



Reproductive Health Kits Management Guidelines for Field Offices

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Procurement Services Branch
United Nations Population Fund

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LIST OF ACRONYMS

ERH	Emergency reproductive health
FEFO	First-to-expire, first-out
GIN	Goods issue note
GRN	Goods receiving note
IAWG	Interagency Working Group on Reproductive Health in Crisis
ICPD	International Conference on Population and Development
IFRC	International Federation of Red Cross and Red Crescent Societies
IPSAS	International Public Sector Accounting Standards
ISO	International Standards Organisation
LMIS	Logistics management information system
MISP	Minimum Initial Service Package
M&E	Monitoring and evaluation
NGO	Non-governmental organization
HRB	Humanitarian Response Branch
PSB	Procurement Services Branch
RH	Reproductive health
RIR	Receiving and inspection report
RPR	Rapid plasma reagin
SDPs	Service delivery points
UNCT	United Nations country team
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
WHO	World Health Organisation

NOTES ON TERMINOLOGY

UNFPA country office	A UNFPA office in a UNFPA programme country
Field offices	A general term referring to the recipient offices of Emergency Reproductive Health (ERH) kits in programme countries e.g. UNFPA country offices and sub offices, other UN agencies, NGOs, etc. in their programme countries.

EXECUTIVE SUMMARY

These guidelines provide advice on the management of the supply of reproductive health kits to affected populations in emergency situations. Reproductive health kits are comprised of medicines, disposable items and equipment and are designed for use at the onset of humanitarian response efforts. Based on the standards of international organisations and good practice from the field, it outlines a series of procedures on how these humanitarian supplies should be managed at each stage of the logistical chain.

The audience for these guidelines are UNFPA country office staff and stakeholders involved in the forecasting, ordering, receipt and distribution of reproductive health kits.

This document is divided into 7 sections:

Section 1: Introduction – presents a general introduction to the role of reproductive health kits and their contents.

Section 2: Emergency planning and coordination – outlines the key role played by a Logistics Management Information System in facilitating data collection to support key decisions such as RH Kit needs assessment and quantification. It also sets out the personnel requirements and the associated responsibilities of key focal points in the RH Kit logistics chain.

Section 3: Funding and ordering process for RH Kits – describes the procedures for financing the purchase of RH Kits through the UNFPA Emergency Fund and working with the UNFPA Procurement Services Branch.

Section 4: Customs clearance and receipt of RH kits – sets out the responsibilities involved in managing RH Kits, good practice in customs clearance and guidance on managing the inspection and receipt of the kits.

Section 5: Pre-positioning RH Kits – provides guidance and good practice on pre-positioning and determining the storage conditions and requirements for the kits so that they are maintained in good condition and can be distributed quickly and efficiently.

Section 6: Distribution and monitoring of RH Kits – details the procedures that the respective focal persons should follow when organising their distribution including transport.

Section 7: Inventory management – outlines the inventory control and reporting procedures that should be used to ensure accurate stock control, and the monitoring and evaluation mechanisms that facilitate verification to ensure that reproductive health supplies reach the right people in a timely manner.

The generic techniques and procedures detailed in this document below, once adapted where appropriate, will be of value to UNFPA country office and field office staff involved in the management and supply of reproductive health kits in emergency operations.



SECTION 1. INTRODUCTION

1.1 UNFPA MANDATE AND RESPONSE IN HUMANITARIAN CRISIS SETTINGS

The International Conference on Population and Development (ICPD) Programme of Action recommends to the international community a set of important population and development objectives, including both qualitative and quantitative goals that are mutually supportive and of critical importance to these objectives. Among these objectives and goals is the provision of universal access to reproductive health services, including family planning and sexual health; one of the key mandates of the United Nations Population Fund (UNFPA).

To implement this mandate in emergency situations, Inter-Agency Reproductive Health Kits for Crisis Situations (RH Kits)¹ were developed with the support of UNFPA, WHO, UNHCR, IFRC. RH Kits are a component

of the Minimal Initial Service Package (MISP), a concept designed to reduce mortality and morbidity associated with reproductive health issues during crisis situations, particularly among women and girls of reproductive age.

To aid the proper planning of the provision of emergency reproductive health (RH) services (including RH Kits), the UNFPA Humanitarian Response Strategy 2011-2013 and Standard Operating Procedures for Humanitarian Settings outline the procedures and processes that should be applied by UNFPA country offices. These guidelines are designed to facilitate a rapid response to meeting the reproductive health needs of affected populations in emergency situations.

1.2 THE PURPOSE OF THE RH KITS MANAGEMENT GUIDELINES FOR FIELD OFFICES

These¹ guidelines provide advice on RH Kit logistics and should be used as a reference by all those involved in the management of this category of humanitarian supplies. It describes a series of procedures for the correct handling of RH Kits at each stage of the logistical chain. Some of these procedures are sourced from the standards of international organizations involved in disaster response, whilst others, are based on experiences of staff in the field. While no set of guidelines can be universally applicable, the techniques and procedures proposed will be of value in the majority of circumstances involving emergency operations.

These guidelines aim to provide guidance to field offices on:

- a) the correct implementation of the objectives of the MISP in relation to RH Kits in the field;

- b) understanding, preparing, and testing of various processes that would be undertaken in the event of an emergency situation, or in other words - simulation exercises in preparation for a most likely emergency scenario;
- c) the procurement, prepositioning, distribution and monitoring and reporting on the usage of RH Kits.

These guidelines also support UNFPA accountability for inventory requirements in compliance with IPSAS 12 – Inventories (UNFPA Inventory Policy).

The intended audience for these guidelines are staff involved in the forecasting, ordering, receipt and distribution of RH Kits, from the UNFPA Country Office, other United Nations agencies, government, or Non-government organizations (NGOs). The “field offices” referred to in this document include country offices and sub-offices of all the above mentioned organizations unless stated otherwise.

¹ The first reproductive health kits were developed in 1992, specifically for use during the Bosnian crisis, when thousands of women were sexually abused and there was an urgent need for appropriate medical equipment.

1.3 INTER-AGENCY REPRODUCTIVE HEALTH KITS (RH KITS)

The service delivery components of the MISP include: clinical care for survivors of rape; measures for reducing STI/ HIV transmission; care for normal and complicated childbirth including family planning. The Inter-Agency Working Group on Reproductive Health in Crises (IAWG) developed sets otherwise known as Inter Agency RH kits containing drugs, medical supplies and equipment aimed at facilitating the implementation of lifesaving RH interventions.

RH Kits are designed for use at the onset of humanitarian response, and contain sufficient supplies for a three-month period for different population sizes. The contents of individual kits provide medical care for particular health or disease entities, depending on the population coverage of the particular healthcare setting for which the kits are designed. There are 13 types of RH Kits divided into three blocks. Some types are further divided into sub-type A and B. Each block of kits targets a particular health service delivery level.

Block 1: Community and primary healthcare level: 10,000 persons/3 months

Block 1 contains six kits (Kit 0, 1, 2, 3, 4, and 5). The items in these kits are intended for use by service providers delivering reproductive health care at community and primary health care levels through community based interventions. The kits are mainly comprised of medicines and other disposable items.

Kits 1 and 2 are subdivided into parts A and B, which can be ordered separately.

Kits under Block 1 include:

- Kit 0: Administration and Training
- Kit 1A: Male Condoms
- Kit 1B: Female Condoms
- Kit 2A: Clean Delivery containing individual packs
- Kit 2B: Clean Delivery for Birth Attendants
- Kit 3: Post Rape Treatment
- Kit 4: Oral and Injectable Contraception
- Kit 5: Treatment of Sexually Transmitted Infections

Block 2: Primary health care and referral hospital level: 30,000 persons/3 months

Block 2 contains five kits (Kit 6, 7, 8, 9 and 10), containing disposable and reusable items. The kits are intended for use by trained healthcare providers with midwifery including selected lifesaving skills at the health centre or hospital level.

Kit 6 is subdivided into part A and B, which can be ordered separately.

Kits under Block 2 include:

- Kit 6A: Clinical Delivery Assistance, Part A: Reusable Equipment
- Kit 6B: Clinical Delivery Assistance, Part B: Drugs and Disposable Equipment
- Kit 7: Intra Uterine Device
- Kit 8: Management of Miscarriage and Complications of Abortion
- Kit 9: Suture of Cervical and Vaginal Tears and Vaginal Examination
- Kit 10: Vacuum Extraction

Block 3: Referral hospital level: 150,000 persons/3 months

In humanitarian settings, pregnant and expectant mothers who experience major complications should receive comprehensive emergency obstetrical care which may mean medical evacuation from the health centre or district hospital to the nearest referral hospital for safe blood transfusion and/or emergency abdominal surgery, including caesarean section. Most of the hospitals under emergency settings will require support in making available the equipment and supplies to be able to provide the quality essential services resulting from the additional case load by displaced persons.

Block 3 consists of Kits 11 and 12, containing disposable and reusable supplies to provide comprehensive Emergency Obstetric and Newborn Care at the referral (surgical obstetrics) level. It is estimated that a hospital at this level covers a population of approximately 150,000 persons.

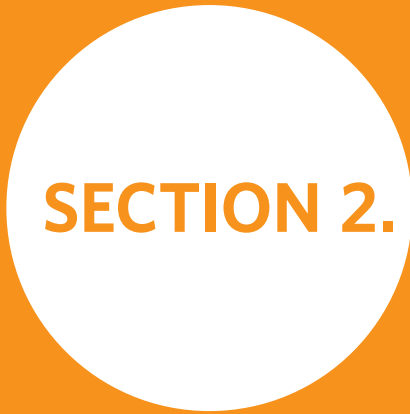
Kit 11 has two parts, A and B, which are complementary but can be ordered separately.

