Health Centre Management (HCM 02)

# Drug Supply Management

**The ACT PRIME Study**

Infectious Disease Research Collaboration, Uganda.
ACT Consortium, London School of Hygiene & Tropical Medicine, UK.

LEARNER

# Table of Contents

## How to use this manual…

Throughout this manual, you will come across certain re-occurring symbols and boxes. These highlight certain key aspects for learning or contain information, which will help you during or after the training. The following is an explanation of these symbols.

### Icons & symbols

Purpose:

Learning Outcomes:

**PURPOSE & LEARNING OUTCOMES**

This coloured box can be found at the start of each main topic section. In this box you will find the PURPOSE of the Topic and the key LEARNING OUTCOMES for that Topic.

**KEY QUESTION**

This symbol can be found when a KEY QUESTION is being asked.
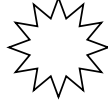
**DEFINITION OR KEY LEARNING POINT**

This symbol represents a DEFINITION or a KEY LEARNING POINT to be remembered.

**GROUP WORK**

This symbol represents GROUP WORK. The training is interactive and a significant amount of your time will be spent in GROUP WORK. This symbol indicates that the activity will be done in a group. This means that you need to be a team player and allow all members of your group to participate equally.

**WORK IN PAIRS**

This symbol represents WORK IN PAIRS. This will be an opportunity for you to work one to one with a colleague. Pair work could mean buzzing or role playing, interviewing or problem solving. Be sure that each person in the pair gets a chance.
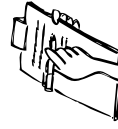
**SUMMARY**

This symbol will be shown where you can find a SUMMARY box – you can review these summary points at home or before the next training and in the future.
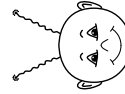
**SELF–OBSERVATION ACTIVITY**

This mascot symbol will be shown where there is a SELF-OBSERVATION ACTIVITY and some guidelines for you to follow.

**NOTES**

This represents a space for your NOTES. Feel free to write your comments and questions and anything that you do not understand in these spaces and discuss it with your trainer before, during or after a training.

*Your Notes:*
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# INTRODUCTION TO THE MANUAL

## Before we start…

Welcome to the Learners Manual for the module entitled – Drug Supply Management.

We are very glad to have you as one of the first set of health workers to participate in this important training.

Everything you will need during the course and as a reference is included in this manual. In addition, there are notes and explanations included in the manual for you to refer back to at a later point.

The trainer will guide you on when to use the manual. Please focus on the trainer when she is talking and focus on the manual exercises when the trainer has guided you to a specific page, which needs your attention. The additional resources in the manuals are for your future reference.

Thank you for participating fully in this training and for respecting your fellow colleagues. Each one of you is unique and each one of you learns at a different pace. The trainer will take great care to cater to all your needs in order to make the training a success. Thank you in advance for doing your part to make it a valuable learning experience.

Training Agenda

# TRAINING AGENDA

HCM 02 will last 3½ hours from start to finish.

**Today's training will start at** ___ : ___    **Today's training will end by** ___ : ___

| Topics | Total Time |
|---|---|
| **Introduction to the module** | 15 minutes |
| - Greetings & Review | |
| - Training rationale and Learning outcomes | |
| **TOPIC 1: Drug Distribution System & Forms** | 85 minutes |
| - Introduction to the topic | |
| - Thinking about the topic | |
| - Principles – Drug Distribution | |
| - Principles – The OPD Register | |
| - Principles – The Stock Card | |
| - Practice – Stock Card | |
| - Principles – The Order Form | |
| - Practice – The Order Form | |
| - Discussion | |
| - Planning | |
| **Break** | **30 minutes** |
| **TOPIC 2: Keeping Track of Drug Distribution Activities** | 75 minutes |
| - Introduction to the topic | |
| - Thinking about the topic | |
| - Principles | |
| - Practice | |
| - Discussion | |
| - Planning | |
| **Conclusion** | **5 minutes** |
| **TOTAL** | 205 minutes or **3 hours 25 minutes** |

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Introduction to the Manual

## What are you going to learn…

From October 2009 until February 2010, the Uganda Malaria Surveillance Project / Infectious Disease Research Collaboration conducted research activities in Tororo District.  We surveyed households, health workers and community medicine distributors, and talked to groups of community members and health workers to learn more about how health care is provided to sick children in this area, especially at health centres.

We found that when children are sick, caregivers usually seek treatment from the health centre, but they also use community medicine distributors, private clinics, drug shops, traditional herbalists, or churches.  Different factors influence where people seek care including time, cost, availability of drugs, and what treatment has worked well in the past.  We found that caregivers are not always satisfied with the treatment at the health centre when they have to pay or when drugs are not available.  Receiving a diagnosis but not receiving proper treatment was viewed as incomplete and poor quality care by community members.

We also found that the situation at health centres needs to be improved.  Almost all health centres usually have stock-outs of key medicines to treat malaria and other illnesses.  Health workers reported that they are frustrated with the lack of drugs and equipment and believe that patients are dissatisfied with their care when they leave the health facility without drugs.  Health workers also reported that they lack knowledge about the drug delivery system and are confused about the roles and responsibilities of staff involved in drug procurement.

The **key learning outcomes** for HCM 02 are as follows:

| Topic | Learning outcomes:<br>By the end of this module, you will be able to… |
|---|---|
| **Principles of the drug distribution system** | • Describe the main components of the drug distribution system.<br>• Be motivated to actively participate in and keep the drug distribution system on track. |
| **Forms required in drug distribution cycle** | • Describe the purpose and benefit of completing forms required in the drug distribution system including:<br>  - OPD register<br>  - Stock-card (Form 015)<br>  - Order Form (Form 085)<br>• Accurately complete the forms required in the drug distribution system.<br>• Put in place a plan for completing the forms regularly at the health centre. |
| **Keeping track of drug distribution activities** | • Identify the activities required to get drugs from the District or Health Sub-District to the health centre.<br>• Identify challenges and solutions to completing drug distribution system activities.<br>• Be motivated to keep track of health centre level activities in the drug distribution system. |

Introduction to the Module

# INTRODUCTION TO THE MODULE

**Purpose:** To welcome and orient you to the training and help you to understand what you can expect of the training and what will be expected of you as participants.

**Learning Outcomes:** By the end of this session you will:

1) Know the names of co-participants.
2) Know the name of the training leader.
3) Review a set of ground rules for the training.
4) Review the previous module's key learning points.
5) Know the learning outcomes and purpose of the module.

## 1. Greetings & Review

**Name of Trainer:**

**Names of co-participants:** *complete if you wish*

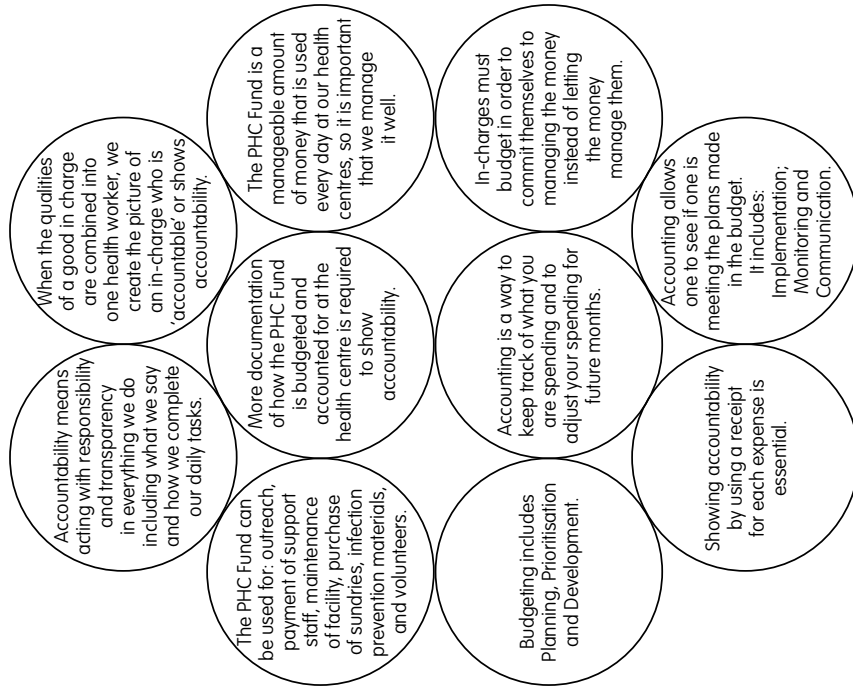**Ground Rules:** *that will support the learning of all participants*

*Please write the ground rules agreed on by the group below:*

**Introduction to the Module**

## 2. Training rationale & learning outcomes

The **key learning outcomes** for HCM 02 are as follows below.

