the checklist.

### **2. During the visit**

- A. Pay a courtesy call to the Facility In-Charge and:
  - Introduce yourself and others,
  - Explain your objectives, and ask to visit with the service providers.
  - Ask, “How are the (HIV/AIDS, RH, STI, Condoms, TB) programmes doing?”
  - Ask, “Do you have any problems related to contraceptives and related medical supplies?”
  - Note responses to these questions under “Additional comments.”
- B. Actual Supervision activities
  - Visit the relevant departments and use the supervision checklist to assess aspects of RH/FP commodity management.
  - Offer a few words of encouragement, pointing out a few tasks that the person has been doing well.
  - Use the procedures manual to provide on-the-job training for any areas that need improvement.

### **3. Debriefing/End of Visit**

- Discuss the supervision findings with the facility staff and the DHMT
- Give the facility staff any materials they need to do their jobs.
- Discuss and document recommendations and way forward.
- Collectively sign the supervision check list

### **4. Actions after the visit**

- Share the supervision report with relevant stakeholders and keep a copy.
- Follow-up on documented actions and plans

## 7. Check list for RH/FP Commodity Management Support Supervision

Name of the District: \_\_\_\_\_

Name of Site: \_\_\_\_\_

City/town: \_\_\_\_\_

Province: \_\_\_\_\_

Date: \_\_\_\_\_

Interviewer/s: \_\_\_\_\_

Interviewee/s: Name \_\_\_\_\_

Interviewee/s: Contact \_\_\_\_\_

### **Objectives of the visit:**

The purpose of the visit is to assess:

- The availability of FP commodities (stock out frequency etc)
- Process of ordering and receiving FP commodities
- Collect current information on logistics system performance and stock status of key commodities
- Availability of SOPs and Job Aids
- Infrastructural issues e.g. storage space, electricity, telephone
- Supervision and distribution to SDPs

### **General questions**

1. Who is the principal person responsible for managing medical supplies at the store?

\_\_\_\_\_

2. Is supplies/stock management the primary role of this person?

Yes  No

3. Are data collection and reporting tools available (Commodity Management)

Yes  No

4. Does the store have operational electricity on day of visit?

Yes  No

5. Does the store have operational telephone (land line or mobile) on day of visit?

Yes  No

**Ordering, Receiving, Storage and Stock-outs**

1. Are stock cards and reports completed using the smallest unit of count?

Yes  No

2. Are damaged/expired products physically separated from inventory and removed from stock records at all levels? Yes  No

(Note the approximate quantities of products expired within the past two years below)

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Reasons for expiry

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3. Are there losses and significant adjustments? If yes, how are they investigated and are appropriate actions taken to prevent recurrence? Yes  No

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4. How does your site calculate resupply quantities?

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5. Have stock outs occurred for any product in the last 12 months?

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6. Which products stock out most frequently and for the longest period?

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7. What are the causes of these stock-outs?

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8. Are the following storage conditions or requirements adhered to? (Look at the storage areas)

No	Storage condition or requirement	FP room		Bulk Store	
		No	Yes	No	Yes
1.	Products are arranged so that identification labels and expiry dates and/or manufacturing dates are visible.				
2.	Products are stored and organized in a manner accessible for first-to-expire, first-out (FEFO) counting and general management.				
3.	Cartons and products are in good condition, not crushed due to mishandling.				
4.	Products are protected from heat/radiation (e.g. fluorescent lights in the case of condoms)				
5.	Cartons are placed right-side up (e.g. for Depo-Provera®).				
6.	Products are protected from direct sunlight.				
7.	Cartons and products are protected from water and humidity.				
8.	Storage area is visually free from harmful insects and rodents. (Check the storage area for traces of bats and/or rodents [droppings or insects].)				

No	Storage condition or requirement	FP room		Bulk Store	
		No	Yes	No	Yes
9.	Storage area is secured with a lock and key, but is accessible during normal working hours; access is limited to authorized personnel.				
10.	Is room temperature of the storage area monitored? (ask for documentation)				
11.	Roof is maintained in good condition to avoid sunlight and water penetration.				
12.	Storeroom is maintained in good condition (clean, all trash removed, sturdy shelves, organized boxes).				
13.	The current space and organization is sufficient for existing products and reasonable expansion (i.e., receipt of expected product deliveries for foreseeable future).				
14.	Fire safety equipment is available and accessible (any item identified as being used to promote fire safety should be considered).				
15.	Products are stored separately from insecticides and chemicals.				

