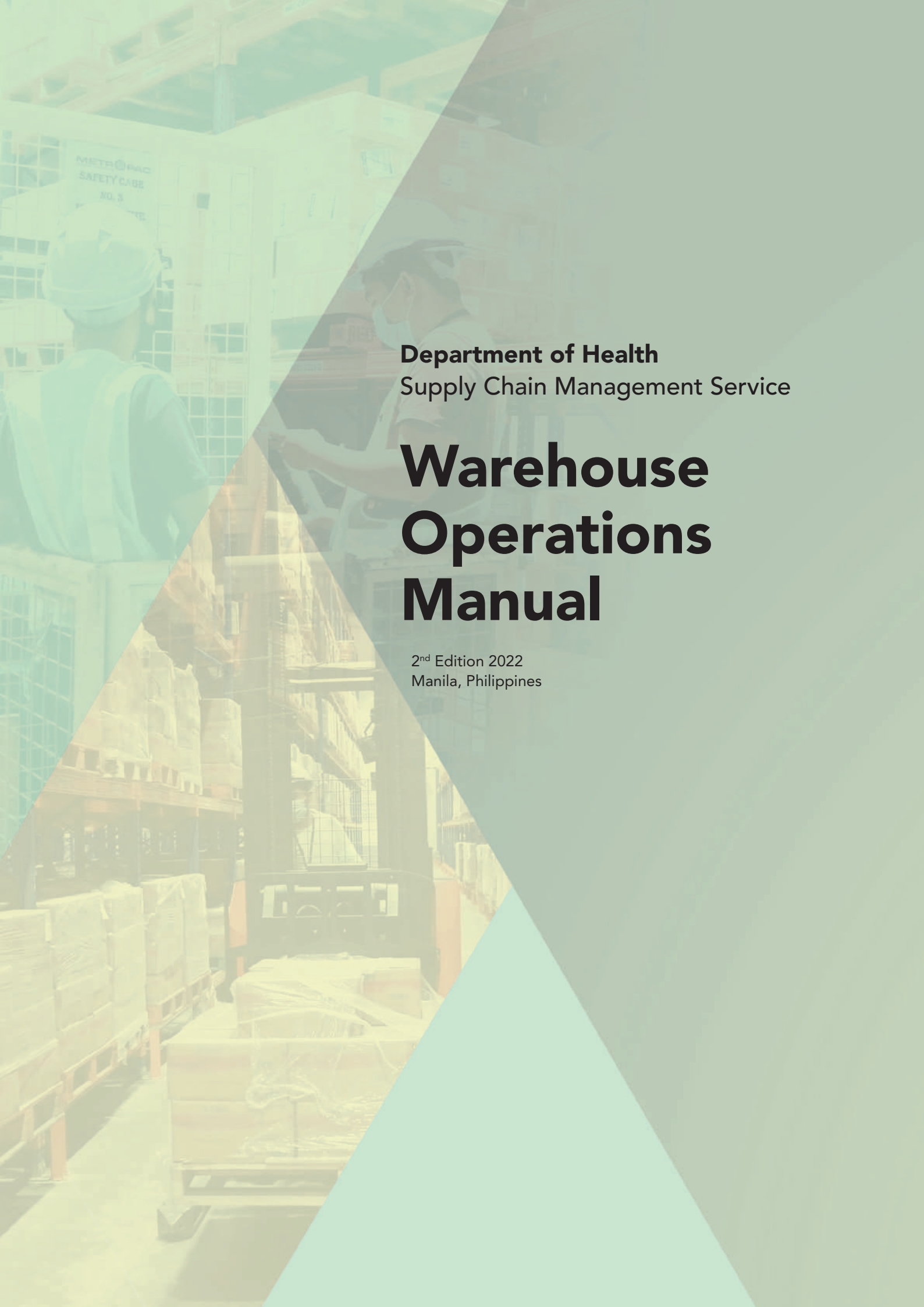
WAREHOUSE OPERATIONS MANUAL 2022

Department of Health
Supply Chain Management Service



Department of Health
Supply Chain Management Service

Warehouse Operations Manual

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Manila, Philippines

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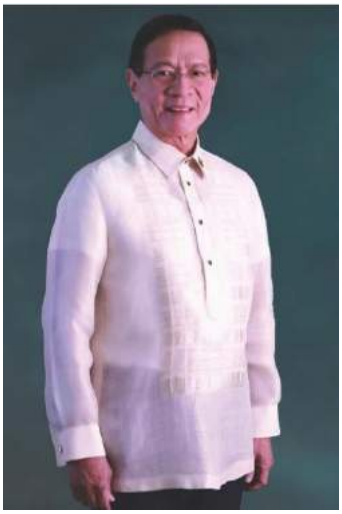
Republic of the Philippines
Department of Health
OFFICE OF THE SECRETARY

MESSAGE from the
Secretary Of Health



The enactment of the Universal Health Care (UHC) marked one of the biggest milestones in the history of the Philippine Health Sector. This paved the way for the commencement of significant reforms across the healthcare systems of the country, to ensure that every Filipino has equitable access to quality and affordable health care products, devices, facilities, and services without facing financial hardships, particularly the poor and marginalized members of our society. Aimed at attaining a more responsive healthcare system and a more equitable financing health mechanism, UHC espouses a holistic approach bettering the delivery of services, and underscores the significant role of a systematic approach, with clear delineation of roles of key agencies and stakeholders.

Among the pipeline of significant reforms in improving the accessibility of health products are the implementation of a more streamlined and cost-effective Procurement and Supply Chain Management System (PCSM), capacity building for more competent, professional, and accountable human resource for strategic engagement with the private sector, and the implementation of Electronic Health Commodities Logistic Management Information System. These reforms play a crucial role in ensuring that we deliver quality products and services, by securing the availability and appropriate placement of critical health assets wherever they are needed.

In line with the ongoing reforms in the Department of Health (DOH), guidelines for supply management are a critical component towards promoting accessibility to quality health products at all service delivery points. Hence, this Warehouse Operations Manual (WOM), as an essential part of supply and chain management, has been reviewed and updated with standards that will be critical in delineating roles and responsibilities of the entire supply workforce, and harmonise the concept of managing health commodities across all warehouses managed by the government.

It is thus my fervent hope that the effort exhausted in the updating of this manual will effect positive changes for the realisation of a healthier, stronger Philippines. Together, let us create more responsive, more sustainable, and more equitable health systems and communities, for the benefit of every Juan and Juana.

FRANCISCO T. DUQUE III, MD, MSc
Secretary of Health

Republic of the Philippines
Department of Health
OFFICE OF THE SECRETARY

MESSAGE from the
Undersecretary Of Health

Warehouse Management plays a vital role in building a strong healthcare supply chain management, this ensures that drugs, medicines, and other health commodities are available and accessible at the point of care thus providing quality, safe and effective health services at all levels of the health system.

In line with our continuous pursuit to improve our services, the Department of Health presents the second edition of the Warehouse Operations Manual developed by the Supply Chain Management Service in coordination with the Regional Supply Officers and our partners from USAID - Medicines, Technologies, and Pharmaceutical Services (MTaPS). This manual was created to establish a system with streamlined processes to guide warehouse workforce in performing their daily operational tasks. Likewise, this also aims to provide guidance to the warehouses of both Centers for Health Development and the Local Government Units (LGUs) to ensure safe and efficient distribution of health care commodities within their area of jurisdiction.

We hope that through this manual, we will be able to institute the much needed reform in the management, monitoring and distribution of drugs, medicines, and health supplies and prevent over or undersupply, expiration and wastage and ultimately support the health service delivery directive of the enhanced FOURmula ONE Plus (F1+) Strategy towards achieving the Universal Health Care (UHC) by ensuring the availability of essential quality health services at appropriate levels of care especially for the poor as well as strengthening good governance in health through improvement and innovations in the entire supply chain management system.

MA. CAROLINA VIDAL-TAINO, CPA, MGM, CESO I
Undersecretary of Health
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Foreword

In line with the thrust of the Department of Health on UHC Act implementation and in support of the further devolution of the health sector, the Supply Chain Management Service (SCMS) developed these set of standards for warehouse management as an important part of the Supply Chain Management as a support to Service Delivery of Health Programs. This is to ensure the availability, and accessibility of safe and effective health commodities across the country. The SCMS team assumes the technical leadership and steers the coordination of initiatives to strengthen the country's Supply Chain Management, from the national down to the local government level, which ultimately aims to ensure the delivery of patient-centered quality care.

Standardization of processes and key areas of warehouse management is a step towards ensuring uniformity of warehouse processes at all levels of supply chain in preparation to achieving digitalization of supply management processes. This is through the implementation of the Electronic Logistics Management Information System (eLMIS) which will provide a more efficient, real-time, accurate data gathering and data management for monitoring, evaluation of the country's supply chain for a more informed decision making.

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CAUTION

PART I

Introduction

1.1 BACKGROUND

The Department of Health (DOH) dedicates its time in rendering health services to all the citizens of our nation and so therefore, proper management of Health Commodities that the government procure are of vital importance in order to maintain the quality and potency during its storage and distribution. It is a primary commitment of the Department to provide safe and efficient health commodities to all Filipino in a timely manner through this initiative in fostering the Supply Chain Management.

As part of improving the Supply Chain Management in the Department, the Warehouse Operations Manual (WOM) is written to standardize warehouse processes across all levels of supply chain and achieve seamless operations to support health services implemented by Public Health Programs. The WOM indicates standard processes on managing logistics which will be important in the preparation for automation pertinent to the Section 36 of the Implementing Rules and Regulations of the Republic Act No. 11223 otherwise known as the "Universal Health Care Act" indicating that electronic health commodities logistics management information system shall be implemented.

The WOM is written in a simple and straightforward manner which clarifies operational tasks per position and per function. Every person will be clearly accountable for specific tasks within the warehouse with the intention of harmonizing all logistics operations of the government for health commodities.

1.2 PURPOSE OF THE MANUAL

The purpose of this manual is to serve as general guideline for warehouse officials of the Government when carrying out their specific duties and responsibilities based on applicable local and international standards. This manual standardizes the procedures, accountabilities and responsibilities of warehouse staff in a step-by-step manner.

1.3 USERS OF THE MANUAL

Users of this manual include all officials/employees and managers of various warehouses/storerooms managed by the Department of Health, its offices/units and attached agencies, Centers for Health Development, the Bangsamoro Autonomous Region in Muslim Mindanao (BARMM) and Local Government Units carrying health commodities.

PART II

Guiding **Principles**

2.1 THE SUPPLY CHAIN MANAGEMENT

The country's health system cannot efficiently implement health services without a well-planned and well-operated supply chain management system that maintains availability and accessibility of health commodities at the point of care. Supply chain management encompasses the planning and management of all activities involved in sourcing, procurement and logistics. Importantly, it also includes coordination and collaboration with channel partners, which can be suppliers, intermediaries, third party service providers, and customers. In essence, supply chain management integrates supply and demand management within and across companies and organizations[1].

The supply management in DOH includes the following processes: needs assessment, product selection, procurement, warehousing, distribution, use and monitoring & tracking.

Figure 1: Supply Management Cycle in DOH

2.2 WAREHOUSE MANAGEMENT

Warehouse Management is part of the supply chain management that optimizes and controls the day-to-day operations in the warehouse to ensure that products are stored and accounted for properly from the receiving up to releasing processes[2].

This manual focuses on warehouse management operations as an important part of supply management of health commodities procured by and donated to the government. The following are the recommended minimum standard processes in managing warehouses for storing health commodities:

1. Council of Supply Chain Management Professionals (CSCMP)
2. World Health Organization, Technical Report Series, No. 957, 2010 - Annex 5

1. **Preparation for Delivery:** Is the process of preparing for deliveries from suppliers or transfers from other warehouses to ensure that incoming deliveries are properly managed. This is the process where requests for deliveries are assessed based on the storage capacity, products' storage requirements and other warehouse activities.

2. **Inspection and Receiving:** The process of inspecting and receiving commodities upon arrival through routine delivery activities. This is the process where quantity and quality of delivered products are checked against the delivery documents, contract, technical specifications, and other legal standards prior to acceptance.

3. **Put-Away:** The process of transferring the commodities from the receiving area to the identified location for storage in the warehouse. This is the process where received products are handled using warehouse equipment in accordance with proper techniques ensuring that stocks are placed on locations appropriate to their storage requirements.

4. **Storage and warehousing:** The process of storing and warehousing commodities based on its storage requirements while waiting for shipment. This is the process where warehouse staff perform routine activities based on Good Storage Practices guidelines and maintain good condition of facility, tools and equipment associated with the daily operations of the warehouse.

5. **Picking and Packing:** The process of picking and packing of items from storage location to staging area according to requisition or allocation list. This is the process where preparations such as generation of shipping documents, assembling, and labeling items are done prior to shipment of items to its intended recipients.

6. **Dispatch:** The processing of releasing commodities based on the approved shipping documents for delivery to its intended recipients. This is the process where items are properly handed over to 3PL courier/ recipient based on the approved shipping documents.

The manual also includes standard operating procedures for the following specific processes:

7. **Pharmaceutical Waste Management** – warehouse processes for proper handling and facilitation of waste management for health commodities in cases of damage and expiration.

8. **Reverse Logistics** – warehouse processes for proper management of health commodities to:

    a. Ensure that items are retrieved in cases of product recall notified by the manufacturer or by the Food and Drug Administration (FDA) due to manufacturing defects, contamination and other safety concerns associated with the product.

    b. Ensure transferring/ re-distribution of soon-to-expire items or slow-moving items between service delivery points in order to place them to locations where they will be more likely to be used.

9. **Emergency Supply Chain Management** – warehouse processes associated with maintaining and handling health commodities in preparation for emergencies and during emergencies (i.e., Calamities, Disasters, and other Public Health Emergencies). This process also tackles how to deal with donations during emergencies to prevent wastages and other problems associated with mismanagement of donations.

10. **Cold Chain Management** – warehouse processes associated with basic handling of health commodities requiring cold chain management.

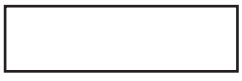
2.3 HOW TO USE THIS MANUAL

The WOM contains guidelines in warehouse management, and standard operating procedures arranged according to different parts of warehouse operations. This includes process flow diagrams and training guides for each process. Specific details and procedures are discussed accordingly in their specific sections of this manual. Listed below are the processes covered in the manual. Each presents the flowchart containing all the procedures and description of the workflow process.

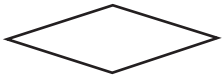
1. Preparation for Delivery:
   a. From supplier – applicable for own procurement
   b. From upper tier – applicable for items allocated by either central or regional level
2. Receiving:
   a. From supplier – applicable for own procurement
   b. From upper tier – applicable for items allocated by either central or regional level
3. Put-Away
4. Storage and Warehousing
5. Picking and Packing
6. Dispatch
7. Management of Pharmaceutical Waste and Unserviceable Equipment
8. Reverse Logistics
   a. Product recall from Manufacturer and/or FDA
   b. Releasing for redistribution
   c. Pulling product from lower tiers for redistribution
9. Emergency Supply Chain Management
10. Cold Chain Management – applicable for warehouses with cold rooms

Each flowchart follows a particular legend that may be useful to the reader:

Curved rectangles signify the starting and end point of a particular process.



Rectangles contain processes that should be carried out by the responsible person(s) for a particular step.



Diamonds signify decision points, which are answerable by a YES or NO. Each answer leads to a particular instruction for that step.

Broken line rectangles indicate that the responsible person(s) is required to receive information or prepare to perform the succeeding process/procedure.

Also included in this manual are Functional Flowcharts, which present redesigned flowcharts and restructured tasks and responsibilities of each warehouse personnel according to the function of a store manager, store supervisor, storekeeper, and store helper.

A. DEFINITION OF TERMS USED IN THIS MANUAL

3PL – Third Party Logistics is an external service provider contracted by an organization to carry out business functions (i.e. supply chain management functions).

Average Monthly Consumption (AMC) – is the average of quantities of product dispensed to users or patients in the most recent months (i.e., last 3 or 6 months)

Batch/ Lot No. - Distinct group of numbers, letters, or any combination thereof, designated to identify a drug or device produced during a given cycle of manufacture.

Bill of Lading (BL) - Refers to a form or list of goods used for the computation of payment to be rendered to the courier for the shipment of goods to the consignee.

Bin Card – a stock keeping record which hold all information about product/item placed on pallet in a certain location.

Calibration – Process of adjusting the output or indication on a measuring instrument to comply with values of accuracy and applied standards.

Certificate of Product Registration (CPR) – Document issued by the Food and Drug Administration (FDA) certifying that health commodities are cleared for distribution and fit for consumption.

Contamination – The undesired introduction of impurities of a chemical or microbiological nature or, of foreign matter into or on to a starting material, intermediate or pharmaceutical product during handling, sampling, packaging/ repacking, storage and transportation.

Cross docking – Refers to logistics mechanism or a distribution strategy where orders are sent to a collection or redistribution point (intermediate warehouses) for documentation and segregation purposes only before sending to its intended recipient/destination *(Applicable to situations such as emergency, without being stored in the warehouse for a long period of time).*

Delivery Documents – Refers to set of documents required upon delivery of goods to DOH Warehouse(s) which include but not limited to: Purchase Order (PO)/ Contract; Notice to Proceed (NTP); approved Request for Schedule of Delivery Form (RSD); Delivery Receipt (DR); Sales Invoice (SI); Certificate of Product Registration (CPR); FDA Certificate of Analysis; Batch Notification (BN) for antibiotics; Lot Release Certificate for vaccines (LRC) and Delivery Notification Form (DNF).

Delivery Notification Form (DNF) – Refers to documents that describe allocated goods with corresponding quantity, volume, end-user and estimated date of delivery provided by the consignor.

Delivery Receipt (DR) – Refers to documents that describe goods with corresponding quantity and price as the basis of receipt of item(s)/service(s) provided by the supplier upon delivery.

Delivery Status Report – Report generated by 3PL to track status of delivery.

Expiration/Expiry Date - the date stated on the label of food, drug, cosmetic, device or hazardous substance after which they are not expected to retain their claimed safety, efficacy and quality or potency and after which it is no longer permissible to be utilized.

Electronic Logistics Management Information System (eLMIS) – An electronic logistics management information system used to manage, collect, store, organize, and visualize logistics data which enables supply chain workforce to make operational and strategic decisions in supply management.

End-user – Pertains to the specific office which owns the commodity (i.e. Health Programs).

FDA Certificate of Analysis - Document issued by the Food and Drug Administration and/or other health regulatory agencies confirming that a regulated product meets its product specification after undergoing quality control and testing.

FDA Test Result Database – Refers to a file or information system containing summary of items/products which have undergone FDA Test Analysis.

FDA Test Status Label – Refers to a label indicating the Test Analysis Status of items which consist of the following distinction:

Quarantine	Commodities affixed with appropriate labels which are still waiting for the Test Analysis Result from the FDA.
Passed	Commodities affixed with appropriate labels which already conform to the FDA Test Analysis.
Failed	Commodities affixed with appropriate labels which failed to conform to the FDA Test Analysis.

FEFO – Acronym for First Expiry, First Out.

FIFO – Acronym for First in, First Out.

Forklift – Industrial trucks operated by a certified operator used to lift and move items on pallets over short distances and different rack levels inside the warehouse/ storeroom.

Gate Pass – Refers to the clearance on security measures indicating commodities for dispatch.

Good Distribution and Practices (GDP) – part of quality assurance which ensures that the quality of a pharmaceutical product is maintained though adequate control throughout the numerous activities which occur during the distribution process.

Good Storage Practices (GSP) – Set of Standards in maintaining quality, stability, and integrity of pharmaceuticals and non-pharmaceutical products during storage from the point of manufacture up to its utilization.

Good Stocks – Items that are considered accepted once (1) inspected by Inspection and Acceptance Committee and (2) Passed the FDA Test Analysis. Items that are inspected and are not required to undergo FDA Test Analysis shall be tagged as Good Stocks as well.

Humidity - Refers to the concentration of water vapor in the air which indicates the likelihood of precipitation, dew, or fog.

Inventory Label Form – label attached to commodities to easily identify stored items such as Product Identification Label and FDA Status Label.

Inbound Summary Report – Report referring to the record of commodities received in a specified period.

Inspection and Acceptance Report (IAR) – Report generated manually or thru Warehouse Management System which describe the conduct of inspection and acceptance of the Inspection Committee for items procured by and/or donated to DOH.

Inspection Committee – The committee responsible for ensuring that the commodities delivered by the supplier meet the standards and technical specifications indicated in the Purchase Order/Contract. The committee is composed of the Procuring Entity/ End-user, Property/Supply Custodian, and other relevant unit.

Inventory Stock Keeping Records – Set of documents (such as Bin Card, Stock Cards, Location Map, Inbound and Outbound Summary Report, and Monthly Inventory Report) containing necessary information of all commodities stored inside the warehouse / storeroom for monitoring and updating.

Jack lift – Refers to a mechanical equipment used to lift and move items on pallet over short distances.

Key Performance Indicator – A quantifiable measure used to evaluate the success of a given objective for performance.

Location code - Distinct group of numbers, letters, or symbols, or any combination thereof, used to identify specific location (e.g. warehouse, shelf, shelving level, rack no) of an item

Location Map - Refers to the blueprint of all commodities stored at various areas in the warehouse/storeroom.

Lot Release Certificate (LRC) – Refers to a certificate that serves as a mechanism that provides FDA with a real-time system to continuously monitor product quality, through review and testing, of many of the biological products that it regulates.

Manual Tally Sheet – is a form used by receiving officers to record data during actual delivery including vehicle information, item information, packaging information and item quantity.

Material Safety Data Sheet (MSDS) – is a document from the Manufacturer or Supplier that contains information on the potential hazards (health, fire, reactivity and environmental) and how to work safely with the chemical product/item.

Monthly Inventory Report – Report pertaining to the summary of items with their pertinent information for monitoring which provide a comprehensive account of stocks or supplies stored inside the warehouse/ storeroom.

Months of Stock (MoS) – refers to the duration (in months) that the stock would last base on the recent Average Monthly Consumption.

Non-Conformance Report – Report referring to non-compliance of suppliers and Forwarder to specified instructions defined by DOH. This report serves as justification for disapproval of any request and delivery.

Notice of Delivery (NOD) – Refers to a form produced by the consignee to confirm successful delivery of allocated commodities,

Notice to Proceed (NTP) - Refers to a formal letter from the Procuring Entity to the Supplier indicating the consent to deliver procured commodities in accordance with the Purchase Order/Contract.

Outbound Summary Report – Report referring to the record of commodities released/ dispatched in a specified period.

Pallets - Refers to a plastic or wood material used to stack bulk items and larger cartons. They keep things off the floor and can be used with forklifts or jacklifts to move around groups of larger items.

Pest Control – Procedure on maintaining pest and vermin free warehouse, the pest-control agents used should be safe, and there should be no risk of contamination of materials and pharmaceutical products.

Pharmaceutical Wastes – Are damaged, expired, unused, spilt, and contaminated pharmaceutical products, drugs, vaccines, and sera that are no longer feasible for use and need to be disposed of appropriately. The category also includes discarded items used in the handling of pharmaceuticals, such as bottles or boxes with residues, gloves, masks, connecting tubing, and drug vials.

Pick List – List of items with corresponding instructions on which products shall be picked from a specific location in the warehouse/storeroom to staging area for packing in accordance with Shipment Plan and Shipping Documents.

Picking Tool/Equipment - Tool/Equipment where picked items are placed such as a basket, cart, pallet, trolley or fork/jack lift as necessary to aid in transferring products from storage location to designated area for picking and packing.

Procuring Entity – refers to any branch, department, office, agency, or instrumentality of the government, including state universities and colleges, government-owned and/ or -controlled corporations, government financial institutions, and local government units procuring Goods, Consulting Services, and Infrastructure Projects.

Product Identification Label – Refers to a piece of paper or other material affixed to a commodity to easily identify stored items with information on the PO/Contract number, DR/SI number, product name and description, date received, end-user/ program; quantity; Batch/Lot no. and Expiry Date

Property Transfer Report (PTR) - Form used to document the information associated with all commodity transfers from one office to another.

Purchase Order (PO) / Contract – Refers to the contract between the DOH and the Service Provider awarded by the Bids and Award Committee (BAC) and Head of Procuring Entity (HOPE) through Public Bidding and other modes of procurement.

Quarantine Area – Space in the warehouse in which commodities are isolated physically or by other effective means while a decision is awaited on their acceptance, rejection and/or reprocessing.

Receiving Area – Space in the warehouse in which commodities are checked prior acceptance as to its quality and quantity in accordance with Purchase Order/ Contract and other Delivery Documents.

Request for Analysis (RFA) – Form issued by FDA for filing request for Test Analysis.

Request for Inspection (RFI) – Official letter request from Supply Officer to the Inspection Committee for the conduct of inspection on commodities scheduled for delivery to DOH warehouse(s).

Request for Schedule of Delivery (RSD) Form – Official form accomplished by suppliers to request schedule of delivery to warehouses.

Request Requisition and Issueance Slip (RIS) – Form used to document the information associated with commodity transfer within the office based on request.

Sales Invoice (SI) – Refers to documents that describe goods with corresponding quantity and price as a basis of payment to the Supplier for the item(s)/service(s) provided.

Shipping Documents – Documents that serve as proof of transaction of shipment or transfer of property/item/goods from one office/department to another such as Shipment Plan, PTR, BL and RIS.

Staging Area – Space in the warehouse where packing or repacking of commodities takes place based on the provided approved Allocation List(s) prior to dispatch and distribution.

Stock Card – a stock keeping record which holds all information about a single product with different lot numbers / batch numbers, different expiration date and different location inside the warehouse/storeroom under a single Purchase Order/ Contract. It is the consolidation of all Bin Cards of a single item placed in different areas inside the warehouse/storeroom.

Stock Keeping Unit (SKU) – Refers to codes projected as a distinct group of numbers, letters, or any combination thereof, designated to identify commodities (Pharmaceuticals and Non-pharmaceuticals) stored inside the warehouse/storeroom.

Storage Area – Appropriate place for the storage of pharmaceuticals and non-pharmaceuticals in accordance to the commodity's storage requirement.

Summary of Supplies and Materials Issued (SSMI) – Form issued by Commission on Audit (COA) for filing up reports on the summary of items (Supplies and Materials) issued in a certain period as reference on books of account.

Temperature and Humidity Monitoring - Refers to the process of observing and recording of temperature and relative humidity in a specified time and duration.

Temperature and Humidity Monitoring Chart – Refers to a monitoring tool for consistent reading and recording of Temperature and Relative Humidity inside the warehouses/storerooms.

Thermohygrometer – Diagnostic measuring device used for indoor climate and environmental monitoring of both temperature and relative humidity.

Thermohygrometer Profile Database – Refers to a set of data maintained by the store/warehouse manager to access the description, location, and status of each thermohygrometer inside the warehouse.

Ventilation - is the intentional introduction of ambient air into the warehouse and is mainly used to control indoor air quality by diluting and displacing indoor pollutants; as well as to promote thermal comfort or dehumidification.

Warehousing Management System (WMS) – A collection of integrated software applications, designed to support and optimize warehousing and distribution management. Some WMS is integrated already in an electronic logistics management information system.

LIST OF ANNEXES

Annex No.	*Title:*
1	Request for Schedule of Delivery
2	Delivery Notification Form
3	Non-conformance Report
4	Request for Inspection
5	Inspection and Acceptance Report
6	Bin Card & Stock Card
7	Location Map
8	Inbound Summary Report
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10	Monthly Inventory Report
11	Notice of Delivery
12	Product Identification Label
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14	Corrective Requisition on Warehouse Operations
15	Warehouse Operations Routine Checklist
16	Incident Report
17	Pull out Request for Replacement
18	Temperature & Humidity Monitoring Chart
19	Thermohygrometers Profile & Calibration Plan Database
20	Pick List
21	Property Transfer Report
22	Bill of Lading
23	Request Requisition and for Issue Slip
24	Gate Pass
25	Manual Tally Sheet
26	FDA Test Result Database
27	Request for Analysis
28	Warehouse Essentials

ANNEX 1

NAME OF OFFICE

ADDRESS

REQUEST FOR SCHEDULE OF DELIVERY (RSD)

RSD Control Number	①			**Date of Request**	②	
I. REQUESTING SUPPLIER'S ACTION / DETAILS OF REQUEST						
For: ③			***From:*** ④			
Signature over Printed Name and Position			*Company Name* ⑤ *Signature over Printed Name and Position*			
Type of Delivery: ⑥		**PO / Contract No:** ⑦		**PO/ Contract Date:** ⑧		
Item Description	Tranche	Quantity	Quantity per Carton	Total number of Carton	Dimension of carton in cm	Weight of carton in kg
⑨	⑩	⑪	⑫	⑬	⑭	⑮
End user:	⑯		**Requested Date of Delivery:**	⑰		
II. OFFICE'S ACTION / RESPONSE						
Recommendation:	⑱		**Approved Quantity:**	⑲		
Reason for disapproval (If disapproved):	⑳		**Volume in CBM:**	㉑		
Other remarks:	㉒		**Place of Delivery:**	㉓		
Recommended by: ㉔			Noted by: ㉕			
Signature over Printed Name and Position			Signature over Printed Name and Position			
Iil. INSTRUCTION TO SUPPLIERS						
㉖						

Request for Delivery Schedule Shall be filled up by intended recipient with the following information:

1. RSD Control Number
2. Date RSD was prepared/ filled-up
3. Name of the Head of Office
4. Company Name of the requesting supplier
5. Name of the representative of the requesting supplier/company
6. Type of Delivery: Indicate whether the delivery is Partial or Full.
7. PO or Contract Number of the delivery
8. Date indicated in the PO or Contract
9. Item description as indicated in the PO/Contract
10. If applicable, indicate in which tranche the delivery belongs to (i.e: 1st tranche, 2nd tranche, 3rd tranche) based on the PO/Contract or NTP
11. Quantity of items requested for delivery
12. Quantity of items in a carton (tertiary packaging)
13. Total number of cartons requested for delivery
14. Dimension of carton (height, width, length) in centimeter (cm)
15. Weight of carton in kilograms (kg)
16. End-user / Program owner of the commodities for delivery
17. Requested Date of Delivery
18. Recommended Decision: Indicate whether approved or disapproved
19. Quantity approved based on the space availability in the warehouse. Put N/A if the delivery is disapproved
20. Reason for disapproval. Attached the Non-conformance form as necessary
21. Volume of delivery in Cubic Meter (CBM) or in number of pallets
22. Other remarks as necessary
23. Place of delivery: Name of the warehouse and address
24. Name of Store Manager
25. Name of Supply Officer
26. Other instructions and reminders to suppliers as necessary

ANNEX 2

NAME OF OFFICE

ADDRESS

DELIVERY NOTIFICATION FORM (DNF)

DNF Control Number	①			**Date**	②		
DETAILS OF SHIPMENT							
For:				***From:***			
③				④			
Signature over Printed Name and Position				*Signature over Printed Name and Position*			
Item Description	**Unit of Measurement**	**Quantity per Cartons**	**Total Quantity for delivery**	**Expiration Date**	**Required Space in CBM/ or in pallet**	**End-user / Program**	**Estimated Date of Arrival**
⑤	⑥	⑦	⑧	⑨	⑩	⑪	⑫
Estimated Total CBM / # of Pallets required	⑬						
Other Remarks	⑭						

Delivery Notification Form Shall be filled up by intended recipient with the following information:

1. DNF Control Number
2. Date DNF was prepared/ filled-up
3. Name & Signature of the Head of Office (Consignor)
4. Name & Signature of the Head of Office (Consignee/ Receiving Office)
5. Item description as indicated in the PO/Contract
6. Unit of Measure as indicated in the PO/Contract
7. Quantity per carton
8. Total Quantity for Delivery
9. Expiration Date
10. Computed volume in CBM or in pallets
11. End-user or Program Owner of commodities for delivery
12. Estimated Date of Arrival
13. If multiple items are in the DNF, compute and indicate the total volume of delivery in CBM or in pal
14. Other remarks as necessary

ANNEX 3

NAME OF OFFICE

ADDRESS

NON-CONFORMANCE REPORT

I. DETAILS OF SUPPLIER / SOURCE	
Supplier / Source:	①
Supplier / Source Address:	②
Email Address:	③
Contact Number:	④
PO / Contract / Document Tracking No.:	⑤
Date of PO / Contract / Document Tracking	⑥

II. TYPE OF NON-CONFORMANCE ⑦

☐ **A. During Request for Delivery**		☐ **B. During Delivery**	
RSD No.:	⑧	RSD No.:	⑬
DNF No./ Pre alert reference:	⑨	DNF No.:	⑭
☐ Incomplete document ⑩		☐ Incorrect Warehouse Location ⑮	
☐ Incorrect document ⑪		☐ Arrived beyond cut-off time ⑯	
☐ Others: _____⑫_____		☐ Incorrect Volume ⑰ Quantity / UOM: _____	
		☐ Incomplete document submitted ⑱	
		☐ Incorrect document submitted ⑲	
		☐ Invalid date of delivery ⑳	
		☐ Incomplete/No samples submitted ㉑	
		☐ With Findings/Discrepancy against PO/Contract ㉒	
		☐ Damaged - Quantity/UOM:____㉓_____	
		☐ Expired - Quantity/UOM:_____㉔____	
		☐ Inappropriate handling during transport ㉕	
		☐ Excess quantity delivered against the approved RSD Quantity / UOM: _____㉖_____	
		☐ Others: _____㉗_____	

III. COMPLETE DESCRIPTION OF ABOVE-SELECTED CELL(S)

㉘

	Prepared By: ㉙	Validated By: ㉚	Acknowledge By: ㉛
Signature:			
Name:			
Designation:			

Non-conformance report shall be filled up by the Store Supervisor with the following information:

1. If commodity for delivery is your own procurement, indicate company name of vendor/supplier. If commodity for delivery is allocated by the upper tier, indicate entity name of consignor (i.e. DOH central or Regions).
2. Company Address of the vendor/supplier/consignor.
3. Email address of the vendor's/supplier's/consignor's representatives.
4. Contact number of the vendor's/supplier's consignor's representatives.
5. Control number indicated in the PO/Contract/ Donation.
6. Date indicated in the PO/Contract/ Donation.
7. Tick "A" box if the nature of non-conformance of the vendor/supplier/consignor is during delivery request scheduling while tick "B" box if the non-conformance of the vendor/supplier/consignor is during the actual delivery in the warehouse.
8. Indicate RSD control number (if the delivery request is from your own procurement).
9. Indicate DNF control number (if the delivery request is from the upper tier: DOH Central/Region).
10. Tick this box if the document(s) relative to the delivery request is incomplete.
11. Tick this box if the document(s) relative to the delivery request is incorrect.
12. Tick this box for other reason(s) in disapproving the delivery. Indicate the reason in the line provided.
13. Indicate RSD control number (if the delivery is from your own procurement).
14. Indicate DNF control number (if the delivery is from the upper tier: DOH Central/Region).
15. Tick this box if the item delivered is not intended for the warehouse.
16. Tick this box if the item delivered arrived beyond the defined cut-off time in the warehouse.
17. Tick this box if the volume of the item delivered is more than the volume (in CBM/Pallet) requested for delivery. Indicate the quantity of items rejected if applicable.
18. Tick this box if the required document(s) for the delivery is incomplete.
19. Tick this box if the required document(s) for the delivery is incorrect.
20. Tick this box if the schedule of delivery for the item is incorrect.
21. Tick this box if the supplier do not provide the right quantity of samples for required FDA test analysis.
22. Tick this box if the item has findings/discrepancy against the PO/Contract upon inspection with the inspection committee.
23. Tick this box if only a portion of the delivery will be rejected due to damage. Indicate the quantity and UOM.
24. Tick this box if only a portion of the delivery will be rejected due to expiry. Indicate the quantity and UOM.
25. Tick this box if the delivered items were handled inappropriately by the 3PL/courier (i.e., not compliant with Good Distribution Practices).
26. Tick this box if there is an excessive quantity delivered against the approved quantity indicated in the RSD. Indicate the quantity and UOM.
27. Tick this box for other reason(s) for rejection that are not indicated above. Site the reason on the provided space.
28. Briefly describe the nature of non-conformance.
29. Indicate the name, signature, designation of personnel who prepared the report.
30. Submit to the supply officer/head of office for validation and signature.
31. Indicate the name, signature, designation of the concerned personnel (3PL/Courier/Supplier/Upper tier).

ANNEX 4

NAME OF OFFICE

ADDRESS

REQUEST FOR INSPECTION (RFI)

RFI Control Number: ① **Date:** ②

Chairperson (Name) ③

Inspection Committee

Department of Health ④

Dear Sir/Madam, ⑤

May we request for the inspection of the approved delivery of Item(s) with the following details:

Item Description	RSD Control No.	Approved Date of Delivery / Inspection	Location of Delivery / Inspection
⑥	⑦	⑧	⑨

Copy of RSD/s and PO/s are attached herewith for your reference. Please coordinate directly with _____⑩_____, Store Manager, for the above mentioned inspection/delivery at ____⑪_____

Thank you.

Very truly yours,

⑫

_____

Request for Inspection shall be filled up by the office clerk with the following information:

1. RFI control number (manual or system generated).
2. Date filled-up/ generated.
3. Name of the Inspection committee chair.
4. Indicate the Entity Name.
5. Indicate the right salutation.
6. List down all item(s) for inspection.
7. Indicate the RSD control number reference for inspection.
8. Indicate the date when the item(s) will be delivered for inspection.
9. Indicate the location of the warehouse where items will be delivered.
10. Indicate the name of the store/warehouse manager.
11. Indicate the contact details of the store/warehouse manager for coordination purposes.
12. Submit to the supply officer/head of office for signature.