Kits under Block 3 include:

- Kit 11A: Referral Level Kit for Reproductive Health - Reusable Equipment
- Kit 11B: Referral Level Kit for Reproductive Health - Drugs and Disposables
- Kit 12: Blood Transfusion

Detailed information about the specific RH Kits can be found in the Inter-Agency Reproductive Health Kits for Crisis Situations manual 5th edition (RH Kits manual).² The sourcing and procurement of emergency RH Kits is managed by the Procurement Services Branch of UNFPA.

² The manual is available in English, French and Spanish.



**EMERGENCY
PLANNING AND
COORDINATION**

2.1 LOGISTICS MANAGEMENT INFORMATION SYSTEM (LMIS)

A logistics management information system (LMIS) is the system of records and reports that the field office should use to collect, organize, and present logistical data gathered across all levels in the system.

Accurate information is the engine that drives the effectiveness and efficiency of the entire humanitarian logistics cycle. Efficient data collection and analysis is the cornerstone of effective decision making at field office level. The better the information the field office has, the better the decisions it can make.

From a logistical standpoint, only three things can happen to RH Kits once they have been received: stored, moved (in transit), or consumed (used). As RH Kits need to be monitored at all stages of the logistics chain, three types of logistics records are needed for product tracking. Each record type has a distinct form and use:

- stock keeping records, which contain information about the number of RH Kits in storage;
- transaction records, which contain information about RH Kits being moved; and
- consumption records, which contain information about the consumption or usage of RH Kits items.

RH Kits recipients at all levels and from all organizations should retain all logistics records for informed decision making. In emergency response situations, it is highly recommended that such information is collected from all recipients and consolidated for joint decision making. This is typically done through the United Nations Country Team (UNCT) which often consolidates the requirements of the respective entities (such as UN, government and non-government organizations), and distributes resources among them.

The field office should ensure that an appropriate LMIS is established to gather, compile and report on RH Kit inventory, distribution and consumption data, and that staff responsible for supplying RH Kits should be able to:

- a) work in collaboration with partners and implementing field officers to collect various required data along the distribution and consumption channels of the kits.
- b) ensure that LMIS data for the RH Kits covers stock inventory, transactional and consumption records. Information on the correct format and structure of the data to be collected is covered in the following sections and annexes.
- c) analyze and use the data to make decisions on:
 - Policies and programme management. This is particularly important where, for example, an emergency situation becomes protracted or chronic and the affected population is confined to resettlement sites and there is therefore an ongoing and genuine need for the continued supply of RH Kits. In this case RH Kit records will be essential for ensuring an adequate budget and resources are secured for the supply of RH Kits through the programme cycle.
 - Forecasting the demand for RH Kits and the level at which they will be reordered. Rational decisions based on RH Kit data will significantly help to avoid stock out situations and support engagement on fund mobilization and allow advance communication with PSB.
 - Ensuring accountability. Efficient and effective utilization of the RH Kits purchased with public funds or provided by the donors is essential to safeguarding the credibility of the organization.
 - Compliance with International Public Sector Accounting Standards (IPSAS). For organizations which apply IPSAS, a LMIS not only monitors the stock controlled by the organization (considered as inventory under IPSAS), but also captures earmarked stock that is in the organization's custody but not control. A LMIS can therefore provide a more comprehensive view of the stock available for programming.

2.2 PERSONNEL REQUIREMENTS AND RESPONSIBILITIES (HUMANITARIAN FOCAL POINT)

Given the needs and scale of a humanitarian emergency, the field office should:

- a) Appoint a dedicated focal point to assume immediate responsibility for the procurement, coordination, distribution and assessment of RH Kits in emergency situations who should work closely with other colleagues in the office. This function can be reflected in the focal point's performance appraisal (PAD) to ensure accountability even if the focal point is not hired as a logistics specialist.
- b) Immediately assess if there is a need to recruit a logistics advisor in the field and include this requirement as part of the original funding proposal.
- c) Support and facilitate the recruitment of a RH Coordinator (focal point) in the health cluster team or the RH working group and ensure all aspects of the procurement, logistics and consumption of RH Kits are communicated and coordinated with the RH coordinator.
- d) Provide support for the RH Coordinator. As per the MISP guidelines, the function of the RH Coordinator is to ensure that operational and technical support is provided for health partners to implement the

MISP in all locations affected by the emergency in a timely and appropriate manner.

The support can include:

- i. Providing technical guidance for the coordinated procurement of RH Kits;
- ii. Assisting partners in identifying competent staff to implement MISP objectives for RH in emergencies;
- iii. Identifying and establishing a list of all focal points whose organisations requested RH kits for eventual distribution and follow up on utilization. Gather contact details of the focal points, including phone numbers, physical, postal and email addresses etc.
- iv. Immediately identifying any capacity building gaps and needs, and including training plans in the request for emergency funding. Where possible, combine any training on logistics management with MISP clinical trainings to facilitate the understanding of both the logistics management and utilization aspects of the kits.
- v. Helping to identify the reporting lines from the service delivery level upward.

2.3 QUANTIFICATION OF RH KITS: PREPARATION AND FORECASTING

Quantification is a critical LMIS activity. It links information on services and RH Kits from the facility level to programme policies and plans at the national level in order to estimate the quantities and costs of the RH Kits required for an emergency programme. Quantification is important for deciding on RH Kit selection, funding, procurement and delivery. The results of a quantification exercise help field office programme managers to:

- identify the funding needs and gaps for procurement of the RH Kits;
- leverage the sources, amounts, and timing of funding commitments to maximize the use of available resources and advocate for additional resources, when needed;

- develop a supply plan to coordinate procurement and shipment delivery schedules to ensure a continuous supply of RH commodities.

Quantification of RH Kits should be in line with the MISP guidelines and based on the actual or estimated population figures of the affected catchment areas. To prepare for quantification, field offices should:

- confirm the population size of each affected area prior to quantifying the need for RH Kits. Population data should be sourced from a variety of verifiable sources, including UN agencies, government, ICRC and NGOs;
 - have carried out an initial assessment of RH services as per the MISP guidelines through a rapid but comprehensive survey to gather information including:
 - population per catchment area, number of health facilities, service providers and the type of RH services offered and gaps in services;
 - the types and quantity of RH Kits prepositioned or in transit from other stakeholders.
 - coordinate and share information on the cost and availability of RH Kits with other humanitarian assistance stakeholders who are on the ground and involved in providing reproductive health services in emergency areas, who may be interested in doing direct procurement;
 - coordinate and plan within the health cluster or RH working group on the procurement, distribution and utilisation of RH Kits to avoid wastage of resources or duplication in relief efforts;
- ensure government actors and NGOs are involved in planning and sharing information on the relief effort. However, in conflict-related emergencies where government legitimacy is contested, the field office should work mainly through civil society organisations and groups;
 - strengthen partnerships for logistics management – warehousing, transportation and distribution. In the absence of government facilities, the field office should mobilize logistical resources with local UN agencies, NGOs or local organizations who have a comparative advantage such as WFP, CARE etc;
 - propose a long term programme intervention, in the event that a UNCT anticipates that an emergency situation is likely to become chronic and result in the establishment of long term refugee camps. In this scenario the projected costs of the long term provision of RH Kits should be included in regular country programme planning (CPD, CPAP and AWP).

RH Kit supply requirements will be calculated during the forecasting phase, and will be based on the information collected during the preparation phase or at the onset of the crisis with massive displacements.

The contents of the RH Kits are based on the assumptions derived from epidemiological data, population profiles, disease patterns and experience gained from their usage in emergency situations.

To determine the quantities of RH kits to be ordered, refer to the table below, adapted from the Inter-agency RH Kits manual.

Table 1 – Assumptions used in calculating the demand for RH Kits

Demographic assumption	Kit 1-5	Kit 6-10	Kits 11 and 12
Size of population that can be served by each kit	10,000	30,000	150,000
No. of adult males (20% of total population)	2000		
No. of women aged 15-49 years (25% of total population)	2500		
<i>Given standard crude birth rate of 4%,</i>			
▪ Estimated no. of deliveries in 12 months	400	1200	6000
▪ Estimated no. of deliveries in 3 months	100	300	1500
▪ Estimated no. of pregnant women at any time	300	900	
No. of women aged 15-49 years who have suffered sexual violence (2% of total female population)	50		
No. of women aged 15-49 years using contraception (15% of total female population), and of which,	375		
▪ No. of women using oral contraceptives (40% of total women using contraception)	150		
▪ No. of women using injectable contraceptives (55% of total women using contraceptives)	210	60	
▪ No. of women using an IUD (5% of total women using contraceptives)	20		
No. of pregnancies that end in miscarriage or unsafe abortion (20% of total deliveries within a 3 month period)		60	
No. of women who have vaginal tears when giving birth (15% of total deliveries within a 3 month period)		45	
No. of births that require caesarean section (5% of the total deliveries within a 3 month period)			75

Where the affected population size is smaller than that a single kit will cover for a specific catchment area, country offices should calculate and note how long it will take to exhaust such a kit.

It is important that RH kits should be supplied to facilities with trained and competent service providers. The RH Kit manual provides information on the type of trained staff and the health facility level for which the RH Kits are destined.

For better preparation and forecasting, it's highly recommended that all requests from partners working in the field, including the UNFPA country office, other local UN agencies, Government, NGOs, etc., be collected, consolidated and entered on the RH Kit Quantification Form (see Annex I).



SECTION 3.

**FUNDING
AND ORDERING
PROCESS FOR RH KITS**

3.1 THE UNFPA EMERGENCY FUND AND APPLICATION PROCEDURES

UNFPA Executive Board decision DP/FPA/2000/12 established an Emergency Fund to be utilized for humanitarian programmes in both acute and chronic emergencies where serious and immediate population and reproductive health needs are identified.