**Box 1: Learning Outcomes**

| Topic | Learning Outcomes<br>By the end of this module, you will be able to… |
|---|---|
| **Principles of the drug distribution system** | • Describe the main components of the drug distribution system.<br>• Be motivated to actively participate in and keep the drug distribution system on track. |
| **Forms required in drug distribution cycle** | • Describe the purpose and benefit of completing forms required in the drug distribution system including:<br>  - OPD register<br>  - Stock-card (Form 015)<br>  - Order Form (Form 085)<br>• Accurately complete the forms required in the drug distribution system.<br>• Put in place a plan for completing the forms regularly at the heath centre. |
| **Keeping track of drug distribution activities** | • Identify the activities required to get drugs from the District or Health Sub-District to the health centre.<br>• Identify challenges and solutions to completing drug distribution system activities.<br>• Be motivated to keep track of health centre level activities in the drug distribution system. |

*Your Notes*

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**Introduction to the Module**

## Review Circles

**Guide:** This is an opportunity to review the learning outcomes from the previous module. Some participants will read out a summary point in one of the circles. You can use whatever kind of voice you wish – for example a loud voice, a singing voice. Be sure to speak clearly.



When the qualities of a good in charge are combined into one health worker, we create the picture of an in-charge who is 'accountable' or shows accountability.

Accountability means acting with responsibility and transparency in everything we do including what we say and how we complete our daily tasks.

The PHC Fund can be used for: outreach, payment of support staff, maintenance of facility, purchase of sundries, infection prevention materials, and volunteers.

More documentation of how the PHC Fund is budgeted and accounted for at the health centre is required to show accountability.

The PHC Fund is a manageable amount of money that is used every day at our health centres, so it is important that we manage it well.

In-charges must budget in order to commit themselves to managing the money instead of letting the money manage them.

Accounting is a way to keep track of what you are spending and to adjust your spending for future months.

Accounting allows one to see if one is meeting the plans made in the budget. It includes: Implementation; Monitoring and Communication.

Budgeting includes Planning, Prioritisation and Development.

Showing accountability by using a receipt for each expense is essential.

Topic 1: Drug Distribution System and Forms

# TOPIC 1: DRUG DISTRIBUTION SYSTEM & FORMS

**Purpose:** To introduce you to the drug distribution system, the forms used in the system, and the role in-charges can play to keep the system on track.

**Learning Outcomes:** By the end of this session, you will:

1) Describe the main components of the drug distribution system.

2) Be motivated to actively participate in and keep the drug distribution system on track.

3) Describe the purpose and benefit of completing forms required in the drug distribution system including:

   - OPD register
   - Stock-card (Form 015)
   - Order Form (Form 085)

4) Accurately complete the forms required in the drug distribution system.

5) Put in place a plan for completing the forms regularly at the heath centre.

## 1. Introduction to the topic

The focus in this module is on your role in the drug distribution system and what you can do to help get drugs to your health centre.

### ACTIVITY A – Train Song

**Guide:** In four groups, each group sing a chorus from the train train song, or any other song you know that is sung in rounds.

> Group 1 starts with: to-to-to-to….
> Group 2 joins in with: to whom to, to whom to…
> Group 3 joins in with: to whom does it belong….
> Group 4 joins in with: to you! to you!...

Getting drugs to your health centre is like moving a train along a track. There are different parts that have to work together to keep the train – the drugs – on track and moving to your health centre. Each person and each level of the health system has a role and responsibility to ensure all steps of the drug distribution system are completed as planned.

Topic 1: Drug Distribution System and Forms

## 2. Thinking about the topic

**Think about the drug distribution system in Uganda.**

**Guide:** As a group put up all steps in the drug distribution system by deciding the correct order. If you wish, write the steps into the boxes below.

**Which steps am I involved in?
Check the boxes** ✓

1)

2)

3)

4)

5)

6)

7)

- The drug distribution system may have slightly different steps in your health sub-district, or in different parts in Uganda.

- The purpose of this exercise is to highlight that drug distribution follows a flow of activities and that there are many different people and organizations involved.

- It is important to think about the whole drug distribution system, in order to be able to understand the importance of your role in keeping the system on track.

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Topic 1: Drug Distribution System and Forms

**Think about your role as an in-charge.**

**Guide:** Identify the drug distribution steps that you are involved in as in-charge, by marking a check or tick in the small boxes on page 12.

*Your Notes*

- There are many issues that can prevent drugs from getting to your health centre.

- These are issues such as national or District level stock-out of drugs, too little funding from the government to buy drugs, and perhaps even drugs 'walking away' at different points in the drug distribution system.

- There is often little you as in-charges can do about these issues.

- But the Ministry of Health, NMS, and the district have requested more information and timely information from health centres to understand better how drugs are used, especially in health centre II and IIIs.

- In-charges play an important role in providing accurate information and timely updates to help the drug distribution system work well at each health centre.

- If in-charges keep their part of the 'train' on track, it will help the whole system.

## 3. Principles – The drug distribution system

**ACTIVITY B – Personal experiences with drug distribution**

**Guide:** Each group will be assigned a step in the drug distribution system. The group discussion will focus around this 'step'. Draw on your own experiences as you discuss together with colleagues in your group about how you can do the step well and what the positive outcomes of doing the step well, would be.

*Write your step here:*

| *How to do it well* | *Positive outcomes* |
|---|---|
| • | • |
| • | • |
| • | • |

## 6. Practice – The Stock Card

### ACTIVITY C – Filling out a Stock Card

**Guide:** In groups you will practice filling out the Stock Card. There is a sample completed Stock Card in Learner Annex 2 on page 41. You'll see that some of the sections at the top are completed. There will be various steps or actions to follow – you will need the stock card below and the OPD register in Learner Annex 3 on page 43 – from which you will take some information.

**For the first action:** On February 1st, 2010, you receive 300 doses of Coartem 12 tab packages from the NMS bi-monthly distribution to health centres. The voucher number is 0039.

*How should this be recorded on the Stock Card?*

*Your Notes*

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**Guide:** Record it on the stock card as agreed by the group.

**For the next action:** We need to know which drugs and how much of each drug were distributed to patients. We can find this information in the OPD register.

**Guide:** Turn to the sample OPD registers on page 43 and count how many Coartem 12 tab packages were issued for the week of 1 February to 7 February.

*How should this be recorded on the Stock Card?*

*Your Notes*

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## 4. Principles – The OPD Register

- The OPD register is an important form that should be completed for all patients that visit the health centre.

- As part of the research study, you will receive a new version of the OPD register that helps you keep track of the number of fevers and the results of RDT.

- This will help you keep track of the number of patients with malaria attending your health centre. You will be taught how to use this register.

- You will also learn more about the OPD register in the HCM 03: Information Management module.