ANNEX 5

NAME OF OFFICE

ADDRESS

INSPECTION AND ACCEPTANCE REPORT

ENTITY NAME:	①	FUND CLUSTER:	②
Supplier:	③	IAR NO:	⑭
Address:	④	IAR Date:	⑮
P.O./Contract Number	⑤	Invoice No.:	⑯
P.O./Contract Date	⑥	Invoice Date	⑰
Requisitioning Office / End-user	⑦	D.R. No.:	⑱
Payment Terms:	⑧	D.R. Date:	⑲
Grand Total Quantiy Procured based on PO/Contract:	⑨	Delivery Date/s:	⑳
Grand Total Amount of Procured Quantity:	⑩	Place of Delivery:	㉑
Inspected Quantity:	⑪	Unit of Measure:	㉒
Inspected Total Cost:	⑫	Unit Cost:	㉓
Responsibility Center Code:	⑬	Dimension & Volume of carton/case: ㉔	
		Height____ Width____ Length___ Weight___	

DESCRIPTIONS OF ITEMS PURCHASED ㉕	ITEMS DELIVERED ㉖	
AS PER PURCHASED ORDER	AS PER INSPECTION (ACTUAL PRODUCT)	
	COMPLIANT	NON-COMPLIANT
Item description		
Brand Name / Model *(If applicable)*:		
Packaging:		
Shelf-Life based on PO/Contract:		
Labelling Requirements -Blister pack, Foil strip/ Bottle, Box and Kits:		
Labelling Requirements - corrugated carton:		
Manufacturer (*If indicated*)::		
Other Specifications (please indicate if necessary):		

DESCRIPTION OF FINDINGS / NON-COMPLIANCE:

㉗

BREAKDOWN OF ACTUAL ITEM AND QUANTITY DELIVERED

Number/Type of Delivery: ㉘ ☐ 1st Tranche ☐ 2nd Tranche ☐ 3rd Tranche ☐ 4th Tranche ☐ Others_____

☐ Partial_____ ☐ Complete ☐ Completion_____

Item Description	Lot / Batch no. (If applicable)	Manufacturer	Mfd. Date	Expiry Date	Remaining Shelf life (months) upon delivery	Unit	Quantity
㉙	㉚	㉛	㉜	㉝	㉞	㉟	㊱

Total Quantity and unit delivered: ㊲

Date Inspected: ㊳

Are items inspected subject to FDA Test Analysis?: ㊴ YES ☐ NO ☐

If yes, How many boxes/bottles are taken for FDA Test Analysis?: ㊵

ALL ITEM/S INSPECTED ARE SUBJECT TO FINAL ACCEPTANCE OF END - USER

INSPECTION TEAM ㊶

Print Name and Signature
Position Title_____
End-user / Representative

Print Name and Signature
Position Title_____
Technical Inspection Committee

Print Name and Signature
Position Title_____
Technical Inspection Committee

Print Name and Signature
Position Title_____
Technical Inspection Committee

ACCEPTANCE ㊷

Please encircle if the item/'s delivered are:

Accepted *Date:_____*

Rejected *Date:_____*

*Remarks(if rejected):*_____

㊸
Print Name and Signature
End-user

㊹
Print Name and Signature
Head of Supply Office (Property Custodian)

"IAR shall be filled up by the Inspection Committee with the following information:

1. Entity name (Procuring Entity).
2. The source of the funds used to procure the item for inspection (i.e., GOP, loan, grant, trust fund, etc.).
3. The company name of the supplier as stated in the PO/Contract.
4. The adress of the supplier as stated in the PO/Contract.
5. The PO/Contract number.
6. The PO/Contract Date.
7. The specific end-user (owner of the item - i.e., Health Programs).
8. The payment terms as stated in the PO/Contract/Delivery Documents.
9. The grand total quantity of items procured based on the PO/Contract/Delivery Documents.
10. The grand total amount of items procured based on the PO/Contract/Delivery Documents.
11. The quantity of items inspected on the date of inspection.
12. The amount of items inspected on the date of inspection.
13. The responsibility center code assigned by the accounting unit.
14. The manual/system generated IAR control number.
15. The date that the IAR created.
16. Put the invoice number as indicated in the delivery documents from the supplier. Put N/A if the supplier does not provided the Sales Invoice.
17. Put the date of the invoice number as indicated in the delivery documents from the supplier. Put N/A if the supplier does not provided the Sales Invoice.
18. Put the Delivery Receipt number as indicated in the delivery documents from the supplier.
19. Put the date of the Delivery Receipt as indicated in the delivery documents from the supplier.
20. The delivery date(s) of items.
21. The place of delivery (warehouse name & location).
22. Put the item's unit of measure as indicated in the PO/Contract/Delivery Documents.
23. Put the unit cost of the item as indicated in the PO/Contract/Delivery Documents.
24. Put the dimension of carton/package (height, width, and length) in centimeter and the weight in kilograms for the computation of volume in CBM/Pallet.
25. Put all the specifications indicated in the PO/Contract: Item description; Generic/Brand Names; Model; Packaging; Shelf-life requirement; labelling requirements and manufacturer. You may revise and align these specifications to capture what is indicated in the PO/Contract. Add rows as necessary.
26. Put a check (✓) in the "Compliant" column if the actual item inspected complies with the specification indicated in the PO/Contract, otherwise put a check (✓) in the "Non-compliant" column.
27. Put a brief description of the findings during the inspection.
28. Tick the appropriate box as stated in the PO/Contract and/or delivery documents (1st, 2nd, 3rd, 4th tranches). Indicate partial (if the delivery is only a portion of what is indicated in the PO/Contract), indicate complete (if the delivery constitute all the items and quantity indicated in the PO/Contract), indicate for completion (if there are previous partial deliveries and the one currently delivered is only for completion).
29. Item description as stated in the PO/Contract.
30. The lot/batch number as stated in the delivery document. If there are multiple batches/lots, insert more rows to input all the batches/lots in the delivery.
31. The Manufacturer including its address as stated in the PO/Contract/Delivery Documents.
32. The manufacturing date of the item as indicated in the actual product.
33. The expiration date of the item as indicated in the actual product.
34. Compute the remaining shelf life by counting the remaining months of the product before expiry from the time of delivery.
35. Unit of Measure as indicated in the PO/Contract.
36. Quantity received/inspected per batch/lot.
37. Total quantity delivered/inspected.
38. Date of inspection.
39. Tick the appropriate box. "Yes" if the product requires FDA test analysis; "No" if the product is not subject to FDA test analysis. Coordinate with the FDA, procuring entity and other relevant offices to determine if FDA test analysis is a requirement for the item before distribution.
40. If the item is subject to FDA test analysis, indicate the quantity taken as samples. The samples for FDA test analysis must be on top of the quantity indicated in the PO/Contract.
41. The name, signature and designation of inspection committee representatives/members
42. The end-user or procuring entity must encircle "accepted" if the delivered item conforms with the technical specifications and other requirements indicated in the PO/Contract upon inspection. Otherwise, encircle "rejected" and indicate the corresponding remarks describing the reason(s) for rejection.
43. Printed name and signature of the end-user or procuring entity.
44. Printed name and signature of the the supply officer (property custodian).

ANNEX 6A

BIN CARD		Stock Keeping Unit (SKU) Code:	①
		Location area Code / Rack Number:	②
P.O. / Contract #:	③	**Unit Cost:**	⑨
Supplier:	④	**Batch/ Lot No(s).**	⑩
Item Description:	⑤	**Expiration Date(s)**	⑪
Dosage Form *(If applicable)*	⑥	**End User(s):**	⑫
Dosage Strength *(If applicable)*	⑦		
Unit of Measure:	⑧		

③ **Date**	**Quantity**				⑧ **DR/SI/RIS/ PTR/BL No.**	⑨ **Recipient / Remarks**
	④ **Received**	⑤ **Issued**	⑥ **Balance**	⑦ **Total Cost**		
			0	#VALUE!		

Bin Card shall be filled up by the Store Keeper with the following information:

1. Stock Keeping Unit Code - refer to the latest SKU code developed by the DOH Central Office.
2. Location area code or rack number where the item is located. Develop your own location area code in your warehouse for easier reference. This location area code shall also be reflected in your location map.
3. PO/Contract number for the item.
4. Company name of supplier.
5. Item description as indicated in the PO/Contract.
6. If the item is a pharmaceutical product, indicate the dosage form as stated in the PO/Contract (i.e., tablet, capsule, suspension, syrup, etc.)
7. If the item is a pharmaceutical product, indicate the dosage strength as stated in the PO/Contract (i.e., 250mg ,500mg, 1g, etc.)
8. Unit of measure as indicated in the PO/Contract (i.e., pieces, Blister packs, bottles, box, kits, etc.)
9. Unit cost as indicated in the PO/Contract.
10. Batch/Lot number(s). If there are multiple batches/lots in the bin, ensure to account all of it including its quantities.
11. Expiration date(s). Make sure to account all batches/lots including its expiration dates and quantitties If there are expiration date due to multiple batches/lots, ensure to account all of it including its quantities.
12. End-user (i.e., Health programs).
13. Date of the transaction.
14. Quantity received.
15. Quantity issued.
16. Difference between the quantity received/stock on hand and the quantity issued.
17. Amount of the stock on hand.
18. Corresponding document for the transaction (receive or issuance). Put the Delivery receipt number or Sales Invoice receipt number if the transaction is "receiving" of item from the supplier. Put PTR/BL/RIS number if the transaction is "issuance". PTR/BL/RIS number can also be applicable as "receiving" if the item is an allocation by the upper tier (DOH central or Regional offices).
19. Put other remarks such as the recipient of the item issued or the consignor of the received items.

ANNEX 6B

STOCK CARD		Stock Keeping Unit (SKU) Code:	①
P.O. / Contract #:	②	**Entity Name:**	⑧
Supplier:	③	**Fund Cluster:**	⑨
Item Description:	④	**Unit Cost:**	⑩
Dosage Form *(If applicable)*	⑤	**Mode of Procurement:**	⑪
Dosage Strength *(If applicable)*	⑥		
Unit of Measure:	⑦	**End User(s):**	⑫

③ Date	Quantity				⑧ DR/SI/RIS/ PTR/BL No.	⑨ Recipient / Remarks
	④ Received	⑤ Issued	⑥ Balance	⑦ Total Cost		
			0	#VALUE!		

Stock Card shall be filled up by the Store Supervisor with the following information:

1. Stock Keeping Unit Code - refer to the latest SKU code developed by the DOH Central Office.
2. PO/Contract number for the item.
3. Company name of supplier.
4. Item description as indicated in the PO/Contract.
5. If the item is a pharmaceutical product, indicate the dosage form as stated in the PO/Contract (i.e., tablet, capsule, suspension, syrup, etc.)
6. If the item is a pharmaceutical product, indicate the dosage strength as stated in the PO/Contract (i.e., 250mg, 500mg, 1g, etc.)
7. Unit of measure as indicated in the PO/Contract (i.e., pieces, Blister packs, bottles, box, kits, etc.)
8. Entity Name (procuring entity).
9. The source of the funds used to procure the item (i.e., GOP, loan, grant, trust fund, etc.)..
10. Unit cost as indicated in the PO/Contract.
11. Mode of procurement.
12. End-user (i.e., Health programs).
13. Date of the transaction.
14. Total Quantity received.
15. Total Quantity issued.
16. Difference between the quantity received/stock on hand and the quantity issued.
17. Amount of the stock on hand in the warehouse.
18. Corresponding document for the transaction (receive or issuance). Put the Delivery receipt number or Sales Invoice receipt number if the transaction is "receiving" of item from the supplier. Put PTR/BL/RIS number if the transaction is "issuance". PTR/BL/RIS number can also be applicable as "receiving" if the item is an allocation by the upper tier (DOH central or Regional offices).
19. Put other remarks such as the recipient of the item issued or the consignor of the received items.

NOTE: Stock card holds all information about a single product with different lot numbers / batch numbers, different expiration date and different location inside the warehouse/storeroom under a single Purchase Order/Contract. It is the consolidation of all Bin Cards of a single item placed in different areas inside the warehouse/storeroom.

ANNEX 7

LOCATION MAP

① Location area code: Rack Assignment or Pallet code	② Specific Location	③ Item Description	④ Batch/Lot No.	⑤ Expiration Date	⑥ No. of whole Cartons	⑦ No. of Loose quantity *(Unit of Measure as per P.O)*	⑧ FDA Test Analysis Status	⑨ Shelf Life	⑩ Program
				-1485					

⑪ Ideal Warehouse Pallet Space Capacity:	600 PALLET	⑬ Item Description		TOTAL CBM
		⑭ Purchase Order / Contract		
		⑮ Total Number of Cartons	0	0.00 CBM
		⑯ Number of Loose Cartons (UOM as per P.O.)	0	
		⑰ Quantity per Carton (UOM as per P.O.)		
⑫ Actual Warehouse Pallet Space Utilization:	590 PALLETS	⑱ Total Quantity (UOM as per P.O.)	0	
		⑲ QUANTITY IN STOCK CARD		
		⑳ Dimensions LxWxH (cm)		
		②① Wt./ Carton		
		②② CBM	0	

Fill-up Location Map with the following information:

1.) Rack Assignment (i.e., Rack A)/ Pallet Code (i.e., Pallet A001)
2.) Specific Location in the Rack assginment (E.g: Rack A-Level 1-001) or location of the pallet in the warehouse
3.) Item Description based on the Purchase Order/ Contract
4.) Batch/Lot Nos.
5.) Expiration Date - (Following the example Format ('MM-DD-YYYY)
6.) Quantity of Whole Cartons stacked on that specific location
7.) Quantity loose unit stacked on that specific location (use the unit of measure stated in the Purchase Order/Contract)
8.) FDA Test Analysis Status
   - Passed: for those items which already conform to FDA Test Analysis
   - Waiting: for those items which are still waiting for the result of the FDA Test Analysis
   - Failed: for those items which do not conform to the FDA Test Analysis
   - Not Applicable: for items which do not requre FDA Test Analysis
9.) Remaining Shelf Life of the item
10.) End-user/Program to which the item belongs
11.) Ideal Space Capacity of the Warehouse
12.) Actual Space utilization of the warehouse
13.) Item Description (Should be exactly the same as the item no.3)
14.) Purchase Order / Contract Number
15.) Total number of whole cartons of the item
16.) Total number of loose quantity of the item (use the unit of measure stated in the Purchase Order/Contract)
17.) Quantity of item per carton
18.) Total Quantity of the item (Whole cartons + Loose Cartons)
19.) Quantity stated in the Stock Card (For counterchecking between the actual quantity and quantity in the stock cards, quantity should tally between the actual count and quantity in Stock Card)
20.) Dimension of carton in centimeter
21.) Weight of carton in kilogram
22.) Total Volume in Cubic Meters (CBM) the item stored in the warehouse

ANNEX 8

NAME OF OFFICE

ADDRESS

WAREHOUSE LOCATION

INBOUND SUMMARY REPORT
PERIOD COVERAGE ___①_____

② DATE ARRIVED IN THE WAREHOUSE (DD/MM/YYY)	③ END-USER	④ Procurement / Donation Control Number (PO/Contract, RIS, PTR, BL)	⑤ SOURCE (SUPPLIER/ CONSIGNOR	⑥ SKU CODE	⑦ ITEM DESCRIPTION	⑧ EXPIRATION DATE (DD/MM/YYY)	⑨ QUANTITY RECEIVED	⑩ UNIT OF MEASURE	⑪ UNIT COST (PhP)	⑫ TOTAL AMOUNT (PhP)	⑬ Quantity per carton	⑭ DIMENSION (in cm)			⑮ Wt in kg	⑯ Total No. of CTNS	⑰ CBM
												Height	Width	Length			

Outbound Summary Report shall be filled up by the Store Keeper with the following information:

1. Date coverage of inbound report.
2. Date delivered/arrived at the warehouse.
3. End-user/owner of the commodity. (i.e., Health Programs).
4. Indicate PO/Contract number (if the item is your own procurement); indicate PTR/RIS/BL number(s) if the item is an allocation from the upper tier (DOH Central or Regional Office).
5. Indicate the source - Company name of Supplier, if the item is your own procurement; Consignor if the item is an allocation from the upper tier (DOH Central or Regional Office).
6. SKU code. Please refer to the SKU code list from the DOH Central Office.
7. Item description as indicated in the PO/Contract.
8. Expiration Date of the item.
9. Quantity received.
10. Unit of measure as indicated in the PO/Contract.
11. Unit cost of the item as indicated in the PO/Contract.
12. Total amount of the item received.
13. Quantity unit of measure per carton (i.e., 120 bottles per carton)
14. Dimension of carton/package (height, width, and length) in centimeter.
15. Weight of carton in kilograms.
16. Total number of cartons received.
17. Total Cubic Meter (CBM). CBM is computed by multiplying the total number of cartons to the dimension of carton and dividing the result to 1,000,000 (formula is indicated in the cell).

ANNEX 9

NAME OF OFFICE

ADDRESS

WAREHOUSE LOCATION

OUTBOUND SUMMARY REPORT
PERIOD COVERAGE ___①____

② DATE ARRIVED IN THE WAREHOUSE (DD/MM/YYY)	③ DATE OF DISPATCH (DD/MM/YYY)	④ END-USER	⑤ Procurement / Donation Control Number (PO/Contract, RIS, PTR No.)	⑥ SOURCE (SUPPLIER/ CONSIGNOR	⑦ SKU CODE	⑧ ITEM DESCRIPTION	⑨ EXPIRATION DATE (DD/MM/YYY)	⑩ QUANTITY DISPATCHED	⑪ UNIT OF MEASURE	⑫ UNIT COST (PhP)	⑬ TOTAL AMOUNT (PhP)	⑭ Quantity per carton	⑮ DIMENSION (in cm)			⑯ Wt in kg	⑰ Total No. of CTNS	⑱ CBM	⑲ Shipment Document Tracking Number (Shipment plan No., PTR No., RIS No.)	⑳ Recipient
													Height	Width	Length					

Outbound Summary Report shall be filled up by the Store Keeper with the following information:

1. Date coverage of outbound report.
2. Date of arrival in the warehouse.
3. Date of dispatch from the warehouse. This is important in order to monitor the days past from the date of arrival at the warehouse up to its dispatch.
4. End-user/owner of the commodity. (i.e., Health Programs).
5. Indicate PO/Contract number (if the item is your own procurement); indicate PTR/RIS/BL number(s) if the item is an allocation from the upper tier (DOH Central or Regional Office).
6. Indicate the source - Company name of Supplier, if the item is your own procurement; Consignor if the item is an allocation from the upper tier (DOH Central or Regional Office).
7. SKU code. Please refer to the SKU code list from the DOH Central Office.
8. Item description as indicated in the PO/Contract.
9. Expiration Date of the item.
10. Quantity dispatched
11. Unit of measure as indicated in the PO/Contract.
12. Unit cost of the item as indicated in the PO/Contract.
13. Total amount of the item dispatched.
14. Quantity unit of measure per carton (i.e., 120 bottles per carton)
15. Dimension of cartion in centimeter.
16. Weight of carton in kilograms.
17. Total number of cartons dispatched.
18. Total Cubic Meter (CBM). CBM is computed by multiplying the total number of cartons to the dimension of carton and dividing the result to 1,000,000 (formula is indicated in the cell).
19. Tracking Number of Shipment documents generated by your office (i.e., Shipment plan number or PTR/RIS number).
20. Indicate the recipient as necessary.

ANNEX 10

NAME OF OFFICE

ADDRESS

MONTHLY INVENTORY
PERIOD COVERAGE ____①____

② END-USER	③ Procurement / Donation Control Number	④ SOURCE (SUPPLIER/ CONSIGNOR	⑤ DATE DELIVERED (DD/MM/YYY)	⑥ SKU CODE	⑦ ITEM DESCRIPTION	⑧ EXPIRATION DATE (DD/MM/YYY)	⑨ QUANTITY	⑩ UNIT OF MEASURE	⑪ UNIT COST (PhP)	⑫ TOTAL AMOUNT (PhP)	⑬ Quantity per carton	⑭ DIMENSION (in cm)			⑮ Wt in kg	⑯ Total No. of CTNS	⑰ CBM	⑱ STOCK AGING (in months)	⑲ REMAINING SHELF LIFE (In months)	⑳ REMARKS
												Height	Width	Length						

Monthly Inventory shall be filled up with the following information:

1. Date coverage of inventory report.
2. End-user/owner of the commodity. (i.e., Health Programs).
3. Indicate PO/Contract number (if the item is your own procurement); indicate PTR/RIS/BL number(s) if the item is an allocation from the upper tier (DOH Central or Regional Office).
4. Indicate the source - Company name of Supplier, if the item is your own procurement; Consignor if the item is an allocation from the upper tier (DOH Central or Regional Office).
5. Date delivered/arrived at the warehouse.
6. SKU code. Please refer to the SKU code list from the DOH Central Office.
7. Item description as indicated in the PO/Contract.
8. Expiration Date of the item per batch.
9. Quantity (Stock on Hand).
10. Unit of measure as indicated in the PO/Contract.
11. Unit cost of the item as indicated in the PO/Contract.
12. Total amount of the stock on gand.
13. Quantity unit of measure per carton (i.e., 120 bottles per carton)
14. Dimension of cartion in centimeter.
15. Weight of carton in kilograms.
16. Total number of cartons on hand.
17. Total Cubic Meter (CBM). CBM is computed by multiplying the total number of cartons to the dimension of carton and dividing the result to 1,000,000 (formula is indicated in the cell).
18. Number of months that the item is residing in the warehouse (Stock aging in months).
19. Remaining months before the expiry of the item.
20. Indicate other remarks as necessary.

ANNEX 11

NAME OF OFFICE

ADDRESS

NOTICE OF DELIVERY (NOD)

NOD Control Number	①			**Date Prepared**	②		
To:				***From:***			
③				④			
Signature over Printed Name and Position ***Resident COA Auditor***				*Signature over Printed Name and Position*			
I. DETAILS OF DELIVERY							
Item Description:	**Source (Supplier)**	**Delivery Date**	**DR / SI No.**	**Date of DR / SI**	**PO / Contract No.**	**Date of PO / Contract**	**Amount (PHP)**
⑤	⑥	⑦	⑧	⑨	⑩	⑪	⑫
II. ATTACHMENTS ⑬							
Sales Invoice: ☐		**Delivery Receipt:** ☐		**Purchase Order / Contract:** ☐			
Others: ☐		**Place of Delivery**					
Prepared by: ⑭				Checked by: ⑮			
Signature over Printed Name and Position				Signature over Printed Name and Position			

NOD shall be filled up by the Office Clerk with the following information:

1. NOD control number generated manually or via warehouse management system.
2. Date the NOD was prepared.
3. Name and position of resident COA auditor in your office.
4. Name and position of Head of Office (Director). Endorse for signature.
5. Item description as indicated in the PO/Contract.
6. Company Name of Supplier.
7. Date of delivery.
8. Delivery Receipt or Sales Invoice Number.
9. Issue date indicated in the Delivery Receipt or Sales Invoice.
10. PO/Contract No.
11. Date of PO/Contracat.
12. Amount in Peso of the item received.
13. Tick the boxes appropriately. Make sure to indicate the place of delivery (warehouse name and location) and attach delivery documents (Sales invoce, delivery receipt, PO/Contract).
14. Name and signature of office clerk who prepared the NOD.
15. Name and signature of Store Manager or Supply Officer who checked the documents.

ANNEX 12

Product Identification Label

Location Area Code:	①		
PO/Contract No: ②	**PTR/ No.** ③	**SI No.:** ④	**DR No./ Stock Transfer No.:** ⑤
Complete Item Description:	⑥		
Date Received:	⑦		
End-User/ Program:	⑧		
Batch/Lot Nos.:		**Quantity:**	**Expiry Date:**
⑨		⑩	⑪
Inspection Date:	⑫		

Note: Do not leave a blank space. Put N/A in those portion(s) that is/are not applicable.

Fill-up <u>Product Identification Label</u> wi th the following information:

1. Location area code or rack number where the item is located. Develop your own location area code in your warehouse for easier reference. This location area code shall also be reflected in your location map.
2. Indicate Purchase Order/ Contract number.
3. Indicate PTR number if the item is from the allocation of the upper tier (DOH central or regional office).
4. Sales Invoice (SI) Number (If applicable).
5. Delivery Receipt (DR) Number or Stock Transfer Number (If applicable).
6. Complete item description based on the Purchase Order/ Contract/ PTR.
7. Receiving date of the item.
8. End-user/Program.
9. Batch/Lot No. of item per pallet. If there are multiple batches/lots per pallet, add rows and indicate all the batches/lots on the pallet.
10. Quantity per batch/lot (Use the Unit of Measure as stated in the PO/Contract). Indicate if there are loose cartons and state the quantity as well.
11. Expiration Date(s) of the item. If there are multiple batches/lots per pallet, specify the expiry date per batch/lot
12. Date the item was inspected.

ANNEX 13

FDA Status Identification Label

(COLOR CODE: GREEN)

GOOD STOCKS **PASSED THE FDA TEST ANALYSIS**
Ready for Dispatch
Verified by: *(Name & Signature of Warehouse Manager)*
Date Verified:

(COLOR CODE: ORANGE/YELLOW)

QUARANTINE **(Waiting For FDA Test Result and/or Acceptance from the End-user)**
DO NOT RELEASE!

(COLOR CODE: RED)

BAD STOCKS ☐ **FAILED THE FDA TEST ANALYSIS** ☐ **DAMAGED / CONTAMINATED** ☐ **EXPIRED**
FOR PULL-OUT & REPLACEMENT
Verified by: *(Name & Signature of Warehouse Manager)*
Date Verified:

ANNEX 14

NAME OF OFFICE

ADDRESS

CORRECTIVE REQUISITION ON WAREHOUSE OPERATIONS

No: ①

I. WAREHOUSE OPERATIONS SCOPE ②	
☐ A. Warehouse Exterior	☐ G. Warehouse Equipment
☐ B. Warehouse Interior	☐ H. Warehouse Housekeeping
☐ C. Warehouse Layout	☐ I. Waste Management
☐ D. Good Storage Practices	☐ J. Distribution and Transport
☐ E. Warehouse Processes and Forms	☐ K. Safety and Security
☐ F. Warehouse Signage and Label	☐ L. Others: _____ (office supplies, etc.)

II. SPECIFICS OF THE ABOVE-SELECTED CELL(S) ③
**narrative*

RECOMMENDATION / REQUEST ④	STATUS ⑤		
	Target Date Fulfilled	Actual Date Fulfilled	Reasons for delay (if any)

	⑥ **Prepared By:**	⑦ **Validated by:**	⑧ **Recieved by:**
Signature:			
Name:			
Designation:			
Date:			

Fill-up Corrective Requisition on Warehouse Operations with the following information:

1. Control Number indicated for the Corrective Requisition on Warehouse Operations.
2. Tick the appropriate box in which scope of warehouse operations the request is being made based on the Quality Checklist.
3. Narrate comprehensive details of the issue(s) and request(s) on the selected scope:

    a. Warehouse Exterior examples:
        i. Wall/s integrity – No. of holes and whereabouts of leaks for repair.
        ii. Drainage Status – Specify the whereabouts of standing water and impaired drainage for troubleshooting.
        iii. Lightings – No. of additional lights needed or units for replacement.
        iv. Vehicle access space – Specify needed space for smooth receiving, dispatch and parking of vehicles.
        v. Others that may be appropriate with warehouse exterior concerns.

    b. Warehouse Interior examples:
        i. Wall/ Roof/ Ceiling integrity – No. of holes and whereabouts of leaks for repair.
        ii. Floor integrity – No. and whereabouts of cracks and uneven floor portion for repair.
        iii. Ventilation – Specify sufficient number of fans and air-conditioners needed to facilitate proper ventilation inside the warehouse/ storeroom(s).
        iv. Fans and Air-conditioners – No. of Fans (Stand fan, wall fan, Exhaust fan) and Air-conditioning units needed to be repaired and/or replaced
        v. Lightings – No. of additional lights needed or units for replacement.
        vi. Others that may be appropriate with warehouse interior concerns.

    c. Warehouse Layout examples:
        i. Segregation of Areas – Specify the space needed and other requirements for the following areas: Receiving, Quarantine, Storage, Staging, Releasing and Damaged areas to promote smooth workflow and orderliness inside the storeroom/warehouse.
        ii. Others that may be appropriate with warehouse layout concerns.

    d. Good Storage Practices (GSP) examples:
        i. Sealing and labeling of items – No. of needed packing tape, paper and marker for labeling, Cling/Plastic wrap for each pallet.
        ii. Thermohygrometers – No. of units for repair, replacement, or re-calibration for balanced monitoring of temperature and relative humidity within the warehouse and storerooms.
        iii. Pallets – No. of damaged pallets for replacement and additional units if necessary.
        iv. Space between pallets and proper stacking – specify the space needed to free-up to promote GSP prior accepting additional commodities.
        v. Others that may be appropriate with GSP concerns.

    e. Warehouse Processes and Forms
        i. FEFO/FIFO – specify the space needed to free-up the space and maintain FEFO and FIFO principles.
        ii. Others that may be appropriate with warehouse processes and forms concerns.

    f. Warehouse Signage and Label – Specify additional signage and label needed to be posted in conspicuous areas for information and part of precautionary measures.

    g. Warehouse Equipment
        i. Ladders / Trolleys / Jack lifts / Forklift – Specify if additional units are necessary and request for replacement if units are already not working properly.
        ii. Others that may be appropriate with warehouse equipment concerns.

h. Warehouse Housekeeping
   i. Cleaning Materials – Gather all needed materials for housekeeping from utility staffs and ensure sufficient stocks in a monthly basis.
   ii. Rodent Traps – Request if necessary.
   iii. Pest Control Measures – Maintain regular visit of service provider(s) to ensure pest-free environment within the warehouse.
   iv. Others that may be appropriate with warehouse housekeeping concerns.

i. Waste Management
   i. Trash Bins – Ensure sufficient No. of trash receptacles (inside and outside the warehouse/store) to promote proper segregation of wastes.
   ii. Unserviceable items and hazardous wastes – Ensure to request proper disposal of unserviceable items and hazardous wastes (Batteries, broken lamps, etc.) according to appropriate guidelines.
   iii. Others that may be appropriate with waste management concerns.

j. Distribution and Transport – Refer to TOR/Contract with Third Party Logistics if necessary.

k. Safety and Security
   i. Doors/Windows Integrity – Specify the type and quantity of lock needed to be replaced. Request additional units if needed. Consider installation of security bars if necessary.
   ii. Protective Personal Equipment (PPE) – Specify needed protective gears and quantity for personnel and visitors such as: Apron, Warehouse hand gloves, Protective Shoes, Hard Hat and Reflective Vests. Request additional if necessary. Ensure that PPEs are always worn by staff during warehouse operations.
   iii. Cabinet for PPE – If not yet available, request for PPE Cabinet and maintain accordingly.
   iv. First Aide Box – Maintain availability of First Aide Box with sufficient content at all times.
   v. Fire Extinguishers – No. of units for maintenance, and No. of additional units if necessary. Ensure one (1) Fire extinguisher is placed each rack in the warehouse.
   vi. Others that may be appropriate with safety and security concerns.

4. State your recommendations and requests.
5. Monitor the progress of your request until fulfilled.
6. Signature over printed name, date prepared and designation of requestor (Store Manager).
7. Signature over printed name, date validated and designation (Supply Officer).
8. Signature over printed name, date received and designation (Head of Office).

* ***NOTE: Take corresponding photos and related documents as attachment for each request (if applicable)***

ANNEX 15

NAME OF OFFICE

ADDRESS

MONTHLY WAREHOUSE INSPECTION REPORT AND RECOMMENDATION

Covered Period: _____

Date Prepared: _____

1. Human Resource					
#	**Human Resource**	**Yes**	**No**	**Initial Action Taken**	**Corrective Action / Recommendation**
1	Are there enough human resources based on the size of the warehouse/storage facility and volume of items being managed? •Store Manager •Cold Chain Manager (only if there is cold storage) •Store/Cold Chain supervisor •Store Keeper/ Inventory specialist •Encoders/ Office Clerk •Forklift operator •Store helpers •Utility staff •Security Personnel				
2	Are staff properly trained according to their designation and responsibilities?				
2. Data Management					

#	Data Management	Yes	No	Initial Action Taken	Corrective Action / Recommendation
3	Is the internet connection available and reliable?				
4	Are computers/laptops/printers and other data management hardwares available, sufficient and functioning?				
5	Is the information system (warehouse management system or cold chain management system) working properly and updated regularly?				
3. Premises					
#	**3.1 Warehouse Infrastructure**	**Yes**	**No**	**Initial Action Taken**	**Corrective Action / Recommendation**
6	Are ceilings in good condition with absence of holes and leaks?				
7	Is floor surface in good condition and allows easy cleaning?				
8	Are walls in good condition with no cracks or evidence of leaks?				
9	Is the drainage system working properly with no standing water?				
10	Are all access to electric current safe and complete?				
11	Are there clear access to loading and unloading docks?				
12	Are restrooms and sinks available with clean water for staff use?				
13	Are fire exits and stairs available and easily identified?				
#	**3.2 Warehouse Layout**	**Yes**	**No**	**Initial Action Taken**	**Corrective Action / Recommendation**
14	Is there an office area(s) for staff which is/are equiped with sufficient space, lighting, and office work tools and equipment?				
15	Is there an assigned Quarantine area in the warehouse?				

16	Are there well-marked areas assigned for specific activities (receiving, dispatch, picking and packing) which should be overlapping and are followed?				
17	Is there a well-marked area or separate room for storing materials, equipment and tools.				
18	Are there areas for empty cartons, pallet storage?				
19	Does the layout of the warehouse (loading and unloading dock, warehouse entrance, storage area and receiving area) facilitate efficient workflow?				
20	Is there an identified and secured zone for expired/damaged products?				
21	Is there a proper area to prepare the distributions (working space/picking and packing)?				
4. Tools and Equipment					
#	**Tools and equipment**	**Yes**	**No**	**Initial Action Taken**	**Corrective Action / Recommendation**
22	Are lights sufficient and functioning?				
23	Are there available shelves and racks which are sufficient and in good condition to store products?				
24	Are there available, sufficient and functional Jacklifts, Trolleys and Forklifts with safety cage?				
25	Are there available ladders whenever needed?				
26	Are Equipment that regulate temperature and humidity (E.g.: Air-conditioning units, Supply Fans, Exhaust Fans) available to maintain allowable storage conditions for stored items?				
27	Are there sufficient numbers of Thermo-hygrometer units inside the warehouse / storeroom at all times?				
28	Are warehouse equipment subjected to regular maintenance?				

5. Good Storage Practices					
#	**5.1 Product Identification & Segregation**	**Yes**	**No**	**Initial Action Taken**	**Corrective Action / Recommendation**
29	Are commodities properly and efficiently segregated? Are quarantined and damaged products segregated from good stocks?				
30	Do products/stacks per pallet or location have their corresponding product identification label which are readable, accurate and complete? (Bin Card or Inventory Label Form)				
31	Are FEFO / FIFO respected at all times? (Batches/Lot which are first expiring/received in front or threshold of other batches with later expiry or later receiving date to promote ease in workflow and dispatch)?				
32	Are products requiring FDA Test Analysis are properly affixed with readable, updated and complete FDA Status Label per pallet?				
33	Are hazardous items segregated from non-hazardous items?				
34	Is there a segregation between medical and non medical products (to avoid cross contamination with chlorine, cleaning detergent etc.)?				
#	**5.2 Temperature Relative humidity Monitoring**	**Yes**	**No**	**Initial Action Taken**	**Corrective Action / Recommendation**
35	Are products stored based on its temperature requirement?				
36	are temperature and relative humidity recorded at least twice daily?				
37	Are the temperature and relative humidity consistently within the specified and allowable range?				
38	Are Calibration certificates accessible per Thermo-hygrometer units?				
39	Are products protected from direct sunlight?				

#	5.3 Product Stacking and Monitoring	Yes	No	Initial Action Taken	Corrective Action / Recommendation
40	Are cartons/ boxes properly sealed and stacked on shelves, pallets? (no reversed stacking of carton and no cartons/boxes on the floor)				
41	Are liquid products and heavy items placed on lower shelves or bottom of stacks?				
42	Are fragile items stacked no more than 1.5 feet?				
43	Do stack on pallets fit in the standard rack beams?				
44	Are pallet stacks placed at least 30 cm away from walls and other stacks? (for areas without racks)				
#	**5.4 Housekeeping**	**Yes**	**No**	**Initial Action Taken**	**Corrective Action / Recommendation**
45	Are cleaning materials available at all times?				
46	Are there available waste/dust bins with proper segregation?				
47	Are hygiene rules observed (no smoking, no eating inside the warehouse/storerooms)?				
48	Are Receiving, Quarantine, Staging, Storage, Releasing, Rejected areas clean?				
49	Is the cleaning log available and filled-up by utility personnel?				
50	Are there pest control procedures?				
51	Are contact details of office/agency responsible for Pest Control easily accessible in case of urgent need and for regular scheduling?				
6. Safety Essentials					
#	**Safety Essentials**	**Yes**	**No**	**Initial Action Taken**	**Corrective Action / Recommendation**
52	Are the ares of the warehouse and office free from potential occupational hazards?				

53	Are there available and sufficient Personal Protective Equipment provided to staff and visitors?				
54	Are signages and floor markings inside the warehouse/ storeroom complete and visible to guide staff and visitors?				
55	Are first aid kits available and easily accessible for staff/visitors as needed?				
56	Are there fire extinguishers available?				
57	Are the fire extinguishers sufficient based on the number of racks, rooms and the entirety of the warehouse?				
58	Are there smoke detectors or fire alarms in the warehouse?				
59	Do fire extinguishers or fire sprinklers undergo maintenance and checking on a regular basis?				
60	Is contact details of service fire-fighting units or departments accessible and available whenever needed?				

7. Security

#	Security	Yes	No	Initial Action Taken	Corrective Action / Recommendation
61	Are precautionary and security measures available and practiced consistently?				
62	Are pad locks deadbolt locks installed in the warehouse? (specially to areas where high-value items and items with high risk of abuse are located)				
63	Are CCTVs working in good condition and sufficient enough in number to cover monitoring of all areas in the warehouse?				
64	Is the point of entry to the location of controlled products secured and limited to the Manager and one other senior staff member only?				
65	Is there a list of authorized persons in the warehouse?				
66	Are logbooks always available and accessible to be filled up by the authorized personnel whenever access to the secured area/room is made?				

8. Documentation					
#	**Documentation**	**Yes**	**No**	**Initial Action Taken**	**Corrective Action / Recommendation**
67	Are SOPs available where required?				
68	Are location map accurate and updated?				
69	Are Bin Cards and Stock cards available and updated?				
70	Are Stock cards kept in an organized manner?				
71	Dor stock card tracks reconciliations of losses and adjustments with appropriate signatures?				
72	Are Inbound and outbound summary reports updated, complete and accessible?				
73	Are manual tally sheets corresponding to all receipt of items complete and filed properly?				
74	Are gate passes corresponding to all dispatch complete and filed properly?				
75	Is the monthly Inventory updated?				
76	Are FDA test result database and Thermohygrometers Profile Calibration Plan Database updated and filed properly?				
77	Are receiving copies of shipping documents (PTR/BL/RIS) complete and filed properly?				
78	Are copies of Incident Reports filed properly?				
79	Are signed copies of approved RSD complete and filed properly with other delivery documents?				
80	Are copies of Notice of Deliveries complete and filed properly?				
81	Are signed copies of Inspection and Acceptance Report complete and filed properly?				
82	Are signed copies of Non-conformance report complete and filed properly?				
83	Does the warehouse maintain records of incidents or near miss picked up during pharmaceuticals movement process?				

ANNEX 16

NAME OF OFFICE

ADDRESS

INCIDENT REPORT

No: ①

Incident Type:	②	**Date/Time of Incident:**	③
Location:	④		

Specifics:	⑤
Persons Involved:	⑥
Chronology of Events: *Please attach evidences (Pictures, Documents, etc.)*	⑦
Follow-up Action(s):	⑧
Witness(es) & Designation (if any)**:**	⑨
Contact Details:	⑩

	Prepared By: ⑪	**Submitted To:** ⑫
Signature:		
Name:		
Designation:		
Date:		

Fill-up Incident Report (IR) with the following information:

1. IR Control Number.
2. Incident Type:
   i. Expired Items
   ii. Injury
   iii. Missing Items
   iv. Property/Item Damage
   v. Security Breach
   vi. Trespassing
   vii. Others (please specify)

3. Date coverage of the incident and/or date the incident was discovered.
4. Location and address where the incident happened.
5. Specifics:
   i. If The type of incident is "Expired Items" – Indicate all information pertaining the item such as the following but not limited to:
      a. Purchase Order/ Contract No.;
      b. Item Description;
      c. Dosage Form & Dosage Strength (If applicable);
      d. Expiry Date(s);
      e. Quantity expired

   ii. If The type of incident is "Injury" – Indicate all information pertaining the nature of injury such as the following but not limited to:
      a. Name(s) of injured personnel;
      b. Affected part(s) of the body;
      c. Consciousness status (indicate if the person is found conscious or not);
      d. Other important information necessary for investigation

   iii. If The type of incident is "Missing Items" – Indicate all information pertaining the item such as the following but not limited to:
      a. Purchase Order/ Contract No. (if applicable);
      b. Item Name/Description;
      c. Dosage Form & Dosage Strength (for pharmaceuticals);
      d. Expiry Date (for pharmaceuticals);
      e. Model (for equipment);
      f. Serial Number (for equipment, furniture, etc.);
      g. Quantity missing;
      h. Other important information necessary for investigation

   iv. If The type of incident is "Property Damage"– Indicate all information pertaining the item or equipment such as the following but not limited to:
      a. Purchase Order/ Contract No. (if applicable);
      b. Item Name/Description;
      c. Dosage Form & Dosage Strength (for pharmaceuticals);
      d. Expiry Date (for pharmaceuticals);
      e. Model (for equipment);
      f. Serial Number (for equipment, furniture, etc.);
      g. Quantity damaged;
      h. Other important information necessary for investigation

   v. If The type of incident is "Security Breach"– Indicate all information pertaining the nature of unauthorized access and affected areas in the operations such as the following but not limited to:
      a. Name of stolen Data, applications, services, devices or network;
      b. Worth (if applicable)
      c. Other important information necessary for investigation

vi. If The type of incident is "Trespassing" – Indicate all information pertaining the nature of unauthorized access and affected areas in the operations such as the following but not limited to:
    a. Name of unauthorized person trespassed;
    b. Reason for trespassing;
    c. Result of trespassing;
    d. Other important information necessary for investigation

6. Specify all person(s) involved and/or present during the incident or during the discovery of the issue.
7. Narrate the chronology of events including date and time of transition.
8. Indicate initial actions made and appropriate follow-ups to address the issue partly/fully.
9. Full name and designation of witness(es).
10. Contact details of witness(es).
11. Signature over printed name and designation of the person making the incident report.
12. Signature over printed name and designation of the person whom the incident report is submitted.