The Emergency Fund has been established as a special fund within the UNFPA budget and is overseen by the Programme Division. The fund was originally established at US\$1 million and subsequently increased to US\$3 million by decision number 2005/40 of the Executive Board.

The Humanitarian Response Branch (HRB) has developed guidance for UNFPA country offices as to how and when the Emergency Fund can be accessed (see UNFPA Emergency Fund (2011) Procedures).

RH Kit procurement meets the eligibility criteria for UNFPA country offices to apply and access emergency funding. Should other commodities need to be procured with emergency funds then the UNFPA country office should refer to the UNFPA Emergency Procurement Procedures.

3.2 WORKING WITH PSB TO ORDER RH KITS

Under the MISP guidelines, UNFPA is in charge of assembling and delivering Inter-Agency RH Kits. As such, it has to facilitate rapid procurement and distribution processes while at the same time ensuring the quality of the products it is sourcing for its clients. The procurement of RH Kits and coordination of delivery into the affected countries is handled by the Emergency Team of the Procurement Services Branch (PSB). UNFPA has no mandate to modify the contents of the Inter Agency RH kits.

When planning an order of RH Kits, the field office should carry out the following,

a) Prepare the following information, which is also part of Annex I:

- where the kits will be used and which organization/individual will organize their distribution (distribution plan);
- contact details, and delivery and funding information. In addition, information about the geographic distribution and size of the population, the number of health centers and referral hospitals, and the estimated duration of the humanitarian operation will help to accurately calculate the required quantity of RH Kits;

• information about health service providers, including the number of:

- › doctors and qualified midwives;
- › doctors qualified for practising obstetrical surgery;
- › traditional birth attendants;
- › nurses and community health workers;
- › trained nurses with or without skills in obstetrics.

b) When applicable, UNFPA country offices should consolidate orders for the kits from the field offices of other UN Agencies, NGOs, donors and the Government. The above mentioned information should also be consolidated before the procurement request is submitted to PSB.

c) UNFPA country offices facilitating procurement for other agencies should ensure that fund transfers are done in a timely manner so that the procurement process at PSB can proceed.

d) Fill out the RH Kits Request Form:

- Internal clients, including UNFPA country offices, regional offices, HQ divisions and branches, should fill out the “ERH Kits form - Internal Clients”
 - External clients, including other UN agencies, governments, NGOs, donors, etc, should fill out the “ERH Kits form - External Clients”
 - Both forms are available on the UNFPA internet webpage for RH Kits. The cost of the kits is included in the form for budgeting purposes. However freight charges will only be known when quotations are given by the shipping agent.
- e) Complete the RH Kits Distribution Plan, which is available on the same website above.
- f) Approval process:
UNFPA country office RH Kit requests funded through the UNFPA Emergency Fund are first reviewed and cleared by the HRB RH advisor or the regional RH humanitarian focal point, before being submitted to PSB for procurement. However, country offices are encouraged to copy any requests to PSB so that they can prepare in advance.

The RH Kits Request Form should be sent to PSB together with the RH Kits Distribution Plan. To order RH Kits from PSB please use the details below:

Email: rhkits@unfpa.org
Tel: +45 3546 7368 / 7000
Fax: +45 3546 7018

UNFPA Procurement Services Branch
 Midtermolen 3, 2100 Copenhagen, Denmark

Expected delivery of RH Kits once payments have been finalized is 3-7 days for emergency situations and 10-12 weeks for non-crisis situations. International transportation of the kits will be managed by PSB, and transportation is factored into the delivery lead time.

The content and unit cost of the RH Kits are updated periodically. Please contact the UNFPA PSB Emergency Team directly to facilitate ordering, discussing any budgeting questions and to ensure that contact and delivery information is correct.

In-country transport to final delivery destinations is dependent upon the ordering agency's local transport and storage arrangements. Prior arrangements should be made to: receive the goods as soon as they arrive at the port of entry into the country; and ensure that all relevant forms and procedures for customs clearance have been prepared ahead of time in order to avoid unnecessary delays when importing the RH Kits.

Once basic RH services are established, the RH Coordinator should coordinate within the health sector/cluster to analyze the current situation, assess the needs of the population and through the normal procurement procedures, re-order disposables and other equipment if they are needed instead of RH Kits, which are primarily designed for emergency situations and are therefore more expensive. This will serve to ensure the sustainability of the RH program, and to avoid the shortage of some RH Kits supplies and the wastage of some kit components that are not fully utilized.



SECTION 4.

**CUSTOMS CLEARING
AND RECEIPT
OF RH KITS**

4.1 MANAGEMENT RESPONSIBILITY FOR RH KITS

The initial responsibility for RH Kits lies with the ordering agency; in most cases the UNFPA country office. When transfer of kits takes place between the initial agency and implementing agency, the overall responsibility for the management of the RH Kits transfers to the implementing agency, upon reception of the kits. Such responsibility includes, but is not limited to, the storage, transportation and distribution of the kits, as well as the monitoring of the logistics process and evaluation of the utilization of the kits.

If the kits are not transferred to the implementing agency, the overall responsibility for their management remains with the UNFPA country office. Day-to-day functions may be delegated to the RH coordinators, respective logistics officers and technical RH staff on the ground who are in direct contact with service providers for the affected populations.

4.2 GOOD PRACTICE IN CUSTOM CLEARANCE

The planning stage of UNFPA logistics activities requires careful preparation, since crucial aspects need to be coordinated in advance and preliminary agreements reached with the relevant authorities.

- a) During the planning phase, it is essential for the field office to establish contact with the customs and other government authorities to understand clearing procedures and requirements and, if possible, negotiate special conditions, such as tax exemptions or priority processing of humanitarian supplies. Any agreements should be confirmed in writing, to avoid having to renegotiate conditions in the event that senior customs officials are reassigned to new posts.

Moreover, during an emergency, access to customs and other authorities may be more restricted, as many other organizations and individuals attempt to obtain preferential treatment in the handling of their imported relief goods. Some countries have ratified the Convention on the Privileges and Immunities of the United Nations, of 13 February 1946, which includes a series of measures to expedite the inflow and outflow of humanitarian supplies.

Under the UN Convention, all items imported by UN entities for programme or office use are exempted from customs duties. Depending on existing arrangements, UNFPA may have a blanket,

partial or individual shipment exemption. Goods imported by NGOs or other entities might not enjoy the same privilege. On the other hand, all imported goods must still go through customs clearance procedures regardless the status of the consignee.

- b) The logistics focal person in the field office should prepare a customs clearing procedure checklist after identifying the requirements of the existing government regulatory body. This checklist should be updated on a regular basis as necessary.
- c) UNFPA country office contingency plans, developed as part of each country office's emergency preparedness planning, should include instructions on how to deal with customs clearance during emergencies. These should include:
- how to obtain a blanket exemption from the Ministry of Finance on an exceptional basis, which allows duty-free importation of any type and quantity of supplies including RH Kits for the immediate relief operation;
 - how to obtain a partial exemption for a list of specific goods drawn up during the annual planning process;

- when there is neither a blanket nor partial exemption in place, how each shipment could be cleared through customs with an individual exemption.
- d) UNFPA upon obtaining an exemption protocol, contracts a freight forwarder that handles the consignment release from the port of entry. Documents required for customs clearance typically include:
- the original bill of lading (for maritime shipments) or air waybill (for air shipments);³
 - an invoice (showing the value of the goods);
 - the packing list; and
 - document (s) showing the origin of the shipment, certificate of analysis, the mode of transport and the date of arrival in the country.
- e) In addition, most of RH Kits contain essential drugs that may require a pre-permit from the country regulatory and quality control authority. The field offices should identify the necessary formalities and requirements before placing an order for RH Kits with PSB. The copies of the certificate of analysis and certificate of origin should be requested and obtained from PSB well in advance to initiate the pre-permit process.
- f) The field office should select professional and committed freight forwarding agents who are always aware of and up-to-date on the country's adopted customs procedures and systems.
- g) The field office or the logistics focal person should verify existing arrangements with the government or the UNFPA clearing and freight forwarding agents in the country, to make sure that the agents are able to carry out the arrangements under the existing conditions.
- h) The field office should initiate the necessary arrangements in relation to receiving goods and customs clearances by completing the required forms and presenting related shipping documents to request and facilitate the exemption process. The freight forwarder/field office will then get the designated authority, usually the Ministry of Foreign Affairs, to endorse the letter and send it directly to customs; or get the letter subsequently endorsed by the Ministry of Finance and then handed to Customs. The process is only completed when the goods have been loaded/unloaded and released from customs.
- i) Kits are usually pre-cleared before the shipment arrives at the port. Pre-clearance can be arranged by submitting faxed or electronically transmitted copies of bills of lading or air waybills, invoices and packing lists to the local customs officials before the shipment arrives. This is extremely important when dealing with procurement involving "keep cool items" to avoid losing the potency of the ordered items. This procedure is very effective in speeding up the distribution of the kits.
- j) Special care must be taken when receiving goods through a third country. In this case, the receiving country should make arrangements with partners in the third country on customs clearance and transportation.

³ Bill of lading or waybill. This is the shipping contract and proof that the shipment is on board. The document describes the contents of the load in terms of number of packages, volume, weight, and any other useful information. Bills of lading (B/L) apply to maritime transport; waybills refer to both land and air transport.