- There are sample OPD registers included in your manual to help you with completing the Stock Card, in the Annexes at the end of this module.

- This module will focus on the supply management of drugs for malaria, specifically artemether lumefantrine, AL – the first line treatment for uncomplicated malaria in Uganda. You may know this drug as Coartem or Lumartem. This module will refer to it as Coartem.

## 5. Principles – The Stock Card

*What is the Stock Card is and what is it used for?*

*Your Notes*

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- The Stock Card is a form used to keep track of the drug and supplies that are received and used at the health centre.

- The Stock Card helps you to calculate the Average Monthly Consumption, Minimum Stock Level and Maximum Stock Level for each drug or supply.

- One Stock Card is filled out for each drug or supply.

*How often is the Stock Card completed?*

*Your Notes*

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**Topic 1: Drug Distribution System and Forms**

- The **Average Monthly Consumption** represents how many drugs are being used in a month at the health centre. The average monthly consumption also helps to determine how many drugs should be kept in stock. The average monthly consumption is the average consumption of a drug over a three month period.

- The **Minimum Stock Level** is the lowest amount of each drug that should be in stock at the health centre. Keeping a minimum stock level helps to prevent stock-outs. The Ministry of Health recommends a minimum stock level of two-times the average monthly consumption.

- The **Maximum Stock Level** is the highest amount of each drug that should be in stock at the health centre. Keeping a maximum stock level helps to prevent an accumulation of drugs that might spoil or expire before they can be used. The Ministry of Health recommends a maximum stock level of five-times the average monthly consumption.

- If you do not receive drugs regularly it is difficult to calculate the minimum stock level and the maximum stock levels of drugs at your health centres.

- As you begin to receive drugs more regularly over the coming months, you will be able to calculate your average monthly consumption, minimum stock level, and maximum stock level. It is important to keep track of this information in order to inform the District of the requirements at your health centre.

**Determining the average monthly consumption, minimum stock level, and maximum stock level.**

*How do you calculate the average monthly consumption?*

**Guide:** Add up the total drugs issued to patients from the 'Quantity Out' column for a period of three months and divide this total by three.

*What is the total of Coartem 12 tab packs issued for the months of February, March and April 2011?*

*Your Notes*

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**Topic 1: Drug Distribution System and Forms**

**Guide:** Record it on the stock card as agreed by the group.

**Learning Point**

The 'balance on hand' is the total amount of the drug left in stock after the drug has been issued to patients.

**For the next action:** How many Coartem 12 tab packages were issued for the week of 8 February to 14 February?

*Your Notes*

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**How should this be recorded on the Stock Card?**

*Your Notes*

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**Guide:** Record it on the stock card as agreed by the group.

**For the first action:** On 18 February, you decided to take a physical count of all the Coartem 12 tab packages left in your store. You count and see that there are 230 doses left.

**Guide:** Record it on the stock card as agreed by the group. Help the person next to you if needed.

Topic 1: Drug Distribution System and Forms

## Why is it important to calculate the minimum and maximum stock levels?

*Your Notes*

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**Learning Point**

The minimum and maximum stock levels help you to determine how much of each drug to order.  When the stock has reached the minimum stock level, we should place an order for more drugs.  The order placed should not exceed the maximum stock level.

## 7. Principles – The Order Form

• The Order Form is a new form from the Ministry of Health.  It is used to request supplies from the National Medical Stores.

• In the new 'push system' of drug distribution, you have not been ordering for supplies – you have been receiving pre-determined supply deliveries from the National Medical Stores every two months.  As part of this ACT PRIME research study, we would like you to start using the Order Form to order for Coartem and RDTs.

• As part of our research study, we are supporting the Health Sub-District and the District to ensure that the orders that you place for Coartem and RDTs are filled for the ten health centres enrolled in our study.

• However, orders cannot be filled if the Health Sub-District and the District are not aware of the Coartem and RDTs needed at your health centre.  This is why you play a very important role in keeping the drug distribution system on track by completing the OPD Register, Stock Card and Order Form accurately and on time.

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Topic 1: Drug Distribution System and Forms

**Guide:** Record the answer on the sample stock card as agreed by the group.

## What is this total divided by 3 (3 months)?

*Your Notes*

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**Learning Point**

The total divided by 3 is the average monthly consumption.
The average monthly consumption, multiplied by 2 is the minimum stock level.

## What is the minimum stock level for Coartem 12 tab pack?

*Your Notes*

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**Guide:** Record the answer on the sample stock card as agreed by the group.

**Learning Point**

The maximum stock level, is the average monthly consumption multiplied by 5.

## What is the maximum stock level for Coartem 12 tab pack?

**Guide:** Record the answer on the sample stock card as agreed by the group.

*Your Notes*

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**Topic 1: Drug Distribution System and Forms**

### ACTIVITY D – Completing the order form for 12 (Blue) coartem

**Guide:** Try completing the Order Form for the 12-tab (blue) Coartem dose.

**Activity Steps**

***If we have 55 doses in stock and our maximum stock level is 245, how much should we order?***

*Write the calculation in the box below and then on the sample Order Form on page 57.*

[blank box]

- Coartem comes in boxes of 30 packs and each pack has 12 tabs of Coartem.
- This is the 'pack unit' indicated on the Order Form.
- Take the amount you need, 190 doses and divide it by 30.
- Always round the number up so that you receive another full box of 30 to meet your requirements.
- Record '7' on the Order Form under 'Quantity Ordered'.

**Guide:** Please complete the Order Form on page 57.

- We will not be completing the 'pack unit price' and 'total cost' sections on the Order Form for this activity.
- You do not need to complete these when you are placing your order with the Health Sub District.
- In the future you may be asked to complete these sections by the Ministry of Health. You will be informed when you need to start completing these sections.

### ACTIVITY E – Completing the order form for brown (18) and green (24) Coartem

**Guide:** Complete the order from for the 18 tab (brown) and 24 tab (green doses) of Coartem. Discuss your approach with the rest of the group.

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**Topic 1: Drug Distribution System and Forms**

### 8. Practice – The Order Form

- When you find that your drug supply is getting low and there are not enough drugs to last until the next scheduled NMS bi-monthly distribution, you should request for additional drugs from the Health Sub-District.
- To place this order, you need to fill out four copies of the Order Form.
- There are four completed sample Stock Cards on page 49 in Learner Annex 5.1 – 5.5 for each of the four weight-based doses of Coartem.
- There is also a sample Order Form in Annex 7 on page 57 that has been partially completed. You will use these for the next activity.
- The Stock Card for yellow Coartem (6 tab dose) shows the stock is above the maximum stock level. (Annex 5-1).
- The Stock Card for blue Coartem (12 tab dose) shows the stock is below the minimum stock level. (Annex 5-2).
- The Stock Card for green Coartem (18 tab dose) shows the stock is equal to the minimum stock level. (Annex 5-3).
- The Stock Card for brown Coartem (24 tab dose) shows the stock is almost at the minimum stock level. (Annex 5-4).

***Which of these dosages of Coartem will you place an order for?***

*Fill in the blank space*

We should place an order for _____ Coartem.

We should not place an order for _____ Coartem at this point because we do not want to exceed the maximum stock level.

***How do we calculate how much of each Coartem dose we should order?***

*Fill in the blank space*

We should order the _____ minus _____ we have in store.