ANNEX 17

_____
NAME OF OFFICE

_____
ADDRESS

PULL-OUT REQUEST FOR REPLACEMENT

No. __①___

Date_____②_____

_____③_____
_____④_____
_____⑤_____

Sir / Madam,

Please be informed that item(s) and corresponding batch/lot described herein failed the Test Analysis conducted by the FDA. In line with this, we are requesting your good office to pull-out the item(s) specified below **not later than five (5) days** upon receipt of this letter:

Purchase Order / Contract No.:____⑥_____ **Total Quantity and UOM** ____⑩____
Item Description: _____⑦_____ **Location:** _____⑪____
Dosage Form/Strength: _____⑧_____
Batch/Lot Nos: _____⑨_____

Please coordinate directly with _____⑫_____, Store Manager, for the pull-out schedule of the abovementioned commodity at _____⑬_____. Attached is the copy of Test Analysis Result (*Annex A*) for your information and reference. Moreover, as agreed upon in the Purchase Order/Contract that pulled-out items due to failed FDA test analysis shall be replaced with appropriate new stocks the soonest possible time.

Thank you very much.

Very truly yours,

____⑭____

Fill-up Pull-out Request for replacement with the following information:

1. Pull-out Request Control Number.
2. Date of Pull-out request.
3. Full Name of the addressee.
4. Designation/Position of the addressee.
5. Company and Address of the addressee.
6. Purchase Order and/or Contract Number.
7. Complete Item Description based on the Purchase Order and/or Contract.
8. Complete Dosage Strength and Dosage Form of the Item(s).
9. List of batch/lot numbers which failed the test analysis.
10. Total Quantity and Unit of Measure to be pulled-out (i.e., 1,000 bottles).
11. Location where item(s) are currently stored.
12. Full Name of Warehouse Manager and/or his/her representative as contact person for the pull-out.
13. Contact Details of Warehouse Manager and/or his/her representative.
14. Signature over printed name of the addressor (Supply Officer).

(NOTE: Attach to the letter the FDA Test Result copy for ready reference of the Supplier)

ANNEX 18-A

Temperature Monitoring Chart (Room Temperature)

① WAREHOUSE:_____										② Month & Year:_____								③ Brand:_____						④ Model/Serial No._____							
⑤ *Days*																															
		AM /PM		*AM /PM*		*AM /PM*		*AM /PM*		*AM /PM*		*AM /PM*		*AM /PM*		*AM /PM*		*AM / PM*		*AM / PM*		*AM / PM*		*AM /PM*		*AM /PM*		*AM /PM*		*AM /PM*	
⑥ *DEGREE CELSIUS*	10																														
	11																														
	12																														
	13																														
	14																														
	15																														
	16																														
	17																														
	18																														
	19																														
	20																														
	21																														
	22																														
	23																														
	24																														
	25																														
	26																														
	27																														
	28																														
	29																														
	30																														
	31																														
	32																														
	33																														
	34																														
	35																														
⑦ *Other Readings*																															
⑧ *Time*																															
⑨ *Signature of Recorder*																															

CHECKED AND VALIDATED BY:

Signature over printed name & Position

NOTE: Shaded cells indicate the desired Temperature Range. Cross the days not in use.

ANNEX 18-B

Temperature Monitoring Chart (Cold Temperature)

① WAREHOUSE:_____										② Month & Year:_____								③ Brand:_____						④ Model/Serial No._____							
⑤ *Days*																															
		AM /PM		*AM / PM*		*AM /PM*		*AM /PM*		*AM /PM*		*AM /PM*		*AM /PM*		*AM /PM*		*AM / PM*		*AM / PM*		*AM / PM*		*AM /PM*		*AM /PM*		*AM /PM*		*AM /PM*	
⑥ *DEGREE CELSIUS*	-5																														
	-4																														
	-3																														
	-2																														
	-1																														
	0																														
	1																														
	2																														
	3																														
	4																														
	5																														
	6																														
	7																														
	8																														
	9																														
	10																														
	11																														
	12																														
	13																														
	14																														
	15																														
⑦ *Other Readings*																															
⑧ *Time*																															
⑨ *Signature of Recorder*																															

CHECKED AND VALIDATED BY:

Signature over printed name & Position

NOTE: Shaded cells indicate the desired Temperature Range. Cross the days not in use.

ANNEX 18-C

Temperature Monitoring Chart (Cool Temperature)

① WAREHOUSE:_____		② Month & Year:_____		③ Brand:_____		④ Model/Serial No._____	
⑤ *Days*							
⑥ *DEGREE CELSIUS*		*AM /PM*	*AM / PM*	*AM /PM*	*AM /PM*	*AM /PM*	*AM /PM*
	2						
	3						
	4						
	5						
	6						
	7						
	8						
	9						
	10						
	11						
	12						
	13						
	14						
	15						
	16						
	17						
	18						
	19						
	20						
⑦ *Other Readings*							
⑧ *Time*							
⑨ *Signature of Recorder*							

CHECKED AND VALIDATED BY:

Signature over printed name & Position

NOTE: Shaded cells indicate the desired Temperature Range. Cross the days not in use.

ANNEX 18-D

Temperature Monitoring Chart (Freezing Temperature)

① WAREHOUSE:_____		② Month & Year:_____		③ Brand:_____		④ Model/Serial No._____	
⑤ *Days*							
		AM /PM	*AM /PM*	*AM /PM*	*AM /PM*	*AM /PM*	*AM /PM*
⑥ *DEGREE CELSIUS*	-25						
	-24						
	-23						
	-22						
	-21						
	-20						
	-19						
	-18						
	-17						
	-16						
	-15						
	-14						
	-13						
	-12						
	-11						
	-10						
⑦ *Other Readings*							
⑧ *Time*							
⑨ *Signature of Recorder*							

NOTE: Shaded cells indicate the desired Temperature Range. Cross the days not in use.

CHECKED AND VALIDATED BY:

Signature over printed name & Position

ANNEX 18-E

Relative Humidity Monitoring Chart

① WAREHOUSE:_____		② Month & Year:_____		③ Brand:_____		④ Model/Serial No._____	
⑤ *Days*							
	AM /PM	*AM /PM*	*AM /PM*	*AM /PM*	*AM /PM*	*AM / PM*	*AM /PM*
⑥ *PERCENTAGE*	0						
	5						
	10						
	15						
	20						
	25						
	30						
	35						
	40						
	45						
	50						
	55						
	60						
	65						
	70						
	75						
	80						
	85						
	90						
	95						
	100						
⑦ *Other Readings*							
⑧ *Time*							
⑨ *Signature of Recorder*							

CHECKED AND VALIDATED BY:

Signature over printed name & Position

NOTE: Shaded cells indicate the desired relative humidity range. Cross the days not in use.

Fill-up Temperature and Relative Humidity Monitoring Chart with the following information:

1. Name of Warehouse.
2. Month and Year coverage of the monitoring.
3. Brand of Thermohygrometer unit (If applicable).
4. Model and Serial Number of Thermohygrometer unit.
5. Days of monitoring.
6. Plot the readings in Temperature and/or Relative Humidity based on the Thermohygrometer unit using dots and lines to come up with a graph:
   a. Put blue dot on the line corresponding the readings if it is within the specified range (within the green color range).
   b. Put red dot on the line corresponding the readings if it is not within the specified range (outside the green color range).
7. Indicate the readings based the Thermohygrometer unit if in case, it is beyond the specified measurement on the graph/table.
8. Time the recording took place.
9. Signature of the recorder.

NOTE: Strictly monitor temperature and humidity at least twice daily (one in the morning and one in the afternoon).

ANNEX 19

_____
NAME OF OFFICE

_____
ADDRESS

THERMOHYGROMETERS PROFILE DATABASE

Year ____①_____

② BRAND	③ UNIT MODEL	④ SERIAL NUMBER	⑤ DATE CALIBRATED BASED ON THE CERTIFICATE	⑥ RE-CALIBRATION DATE BASED ON THE CERTIFICATE	⑦ RE-CALIBRATION PLAN	⑧ LOCATIONAREA INSIDE THE WAREHOUSE

Prepared by:

_____⑨_____

Validated by:

_____⑩_____

Received by:

_____①①_____

Fill-up Thermohygrometers Profile Database with the following information:

1. Year coverage of the database.
2. Indicate the brand of the unit (if there is any).
3. Indicate unit model (if there is any).
4. Indicate serial number
5. Date calibrated based on the Calibration Certificate.
6. Re-calibration date as recommended on the Calibration Certificate.
7. Determine the schedule of re-calibration based on your assessment, ensure to provide schedule two (2) months or earlier prior the suggested re-calibration date
8. Specific area where thermohygrometers are placed inside the warehouse/storeroom.
9. Signature over printed name, date prepared and designation (Store Manager).
10. Signature over printed name, date validated and designation (Supply Officer).
11. Signature over printed name, date received and designation (Head of Office).

* ***NOTE: This profile database should be monitored and updated yearly or as frequent as required.***

ANNEX 20

NAME OF OFFICE

ADDRESS

Pick List
No.:___①____

② SKU Code	③ Purchase Order	④ Rack Assignment	⑤ Specific Location	⑥ Item Description	⑦ Batch/Lot No.	⑧ Expiration Date	⑨ No. of whole Cartons	⑩ No. of Loose Quantity	⑪ FDA Test Analysis Status	⑫ End-User/ Program	⑬ Reference Control Number

Prepared by:

⑭
SIGNATURE OVER PRINTED NAME
POSITION

Picked/Packed by:

⑮
SIGNATURE OVER PRINTED NAME
POSITION

Fill-up Pick List with the following information:

1. Pick List No.
2. Stock Keeping Unit or Item Code
3. Purchase Order/Contract No.
4. Rack Assignment or Designation (E.g: Rack A).
5. Specific Location in the Rack assginment (E.g: Rack A-Level 1-001).
6. Item Description based on the Purchase Order/ Contract.
7. Batch/Lot Nos.
8. Expiration Date - (Following the example Format MM-DD-YYYY).
9. Quantity of Whole Cartons stacked on that specific location.
10. Quantity loose unit stacked on that specific location (use the unit of measure stated in the Purchase Order/Contract).
11. FDA Test Analysis Status:
    - Passed: for those items which already conform to FDA Test Analysis
    - Waiting: for those items which are still waiting for the result of the FDA Test Analysis
    - Failed: for those items which do not conform to the FDA Test Analysis
    - Not Applicable: for items which do not requre FDA Test Analysis
12. End-user/Program to which the item belongs.
13. Reference Control Number, if applicable (i.e., allocation control number or shipment/distribution plan control number or request control number).
14. Signature over printed name and position of personnel who generated the pick list.
15. Signature over printed name and position of personnel leading the picking and packing of items.

ANNEX 21

PROPERTY TRANSFER REPORT

Entity Name: ①	**Fund Cluster:** ②
From: ③	**PTR No.:** ④
To: ⑤	**Date Prepared:**

Transfer Type: (check only one) ⑥

☐ Donation ☐ Relocate

☐ Reassignment ☑ Others (Specify) **ALLOCATION**

Issuing Facility's Action									**Receiving Facility's Action**	
⑦ #	⑧ Date Acquired	⑨ Purchase Order / Contract No.	⑩ Complete Item Description	⑪ Batch/Lot No.	⑫ Expiration Date	⑬ Quantity and Unit	⑭ Unit Cost	⑮ Amount	⑯ Quantity Received	⑰ Remarks and/or Reason for rejection *(if applicable)*
							TOTAL			

Reason for Transfer: ⑱

GOODS ARE CHECKED, DELIVERED AND ACCEPTED IN GOOD CONDITION EXCEPT ITEMS SPECIFIED IN THE ABOVE REMARKS (if any)

APPROVED BY: ⑲
Name: _____
Position: _____
Signature: _____
Date: _____

RELEASED/ISSUED BY: ⑳
Name: _____
Position: _____
Signature: _____
Date: _____

DELIVERED BY: ㉑
Name: _____
Position: _____
Signature: _____
Date: _____

RECEIVED/ACKNOWLEDGED BY: ㉒
Name: _____
Position: _____
Signature: _____
Date: _____

Fill-up Property Transfer Report with the following information:

1. Entity name (Procuring Entity).
2. The source of the funds used to procure the item (i.e., GOP, loan, grant, trust fund, etc.).
3. Issuing Facility.
4. PTR Control Number including date prepared.
5. Receiving Facility, including the exact address.
6. Indicate the type of transaction by ticking the appropriate box (i.e., allocation).
7. Line item.
8. Date when item was acquired.
9. Purchase Order / Contract Number.
10. Complete Item description based on PO/Contract.
11. Batch/Lot No(s). If there are multiple batches/lots, insert more rows to input all the batches/lots in the shipment.
12. Expiration Date per batch/lot.
13. Unit and Quantity Allocated based on the official allocation list and/or shipment plan.
14. Unit Cost per item based on the PO/Contract.
15. Amount of item in Peso.
16. Actual Quantity received by the receiving facility (Recipient's Action).
17. Include a remark (Recipient's Action) if necessary:
    a. If the item description and quantity in the PTR and other shipping documents deviates from the actual item delivered.
    b. If there are damaged items, indicate the quantity and nature of damage.
    c. If the item is subject to rejection, specify the reason.
18. Reason for Transfer (i.e., allocation).
19. Name, Signature of Authorized Personnel (Supply Officer) and date approved.
20. Name, Signature of Authorized Personnel (Store Manager/ Store Supervisor) and date issued.
21. Name, Signature of Authorized Representative (Official Courier) and date delivered.
22. Name, Signature of Authorized Personnel and date received.

ANNEX 22

BILL OF LADING (BL)

_____①_____
_____②_____

Carrier: _____③_____

YOU ARE HEREBY AUTHORIZED to receive, carry and deliver the following-described merchandise _____④_____ in accordance with the authorized and prescribed rates and classifications and according to the law of common carriers in force on the date hereof. Settlement and payment charges to be made by herein indicated Programs.

_____⑤_____

(Shipper)

RECEIVED the following-described merchandise in apparent good order and condition, save as noted (contents and condition of contents of sealed packages unknown) for transportation and delivery in accordance with above.

Date at _____⑥_____, Philippines, _____⑦_____, 2018

⑧ Quantity	⑨ UOM	⑩ CONTENTS (Should be listed in detail)	①① VALUE	①② ACTUAL WEIGHT (kg)	①③ VOLUME	①④ PROGRAM
		DIMENSION OF EACH CASE: ①⑤				
		VIA: ①⑥				
		PTR CONTROL NUMBER: ①⑦				
RECEIVED the above-described merchandise apparently in same conditions when shipped, save as noted below						

Fill-up Bill of Lading (BL) with the following information:

1. BL Control Number.
2. Date when BL was made/prepared.
3. Name of freight forwarder (3PL).
4. Name of warehouse or delivery place.
5. Signature over Printed Name of Consignor (Head of Office).
6. Address of Receiving Facility/Office.
7. Date when BL and items were received.
8. Quantity for delivery.
9. Unit of Measure.
10. Complete Item Description which should include the generic & brand name, dose, dosage form, net content (as applicable).
11. Total Value of item in Peso.
12. Actual Weight in Kg of items.
13. Volume in terms of CBM.
14. End-user (Health program).
15. Dimension (Height in cm x Weight in cm x Length in cm) of each case/package/carton.
16. Type of Distribution (Air Freight / Land Freight/ Sea Freight).
17. PTR Control Number in which BL is attached and based upon.

ANNEX 23

REQUISITION AND ISSUE SLIP
DEPARTMENT OF HEALTH

Entity Name: ①						**Fund Cluster:**④					
Office: ②						**Responsibility Center Code:**⑤					
Division:③						**RIS Control No.** ⑥		**Date Prepared:** ⑦			
Requisition						**Stocks Available?**		**Issuance**			
SKU Code	**Item Description**	**Unit**	**Batch/ Lot No.**	**Expiration Date**	**Quantity requested**	**Yes**	**No**	**Quantity Issued**	**Unit Cost**	**Total Amount**	**Remarks**
⑧	⑨	⑩	①①	①②	①③	①④		①⑤	①⑥	①⑦	①⑧
Purpose:①⑨											

	Requested By②⓪	**Approved By:**②①	**Issued By:**②②	**Received By:**②③
Signature:				
Printed Name:				
Office & Designation:				
Date:				

Fill-up Request Issuance Slip (RIS) with the following information:

1. Entity Name of issuing facility.
2. Division Name of issuing facility.
3. Office Name of issuing facility.
4. The source of the funds used to procure the item for inspection (i.e., GOP, loan, grant, trust fund, etc.).
5. The responsibility center code assigned by the accounting unit.
6. RIS Control Number.
7. Date when RIS was prepared.
8. SKU code. Please refer to the SKU code list from the DOH Central Office.
9. Complete Item Description as indicated in the PO/Contract.
10. Unit of Measure.
11. Batch/Lot Number.
12. Expiration Date.
13. Quantity requested.
14. Stock Availability.
15. Quantity issued.
16. Unit Cost.
17. Total amount per item.
18. Other Remarks/instruction.
19. Purpose of request and/or issuance.
20. Signature over printed name, Office and designation including date signed of requesting party.
21. Signature over printed name, Office and designation including date signed of Approving authority (i.e., Health Program Manager)
22. Signature over printed name, Office and designation including date signed of issuing party (i.e., Store Manager).
23. Signature over printed name, Office and designation including date signed of recipient.

ANNEX 24

NAME OF OFFICE

ADDRESS

GATE PASS

No. ①

DATE : ②

This is to authorize ③ of ④ to pull-out Commodity(ies) as listed below:

ITEM DETAILS:						
⑤ SHIPPING DOCUMENT CONTROL NUMBER (PTR / RIS Control No.)	⑥ COMPLETE ITEM DESCRIPTION (Indicate Dosage Form and Dosage Strength if applicable)	⑦ BATCH/ LOT/ Serial Nos. and/or Model	⑧ QTY	⑨ UNIT	⑩ PROGRAM	①① PURPOSE
ITEM(s) IS/ARE CHECKED AND ACCEPTED IN GOOD CONDITION AND IN EXACT QUANTITY AS INDICATED ABOVE						
VEHICLE / COURIER DETAILS:						
Plate Number: ①②		Driver: ①③			Vehicle Type: ①④	

Approved by: ①⑤

Checked by: ①⑥

Received by: ①⑦

Fill-up Gate Pass with the following information:

1. Gate Pass Control Number.
2. Date of Transaction.
3. Name of the person who will pick up/receive the item.
4. Company Name of the receiving personnel.
5. PTR / BL and/or RIS Control Number.
6. Complete Item description based on the Purchase Order / Contract.
7. Batch/ Lot No. (if medicine, device or food) Serial No. and/or Model (if equipment) of item to be released.
8. Quantity to be released.
9. Unit of measure based on the PO/Contract/Shipping document.
10. Program or End-user.
11. Purpose of pull-out (i.e., allocation; stock transfer; for pull-out by supplier, for disposal, etc.)
12. Plate Number of the vehicle.
13. Complete Name of the Driver.
14. Type of Vehicle Used.
15. Signature over printed name of Authorized Personnel who approved the transaction (Store Manager).
16. Signature over printed name of Authorized Personnel who checked the transaction (Next in-rank of the authorized personnel who signed the approval portion).
17. Signature over printed name of the receiving personnel.

NOTE: If multiple trucks/vehicles are involved, prepare separate Gate Pass for each vehicle containing released item(s). Take official ID of the Recipient of item(s) as attachment on the Gate Pass for filing

ANNEX 25

MANUAL TALLY SHEET

Delivery Information	
Vehicle Type: ①	Delivery Receipt No.: ⑤
Plate No: ②	Sales Invoice No.: ⑥
Date of Delivery: ③	RSD No. / DNF No.: ⑦
Time Started: ④	Time Ended: ⑧
Item Information	
Item Description: ⑨	PO/Contract No. (if procured): ⑩
	PTR/BL/RIS No. (if allocated): ⑪

Packaging Information						
Primary	**Secondary**	**Tertiary**	**Quaternary** (*if in package or kits*)	**UOM based on PO/Contract**	**Quantity per Case/Carton**	**Quantity of Case/carton per pallet**
⑫	⑬	⑭	⑮	⑯	⑰	⑱
Actual DIMENSION of Tertiary / Quaternary Packaging in Centimeter						Weight in Kilograms
Height = ⑲		Width = ⑳		Length = ㉑		㉒

Tally of Actual Quantity Delivered			
Batch/Lot No. per item	**Expiration Date**	**Number of Pallets using (indicate loose cases/carton)**	**Remarks** *(Indicate if there are damaged item)*
㉓	㉔	㉕	㉖

Delivered / Acknowledged by:

_____㉗_____

Received by:

_____㉘_____

Manual Tally Sheet shall be filled up by warehouse staff with the following information:

1. Vehicle Type (i.e: van, truck, etc.).
2. Plate No.
3. Date of Delivery.
4. Time when off-loading of item from the vehicle started.
5. Delivery Receipt No. (if the item is from your own procurement)
6. Sales Invoice No. (if the item is from your own procurement)
7. If the item is from your own procurement, indicate RSD No. If the item is from the allocation of the upper tier (DOH central/regional office), indicate the DNF No.
8. Time when off-loading of item from the vehicle ended.
9. Item description – as indicated in the delivery document (PO/Contract/ Deed of donation).
10. PO/Contract/Donation No. – For deliveries that came from suppliers through procurement or donation, indicate the document tracking number for tracking purposes.
11. PTR/BL/RIS No. – For deliveries that came from the allocation of DOH central or Regional office, indicate the PTR/BL document tracking numbers for tracking purposes.
12. Primary packaging – material that is in direct contact with the product (i.e: foil, sachet, bottle, etc.).
13. Secondary packaging – material that covers the primary packaging of the product (i.e: box, etc.).
14. Tertiary packaging – material that covers the secondary packaging of the product (i.e: carton, case, kits, etc.).
15. Quaternary packaging – material that covers the tertiary packaging of the product (i.e: carton in cases where there is a kit as tertiary packaging).
16. Unit of Measure based on PO/Contract (i.e: tablet, capsule, bottle, kits, etc.).
17. Quantity of Unit of Measure per carton.
18. Quantity of case/carton per pallet.
19. Height of carton in centimeter.
20. Width of carton in centimeter.
21. Length of carton in centimeter.
22. Weight of carton in Kilograms.
23. Batch/lot No.
24. Expiry Date per batch/lot no.
25. Number of pallets containing the same specific batch/lot no.
26. Put remarks as necessary.
27. Name of delivery personnel.
28. Name of receiving personnel at the warehouse.

NOTE: Indicate N/A if the data field is not applicable

ANNEX 26

FDA RESULT STATUS DATABASE

① P.O / Contract No.	② Supplier	③ Generic Name & (Brand Name)	④ Dosage Strength	⑤ Dosage Form	⑥ Batch/Lot No.	⑦ Expiration Date	⑧ Reference Tracking No.	⑨ Sample Submission Date	⑩ Result Issuance Date	①① Result	①② Processing days from the day of submission to Result issuance

Fill-up FDA Result Status Database with the following information:

1. PO / Contract Number.
2. Name of Supplier.
3. Generic and Brand Name(s) based on the actual product.
4. Dosage Strength.
5. Dosage Form.
6. Batch/Lot Nos.
7. Expiration Date.
8. Reference Tracking Number or Document Tracking Number (from FDA).
9. Date when samples were submitted.
10. Date when the Test Analysis Result was issued by the FDA.
11. Remarks – Indicate status as: Passed, Failed or Waiting based on the Test Analysis Result.
12. Number of waiting days before the issuance of Test Analysis (Part of Monitoring Timeliness).

ANNEX 27

REQUEST FOR ANALYSIS

NOTES:

1. This Request for Analysis (RFA) must be correctly and completely filled-out in an A4 size paper, signed by an authorized person, and submitted to the Laboratory. This form shall be used only when requesting for laboratory analysis of a product. All request for verification of a product shall be addressed to the concerned Center.
2. The Laboratory may, after review of the RFA, request for more information from the requesting party if necessary.
3. The Laboratory reserves the right to not agree to perform any testing service. Thus, please do not send any sample to the Laboratory until it has confirmed acceptance of your request for testing.
4. A Laboratory Number will be assigned by the Laboratory to each sample when the RFA is accepted. This number shall be referred to in all subsequent communications.
5. Samples submitted for testing must be properly packed and clearly labeled. The Laboratory may reject any sample which is not properly packed or clearly labeled for analysis.

Date:

Product Category:

Product Source:

Region (Requesting Party):

Product Code: (for Laboratory use only) **Others**

DOCUMENT TRACKING NUMBER	
LABORATORY NUMBER	

1. PRODUCT INFORMATION *(Please fill-out all applicable fields)*

1.1 Product Name *(Please include Generic Name for pharmaceutical products):*	
1.2 Brand Name:	
1.3 Dosage Strength/Label Claim/Amount of Active or Substance:	1.4 Dosage Form/Category or Type:
1.5 Batch Number:	1.6 Lot Number:
1.7 Date of Manufacture:	1.8 Expiration Date/ Best Before Date:
1.9 FDA Registration Number/ Notification Number:	1.10 Number of Submitted Samples:
1.11 Packaging Type: *(Please use drop down menu)*	1.12 Container Condition: *(Please use drop down menu)*
1.13a Manufacturer's Name:	
1.13b Manufacturer's Address:	
1.14a Distributor's/Wholesaler's Name:	
1.14b Distributor's/Wholesaler's Address:	
1.15a Importer's Name:	
1.15b Importer's Address:	
1.16a Trader's Name:	
1.16b Trader's Address:	
1.17a Others (Packed by; Packed for; Marketed by; Marketed for; Repacked by; Repacked for):	
1.17b Address (Company/Organization under 1.17a):	
1.18 Purpose of Collection *(Standard Development; COA requirement; Safety and Quality Monitoring; Request from Center/Laboratory due to:) Please use drop down menu:*	

2. ANALYSIS REQUESTED *(Please refer to FDA Circular Number 2014-014)*

2.1 Analysis Requested

3. PRODUCT SOURCE

3.1 Name of Establishment	
3.2 Address	
3.3a Date Product was Bought/Collected	3.3b Collection Receipt No.
3.4a Collecting Officer *(Printed Name/ Designation/ Agency or Center)*	3.4b Signature
3.5 Sampling Plan	
3.6a Environmental Condition during Sampling *(explain all necessary condition: storage, abnormalities, etc.; use separate sheet if necessary)*	
3.6b Temperature °C *(Degree Celsius)*	3.6c RH *(Relative Humidity)*

4. REQUESTING PARTY

4.1a Requested By:	Signature over Printed Name	4.1a Noted By:	Signature over Printed Name
4.1b Designation:		4.1b Designation:	
4.1c Agency/Organization:			
4.1d Address:			
4.1e Telephone Number:			

This RFA (Version No. 7) is extended until 30 September 2019 and for use of DOH-LMD and RFO-NCR only.

GUIDE IN FILLING-OUT REQUEST FOR ANALYSIS FORM

1. **Date:** Indicate the Date of Application
2. For **Product Category, Product Source** and **Region:** Choose from the drop-down list the correct information regarding the sample product being submitted for laboratory analysis. **Product Code:** is for CSL use only.

3. On **1. PRODUCT INFORMATION:**
   - **1.1** Indicate the product name of the sample
   - **1.2** Indicate the brand name of the product using title case format. *(NOTE: if you cannot determine whether it is the Brand Name of the Product then just write the complete Product Name in 1.1)*
   - **1.3** Indicate the dosage strength/label claim/amount of active or substance
   - **1.4** For Cosmetic products, this would mean Product type. Please Refer to **FDA Circular 2014-014: Minimum Required Quantity of Sample Units for Testing** under sample type.
   - **1.5, 1.6, 1.7, 1.8, 1.9** Information can be obtained from the label of the sample product. For batch and lot numbers, please indicate information reflected on both primary and secondary packaging.
   - **1.10** Refers to the number of sample submitted (Please Refer to **FDA Circular 2014-014: Minimum Required Quantity of Sample Units for Testing** for the required number of sample needed for the specific analysis.)
   - **1.11, 1.12** Choose accordingly from the drop down list provided. *(NOTE: If in case the desired information is not listed, click OTHERS and describe the type of packaging /or container condition on the space provided below)*
   - **1.13a, 1.13b, 1.14a, 1.14b, 1.15a, 1.15b, 1.16a, 1.16b, 1.17a, 1.17b** Information can be obtained from the label of the sample product
   - **1.18** Indicate whether it is Post-Marketing Surveillance (PMS), Investigation, Collection resulting from advisory, suspected counterfeit, collected from products with previous issues/problems, referrals from other Centers/ Division, etc. Please use drop down menu for the appropriate purpose of collection.
4. On **2. ANALYSIS REQUESTED**
   - **2.1** Refer to **FDA Circular 2014-014: Minimum Required Quantity of Sample Units for Testing**

5. On **3. PRODUCT SOURCE**
   - **3.1** Indicate the name of establishment where the sample was bought/collected
   - **3.2** Indicate the complete address of the product source
   - **3.3** Indicate actual date when the sample was bought/collected
   - **3.4a** Indicate the complete name/designation/office of the officer who collected the sample. *(NOTE: for product complaint, write the full name of the complainant and affix signature.)*
   - **3.4b** Affix signature if applicable.
   - **3.5** Indicate whether it is from the Center's detailed work procedure or taken from QSP (single random sampling, acceptance sampling by attributes)
   - **3.6** Indicate temperature on **3.6b** and relative humidity on **3.6c**
6. On **4. REQUESTING PARTY**
   - **4.1, 4.2** Fill out accordingly. On **Noted by**: Indicate the full name of the immediate supervisor of the requesting party. Please provide mobile number in the absence of a landline number.

A. Warehouse Safety Essentials

A.1 Safety Protective Equipment - Warehouse can be a hazardous place to work if the right precautions are not taken into consideration. Therefore, Personnel and Visitors shall be provided with Personal Protective Equipment (PPE) during operations and/or while navigating inside the warehouse / storerooms to reduce risks of sustaining possible injuries from: Moving vehicles (Forklift / Jacklift); Falling Heavy Items; Hazardous Materials; Electrical Equipment; Long Periods of loud noise; Dust or other particles.

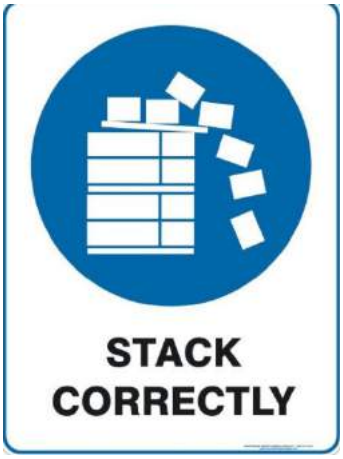
Figure 1: Warehouse Safety Protective Equipment Checklist

A.2 Warehouse Signage – One of the most important aspects of proper warehouse management is the implementation of warehouse signs and labels to promote both safety to personnel and orderliness to warehouse operations. Warehouse signs and labels are recommended but not limited to the following:

Sample Signage / Label	Description
	This label shall remind warehouse staff and visitors to properly wear a complete set of personal protective equipment (PPE) as precaution to avoid possible risks and hazards inside the site.
	This label shall guide visitors not to enter designated areas in the warehouse / office for confidentiality, safety and/or security purposes.
	This label shall guide both employees and visitors not to enter designated areas in the warehouse / office for confidentiality, safety and/or security purposes.

Sample Signage / Label	Description
	This label shall guide warehouse staff on the maximum weight capacity of racks, pallets and/ or specific area(s) inside the warehouse to prevent overweight storage that could damage equipment and the facility.
	In cases of emergency related to physical injury, there should be an area inside the warehouse/ storeroom where first aid kit is located and accessible with proper labeling and with complete set of necessary medicines and devices.
	This label shall guide warehouse staff and visitors that smoking, eating and drinking are strictly prohibited to designated areas inside the warehouses/ storeroom.
	This label shall remind warehouse staff and utility to maintain cleanliness and orderliness inside the warehouse/ storeroom.
	This label shall remind warehouse staff to ensure that parking area for Forklift are made accessible with sufficient space for maneuvering.

Sample Signage / Label	Description
	This label shall give warning to both warehouse staff and visitors to slow down and be cautious on approaching warehouse vehicles, jacklift and trolleys.
	This label shall remind warehouse staff to ensure that storage area for pallets are made accessible with sufficient space as necessary.
	This label shall remind warehouse staff and visitors not to climb rack beams and to use Forklift Safety Cage whenever there's a need to see, put and get items from racks on the higher level or racking system.

Sample Signage / Label	Description
	This label shall remind warehouse staff and visitors that all areas inside the warehouse are properly monitored
	This label shall remind warehouse staff to facilitate proper stacking and palletizing to prevent falling of items that can damage products and could harm personnel.
	This shall guide warehouse staff and visitors on items which are isolated physically while waiting for acceptance, rejection and/or reprocessing prior transferring to either storage area or releasing area.
	This shall remind warehouse staff and visitors to not enter areas with hazardous risks without proper training, orientation and approval from the management

Sample Signage / Label	Description
 Floor Markings	Warehouse Floor Markings shall offer opportunities to promote orderliness in placing stacks in the warehouse/ storerooms as well as to improve safety for warehouse staff and visitors through visual communications and guidance.

Figure 2: Warehouse Signage and Markings

A.3 First Aid – Keep a well-stocked first aid kit for employees or visitors. Place the kit in a central location that is easily accessible to all employees. Ensure it is clearly marked and that all employees know its location and contents. First aid training to selected employees must also be facilitated.

A.4 Fire Prevention – To prevent damage of products from fire, install a sprinkler system, if possible. Keep standard fire extinguishers available in every storage facility, following national regulations. Display fire precaution signs in appropriate places in the storage facility, especially locations where there are flammable items stored.

A.4.1 Dry chemical extinguishers have an extinguishing agent, such as potassium bicarbonate— similar to baking soda— and use a compressed gas as a propellant. They are effective for multiple types of fire, including combustible solids, like wood or paper; combustible liquids, like gasoline or grease; and electrical fires.

A.4.2 Water extinguishers have water and compressed gas; use them only on ordinary combustibles, such as paper and wood. Never use water on fires caused by liquids—such as gasoline or kerosene—or electrical fires.

A.4.3 Carbon dioxide (CO2) extinguishers are most effective for fires caused by liquids—such as gasoline or kerosene—and electrical fires; but not on fires caused by combustibles— paper, cardboard, or lumber. The gas disperses quickly and does not leave harmful residue.

A.4.4 Halon extinguishers are often used in areas with computer equipment or other machinery because they leave no residue. They can be used on common combustibles, flammable liquids, and electrical fires. However, halon is dangerous to inhale and harmful to the environment. They are most effective in confined spaces but remember that the area must be ventilated before it can be occupied again.

B. Warehouse Layout

Warehouses must be designed to facilitate easy flow of commodities from receiving to releasing processes. One-way flow of commodities is recommended to minimize disruption of stock movement in the warehouse. Figures below shows an ideal lay-out to be considered for the new warehouses to be built. As the receiving area is opposite of the dispatch area, it will be easy to implement a unidirectional flow of commodities as well as reduction in mix-ups. In addition, the warehouse has defined operational areas that clearly demarcate space for receiving, dispatch, pick and pack, quarantine and item handling equipment storage. The overall building dimensions should be the same as, or have the capacity for, the specific equipment and other space needed for the required warehouse operations.

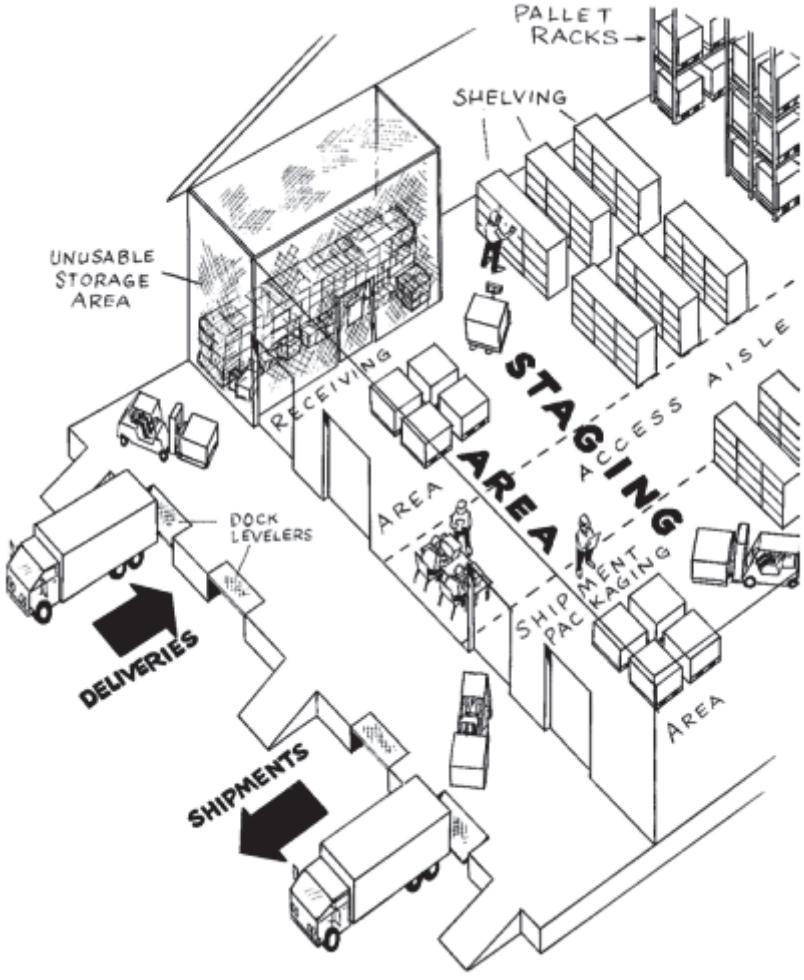


Figure 3: Warehouse Layout

Photo Source:
Guidelines for Warehousing Health Commodities.
Arlington, Va.: USAID | DELIVER PROJECT, Task Order 4. Second edition

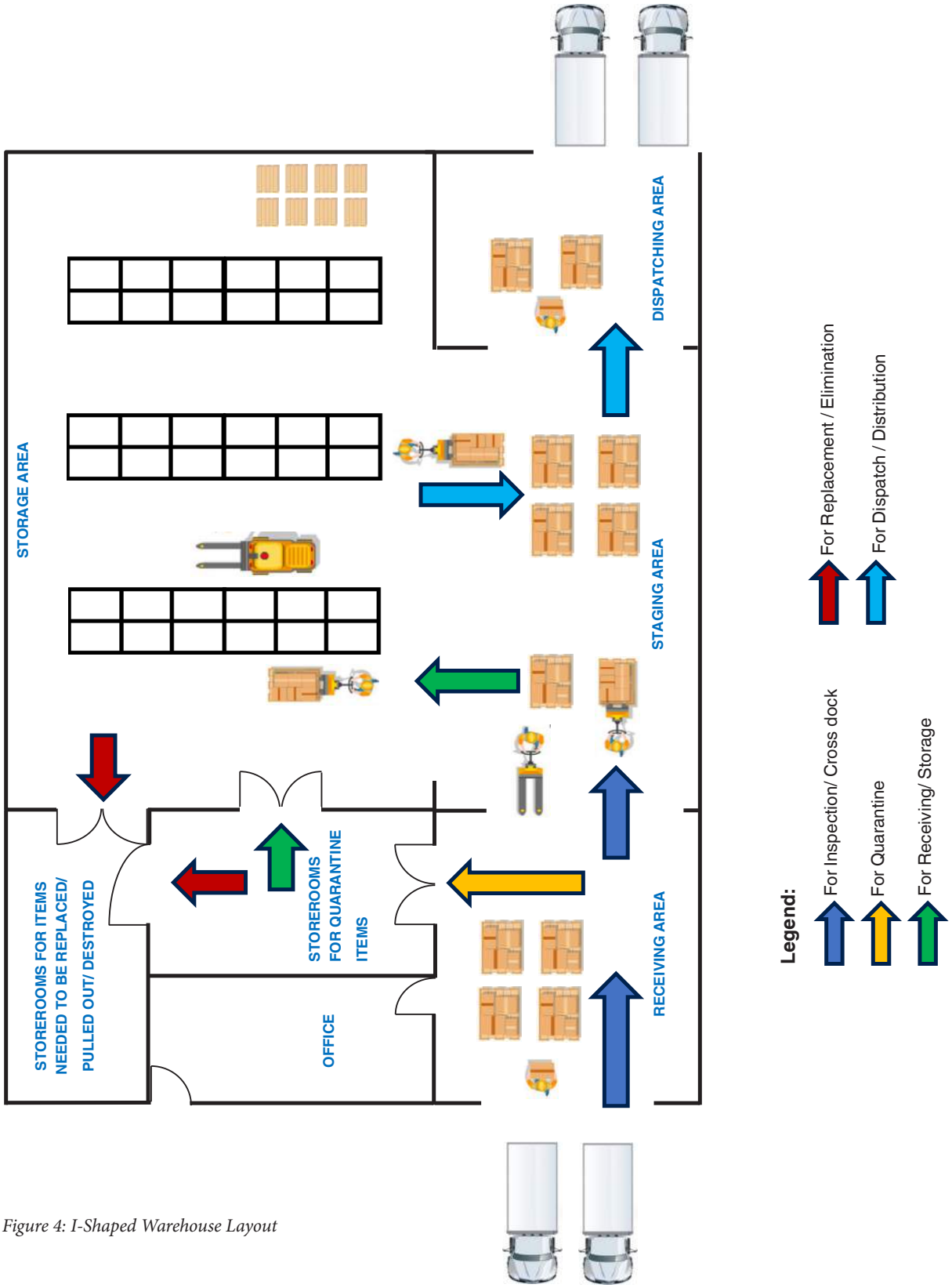


Figure 4: I-Shaped Warehouse Layout

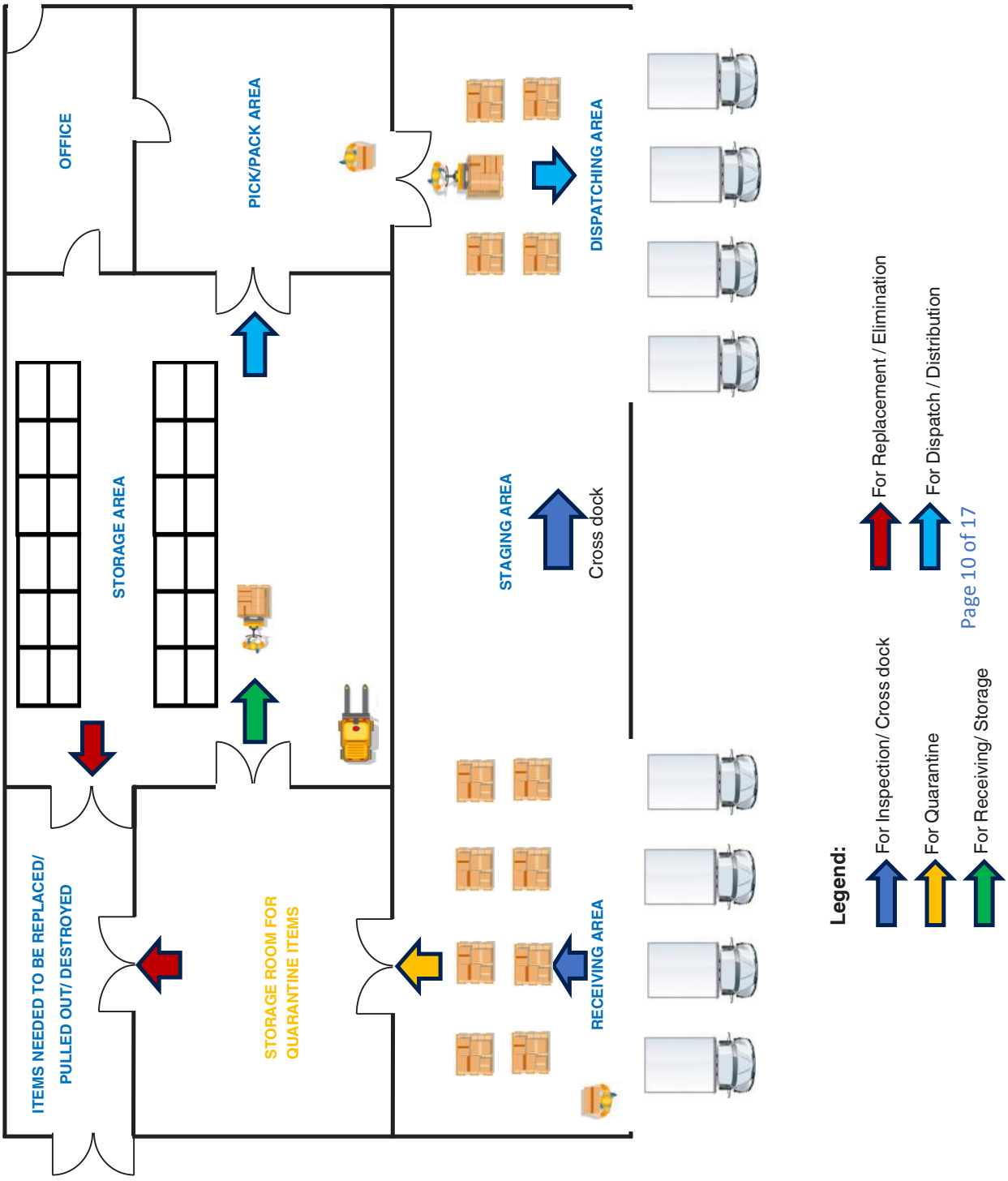


Figure 5: U-Shaped Warehouse Layout

C. Warehouse Premises

C.1 Roof and Ceiling – Consider the slope of the roof and the placement of roof support columns, and their impact on height clearances for rack configuration and other warehouse operations. For optimal use of space and protection from heat, you may consider the following:

C.1.1 The best choice is a building without an internal ceiling.