4.3 INSPECTION AND RECEIPT OF RH KITS

The field office should transfer ownership of the kits to the implementing partner as soon as possible once the RH Kits have been cleared out of the customs warehouse. The field office should ensure the following:

- a) Upon completion of the clearing process and obtaining the customs release permit, the field office together with the freight forwarder inspects the shipment for visible damage or loss at the loading point on the day of discharge of the shipment.
- b) The field office should ensure smooth transfer of ownership of RH Kits to the implementing partner, for example, a government ministry or a community leader.
- c) The field office should ensure the presence of an appropriate government representative or implementing partner or community leader to sign off the receipt of goods as formal evidence that the field office has delivered the RH Kits, and therefore, further management responsibilities of the kits lie with the partners. However, the field office needs to ensure prior to hand over that the partner is able to implement the management responsibilities of the RH Kits;
- d) If it is not possible to transfer ownership of the goods to the implementing partner, and the field office manages in-country logistics, it is important that supplies are tracked and that a good audit trail is kept. Transportation and tracking will be discussed in the next sections.

In the event that expected supplies are not received:

- e) Request that the port authority search the port. If RH Kit items are lost, short-landed (not unloaded from the vessel) or damaged this should be reported immediately to the agents of the carrier (and supplier) via the Agent Notice of Loss or Damage form. The Receiving and Inspection Report (RIR) (Annex II) should be completed immediately, and sent to PSB for them to follow-up with the suppliers/shippers;
- f) For damage or loss, please follow the insurance claim procedures as stipulated in the UNFPA Procurement Procedures guidelines or contact PSB for instructions.

When the RH Kits received are for pre-positioning at a UNFPA designated warehouse, the country office logistics assistant or officer in charge of the management of the warehouse should consider the following tasks:

- a) Before receiving RH Kits:
 - ensure that there is sufficient storage space (know the total size and weight of the expected goods). See the next section for more details;
 - prepare and keep clean the areas used for receiving and storing the RH Kits.
 - organise transport, based on estimated shipment size, between the port of entry and the warehouse;
 - make prior arrangements for storing keep cool items, with government or other partners; remember national immunisation days may impact on storage space for RH keep cool items.
- b) When the shipment arrives at the warehouse, promptly remove the RH Kits from the shipping containers to the storage area. Ensure you communicate with the freight carriers to collect the containers in order to avoid incurring demurrage charges;
- c) On receipt of the RH Kits:

The country office personnel responsible for the particular reproductive health project and the humanitarian coordinator or focal point should make every effort to be physically present at the UNFPA designated warehouses. They should:

- take physical receipt of the kits, together with the logistics focal person, in order to assess the condition of the kits in depth;
- inspect packages for damaged or expired products;
- separate the damaged or expired stock from the usable stock;

- count the number of units/boxes for each RH Kit received, including the damaged kits, and compare these with the respective shipping documents;
 - for the damaged kits, make a note on the Goods Receiving Note (GRN) and also fill out the RIR form mentioned in section 4.3 and inform PSB at the earliest opportunity. See Annex III for GRN template;
 - complete a GRN to record the exact quantity of RH Kits received, including any damaged kits.
 - send a copy of the GRN to the country office, and file the GRN together with the associated procurement documents;
 - complete the bin card. Each card should hold information about a single batch of a particular RH Kit. See Annex IV for a sample bin card.
 - compile the information within all bin cards and record this in the stock control card. A stock control card is an individual stock keeping record that holds information about all batches of a single type of RH Kit. See Annex V for a sample stock control card.
- d) Arrange the storeroom and shelves for the RH Kits and stack RH Kit cartons/boxes as follows:
 - at least 10 cm (4 inches) off the floor;
 - at least 30 cm (1 foot) away from the walls and other stacks;
 - no more than 2.5 m (8 feet) high (general rule).
 - e) Arrange cartons in such a way that identification labels, expiry dates, and manufacturing dates are visible. If this is not possible, write the product name and expiry date clearly on the visible side. Keep all cartons or boxes belonging to a particular kit together to make it easy for them to be moved in case they are being stored temporarily.
 - f) Store the RH Kits as per their storage guidelines. If the items require a cool temperature as in the case of Kits 6, 8, 11B and 12, immediately store the keep cool items in the cool room.
 - g) Arrange RH Kits in the storage area to facilitate the first-to-expire, first-out (FEFO)⁴ procedure.

⁴ Always issue products that will expire first, ensuring items are not too close to or past their expiration date. The shelf life remaining must be sufficient for the product to be used before the expiry date.



SECTION 5.

**PRE-POSITIONING
RH KITS**

Stock pre-positioning is where supplies are placed strategically in a warehouse close to potential disaster-prone regions to facilitate rapid deployment in the event of a new disaster. This is part of contingency planning in the emergency preparedness phase, which enables the field office to minimize costs and respond promptly when disaster strikes.

The following sections outline the fundamental requirements and procedures that the field office should undertake for effective and efficient RH Kit pre-positioning.

5.1 DETERMINING WAREHOUSE SPACE REQUIREMENTS

Before ordering RH Kits for pre-positioning, the field office should determine the warehouse storage requirements based on the criteria below and amount of secure space needed.

Table 2 depicts a hypothetical example of how to calculate space requirements for RH Kits in order to ensure that available space is adequate in quantity and quality. It is recommended that field offices apply a space requirement formula irrespective of how the warehouse is acquired, e.g. whether it is managed by an implementing partner, shared with other UN agencies, rented, or is an outsourced warehouse.

The steps to calculate and determine the actual warehouse space requirement for RH Kits are as follows:

- a) Based on an historical, current and future needs assessments, as well as the availability of funds, estimate the maximum number of each type of RH Kit units that need to be stored at any one time at the warehouse designated by the field office.
- b) Multiply the number of each RH Kit unit by the number of boxes in each RH Kit to get the total number of boxes.
- c) Calculate the volume of each RH Kit using the information provided in the RH Kits manual.
- d) Multiply the number of kits required by the volume per kit to get the total volume for each type of RH Kits.
- e) Divide the total volume by the 2.5m (8 foot) general stack rule to get the floor area needed for each kit.
- f) Multiple the floor area by 2 to also allow for aisle, handling spaces and other variables.
- g) Calculate the total area needed to store and handle all kits required.
- h) Take the square root of the total area required to identify the length of the square area required to store the kits; or identify the appropriate parameters of a warehouse or building area that will meet the storage needs.

Table 2 - Calculating the warehouse space requirement for a hypothetical number of RH Kits.

RH Kits	Number of Boxes per Kit	Number of Kits Required (a)	Total Number of Boxes (b)	Volume per Kit (Cubic Meter) (c)	Total Volume of Kits Required (d)=(c) x(a)	Floor Area Required to Store the Kits (Stack Height Limit: 2.5 Meters) (e)=(d)/2.5	Floor Area for the Kits + Handling Space (x2 of floor area required) (f)=(e)x2
Kit 0	1	100	100	0.067	6.70	2.68	5.36
Kit 1A	4	200	800	0.290	58.00	23.20	46.40
Kit 1B	1	200	200	0.066	13.20	5.28	10.56
Kit 2A	4	300	1200	0.316	94.80	37.92	75.84
Kit 2B	1	300	300	0.038	11.40	4.56	9.12
Kit 3	1	50	50	0.023	1.15	0.46	0.92
Kit 4	1	100	100	0.086	8.60	3.44	6.88
Kit 5	1	100	100	0.150	15.00	6.00	12.00
Kit 6A	2	200	400	0.236	47.20	18.88	37.76
Kit 6B	4	160	640	0.325	52.00	20.80	41.60
Kit 6B keep cool	1	160	160	0.010	1.60	0.64	1.28
Kit 7	1	100	100	0.086	8.60	3.44	6.88
Kit 8	1	100	100	0.150	15.00	6.00	12.00
Kit 8 keep cool	1	100	100	0.024	2.40	0.96	1.92
Kit 9	1	50	50	0.067	3.35	1.34	2.68
Kit 10	1	100	100	0.030	3.00	1.20	2.40
Kit 11 A	1	20	20	0.086	1.72	0.69	1.38
Kit 11 B	34	5	170	3.094	15.47	6.19	12.38
Kit 11B keep cool	1	5	5	0.036	0.18	0.07	0.14
Kit 12	1	30	30	0.120	3.60	1.44	2.88
Kit 12 keep cool	1	30	30	0.156	4.68	1.87	3.74

Total area required to store and manage the kits, non-keep cool (g): 287.04 m²

Length needed for a square area, non-keep cool (h): $\text{SQR}(294.12) = 16.95$ m

Total area required to store and manage keep cool items (i): 7.08 m²

5.2 STORAGE CONDITIONS FOR RH KITS

The field office and its RH interagency partners should be aware of the optimum and recommended storage conditions for various boxes in each RH Kit. These are

shown in Table 3 below, which is derived from the RH Kits manual.

Table 3 - Storage conditions for RH Kits

KIT	Storage Condition	Temperature Range (°C)
Kit 0	Room Temperature	15-25
Kit 1A	Room Temperature	15-25
Kit 1B	Room Temperature	15-25
Kit 2A	Room Temperature	15-25
Kit 2B	Room Temperature	15-25
Kit 3	Room Temperature	15-25
Kit 4	Room Temperature	15-25
Kit 5	Room Temperature	15-25
Kit 6A	Room Temperature	15-25
Kit 6B	Room Temperature	15-25
Kit 6B keep cool (one box)	Cold Room Storage	2-8
Kit 7	Room Temperature	15-25
Kit 8	Room Temperature	15-25
Kit 8 keep cool (one box)	Cold Room Storage	2-8
Kit 9	Room Temperature	15-25
Kit 10	Room Temperature	15-25
Kit 11 A	Room Temperature	15-25
Kit 11 B	Room Temperature	15-25
Kit 11B keep cool (one box)	Cold Room Storage	2-8
Kit 12	Room Temperature	15-25
Kit 12 keep cool (one box)	Cold Room Storage	2-8

NOTE:

- Kits 6B, 8, 11B and 12 contains drugs with special storage conditions. Oxytocin and reagents for blood grouping, HIV and hepatitis B tests as well as the rapid plasma reagin (RPR) test are keep cool items; thus, the cold chain must be maintained during transportation and storage. These products are therefore packed separately in a cool box, and labelled "keep cool".
- Diazepam, injectable, 2ml, 5mg/ml (50 amp) is usually used kept together with items in Kit 6B and 11B and Pentazocine, injectable, 30 mg/3ml, 1ml

(6 amp) with items in Kit 11B. However, these items are not included in the RH Kits because these are controlled substances and require an import licence from the country of destination prior to shipment, which will often delay the delivery process. Therefore the items should be purchased locally. It is also important to ensure these drugs are listed in the country's Essential Drugs List, before placing order. At the final delivery point, should these drugs be stored together with other kit items, access to these drugs should be restricted.

