

Supply Chain Product Ordering (SC03)

| Date | Version | |
|---|--------------------------------------|--|
| 20/09/16 | 1 | |
| Purpose | | |
| To identify the key activities in ordering goods. | | |
| Who should read this document? | | |
| All those that are involved in ordering and receiving goods, directly from suppliers, or via an internal Store or Warehouse. | | |
| Key messages | | |
| SOPs aim to achieve efficiency, quality output and uniformity of performance, while reducing miscommunication and failure to comply to industry or Trust regulations. | | |
| Accountabilities | | |
| Production | Supply Chain Manager | |
| Review and approval | Scan4Safety GTIN/P2P Project Board | |
| Ratification | Chief Procurement Officer | |
| Dissemination | Head of Supply Chain & E-Procurement | |
| Compliance | Records & Information Forum | |
| Links to other policies and procedures | | |
| Supply Chain Inventory Management Policy (SC010v.1) | | |
| Version History | | |
| 1 | 21 st March 2017 | Ratified by Chief Procurement Officer and published Trust-wide |
| Last Approval | | Due for Review |
| March 2017 | | March 2020 |

The Trust is committed to creating a fully inclusive and accessible service. By making equality and diversity an integral part of the business, it will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.

An electronic version of this document is available on the Trust Documents Network Share Folder (G:\TrustDocuments). Larger text, Braille and Audio versions can be made available upon request.

Standard Operating Procedures are designed to promote consistency in delivery, to the required quality standards, across the Trust. They should be regarded as a key element of the training provision for staff to help them to deliver their roles and responsibilities.

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Standard Operating Procedure (SOP) Supply Chain Product Ordering

1 Purpose and Scope

1.1 Introduction

The purpose of this SOP is to identify the key activities in ordering goods into and around the Trust.

This procedure is applicable to all those involved in the ordering, using and managing of product inventory within the Trust.

It should be applied across the Trust, with particular relevance to Procurement and Supply Chain functions.

A standalone SOP exists for Pharmacy Ordering.

1.2 Definitions

- **SOP** – Standard Operating Procedure
- **SCM** – Supply Chain Manager
- **CPO** – Chief Procurement Officer
- **DoF** – Director of Finance
- **HSCEP** – Head of Supply Chain & E-Procurement
- **SCTL** – Supply Chain Team Leader
- **SCT** – Supply Chain Team
- **RCA** – Root Cause Analysis
- **SSCM** – Senior Supply Chain Management
- **PPM** – Pharmacy Procurement Manager
- **PO** – Purchase Order
- **IMS** – Inventory Management System
- **RCA** – Root Cause Analysis

1.3 Regulatory background

n/a

1.4 Key Duties

Main Roles and typical duties are summarised below;

- **Purchasing**
 - **Category Manager or Buyer** – used as support for supplier escalations
- **Supply Chain**
 - **eProc Helpdesk** – responsible for order placement, monitoring overdue orders and expediting delivery, problem resolution
 - **Supply Chain Team (SCT)** – responsible for consolidating demand, placing orders and meeting Customer Requirements of stock holding
 - **Porters** – responsible for delivering to the customer

- **Customer**
 - **Customer** – responsible for generating demands and communicating them to SCT. Responsible for agreeing stock holding requirements and IMS Min/Max stock level

1.5 Monitoring and assurance

- Accountability for adherence to this procedure will be monitored by the Senior Supply Chain Management (SSCM).
- The Supply Chain Manager (SCM) will be responsible for ensuring this procedure is followed operationally
- Supply Chain Team (SCT) will adhere to the identified procedure. Non-conformance should be escalated to Supply Chain Team Leader (SCTL), if required.
- Root cause analysis (RCA) will be performed for any identified stock discrepancy
- For every RCA conducted, findings need to be escalated to the Supply Chain Team Leader (SCTL), through the specified review
- SCT members will be monitored individually on process adherence at their regular one to one progress reviews

2 Procedure to Follow

2.1 People and Systems

- Requisitions should only be placed by competent and responsible members of staff, using the appropriate Trust approved purchasing system.
- Non-catalogue requests require justification and prior approval from Procurement.
- Requisitions should only be approved by authorised personnel.
- Approved requisitions generate a purchase order which is communicated to the customer and dispatched to the supplier.

2.2 Demand Generation

- Requesting Locations and End Users should generate demand via an Inventory Management System.
- If a demand is communicated to a supplier prior to raising a purchase order, a Retrospective Requisition is required and the system should be updated appropriately
 - Where appropriate, controlled processes are monitored by the Supply Chain Team and communicated to both supplier and customer

2.3 Order Placement

- **Store to Consumption Point (End User) Orders**

- Top-up replenishment orders of stock items are processed by the Supply Chain Team through the appropriate Inventory Management System
- Non stock items require an ad-hoc order generated in the preferred IMS by the Supply Chain Team
- All open purchase orders should be monitored and hastened by the Supply Chain Team. Unresolved issues should be escalated to the Senior Supply Chain Management and customers informed.

2.4 Store to Store Stock Movements

- The Supply Chain Team triggers an internal replenishment demand requesting delivery from another store.
- The internal replenishment process will in turn issue an order to a Supplier once the necessary reorder level is triggered, see section 2 above; *Demand Generation*.

3 Document Ratification Process

3.1 The design and process of review and revision of this procedural document will comply with The Development and Management of Trust Wide Documents.

The review period for this document is set as default of three years from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described.

This document will be approved and ratified by the CPO.

Non-significant amendments to this document may be made, under delegated authority from the CPO, by the nominated author.

Significant reviews and revisions to this document will include a consultation with named groups, or grades across the Trust. For non-significant amendments, informal consultation will be restricted to named groups, or grades who are directly affected by the proposed changes

3.2 Dissemination and Implementation

Following approval and ratification, this procedural document will be published in the Trust's formal documents library and all staff will be notified through the Trust's normal notification process, currently the 'Vital Signs' electronic newsletter.

Document control arrangements will be in accordance with The Development and Management of Trust Wide Documents.

The document author(s) will be responsible for agreeing the training requirements associated with the newly ratified document with the CPO and for working with the Trust's training function, if required, to arrange for the required training to be delivered.

4 Reference Material

n/a