Topic 1: Drug Distribution System and Forms

## Stock Card Checklist

☐ There is a Stock Card for each drug at the health centre

☐ Be sure to complete a Stock Card for Coartem and RDTs

☐ Complete the Stock Card each time drugs are received at the health centre

☐ Complete the Stock Card at least weekly to determine how many drugs you have left in stock

☐ Always remember to complete the 'Balance on hand'

☐ Complete a physical count of the drugs left in stock every month

**Average Monthly Consumption**

= From the OPD register, count the total drugs issued over a three month period and divide by three

**Minimum stock level**

= Average monthly consumption X 2

**Maximum stock level**

= Average monthly consumption X 5

## Order Form Checklist

☐ Complete the Order Form when you have reached the minimum monthly consumption of Coartem or RDTs and you need to place an order for more

☐ Avoid ordering more than your maximum stock level

☐ Always complete and sign the 'Receipt date' when you receive the order at your health centre

☐ Complete four copies of the Order Form

☐ 1 copy stays at the health centre

☐ 3 copies go to the Health Sub-District

**Quantity required**

= Maximum stock level – balance on hand shown on the Stock Card

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Topic 1: Drug Distribution System and Forms

## 9. Discussion

***Does anyone want to share their reactions to filling in the forms?***

*Your Notes*

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### Learning Point

- You should always try to complete these forms to the best of your ability.
- You play an important role in the drug distribution system.
- Completing these forms and communicating the information with the Health Sub-District and district is an important first step in keeping the drug distribution system on track.

## 10. Planning

### Developing a checklist

***What are some of the things you need to remember when completing these forms?***

*Your Notes*

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Topic 2: Keeping Track of Drug Distribution Activities

# TOPIC 2: KEEPING TRACK OF DRUG DISTRIBUTION ACTIVITIES

**Purpose:** To introduce you to the ADDAT and how it can be used to track issues in the drug distribution system.

**Learning Outcomes:** By the end of this session, you will:

1) Identify the activities required to get drugs from the District or Health Sub-District to the health centre.
2) Identify challenges and solutions to completing drug distribution system activities.
3) Be motivated to keep track of health centre level activities in the drug distribution system.

## 1. Introduction to the topic

### ACTIVITY F – Red Light, Green Light Game

**Guide:** Remain at your tables. When the trainer says 'red light', the participants sit down. When the trainer says 'red light', sit down. When the trainer says 'green light' stand up. If you sit down when you should be standing, or stand when you should be sitting, you are out of the game!

**Traffic Lights**
- Red light = stop, do not move
- Green light = go, move
- Yellow light = go slowly, move slowly

- Drug distribution is just like this game – when things are working (green light), the system at your health centre moves forward and patients receive the right treatment.
- But when you experience a block in the system (red light), everything at your health centre stops and drugs are not available to care for your patients.

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Topic 1: Drug Distribution System and Forms

### Summary Box – Drug Distribution System & Forms

For reference for learners

- Getting drugs to your health centre is like moving a train along a track. There are different parts that have to work together to keep the train – the drugs – on track and moving to your health centre.
- Drug distribution follows a flow of activities with many different people and organizations involved. Thinking of the whole drug distribution system helps to keep it on track.
- In-charges play an important role in providing accurate information and timely updates to help the drug distribution system work well at your health centre.
- In-charges are involved in
  - Receiving drugs
  - Entering on the stock card
  - Prescribing and giving to patients, and recorded on the out-patient department register
  - Notifying the HSD/health centre IC when there are stock outs
- The OPD register is an important form that should be completed for all patients that visit the health centre.
- The Stock Card is a form used to keep track of the drug and supplies that are received and used at the health centre.
- The Stock Card helps to calculate the average monthly consumption, minimum stock level and maximum stock level for each drug or supply.
- The minimum and maximum stock levels help to determine how much of each drug to order. When the stock has reached the minimum stock level, an order for more drugs should be placed. The order placed should not exceed the maximum stock level.
- Completing these forms and communicating the information with the Health Sub-District and district is an important first step in keeping the drug distribution system on track.

*How does this case study compare with your own experiences? Have you had experiences like this before?*

Your Notes

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- Sometimes there are several problems that prevent health centres from having drugs available.
- If you can identify these, you can see which ones you may do something about.
- When there are problems they can be called 'red light' issues.
- When there are no problems, then everything is on track, or 'green light'.

*What did Joseph do well, what was a 'green light'?*

Your Notes

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**Drug Supply activity card**

**What Joseph did well**

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*What are some of the problems or challenges you face?*

Your Notes

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*Is there anything you do at your health centre to keep track of these problems or challenges?*

Your Notes

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## 2. Thinking about the topic

**ACTIVITY G – Drug Distribution System Case Study**

**Guide:** There is a case study below that describes a situation of drug distribution in a health centre. One of you will read it out loud.

**CASE STUDY:** Joseph is an in-charge of a health centre II. The bi-monthly distribution of drugs from NMS to the District occurred last Friday, but Joseph has not heard from the Health Sub-District about when to pick up drugs for his health centre. He also realized that he has no means to go and pick up the drugs. Finally, the drugs were brought to the health centre, but when they arrived, Joseph saw that the lock on the storage cupboard was broken so there was no secure place to store the drugs. Joseph entered the drugs he received on the Stock Card. One month later, Joseph reviewed his Stock Cards and realized that he was nearing the minimum monthly consumption for Coartem. Joseph decided to submit a request for re-supply, but saw that he did not have a copy of the 'Order Form'. Also, none of the other health centre staff are aware of the current amount of Coartem available at the health centre.

**Topic 2: Keeping Track of Drug Distribution Activities**

## 3. Principles

- In the case study, there were eight activities required to get drugs to the health centre.
- One way to think about all of these activities is to create a checklist.
- A checklist can help you to keep track of all the work you have done, or need to do, to complete a task.

***How do you feel about using a checklist to keep track of the activities you complete to keep the drug distribution system working?***

*Your Notes*

_____

_____

- For Joseph's case study, the study has created one type of checklist.
- It lists all of the activities that were identified in the case study.
- It uses a 'green', 'yellow', 'red' system:
  - Green = on track
  - Yellow = moving slowly, some work is required to get the activity on track
  - Red = not on track, much work is required to get the activity on track
- This checklist is called the ACT Drug Distribution Assessment Tool (ADDAT)

**Guide:** Take a few minutes to read through the ADDAT on page 61.

## 4. Practice

**ACTIVITY H – Drug Distribution System Case Study**

**Guide:** In groups turn to the ADDAT tool on page 61 and complete it together.

***What is the issue from the case study?***

_____

**How would you resolve the issue?**

_____

---

**Topic 2: Keeping Track of Drug Distribution Activities**

**Guide:** At your tables or in your groups, go back through the case study and underline what you consider to be 'red light' issues. Then decide what type of activity in the drug distribution system the 'red light' issue is and complete the empty boxes below with Drug Supply Activity.

**District Health Office (DHO) receives drugs from the National Medical Stores (NMS)**

**Health Sub-District (HSD) receives drugs from the DHO**

**Health Centre IVs receive drugs from the HSD**

**Health centre II/IIIs receive drugs from health centre IVs**

**Drugs are received at the health centre and entered on a Stock Card**

**Drugs are prescribed, given to patients, and recorded on the out-patient department register and the Stock Card**

**The HSD / health centre IV is notified when there are stock-outs**

Topic 2: Keeping Track of Drug Distribution Activities

## 5. Discussion

**What can you see might be the benefits to you as in-charges if you are able to keep track of activities you do at your health centres?**

*Your Notes*

- Identifying and keeping track of the issues is a very important first step in improving the drug distribution system.
- It may also be possible to find more permanent solutions to problems that occur frequently.
- It may even be possible to use your tracking reports to demonstrate your challenges to the Health Sub-District or District, which can help them to know the best ways to help you.

## 6. Planning

**How to keep track of the drug distribution system activities at your health centre.**

**Guide:** With others at your table please use the Activity Sheet below to develop your own drug distribution system checklist. You could use the checklist from today's activities or you could change it to better suit your needs and experiences.