9. Are there written procedures or guidelines for destroying damaged and expired products?

Yes  No

10. Are vehicles regularly available for transport and other activities, such as supervision?

Yes  No

11. Are all vehicles in running order? Yes  No

12. Do district staffs communicate with the SDP level personnel at least quarterly?

Yes  No

13. Describe the means of communication (e.g., regular meetings, phone calls, letters, radio, etc) and what is usually covered.

---

14. Are there written procedures and guidelines (e.g., manuals, job aids, standards) to help staff carry out their logistics responsibilities? Yes  No

15. Does the staff have logistics tools and resources they need to do their jobs (e.g., job aids, forms, carbon paper, calculators, shelving, vehicles, funds for transport, etc.)? If not, which tools or resources are missing?      Yes       No

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**Table1: Commodity stock status**

Commodity	Units of count	Physical inventory— Store room	Stock-out today? (Y/N)	Quantity of expired products	Stock card available? (Y/N)	Stock card updated? (Y/N)	Stockout most recent 6 months (Y/N)
Male Condoms	Pcs						
Female Condoms	Pcs						
Injectables	Vials						
COCs	Cycles						
POPS	Cycles						
ECP	Doses						
IUCD	Pcs						
Implants- 1 rod	Sets						
Implants- 2 rod	Sets						

### 19. General Comments

- a) What are the **three main concerns** affecting management of reproductive health commodities?
- b) What is the **perceived cause** of each?
- c) What would you suggest as a **possible approach/solution** to resolve each problem?

Concerns	Perceived cause	Possible solution
1.		

Concerns	Perceived cause	Possible solution
2.		
3.		

**8. District Health Facilities Supportive Supervision Activity Schedule**

District			Province:				Period:									
#	Health Facility	Name of In-charge	Tel No:	Activities												
				Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	
<b>Approved by:</b>			<b>Designation:</b>				<b>Date:</b>									

## ***9. Tips on How to Lead a Problem Solving Discussion***

1. Complete the scheduled assessment accompanied by a staff member using one of the support supervision checklists
2. Invite relevant staff and facility in charge to join you in discussing the area/s of assessment
3. Begin by asking if they have any particular concerns and issues in that area
4. Together with staff prioritize these concerns
5. Ask them how they can solve the concerns (encourage staff to first reflect on what they can individually do to address the problem)
6. Discuss what you found in the checklist
7. Reconfirm if the checklist found the same gaps they have discussed and highlight other need areas that they might not have highlighted
8. Re-prioritize the problems once again including the findings of the checklist
9. Lead staff in the problems solving approach in 6.4.2 below.
10. Determine the underlying causes of the problem
11. Brainstorm on various activities that can be done to address the solution (help staff focus on local solutions)
12. Agree on one or two activities and complete the action plan in the facility support supervision summary report

## **10. Basic Guidelines to Problem Solving and Decision Making**

(Note that it might be more your nature to view a "problem" as an "opportunity". Therefore, you might substitute "problem" for "opportunity" in the following guidelines.)

### **1. Define the problem**

Seek to understand more about why you think there's a problem.

*Defining the problem: (with input from yourself and others)*

- a) *Ask yourself and others, the following questions:*
- b) What can you see that causes you to think there's a problem?
- c) Where is it happening?
- d) How is it happening?
- e) When is it happening?
- f) With whom is it happening? (HINT: Don't jump to "Who is causing the problem?" When we're stressed, blaming is often one of our first reactions. To be an effective manager, you need to address issues more than people.)
- g) Why is it happening?
- h) Write down a five-sentence description of the problem in terms of "The following should be happening, but isn't ..." or "The following is happening and should be: ..." As much as possible, be specific in your description, including what is happening, where, how, with whom and why.

