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| **Policy of Avoiding stock outs of drugs and consumables and ensuring drugs as per EDL** | |
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| **Policy Name :** | **Policy of Avoiding stock outs of drugs and consumables and ensuring drugs as per EDL** |
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| **Date of implementation :** |  |
| **Approved By :** | ***Superintendent in Chief / Chief Medical Superintendent*** |
|  | Name : |
|  | Signature : |
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|  | |
| **Reviewed By:** | ***District Hospital Quality Assurance Team (Incharge / Member)*** |
|  | Name : |
|  | Signature : |
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|  | |
| **Issued By:** | ***SiC / CMS / Quality Manager*** |
|  | Name : |
|  | Signature : |
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|  | |
| **Responsibility of Updating :** | ***Head Of Department*** |
|  | Name : |
|  | Signature : |
|  |
| **Last Date of Updating** |  |
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1. **Purpose:** To provide guideline instructions for effective management of pharmacy in which drugs & consumables were not get stock out as per EDL.
2. **Scope:** It covers all activities under the pharmacy services
3. **Responsibility Person:**

Medical Officer In charge of Pharmacy, Chief Pharmacist, Pharmacist and Nursing Staff

1. **Policy:**

* **Some common systems for arranging medicines include:-**

**a) Alphabetical order by generic name**: When using this system, the labeling must be changed when the Essential Medicines List is revised or updated.

**b) Therapeutic or pharmacologic category**: Most useful in small storerooms or dispensaries where the storekeeper is very knowledgeable about pharmacology.

**c) Dosage form:** Medicines come in different forms, such as tablets, syrups, injectables, and external use products such as ointments and creams. In this system, medicines are categorized according to their dosage form. Within the area for each form, a fixed, fluid, or semi-fluid system is used to store items. Any of the other methods of categorizing can be used to organize the items more precisely.

**d) System level:** Items for different levels of the health care system are kept together. This works well in stores at a higher level when storage of kits is required.

**e) Frequency of use:** Frequently used products that move quickly or often through the store should be placed in the front of the room or closest to the staging area. This system should be used in combination with another system.

**f) Random bin:** Identifies a specific storage space or cell with a code that corresponds to its aisle, shelf, and position on the shelf. This system requires computer automation. **g) Commodity coding:** Each item has its own article and location code. This system has the greatest flexibility, but it is also the most abstract. Stores staff do not need any technical knowledge of the products to manage this system because the codes contain the information needed for storing products properly, such as temperature requirements, level of security, and flammability. This system works well in computerized inventory control systems.

**h) Separate storage of items of resale potential** (high value items, narcotics, psychotropic drugs) and flammable liquids (acetone, alcohol, anesthetic ether and store in security zones.

**i) Stock rotation**

a. Follow First to Expire First to be Out (FEFO) procedure.

b. Place products that will expire first in front.

**j) Write expiry date on product card.**

**k) For items which do not have an expiry date**, the principal to be followed is FIFO-First in First Out.

**l)** Put newly received items at the back of existing stock

**m)** Always remove expired and poor quality stock from the store

**n)** Identify overstocked items and items that are not in use and distribute them to other facilities

**o)** Keep a record of all items removed so that balances can be tallied later.

* Regular counting of drugs in register and issue the drugs according to FEFO (First Expire First Out) Procedure
* Drugs should be present in excess which drug are used in large amount or prescribed more in numbers by Doctors
* A well-managed distribution system should:

a) Maintain a constant supply of drugs

b) Keep drugs in good condition

c) Minimize drug losses due to spoilage and expiry

d) Rationalize drug storage points

e) Use available transport as efficiency as possible

f) Reduce theft and fraud

g) Provide information for forecasting drug needs The distribution cycle begins when drugs are dispatched by the manufacturer or supplier. It ends when drug consumption information is reported back to the procurement unit

**Advantages**:

1. The drugs when purchased in bulk may be bought for a lower price directly from the manufacturers

2. Transportation of these drugs is borne by the supplying firm

3. Loss/ theft during transport is the responsibility of the firm.

* The entire drug management can be assessed based on four major indicators :

1. Total expenditure on drugs and medicines (percentage of total expenditure on health) 2. Total expenditure on drugs and medicines (per capita average)

3. Government expenditure on drugs (per capita average)

4. Private expenditure on drugs (per capita average)

* The drug supply management at a health facility has seven components for avoiding stock outs of drugs and consumables as per EDL:

A. Preparation of drug store

B. Supply ordering

C. Receiving supplies

D. Organization of drug supplies

E. Inventory Management

F. Record keeping

* Medical stores must have a system for classifying or organizing medicines, and must ensure that all employees know the system being used.