C.1.2 Avoid using non-insulated galvanized steel metal sheeting for the roofing because it will get very hot. If unavoidable, create as much airflow as possible by using ventilation fans and tiered roof sections.

C.1.3 Insulated roofing panels are highly recommended; for example, galvanized steel sheeting with a polyurethane insulation, which is available in 40 millimeter (mm)–100 mm widths; for the best performance, it should have a reflective powder-coated white paint or light gray. This is more efficient than an internal ceiling because it blocks the heat before it can enter any part of the building.

C.2 Drainage – Build the warehouse on a raised foundation to allow rainwater to drain away from the store. If possible, locate the warehouse on higher ground that is not prone to flooding or drainage problems.

C.3 Doors – Plan the dimensions of the doors to ensure they are wide enough to allow for the free and easy movement of product and handling equipment. Ensure doors are strong and reinforced for adequate security. Fit them with two strong locks and install metal grills for extra protection.

C.4 Window – Place windows high and wide enough for adequate ventilation. The height of the windows should ensure that shelves will not block them; install wire mesh and grating to keep out insects and to deter burglars.

C.5 Floor – warehouse floors must meet stress and strength requirements; otherwise, they may fail because of pressure from loaded racks. If warehouse floors do not meet stress specifications, damage can also result from day-to-day material handling traffic (forklift and others). Some key requirements to review include:

C.5.1 floor surface, including surface material, depth of material, sub-surface material, etc.

C.5.2 door openings, including surface material around loading/unloading dock doors, warehouse exit doors, etc.

C.5.3 loading dock and vehicle tailgate heights

C.5.4 building column locations

C.6 Lighting – Florescent lighting emits ultraviolet rays and incandescent bulbs emit heat, which can harm certain products. To reduce either florescent or incandescent bulb lighting, plan the storeroom with as much natural light—indirect sunlight—during the day, as possible. At the same time, ensure that the products themselves are not in direct sunlight.

C.7 Power – if the main source of electricity is not reliable, install a solar panel generator or alternative supply of electricity for cold rooms and refrigerators. If the generator is not solar powered, maintain a stock of fuel to run the generator for at least a few days.

D. Warehouse Tools & Equipment

D.1 Racking System – Racks are used to increase vertical space in order to store bulk products and increase productivity in the warehouse. Racking system shall promote safety to commodities, warehouse staff and visitors by ensuring that high-quality materials are used in its installation. Space between Racks shall complement sufficient space for maneuvering of vehicle (E.g. Forklift) within the warehouse based on the total space capacity.

Figure 6: Racking System

D.2 Shelving – Shelves are used to store less bulk products on vertical space which also promote organized stacking of commodities. Shelves can be installed in stockrooms where storing, picking, and packing of small volumes of items take place.

Figure 7: Shelves

D.3 Pallet – is a flat structure where bulk quantities of commodity are placed to promote efficient storage and transportation using forklift and other jacking equipment. Palletization provides a convenient way of handling goods in the warehouse by promoting faster unloading, loading and turnaround time for accepting deliveries. Further, proper palletization reduces the risk of product damage and related worker injuries.

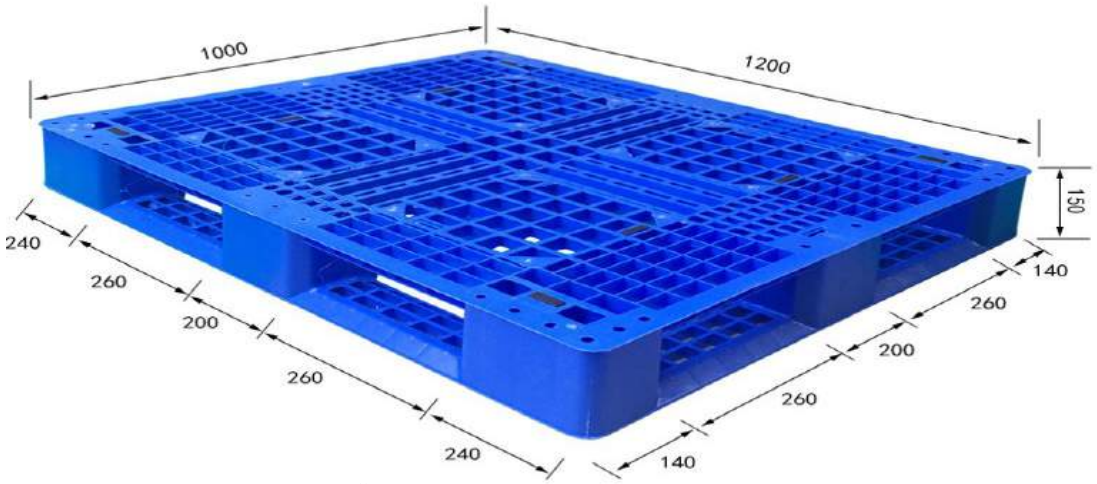


Figure 8: Pallet

D.4 Trolley, Jacklift & Forklift – Trolley, Pallet Jack and Forklift are equipment that allow ease of movement of stacks and other materials across the warehouse. These equipment must be functional and available in the daily operations of the warehouse. Correct type and specifications shall thoroughly be considered prior procurement based on: Types of Storage System; Warehouse Space; and Volume (in kg) of stacks to be mobilized.

Figure 9: Trolley, Pallet Jack and Forklift

D.5 Forklift Safety Cage or Forklift Access Platform is necessary for warehouses with high ceilings and racks where products are stored. It provides safe work platform to lift staff performing occasional or short duration tasks *(e.g., physical count, inspection of items stored on higher level racks)*

Figure 10: Forklift Access Platform

D.6 Rolling Safety Ladder – allow individuals to safely access high shelves and collections of items.

Figure 11: Rolling Safety Ladder

D.7 Temperature and humidity Regulation – Equipment that regulates temperature and humidity *(E.g.: Air-conditioning units, Supply Fans, Exhaust Fans)* must be available to maintain allowable storage conditions for stored items. Temperature and Relative Humidity reading devices must equally be in place for balanced monitoring of storage condition. Mechanism for regular recording of temperature and relative humidity must be in place (i.e., logbook or warehouse management system for monitoring and recording of temperature and relative humidity at least twice daily)

D.8 Special Storage:

D.8.1 Cold Storage: If the warehouse already has stand-alone or walk-in refrigerators or cold rooms, or if cold storage will be installed, ensure the following: a) Regular maintenance of cold chain equipment; b) Install solar panels to either power the cold storage full time or as a supplement when the main electric source is down. If solar panels are not available, make sure a diesel or gas generator with adequate capacity can sustain the refrigerators/cold rooms; c) Consider relocating refrigerators/ cold rooms to auxiliary rooms off the main warehouse, this will remove the heat from the larger storage area and allow for better material handling flow in the main warehouse. For more details on cold chain processes, please refer to the latest Cold Chain Management Guidelines from the DOH.

D.8.2 Flammable Storage: Some flammable liquids commonly found in public health warehousing include acetone, anesthetic ether, alcohols (before dilution), and kerosene. Store large supplies of flammables in a separate location away from the main storage area, preferably outside the building but on the premises, and not less than 20 meters away from the other buildings. Never store large supplies of flammables in the same areas as medicines and medical supplies. Firefighting equipment should be easily available where the flammables are located. Flammable liquids each have a flash point, which is the minimum temperature at which the liquid gives off vapor in sufficient concentration to form an ignitable mixture with the air near the surface of the liquid. The flash point indicates the susceptibility to ignition. a) Acetone and anesthetic ether have a flash point of –18°C; b) Undiluted alcohols have a flash point of 18° to 23°C; c) Kerosene has a flash point of 23° to 61°C. It is not necessary to store flammables below their flash point, but it is very important to store them in the coolest location possible and never in direct sunlight. It is important to control the evaporation rate and avoid the build-up of pressure.

D.8.3 Secure Storage: All medical warehouses should have a secure storage area for products that are likely to be stolen or abused, or that need to be quarantined. Commodities that are designated as controlled substances, or high-value items should be marked as such and kept in a secure area. A locked cabinet or cupboard may be sufficient for some facilities, while other facilities may require a larger vault or cage.

D.9 Security – Equipment that promotes and maintain security *(E.g.: Pad locks & Deadbolt locks; CCTV Cameras)* must be in place to protect items from theft and/or unauthorized access. Minimum requirements for this equipment include:

D.9.1 Pad locks & Deadbolt locks: Install pad locks and deadbolt locks as added security measures to the warehouse and storeroom access points. Observe stricter

security measure for high-value items and products which are subject to misuse and abuse (i.e., as narcotic drugs and psychotropic substances).

D.9.2 Closed-Circuit Television (CCTV): Install sufficient CCTV cameras all throughout the warehouse covering the interior and exterior portions. Ensure that CCTV cameras are strategically located to efficiently monitor all entry and exit points as well as the receiving, staging, quarantine, storage, pick and pack, dispatching areas in the warehouse. Pay particular attention to areas where items with high risk for theft and abuse are located ensuring that all corners and blind spots are covered. Choose CCTV cameras with Transport Video Interface, 5MP, data storage for at least 1 month recording.

Reference:

USAID | DELIVER PROJECT, Task Order 4. 2014. Guidelines for Warehousing Health Commodities. Arlington, Va.: USAID | DELIVER PROJECT, Task Order 4. Second edition (First edition 2005)

For detailed information about warehouse infrastructure planning, you may read the *Guidelines for Warehousing Health Commodities* via this link: https://www.psmtoolbox.org/wp-content/uploads/2017/11/GuidWareHealComm.pdf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PART III

Standard Operating Procedures

This section of the manual indicates the Standard Operating Procedures as guide to perform the minimum warehouse operations processes. These procedures promote seamless operational and informational flow while ensuring adherence to good distribution and storage practices for health commodities procured by and donated to the government.

The objective of streamlining warehouse processes and ensuring proper documentation is to harmonize logistics processes in different levels of the supply chain in order to obtain useful information at specific points of the process and consolidate data in a timely manner. This will also contribute in tracking commodity flow at all levels and provide stakeholders with data that are critical for decision making.

DOH-SCMS-WOM-SOP-01-A	**PREPARATION FOR DELIVERY FROM SUPPLIER**

1. PURPOSE:

To ensure that incoming deliveries from Suppliers are consolidated and scheduled properly while taking into consideration the ongoing warehouse activities, urgency of need for commodities and holding capacity of warehouses.

2. SCOPE:

This procedure covers the process of preparing for deliveries from the processing of requests, approval of schedules of delivery, generation of inspection and acceptance reports (IARs), up to sending store managers the schedule of delivery.

3. RESPONSIBILITY:

Title	Responsibility
Supply Officer	In collaboration with Store Manager, review, approve and plan schedules of delivery based on analysis of urgency of need, on-going warehouse activities, warehouse space and other legal and regulatory requirements such as Notice to Proceed (NTP) and Purchase Order/Contract.
Office/Division Clerk	Assist the Supply Officer in completing clerical tasks associated with the preparation for deliveries.
Store Manager	Collaborate with Supply Officer on the approval and planning of schedules of deliveries. Prepare the warehouse accordingly in coordination with the warehouse staff.
Inspection Committee	Prepare for the approved schedules of deliveries in coordination with the store manager for the conduct of inspection.

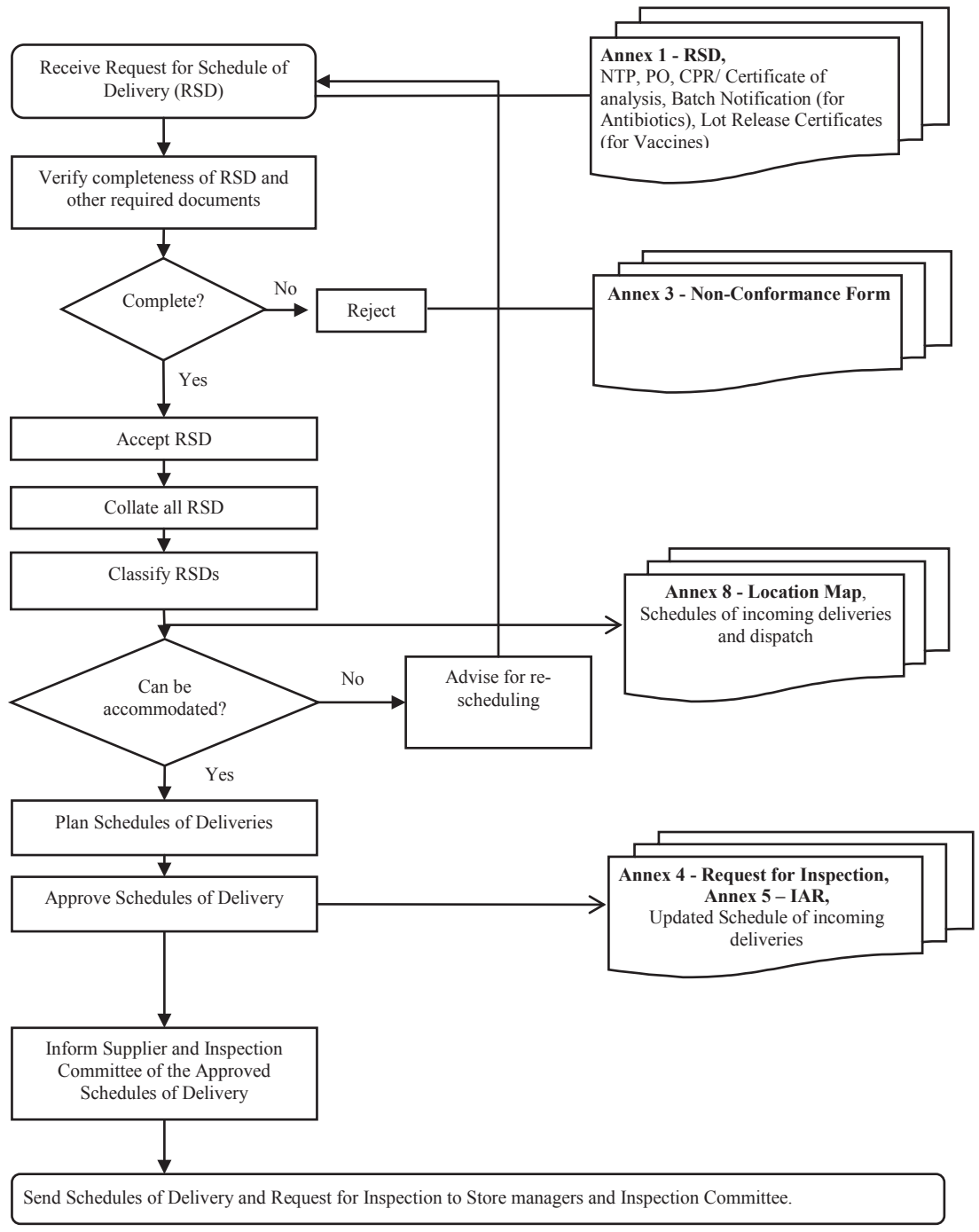
4. PROCEDURE:

Ref. No.	Key Step	Responsibility	Reference Document/Record/ Output Document
4.1	Receive Request for Schedule of Delivery (RSD) from suppliers filled-up via manual process, email, or via the electronic logistics management information system (eLMIS) if available *See Annex 1 – RSD Form*	Office/Division Clerk	• RSD Form

4.2	Verify completeness of information of RSD including required documentations (*as necessary*): **For Procured items:** • NTP • PO/Contract • FDA Certificate of Analysis and/or CPR • Batch Notification (for Antibiotics) • Lot Release Certificates (for Vaccines) **For Donated Items:** • Deed of Donation • Deed of Acceptance • FDA Certificate of Analysis and/or CPR *(if applicable)* • Accelerated CPR (if applicable) • Batch Notification (*for Antibiotics*) • Lot Release Certificates (*for Vaccines)* *If the delivery documents are incomplete or inappropriate, reject request and perform contingency step 6.1; otherwise proceed to next step.* *See Annex 3 – Non-conformance Report*	Office/Division Clerk	• NTP • PO/ Contract • FDA Certificate of Analysis & CPR • Batch Notification (for Antibiotics) • Lot Release Certificates (for Vaccines) • Deed of Donation/ Deed of Acceptance (if applicable)
4.3	Collate all RSDs for review of the Supply Officer	Office/Division Clerk	• Summary of requests for deliveries
4.4	Review and classify RSDs based on the following: • **Space Availability** – Determine the space needed for the delivery in coordination with the assigned Store Manager based on the dimension, no. Of cartons, **type** and quantity of the commodity being requested for delivery; • **Notice to Proceed** – In cases of space insufficiency in the warehouse, supplier(s) with the nearest delivery schedule as indicated in the NTP shall be accommodated first. For those Supplier(s) with lapsed NTP, accommodation shall be based on the number of days passed after the last day stipulated on the NTP. The longer the days lapsed, the first supplier to be prioritized;	Store Manager & Supply Officer	• Program Distribution Plan • Purchase Order / Contract • Notice to Proceed • Inbound/ Outbound Summary Report • Summary of awarded procurement / PO / Contract

	(Cont'd....) • **Urgency** – In cases of urgency, the Office shall prioritize the accommodation of needed commodities as requested by the Procuring Entity and/or End User.		
4.5	Plan Schedules of Deliveries *If the requested delivery cannot be accommodated, perform contingency step 6.2; otherwise proceed to next step.*	Supply Officer	• RSD
4.6	Approve Requests for Deliveries and generate the Approved RSD form specifying the date and time of delivery of suppliers	Store Manager & Supply Officer	• Location Maps, • Inbound/ Outbound Summary Report • Monthly Inventory • Approved RSD
4.7	Inform Supplier, Donor, Store Manager and Inspection Committee of the Approved Schedule/s of delivery	Office/Division Clerk	• Approved RSDs • Summary of incoming deliveries
4.8	Send Schedules of Delivery, Request for Inspection to Store managers and Inspection Committee. *See Annex 4 – Request for Inspection* *See Annex 5 – IAR*	Office/Division Clerk	• Summary of incoming deliveries • Request for Inspection
4.9	Prepare the warehouse and staff for the upcoming delivery	Store Manager	• Approved RSD/s • PO/Contract • NTP

5. PROCESS FLOW DIAGRAM: SOP 1A – Preparation for Delivery from Suppliers



6. CONTINGENCY STEPS; CORRECTIVE ACTIONS:

6.1 Requests for Deliveries (RSDs) with incomplete or incorrect documents shall be rejected outright. Fill-out "Non-conformance Report" (Annex 3) and have the requesting personnel co-sign the form. Provide a copy to the requesting party before departure and instruct to request for a new schedule of delivery.

6.2 Requests for Deliveries which cannot be accommodated shall be re-scheduled accordingly.

7. DOCUMENTATION AND ATTACHMENTS:

7.1 Batch Notification (for Antibiotics)
7.2 Deed of Donation & Acceptance (For donated items)
7.3 Inspection and Acceptance Report (IAR)
7.4 FDA Certificate of Analysis and/or Certificate of Product Registration (CPR)
7.5 Accelerated CPR for donated items
7.6 Location Map
7.7 Lot Release Certificates (for Vaccines)
7.8 Non-conformance Form
7.9 Notice to Proceed (NTP)
7.10 Purchase Order (PO) / Contract and attachments
7.11 Request for Schedule of Delivery (RSD)
7.12 Request for Inspection (RFI)

DOH-SCMS-WOM-SOP-01-B	**PREPARATION FOR DELIVERY FROM UPPER TIERS**

1. PURPOSE:

To ensure that incoming deliveries allocated by the upper tier (i.e., DOH Central Office or DOH Regional Office) are consolidated and scheduled properly while taking into consideration the urgency of need for commodities, ongoing warehouse activities and holding capacity of warehouses.

2. SCOPE:

This procedure covers the process of preparing for deliveries from the processing of requests, approval of schedules of delivery, up to sending store managers the schedule of delivery.

3. RESPONSIBILITY:

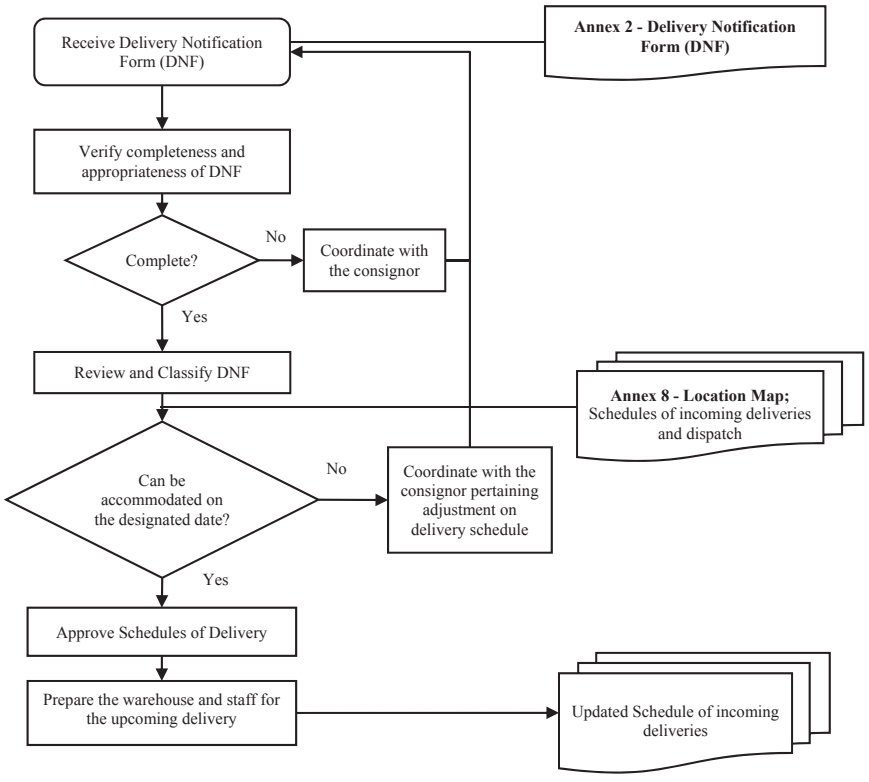
Title	Responsibility
Supply Officer	In collaboration with Store Manager, review, approve and plan schedules of delivery based on analysis of urgency of need, on-going warehouse activities, warehouse space and other legal and regulatory requirements.
Office/Division Clerk	Assist the Supply Officer in completing clerical tasks associated with the preparation for deliveries.
Store Manager	Collaborate with Supply Officer on the approval and planning of schedules of deliveries. Prepare the warehouse accordingly in coordination with the warehouse staff.

4. PROCEDURE:

Ref. No.	Key Step	Responsibility	Reference Document/Record/ Output Document
4.1	Receive Delivery Notification Form (DNF) from the DOH Central Office or DOH Regional Office *See Annex 2 – Delivery Notification Form*	Store Manager & Supply Officer	• Delivery Notification Form
4.2	Verify completeness of information of DNF *If the information is incomplete or inappropriate, perform contingency step 6.1; otherwise proceed to next step.*	Store Manager & Supply Officer	• Delivery Notification Form

4.3	Review and classify Delivery Notification based on the following: • **Urgency** – In cases of urgency, the Office shall prioritize the accommodation of needed commodities as requested by the Procuring Entity and/or End User. • **Space Availability** – Determine the space needed for the delivery in coordination with the assigned Store Manager based on the volume of delivery *If the delivery request cannot be accommodated, perform contingency step 6.2; otherwise proceed to next step.*	Store Manager & Supply Officer	• Program Distribution Plan • Inbound/ Outbound Summary Report
4.4	Approve requests for deliveries specifying the date and time of delivery	Store Manager & Supply Officer	• Delivery Notification Form
4.5	Prepare the warehouse and staff for the upcoming delivery	Store Manager	• Delivery Notification Form

5. <u>PROCESS FLOW DIAGRAM: SOP 1B –Preparation for Delivery from DOH Central Office/ Regional Office</u>



6. CONTINGENCY STEPS; CORRECTIVE ACTIONS:

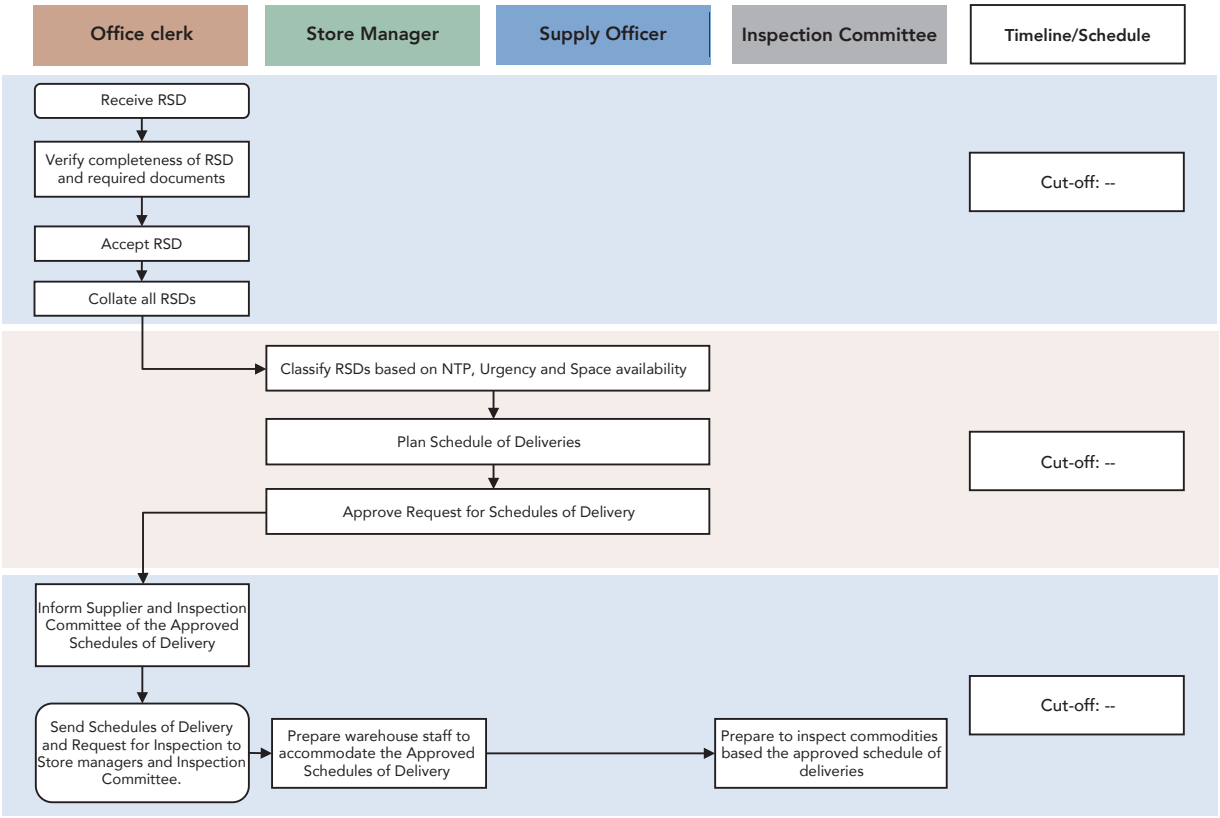
6.1 Coordinate with the consignor pertaining any discrepancy or incomplete information on the delivery notification form.

6.2 Coordinate with the consignor on the preferred date(s) of delivery based on your schedule of transactions, availability of space and staff. If delivery request shall be re-scheduled, indicate the reason accordingly.

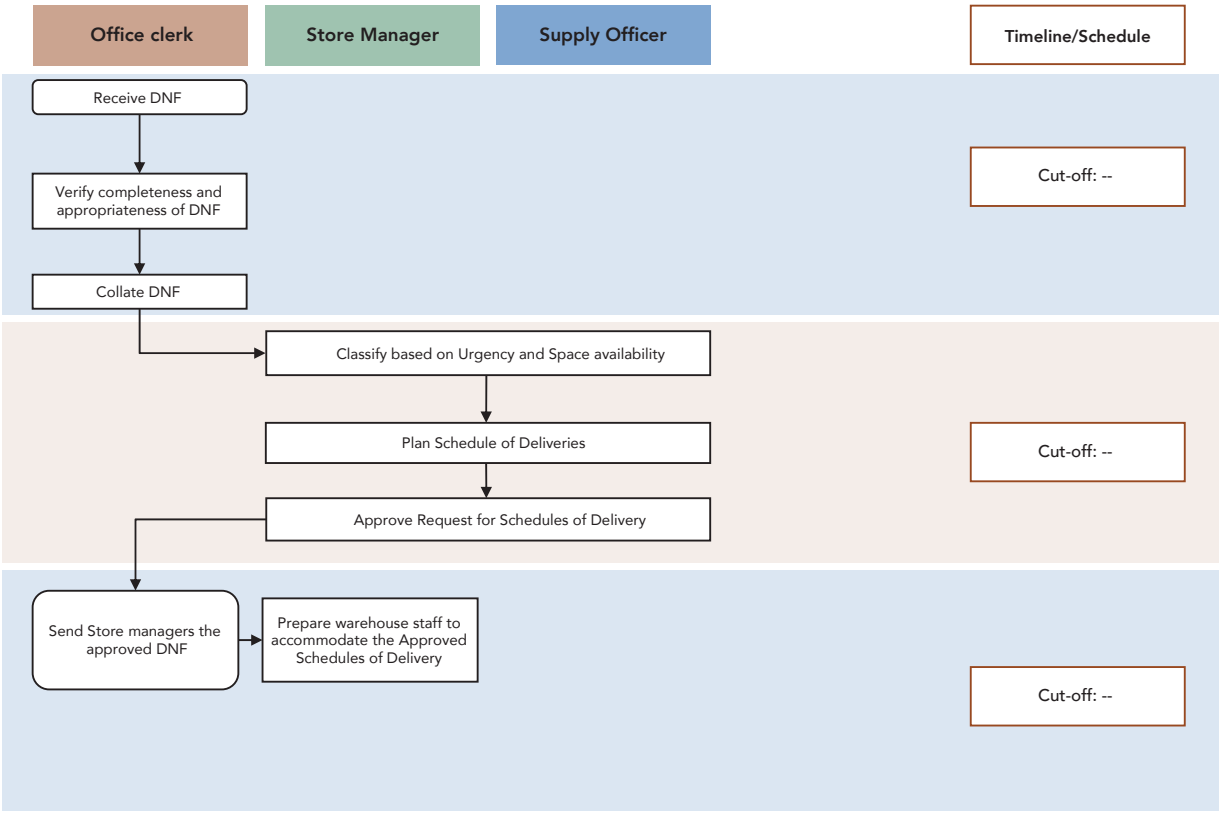
7. DOCUMENTATION AND ATTACHMENTS:

7.1 Delivery Notification Form
7.2 Monthly Inventory
7.3 Location Map

Preparation for Delivery From Suppliers



Preparation for Delivery From the upper tier (Central Office/ Regional Office)



DOH-SCMS-WOM-SOP-02-A	**RECEIVING OF COMMODITY FROM SUPPLIERS**

1. PURPOSE:

To ensure commodities delivered by suppliers are received, inspected and processed in the warehouses according to legal standards and Manufacturer's / Supplier's requirements.

2. SCOPE:

This procedure covers the process of receiving, inspection, and processing of commodities upon arrival through routine delivery activities including submission of documents to concerned offices in the department.

3. RESPONSIBILITY:

Title	Responsibility
Store Manager	Confirm schedule of receiving with inspection committee; oversee the receiving and inspection of commodities; facilitate FDA Random Sampling *(if applicable)* and supervise staff on their delegated tasks.
Inspection Committee	Inspect and approve the acceptance of commodities together with Store Supervisor and Store Keeper at the scheduled receiving date. Finalize the IAR.
Store Supervisor	Receive and validate delivery documents from suppliers and supervise store keepers and store helpers in performing subtasks during the receiving process. Ensure proper and complete filing of Delivery Documents. Validate inventory stock keeping records.
Store Keeper	Assist in the receiving process and assist in FDA Random Sampling *(if applicable)*. Update inventory stock keeping records and facilitate encoding of inventories in the warehouse management system.
Store Helpers	Facilitate unloading, sorting and conveying of received commodities following Good Storage Practices and Manufacturer's Requirements. One of the store helpers shall be a certified forklift operator for warehouses requiring them.
Security	Perform security protocols and recording of transactions at the start and end of the receiving process.

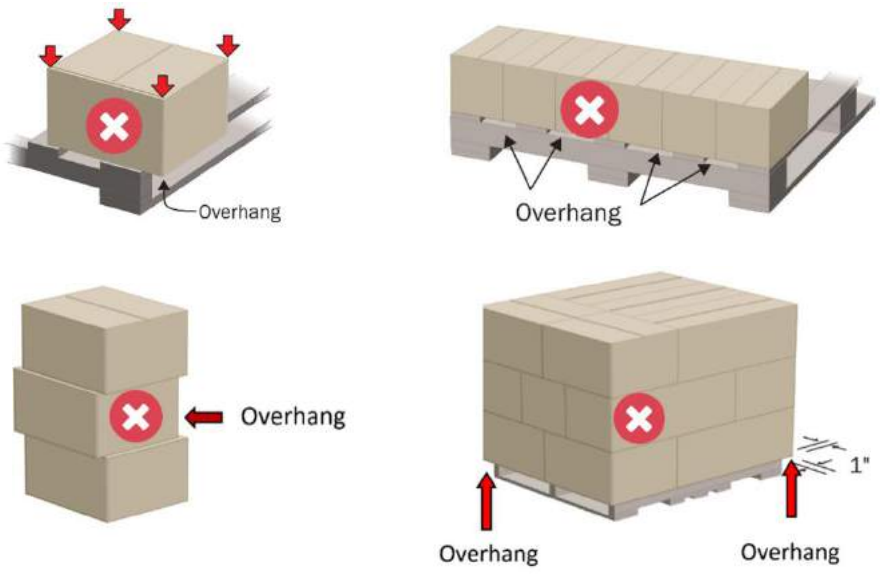
4. PROCEDURE:			
Ref. No.	**Key Step**	**Responsibility**	**Reference Document/Record/ Output Document**
4.1	Coordinate with Supply Officer and Inspection Committee to confirm availability of inspectors during the specified receiving schedule	Store Manager	• Schedule of incoming deliveries • Approved RSDs
4.2	Receive delivery documents after security check	Store Keeper	• Delivery Documents
4.3	Check the completeness and validity of delivery documents as follows but not limited to: • PO and/or Contract • DR/SI • NTP • RSD • FDA Certificate of Analysis and/or Certificate of Product Registration (CPR) • Batch Notification (for Antibiotics) • Lot Release Certificates (for Vaccines) • Approved Samples (for IEC Materials) • Materials Safety Data Sheet (MSDS) – for hazardous items and items requiring cold chain management • Complete quantity of Samples needed for each batch/ lot *(For Drugs / Medicines/ Medical Supplies requiring FDA Test Analyses)* For Donated Items: • Deed of Donation • Deed of Acceptance • FDA Certificate of Analysis and/or CPR (if applicable) • Accelerated CPR (if applicable) • Batch Notification (for Antibiotics) • Lot Release Certificates (for Vaccines) *If the delivery documents and samples are incomplete, reject delivery according to contingency step 6.1; otherwise proceed to the next step.*	Store Keeper	• Approved RSDs • Delivery Documents

4.4	Supervise the offloading of the commodities from the delivery vehicle for inspection. Use Manual Tally Sheet as guidance on the receiving. *See Annex 25 – Manual Tally Sheet*	Store Supervisor	• Filled-in Manual Tally Sheet
4.5	Counter check the dimension and volume of actual carton/cases delivered versus the encoded dimension and volume stipulated in the approved RSD *If there's a discrepancy, perform contingency step 6.2. Otherwise, continue offloading*	Store Keeper Store Supervisor	• Approved RSD
4.6	Inspect commodities to verify description/ specifications and quantity of each product received against the Purchase Order (PO) / Contract, Delivery Receipt/ Sales Invoice (DR/SI) and/or other documents related to the delivery as reference. Ensure also that delivered items are suitable to be stored at the warehouse/storeroom in accordance to its storage and temperature requirement. Check the details of commodities delivered as follows but not limited to: Pharmaceuticals (Qualification): • Generic Name (Brand Name, if any) • Dosage Strength • Dosage Form • Batch and/or Lot Number • Expiration Date o Shelf Life upon delivery (Computed) • Labeling Instructions • CPR • Other Technical specifications Non-Pharmaceuticals: • Serial Number/s • Warranty Certificate/s (if applicable) • Brand • Expiration (if applicable) • Other Technical specifications *If there are discrepancies and damages on the item, perform contingency step 6.3. Otherwise, accept the delivery and continue offloading.*	Inspection Committee Store Supervisor Store Manager	• Delivery Documents

4.7	Conduct Random Sampling *(for commodities requiring FDA Test Analyses)*	Store Supervisor Store Manager	• Delivery Documents
4.8	Complete and finalize information on the IAR (i.e. batch no., expiry date, etc.) for signature.	Inspection Committee	• IAR • Delivery Documents
4.9	Stacking of commodities: - Follow the Manufacturer's or supplier's direction regarding stacking *(if there are any)* • Stack cartons on pallets at least 10 cm (4 inches) off the floor with no more than 2.5 meters (8 feet) high; • Place liquid products on lower shelves or bottom of stacks. Fragile items shall be stacked with no more than 1.5 meters (5 feet) high; • Stack of cartons per pallet should fit in to the standard height of rack beams • Ensure that there is no reversed stacking of carton per pallet; • Place cling wrap/ plastic wrap on top of the stack to maintain stability during storage and transport.	Store Helper	• Good Storage Practices Guidelines • Delivery Documents

GENERAL RECOMMENDATION ON PROPER PALLETIZING / STACKING:

Avoid Pallet Overhang – This can reduce top to bottom compression resistance of corrugated cartons and might incur damages on products.

