Trust Standard Operating Procedure

Plymouth Hospitals NHS
NHS Trust

Supply Chain Product Receipting (SC05)

Date	Version
20/09/16	**1**

Purpose

To identify the key activities in receipting goods into and around the Trust.

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	21st 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.

Section	Description	Page
1	Purpose and Scope	3
1.2	Definitions	3
1.3	Regulatory Background	3
1.4	Key Duties	3
1.5	Monitoring and Assurance	4
2	Procedure to Follow	4
3	Document Ratification Process	6
3.1	Dissemination and Implementation	6
4	Reference Material	6

Plymouth Hospitals NHS
NHS Trust

Standard Operating Procedure (SOP)

Supply Chain Product Receipting

1 Purpose and Scope

1.1 Introduction

The purpose of this SOP is to identify the key activities in receipting 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 Receipting.

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
- **RCA –** Root Cause Analysis
- **SLA –** Service Level Agreement
- **PO –** Purchase Order
- **FIFO –** First in First Out
- **IMS –** Inventory Management System

1.3 Regulatory background

n/a

1.4 Key Duties

Main Roles and typical duties are summarised below;

- **Purchasing**
  - **Category Manager/Buyer** – supporting Supply Chain Warehouse Manager (SCWM)/Supply Chain Store Person (SCSP) with pricing queries and escalations
- **Supply Chain**

- **Supply Chain Team** – transporting stock around the Trust and conducting basic Goods-In checks
- **Supply Chain Team** – conducting detailed checking, official receipting and putting stock away
- **Supply Chain Team Leader** – supporting escalations from Supply Chain team

- **Customer**
  - **Customer –** Signs for receipt of goods at delivery point

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
- Adherence to the identified procedure will be monitored through regular reviews with Supply Chain and Customer Representatives and documented in agreed Service Level Agreements (SLA).
- Root cause analysis (RCA) will be performed by the Supply Chain Team (SCT) for service variances.
- For every RCA conducted, findings need to be reported to the Senior Supply Chain Management via regular reviews.
- SCT members shall be monitored on process adherence at their regular one to one progress reviews.

2 Procedure to Follow

2.1 From Supplier direct to Warehouse

For goods that come from the supplier to warehouse, goods will need to be receipted using the suitable Inventory Management System (IMS).

The following summarises the necessary steps;

- Detailed Checking
  - Check physical goods and Delivery Note paperwork correspond
  - Enter goods received on to the IMS
    - Including batch numbers and expiry dates where system functionality exists
- Put stock away into appropriate store and location using Inventory management best practices (i.e. FIFO, Manual Handling)

- The initials of the person entering the goods into the IMS should be captured on the Delivery Note

2.2 From Supplier to Store/Requesting Location

For goods that come from the supplier to either a store or requesting location; goods will need to be receipted using the suitable Inventory Management System (IMS).

The following summarises the necessary steps;

- Basic Check (Level 2)
    - Direct stock into Goods-In area, to allow basic checking
    - Check physical goods and Delivery Note paperwork correspond
    - Check Delivery Note references a Purchase Order (PO)
- Detailed Checking (Delivery point)
    - Check physical goods and Delivery Note paperwork correspond
    - Enter goods received on to the IMS
        - Including batch numbers and expiry dates where system functionality exists
- Put stock away into appropriate store and location using Inventory management best practices (i.e. FIFO, Manual Handling)
- Any price mismatches should be escalated to the appropriate Category Manager or Buyer
- The initials of the person entering the goods into the IMS should be captured on the Delivery Note

2.3 From Internal Warehouse/Store to Internal Warehouse/Store

- Store to Store transfers follow the above process.

2.4 From Internal Warehouse/Store to Requesting Location/End User

- When goods are issued from a store to a non-store location (Requesting Location/End User), stock is automatically ‘issued’ on the relative Inventory Management System.
- In this case, a physical check of the goods should still be carried out but no systemised receipting is necessary.
- Physical checks should be carried out by the Supply Chain Team or Customer
- The following summarises the necessary steps;
    - Direct stock into Good-In area, to allow checking
    - Check goods match Delivery Note paperwork
    - Check Delivery Note references a valid Requirement/Requisition
- Put stock away into appropriate store and location using Inventory management best practices if appropriate (i.e. FIFO, Manual Handlin

2.5 Issues with received stock

- If stock received is found to have an issue, the competent and responsible person should not receipt the goods but instead follow the Product Recall/Return SOP. An issue could be;
    - Wrong product
    - Wrong quantity
    - Packaging damaged
- Items received without a PO should be escalated by the Supply Chain Team as non-conforming, to immediate line management, with a subsequent RCA being carried out with the Customer

3 Document Ratification Process

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

3.1 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