5.3 RH KITS WAREHOUSE SELECTION

The field office focal person for warehouse management is advised to consider the following recommended warehouse criteria when selecting storage for RH Kits:

- a) **Location:** The warehouse must be accessible to all the health facilities or units to be served. Ensure appropriate road access for the largest vehicles that may need to come to the warehouse. Avoid warehouses situated in low lying land in case there is a flood risk.
 - b) **Accessibility:** Locate the warehouse so that the RH Kits can be easily received and distributed. The location can be close to an airport, a national road or a canal system.
 - c) **Security:** Ensure that the warehouse has adequate security to guard against theft, fire, etc. Fencing or perimeter walls should be used to improve security and control access; In many situations, security guards are employed to reduce looting or theft of various items.
 - d) **Warehouse insurance:** Ensure that the warehouse facility has adequate insurance coverage.
 - e) **Capacity/space:** Warehouse facilities must have sufficient capacity for both storage and handling. Ideally, space should be evenly divided between the two. Plan the warehouse with staging areas for preparing shipments (issuing) and unloading deliveries (receiving). Depending on the volume of transactions, separate the receiving and shipping areas to avoid confusion and to enhance efficiency and security.
 - f) **Cold storage:** In larger facilities it is more efficient to use cold rooms rather than numerous refrigerators or freezers (which generate heat). Ideally, larger facilities should have one room with a negative temperature for frozen products (-20°C) and another room with a positive/ but cool temperature (2°-8°C) for products requiring refrigeration. The keep cool items within the RH Kits are to be stored in refrigerated rooms.
- During emergencies and in post-conflict countries, it can be difficult to find refrigeration facilities. An option is to use the cold chain facilities of agencies who procure large amounts of medicines including the expanded programme of vaccination in the Ministry of Health. In difficult situations, the keep cool items can also be stored in normal refrigerators at an appropriate temperature.
- g) **Ventilation:** The location and design of storage areas should ensure maximum air circulation to avoid concentrations of fumes or gases and to prevent condensation of moisture on the RH Kits and the walls.
 - h) **Roof:** There should be a slanting roof to allow water run-off. The roof should be extended over the windows to give extra protection from rain and direct sunlight. Always use pallets to raise the RH Kits from the floor.
 - i) **Ceiling:** a double ceiling will provide insulation and ensure that the RH Kits are stored in suitable temperature.
 - j) **Lighting:** Select warehouse storage that lets in as much natural light (sunlight) as possible to minimise the need for either florescent or incandescent bulb lighting. Florescent lighting emits ultraviolet rays, which have a negative effect on certain products in the RH Kits, and incandescent bulbs emit heat which will affect the temperature. At the same time, be careful not to expose the RH Kits to direct sunlight.
 - k) **Windows:** ensure windows are high and wide, and are not blocked by shelves, to allow adequate ventilation. Windows shall have wire mesh to keep out insects and be burglar proofed.
 - l) **Generator:** the warehouse should be equipped with a stand-by electric generator that, in the event of power failure, can produce electricity to light the warehouse and to maintain the required temperature of the keep cool items.
 - m) **First aid:** Keep a well-stocked first aid kit to treat employees or visitors who are injured at the facility.
 - n) **Fire extinguishers:** ensure the availability of fire extinguishers and if possible smoke detectors.

5.4 WAREHOUSING GOOD PRACTICE

The field office focal person for warehouse management is advised to undertake the following routine warehouse management activities:

a) Daily and weekly:

- update stock records and maintain files;
- if cycle counting⁵, conduct physical inventory and update stock keeping records;
- monitor stock levels, stock quantities, and safety stocks;
- initiate replenishment orders as per the reorder level;
- update back-up files for computerized inventory control records, if any.
- update bin/stock cards;
- separate expired stocks and move to a secure area. Expired or damaged stocks should be disposed of in accordance with the established procedures.

b) Monthly:

- conduct complete physical inventory⁶ or cycle count, and update stock keeping records;
- run the generator to ensure it is working correctly; check the level of fuel and carry out maintenance as indicated, if necessary;
- check for signs of rodents, insects and roof leaks;
- thoroughly clean floors, walls, ceiling, partitions, support beams, windows, doors and frames. Eco-

friendly methods should be applied to protect the warehouse from insects;

- inspect the storage facility for damage, including the walls, floors, roof, windows, and doors.

c) Every 3 months (quarterly):

- conduct a physical inventory or cycle count, and update stock keeping records;
- use established procedures to dispose of expired or damaged products;
- visually inspect fire extinguishers to ensure that pressures are maintained and extinguishers are ready for use;
- store products using correct procedures; rearrange commodities to facilitate the first-to-expire, first-out (FEFO) policy;
- complete required reporting forms and documentation.

d) Every 6 months:

- conduct fire drills and review fire safety procedures;
- inspect the first aid kit, and replace any expired items;
- inspect trees nearby the RH Kits warehouse and cut down or trim any trees with weak branches.

e) Every 12 months:

- service fire extinguishers and smoke detectors;
- conduct complete physical inventory and update stock keeping records;
- reassess maximum/minimum stock levels, and adjust as necessary.

f) At all times – maintaining security of the RH Kits warehouse:

⁵ **Cyclic or random physical inventory counting:** Selected products are counted and checked against the stock keeping records on a rotating or regular basis throughout the year. This process is also called cycle counting.

⁶ **Complete physical inventory:** All products are counted at the same time. A complete inventory should be carried out at least once a year. More frequent inventory (quarterly or monthly) is recommended. For large warehouses, this may require closing the storage facility for a day or longer.

- only personnel in charge should be allowed free access to the warehouse;
- the presence of unauthorized persons must be prohibited as much as possible, or their such access must be regulated, and such persons should be accompanied by authorized staff;
- strict control of the keys to the warehouse must be maintained;
- the warehouse should be guarded during the day and at night time.

g) Insurance of RH Kits in warehouse:

- if the RH Kits are not insured or adequately covered by the warehouse insurance policy, the field office focal person is responsible for ensuring that the RH Kits are adequately insured against all types of risk.⁷

⁷ Comprehensive insurance coverage for all risks unless a risk is specifically excluded.



SECTION 6.

**DISTRIBUTION
AND MONITORING
OF RH KITS**

6.1 DISPATCH OF RH KITS

When RH Kits are requested for distribution from a designated warehouse, the field office focal person for warehouse management should ensure the following;

- a) The requesting unit should fill out the desired quantity in the "quantity requested" column of the Goods Issue Note (GIN) (see Annex VI).
- b) The GIN should be signed by the requester and a member of staff authorized to release the RH Kits from the warehouse. The authorized staff member should not be the same as the warehouse management focal person. The authorized staff member can, for example, be the Operations Manager, or the RH focal point, or the Humanitarian Response Coordinator.
- c) Based on the available quantity of the RH Kits in the warehouse, the field office focal person fills out the actual quantity to be dispatched on the GIN "quantity issued" column and indicates the batch number in the "batch issued" column. The FEFO method should always be used.
- d) A bin card is not an auditable document. Rather, it is designed to provide a quick update on the stock that is physically available. If there are multiple transactions on a particular date, update the bin card at the end of the day by entering the sum of the all the transactions made during the day. Immediately deduct the quantity of dispatched RH Kits from the right bin card.
- e) Immediately update the quantity and calculate the balance on the stock control card. Compare the result with the reordering level and, if necessary, initiate a procurement request.
- f) While loading the RH Kits onto the transportation vehicle, cross check that the loading is conducted according to the inventory record form.
- g) After obtaining the transporter's signature, issue two copies of the GIN; one to the driver and the other to the requesting unit for follow up. The staff responsible for the follow up should ensure that:
 - the partner's focal person on the receiving end is aware of the date, time and quantities of the RH Kits being dispatched. Every effort has been made to contact the focal person if no reply is received;
 - the receiving focal person should report back if the RH Kits are received in good order by signing and returning the GIN;
 - the receiving focal person should report any discrepancies, including damages and losses, on the GIN.

6.2 TRANSPORTATION OF RH KITS

Transportation operations, as with all other segments in the logistics chain, require control and monitoring procedures to help track the RH Kits from the moment they are dispatched until their reception at their final destination. The following are important points that the field office focal person for warehouse management should undertake;

- a) Select the appropriate mode of transportation:
 - the mode of transportation usually includes air, sea, road (train or truck) or a combination of modes;
 - the method for transporting RH Kits to service delivery points (SDPs) will depend on the accessibility of these SDPs, the local transport infrastructure, and the urgency of the dispatch;
 - when selecting delivery by sea or by road, the main factors that will determine the transportation cost will be the volume of the kits and the distance of the SDPs from the warehouse;
 - when selecting delivery by air, the main factors that will determine the transportation cost will

be the weight of the kits and the distance to the SDPs. The weight of the RH Kits is illustrated in

the table below, which is extracted from the RH Kits manual.