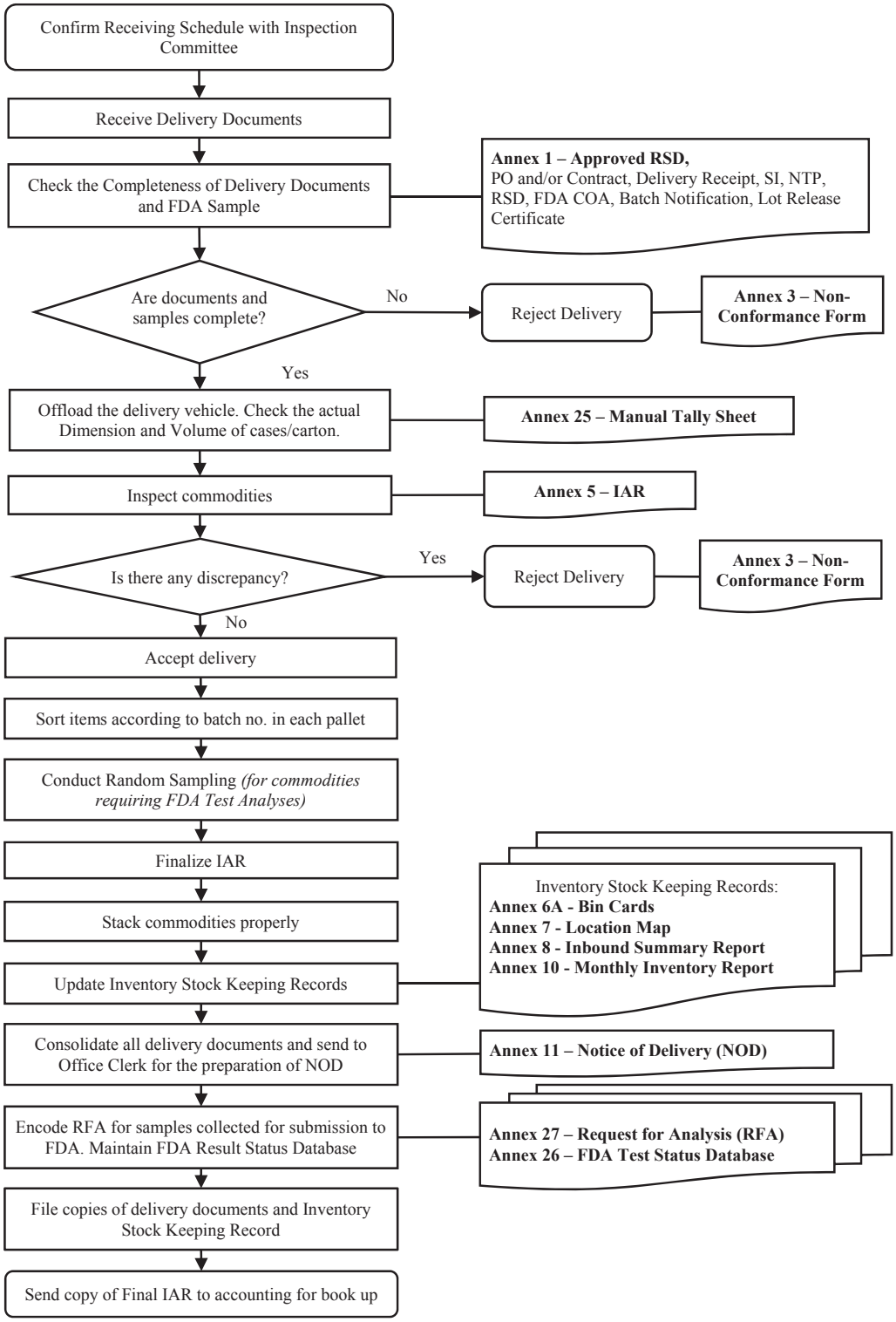


	Avoid Interlocked Pattern – Interlocked stacking equally results in decreased compression strength of corrugated cartons.  Interlocked		
	Observe Column Pattern or Combination Pattern – To ensure full potential strength of corrugated cartons.  Vertical (Columnar) *Column pattern places the strongest points directly on top of one another*  Combination (Partial Interlock) *Column lower layers with an interlocked upper layer* ***NOTE: Adhere to the stacking requirement based on the Manufacturer's and/or Supplier's recommendation (if there are any)***		
4.10	**Preparation and/or updating of Bin Cards:** • Produce/Update Bin Card for all commodities containing the following information but not limited to: ○ Complete item description based on the PO/Contract.; ○ Unit of measurement based on the PO/Contract.; ○ PO./Contract no.; ○ Supplier; ○ Price per unit; ○ Date Received; ○ Quantity; ○ Lot/Batch nos.; ○ Expiry date(s); ○ Location Code *(If applicable)* • Endorse to the Store Supervisor for counter checking. *See Annex 6A – Bin Card*	Store keeper	• Delivery Documents

4.11	**Location Map -** Set the location where the received commodities will be placed. Update location map per pallet for all commodities inside the warehouse using the suggested template and/or Warehouse Management System. Likewise, the following segregation to different areas must be observed: • Quarantine Area – if received commodities are still waiting for FDA Test Analysis and/ or acceptance from the Inspection committee/End-user • Storage Area – if received commodities are not required to be subjected to FDA Test analysis. Or if commodities already conformed to FDA Test Analysis and/or accepted already by the End-user. • Staging Area – if received commodities are only for cross docking and ready for distribution. Endorse Location Map to Store Helper as reference in Put-Away process. *See Annex 7 – Location Map*	Store Supervisor	• Bin Cards • Delivery Documents
4.12	**Encoding of Inbound Record and Monthly Inventory –** Update Inbound Summary Report and Monthly Inventory using the suggested template and/or Warehouse Management System. Endorse all inventory stock keeping record to Store Manager for proper counter checking. *See Annex 8 – Inbound Summary Report* *See Annex 10 – Monthly Inventory*	Store Supervisor	• Inventory Stock Keeping Record: o Location Map o Inbound Summary Report o Monthly Inventory

4.13	Consolidate all delivery documents and send to Office Clerk for the preparation and submission of Notice of Delivery (NOD) to COA within 24 hours from the time of delivery. *See Annex 11 – Notice of Delivery Form*	Store Supervisor	• Delivery Documents • Notice of Delivery
4.14	Encode Request for Analysis (RFA) for FDA Samples collected for submission to FDA. Maintain FDA Test Result Status Database. *See Annex 27 – Request for Analysis* *See Annex 26 – FDA Test Result Database*	Store Manager	• RFA • FDA Test Result Database
4.15	Counter check delivery documents, Manual Tally Sheets and Inventory Stock Keeping Records ensuring file copy for future reference.	Store Manager	• Delivery Documents • Inventory Stock Keeping Records
4.16	Send copy of IAR to Accounting Unit for Book-up	Inspection Committee	• Delivery Documents • Signed IAR
4.17	Oversee/ supervise all activities mentioned above, ensure that tasks are efficiently performed, and counter check accuracy of all data produced by warehouse staff. Facilitate direct assistance if necessary.	Store Manager	• Delivery Documents

5. PROCESS FLOW DIAGRAM: SOP 2A – Receiving of commodities from Suppliers



6. CONTINGENCIES; CORRECTIVE ACTIONS:

6.1. Deliveries with incomplete or incorrect documents shall be rejected outright. Fill-out "Non-conformance Report" (Annex 3) and have the delivery personnel co-sign the form. Provide a copy to the delivery personnel before departure for submission to the supplier and instruct to request for a new schedule of delivery. Ensure to file all fulfilled Non-conformance Reports.

6.2. Inform the Office Clerk on the actual dimension and volume of cartons/cases to facilitate correction in the database if there are any. Record the actual dimension and volume of cartons/cases in your inventory keeping records.

6.3. Deliveries with damaged/expired items and unmet specifications shall be rejected outright. Inform the Inspection Committee and fill out "Non-Conformance Product Report" (Annex 3) and have the delivery personnel co-sign the report. Inform the consignor, provide a copy to the delivery personnel before departure and instruct to request for a new schedule of delivery to compensate for those rejected items and quantities. Ensure to file all fulfilled Non-conformance Reports.

7. DOCUMENTATION AND ATTACHMENTS:

7.1. Batch Notification
7.2. Certificate of Product Registration (CPR)
7.3. Delivery Receipt (DR)
7.4. FDA Certificate of Analysis
7.5. FDA Test Status Database
7.6. Inbound Summary Report
7.7. Inventory Stock-keeping Records
7.8. Inspection and Acceptance Report (IAR)
7.9. Lot Release Certificate
7.10. Manual Tally Sheet
7.11. Material Safety Data Sheet
7.12. Non-Conformance Report
7.13. Notice of Delivery (NOD)
7.14. Notice to Proceed (NTP)
7.15. Purchase Orders (POs)/Contracts
7.16. Request for Analysis (RFA)
7.17. Request for Schedule of Deliveries (RSD)
7.18. Sales Invoice (SI)

DOH-SCMS-WOM-SOP-02-B	**RECEIVING OF COMMODITY FROM UPPER TIERS**

1. PURPOSE:

To ensure commodities delivered by the upper tier (DOH Central or Regional Office) are received, inspected and processed in the warehouse according to legal standards and Manufacturer's / Supplier's requirements.

2. SCOPE:

This procedure covers the process of receiving and processing of allocated commodities from DOH Central/ Regional Offices thru routine delivery activities including submission of documents to concerned offices in the department.

3. RESPONSIBILITY:

Title	Responsibility
Store Manager	Confirm schedule of receiving and supervise warehouse staff on proper receiving and handling of items based on Good Storage Practices and product specifications.
Store Supervisor	Receive and validate shipping documents from the courier and supervise store keepers and store helpers in performing subtasks during the receiving process. Ensure proper and complete filing of Shipping Documents. Update inventory stock keeping records.
Store Keeper	Update inventory stock keeping records and assist in the unloading, sorting and conveying of received commodities following GSP.
Store Helpers	Facilitate unloading, sorting and conveying of received commodities following Good Storage Practices and Manufacturer's Requirements. One of the store helpers shall be a certified forklift operator for warehouses requiring them.
Security	Perform security protocols and recording of transactions at the start and end of the receiving process.

4. PROCEDURE:

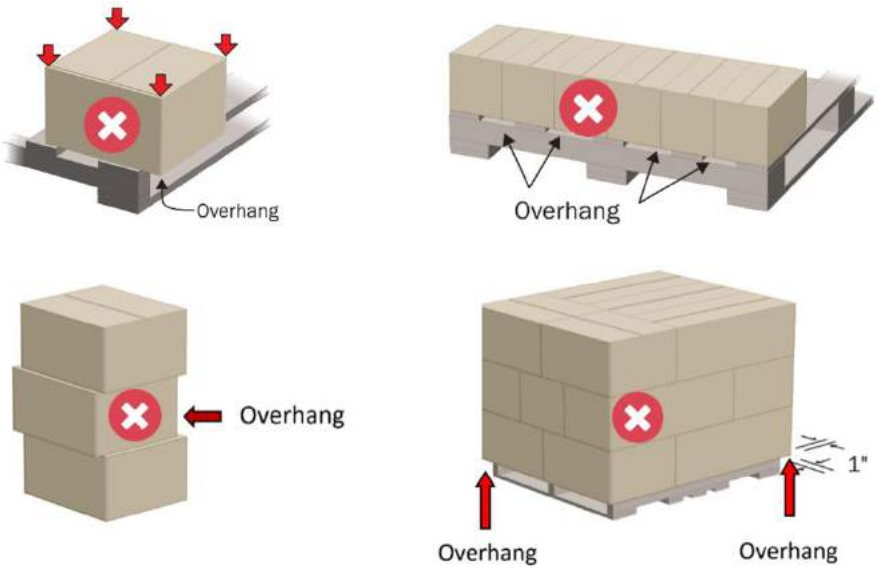
Ref. No.	Key Step	Responsibility	Reference Document/ Record/ Output Document
4.1	Coordinate with Supply Officer to confirm the receiving schedule	Store Manager	• Schedule of incoming deliveries • Delivery Notification Form

4.2	Receive shipping documents after security check	Store Supervisor	• Shipping Documents
4.3	Check the completeness and validity of shipping documents: • Delivery Notification Form • PTR/BL • Materials Safety Data Sheet (MSDS) *If the shipping documents are incomplete, reject delivery according to step 6.1; otherwise proceed to the next step.*	Store Supervisor	• Delivery Notification Form • PTR/BL • MSDS
4.4	Supervise the offloading of the commodities from the delivery vehicle for inspection. Use Manual Tally Sheet as guidance on the receiving. *See Annex 25 – Manual Tally Sheet*	Store Supervisor	• Shipping Documents
4.5	Counter check the dimension and volume of actual carton/cases delivered versus the endorsed dimension and volume stipulated in the Delivery Notification Form *If there's a discrepancy, perform Contingency Step 6.2. Otherwise, continue offloading*	Store Keeper Store Supervisor	• Delivery Notification Form
4.6	Inspect actual commodities to verify description/ specifications and quantity of each product received against the Delivery Notification Form and PTR/BL. Ensure also that delivered items are suitable to be stored at the warehouse/storeroom in accordance to its storage and temperature requirement. If the commodities require cold chain storage, refer to the latest cold chain management manual of the DOH. *If there are no discrepancy and damages, the items should be accepted and continue offloading; otherwise perform Contingency Step 6.3*	Store Supervisor Store Manager	• Shipping Documents

4.7	Stacking of commodities: - Follow the Manufacturer's or supplier's direction regarding stacking *(if there are any)* • Stack cartons on pallets at least 10 cm (4 inches) off the floor with no more than 2.5 meters (8 feet) high; • Place liquid products on lower shelves or bottom of stacks. Fragile items shall be stacked with no more than 1.5 meters (5 feet) high; • Stack of cartons per pallet should fit in to the standard height of rack beams • Ensure that there is no reversed stacking of carton per pallet; • Place cling wrap/ plastic wrap on top of the stack to maintain stability during storage and transport.	Store Helper	• Good Storage Practices Guidelines • Shipping Documents

GENERAL RECOMMENDATION ON PROPER PALLETIZING:

Avoid Pallet Overhang – This can reduce top to bottom compression resistance of corrugated cartons and might incur damages on products.

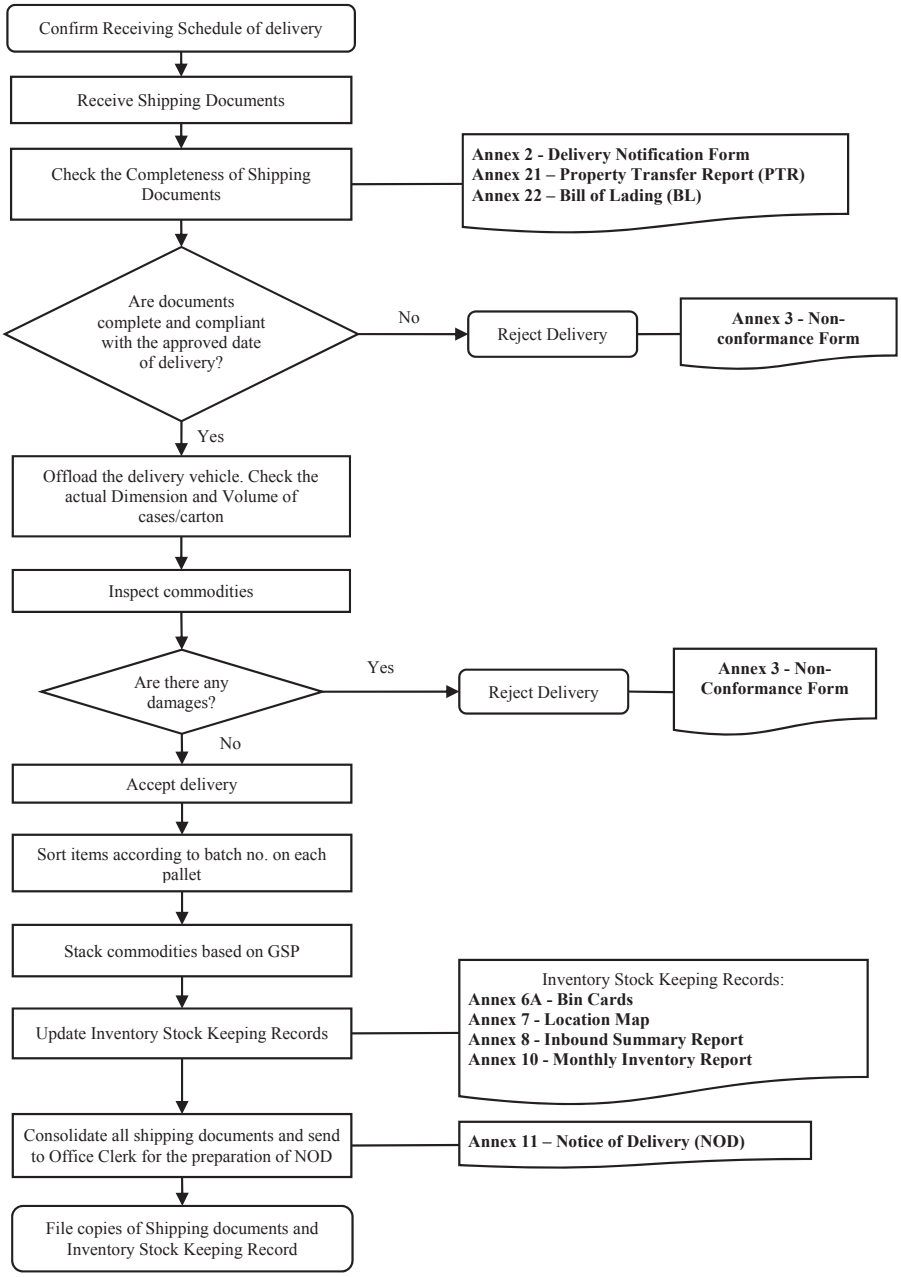


	Avoid Interlocked Pattern – Interlocked stacking equally results in decreased compression strength of corrugated cartons.  Interlocked		
	Observe Column Pattern or Combination Pattern – To ensure full potential strength of corrugated cartons.  Vertical (Columnar) *Column pattern places the strongest points directly on top of one another*  Combination (Partial Interlock) *Column lower layers with an interlocked upper layer* ***NOTE: Adhere to the stacking requirement based on the Manufacturer's and/or Supplier's recommendation (if there are any)***		
4.8	**Preparation and/or updating of Bin Cards:** • Produce/Update Bin Card per pallet or location for all commodities containing the following information but not limited to: ○ Complete item description based on the PO/Contract.; ○ Unit of measurement based on the PO/Contract.; ○ PO/Contract no.; ○ Supplier; ○ Unit cost; ○ Date Received; ○ Quantity; ○ Lot/Batch nos.; ○ Expiry date(s); ○ PTR/BL Control Number *(If applicable);* ○ Location Code *(If applicable)* • Endorse to the Store Supervisor for counter checking. *See Annex 6A – Bin Card*	Store keeper	• Shipping Documents

4.9	**Location Map -** Set the location where the received commodities will be placed. Update location map per pallet or location for all commodities inside the warehouse using the suggested template and/or Warehouse Management System. Likewise, the following segregation to different areas must be observed: • Quarantine Area – if received commodities are still waiting for FDA Test Analysis and/ or acceptance from the Inspection committee. • Storage Area – if received commodities are not required to be subjected to FDA Test analysis. Or if commodities already conformed to FDA Test Analysis and/or accepted already by the Inspection Committee. • Staging Area – if received commodities are already for distribution (Good Stocks). Endorse Location Map to Store Helper as reference in Put-Away process. *See Annex 7 – Location Map*	Store Supervisor	• Bin Cards • Shipping Documents
4.10	**Encoding of Inbound Summary Report and Monthly Inventory Report –** Update Inbound Summary Report and Monthly Inventory Report using the suggested template and/ or Warehouse Management System. Endorse all inventory stock keeping record to Store Manager for counter checking. *See Annex 8 – Inbound Summary Report* *See Annex 10 – Monthly Inventory*	Store Keeper Store Supervisor	• Inventory Stock Keeping Record: o Location Map o Bin Cards o Inbound Summary Report o Monthly Inventory Report
4.11	Consolidate all shipping documents and send to Office Clerk for the preparation and submission of Notice of Delivery (NOD) to Commission on Audit (COA) *See Annex 11 – Notice of Delivery Form*	Store Supervisor	• Shipping Documents • Notice of Delivery

4.12	Counter check shipping documents, Manual Tally Sheets and Inventory Stock Keeping Records ensuring file copy for future reference.	Store Manager	• Shipping Documents • Inventory Stock Keeping Records
4.13	Oversee/ supervise all activities mentioned above, ensure that tasks are efficiently performed, and counter check accuracy of all data produced by warehouse staff. Facilitate direct assistance if necessary.	Store Manager	• Delivery Documents

5. **PROCESS FLOW DIAGRAM: SOP 2B –Receiving of commodities from Upper Tiers (DOH Central Office/ Regional Office)**



6. **CONTINGENCIES; CORRECTIVE ACTIONS:**

6.1. Deliveries with incomplete or incorrect documents shall be rejected outright. Fill-out "Non-Conformance Report" (Annex 3) and have the delivery personnel co-signed the form. Inform the consignor, provide a copy to the delivery personnel before departure and instruct to request for a new schedule of delivery. Ensure to file all fulfilled Non-Conformance Reports.

6.1.1. Emergency deliveries which do not have Delivery Notification Form shall be accepted if it is communicated and duly approved by the consignor, End-user and warehouse custodian.

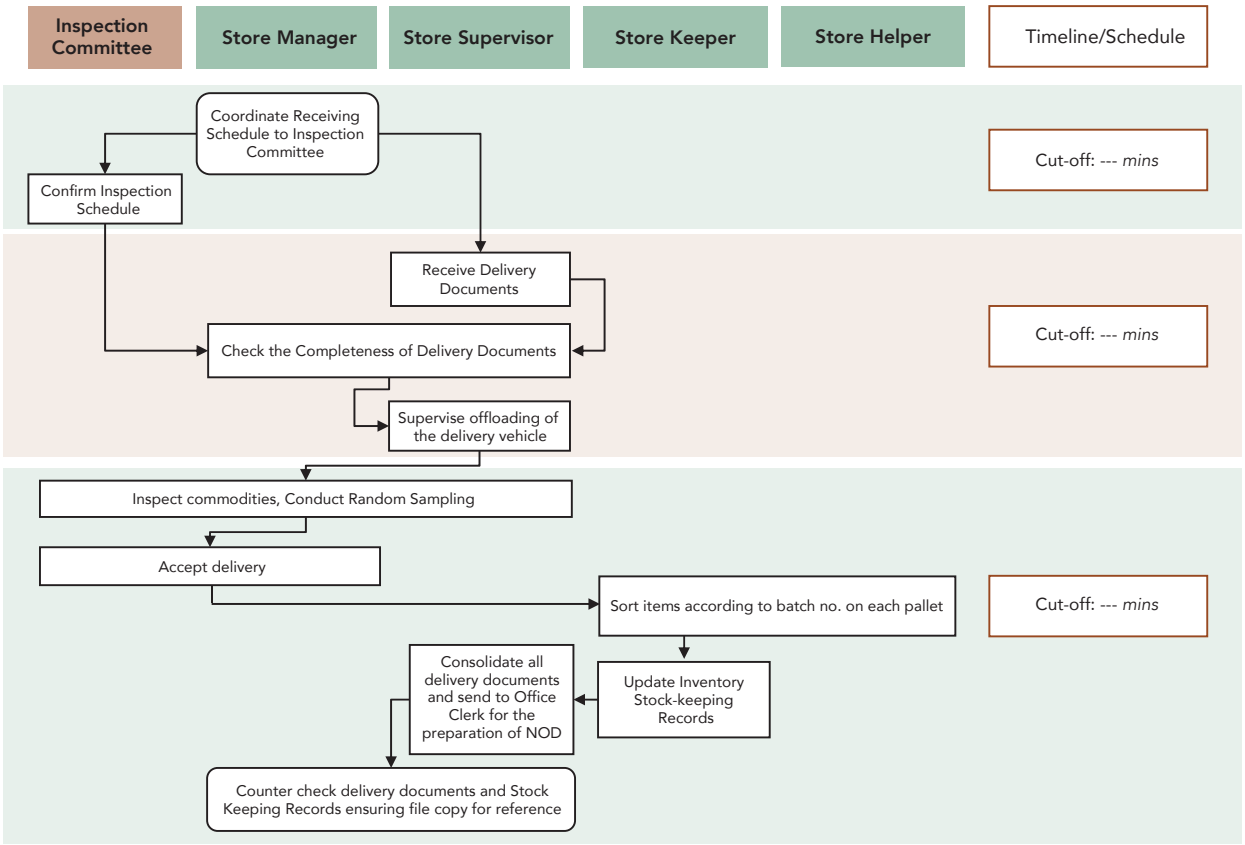
6.2. Inform the Office Clerk on the actual dimension and volume of cartons/cases to facilitate correction in the database if there are any. Record the actual dimension and volume of cartons/cases in the inventory keeping records.

6.3. Deliveries with damaged/expired items and unmet specifications shall be rejected outright. Fill out "Non-Conformance Report" (Annex 3) and have the delivery personnel co-signed the report. Inform the consignor, provide a copy to the delivery personnel before departure and instruct to request for a new schedule of delivery to compensate for those rejected items and quantities. Ensure to file all fulfilled Non-Conformance Reports.

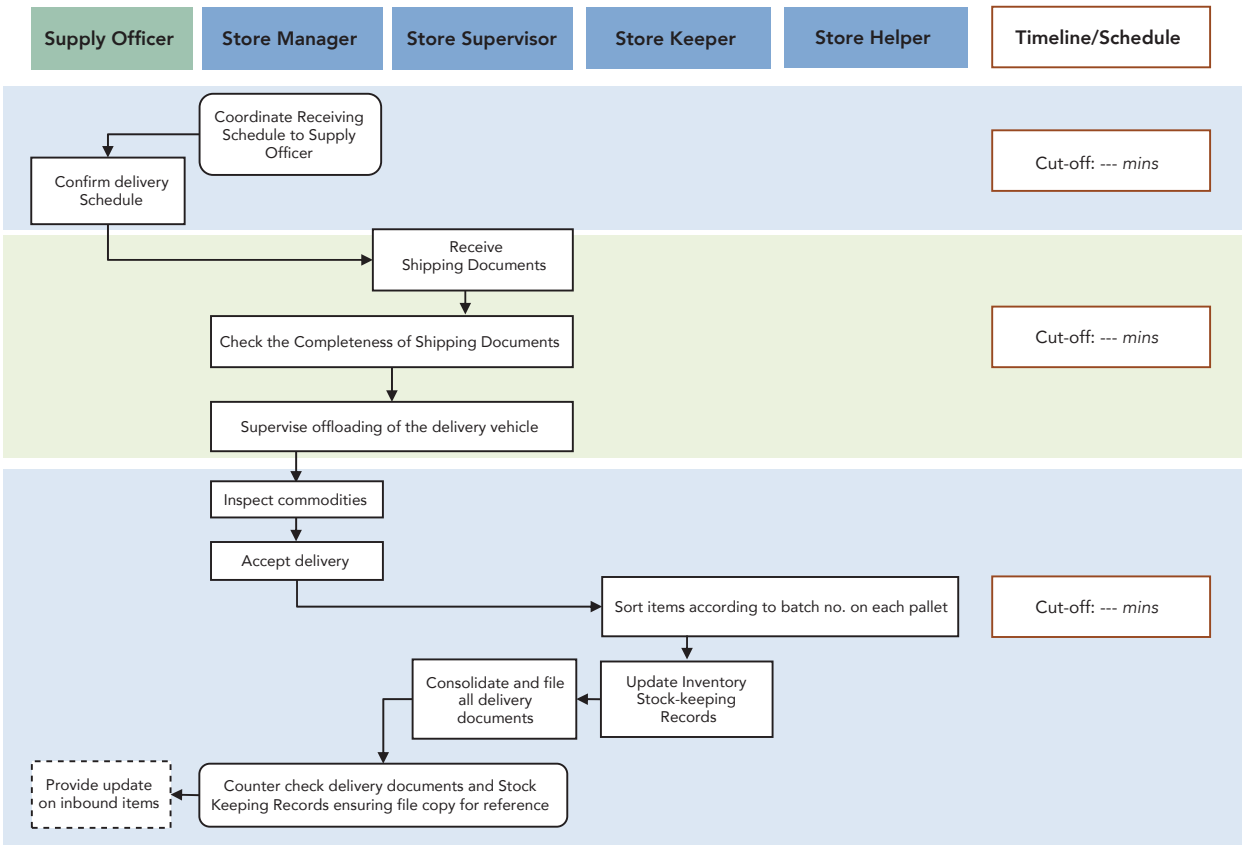
7. **DOCUMENTATION AND ATTACHMENTS:**

7.1. Bill of Lading (BL)
7.2. Bin Card
7.3. Delivery Notification Form (DNF)
7.4. Inbound Summary Report
7.5. Inventory Stock-keeping Records
7.6. Location Map
7.7. Material Safety Data Sheet (MSDS)
7.8. Notice of Delivery (NOD)
7.9. Non-Conformance Report
7.10. Property Transfer Report (PTR)

Receiving of Commodities From Suppliers



Receiving of Commodities from Upper Tiers



DOH-SCMS-WOM-SOP-03	**PUT-AWAY**

1. PURPOSE:

To ensure that the health commodities are stacked, handled properly and transferred to the appropriate area for storage.

2. SCOPE:

This procedure covers the process of putting away the received health commodities to their specific location in the warehouse after the receiving process.

3. RESPONSIBILITY:

Title	Responsibility
Store Supervisor	Oversee the put away process and facilitate updating/ producing Stock Cards per item.
Store Keeper	Ensure all commodities are correctly labelled (with Bin Card and/or Product Identification Label per pallet/ position); stored properly and inventory stock-keeping records updated. Assist in the transfer of commodities to its assigned storage space based on the Location Map following proper techniques.
Store Helpers	Ensure proper stacking of commodities to pallets, facilitate transfer of stacked commodities to its assigned storage space based on the Location Map following proper techniques. Ensure presence of Bin Card and/or Product Identification Label per pallet/position. One of the store helpers shall be a certified forklift operator for warehouses requiring them.

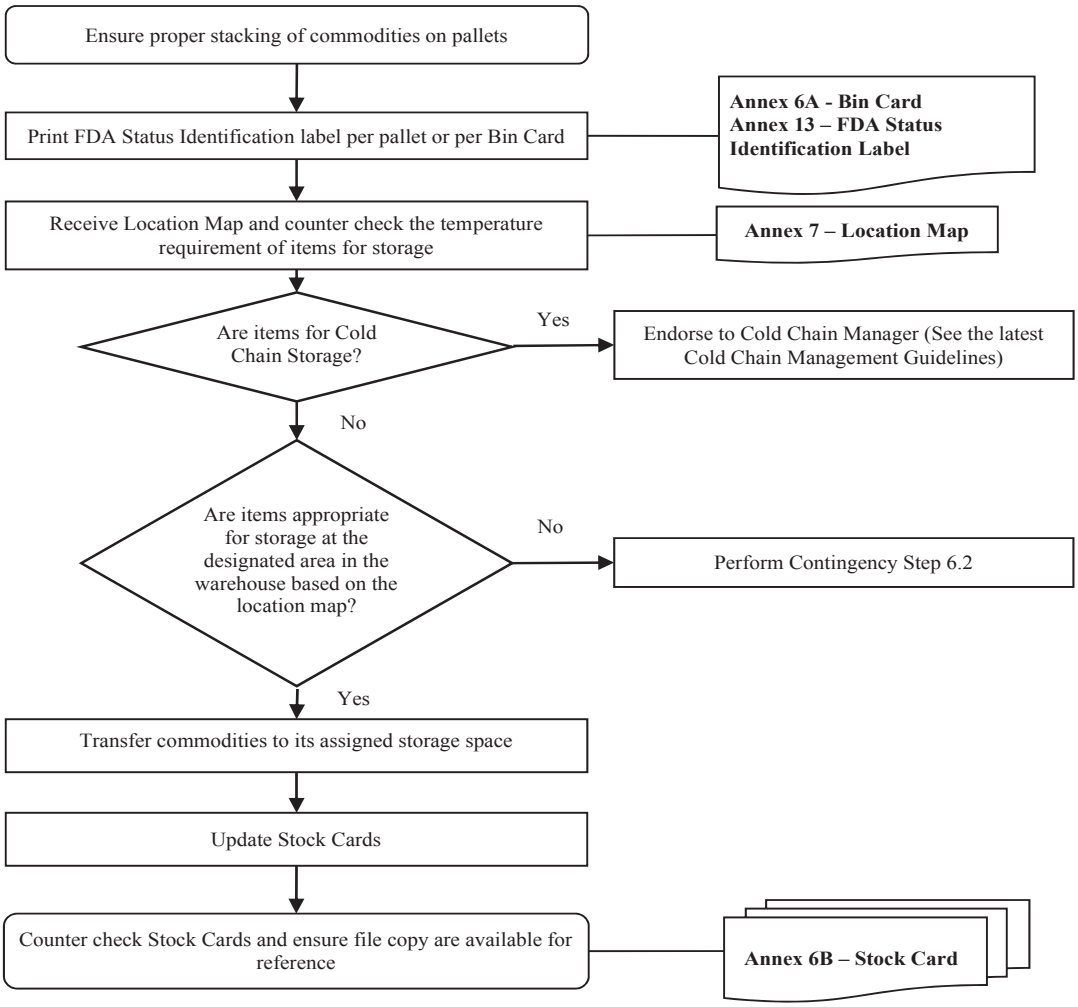
4. PROCEDURE:

Ref. No.	Key Step	Responsible Staff	Reference Document/Record
4.1	**Stacking of Commodities –** Ensure that products are properly stacked on pallets. **If commodities are not properly stacked on pallets, perform Contingency Step 6.1*	Store Helper	• Good Storage Practices Guidelines • Manufacturer's / Supplier's Recommendation on Stacking • Delivery/ Shipping Documents

4.2	**FDA Status Identification** – For product requiring FDA Test Analysis, print and affix FDA Status Identification Label per pallet or per Bin Card: • Quarantine (yellow) - commodities waiting for FDA test analysis result • Passed/ Good Stocks (green) - commodities that already conform to FDA test analysis and/or commodities which do not require FDA Test Analysis and already accepted by the End-user *See Annex 13 – FDA Status ID label*	Store Keeper Store Helpers	• FDA Result Status Database • Delivery/ Shipping Documents
4.3	Hand over the updated Location Map to Store Keeper/s and Helper/s	Store Supervisor	• Location Map
4.4	Using the Location Map, countercheck if commodities are fit to be stored in the designated area following First Expiry First Out (FEFO) for products with expiration date and First In First Out (FIFO) for products without expiration date principles. **NOTE: Products that require special storage conditions such as flammable, controlled and heat sensitive items should be appropriately handled and stored according to manufacturer's or supplier's recommendation- MSDS.* *If commodities are not appropriate to be stored at the designated area determined by the Store Supervisor, perform Contingency Step 6.2. Otherwise proceed to the next step.*	Store helper Store keeper	• Location Card/ Map • Warehouse Management System
4.5	For items requiring cold chain management, endorse to trained personnel responsible for proper supervision on handling and storing items requiring cold storage. **NOTE: Please refer to the latest Cold Chain Management Guidelines of the DOH.*	Store helper Store keeper	• Cold Chain Management Manual

4.6	Transfer commodities to its assigned storage space after counter checking	Store helper Store keeper	• Location Card/ Map • Warehouse Management System
4.7	**Preparation and/or updating of Stock Cards:** • Produce/Update Stock Card per item containing the following information but not limited to: ○ Complete item description based on the PO/Contract; ○ Unit of measurement based on the PO/Contract; ○ PO/Contract no.; ○ Supplier; ○ Unit cost; ○ Date Received; ○ Quantity; ○ Lot/Batch nos.; ○ Expiry date(s); ○ PTR/BL Control Number *(If applicable)* • Endorse to the Store Manager for counterchecking. *See Annex 6B – Stock Card*	Store keeper Store Supervisor	• Delivery/ Shipping Documents
4.8	Oversee/ supervise all activities mentioned above, ensure that tasks are efficiently performed, and counter check accuracy of all data produced by warehouse staff. Facilitate direct assistance if necessary. *If there are discrepancy or inaccuracy on data entry, perform Contingency Step 6.3*	Store Manager	• Delivery/ Shipping Documents • Location Map

5. PROCESS FLOW DIAGRAM:



6. CONTINGENCIES; CORRECTIVE ACTIONS:

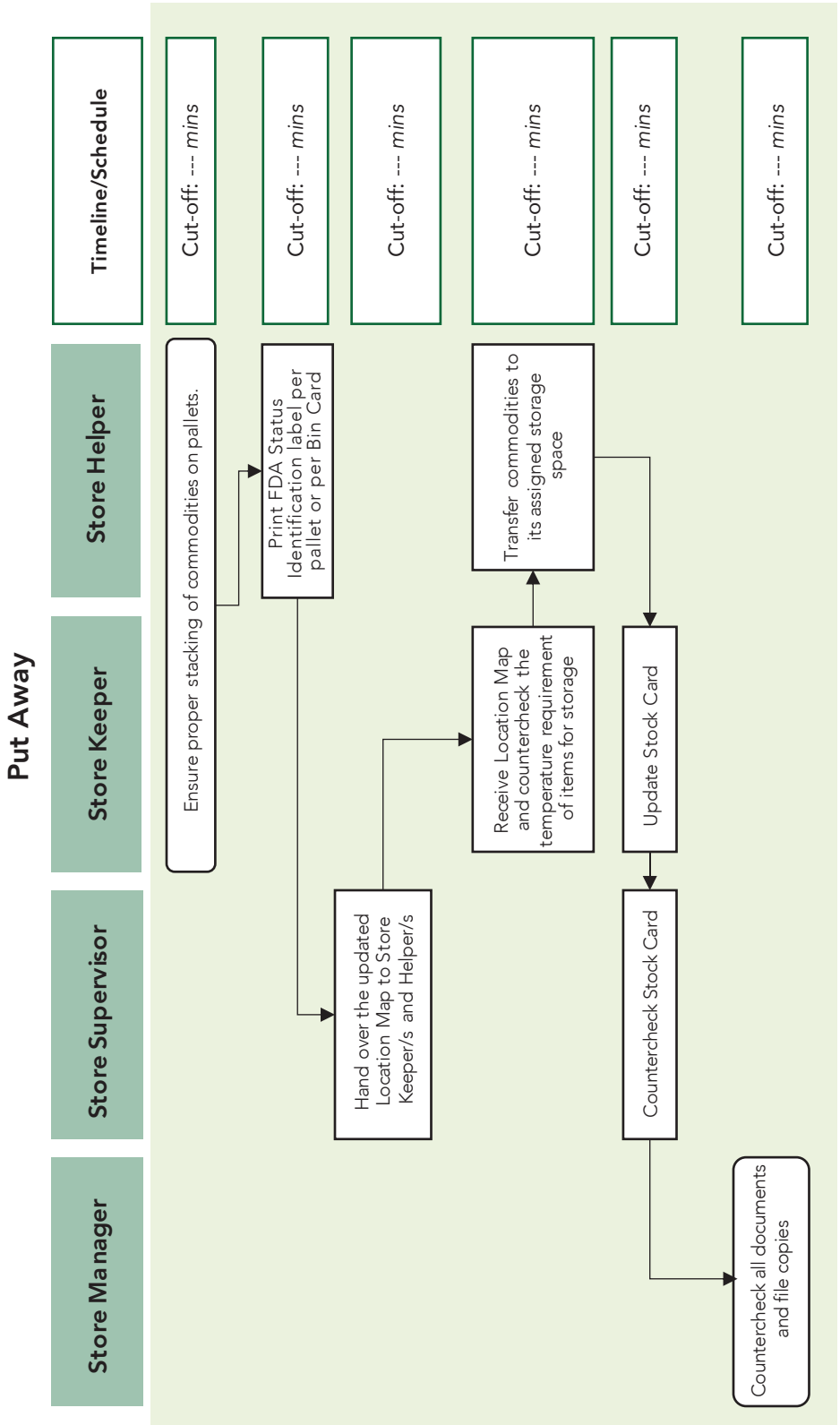
6.1. Facilitate correct stacking based on the guidelines on proper palletization *(see general palletization stated in receiving process or based on Supplier's Recommendation)* and adjust accordingly.