**ACTIVITY SHEET**

*1) What drug distribution activities would you like to keep track of?*

---

Topic 2: Keeping Track of Drug Distribution Activities

**Guide:** Record this in the ADDAT.

- Joseph's case study was a good example to get us thinking about the 'red', 'green' and 'yellow' issues. A chart of some other examples can be found on page 63.
- Remember, the ADDAT is just one type of checklist.
- You may find another format or list that works better for you at your health centre.

## Home activity

Look at this chart after the training (Learner Annex 9 on page 63) to see if it compares with your experiences at your health centre.

**Do you face these same issues at your health centre?**

*Your Notes*

**Do you agree with the resolution listed?**

*Your Notes*

**What would you do differently?**

*Your Notes*

**What other activities would you like to keep track of?**

*Your Notes*

**Topic 2: Keeping Track of Drug Distribution Activities**

## Summary Box – Drug Distribution System & Forms

For reference for learners

- Drug distribution is just like this game – when things are working (green light), the system at your health centre moves forward and patients receive the right treatment.

- When you experience a block in the system (red light), everything at your health centre stops and drugs are not available to care for your patients.

- A checklist helps us to keep track of all the work you have done, or need to do, to complete a task.

- A checklist lists all of the activities you identified in the case study. It uses a 'green', 'yellow', 'red' system to help us understand if the activity is:
  - Green = on track
  - Yellow = moving slowly, some work is required to get the activity on track
  - Red = not on track, much work is required to get the activity on track

- The ACT Drug Distribution Assessment Tool (ADDAT) checklist is one kind of checklist. In-charges can develop new checklists as needed to meet specific health centre needs.

---

**Topic 2: Keeping Track of Drug Distribution Activities**

### ACTIVITY SHEET

**2) When would you use your checklist?**

_____

_____

_____

_____

_____

**3) How could you use this checklist to make improvements to the way you identify and resolve issues?**

_____

_____

_____

_____

_____

**4) What would you like your checklist to look like?**

_____

_____

_____

_____

_____

Conclusion

# CONCLUSION

**Purpose:** To close the HCM 02 training and receive any questions or address any questions in the parking lot.

*Any comments or questions you may have about what was covered today?*

*Your Notes*

_____

_____

_____

*Answers to parking lot questions*

_____

_____

_____

*Thank you for participating today!*

*Sharing your experience and insight has been very helpful and informative.*

*Please use the Learner Manual regularly to review what you have learned.*

*Discuss any challenges with your colleagues; they will be most helpful for finding solutions to problems and challenges at your health centre.*

*Goodbye.*

**Topic 2: Keeping Track of Drug Distribution Activities**

# Annex

**Learner Annex 1 - Stock Card - Blank**

# STOCK CARD

Health Unit Name: _____ Health Unit Code: _____

| Item Description (Name, formulation, strength): | | | | | | | Pack Size: | | Item Code No: |
|---|---|---|---|---|---|---|---|---|---|

**Special storage conditions:**

| Unit of Issue: | | AMC: | | | Maximum Stock Level: | | | Minimum Stock Level: | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Date | To or From | Voucher number | Quantity in | Quantity out | Losses/ Adjustments | Balance on Hand | Expiry date | Batch No. | Remarks | Initials |
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**Learner Annex 2 - Completed Stock Card**

# STOCK CARD

Health Unit Name: _____ Health Unit Code: _____

| Item Description (Name, formulation, strength): | | | | | | Pack Size: | | Item Code No: |
|---|---|---|---|---|---|---|---|---|
| Coartem | | | | | | 12 tab pack | | |

**Special storage conditions:**

Store at room temperature

| Unit of Issue: 12 tabs (1pack) | | AMC: | | | Maximum Stock Level: | | | | Minimum Stock Level: | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Date | To or From | Voucher number | Quantity in | Quantity out | Losses/ Adjustments | Balance on Hand | Expiry date | Batch No. | Remarks | Initials |
| 1/02/11 | NMS | 0039 | 300 | - | | 300 | | | | |
| 7/02/11 | OPD | | - | 40 | | 260 | | | 01/02 – 07/02 | |
| 14/02/11 | OPD | | - | 30 | | 230 | | | 08/02 – 14/02 | |
| 18/02/11 | Physical Count | - | - | - | | 230 | | | | |

**Learner Annex 3 - Completed OPD Register**

| (1) SER NUM | (2) NAME OF PATIENT | (3) RESIDENCE | | (4) NEXT OF KIN | (5) AGE | (6) SEX | | (7) WEIGHT | (8) CLASSIFICATION | |
|---|---|---|---|---|---|---|---|---|---|---|
| | | VILLAGE | PARISH | | | M | F | | NEW CASE | RE-ATTD |
| 1 | Oboth Michael | Kisia | Sere | Othieno Peter | 2 | X | | 10 | X | |
| 2 | Awor Mary | Biranga | Paya | Nyadoi Teopista | 3 | | X | 15 | | X |
| 3 | Owino Alex | Agee | Nawire | Apio Federesi | 16 | X | | 58 | X | |
| 4 | Akisa Flora | Aluka | Barinyang | Abbo Joyce | 17 | | X | 53 | X | |
| 5 | Akongo Martha | Burimwenge | Sop Sop | Athieno Lucy | 60 | | X | 58 | X | |
| 6 | Arem Zipporah | Naboa North | Naboa | Alipakisadi John | 2 | | X | 11 | X | |
| 7 | Auma Alice | Bere Central | Namwendia | Ofamba James | 21 | | X | 65 | X | |
| 8 | Adikini Joyce | Agumit | Per Per | Osuna Augustine | 1 | | X | 9 | X | |
| 9 | Otim Jackson | Patewo | Sere | Oriono Bosco | 6 MTH | X | | 7 | | X |
| 10 | Gamisha Madina | Paragang | Paya | Weguli Mark | 3 | | X | 14 | X | |
| 11 | Nyachwo Faith | Maundo | Nawire | Okutta Godwin | 20 | | X | 63 | X | |
| 12 | Lukwago Benoni | Kangori | Barinyang | Mukasa Jerry | 13 | X | | 45 | X | |
| 13 | Anyango Mercy | Maruki B | Sop Sop | Onyango Tophil | 7 | | X | 26 | | X |
| 14 | Obore Patterson | Singisi North | Naboa | Wangalwa Mike | 45 | X | | 65 | X | |
| 15 | Nyafuwono Anne | Naweyo East | Namwendia | Ofwono Moses | 1 | | X | 8 | X | |
| 16 | Owor George | Moruki A | Per Per | Obbo Augustine | 3 | X | | 17 | X | |
| 17 | Aketch Clare | Sere A | Sere | Oboth Johnson | 12 | | X | 35 | | X |
| 18 | Aboth Sicola | Kabosan | Paya | Otim Nape Edwin | 11 | | X | 38 | X | |
| 19 | Ekirapa Monica | Pasule A | Nawire | Okuga Martin | 2 | | X | 11 | X | |
| 20 | Nyaketcho Lucy | Sengo | Barinyang | Ofwono Gerald | 4 | | X | 20 | X | |
| 21 | Odongo Steven | Maruki Rock | Sop Sop | Elubu Philemon | 8 | X | | 27 | X | |
| 22 | Asinde Peace | Naboa South | Naboa | Akiring Grace | 2 | | X | 12 | X | |