Table 4 - Weight of RH Kits

KIT	Number of Boxes per Kit	Total Weight per Kit (kg)
Kit 0	1	16.50
Kit 1A	4	62.00 (15.50kg/box)
Kit 1B	1	7.00
Kit 2A	4	92.00 (24.00kg/box)
Kit 2B	1	10.25
Kit 3	1	7.00
Kit 4	1	15.00
Kit 5	1	35.00
Kit 6A	2	31.00 (10.00kg and 21.00kg)
Kit 6B	4	101.00 (28.50kg, 27.50kg, 21.00kg and 24.00kg)
Kit 6B keep cool	1	0.50
Kit 7	1	14.00
Kit 8	1	36.00
Kit 8 keep cool	1	2.00
Kit 9	1	15.00
Kit 10	1	3.00
Kit 11 A	1	20.00
Kit 11 B	34	1079.00 (20.00-36.00kg/box)
Kit 11B keep cool	1	4.00
Kit 12	1	15.00
Kit 12 keep cool	1	3.00

b) Proper management and follow up of the transportation service:

- know the route taken by the transporter and identify which shipments arrive at their destination and those shipments that do not arrive as per the agreed timeframe;
- identify all those involved in RH Kits shipment from its dispatch site to its final destination;
- keep control documents on the shipment and the dispatched RH Kit supplies. When using commercial transportation, bear in mind that not only the cost, but also the company's reliability and

quality of service (speed, security, seriousness, etc.) are important. And since this is a paid service, full compliance with the agreed terms and conditions is required.

c) In case of transportation by road, measures should be taken to protect the cargo against damage, weather, theft, etc. Application of the basic measures below by the field office will facilitate the safe arrival of the RH Kits in good order at their destination:

- Vehicles should not be loaded beyond the stated weight capacity. Moreover, when the itinerary is irregular, dangerous, or in very bad shape, it is

better to apply the “concept of safe cargo”, that is, the vehicles do not load to the maximum capacity, in order to allow more maneuverability on difficult terrain.

- In an open vehicle, the cargo must be covered with tarpaulin canvas or plastic sheets to protect the kits from rain, sun rays and dust as well as to keep some confidentiality regarding the material being transported.
- The cargo must be firmly secured with ropes to prevent it from moving, which could damage the packages and bundles, and also destabilize the vehicle.
- The use of the appropriate equipment (refrigeration, coolers, cool boxes etc.) should be taken into consideration when moving keep cool items alongside RH Kits;
- Communication: vehicles should have communications equipment in order to be able to contact each other and those at the departure and arrival points;
- Travel documents: Documentation for vehicles and cargo must be up-to-date and available whilst en route. Drivers should have a copy of the cargo list and the official written authorization from the field office and/or government authority (if required) to transport the RH Kits, so that they can be presented if requested by the local authorities during the journey.
- If the RH Kits are transported directly from the port of entry to the designated beneficiary, the Way Bill should be used in addition to the field office and local authority letter. See Annex IX for a sample Way Bill.

6.3 DISTRIBUTION OF RH KITS

a) Direct distribution

Direct Distribution refers to distribution made by the field office directly to SDPs.

Engaging in direct distribution requires a good working knowledge of the affected population and the physical and social environment. It also calls for logistical, administrative, and infrastructural capabilities. Direct distribution can provide greater control over the use of RH Kit supplies. However, it can prove extremely challenging if there is a lack of experienced and competent personnel or the capabilities mentioned are not available. Historically UNFPA country offices have experienced significant issues when using direct distribution and this, coupled with the likely lack of local capabilities, means that direct distribution is not a recommended approach. Rather the use of direct distribution should be an exception and for a limited period.

Some important factors affecting the success of direct distribution are the following:

- When distribution takes place in an unfamiliar area, it is important to identify people who know the region and local community well, can provide guidance and contacts, and can facilitate access to the community. However, it is important not to rely on individuals or groups who may wish to control aid supplies for private gain, or to benefit a particular group instead of addressing the needs of the most vulnerable groups within the general population.
- Identify community leaders and organizations including community based organisations that are representative of the affected population and who can help coordinate the relief effort. It is also key that the local community, through its leaders, is involved in the planning, implementation and monitoring of projects within its community. Care must be taken, nevertheless, not to lose autonomy or control over the RH Kit supplies.
- Identify any pressure groups within the affected populations and the dynamics of local rivalries and alliances. Also look out for possible conflict situations in order to take proactive measures to prevent any challenges or obstacles.
- Establish or strengthen health-related information starting with tracking of the beneficiaries of the RH supplies and updating, for example, data on health facilities and patient registers in the area.

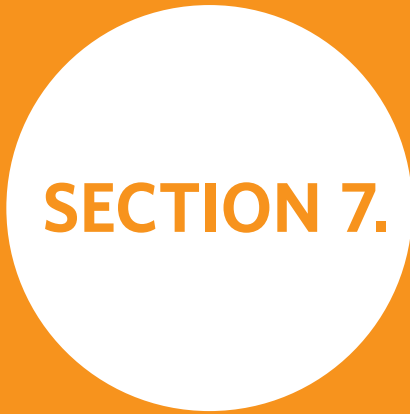
- Most kits are to be distributed to healthcare providers or SDPs, while Kit 2A – Clean Delivery Kit should be distributed directly to women, visibly pregnant through community health workers or other non-healthcare channels, for example, alongside food or non-food items (NFIs) distribution.
- For RH Kits that are delivered to health facilities, a written and signed transfer confirmation note should be received.
- Every effort must be made to prevent exceptional or preferential treatment, or nepotism. When UNFPA conducts the initial distribution of supplies many local counterparts may be involved, so any unfair practices are likely to lead to conflicts that undermine UNFPA standards and credibility, and even threaten security.
- Delivery procedures should not change frequently. It confuses the beneficiaries and can reduce the effectiveness of the distribution system.
- The field office must take steps to prevent the exclusion of individuals/ health centers that qualify as beneficiaries on the basis of difficult access to distribution points.
- When arranging the distribution of Kit 2A, the unit, institution or organization in charge, should clearly identify with signs or placards the distribution areas, and secure their perimeters, to prevent overcrowding and direct contact of the affected population with RH Kit supplies.
- It is important to assign some responsibility to the beneficiaries themselves for tasks related to the distribution of the kits. For example: helping with the offloading or carrying of the RH Kits, organizing the queues, or building distribution sites. Sometimes it will be necessary to ask local people, particularly local leaders, to help organize the deliveries, for instance by acting as interpreters or providing advice on how to adapt the distribution process to local or ethnic customs.
- Staff responsible for loading and/or unloading must know that all cartons that are an integral part of a particular kit should not be separated. For example, some kits are comprised of two cartons, i.e. carton 1 of 2 and carton 2 of 2. While distributing the kit to a health facility/medical camp, the two cartons that make up a kit cannot be split among beneficiaries.

b) Indirect distribution

When working in unfamiliar places it is very difficult for the field office to carry out appropriate distribution in a short period of time. If the field office is not in a position to carry out direct distribution, it is very important to find a reliable local counterpart that knows the population and the area, and who can provide a guarantee that the distribution will be conducted as per UNFPA standards;

Indirect distribution is easier and quicker, but the final destination of the donations must be carefully monitored to ensure delivery to the affected populations. The clear disadvantage of this approach is that visibility of the supplies is sacrificed, which is very important for UNFPA and its field offices. In order to mitigate the risks associated with this method of distribution, the following must be done:

- Identify a trusted local counterpart with an effective presence in the field, such as: community groups, non-governmental organizations, social institutions, neighbourhood committees.
- Services for managing the distribution of supplies are accurately budgeted at the initial stage of the procurement project.
- Do not use organizations that are antagonistic or conflictive within the community or towards other organizations, or organizations that are openly identified as belonging to a political party or military faction in dispute. In any case, field offices should not enter into exclusive agreements with local organizations, but rather efforts should be made to establish balanced relationships to avoid security problems and accusations of unfair treatment.
- On identifying the local counterpart, agree from the outset a memorandum of understanding, distribution control and monitoring mechanisms, as well as the way in which the activities will be reported.
- Close contact, follow-up and feedback with the counterpart are required as well as the frequent presence of the field office in the affected area. This is essential for support the activities and to make sure that the distribution is conducted appropriately.
- A periodic check must be carried out on the distributed and remaining RH Kits, as well as monitoring of the distribution activities carried out by the counterpart in the field.



SECTION 7.

INVENTORY MANAGEMENT

According to the UNFPA Inventory Policy, reproductive health commodities, regardless of their storage location, are recorded as inventories at the end of the financial period, and are valued at the inventory cost or current replacement cost, whichever is lower. The inventory cost is determined and based on the weighted average as described in the policy.

To fully comply with IPSAS 12 standard, a UNFPA country office should strictly apply the Guidance Note for Recognition and De-recognition of Inventory for UNFPA. The guidance note shall be applied to all RH Kits under UNFPA control as per the UNFPA Inventory Policy.

7.1 INVENTORY CONTROL AND REPORTING

An inventory control system helps warehouse personnel avoid RH Kit stock shortages or over supply by facilitating effective ordering and stock control.

a) The field office warehouse focal person should take account of the following in the management of the level and movement of RH Kits supplies in the warehouse:

- **Stock levels.** Keeping track of stock levels helps to determine whether any given RH Kit is over-supplied or becoming scarce. RH Kits should be kept in storage for the shortest time possible, but the stock of RH Kits should never be allowed to reach zero while it is still required. Using a system of minimum and maximum stock levels⁸ might not be feasible when responding to a disaster, but during the recovery phase enough RH Kits must be readily available to cover all needs. This necessitates an estimation of the level of stock required to cover the affected population during that period.
- **Stock level estimates.** Estimating the stock levels needed to provide basic RH care to the affected population requires collecting and analyzing data on RH Kit usage trends, and the duration of the relief effort.
- **Stock control.** This process is directly linked to the acquisition process. It ensures that adequate quantities of required RH Kits are requested and are received. Effective stock control should ensure that stocked RH Kits do not spoil due to overlong storage or exceed their shelf life.