*Defining complex problems:*

If the problem still seems overwhelming, break it down by repeating steps a-f until you have descriptions of several related problems.

*Verifying your understanding of the problems:*

It helps a great deal to verify your problem analysis for conferring with a peer or someone else.

*Prioritize the problems:*

- a) If you discover that you are looking at several related problems, then prioritize which ones you should address first.
- b) Note the difference between "important" and "urgent" problems. Often, what we consider to be important problems to consider are really just urgent problems. Important problems deserve more attention. For example, if you continually have to make "urgent" or emergency orders outs in a facility, you probably have an "important" problem which is either poor planning or lack of skill in inventory management.



*Understand your role in the problem:*

Your role in the problem can greatly influence how you perceive the role of others. For example, if you're very stressed out, it'll probably look like others are, too, or, you may resort too quickly to blaming and reprimanding others. Or, you feel very guilty about your role in the problem; you may ignore the accountabilities of others.

**2. Look at potential causes for the problem**

- a) Get input from other people who notice the problem and who are affected by it.
- b) Collect input from other individuals one at a time (Note: people tend to be inhibited about offering their impressions of the real causes of problems.)
- c) Write down what your opinions and what you've heard from others.
- d) Seek advice from a peer or your supervisor in order to verify your impression of the problem.
- e) Write down a description of the cause of the problem and in terms of what is happening, where, when, how, with whom and why.

**3. Identify alternatives for approaches to resolve the problem**

- a) Keep others involved
- b) Brainstorm for solutions to the problem. Collect as many ideas as possible, then screen them to find the best idea.
- c) Not pass any judgment on the ideas -- just write them down as you hear them.

**4. Select an approach to resolve the problem**

When selecting the best approach, consider:

- a) Which approach is the most likely to solve the problem for the long term?
- b) Which approach is the most realistic to accomplish for now? Do you have the resources? Are they affordable? Do you have enough time to implement the approach?
- c) What is the extent of risk associated with each alternative?  
(Note: problem solving and decision making are highly integrated.)

**5. Plan the implementation of the best alternative (this is your action plan)**

- a) Carefully consider "What will the situation look like when the problem is solved?"
- b) What steps should be taken to implement the best alternative to solving the problem? What systems or processes should be changed in your facility, for example, a new policy or procedure? Don't resort to solutions where someone is "just going to try harder".

- c) How will you know if the steps are being followed or not? (these are your indicators of the success of your plan)
- d) What resources will you need in terms of people, money and facilities?
- e) How much time will you need to implement the solution? Write a schedule that includes the start and stop times, and when you expect to see certain indicators of success.
- f) Who will primarily be responsible for ensuring implementation of the plan?
- g) Write down the answers to the above questions and consider this as your action plan.
- h) Communicate the plan to those who will be involved in implementing it and, at least, to your immediate supervisor.  
(Continuous observation and feedback provision is an important aspect of the problem solving process.)

#### **6. Monitor implementation of the plan**

Monitor the indicators of success:

- a) Are you seeing what you would expect from the indicators?
- b) Will the plan be done according to schedule?
- c) If the plan is not being followed as expected, then consider: Was the plan realistic? Are there sufficient resources to accomplish the plan on schedule? Should more priority be placed on various aspects of the plan? Should the plan be changed?

**7. Verify if the problem has been resolved or not**

- a) One of the best ways to verify if a problem has been solved or not is to resume normal operations in the organization. Still, you should consider:
- b) What changes should be made to avoid this type of problem in the future? Consider changes to policies and procedures, training, etc.
- c) Lastly, consider "What did you learn from this problem solving?" Consider new knowledge, understanding and/or skills.
- d) Consider writing a brief memo that highlights the success of the problem solving effort, and what you learned as a result. Share it with your supervisor, peers and subordinates

Written by Carter McNamara, MBA, PhD, Authenticity Consulting, LLC. Copyright 1997-2008.

Adapted from the [Field Guide to Leadership and Supervision](#).

Accessed on the site: [http://www.managementhelp.org/prsn\\_prd/prb\\_bsc.htm](http://www.managementhelp.org/prsn_prd/prb_bsc.htm)

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MSH/Health Commodities and Services Management

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