**Learner Annex 3 – Completed OPD Register continued**

| (9) NEW DIAGNOSIS | (10) DRUG / TREATMENT | (11) REF IN NUMBER | (12) REF OUT NUMBER | (13) FEVER IN LAST 48H? | (13) TEMP (°C) | (14) DONE? | (14) RESULT |
|---|---|---|---|---|---|---|---|
| Malaria | Lumartem, 1bd x 3/7 Panadol 250mg tds x 3/7 | 02/2011 | | Y | 38.0 | Y | P |
| Malaria | Lumartem, 2 bd x 3/7 Panadol 250mg tds x 3/7 | | | Y | 35.0 | Y | P |
| Malaria | Lumartem, 4 bd x 3/7 Panadol 1g tds x 3/7 | | | Y | 38.5 | Y | P |
| Urinary tract infection | Nitrofurantoin 100mg Qid x 5/7, Panadol 1g tds x 3/7 | | | Y | 37.0 | Y | N |
| Malaria | Lumartem, 4 bd x 3/7 Panadol 1g tds x 3/7 | | | Y | 36.7 | Y | N |
| Ear infection | Amoxicillin 250mg tds x 5/7 Panadol 250mg tds x 3/7 | | | Y | 39.0 | Y | N |
| Malaria | Lumartem, 4 bd x 3/7 Panadol 1g tds x 3/7 | | | Y | 40.3 | Y | P |
| Malaria | Lumartem, 1 bd x 3/7 Panadol 125mg tds x 3/7 | | | Y | 40.5 | Y | P |
| Diarrhea, dehydration | ORS 100mls per loose motion, Amoxicillin 125mg tds x 5/7 | | | Y | 36.8 | Y | N |
| Severe malaria | Panadol 500mg tds x 1/7 | | 03/2011 | Y | 41.0 | Y | P |
| Malaria | Lumartem, 4 bd x 3/7 Panadol 1g tds x 3/7 | | | Y | 39.2 | Y | P |
| Malaria | Lumartem, 4 bd x 3 days Panadol 1g tds x 3/7 | | | Y | 36.7 | Y | P |
| Malaria | Lumartem, 3 bd x 3/7 Panadol 500mg tds x 3/7 | | | Y | 38.4 | Y | P |
| Foot infection | Amoxicillin 500mg 8 hourly x 5/7, Panadol 1g tds x 5/7 | | 04/2011 | Y | 36.8 | Y | N |
| Cough | Amoxicillin 125mg tds x5/7, Panadol 125mg tds x 3/7, Cough linctus 2.5mls tds x 5/7 | | | Y | 39.1 | Y | P |
| Malaria | Lumartem, 2 bd x 3/7 Panadol 250mg tds x 3/7 | | | Y | 37.2 | Y | N |
| Malaria | Lumartem, 4 bd x 3/7 Panadol 1g tds x 3/7 | | | Y | 38.4 | Y | P |
| Malaria | Lumartem, 4 bd x 3/7 Panadol 1g tds x 3/7 | | | Y | 38.9 | Y | P |
| Malaria | Lumartem, 1 bd x 3/7 Panadol 250mg tds x 3/7 | | | Y | 36.4 | Y | P |
| Conjunctivitis | Gentamycin eye 2 drops x 5/7 Tetracycline eye ointment apply nocte | | | N | 36.9 | N | N/A |
| Malaria | Lumartem, 3 bd x 3/7 Panadol 250 mg tds x 3/7 | | | Y | 38.8 | Y | P |
| Malaria | Lumartem, 1 bd x 3 /7 Panadol 250mg tds x 3/7 | 13/2011 | 05/2011 | Y | 38.2 | Y | P |

**Learner Annex 4 - Completed stock card for 12 tab**

# STOCK CARD

Health Unit Name: _____ Health Unit Code: _____

| Item Description (Name, formulation, strength): | | | | | | | | Pack Size: | | Item Code No: |
|---|---|---|---|---|---|---|---|---|---|---|

Coartem — **Special storage conditions:**
Store at room temperature

Pack Size: 12 tab pack

**Minimum Stock Level:**

**Maximum Stock Level:**

| Unit of Issue: 12 tabs (1pack) | | AMC: | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Date | To or From | Voucher number | Quantity in | Quantity out | Losses/ Adjustments | Balance on Hand | Expiry date | Batch No. | Remarks | Initials |
| 1/02/11 | NMS | 0039 | 300 | - | | 300 | | | | |
| 7/02/11 | OPD | | - | 40 | | 260 | | | | |
| 14/02/11 | OPD | | - | 30 | | 230 | | | | |
| 21/02/11 | OPD | | - | 15 | | 215 | | | | |
| 28/02/11 | OPD | | - | 40 | | 175 | | | | |
| 7/03/11 | OPD | | - | 10 | | 165 | | | | |
| 14/03/11 | OPD | | - | 0 | | 165 | | | | |
| 21/03/11 | OPD | | - | 40 | | 125 | | | | |
| 28/03/11 | OPD | | - | 20 | | 105 | | | | |
| 04/04/11 | OPD | | - | 25 | | 80 | | | | |
| 11/04/11 | OPD | | - | 10 | | 70 | | | | |
| 18/04/11 | OPD | | - | 5 | | 65 | | | | |
| 25/04/11 | OPD | | - | 10 | | 55 | | | | |

**Learner Annex 5-1 – Completed stock card for 6 tab**

# STOCK CARD

Health Unit Name: _____ Health Unit Code: _____

| Item Description (Name, formulation, strength): | | | | | | | | | Pack Size: | | Item Code No: |
| | | | | | | | | | 6 tab pack | | |

Coartem

**Special storage conditions:**

Store at room temperature

| Unit of Issue: | | AMC: | | | Maximum Stock Level: | | | | Minimum Stock Level: | | | |
| 6 tabs (1 pack) | | | | | | | | | | | | |
| Date | To or From | Voucher number | Quantity in | Quantity out | Losses/ Adjustments | Balance on Hand | Expiry date | Batch No. | Remarks | Initials |
| 1/02/11 | NMS | 0039 | 300 | - | | 300 | | | | |
| 7/02/11 | OPD | | - | 20 | | 280 | | | | |
| 14/02/11 | OPD | | - | 10 | | 270 | | | | |
| 21/02/11 | OPD | | - | 40 | | 230 | | | | |
| 28/02/11 | OPD | | - | 0 | | 230 | | | | |
| 7/03/11 | OPD | | - | 5 | | 225 | | | | |
| 14/03/11 | OPD | | - | 5 | | 220 | | | | |
| 21/03/11 | OPD | | - | 20 | | 200 | | | | |
| 28/03/11 | OPD | | - | 5 | | 195 | | | | |
| 04/04/11 | OPD | | - | 10 | | 185 | | | | |
| 11/04/11 | OPD | | - | 0 | | 185 | | | | |
| 18/04/11 | OPD | | - | 5 | | 180 | | | | |
| 25/04/11 | OPD | | - | 20 | | 160 | | | | |
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**Learner Annex 5-2 - Completed stock card for 12 tab**

# STOCK CARD

Health Unit Name: _____ Health Unit Code: _____

| Item Description (Name, formulation, strength): | | | | | | | | | Pack Size: | | Item Code No: |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Coartem | | | | | | | | | 12 tab pack | | |

**Special storage conditions:**

Store at room temperature

| **Unit of Issue:** | **AMC:** | | **Maximum Stock Level:** | | | | | **Minimum Stock Level:** | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 12 tabs (1pack) | | | | | | | | | | | |
| **Date** | **To or From** | **Voucher number** | **Quantity in** | **Quantity out** | **Losses/ Adjustments** | **Balance on Hand** | **Expiry date** | **Batch No.** | **Remarks** | **Initials** | |
| 1/02/11 | NMS | 0039 | 300 | - | | 300 | | | | | |
| 7/02/11 | OPD | | - | 40 | | 260 | | | | | |
| 14/02/11 | OPD | | - | 30 | | 230 | | | | | |
| 21/02/11 | OPD | | - | 15 | | 215 | | | | | |
| 28/02/11 | OPD | | - | 40 | | 175 | | | | | |
| 7/03/11 | OPD | | - | 10 | | 165 | | | | | |
| 14/03/11 | OPD | | - | 0 | | 165 | | | | | |
| 21/03/11 | OPD | | - | 40 | | 125 | | | | | |
| 28/03/11 | OPD | | - | 20 | | 105 | | | | | |
| 04/04/11 | OPD | | - | 25 | | 80 | | | | | |
| 11/04/11 | OPD | | - | 10 | | 70 | | | | | |
| 18/04/11 | OPD | | - | 5 | | 65 | | | | | |
| 25/04/11 | OPD | | - | 10 | | 55 | | | | | |