- **Shelf-life control:** It is important to monitor regularly the expiry dates of stored RH Kits and keep a record of these. Short-dated RH Kits should be distributed first. If any RH Kits are found to be past their expiry date, they should be disposed of carefully. Under no circumstances should an expired RH Kit be administered, since it may be ineffective or harmful, unless a qualified professional can state otherwise.

- **FEFO:** Apply the principle of “First-to-expire, first-out”. This requires the maintenance of an up-to-date log of the entry and expiration dates of the different products.

b) The field office warehouse focal person should ensure the following inventory control and reporting mechanisms are in place for RH Kits stored in the warehouse:

- Inventory recording tools and follow-up procedures should be agreed upon and designed during the preparation phase of logistics planning.
- Careful design of the documentation is important, since it should both confirm and complement the information gathered at the various stages of the consignment’s journey.
- Goods Receiving Notes (GRN) and Goods Issue Notes (GIN) should bear the field office logo, be consecutively numbered, and include copies for all the people responsible for the shipment at its various stages. Preprinted and pre-numbered GRNs and GINs are highly encouraged in order to strengthen the control function.
- Each new arrival of RH Kits must be recorded via the inventory record forms. Even RH Kits that ar-

⁸ A **max-min inventory control system** is designed to ensure that the quantities in stock fall within an established range.

rive in a poor or unusable condition must be recorded as such.

- At a minimum there must be a stock control card for each type of RH Kit stored in the warehouse. This should indicate the dates and quantities of incoming and outgoing goods, the current stock level of the particular kit and their location within the warehouse. Depending on the size of the warehouse and the type of RH Kit, the field office is advised to use the bin card system to strengthen RH Kit quality control.
- It is mandatory to conduct frequent inventories and to update stock control cards, the printed in-

ventories and any associated information system that has been put in place.

- The inventories, as well as the documentation related to outgoing RH Kits, should match the information recorded in the stock control or bin cards.
- Maintaining clear and up-to-date records and tracking the losses and disposal of expired or deteriorated RH Kits is vital. In general, the disposal and rejection of expired or deteriorated RH Kits can only be carried out under the supervision of a professional or authority in the area; depending on the case and type of the RH Kits. (See Annex VII for a Sample Disposal Form).

7.2 PHYSICAL INVENTORY COUNT

Stock-on-hand information is captured on stock keeping records. The only way to be certain that the information recorded on the stock control card is correct is to conduct a physical inventory count.

The field office focal person for warehouse management should undertake the following to ensure an effective count:

- a) For complete physical inventory counts, the UNF-PA Physical Inventory Count Procedure can be followed as a minimum requirement. Large warehouses should conduct a physical inventory count at least once a year. Depending on the size of the facility, you may want to conduct a physical inventory count more often.
- b) Reconcile quantities on hand with the quantities that have been entered in stock keeping records (for example, inventory control or bin cards). A physical inventory count can help to confirm the quantity of RH Kits on hand and whether forms have been completed correctly. (See Annex VIII Stock Reconciliation Form).
- c) For quality assurance, a physical inventory count also offers an opportunity for a visual inspection of RH Kits.
- d) If the stock keeping records do not match the actual stock, conduct a physical inventory count more often and take steps to improve recordkeeping.

e) Conduct a physical inventory:

- Plan
 - depending on the type of inventory counting system, schedule the day(s) and time;
 - for a cyclic or random physical inventory, identify which RH Kits will be counted and the corresponding time period for those RH Kits to be counted;
 - print inventory count sheets pre-filled with the names of RH Kits and quantities.
- Assign staff
 - the inventory count team should be established by the head of the office, and its objective should be to ensure that the count can be completed within a reasonable timeframe (i.e. no more than a day);
 - the inventory counting team should constitute of an independent team and warehouse focal personnel.
- Organize the storeroom
 - arrange kits by type for easy tracking;
 - arrange RH Kits according to FEFO;

- › position RH Kits so that moving and counting them is always possible;
- › make sure open cartons and boxes are visible;
- › separate damaged or expired products;
- › restrict movement of RH Kits at the time of counting.
- Count the usable RH Kits
 - › count RH Kits according to the records by which they are issued
- Update the stock keeping records
 - › write the date when the physical inventory was carried out and the words “Physical Inventory” on the stock and bin cards;
 - › use a color of ink that differs from the one you used for stocktaking when writing the quantity of the RH Kits on the card.
- Take action based on the results of the physical inventory
 - › if the results of the physical inventory reconciliation differ from the balance on the stock control/bin card, update the balance by adding or subtracting the excess or missing quantities;
 - › dispose of damaged or expired RH Kits found during the physical inventory;
 - › for either of the above, identify, document, and correct the cause of the problem and report the result to the head of the office.
- Discuss the findings of the inventory with the warehouse staff.
 - › congratulate the staff, if appropriate;
 - › take corrective actions, if required.

7.3 MONITORING AND EVALUATION (M&E)

Collecting M&E data enables programme managers to provide feedback to staff throughout the supply chain to improve system performance; report results to donors and other stakeholders; and to justify the need for additional resources. One important reason to conduct M&E is to improve programme management and, ultimately, the performance of the logistics system. This is critical for improving the level of customer service and for ensuring that clients have the products when and where they are needed.

One of the fundamental tasks of the field office is to make sure that assistance reaches the victims of disasters, and consequently, ensure that RH Kits don't fall into the wrong hands. For this reason, control and monitoring mechanisms must be present at each stage of the supply management process and, especially, during distribution.

The field office focal person for logistics and emergency programmes should carry out the following activities to measure the performance of the humanitarian response in relation to RH Kits:

- a) Document control and monitoring activities
 - Use distribution reports to evaluate the following in relation to partners who receive and distribute RH Kits:
 - › **Warehousing systems:** Do they meet the security, goods management and reporting systems requirements?
 - › **Dispatches:** Are they authorized appropriately and then recorded accurately?
 - › **Inventory management:** Is the stock moving? Are any RH Kits close to expiration? Is the principle of ‘first in, first out’ being used? Are RH Kits being stored correctly (as per required temperatures i.e. “keep cool”)?
 - › **Accountability:** Are RH Kits being signed off by the end-user? Is it possible to track where the kits went?

- › **Disposal:** are expired items disposed securely?
- › Is **Decision-making** effective in the event of stock-outs or unnecessary stock-piling?
- Check that data on the movement of RH Kits from receipt in storage centres to service delivery points tally, and that distribution receipts have been checked
- Stress the importance of always using the existing control forms to the personnel in charge of distribution; otherwise the possibility of proper follow-up diminishes.
- Where indirect distribution is being used, the implementing partner must submit reports detailing how the RH Kits they have been entrusted with have been disbursed to the affected population.
- It is the responsibility of the field office to ensure that an adequate number of forms are available and that reports are made.

b) Physical control and monitoring

Completing the relevant stock control documentation is not enough to ensure the correct distribution of RH supplies. Rather the documentary audit trail must be supported by frequent physical verification in the field and at distribution sites. This is not only for accounting reasons, but also to observe and determine the appropriateness of the procedures utilized, identify needs and rectify problems, etc.

Emergency monitoring for the use of RH Kits is the responsibility of field office programme teams and goes hand-in-hand with an accurate logistics reporting system. Programme teams can only monitor effectively if they know the final destination of RH Kit supplies and the persons responsible for receiving the goods at the final destination.

REFERENCES

WEB LINKS MENTIONED IN THE DOCUMENT

- Guidance Note for Recognition and De-recognition of Inventory for UNFPA, https://portal.myunfpa.org/c/document_library/get_file?uuid=3f311fcc-1c73-4683-a573-b4cd00176d7e&groupId=100042
- The International Conference on Population and Development (ICPD) Programme of Action, <http://www.un.org/popin/icpd2.htm>
- The Minimum Initial Service Package (MISP), <http://www.unfpa.org/emergencies/manual/2.htm>, or <http://www.iawg.net/resources/MISP2011.pdf>
- Humanitarian Response Strategy 2011-2013, https://docs.myunfpa.org/docushare/dsweb/Services/UNFPA_Publication-31645
- The UNFPA Standard Operating Procedures for Humanitarian Settings, https://docs.myunfpa.org/docushare/dsweb/Services/UNFPA_Publication-31737
- UNFPA Inventory Policy Guidelines https://portal.myunfpa.org/c/document_library/get_file?uuid=17028412-be4d-4bb1-8b56-7323f185093c&groupId=281124
- Inter-Agency Reproductive Health Kits for Use in Crisis Situations 5th Edition, <http://iawg.net/resources/rhkits.html>, or <http://www.unfpa.org/public/home/procurement/pid/3228>, or <http://www.rhrc.org/resources/rhrkit.pdf>
- UNFPA Executive Board decision on UNFPA Support for Reproductive Health in Emergency Situations, http://www.unfpa.org/exbrd/2000/annualsession/dpfpa200012_eng.pdf
- UNFPA Emergency Fund (2011) Procedures, <https://docs.myunfpa.org/docushare/dsweb/View/Collection-11717>
- UNFPA Emergency Procurement Procedures, https://docs.myunfpa.org/docushare/dsweb/Get/UNFPA_Publication-30924
- UNFPA internet webpage for RH Kits, <http://www.unfpa.org/public/home/procurement/pid/3228>
- UNFPA Procurement Procedures, <https://docs.myunfpa.org/docushare/dsweb/View/Collection-206>
- UNFPA Physical Inventory Count Procedure, https://portal.myunfpa.org/c/document_library/get_file?uuid=0036c205-d4fa-4fcd-b903-6cff5b68c8f4&groupId=100042