6.2. Inform Store Supervisor to consider changing the designated storage area appropriate for the commodity.

6.3. Instruct warehouse staff to correct data entry, update documentation accordingly and facilitate subtasks accurately and completely.

7. DOCUMENTATION AND ATTACHMENTS:

7.1. Delivery/ Shipping Documents
7.2. FDA Status Database
7.3. Location Map
7.4. Material Safety Data Sheet (MSDS)
7.5. Product Identification Label & FDA Status Identification Label
7.6. Stock Card


Put Away
Store Manager
Store Supervisor
Store Keeper
Store Helper
Timeline/Schedule
Ensure proper stacking of commodities on pallets.
Cut-off: --- mins
Print FDA Status Identification label per pallet or per Bin Card
Cut-off: --- mins
Hand over the updated Location Map to Store Keeper/s and Helper/s
Cut-off: --- mins
Receive Location Map and countercheck the temperature requirement of items for storage
Transfer commodities to its assigned storage space
Cut-off: --- mins
Update Stock Card
Cut-off: --- mins
Countercheck Stock Card
Countercheck all documents and file copies
Cut-off: --- mins

DOH-SCMS-WOM-SOP-04	**STORAGE AND WAREHOUSING**

1. PURPOSE:

To ensure that health commodities are stored and protected in a manner that conforms to Good Storage Practices and manufacturer's/supplier's recommendation.

2. SCOPE:

This procedure covers the process of storing and warehousing of commodities in Warehouses/Storerooms.

3. RESPONSIBILITY:

Title	Responsibility
Store Manager	Monitor the overall routine warehouse management tasks and ensure GSP guidelines are always observed.
Store Supervisor	Monitor proper stacking and labeling of all commodities. Keep assigned inventory stock keeping records updated at all times.
Store Keeper	Ensure proper stacking and labeling of all commodities. Keep assigned inventory stock keeping records always updated.
Store Helpers	Perform related tasks in maintaining orderliness inside the warehouse/ storeroom. One of the store helpers shall be a certified forklift operator for warehouses requiring them.
Store Utility	Maintain cleanliness inside the warehouse/storeroom.

4. PROCEDURE: Routine Warehouse Management Tasks

Ref. No.	Key Step	Responsible Staff	Reference Document/ Record
4.1 WAREHOUSE EXTERIOR			
	4.1.1 **Monitoring of Warehouse Exterior -** Ensure that ceiling, walls, floors and vehicle access are intact and in good condition. ♦ Ceiling, Walls and Floors – Check for leaks, cracks, holes and uneven portion ♦ Drainage – Check for standing water ♦ Lightings – Check if there are busted/burnt out light bulbs ♦ Vehicle Access – Check accessibility *See Annex 28 – Warehouse Essentials* **If there are potential problem, perform Contingency Step 5.1*	1) Store Manager 2) Store Supervisor	• Warehouse Operations Routine Checklist • Location Map • Corrective Requisition on Warehouse Operations • Warehouse Essentials

4.2 WAREHOUSE INTERIOR		
4.2.1 **Monitoring of Warehouse Interior -** Ensure that ceiling, walls, floors and lighting are intact and in good condition. ♦ Ceiling, Walls and Floors – Check for leaks, cracks, holes and uneven portion ♦ Drainage – Check for standing water ♦ Lightings – Check if there are busted/burnt out light bulbs *See Annex 28 – Warehouse Essentials* **If there are potential problem, perform Contingency Step 5.2*	Store Manager Store Supervisor	• Warehouse Operations Routine Checklist • Location Map • Corrective Requisition on Warehouse Operations
4.3 GOOD STORAGE PRACTICES		
4.3.1 **Monitoring of Space -** Ensure that there is a designated area and ample space for the following: ♦ Receiving ♦ Quarantine ♦ Storage ♦ Staging ♦ Releasing ♦ Rejected / Damaged/ Pharmaceutical Wastes *See Annex 28 – Warehouse Essentials* **If there's space congestion in various areas in the warehouse, perform Contingency Step 5.3*	Store Manager Store Supervisor	• Warehouse Operations Routine Checklist • Location Map • Corrective Requisition on Warehouse Operations
4.3.2 **Segregation of Commodities -** Ensure that items are efficiently segregated based on its proper area, considering that **First-Expiry-First-Out (FEFO) and First-In-First-Out (FIFO) Principles** are respected at all times. • Transfer batch/lot of items which are first expiring/received in front or threshold of other batches with later expiry or later receiving date to promote ease on workflow and dispatch; • Update Location Map whenever movement of items occurs.	Store Manager Store Supervisor	• Warehouse Operations Routine Checklist • Location Map • Corrective Requisition on Warehouse Operations

4.3.3 **Stacking of Commodities -** Ensure that products are consistently stacked as performed and stated during Put-Away process: ● Stack cartons on pallets at least 10 cm (4 inches) off the floor with no more than 2.5 meters (8 feet) high; ● Place liquid products on lower shelves or bottom of stacks. Fragile items shall be stacked with no more than 1.5 meters (5 feet) high; ● Stack of cartons per pallet should fit in to the standard height of rack beams; ● Ensure that there is no reversed stacking of carton per pallet; ● Place cling wrap/ plastic wrap on top of the stack to maintain stability during storage and transport. **If there are commodities not properly stacked on pallet, perform Contingency Step 5.4*	Store Manager Store Supervisor	• Warehouse Operations Routine Checklist • Corrective Requisition on Warehouse Operations
4.3.4. **Product Quality Monitoring** – Observe product quality by visually and randomly inspecting for: ● Broken/ ripped packages; ● Missing or incomplete quantity of items; ● Unreadable/ripped Inventory Label Form; ● **For liquid and sterile products**: Moisture inside the packaging, leakage, discoloration, cloudiness, and sediment; ● **For tablets and capsules:** Stickiness, disintegration, discoloration, stain and unusual smell; ● **For tubes**: Stickiness, leaking contents and holes; ● **For blister packs and foil packs:** perforations. **If there are damaged and/or expired items discovered, perform Contingency Step 5.5 and refer to the process on Waste Management for Pharmaceuticals and Equipment (DOH-SCMS-WOM-SOP-07)*	Store Manager	• Location Map • Corrective Requisition on Warehouse Operations
4.3.5 **Ventilation** – Ensure ventilation and cooling by opening windows or air vents of the storage areas to allow air circulation and promote dehumidification if relative humidity exceeds acceptable limits inside the warehouse/storeroom. **If there are broken/non-functioning or insufficient fans/air vents, perform Contingency Step 5.6*	Store Manager Store Supervisor	• Supplies Request Form • Corrective Requisition on Warehouse Operations

4.3.6 **Temperature and relative humidity monitoring –** Ensure that thermohygrometer units are placed throughout the storage area for balanced monitoring. • For Vaccines, it is recommended to install a computerized monitoring system that can be directly linked with the temperature monitoring devices in different locations inside the cold room or freezer room for continuous monitoring. This computerized temperature monitoring system must enable ready access to temperature readings onsite and remotely at all times. • Maintain Temperature and Relative Humidity Monitoring Charts and Calibration Certificate hanged next to each thermohygrometer unit; • When computerized system fails to function, ensure to manually update and record Temperature and Relative Humidity Readings at least twice daily (Morning and Afternoon) using monitoring chart until the computerized temperature monitoring system is functional.s • Regularly check all Thermohygrometers if properly functioning and calibrated based on the recommendation of National Metrology Laboratory; • Keep Thermohygrometers Profile Database updated and facilitate advance re-calibration two (2) months or earlier prior its suggested re-calibration dates; • Ensure that re-calibration date do not overlap with other thermohygrometer units enable to maintain available units inside the warehouse. **If there are broken/non-functioning or insufficient Thermohygrometers, perform Contingency Step 5.7* *See Annex 18 – Temperature and Humidity Monitoring Chart* *See Annex 19 – Thermohygrometers Profile Database*	Store Manager Store Supervisor	• Temperature and Relative Humidity Monitoring Chart • Thermohygrometer's Profile Database • Calibration Certificate • Corrective Requisition on Warehouse Operations

4.3.7 **Temperature Requirement** – Store products based on its Temperature Requirement: ● **Normal Storage Conditions** - Dry, well-ventilated premises at temperature 15 up to 30 Degree Celsius. Excluding extraneous matter, contamination and intense light. ● **Defined Storage Conditions** - Drug products that must be stored under defined conditions require appropriate storage instructions. ○ **Do not store over 30 Degree Celsius** - store at 2 to 30 degree Celsius only. ○ **Do not store over 25 Degree Celsius** - store at 2 to 25 degree Celsius only. ○ **Do not store over 15 Degree Celsius** - store at 2 to 15 degree Celsius only. ○ **Do not store over 8 Degree Celsius -** store at 2 to 8 degree Celsius only. ○ **Protect from Moisture** - no more than 60% relative humidity. ○ **Protect from light** - do not expose to intense light and sunlight. **If commodities stored are not in accordance to its storage temperature requirement, perform Contingency Step 5.8*	Store Manager	• Warehouse Operations Routine Checklist • Temperature and Humidity Monitoring chart • Corrective Requisition on Warehouse Operations
4.3.8 **Protection from Sunlight** – Ensure that commodities are protected from direct sunlight: ● Shade the windows and use curtains if commodities are likely to be exposed to sunlight; ● Keep products in sealed carton; ● Do not store or pack products in sunlight; ● Use opaque plastic or dark glass bottles for products that require them. *See Annex 28 – Warehouse Essentials*	Store Manager Store Supervisor	• Warehouse Operations Routine Checklist • Supplies Request Form • Corrective Requisition on Warehouse Operations
4.3.9. **Product Identification –** Ensure all products per pallet are properly identified with readable, accurate and complete Bin Card or Product Identification Label at all times: **If there are unreadable label and/or changes on the information per pallet, perform Contingency Step 5.9* *See Annex 12 – Product Identification Label*	Store Manager Store Supervisor	• Warehouse Operations Routine Checklist • Bin Card • Product Identification Label • Corrective Requisition on Warehouse Operations

4.3.10 **FDA Status Identification** – Ensure all products requiring FDA Test Analysis are properly affixed with readable, updated and complete FDA Status Label per pallet: • Quarantine (yellow) – still waiting for FDA test analysis result and acceptance from the end-user • Passed/ Good Stocks (green) - for commodities that conform to FDA test analysis and/or accepted by the end-user already • Failed/ Bad Stocks (red) – for commodities which failed to conform to the FDA Test Analysis and/or rejected by the End-user **If FDA Status label is not updated, perform Contingency Step 5.10 to reflect necessary changes and updates* **If stored commodities as quarantine, **failed** the test analysis of FDA, perform Contingency Step 5.11* **If stored commodities as quarantine, **passed** the test analysis of FDA, perform Contingency Step 5.12*	Store Manager Store Supervisor	• Warehouse Operations Routine Checklist • FDA Status Identification Label • Corrective Requisition on Warehouse Operations
4.4 INVENTORY MANAGEMENT		
4.4.1 **Counter Checking of Bin Cards:** • Check completeness and accuracy of data in Bin Cards; • Review all attachment of Bin Cards per pallet / location; • Make sure that Bin cards are accessible and appropriately placed in their designated Bin Card Holder or right next to the pallet / location of the item. **If not updated and/or there are discrepancies discovered, perform Contingency Step 5.13 – 5.14*	Store Manager Store Supervisor	• Warehouse Operations Routine Checklist • Delivery Documents
4.4.2 **Counter Checking of Stock cards:** • Check completeness and accuracy of data in Stock cards; • Review all attachment of Stock Cards of all items stored ensuring that data complement with Bin Cards and other attachments; • Make sure that Stock cards are accessible and appropriately filed in their designated folder. **If not updated and/or there are discrepancies discovered, perform Contingency Step 5.15 – 5.16*	Store Manager	• Warehouse Operations Routine Checklist • Delivery Documents

4.4.3 **Counter Checking of Location Map** ● Check the consistency of data in Stock Cards and actual count of commodities based on the location map; ● Ensure that warehouse staff regularly the Location Map every after transaction. ● Conduct Random or cycle physical inventory on a weekly and monthly basis. **If not updated and there are discrepancies discovered, perform Contingency Step 5.17 – 5.18*	Store Manager Store Supervisor	• Warehouse Operations Routine Checklist • Delivery Documents • Location Map • Monthly Inventory Report
4.4.4 **Inventory Report** ● Check the consistency of data in monthly inventory report, by comparing it with Stock Cards and actual count of commodities; ● Ensure that warehouse staff regularly update the Inventory Report according to latest reporting protocol; ● Counter check the expiry dates of commodities in the inventory. Consistently coordinate with the end-user and supply planning unit the available stocks and corresponding expiry date of their commodities for allocation and distribution to prevent having near expiry; ● Conduct Random or cycle physical inventory in a weekly and monthly basis; ● Regularly assess the stock status by calculating Months of Stocks and Average Monthly Consumption of stocks in the inventory: ✓ To calculate Average Monthly Consumption, determine the quantity of items consumed or dispensed per month then calculate the total consumed quantity within the number of months covered. Divide the total quantity consumed/ dispensed by the total number of months covered. ✓ To calculate Months of Stock, determine the quantity stock on hand of an item in the inventory and divide it by the average monthly consumption. ● Monitor stocks based on the latest inventory policies on minimum/maximum level per commodity; ● Coordinate with the upper tier, health programs and/or supply planning unit on the procurement or replenishment schedule of stocks to avoid reaching critical level or stock out and maintain maximum level per commodity in the warehouse; ● In case there are near expiring commodities (i.e., less than 12 months shelf life) in the inventory, immediately inform the end-user and supply planning unit for urgent allocation and distribution. **If not updated and there are discrepancies discovered, perform Contingency Step 5.17 – 5.18*	Store Manager Store Supervisor	• Warehouse Operations Routine Checklist • Delivery Documents • Location Map • Monthly Inventory Report

4.4.5 **Inbound and Outbound Summary Report:** ● Check completeness and accuracy of data in Inbound and Outbound Summary; ● Ensure that warehouse staff regularly update Inbound and Outbound Record every after transaction, **If not updated and/or there are discrepancies discovered, perform Contingency Step 5.19*	Store Manager Store Supervisor	• Warehouse Operations Routine Checklist • Delivery Documents
4.4.6 **Warehouse Operations Routine Checklist** ● Accomplish quality checklist report (Annex 19) to ensure safe, efficient and quality warehouse operations at all times. *See Annex 15 – Warehouse Operations Routine Checklist*	Store Manager Store Supervisor	• Warehouse Operations Routine Checklist
4.5 WAREHOUSE SIGNAGE AND LABEL		
4.5.1 **Signage and Label for Safety and Precautionary Measures –** Maintain precautionary measures to protect personnel and stored commodities by ensuring that floor markings and warehouse signage are complete and in place. **If warehouse signage, floor markings are insufficient, perform Contingency Step 5.20* *See Annex 14 – Corrective Requisition on Warehouse Operations* *See Annex 28 – Warehouse Essentials*	Store Manager Store Supervisor	• Warehouse Operations Routine Checklist • Corrective Requisition on Warehouse Operations
4.6 WAREHOUSE EQUIPMENT		
4.6.1 **Equipment Maintenance –** Maintain necessary equipment used for the operation and preservation of all commodities stored inside the warehouse ● Check Jack lifts, Trolleys, Forklifts, Forklift safety cage and other needed equipment for any necessary maintenance; ● Check Ladders if available and properly functioning. **If there are broken/non-functioning or insufficient warehouse equipment, perform Contingency Step 5.21*	Store Manager Store Supervisor	• Warehouse Operations Routine Checklist • Corrective Requisition on Warehouse Operations

4.7 WAREHOUSE HOUSEKEEPING		
4.7.1 **Sanitation -** Clean receiving, quarantine, storage, staging, releasing and rejected areas to avoid any form of contamination: ● Keep all necessary cleaning materials available at all times; ● Sweep and mop or scrub the floors of the warehouse regularly; ● Wipe down the shelves and products to remove dust and dirt; ● Clean bins, shelves and cupboards as necessary; ● Request Rodent traps if necessary. **If cleaning materials are insufficient and/or not functioning, perform Contingency Step 5.22*	Warehouse Utility Staff Store helper	• Warehouse Operations Routine Checklist • Corrective Requisition on Warehouse Operations
4.7.2 **Protection against Pest** ● Ensure to comply with latest Pest Control Guidelines; ● Contact Details of office/agency responsible for Pest Control shall be easily accessible in case of urgent need and for regular scheduling. **If there are pests discovered, perform Contingency Step 5.23*	Warehouse Utility Staff Store helper	• Warehouse Operations Routine Checklist • Warehouse Operations Inspection Checklist
4.8 WASTE MANAGEMENT		
4.8.1 **Garbage Management -** Store garbage in covered receptacles and Dispose garbage often, in a manner that avoids attracting pests.	Warehouse Utility Staff	• Warehouse Operations Routine Checklist
4.8.2 **Pharmaceutical Waste Management –** In cases of discovering pharmaceutical wastes, refer to the process on waste management for pharmaceuticals Waste Management for Pharmaceuticals and Equipment (*DOH-SCMS-WOM-SOP-07*) and ensure compliance with the latest guidelines from the DOH.	Store Manager Store Supervisor	• Warehouse Operations Routine Checklist • Corrective Requisition on Warehouse Operations
4.9 DISTRIBUTION AND TRANSPORT		
4.9.1 **Distribution & Transport Management -** Ensure that latest SOPs for Shipping and protocols on distribution types are in place.	Store Manager Store Supervisor	• Warehouse Operations Routine Checklist

4.10 WAREHOUSE SAFETY AND SECURITY		
4.10.1 **Security Monitoring –** Observe store security and safety of items: • Identify and Provide increased security for products which are at risk of theft and abuse or have the potential for addiction (e.g. Narcotic, strong analgesics, psychotropic drugs, medicines and supplies that are scarce, expensive and with high demand) by keeping them in a separate locked room or cabinet with appropriate signage, precautions and restricted access for unauthorized personnel. • Other corrosives, flammable and cytotoxic materials shall also be separated in a secured and isolated area. • Entry to the location of the access - controlled products must be limited to the Manager and one other senior staff member only. • Limit the number of keys made for the controlled location and keep a list of people who have keys. • Always ensure availability and accessibility of logbooks to be filled up by the authorized personnel whenever access to the secured area/room is made. • Request to install security bars or metal bars to windows and doors that can be an access point for possible theft or pilferage inside the facility. • Ensure that there are sufficient numbers of CCTVs inside and outside the warehouse to cover efficient and balanced monitoring and review as necessary. **If in case, there are missing items, perform Contingency Step 5.18* *See Annex 14 – Corrective Requisition on Warehouse Operations* *See Annex 28 – Warehouse Essentials*	Store Manager	• Warehouse Operations Routine Checklist • Corrective Requisition on Warehouse Operations
4.10.2 **Safety and Precautionary Measures –** Maintain precautionary measures to protect personnel and ensure that protective personal equipment are complete and in place. **If protective personal equipment is insufficient, perform Contingency Step 5.24* *See Annex 14 – Corrective Requisition on Warehouse Operations* *See Annex 28 – Warehouse Essentials*	Store Manager Store Supervisor	• Warehouse Operations Routine Checklist • Corrective Requisition on Warehouse Operations

4.10.3 **Protection against fire** • Make standard fire extinguishers or fire sprinklers available in every storage facility according to national regulations; • Visually inspect fire extinguishers/ fire sprinklers every 2–3 months to ensure that pressures are maintained and the extinguisher is ready for use; • Service fire extinguishers and sprinklers at least every 12 months; • Contact details for fire-fighting department should be easily accessible in case of emergencies; • Ensure availability of smoke detectors throughout the storage facility and check them every 2–3 months to ensure that they are working properly; • Strictly prohibit smoking in the store; • Clearly mark emergency exits and check regularly to be sure that they are not blocked or inaccessible. **If there are broken/non-functioning or insufficient fire-fighting units and smoke detectors, perform Contingency Step 5.25* *See Annex 28 – Warehouse Essentials*	Store Manager Store Supervisor	• Warehouse Operations Routine Checklist • Corrective Requisition on Warehouse Operations

5. <u>CONTINGENCIES; CORRECTIVE ACTIONS:</u>

5.1. Take photos showing the broken/non-functioning ceilings, drainage, lighting, and vehicle access. Request for necessary repair and intervention to promote smooth operations in the warehouse, request for renovation to complement the ideal vehicle access layout. Produce Corrective Requisition on Warehouse Operations (See Annex 14) to be submitted to the Supply Officer. Refer to Warehouse Essentials (See Annex 28) to observe warehousing standards.

5.2. Take photos showing the broken/non-functioning ceilings, drainage, and lighting. Request for necessary repair and intervention to promote smooth and safe operations in the warehouse, request for renovation to complement the ideal warehouse facility interior. Produce Corrective Requisition on Warehouse Operations (See Annex 14) to be submitted to the Supply Officer. Refer to Warehouse Essentials (See Annex 28) to observe warehousing standards.

5.3. Take photos showing the current situation of the warehouse and produce Corrective Requisition on Warehouse Operations (See Annex 14) to be submitted to the Supply Officer. In cases of warehouse congestion and/or stock completion for picking and packing, recommend facilitating stock transfer to other available warehouses if necessary. Refer to Warehouse Essentials (See Annex 28) to observe warehousing standards.

5.4. Instruct store keeper and store helper to correct the stacking based on the guidelines on proper palletization and adjust accordingly.

5.5. Take photos of the damaged and/or expired item/s and facilitate investigation on its occurrence. Produce Incident Report (See Annex 16) and inform the Store Manager for proper documentation and corrective actions in accordance with latest issuance/guidelines on waste management for pharmaceuticals and equipment.

5.6. Take photos showing the broken/non-functioning unit of fan(s)/air vent(s) and request an additional unit if already insufficient to promote ventilation for the entire warehouse. Produce Corrective Requisition on Warehouse Operations (See Annex 14) to be submitted to the Supply Officer. Refer to Warehouse Essentials (See Annex 28) to observe warehousing standards.

5.7. Take photos showing the broken/non-functioning Temperature and Humidity Monitoring Device and request additional unit if already insufficient to cover monitoring of the entire warehouse. Produce Corrective Requisition on Warehouse Operations (See Annex 14) to be submitted to Supply Officer.

5.8. Ensure that air conditioners and fans are always working properly, and the storeroom ventilated accordingly. If not, request for air-conditioning maintenance/ repair and facilitate transfer of commodities to appropriate place/ area in accordance with its storage temperature requirement immediately. In case, there are no other places in the warehouse where the commodity can be stored according to its temperature and humidity requirements, initiate stock transfer to other warehouses suitable for the storage of the commodity as necessary while air-conditioning maintenance/repair is being conducted.

5.9. Instruct Store keeper to produce/update Bin Cards and or product labeling per pallet.

5.10. Instruct warehouse staff to affix an updated labeling on FDA Status per pallet.

5.11. Instruct warehouse staff to affix Failed FDA Test Status Identification Label to commodities which do not conform to Test Analysis and facilitate transfer of commodities to isolated areas (Rejected/Damaged Area) to prevent mix up and unintended issuance not later than 24 hours upon receipt of FDA Test Result. If there's no available area for Rejected/Damaged items, ensure that commodities are properly labelled or segregated in a manner that prevents mix-up. Further, produce an official letter to the supplier with the instruction to pull out failed commodities not later than five (5) days upon receipt of the letter. (See Annex 17).

5.12. Instruct warehouse staff to affix Passed FDA Test Status Identification Label to commodities which already conform to Test Analysis (Good Stocks) and facilitate transfer of commodities to appropriate area (Storage area) from Quarantine area. Ensure that commodities are properly labelled or segregated in a manner that prevents mix-up with items that are on quarantine or rejected/damaged. Further, follow up the approved Allocation List and/or shipment plan from the end-user and supply planning unit. If commodities with passed FDA Test Status and already accepted by the End-user, have Approved Allocation List and shipment plan, prepare Shipping Documents (Annex 25, 26 and/or 27)supply planning unit. If commodities with passed FDA Test Status and already accepted by the End-user, have Approved Allocation List and shipment plan, prepare Shipping Documents (Annex 25, 26 and/or 27)

5.13. Instruct Warehouse staff to produce/update Bin Card per pallet/ location of item.

5.14. Instruct Warehouse staff to correct invalid data entry, update accordingly and complete all the attachments needed to support every transaction in the Bin Card.

5.15. Instruct Warehouse staff to produce/update Stock Card per item in the warehouse.

5.16. Instruct Warehouse staff to correct invalid data entry, update accordingly and complete all the attachments needed to support every transaction in the Stock Card. Ensure that data between Stock Card and Bin Card complement each other.
5.17. Investigate why there are discrepancies between quantities on inventory and stock cards. Correct accordingly if confirmed that quantities are still intact. If there are missing items, refer to contingency step 6.18
5.18. Perform physical inspection of the warehouse to locate products. If products are located, instruct warehouse staff to update the documents accordingly. If not, investigate, review all CCTVs if necessary and produce Incident Report (See Annex 16) and inform Supply Officer for proper documentation and corrective actions in accordance with latest issuance/guidelines from Commission on Audit and Accounting Unit.
5.19. Instruct Warehouse staff to correct invalid data entry in the outbound/inbound summary report and complete missing data (*if there are any*).
5.20. Determine what are the needed warehouse signage, floor markings including their quantity. Produce Corrective Requisition on Warehouse Operations (See Annex 14) to be submitted to Supply Officer. Refer to Warehouse Essentials (See Annex 28) to observe warehousing standards.
5.21. Take photos showing the broken/non-functioning Jack lifts/Forklift/Trolleys and Ladders. Request additional unit if already insufficient to promote smooth and safe operations in the warehouse and if necessary, request for renovation to complement the ideal warehouse/ storeroom layout. Produce Corrective Requisition on Warehouse Operations (See Annex 14) to be submitted to Supply Officer. Refer to Warehouse Essentials (See Annex 28) to observe warehousing standards.
5.22. Inform Store Manager of the needed cleaning materials and fill up Corrective Requisition on Warehouse Operations (See Annex 14).
5.23. Inform Store Manager and coordinate with appropriate office/agency for Pest Control scheduling.
5.24. Determine what are the needed personal protective equipment including quantity. Produce Corrective Requisition on Warehouse Operations (See Annex 14) to be submitted to Supply Officer. Refer to Warehouse Essentials (See Annex 28) to observe warehousing standards.
5.25. Determine what are the needed fire-fighting units and smoke detectors including their quantity. Produce Corrective Requisition on Warehouse Operations (See Annex 14) to be submitted to Supply Officer. Refer to Warehouse Essentials (See Annex 28) to observe warehousing standards.

6. <u>DOCUMENTATION AND ATTACHMENTS:</u>

6.1. Delivery/ Shipping Documents
6.2. Incident Report
6.3. Inventory Label Form
6.4. Inventory Stock Keeping Record
6.5. Warehouse Operations Inspection Checklist
6.6. Corrective Requisition on Warehouse Operations

Storage and Warehousing

Store Manager	Store Supervisor	Store Keeper	Store Helper

Routine Warehouse/ Storage Management Tasks

I. Monitoring of Space
II. Sanitation
III. Product Quality Monitoring
IV. Stacking of Commodities
V. Inventory Label Monitoring
VI. Temperature and Relative Humidity Monitoring
VII. Ventilation
VIII. Protection of commodities from Sunlight
IX. Segregation of commodities
X. FEFO/FIFO Principles
XI. Security Monitoring
XII. Safety and Precautionary Measures
XIII. Protection against Fire
XIV. Pest Control

Routine Warehouse Documentation Tasks

DOH-SCMS-WOM-SOP-05	**PICK AND PACK**

1. PURPOSE:

To ensure that health commodities are assembled accurately based on the approved Allocation List or Requisition from the Health Program and/or Supply Planning Unit prior to shipment of goods.

2. SCOPE:

This procedure covers the process of the picking and packing in the warehouse including associated documentation.

3. RESPONSIBILITY:

Title	Responsibility
Store Manager	Countercheck and approve shipping documents and assembled items and affix signature in the required documents.
Store Supervisor	Oversee picking and packing subtasks including required documentations and counter check size and weight of consignments. Update location maps.
Store Keeper	Assist in picking and packing of items per facility. Ensure accuracy of picking and packing.
Store Helper	Pick items based on the pick list, place items in designated areas for packing and assemble items per facility.
Office Clerk/ Encoder	Prepares PTR/BL/RIS in accordance with the approved shipment plan, approved Allocation List and/or official approved request.

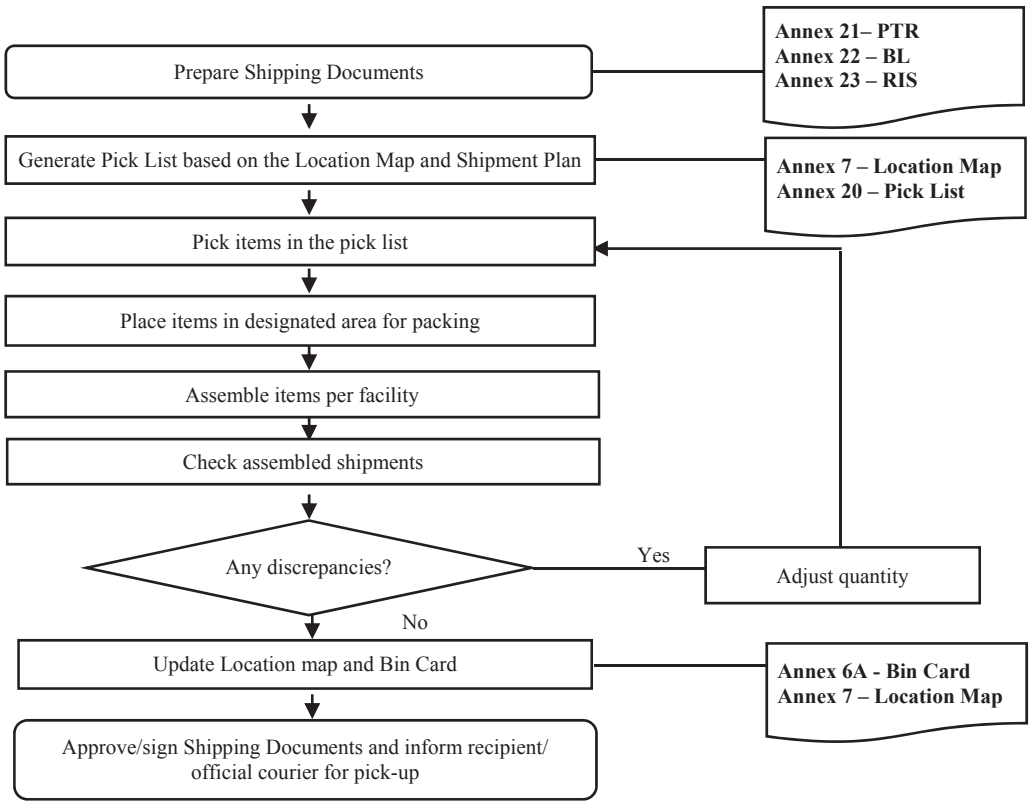
4. PROCEDURE:

Ref. No.	Key Step	Responsibility	Reference Document/Record
4.1.	Generate Shipping Documents (PTR/BL/RIS) based on approved Allocation List, Shipment Plan and/ or Officially Approved Request from Health Programs or Supply Planning Unit. Endorse to Authorized Personnel for signature. *See Annex 21 – PTR* *See Annex 22 – BL* *See Annex 23 – RIS*	Office Clerk/ Encoder	• Approved Allocation List • Approved Request • Monthly Inventory Report • Shipment Plan

4.2.	Generate Pick List, based on the Shipment Plan, Approved Allocation List and/or Shipping Documents, following FEFO/FIFO principles. Pick List details shall include information from PO/Contract, DR/ SI and location map as follows but not limited to: • Location code • Product name • Dosage Form and Strength *(for pharmaceuticals)* • Unit of Measure • Quantity • Batch/lot number • Expiry Date *See Annex 20 – Pick List* *If reference documents are not updated, perform Contingency Step 6.1*	Store Keeper Store Supervisor	• Shipment Plan • Inventory Stock Keeping Records • Location Map
4.3.	Endorse pick list and shipment plan to store supervisor and store keeper	Store Supervisor	• Pick list • Shipment Plan • Approved Allocation List
4.4.	Pick items in the pick list: Proceed to the storage location of the first product on the "Pick List" and pick the products with the exact details as stated on the "Pick List" using appropriate picking tool/equipment. *If the item stated on the Pick list is not present in the specified storage location, perform Contingency Step 6.2*	Store helper	• Pick list • Shipment Plan Approved Allocation List
4.5.	Place the products in the designated area *If the designated area for picking and packing is not available, perform Contingency Step 6.3*	Store helper	• Pick list • Shipment Plan • Approved Allocation List • Location Map

4.6.	Assemble the health commodities per facility according to the pick list	Store helper	• Pick list • Shipment Plan • Approved Allocation List
4.7.	Counter check the size and/or weight of consignment	Store Supervisor	• Approved Allocation List • Pick list • Shipment Plan • Shipping Documents
4.8.	Check assembled shipments *If there are discrepancies, perform Contingency Step 6.4*	Store Supervisor	• Pick list • Shipping Documents
4.9.	Update Bin Card	Store Keeper	• Pick list • Shipping Documents
4.10.	Update Location map	Store Supervisor	• Pick list • Shipping Documents
4.11.	Countercheck and sign Shipping Documents and inform recipient/ official courier for pick-up	Store Manager	• Shipment Plan • Pick list • Shipping Documents

5. PROCESS FLOW DIAGRAM: SOP 5 – Picking and Packing



6. CONTINGENCIES; CORRECTIVE ACTIONS:

6.1. Instruct Warehouse staff to correct invalid data entry in the location map and inventory (*if there are any*) and update accordingly.

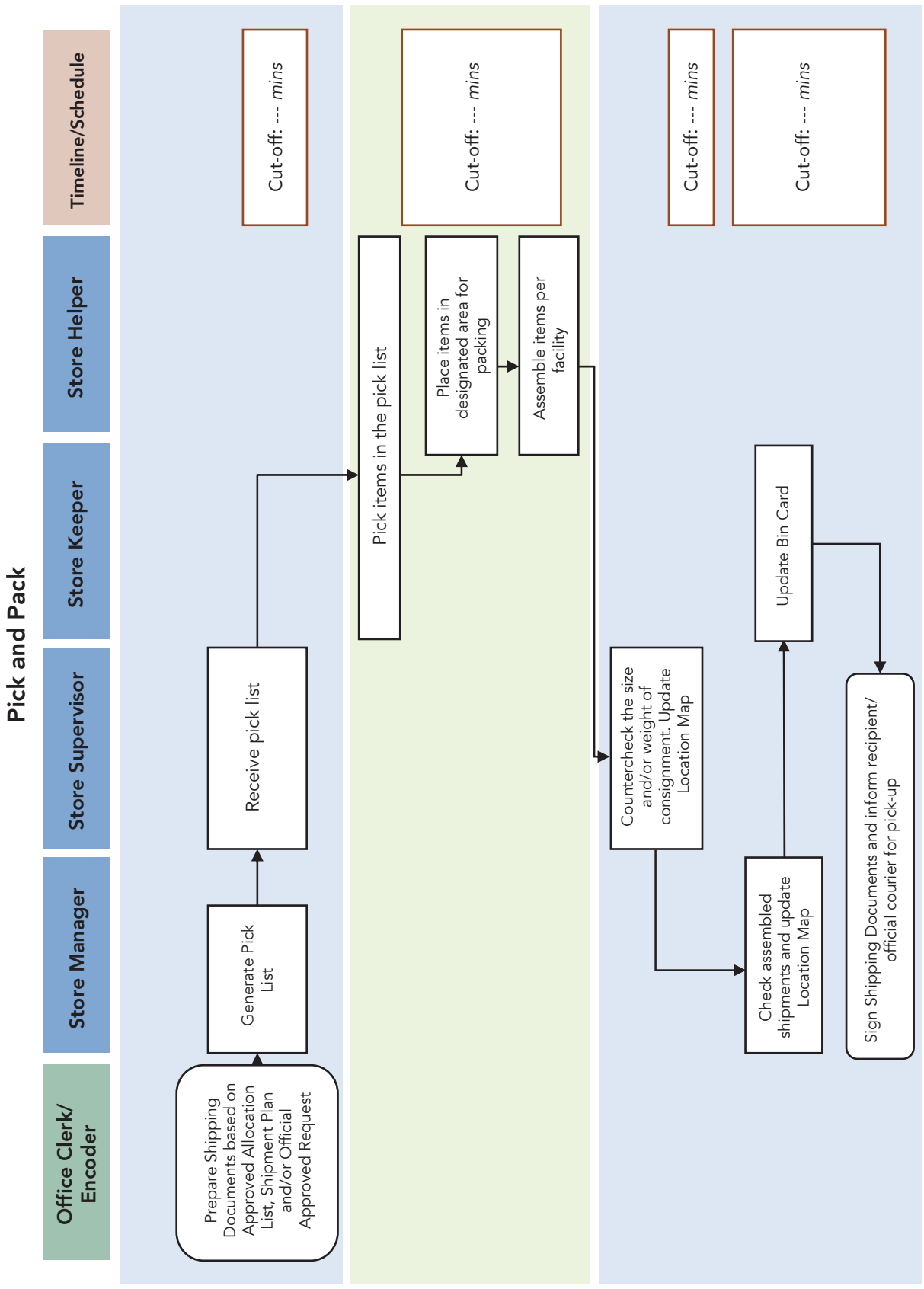
6.2. Perform physical inspection of the warehouse to locate products. If products are located, update the documents accordingly. If there are missing quantity or damaged items, report to Store Manager and produce Incident Report (See Annex 16) and inform the Supply Officer for proper documentation and corrective actions.

6.3. If picking and packing area is congested, facilitate transfer of stocks to a tentative vacant area in the warehouse to be used for assembling of items.

6.4. Instruct the Store helper/keeper to correct the discrepancy: return excess or add deficient items if there are any.

7. DOCUMENTATION AND ATTACHMENTS:

7.1. Approved Allocation List
7.2. Approved Request Letter requesting for commodity
7.3. Endorsement of the approved Letter from the End-User regarding the release of commodities prior to the FDA Test Result *(If applicable)*
7.4. FDA Test Analysis Results
7.5. Location Map
7.6. Pick List
7.7. Shipping Documents
7.8. Shipment Plan


Pick and Pack
Office Clerk/ Encoder
Store Manager
Store Supervisor
Store Keeper
Store Helper
Timeline/Schedule
Prepare Shipping Documents based on Approved Allocation List, Shipment Plan and/or Official Approved Request
Generate Pick List
Receive pick list
Pick items in the pick list
Place items in designated area for packing
Assemble items per facility
Countercheck the size and/or weight of consignment. Update Location Map
Check assembled shipments and update Location Map
Update Bin Card
Sign Shipping Documents and inform recipient/ official courier for pick-up
Cut-off: --- mins
Cut-off: --- mins
Cut-off: --- mins
Cut-off: --- mins

DOH-SCMS-WOM-SOP-06	**DISPATCH**

1. PURPOSE:

To ensure accurate and timely dispatch of health commodities to 3PL Courier/ recipients based on the approved shipping documents following appropriate handling techniques.