# STOCK CARD

Health Unit Name: _____ Health Unit Code: _____

| Item Description (Name, formulation, strength): | | | | | | | Pack Size: | | | Item Code No: |
|---|---|---|---|---|---|---|---|---|---|---|
| Coartem | | | | | | | 18 tab pack | | | |

**Special storage conditions:**
Store at room temperature

| Unit of Issue: | | AMC: | | | Maximum Stock Level: | | | Minimum Stock Level: | | |
|---|---|---|---|---|---|---|---|---|---|---|

18 tabs (1 pack)

| Date | To or From | Voucher number | Quantity in | Quantity out | Losses/ Adjustments | Balance on Hand | Expiry date | Batch No. | Remarks | Initials |
|---|---|---|---|---|---|---|---|---|---|---|
| 1/02/11 | NMS | 0039 | 200 | - | | 200 | | | | |
| 7/02/11 | OPD | | - | 5 | | 195 | | | | |
| 14/02/11 | OPD | | - | 10 | | 185 | | | | |
| 21/02/11 | OPD | | - | 20 | | 165 | | | | |
| 28/02/11 | OPD | | - | 15 | | 150 | | | | |
| 7/03/11 | OPD | | - | 40 | | 110 | | | | |
| 14/03/11 | OPD | | - | 20 | | 90 | | | | |
| 21/03/11 | OPD | | - | 15 | | 75 | | | | |
| 28/03/11 | OPD | | - | 10 | | 65 | | | | |
| 04/04/11 | OPD | | - | 5 | | 60 | | | | |
| 11/04/11 | OPD | | - | 20 | | 40 | | | | |
| 18/04/11 | OPD | | - | 5 | | 35 | | | | |
| 25/04/11 | OPD | | - | 5 | | 30 | | | | |

**Learner Annex 5-4 - Completed stock card for 24 tab**

# STOCK CARD

Health Unit Name: _____ Health Unit Code: _____

| Item Description (Name, formulation, strength): | | | | | Pack Size: | | Item Code No: |
|---|---|---|---|---|---|---|---|
| Coartem | | | | | 24 tab pack | | |

**Special storage conditions:**

Store at room temperature

| Unit of Issue: | | AMC: | | | Maximum Stock Level: | | | Minimum Stock Level: | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 24 tabs (1pack) | | | | | | | | | | | | |
| Date | To or From | Voucher number | Quantity in | Quantity out | Losses/ Adjustments | Balance on Hand | Expiry date | Batch No. | Remarks | Initials | | |
| 1/02/11 | NMS | 0039 | 400 | - | | 400 | | | | | | |
| 7/02/11 | OPD | | - | 15 | | 385 | | | | | | |
| 14/02/11 | OPD | | - | 30 | | 355 | | | | | | |
| 21/02/11 | OPD | | - | 35 | | 320 | | | | | | |
| 28/02/11 | OPD | | - | 35 | | 285 | | | | | | |
| 7/03/11 | OPD | | - | 15 | | 260 | | | | | | |
| 14/03/11 | OPD | | - | 45 | | 215 | | | | | | |
| 21/03/11 | OPD | | - | 25 | | 190 | | | | | | |
| 28/03/11 | OPD | | - | 15 | | 175 | | | | | | |
| 04/04/11 | OPD | | - | 10 | | 165 | | | | | | |
| 11/04/11 | OPD | | - | 30 | | 135 | | | | | | |
| 18/04/11 | OPD | | - | 35 | | 100 | | | | | | |
| 25/04/11 | OPD | | - | 20 | | 80 | | | | | | |

**Learner Annex 6 – Completed Order Form**

# ORDER FORM FOR EMHS

**Order to (NMS, JMS, Other):** JMS

**Facility Name:** Gwaragwara HC

**District:** Tororo

**Level :** I | II [X] | III [ ] | IV [ ] | General Hospital [ ] | Referral Hospital [ ]

**HSD:** WBN - Kisoko

**Date: 25 / 04 / 11**

**Order details:**
**Facility Code:** _____ **Year:** ___2011___ **Month:** ___April___ **Order no:** ___1___

| Item Code | Item Description | Pack Unit | Pack Unit Price | Quantity Ordered | Total Cost (UGX) |
|---|---|---|---|---|---|
| | Coartem 12-tab pack | | | 190 | |
| | Coartem 18-tab pack | | | 60 | |
| | Coartem 24-tab pack | | | 100 | |
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**Ordered by:** Kizito Kenneth (In-charge, Gwaragwara HC II)

**Approved by:**

**Signature & date:** *Kizito K.*     25/04/11

**Signature & date:**

**Confirmed by:**

**Signature & date:**

# ORDER FORM FOR EMHS

**Order to (NMS, JMS, Other):** _____

**Facility Name:** _____

**District** _____

**Level:** II ☐ III ☐ IV ☐    **General Hospital** ☐    **Referral Hospital** ☐

**HSD:** _____    **Date:** _____

**Order details:**

Facility Code: _____ Year: _____ Month: _____ Order no: _____

| Item Code | Item Description | Pack Unit | Pack Unit Price | Quantity Ordered | Total Cost (UGX) |
|---|---|---|---|---|---|
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Ordered by: _____    Approved by: _____

Signature & date: _____    Signature & date: _____

Confirmed by: _____

Signature & date: _____

**Learner Annex 8 - ADDAT Drug Distribution Assessment Tool**

## ACT DRUG DISTRIBUTION ASSESSMENT TOOL (ADDAT)

| | | |
|---|---|---|
| **GREEN: The activity is on track.** No work is required at this point to ensure this activity is on track. | **YELLOW: The activity is only partly on track.** Some action is required for this activity to become on track. | **RED: The activity not is not on track.** Much work is required for this activity to become on track. |

| Health centre code | Health worker ID | ADDAT reporting month |
|---|---|---|
| [ 0 ][ 4 ] | [ 2 ][ 1 ] | [ 2 ][ 9 ]/[ 0 ][ 3 ]/[ 1 ][ 1 ] day / month / year |

| Activity | Is the activity GREEN, YELLOW, or RED? | Describe status of the activity | Describe how was the issue was resolved | Date [day / month / year] |
|---|---|---|---|---|
| **The date of drug pick-up from the HSD** | ☐ Green ☑ Yellow ☐ Red | I know the drugs have arrived, but I haven't been told when to pick them | Called the HSD/HCIV (Mr Kizito) and arranged a date to pick the drugs (tomorrow) | 05/03/11 |
| **Transportation for drugs from HSD to health centre** | ☐ Green ☐ Yellow ☑ Red | I have no transport to go and pick the drugs | Used money from the PHC Fund to use a boda to pick the drugs | 06/03/11 |
| **Storage of drugs at the health centre?** | ☐ Green ☑ Yellow ☐ Red | There is no lock on the storage cupboard so the drugs are not secure | Used the PHC Fund to buy a lock for the storage cupboard | 05/03/11 |
| **The Stock Card** | ☑ Green ☐ Yellow ☐ Red | The Stock Card is complete for all does of Coartem and RDTs | Will continue using the Stock Card | 05/03/11 |
| **Stocks for AL/RDTs** | ☐ Green ☑ Yellow ☐ Red | Stocks of Coartem are nearing the minimum monthly consumption. An order is needed. | Used the Stock Card to determine how much Coartem to order | 28/03/11 |
| **NMS Supply or Order for re-supply of AL/RDTs, if required** | ☐ Green ☐ Yellow ☑ Red | I do not have an Order Form | Asked for a copy of the Order Form from the HSD/HCIV | 29/03/11 |
| **Communication with staff regarding AL/RDT stocks** | ☐ Green ☑ Yellow ☐ Red | The staff do not know how much Coartem is in stock | Planning a 10 minute meeting to update staff | 28/03/11 |
| **Other activities this period** | ☐ Green ☐ Yellow ☐ Red | | | |