OTHER REFERENCE MATERIAL

- The Inter-Agency Standing Committee (IASC) for inter-agency coordination of humanitarian assistance, <http://www.humanitarianinfo.org/iasc>
- *UNFPA Integrated Logistics Policies & Procedures Manual*, Pamela Steele, https://docs.myunfpa.org/docushare/dsweb/Get/UNFPA_Publication-20046
- *Inter-agency Field Manual on Reproductive Health in Humanitarian Settings*, http://www.iawg.net/resources/field_manual.html#kits, or http://www.who.int/reproductivehealth/publications/emergencies/field_manual/en/index.html
- *Handbook for RCs and HCs on Emergency Preparedness and Response*, Inter-Agency Standing Committee (IASC) Humanitarian Coordinators (HCs) Group, <http://onerresponse.info/Coordination/leadership/publicdocuments/Handbook%20for%20RCs%20and%20HCs%20on%20Emergency%20Preparedness%20and%20Response.pdf>
- *Humanitarian Supply Management and Logistics in the Health Sector*, Pan American Health Organization, <http://www.paho.org/english/ped/HumanitarianSupply.pdf>
- *Manual Logistical Management of Humanitarian Supply*, Pan American Health Organization, <http://www.disaster-info.net/SUMA/english/software/manuals/MISEManualEnglish.pdf>
- *Guidelines for the Storage of Essential Medicines and Other Health Commodities*, John Snow, Inc./DELIVER, in collaboration with the World Health Organization. http://deliver.jsi.com/dlvr_content/resources/allpubs/guidelines/GuidStorEsse_Pock.pdf
- *The Logistics Handbook: A Practical Guide for the Supply Chain Management of Health Commodities*. USAID | DELIVER PROJECT, http://deliver.jsi.com/dlvr_content/resources/allpubs/guidelines/LogiHand.pdf
- *The Logistics Operational Guide (LOG)*, facilitated by the Global Logistics Cluster Support Cell and WFP, <http://log.logcluster.org/response/warehouse-management/index.html>

ANNEX I. RH KITS QUANTIFICATION FORM

I. ORGANIZATION DETAILS

Name of field office:	
Address:	
Contact person/focal point for RH Kits, Title:	
Focal point email/phone:	
RH coordinator (if different from focal point), name and contact info:	
Other logistics focal points and contact info:	

The field office should review requests submitted by each region, and ensure that the calculated amount of supplies requested matches the needs of the target population and service capacity in the region/facility.

At the time of delivery, the field office should notify the local counterpart the amount of kits to be delivered 48 hours before shipment to ensure proper arrangement is made to receive the kits.

II. OPERATIONAL TIMESCALE

1-3 months 3-6 months more than 6 months please specify _____

III. TARGET BENEFICIARIES

Please list health facilities in each region and the population to be served by each facility.

Region: _____

Facility name	Targeted camps/ settlements covered by the facility, and population of each camp		Total population to be served by each facility
	Name of camp	Camp population size	
Total population to be served by region			

Data for all regions can be compiled in the table below:

Region	Total population to be served by each region
Grand Total	

IV. SERVICE PROVIDERS AVAILABLE IN THE FIELD

Please complete the table below with information for each facility.

Facility: _____

Personnel	Total	No. of Personnel trained on the MISP*
Medical Officers (precise number of women: _____)		
Gynecologist/ surgeon		
Nurse		
Midwife		
Community health workers (how many women?)		
Lady health visitors (LHV)		
Community mobilizers (male)		
Community mobilizers (female)		
Female support staff		
Male support staff		
Others		

*MISP: Minimum Initial Service Package for Reproductive Health in Emergencies, <http://www.iawg.net/resources/MISP2011.pdf>

Please complete the table below for all health facilities in each region.

Region: _____

Personnel	Total #		# of Personnel Trained on the MISP*	
	Region Level	Facility Level	Region Level	Facility Level
Medical Officers (MO)				
Gynecologist/ Surgeon				
Nurse				
Midwife				
Community health workers				
Lady health visitors (LHV)				
Community mobilizers (Male)				
Community mobilizers (Female)				
Female support staff				
Male support staff				
Others				

Personnel information can be consolidated in the same table format as above for all regions.

If some of your staff have not received training on the MISP, would you be interested in having UNFPA provide an orientation/ refresher session? o Yes o No

V. RH KITS REQUEST PER FACILITY/REGION WITH CONTACT INFORMATION

Please use the table below to collate information on the number of kits needed per facility at the grassroots level in each region.

Refer to the *RH Kits Manual* for details on the use, instructions, and dimensions of each kit. (<http://www.rhrc.org/resources/rhrkit.pdf>)

Region: _____

Facility Name	Number of Kits Needed																	Contact Person	Contact Phone/Radio, etc.	Facility Address						
	0	1A	1B	2A	2B	3	4	5	6A	6B	7	8	9	10	11A	11B	12									
Total per Region																										Remarks:

VI. COMBINED RH KITS REQUESTS

Information from each region will be consolidated in the combined RH Kits request table below.

Kit	Description	TOTAL QUANTITY REQUESTED BY REGION						Total	TOTAL QUANTITY PROVIDED BY UNFPA
		REG 1	REG 2	REG 3	REG 4	REG 5			
Kit 0	Administration/training supplies								
Kit 1 A	Male condoms								
Kit 1 B	Female condoms								
Kit 2 A	Clean delivery, individual								
Kit 2 B	Clean delivery, birth attendant								
Kit 3	Post Rape treatment								
Kit 4	Oral and injectable contraception								
Kit 5	Treatment of sexually transmitted diseases								
Kit 6A	Clinical delivery assistance, reusable								
Kit 6B	Clinical delivery assistance, drugs and disposable items								

Kit	Description	TOTAL QUANTITY REQUESTED BY REGION						TOTAL QUANTITY PROVIDED BY UNFPA
		REG 1	REG 2	REG 3	REG 4	REG 5	Total	
Kit 7	Intrauterine device							
Kit 8	Management of miscarriage and complications of abortion							
Kit 9	Suture of tears (vaginal and cervical) and vaginal examination							
Kit 10	Vacuum extraction delivery							
Kit 11 A	Referral kit for reproductive health - reusable equipment							
Kit 11 B	Referral kit for reproductive health - drugs and disposable items							
Kit 12	Blood transfusion							

VII. REPORTING

Whenever applicable, monthly progress reports should be requested by the field office from each Facility and each region. The report should include the number of kits received and distributed and the number of primary beneficiaries. The field office should compile the data from all regions in order to have an overview of the total number of kits distributed.

When submitting the report, each facility or region should also include any lessons learned, best practice, constraints, and any other information, for example: MISP training if conducted and the number of staff trained, sites identified for future delivery of comprehensive RH services, additional needs identified, etc. The information should be consolidated and reflected in the field office overview report.

Facility: _____

Kit #	Camp/Settlement & # of Kits Distributed by Each Camp	Total # of Kits Distributed	Date of Distribution (approximate)	Total # of Population Reached
Lessons, constraints, best practice and other reflections:				

Region: _____

Kit #	Total # Distributed	Period of Distribution	Total # Population Reached
Lessons, constraints, best practice and other reflections:			

The overview of the distribution status by all regions can be consolidated in a table similar to the one above.

ANNEX II. RECEIVING AND INSPECTION REPORT (RIR)

Only to be completed if goods are not received in good order

If goods are not received in good order within three weeks of discharge, a completed and signed copy of the receiving and inspection report should be sent to the Procurement Services Branch, Midtermolen 3, P.O. Box 2530, 2100 Copenhagen, Denmark. Tel: +45 3546 7300, Fax: +45 3546 7018.

Purchase order number:

Project identification:

Date of arrival:

Number of cases received:

Contents:

Carrier:

B/L or AWB No:

Date of inspection:

Please describe damage/losses and please attach the Survey Report:

S/N	Item description	Qty	Unit price	Remarks

It is also important to inform UNFPA PSB immediately about any action taken:

Issuing office:

Signature

Date

ANNEX III. GOODS RECEIVING NOTE (GRN)

Documentation delivered with goods

- Waybill # _____
- Supplier Invoice # _____
- Supplier Delivery Note # _____
- (Other) _____

GOODS RECEIVING NOTE	
GRN Number: _____	
Page Number 1 of 1	GRN Date: _____

Documentation delivered with goods

- UNFPA PO # _____ Complete Order
- Donation _____ Part shipment with the balance pending
- Item Category ERH Kits _____ Final shipment completing the Order

No.	ERH Kits Description	QTY On Packing List	QTY Received	Unit of Measure	Remarks

Please complete the GRN for each PO. Except where noted above, all goods listed have been received in good order and condition.

Supplied or delivered by: Name: _____ Title: _____ Date: _____ Vehicle: _____ Signature: _____	UNFPA staff receiving goods: Name: _____ Title: _____ Date: _____ Vehicle: _____ Signature: _____
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ANNEX IV. BIN/STOCK CARD

Bin Card Details

Type ERH Kit _____

Opening Balance _____

Batch No. _____

Expiry Date _____

Date of Manufacturing _____

BIN CARD	
Page Number 1 of 1	Bin Card Date:

LINE No.	DATE	QTY IN	GRN No.	QTY OUT	PO/IPO/WAYBILL No.	UPDATED BY	BALANCE

Purpose of a Bin Card.

A bin card is an individual stock keeping record that holds information about a specific batch number of a single set of RH Kits. Every item in that batch will have the same expiration date. For example, one bin card would hold information about a single batch of RH Kit 2A in a warehouse. The card should note the stock on hand of RH Kit 2A for that batch only, as well as any losses and adjustments for that batch. Bin cards are usually displayed at the bins (or shelf or pallet position) where the lot is found.



Contact information

For more information or general inquiries please contact:

UNFPA

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UNFPA

Procurement Services Branch
ISO 9001 certified since 2007

Photographer UNFPA