2. SCOPE:

This procedure covers the releasing of commodities from the warehouse ensuring proper documentation.

3. RESPONSIBILITY:

Title	Responsibility
Store Manager	Oversee and supervise warehouse staff in their tasks during and after the dispatch process. Countercheck Inventory Stock Keeping Records. Consolidate and file carbon copy of stamped Shipping Documents and ensure to send original copy to Payment Section and/or Accounting.
Store Supervisor	Endorse assembled items and signed Shipping Documents for dispatch to 3PL/recipient. Prepare Gate Pass, ensure that Shipping Documents are properly stamped and received by the 3PL/recipient. Update Monthly Inventory Report and Outbound Records accordingly.
Store Keeper	Assist in handing over items for dispatch to the 3PL/recipient, endorse gate pass, and update inventory stock keeping records.
Store Helper	Hand over items for dispatch to the 3PL/recipient.
Security	Perform security protocols at the start and end of the dispatch process. Facilitate separate documentation for all items and quantities released.

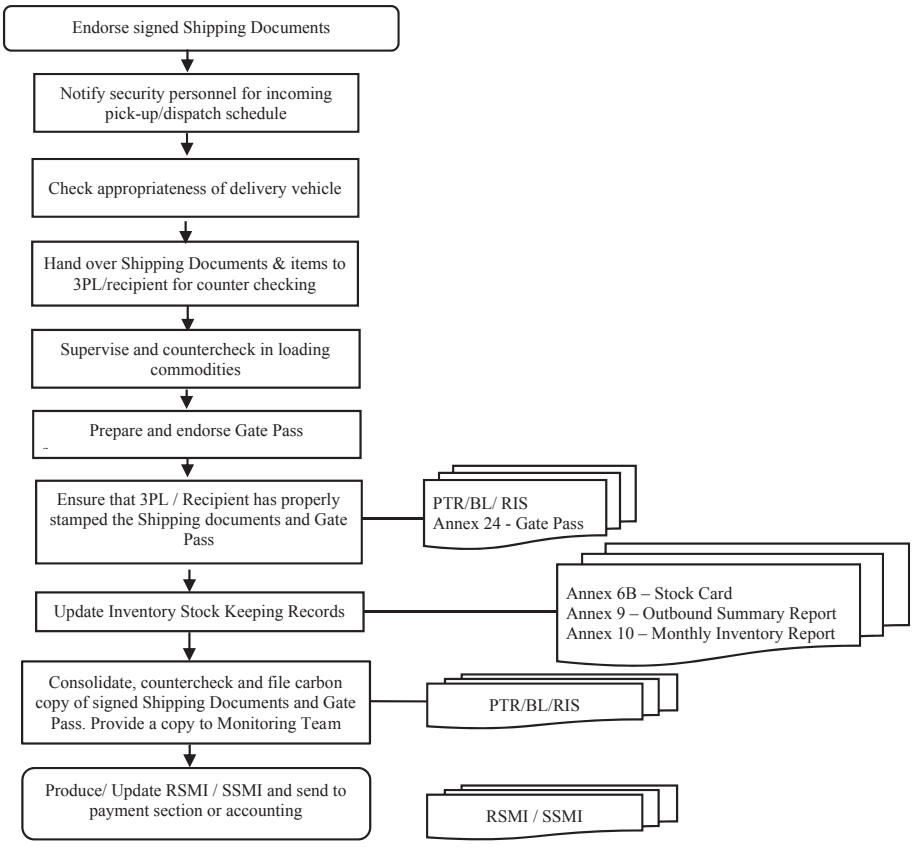
4. PROCEDURE:

Ref. No.	Key Step	Responsibility	Reference Document/ Record
4.1	Endorse signed Shipping Documents (BL/PTR/RIS) and shipment plan to Store Supervisor. *See Annex 21, 22 and 23*	Store supervisor Store Manager	• Shipping Documents • Shipment Plan • Approved Allocation List • Approved Request Letter for release of item (If applicable)
4.2	Notify Security Personnel for incoming pick-up/ dispatch schedule.	Store supervisor	• Shipping Documents

4.3	Check the appropriateness of the vehicle and ensure the following: • Check for leaks and sharp edges which could damage commodities during transport; • If commodities for dispatch require controlled temperature storage, ensure that the vehicle is well air-conditioned which contains temperature and relative humidity measuring units to maintain its temperature requirement during transportation; • If applicable, ensure GPS and Transportation monitoring mechanisms are well-functioning. **If the vehicle is unfit to transport the allocated items, perform Contingency Step 6.1. Otherwise, proceed to the next step.*	Store supervisor	• Transportation monitoring mechanism
4.4	Hand over items to 3PL/recipient for counter checking. **If there are missing items discovered during checking of 3PL/recipient, perform Contingency Step 6.2* **If there are damaged items discovered during checking of 3PL/recipient, perform Contingency Step 6.3*	Store keeper Store helper	• Shipping Documents • Shipment Plan • Approved Allocation List • Approved Request Letter for release of item (If applicable)
4.5	Supervise 3PL/recipient in loading the allocated commodities. Ensure that loaders/porters properly stack all commodities in the vehicle. If applicable, instruct 3PL/recipient to Put cling/plastic wrap on stacks and fill up free spaces in the vehicle with bubble wraps, cartons, or any other non-hazardous fillers to maintain stability between stacks and prevent packaging damages during transportation.	Store supervisor	• None
4.6	Countercheck items for dispatch and prepare Gate Pass for signature of the approving authority (Store Manager / Store Supervisor). Endorse to 3PL/ recipient. *See Annex 24 – Gate Pass*	Store Keeper	• Gate pass

4.7	Ensure that the 3PL representative / recipient has properly stamped Shipping Documents and Gate Pass with a copy of official ID as attachment. Hand over to Store Manager for counter checking and filing.	Store Keeper	• Shipping Documents • Gate Pass • Waybill
4.8	Update Outbound records and Monthly Inventory Report and endorse to Store Manager for checking. *See Annex 9 – Outbound summary report* *See Annex 10 – Monthly Inventory Report*	Store supervisor	• Inventory Stock Keeping Records
4.9	Update Stock Cards and endorse to the Store Manager for checking.	Store Supervisor	• Inventory Stock Keeping Records
4.10	Consolidate, countercheck and file carbon copy of Shipping Documents and gate pass stamped by the courier/ recipient. Provide a copy to the Supply Officer and/or Monitoring Unit.	Store Manager	• Shipping Documents • Gate Pass
4.11	*If applicable: Produce/Update RSMI / SSMI and send to payment section / accounting.	Office Clerk	• Signed Shipping Documents

5. PROCESS FLOW DIAGRAM: SOP 6 - Dispatch



6. CONTINGENCIES; CORRECTIVE ACTIONS:

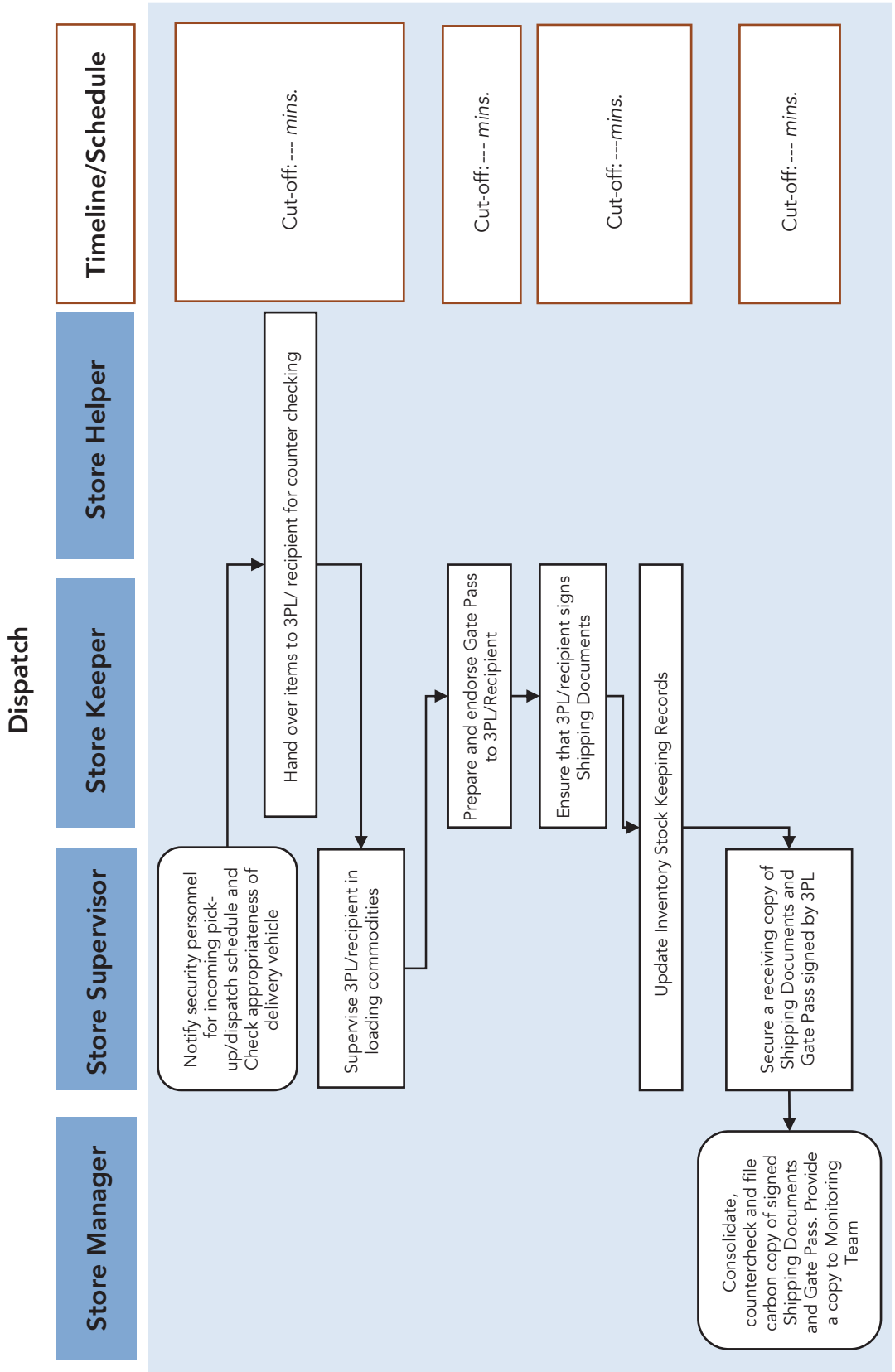
1.1 Inform the warehouse manager and report to the courier pertaining to the incident. Reschedule the releasing accordingly and provide supporting reports for the KPI monitoring of the 3PL.

1.2 Perform physical inspection of the warehouse to locate products. If products are located, update the documents accordingly. If not, investigate, review all CCTVs if necessary and produce Incident Report (See Annex 16) and inform the Store Manager and Supply Officer for proper documentation and corrective actions.

1.3 Take photos of the damaged item/s and facilitate investigation on its occurrence. Produce Incident Report (See Annex 16) and inform the Store Manager and Supply Officer for proper documentation and corrective actions.

7. DOCUMENTATION AND ATTACHMENTS:

7.1. BL
7.2. Gate Pass
7.3. Inventory Stock Keeping Records
7.4. PTR
7.5. RIS
7.6. Shipment Plan
7.7. Summary of Supplies and Materials Issued (SSMI)


Dispatch
Store Manager
Store Supervisor
Store Keeper
Store Helper
Timeline/Schedule
Notify security personnel for incoming pick-up/dispatch schedule and Check appropriateness of delivery vehicle
Hand over items to 3PL/ recipient for counter checking
Cut-off: --- mins.
Supervise 3PL/recipient in loading commodities
Prepare and endorse Gate Pass to 3PL/Recipient
Cut-off: --- mins.
Ensure that 3PL/recipient signs Shipping Documents
Cut-off: ---mins.
Update Inventory Stock Keeping Records
Secure a receiving copy of Shipping Documents and Gate Pass signed by 3PL
Cut-off: --- mins.
Consolidate, countercheck and file carbon copy of signed Shipping Documents and Gate Pass. Provide a copy to Monitoring Team

DOH-SCMS-WOM-SOP-07	**WASTE MANAGEMENT FOR PHARMACEUTICALS AND UNSERVICEABLE MEDICAL EQUIPMENT**

1. PURPOSE:

To ensure that wastages in cases of product damage or expiration are managed in accordance with latest waste management guidelines and legal standards.

2. SCOPE:

This procedure covers the handling of pharmaceutical wastes and unserviceable items upon discovery until its release from the warehouse for disposal/ replacement. This process must be connected to the latest guidelines on pharmaceutical waste management by the DOH and Commission on Audit (COA) in coordination with the Department of Environment and Natural Resources (DENR).

3. RESPONSIBILITY:

Title	Responsibility
Supply Officer	Inspect the pharmaceutical wastes/ damaged equipment with the End-user and relevant offices and review the Inventory and Inspection Report of Unserviceable Property (IIRUP) and Waste Materials Report (WMR) for submission to the Accounting Unit.
Store Manager	Review the Incident Report, counter check relevant documents and pharmaceutical wastes/ damaged equipment for dispatch. Prepare and submit to Supply Officer the Inventory and Inspection Report of Unserviceable Property (IIRUP) and Waste Materials Report (WMR).
Store Supervisor	Assist in the preparation of the Inventory and Inspection Report of Unserviceable Property (IIRUP) and Waste Materials Report (WMR). Counter check the stock keeping records and relevant documents for the dispatch of pharmaceutical wastes/ damaged equipment
Store Keeper	Facilitate updating of stock keeping records. Make a separate inventory for the discovered pharmaceutical wastes/ damaged equipment for tracking purposes.
Store Helper	Facilitate transfer of the pharmaceutical wastes/ damaged equipment to a separate area for proper segregation. Put a label on the stack of pharmaceutical wastes/ damaged equipment for proper identification.
Security	Perform security protocols at the start and end of the dispatching process for pharmaceutical wastes/ damaged equipment. Facilitate separate documentation for all items and quantities released.

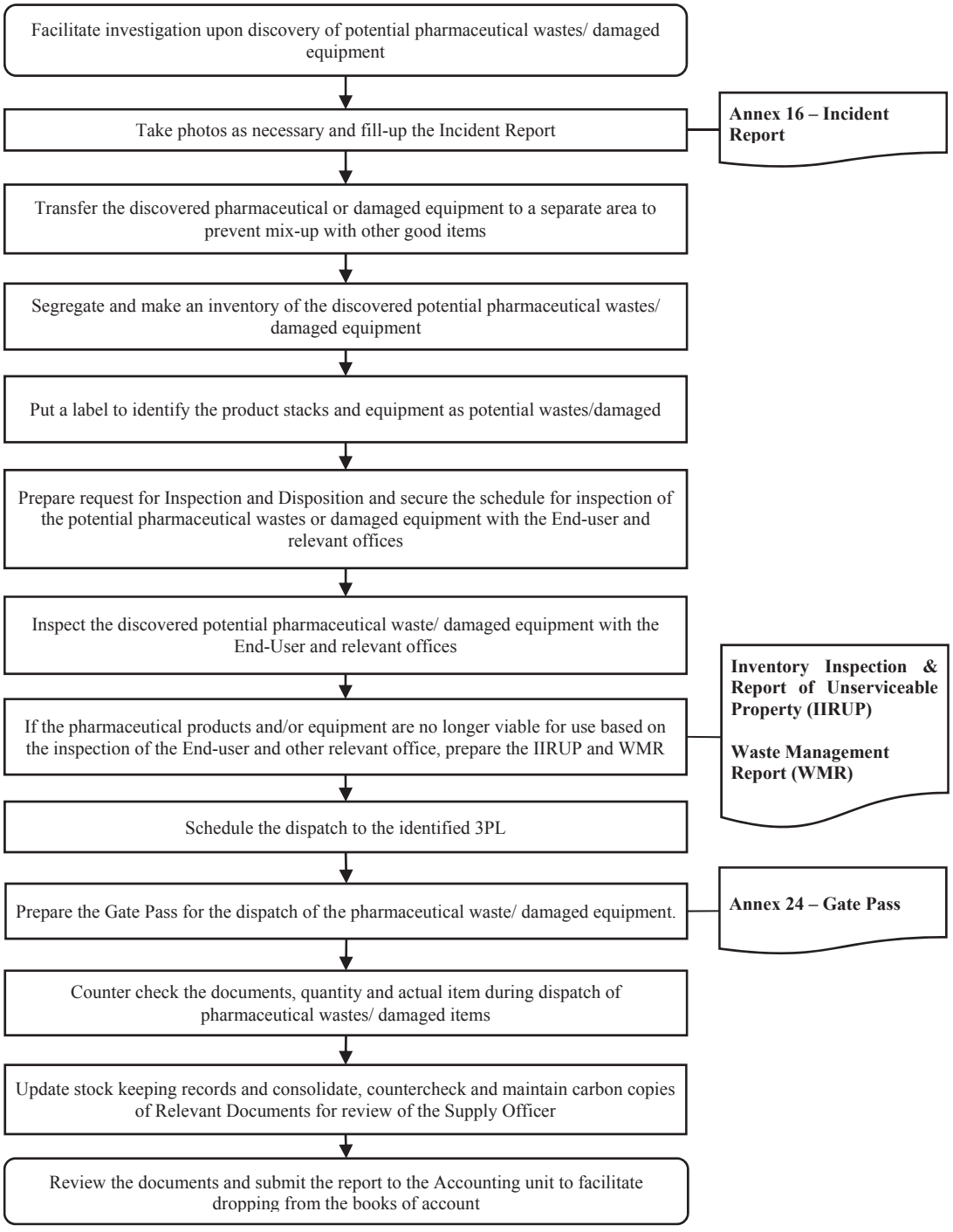
4. PROCEDURE:			
Ref. No.	**Key Step**	**Responsible**	**Reference Document/ Record**
4.1	Upon discovery of potential pharmaceutical wastes or damaged equipment in the warehouse/storeroom, immediately inform the Store Manager and facilitate investigation. Take photos as necessary and fill-up the Incident Report (IR) *See Annex 16 – Incident Report*	Store Manager Store Supervisor Store Keeper Store Helper Security Officer	• Incident Report
4.2	Transfer the pharmaceutical wastes/ used vials/ used and/ or damaged equipment from areas where good items are stored to a separate area in the warehouse dedicated only for potential pharmaceutical waste and damaged items to avoid mix-up with other good items in the warehouse. ***Note**: Handle pharmaceuticals with caution and refer to the product's Material Safety Data Sheet (MSDS) if available for specific instruction.*	Store Keeper Store Helper	Location Map
4.3	Segregate and make an inventory of the pharmaceutical wastes/ used vials/ used and/or damaged equipment and reflect the quantity in the warehouse/ storeroom inventory	Store Keeper Store Helper	• Inventory Report • Stock/Bin Cards
4.4	Put appropriate label to the stack of pharmaceutical wastes/ used vials/ used and/ or damaged equipment for proper identification	Store Keeper Store Helper	Product label indicating "potential pharmaceutical wastes/ damaged equipment"

4.5	Prepare request for Inspection and Disposition (*please refer to the COA's Government Accounting Manual*) and secure the schedule for inspection of the pharmaceutical wastes/ used vials/ used and/or damaged equipment with the End-user, Accounting unit and relevant offices (*if the pharmaceutical wastes are controlled substances, inform PDEA as well*)	Store Supervisor	• Relevant Report/Forms • COA's Government Accounting Manual
4.6	If the pharmaceutical products and/or equipment are no longer viable for use based on the inspection of the End-user and other relevant office, prepare the Inventory and Inspection Report of Unserviceable Property (IIRUP) and/or Waste Materials Report (WMR) of COA *Please refer to the latest template of IIRUP and WMR from COA* *If the pharmaceutical product or medical equipment is still viable for use based on the inspection and assessment of the End-user and other relevant office, perform contingency step 6.1. Otherwise, proceed to the next step.*	Store Manager Store Supervisor	Waste Management Report (WMR) or Inventory and Inspection Report of Unserviceable Property (IIRUP), as appropriate
4.7	Schedule the dispatch of pharmaceutical waste/ used vials/ used and/or damaged medical equipment to the: 1) identified 3PL for reverse logistics that will pull-out the items and transfer to a more central location for disposal in coordination with the upper tier (DOH Central or Regional Office) **Or**	Store Supervisor	Relevant Report/Forms

	(Cont'd.) 2) identified 3PL involved in disposal of pharmaceutical wastes and damaged equipment in your respective regions and/or localities *Note: For Pharmaceutical Wastes, ensure to comply with the latest guidelines on pharmaceutical waste management of DOH*		
4.8	Prepare the Gate Pass for the dispatch of the pharmaceutical waste/ damaged equipment. *See Annex 24 – Gate Pass*	Store Keeper	Gate Pass
4.9	Counter check the documents, quantities and actual item during dispatch of pharmaceutical wastes/ damaged items. Ensure that relevant Documents and gate pass are stamped as received by the 3PL of Pharmaceutical waste or damaged equipment.	Store Manager Store Supervisor	• Inventory and Inspection Report of Unserviceable Property (IIRUP) or Waste Materials Report (WMR) • Gate Pass
4.10	Update stock keeping records	Store Supervisor Store Keeper	• Inventory • Stock/Bin cards • Outbound summary Report
4.11	Consolidate, countercheck and maintain carbon copies of Relevant Documents for review of the Supply Officer.	Store Manager	• Outbound summary Report • Inventory and Inspection Report of Unserviceable Property (IIRUP) or Waste Materials Report (WMR) • Gate Pass

4.12	Review the documents and submit the report to the Accounting unit to facilitate dropping from the books of account.	Supply Officer	Relevant Report/Forms

5. PROCESS FLOW DIAGRAM: SOP 7 – Waste Management for Pharmaceuticals and Unserviceable Equipment



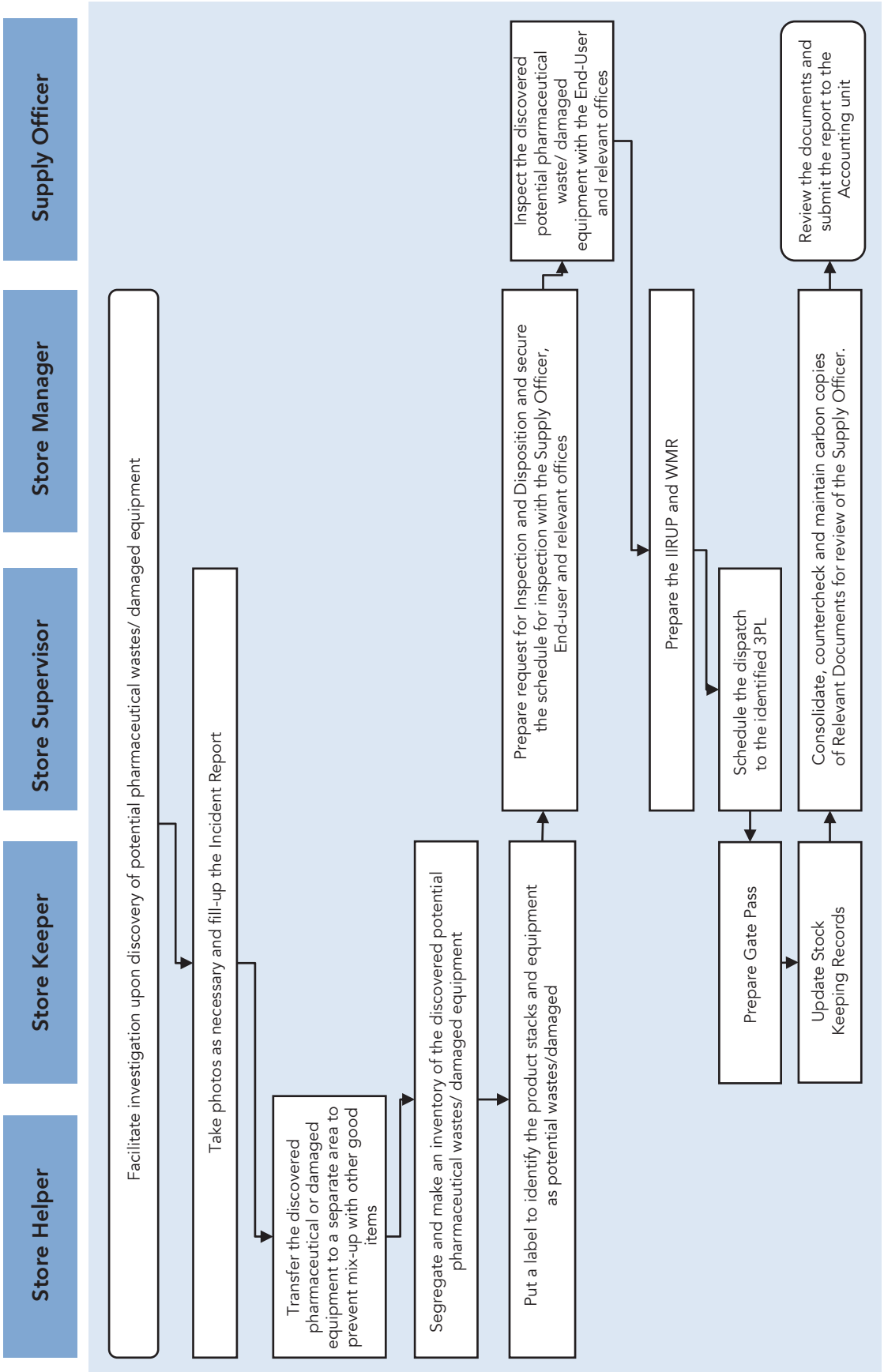
6. CONTINGENCIES; CORRECTIVE ACTIONS:

6.1 Return the item in the inventory and put appropriate label.

7. DOCUMENTATION AND ATTACHMENTS:

7.1. Gate Pass
7.2. Incident Report
7.3. Inventory Inspection & Report of Unserviceable Property
7.4. Waste Management Report

Waste Management for Pharmaceuticals and unserviceable equipment



DOH-SCMS-WOM-SOP-08-A	**REVERSE LOGISTICS: PRODUCT RECALL**

1. PURPOSE:

To ensure that reverse logistics are well coordinated between Central, Regional and Local levels when product recall is necessary due to manufacturing defects, contamination and other quality and safety concerns associated with the product.

2. SCOPE:

This procedure covers the handling of items for recall upon receiving of notice to facilitate reverse logistics in coordination with Supplier(s), Manufacturer(s) and/or the upper tiers (DOH Central or Regional Offices).

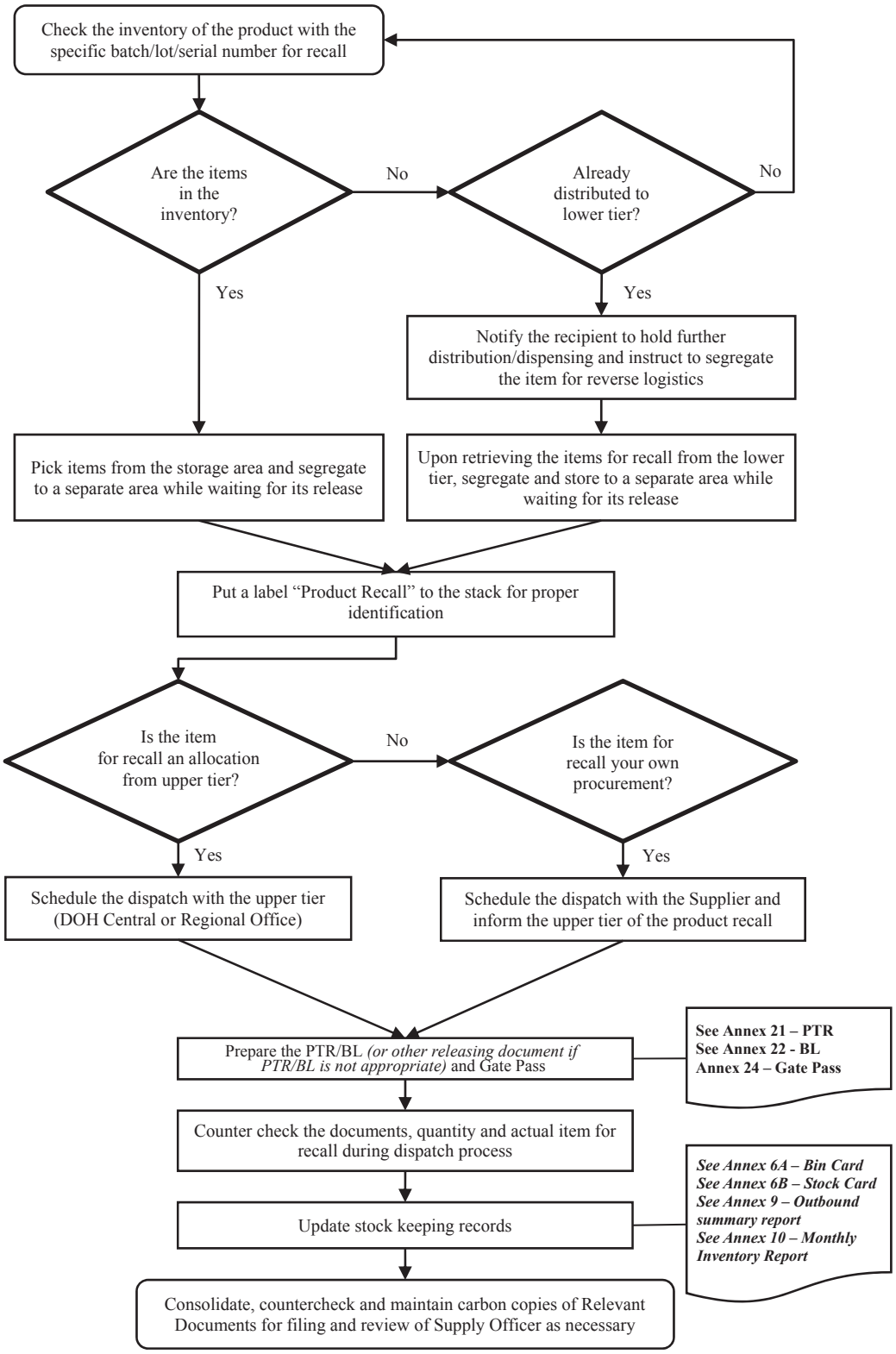
3. RESPONSIBILITY:

Title	Responsibility
Supply Officer	Communicate with Store Manager the notice for products recall. Coordinate with relevant offices/entities involved in the reverse logistics process. Counter check relevant documents in the process of reverse logistics.
Store Manager	Ensure that the procedures and associated documentations are performed accordingly by warehouse staff. Assist in coordination with relevant offices/ entities involved in the reverse logistics process.
Store Supervisor	Counter check stock keeping records and ensure that relevant documents are filed accordingly for reference and tracking. Assist the Store Manager in coordinating with relevant offices/ entities involved in the reverse logistics process.
Store Keeper	Update stock keeping records and assist in the process of dispatch of products for recall
Store Helper	Segregate products for recall and store in a separate area ensuring that appropriate label is attached on the items while waiting for release.
Security	Perform security protocols at the start and end of the dispatching process for products for recall. Facilitate separate documentation for all items and quantities released.

4. **PROCEDURE:**			
Ref. No.	**Key Step**	**Responsibility**	**Reference Document/ Record**
4.1	Upon receiving the notice for product recall from the FDA and/or supplier, check the inventory of the product with the specific batch/lot/ serial number for recall in the inventory	Store Manager Store Supervisor	• Notice for product recall • Inventory Report
4.2	If the item is in the inventory, pick items from the storage area and segregate to a separate area while waiting for its release	Store Helper	• Inventory Report • Location Map
4.3	If the item with the specific batch/lot/serial number for recall was already distributed to the lower tier (establishments or facilities) under your jurisdiction, notify them to hold further distribution/dispensing and instruct to segregate the item for reverse logistics.	Store Supervisor	• Inventory Report • Stock Card • Outbound records
4.3.1	Schedule the pick-up with the identified 3PL to the lower tier (establishments or facilities) under your jurisdiction where items with the specific batch/lot/serial number for recall are located	Store Supervisor	• Stock Card • Outbound records
4.3.2	Upon receiving the items for recall from the lower tier, segregate and store to a separate area while waiting for its release	Store Keeper Store Helper	
4.4	Put a label "Product Recall" to the stack for proper identification	Store Helper	Product label indicating "For Product Recall"
4.5	Schedule the dispatch of the product for recall with: 1) The supplier (if direct procurement of your office) 2) The upper tier (DOH Central or Regional Office if the item is allocated by them)	Store Supervisor	None

4.6	Prepare the PTR/BL and Gate Pass *(indicating the item is for recall)* *See Annex 21 – PTR* *See Annex 22 - BL* *See Annex 24 – Gate Pass*	Store Keeper	• Notice for product recall • PTR/BL • Gate Pass
4.7	Counter check the documents, quantities and actual item for recall during dispatch process. Ensure that relevant Documents and gate pass are stamped as received by the 3PL	Store Manager Store Supervisor	• Notice for product recall • PTR/BL • Gate Pass
4.8	Update stock keeping records *See Annex 6A – Bin Card* *See Annex 6B – Stock Card* *See Annex 9 – Outbound summary report* *See Annex 10 – Monthly Inventory Report*	Store Keeper Store Supervisor	• Inventory Report • Bin/Stock Card • Outbound records
4.9	Consolidate, countercheck and maintain carbon copies of Relevant Documents for filing and review of Supply Officer as necessary	Store Manager	• Notice for product recall • Stock keeping records • Outbound records

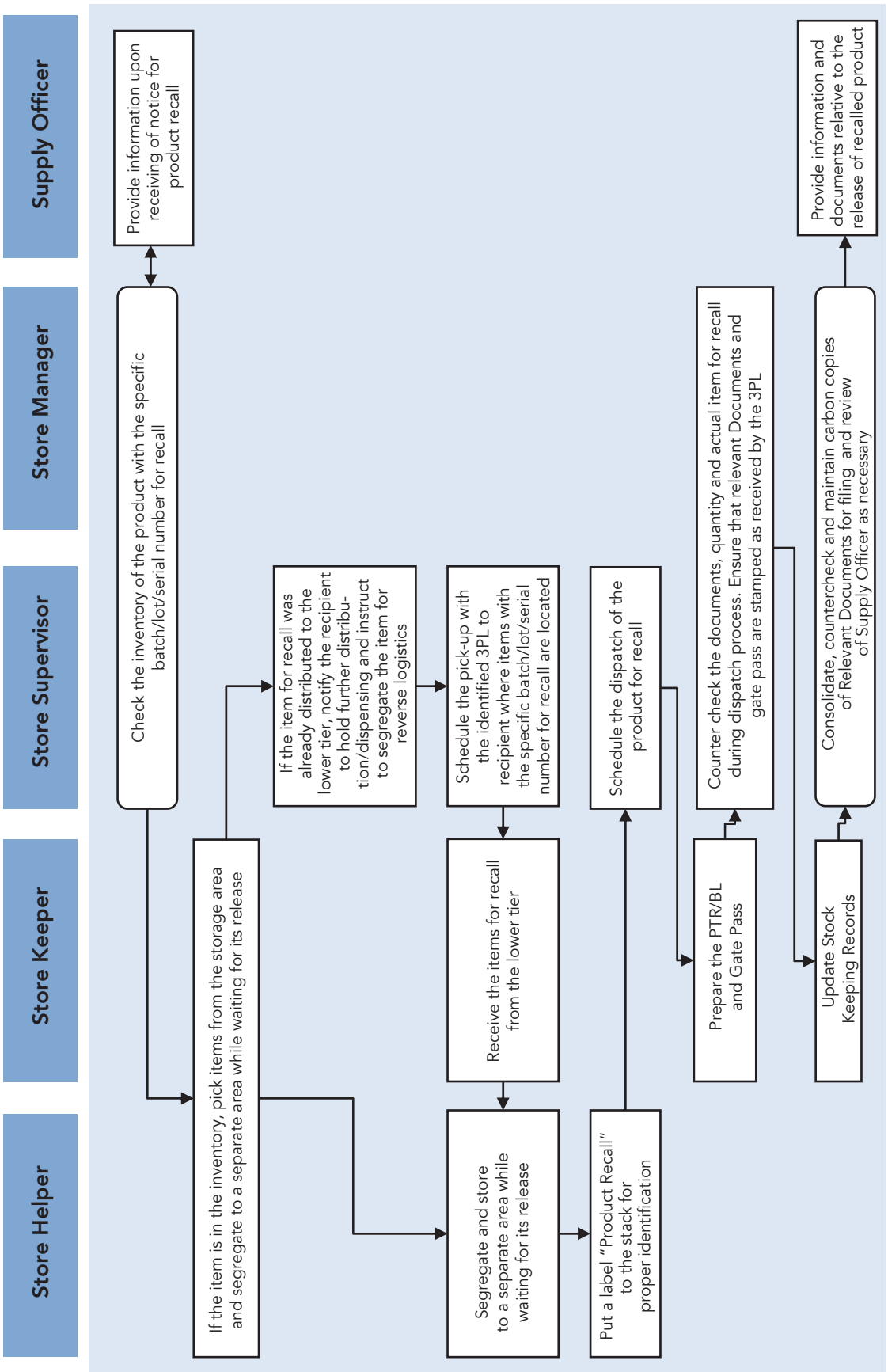
5. PROCESS FLOW DIAGRAM: SOP 8-A – Reverse Logistics: Product Recall



6. DOCUMENTATION AND ATTACHMENTS:

6.1. Bill of Lading
6.2. Bin Card
6.3. Gate Pass
6.4. Location Map
6.5. Notice of Recall
6.6. Property Transfer Report
6.7. Outbound summary report
6.8. Stock Card

Reverse Logistics: Product Recall



DOH-SCMS-WOM-SOP-08-B	**REVERSE LOGISTICS: PULLING ITEMS FROM LOWER TIERS FOR REDISTRIBUTION**

1. PURPOSE:

To ensure that reverse logistics are well coordinated with health programs and between Central, Regional and Local levels when product re-distribution is necessary due to re-allocation or stock re-alignment.

2. SCOPE:

This procedure covers the process of pulling items from lower tiers for redistribution to other facilities to balance stock and prevent stock-out and/or expiration.

3. RESPONSIBILITY:

Title	Responsibility
Supply Officer	Analyze stock status of health commodities in lower tier warehouses and health facilities. Determine if stock realignment is necessary. Coordinate with relevant offices/ entities involved in the reverse logistics process. Counter check relevant documents in the process of reverse logistics for re-distribution.
Store Manager	Ensure that the procedures and associated documentations are performed accordingly by warehouse staff. Assist in coordination with relevant offices/ entities involved in the reverse logistics process.
Store Supervisor	Counter check stock keeping records and ensure that relevant documents are filed accordingly for reference and tracking. Assist the Store Manager in coordinating with relevant offices/ entities involved in the reverse logistics process.
Store Keeper	Update stock keeping records and assist in the process of receiving and dispatch of products for redistribution.
Store Helper	Facilitate receiving of items from lower tiers, picking & packing of products for re-distribution and hand over to 3PL ensuring that necessary documents are stamped as received.
Security	Perform security protocols at the start and end of the receiving and dispatching process. Facilitate separate documentation for all items and quantity released.