# Learner Annex 9 - ADDAT Chart

| Activity | Green | Yellow | How to resolve | Red | How to resolve |
|---|---|---|---|---|---|
| **The date of drug pick-up from the HSD** | – I know the date to pick drugs from HCI | – Drugs have arrived but I have not been told to pick them<br>– I have not received the date of the next NMS supply so I can't plan to pick drugs | – Call/visit the HCIV to arrange a date for pick-up<br>– Call/visit/ask the HCIV for the next scheduled NMS supply date to help you plan your orders | – No one is available to tell me when to pick drugs | – Call/visit the HCIV to find someone to speak with, or leave a message<br>– Follow-up regularly and document you attempts to make contact |
| **Transportation for drugs from HSD to health centre** | – The HCIV is delivering the drugs | – I am using PHC Fund to take a boda to pick drugs<br>– I have a boda but no fuel to pick the drugs<br>– The rains are too much and I can't pick the drug using a boda like I usually do | – Use the PHC Fund budget to pay for the boda, get a receipt<br>– Explain the situation to the HCIV to see if they can help by sending the drugs in a truck | – The road is washed-out and there is no transportation to/from HCIV<br>– My boda/bike is broken and there are no funds for repairs, so I can't pick the drugs | – Ask the HCIV to safely store your drugs until you can collect/ transport them<br>– Explain the situation to the HCIV to see if they can help by sending the drugs in a truck |
| **Storage of drugs at the health centre** | – The storage cupboard is clean and secure | – The storage cupboard has no lock<br>– The storage space is always flooded so drugs spoil<br>– The storage cupboard is full | – Use the PHC Fund to purchase a lock<br>– Use the PHC Fund to get shelves made for the storage space to keep the drugs off the ground (or use benches, crates, etc)<br>– Clean the storage cupboard to removed expired drugs and drug/supplies that are never used | – There is no secure storage place at the health centre<br>– I can not leave the drugs at the health centre because there are thieves at night<br>– The storage place was burgled | – Use the PHC Fund to purchase a lock box or small cupboard for storage<br>– See if there are steps you can take to make the health centre more safe. Ask a staff member to witness you transporting the drugs.<br>– Make a report to the HCIV about the burglary. See how you can prevent the burglary in the future |

# Learner Annex 9 - ADDAT Chart

| Activity | Green | Yellow | How to resolve | Red | How to resolve |
|---|---|---|---|---|---|
| The Stock Card | – The Stock Card is complete for all doses of Coartem and all RDTS<br>– The Stock Card is up to date as of this week | – Only some of the Stock Cards are complete<br>– The Stock Card(s) has not been updated<br>– I lost my mobile so I can't do the Stock Card calculations | – Plan for a day in the week to complete/ update the Stock Cards<br>– Ask to borrow a mobile, purchase a calculator for the health centre with the PHC Fund | – The Stock Card(s) is lost/missing<br>– I do not have copies of the Stock Card | – Start a new Stock Card using the OPD or a previous Stock Card to calculate the AMC, min/max stock levels.<br>– Use the PHC Fund to make copies, or draw a version of the Stock Card in a notebook |
| Stocks for AL/RDT | – All Coartem is in stock<br>– There is enough Coartem/RDT to last until the next NMS distribution | – Coartem/RDTs are nearing/have reached the minimum monthly consumption<br>– I do not know how many drugs are in stock, but I think there will be a stock-out soon | – Use Stock Card to determine how much Coartem/RDT to order<br>– Use your last Order Form to estimate how many drugs you will need for this order | – There is a stock out for Coartem/<br>– The health centre was burgled /flooded/ damage and stocks were lost | – Place an order for Coartem/ At immediately. Determine why there was a stock-out (order not placed in time, previous order insufficient) to prevent the stock-out in the future<br>– Report the damage to the HCIV. Make an order to replace the stocks of Coartem/ RDTS. |

# Learner Annex 9 - ADDAT Chart

| Activity | Green | Yellow | How to resolve | Red | How to resolve |
|---|---|---|---|---|---|
| **NMS Supply or Order for re-supply of AL/ RDTs, if required** | – Order for re-supply of AL/RDTs placed<br>– NMS supply / or Order received this month | – NMS supply is delayed<br>– I placed my order but the HCIV said it was not received | – Ask the HCIV when the NMS supply is expected. Determine if you have enough Coartem/RDTs to last, and place an order on order for re-supply of Coartem if late and there may be a stock-out<br>– Confirm with the HCIV that the Order Form was not received, then make a new copy of the Order Form from your files and send | – NMS supply did not arrive<br>– I have not ordered for re-supply of Coartem/ RDTS<br>– I placed my order by phone so it was not recorded/filled | – Ask the HCIV if the NMS supply is expected soon. Determine if you have enough Coartem/RDTS to last, and place an order if required<br>– Determine why you did not place the order (no Stock Card, no Order Form, I was away) to ensure you prevent this next time. Place an order for re-supply of Coartem/RDTS |
| **Communication with staff regarding drug/ AL/RDT stocks** | – There is regular communication between staff about stocks<br>– I am the only staff person! | – I am not here when the other staff are so I can not communicate with them | – Write a message in a note book, or place it on the wall, so that the staff can read it when they are at the health centre | – I planned a meeting, but staff did not attend | – Ask staff why they were not able to attend, plan together for another meeting |

# Learner Annex 9 - ADDAT Chart

| Activity | Green | Yellow | How to resolve | Red | How to resolve |
|---|---|---|---|---|---|
| Other activities this period | – I met with the HCV about the drug supply. I wrote notes and filed with the ADDAT.<br>– I attended training on supply management. I told my co-workers what I learned.<br>– The volunteer cleaned the storage cupboard. We removed expired medications and moved soon-to-expire medications to the front of the shelves.<br>– A politician came to visit. I showed him our stocks and Stock Cards. He was impressed. | – | – | – | – |

**Learner Annex 10 – Checklist for putting up in your health centre**

**Stock Card Checklist**

❏ There is a Stock Card for each drug at the health centre

❏ Be sure to complete a Stock Card for Coartem and RDTs

❏ Complete the Stock Card each time drugs are received at the health centre

❏ Complete the Stock Card at least weekly to determine how many drugs you have left in stock

❏ Always remember to complete the 'Balance on hand'

❏ Complete a physical count of the drugs left in stock every month

**Average Monthly Consumption**

= From the OPD register, count the total drugs issued over a three month period and divide by three

**Minimum stock level**

= Average monthly consumption X 2

**Maximum stock level**

= Average monthly consumption X 5

**Order Form Checklist**

❏ Complete the Order Form when you have reached the minimum monthly consumption of Coartem or RDTs and you need to place an order for more

❏ Avoid ordering more than your maximum stock level

❏ Always complete and sign the 'Receipt date' when you receive the order at your health centre

❏ Complete four copies of the Order Form

❏ 1 copy stays at the health centre

❏ 3 copies go to the Health Sub-District

**Quantity required**

= Maximum stock level – balance on hand shown on the Stock Card

**The ACT PRIME Study**

Infectious Disease Research Collaboration, Uganda.
ACT Consortium, London School of Hygiene & Tropical Medicine, UK.