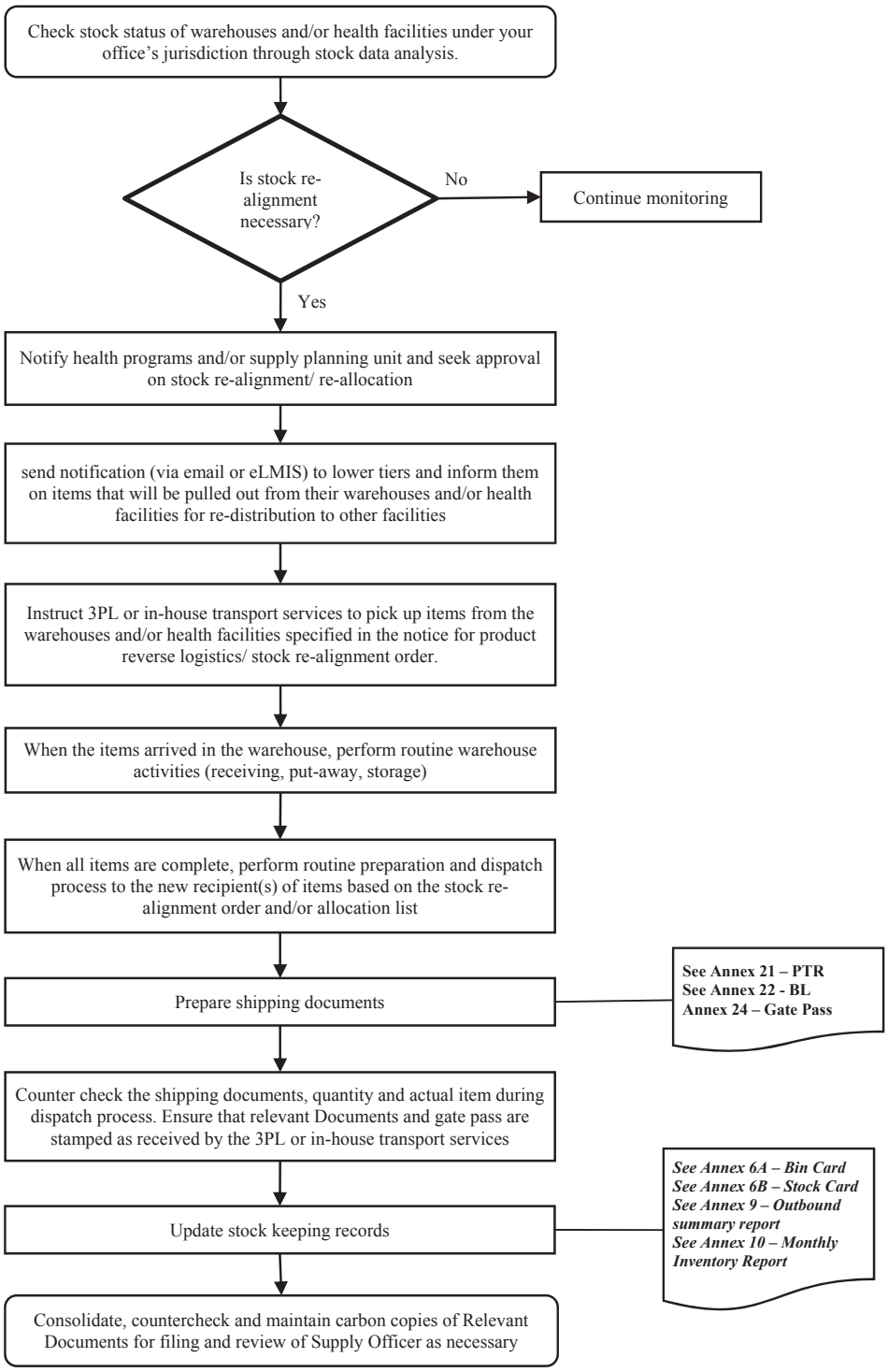
4. PROCEDURE:

Ref. No.	Key Step	Responsibility	Reference Document/ Record
4.1	Check stock status of warehouses and/or health facilities under your office's jurisdiction through stock data analysis.	Supply Officer	• Inventory Report • eLMIS report/ Dashboard

4.2	When stock realignment is necessary to balance stock status across warehouses and/or facilities under your office's jurisdiction, notify health programs and/or supply planning unit and seek approval on stock re-alignment/ re-allocation.	Supply Officer	• Notice for product reverse logistics • Stock realignment order/ re-allocation order
4.3	Upon receiving the approved stock re-allocation or notice for reverse logistics of items that need stock realignment, send notification (via email or eLMIS) to lower tiers and inform them on items that will be pulled out from their warehouses and/or health facilities for redistribution to other facilities with the following information but not limited to: • Item description • Batch/lot number • Expiration date • Unit of measure • Quantity • Volume in CBM or Liters • Estimated date and time of pick up	Store Manager Store Supervisor	• Notice for product reverse logistics • Stock realignment order/ re-allocation order
4.4	Instruct 3PL or in-house transport services to pick up items from the warehouses and/or health facilities specified in the notice for product reverse logistics/ stock re-alignment order.	Store Supervisor	• Notice for product reverse logistics • Stock realignment order/ re-allocation order
4.5	When the items arrived in the warehouse, perform routine warehouse activities (receiving, put-away, storage)	Store Manager Store Supervisor Store keeper Store Helper	• Notice for product reverse logistics • Stock realignment order/ re-allocation order

4.7	When all items are complete, perform routine preparation and dispatch process to the new recipient(s) of items based on the stock re-alignment order and/or allocation list	Store Manager Store Supervisor Store keeper Store Helper	
4.8	Prepare shipping documents *See Annex 21 – PTR* *See Annex 22 - BL* *See Annex 24 – Gate Pass*	Store Keeper/Office Clerk	• Notice for product reverse logistics • PTR/BL/RIS • Gate Pass
4.9	Counter check the shipping documents, quantities and actual item during dispatch process. Ensure that relevant Documents and gate pass are stamped as received by the 3PL or in-house transport services.	Store Manager Store Supervisor	• Notice for product reverse logistics • Stock realignment order/ re-allocation order • PTR/BL • Gate Pass
4.10	Update stock keeping records *See Annex 6A – Bin Card* *See Annex 6B – Stock Card* *See Annex 9 – Outbound summary report* *See Annex 10 – Monthly Inventory Report*	Store Keeper Store Supervisor	• Inventory Report • Bin/Stock Card • Outbound records
4.11	Consolidate, countercheck and maintain carbon copies of Relevant Documents for filing and review of Supply Officer as necessary	Store Manager	• Notice for product reverse logistics • Stock keeping records • Outbound records

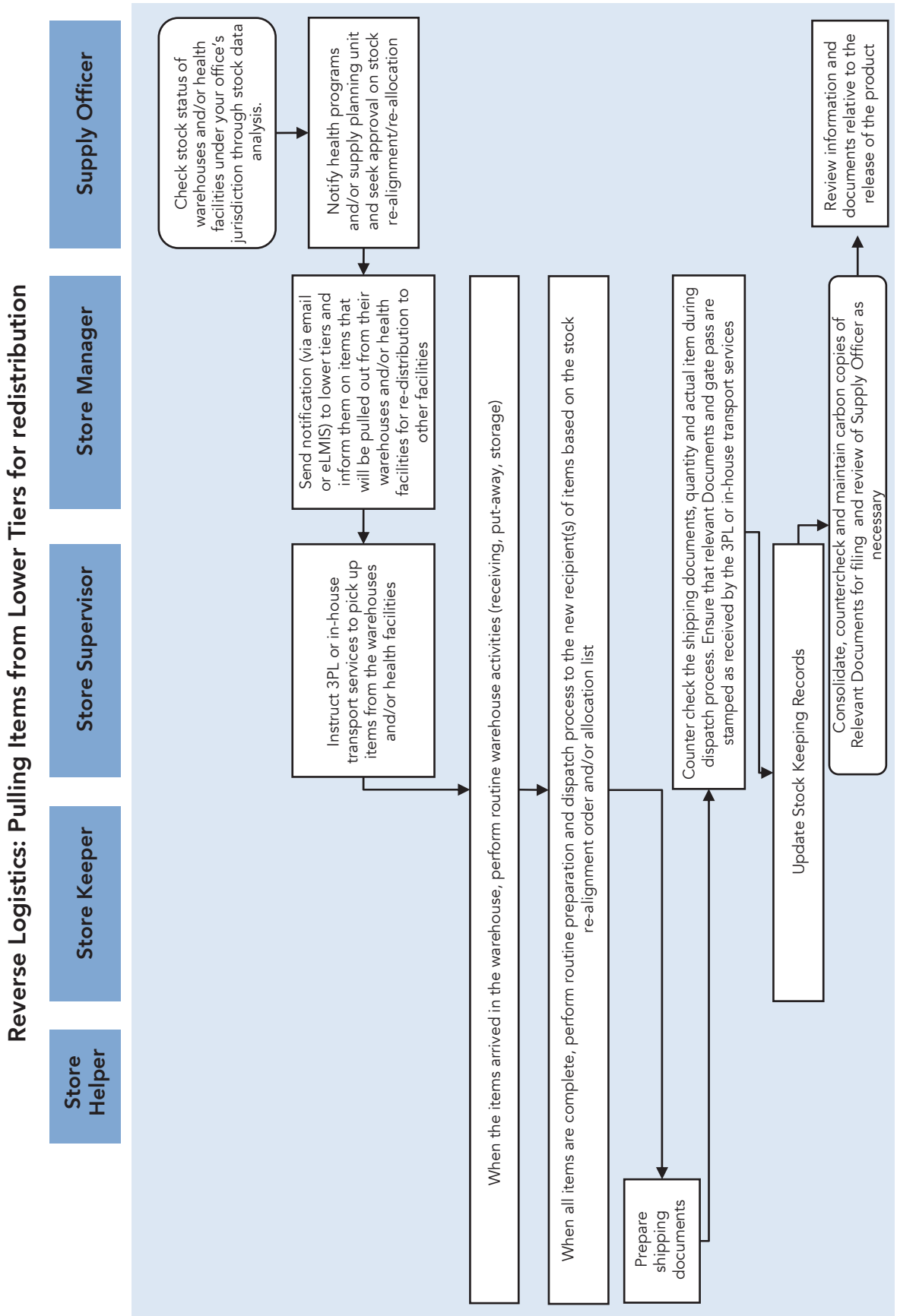
5. PROCESS FLOW DIAGRAM: SOP 8-B – Reverse Logistics: Pulling items from Lower Tiers for Redistribution



6. DOCUMENTATION AND ATTACHMENTS:

6.1. Bill of Lading (BL)
6.2. Bin Card
6.3. Gate Pass
6.4. Inventory Report
6.5. Location Map
6.6. Notice of Reverse Logistics
6.7. Property Transfer Report (PTR)
6.8. Outbound summary report
6.9. Stock Card
6.10. Stock realignment order/ re-allocation order

Reverse Logistics: Pulling Items from Lower Tiers for redistribution



DOH-SCMS-WOM-SOP-08-C	**REVERSE LOGISTICS: RELEASING ITEMS FOR REDISTRIBUTION**

1. PURPOSE:

To ensure that reverse logistics are well coordinated with health programs and between Central, Regions and Local levels when product re-distribution is necessary due to re-allocation or stock realignment.

2. SCOPE:

This procedure covers the releasing of items that will be pulled by the upper tiers (DOH Central or Regional Offices) based on the notice for pull-out and/or re-allocation.

3. RESPONSIBILITY:

Title	Responsibility
Supply Officer	Coordinate with relevant offices/ entities involved in the reverse logistics process. Counter check relevant documents in the process of reverse logistics.
Store Manager	Ensure that the procedures and associated documentations are performed accordingly by warehouse staff. Assist in the coordination with relevant offices/ entities involved in the reverse logistics process.
Store Supervisor	Counter check stock keeping records and ensure that relevant documents are filed accordingly for reference and tracking. Assist the Store Manager in coordinating with relevant offices/ entities involved in the reverse logistics process.
Store Keeper	Update stock keeping records and assist in the process of dispatch of products for redistribution.
Store Helper	Facilitate picking & packing of products for redistribution and hand over to 3PL ensuring that necessary documents are stamped as received.
Security	Perform security protocols at the start and end of the dispatching process. Facilitate separate documentation for all items and quantities released.

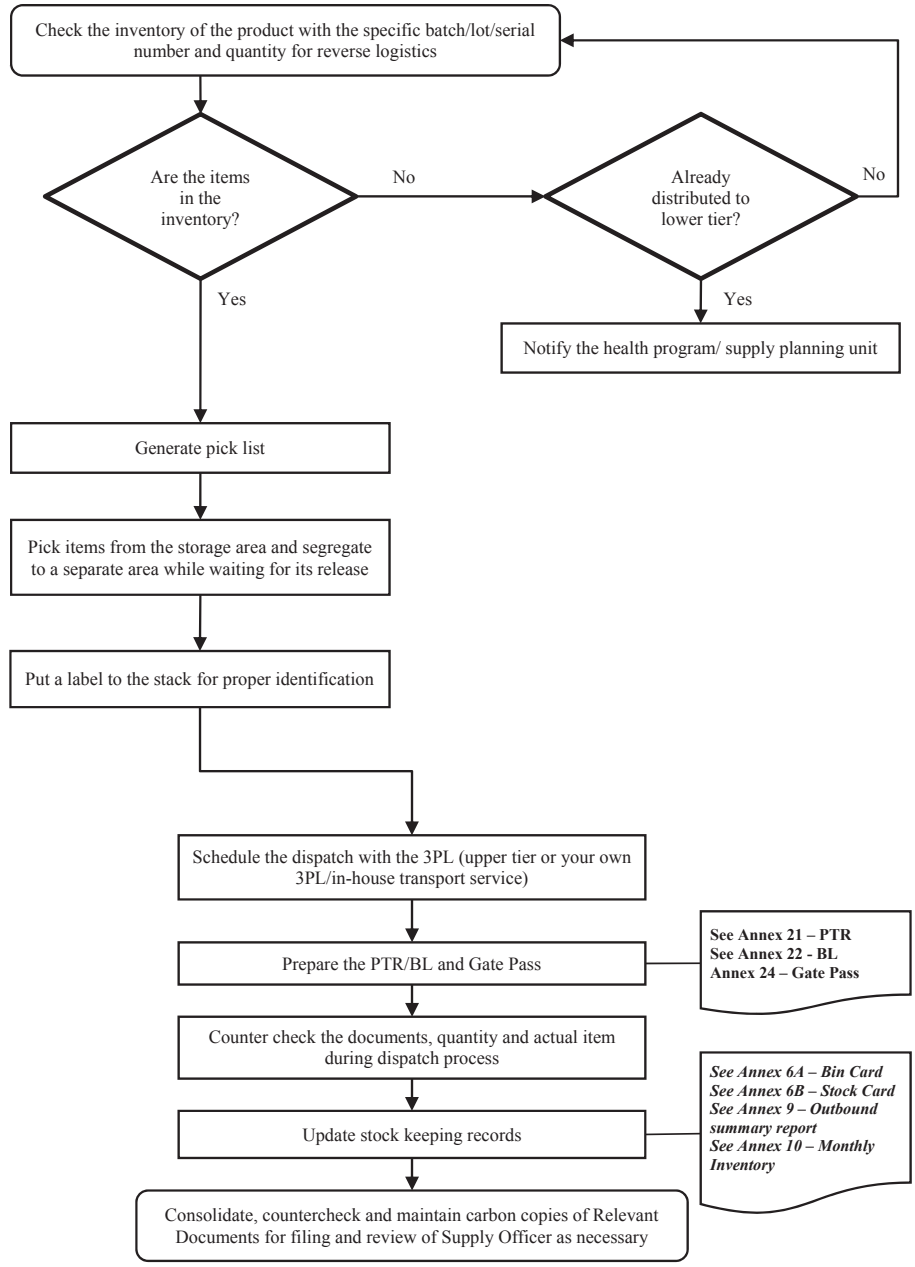
4. PROCEDURE:

Ref. No.	Key Step	Responsibility	Reference Document/ Record
4.1	Upon receiving the notice for reverse logistics from the health program or supply planning unit, check the inventory of the product with the specific batch/lot/ serial number and quantity requested for reverse logistics.	Store Manager Store Supervisor	• Notice for product reverse logistics • Inventory Report • Location Map

4.2	If the item with the specific batch/lot/serial number and quantity for reverse logistics is not available and distributed already, coordinate with the health program/ supply planning unit. Otherwise, proceed to the next step.	Store Manager Store Supervisor	• Inventory Report • Stock Card • Outbound records
4.3	If the item is in the inventory, generate pick list based on the request from the health program or supply planning unit	Store Manager Store Supervisor	• Notice for product reverse logistics • Location Map
4.4	Pick items from the storage area and segregate to a separate area while waiting for its release. *Note: Please refer to Pick & Pack process*	Store Helper	• Inventory Report • Location Map
4.5	Put a label to the stack for proper identification	Store Helper	Product label indicating "For Reverse Logistics"
4.6	Schedule the dispatch of the product with: 1) The upper tier's 3PL (DOH Central or Regional Office) requesting for reverse logistics, or 2) Your own 3PL or in-house transport services, if available.	Store Supervisor	None
4.7	Prepare the PTR/BL and Gate Pass *(indicating the item is for reverse logistics)* *See Annex 21 – PTR* *See Annex 22 - BL* *See Annex 24 – Gate Pass*	Store Keeper	• Notice for product reverse logistics • PTR/BL • Gate Pass
4.8	Counter check the documents, quantities and actual item during dispatch process. Ensure that relevant Documents and gate pass are stamped as received by the 3PL/in-house transport service.	Store Manager Store Supervisor	• Notice for product reverse logistics • PTR/BL • Gate Pass

4.9	Update stock keeping records *See Annex 6A – Bin Card* *See Annex 6B – Stock Card* *See Annex 9 – Outbound summary report* *See Annex 10 – Monthly Inventory Report*	Store Keeper Store Supervisor	• Inventory • Bin/Stock Card • Outbound records
4.10	Consolidate, countercheck and maintain carbon copies of Relevant Documents for filing and review of Supply Officer as necessary	Store Manager	• Notice for product reverse logistics • Stock keeping records • Outbound records

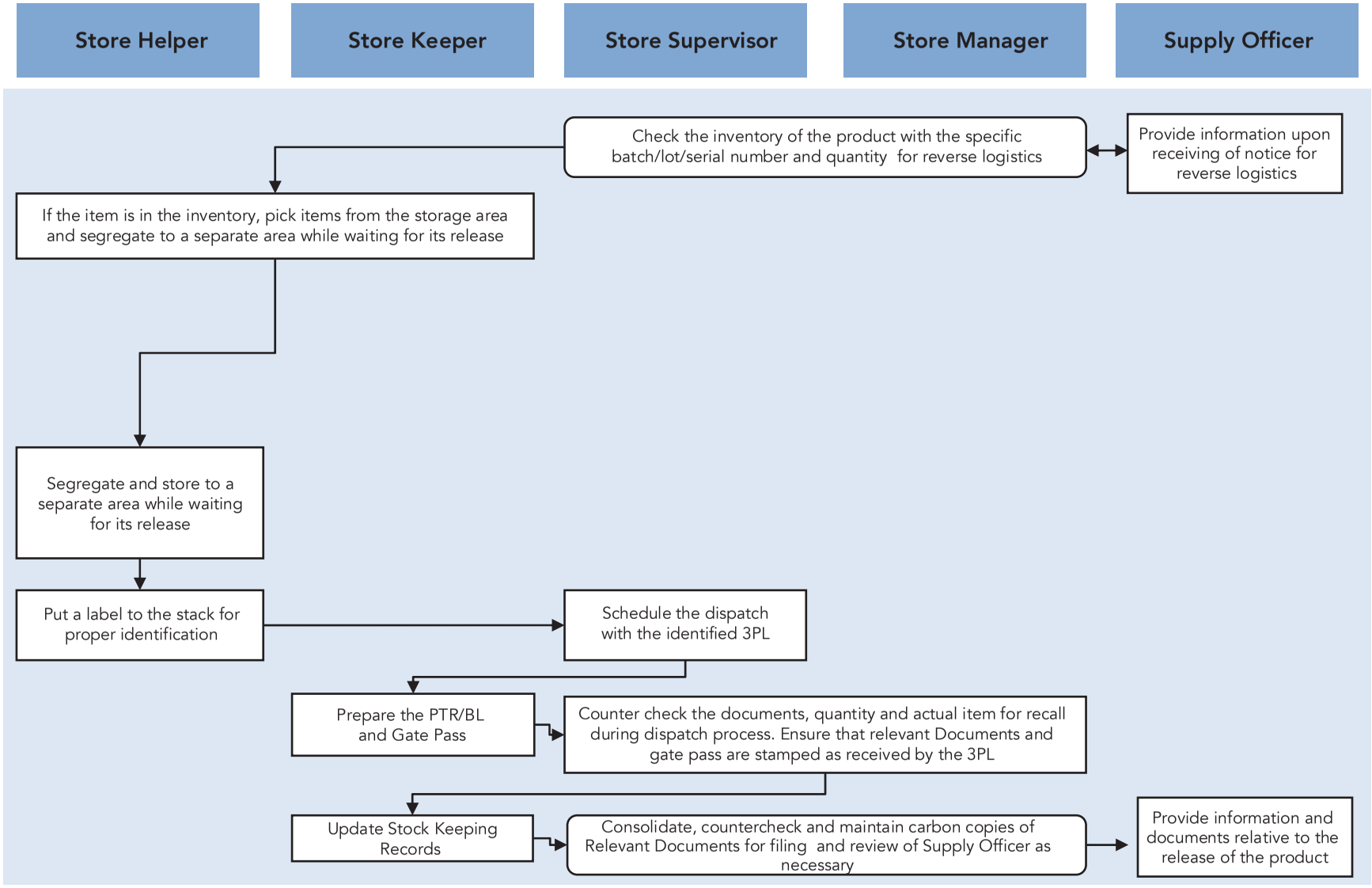
5. PROCESS FLOW DIAGRAM: SOP 8-C – Reverse Logistics: Releasing Items For re-distribution



6. DOCUMENTATION AND ATTACHMENTS:

6.1. Bill of Lading (BL)
6.2. Bin Card
6.3. Gate Pass
6.4. Location Map
6.5. Notice of Reverse Logistics
6.6. Property Transfer Report (PTR)
6.7. Outbound summary report
6.8. Stock Card

Reverse Logistics: Releasing Items For redistribution



DOH-SCMS-WOM-SOP-09	**EMERGENCY SUPPLY CHAIN MANAGEMENT**

1. PURPOSE:

To ensure that warehouse staff comply with the latest guidelines on emergency supply chain management.

2. SCOPE:

This procedure covers the handling of items in the warehouse for emergency supply chain management in cases of disaster, calamity and other public health emergencies.

3. RESPONSIBILITY:

Title	Responsibility
Supply Officer	Ensure to communicate all relevant and latest guidelines on emergency supply chain management to the Store Manager.
Store Manager	Ensure that warehouse staff comply with the existing Policy and Guidelines on Logistics Management in Emergencies and Disasters (DOH AO No. 2012-0013) its future revisions and other relevant new guidelines for emergency supply chain management.
Store Supervisor	Supervise staff in performing warehouse activities ensuring that there would be no delays in processing commodities in compliance with the relevant and latest guidelines on emergency supply chain management.
Store Keeper	Ensure that stock keeping records are maintained and updated during the emergency supply chain management processes.
Store Helper	Facilitate warehouse activities based on the relevant and latest guidelines on emergency supply chain management.
Security	Perform security protocols during emergency supply chain management procedures.

4. PROCEDURE:

Ref. No.	Key Step	Responsibility	Reference Document/ Record
4.1	Ensure compliance with guidelines and policies for commodities that need to be handled under emergency supply chain.	Supply Officer Store Manager Store Supervisor Store keeper Store Helper Security Personnel	• DOH Administrative Order No. 2012-0013 • Presidential Administrative Order No. 27, s. 2020 • Other relevant and new guidelines for emergency supply chain management

4.2	Perform the same routine activities and documentation during receiving, put-away, storage, pick & pack, and dispatch of health commodities for emergencies.	Store Manager Store Supervisor Store keeper Store Helper Security Personnel	• All related SOPs, documents, and records in warehouse operations
4.3	**For Donation during public health emergencies or disasters- before accepting donations, ensure that health commodities:** • Are relevant for emergencies. • Registered for use in the country (*except for those with emergency authorization*). • Compliant with local and/or international standards. • Properly labelled in English. • Have at least 12 months shelf life (*except for those items that can be utilized immediately to prevent expiration).* • Have just enough quantity for receiving to prevent overstocking and expiration. • Have been coordinated with and cleared by the health emergency management bureau, health programs or supply planning unit to determine allocation and projected consumption to prevent wastages or mismanagement of donations. **IMPORTANT NOTE**: For donations that are mandated to pass through the national government, inform donors to directly coordinate with and deliver to DOH central level and other relevant agencies during public health emergency.	Supply Officer Store Manager	• DOH Administrative Order No. 2012-0013 • DOH Administrative Order No. 2020-0001 • Presidential Administrative Order No. 27, s. 2020

4.4	**For Emergency procurement:** • Ensure to coordinate with the health emergency management bureau, health programs and supply planning unit to ensure availability of funds for logistics needed during emergencies and disasters. At least 5% of the Maintenance and Other Operating Expenses (MOOE) shall be allotted annually solely for this purpose which should be accessible at any given time. • Coordinate with the health emergency management bureau, health programs and supply planning unit regarding procurement of needed health commodities, equipment, and related infrastructures in emergency cases.	Supply Officer Store Manager	• DOH Administrative Order No. 2012-0013
4.5	**Monitoring of Health Commodities for emergency:** • Monitor the inventory of health commodities for emergencies within your warehouse as well as those warehouses and facilities under your jurisdiction.	Supply Officer Store Manager	• DOH Administrative Order No. 2012-0013

	(Cont'd.)... • If commodities for emergency were consumed within the year, coordinate with the health emergency management bureau, health programs and supply planning unit for the procurement/ replenishment of standby logistics based on latest emergency criteria.		
4.6	**Pre-positioning:** • The list of health commodities for emergency and volume of stocks to be stockpiled must be coordinated with health emergency management bureau, health programs and supply planning unit based on the latest guidelines/ policies. • Stockpile health commodities in strategic locations for quick and ready access during emergencies. • If your warehouse location is considered strategic, ensure to stockpile emergency health commodities for quick and ready access. • If warehouses and/or health facilities under your office's jurisdiction are considered strategic location, ensure to deliver/replenish emergency health commodities to them for stockpiling and maintenance of the identified stock level.	Supply Officer Store Manager	• DOH Administrative Order No. 2012-0013

4.7	**Cross docking:** • For commodities that will undergo cross docking, ensure that relevant officers are available for inspection of the items prior to distribution. • Coordinate with the health emergency management bureau, health programs and supply planning unit on the allocation list of items that will undergo cross-docking. • Coordinate with 3PL and/ or in-house transport services to get ready for cross docking	Store Manager Store Supervisor	• Allocation List/ Requisition Order • Inspection and Acceptance Report
4.7.1	Segregate items based on the allocation list and/or requisition order	Store Helper	• Allocation List/ Requisition Order
4.7.3	Put a label to the stack for proper identification	Store Helper	• Allocation List/ Requisition Order
4.7.4	Schedule the dispatch of the product	Store Supervisor	• Allocation List/ Requisition Order
4.7.5	Prepare shipping documents *See Annex 21 – PTR* *See Annex 22 - BL* *See Annex 23 – RIS* *See Annex 24 – Gate Pass*	Store Keeper/ Office Clerk	• PTR/BL/RIS • Gate Pass
4.7.6	Maintain updating of stock keeping records *See Annex 9 – Outbound summary reports*	Store Keeper Store Supervisor	• Outbound records
4.7.7	Counter check the documents, quantities and actual item during dispatch process. Ensure that relevant documents are stamped as received by the 3PL.	Store Manager Store Supervisor	• PTR/BL/RIS • Gate Pass

4.7.8	Consolidate, countercheck and maintain carbon copies of Relevant Documents for filing and review of Supply Officer as necessary	Store Manager	• Stock keeping records • Outbound records

5. DOCUMENTATION AND ATTACHMENTS:

5.1. Allocation List/ Requisition Order
5.2. Bill of Lading (BL)
5.3. Bin Card
5.4. Gate Pass
5.5. Inspection and Acceptance Report (IAR)
5.6. Location Map
5.7. Property Transfer Report (PTR)
5.8. Requisition and Issue Slip (RIS)
5.9. Outbound summary report
5.10. Stock Card

DOH-SCMS-WOM-SOP-10	**COLD CHAIN MANAGEMENT**

1. PURPOSE:

To ensure that warehouse staff comply with the latest guidelines on cold chain management.

2. SCOPE:

This procedure covers the basic handling of items in the warehouse requiring cold chain management.

3. RESPONSIBILITY:

Title	Responsibility
Supply Officer	Ensure to communicate all relevant and latest guidelines on cold chain management to Store Manager. Communicate needed budget to maintain cold chain infrastructure and equipment.
Store Manager	Ensure that warehouse staff comply with the existing Policies and Guidelines on Cold Chain Management and its future revisions. Submit budget request to maintain cold chain infrastructure and equipment.
Store Supervisor/ Cold Chain Specialist	Supervise staff in performing warehouse activities ensuring proper cold chain management throughout warehouse operations.
Store Keeper	Ensure that stock keeping records are maintained and updated during the cold chain management processes. Ensure that vaccines and other health commodities are stored based on its temperature range requirements.
Store Helper	Facilitate warehouse activities based on the relevant and latest guidelines on cold chain management.
Cold Chain Technician	Ensure that necessary cold chain equipment are complete and functional. Ensure budget computation to facilitate Preventing Maintenance and reports on cold chain equipment.
Security	Perform security protocols during cold chain management procedures.

4. PROCEDURE:			
Ref. No.	**Key Step**	**Responsibility**	**Reference Document/ Record**
4.1	Ensure compliance with guidelines and policies for health commodities that need to be handled through cold chain management. **IMPORTANT NOTE**: Most vaccines are damaged by heat. Some are damaged by sunlight or fluorescent light (such as vaccines in dark brown vials) and some by freezing. Some are more sensitive compared to others. Some vaccines, if exposed to freezing or to temperature below 0°C can lose potency or if administered may result in sterile abscess, which is considered an adverse event following immunization (AEFI). Hence, it is important to know the specifications of vaccines and its storage requirements. Please refer to the latest guidelines on vaccine storage requirements.	Supply Officer Store Manager Store Supervisor Cold Chain Specialist Store keeper Store Helper Security Personnel	• Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) • Future updates on Cold Chain Management guidelines
1.2 **During Preparation for Delivery**			
4.2.1 Estimating Storage Requirements for incoming deliveries of vaccines: Each type of vaccine and syringe has a different packaging. Volume per dose refers to the volume occupied by each dose of vaccine, including its secondary packaging. It is usually presented in cubic centimeter per dose (cm3/dose). It is important to know the size of these packages to properly estimate storage requirements before accepting vaccine deliveries. The volume per dose of each vaccine type may be found in the WHO Guidelines for International Packaging and Shipping of Vaccines.	Store Supervisor Cold Chain Specialist	• Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) • Future updates on Cold Chain Management guidelines • WOM's Preparation for Receiving Procedure

(Cont'd.)... **4.2.2 Estimating existing storage capacity for vaccines:** To estimate existing storage capacity, cold rooms, freezer rooms and the cold chain equipment inventory must be updated and calculated. Please refer to Chapters 4 & 5 of the Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) and/or its latest updates/ revisions. *Aside from Cold Chain Management Manual, you may refer to Preparation for Delivery Procedure (DOH-SCMS-WOM-SOP-01).*		
4.3 During Receiving & Inspection		
4.3.1 Inspection: Conduct inspection routine for vaccines to ensure that specifications are met and that there are no damages prior to accepting the delivery. **4.3.2 Receiving:** As a general rule when receiving vaccine deliveries, always check for the presence of a temperature monitoring device and record the temperature reading upon opening of the box. If an electronic device is used, it has to be stopped and the temperature recorded in memory should be checked and verified for any temperature excursions that may potentially cause damage to the vaccines. • Vaccines which are damaged either by heat or by freezing during transportation must be rejected and returned to the supplier or upper tier. Please refer to Chapter 4 of the Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) and/or its latest updates/revisions. *Please also refer to Receiving Procedure (DOH-SCMS-WOM-SOP-02-A & B)*	Store Manager Store Supervisor Cold Chain Specialist	• Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) • Future updates on Cold Chain Management guidelines • WOM's Receiving Procedure

4.4 During Put away		
Please refer to Put away procedure (DOH-SCMS-WOM-SOP-03)	Cold Chain Specialist Store Keeper Store Helper	WOM's Put away procedure
4.5 General Guidelines on Storage for Safe injection Equipment		
Please refer to Storage procedure (DOH-SCMS-WOM-SOP-04)	Store Manager Store Supervisor Cold Chain Specialist	WOM's Storage & Warehousing Procedure
4.6 General Guidelines on Storage for Vaccines and Diluents:		
• Install standby generators to provide backup power in large vaccine stores. • Use appropriate cold rooms, freezer rooms, refrigerators, freezers, cold boxes and vaccine carriers for storage of EPI vaccines. WHO/UNICEF PQS compliant equipment are highly recommended. • Choose a power source (electricity or solar) that is appropriate to the location and the climatic conditions. • Conduct routine monitoring, recording and analysis of cold chain temperatures collected from temperature monitoring devices. • Set thermostat correctly based on manufacturer's instructions. • Replace old and broken door seal / gasket. • Use WHO/UNICEF PQS compliant refrigerators/ vaccine carriers for storing vaccines. • Arrange vaccines appropriately in the refrigerator. • Use vaccine baskets provided by the manufacturer.	Store Manager Store Supervisor Cold Chain Specialist	• Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) • Future updates on Cold Chain Management guidelines

(Cont'd.)... • Recognize damaged vaccines through Shake Test. For more details on vaccine storage, please refer to Chapter 5 of the Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) and/or its latest updates/revisions.		
4.7 Temperature Monitoring		
4**.7.1 Perform Temperature mapping exercise.** This is essential in storage areas for health commodities with specific temperature-controlled requirements to ensure that vaccines are stored in accordance with its allowable temperature ranges. Please refer to Chapter 5 of the Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) and/or its latest updates/revisions. **1.1.2 Temperature Monitoring:** • Monitor the temperature inside the storage/transport equipment to ensure vaccine potency is maintained throughout the entire cold chain. *Please refer to Temperature Monitoring Procedure in Storage and Warehousing (DOH-SCMS-WOM-SOP-04)* • It is recommended to use a Computerized Temperature Monitoring System which is directly linked with the temperature monitoring devices in different locations inside the cold room or freezer room for continuous monitoring. This computerized temperature monitoring system must enable ready access to temperature readings onsite and remotely at all times.	Store Manager Store Supervisor Cold Chain Specialist Store Keeper	• Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) • Future updates on Cold Chain Management guidelines • WOM's Storage & Warehousing Procedure

(Cont'd.)...

4.7.3 Proper placement of Temperature Monitoring Devices inside the Cold Room/ Freezer Room:

a) Walk-In Cold Room:

i. The sensors for the continuous temperature monitoring device are fixed by the cold room installer and should not be moved

ii. A minimum of four electronic freeze indicators should be placed on the cold room shelves in front of the vaccines. If temperature mapping has been previously done, place the devices in places where the lowest temperatures are found.

iii. Place one electronic device (30-DTR) on the shelf which is closest to the evaporator air stream from each of the refrigeration units.

iv. Place two more electronic devices (30-DTR) on the shelves in the center of the cold room, one on the middle shelf and one on the bottom shelf.

b) Walk-In Freezer Room: The sensors for the continuous temperature monitoring device are fixed by the freezer room installer following the manufacturer's recommendation and should not be moved

c) Cold Box & Vaccine Carriers:

i. With freeze-sensitive vaccines and conditioned ice packs, place one electronic freeze indicator to monitor if vaccines have been damaged by freezing due to ice packs that were not conditioned correctly. Use a thermometer to monitor instantaneous temperature.

ii. With non-freeze sensitive vaccines and frozen ice packs, use one thermometer to determine the instantaneous temperature.

IMPORTANT NOTES: • There are different types of temperature monitoring devices for vaccines, ensure to choose according to the latest standards. • In cases of temperature fluctuation, action points based on the analysis of Daily Temperature Recording must be facilitated, Please refer to Chapter 5 of the Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) and/or its latest updates.		
4.8 **Inventory Management**		
Please refer to Inventory Management Procedure in Storage and Warehousing (DOH-SCMS-WOM-SOP-04) For additional information, you may also refer to Chapter 3 of the Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) and/or its latest updates.	Store Manager Store Supervisor Cold Chain Specialist	• Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) • Future updates on Cold Chain Management guidelines • WOM's Storage & Warehousing Procedure
4.9 During Pick and Pack		
Please refer to Pick and Pack Procedure (DOH-SCMS-WOM-SOP-05) **IMPORTANT NOTES:** • Use correct cold boxes and vaccine carriers for vaccine transport. • Prepare sufficient number of conditioned ice packs in packing freeze-sensitive vaccines. Provide extra frozen ice packs for use in case of delay. • Use cold box and vaccine carrier with long cold life for specific applications. • Use WHO/UNICEF PQS compliant vaccine carrier. • Arrange ice packs and vaccines inside the vaccine carrier properly.	Cold Chain Specialist Store Keeper Store Helper	• Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) • Future updates on Cold Chain Management guidelines • WOM's Pick & Pack Procedure

(Cont'd.)... • Place a thermometer or freeze indicator on top of mixed vaccines or freeze-sensitive vaccines as necessary. For detailed steps, you may refer to Chapters 5 & 6 of the Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) and/or its latest updates.		
4.10 During Dispatch		
• Coordinate with 3PL and/or in-house transport services for the schedule of shipment. • Ensure to use appropriate refrigerated vehicles for transporting vaccines. • Notify recipient on the estimated day/time of arrival to their warehouse/facility. • Countercheck the documents, quantity, and actual item during dispatch process. Ensure that relevant documents are stamped as received by the 3PL. • Consolidate, countercheck, and maintain carbon copies of Relevant Documents for filing and review of Supply Officer as necessary *Please refer to Dispatch Procedure (DOH-SCMS-WOM-SOP-06)*	Stora Manager Store Supervisor Cold Chain Specialist Store Keeper Store Helper	• Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) • Future updates on Cold Chain Management guidelines • WOM's Dispatch Procedure

4.11 Preventive Maintenance of Cold Chain Equipment		
• Cold chain equipment is prone to breakdowns and failures which may damage the vaccines. All storekeepers, health workers and staff in charge of a vaccine storage facility should be able to perform preventive maintenance routinely to keep their respective cold chain equipment in optimal working condition. • Determine needed budget to ensure complete and functional cold chain infrastructure and equipment. • For more details on how to maintain cold rooms, freezer rooms, vaccine refrigerators vaccine freezers, cold boxes, and vaccine carriers, please refer to Chapter 7 of the Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) and its latest updates/revisions.	Store Supervisor Cold Chain Specialist Cold Chain Technician	• Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) • Future updates on Cold Chain Management guidelines
4.12 Contingency Plan		
Any situation that puts vaccines at risk is considered an emergency. An emergency could be a cold chain equipment breakdown, a major power supply failure, a transport emergency, and similar situations. Store manager, Cold chain specialist and storekeepers at all levels of the cold chain system are responsible for emergency response. Thus, specific actions and contingency plans should be clearly laid out, disseminated, understood, and followed. **4.12.1 Key Elements of a Contingency Plan:** • Ensuring that all affected vaccines are stored within the recommended storage temperature of +2°C to +8°C as soon as possible;	Store Manager Store Supervisor Cold Chain Specialist	• Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) • Future updates on Cold Chain Management guidelines

(Cont'd.)... • Identifying alternative locations where vaccines can be safely stored or where ice can be obtained at short notice; • Preparing and maintaining at least two emergency response plans; • Posting emergency contact details of key personnel at locations where they can be accessed at all times; • Clearly describing initial and follow-up actions that can be implemented both inside and outside of working hours; and • Reviewing and rehearsing the procedures in the plan at least once a year to ensure that it is still valid. For more details, please refer to Chapter 8 of the Cold Chain Logistics Management Manual of Operations – 5th Edition (2018) and its latest updates/revisions.		

5. <u>DOCUMENTATION AND ATTACHMENTS:</u>

5.1. Cold Chain Logistics Management Manual of Operations – 5th Edition (2018)
5.2. Routine Warehouse Forms/Reports

List Of References

1. Characterization of Health Care Wastes: *https://www.who.int/water_sanitation_health/medicalwaste/002to019.pdf*
2. Cold Chain Logistics Management Manual of Operations – 5th Edition (2018)
3. Commission on Audit's Government Accounting Manual
4. DOH Administrative Order No. 2012-0013: Policy and Guidelines on Logistics Management in Emergencies and Disaster
5. DOH Administrative Order No. 2020-0001: Guidelines in the Importation, Facilitation and Management of Foreign Donations involving Health and Health-Related Products
6. DOH Administrative Order No. 2013-0027: Good Distribution and Good Storage Practice
7. *Guidelines for Warehousing Health Commodities.* Arlington, Va.: USAID | DELIVER PROJECT, Task Order 4. Second edition
8. John Snow, Inc. 2017. The Supply Chain Manager's Handbook, A Practical Guide to the Management of Health Commodities. Arlington, Va.: John Snow, Inc.
9. Republic Act No. 9711 otherwise known as the "Food and Drug Administration Act of 2009"
10. Republic Act No. 9184 otherwise known as the "Government Procurement Reform Act"
11. Republic Act No. 11223 otherwise known as the "Universal Health Care Act" World Health Organization, Technical Report Series, No. 957, 2010 - Annex

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