

Student workbook

BSBMED304

Assist in controlling stocks and supplies

**TAFE NSW would like to pay our respect and acknowledge Aboriginal and Torres Strait Islander Peoples as the Traditional Custodians of the Land, Rivers and Sea. We acknowledge and pay our respect to the Elders, both past and present of all Nations.**

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# Icon legends

Table . Icon descriptions.

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| Icon | Description |
|  | **Practice activity**  Learning activities help you to gain a clear understanding of the content in this resource. It is important for you to complete these activities, as they will enhance your learning. The activities will prepare you for assessments. |
|  | **Collaboration**  You will have opportunities to collaborate with others during your study. This could involve group activities such as mini projects or discussions that will enable you to explore and expand your understanding of the content. |
|  | **Self-check**  An activity that allows you to check your learning progress. The self-check activity gives you the opportunity to identify areas of learning where you could improve. If you identify these, you could review the relevant content or activities. |
|  | **Resources (required and suggested)**  Additional resources throughout this workbook such as chapters from textbooks, online articles, videos etc. These are supplementary resources, which will enhance your learning experience and may help you complete the unit. |
|  | **Assessment task**  At different stages throughout the workbook, after you have completed the readings and activities, you may be prompted to complete one or more of your assessment tasks. |
|  | **Video**  Videos will give you a deeper insight into the content covered in this workbook. If you are working from a printed version, you will need to look these up using the URL provided. |

# Getting started

## What will I learn by completing this workbook?

This workbook has been developed for the unit of competency BSBMED304 Assist in controlling stocks and supplies.

Successfully completing this unit of competency will give you the skills and knowledge to provide assistance in stock control in the medical environment. You will leave how to help maintain stock and supply levels, store stock, assist in stocktaking and dispose of out-of-date stock correctly.

It applies to individuals who provide assistance in controlling required levels of stocks and supplies in a medical administration context or work area.

The information given in these notes is generic as each workplace has their own specific procedures due to type and layout of workplace; staff size and profession; etc.

The aim is for students to gain a basic knowledge and understanding in all the performance criteria so that they can more easily adapt to the workplace scenario be it in a hospital; a GP practice/medical centre; a specialist practice.

It is the responsibility of the employer/supervisor/practice manager to extend the student’s basic knowledge and skills to permit her/him to function well in a specific workplace.

All work is undertaken in accordance within legislative requirements, Australian and industry standards and codes of practice, and in line with organisational policies, procedures and specific requirements.

This workbook has 5 topics. You will learn:

* What you have to do in the stock control process.
* How to assist in maintaining stock levels.
* The correct procedure for storing stock.
* Your role in the stocktaking process.
* How to help dispose of out-of-date stock and product recalls.

Each topic includes opportunities to check your progress and understanding as well as activities that will help you to complete the formal assessments.

Alright, let’s get started!

Topic 1

Determine own role  
in stock control  
processes

# Topic 1: Determine own role in stock control processes

In this topic your will learn how to:

* Determine your own role in stock control processes by consulting with a manager or supervisor.
* Access the documented procedures for stock control and read for understanding.
* Seek clarification with relevant personnel or unclear or ambiguous procedures.

## 1.1 Your role in the stock control process

In any office environment the regular and efficient supply of stocks and supplies is necessary to keep the business moving. Stocks and supplies are managed and monitored via a system called the **stock control system**.

When you work in a medical environment your role will vary according to whether you work in a medical practice or hospital environment. Your role could be that of a receptionist, administration clerk and administration assistant or ward clerk and your tasks will be many and varied. If the workplace does not have sufficient stocks of common medications and supplies they will be unable to efficiently and effectively provide treatment for patients.

 Practice activity

### Activity 1

Go to the Medshop Australia website ([www.medshop.com.au](http://www.medshop.com.au)) and find examples of supplies and equipment you might find in a hospital or medical practice setting.

|  |  |
| --- | --- |
| Category | Examples |
| Diagnostic & equipment |  |
| Nursing equipment |  |
| Consumable supplies |  |

### Activity 2

Each piece of medical equipment used by practice staff has an important job to do. This equipment may need supplies. For example a glucometer (blood sugar monitor) uses disposable strips that a small drop of the patient's blood is smeared on and then inserted into the glucometer. The machine will then read the strip and calculate the blood sugar levels.

Go online and use your favourite search engine to find out what each of the following machines or equipment does and if they require any supplies:

|  |  |  |
| --- | --- | --- |
| Equipment | What is this used for? | Does it need any supplies? |
| *Glucometer* | *Monitors blood sugar level* | *Disposable strips* |
| Sterilising unit |  |  |
| Blood pressure monitor |  |  |
| Guedel airway |  |  |
| Ophthalmoscope |  |  |
| Otoscope |  |  |
| Audiometer |  |  |
| Sphygmomanometer |  |  |
| Dressing & suture packs |  |  |
| Protoscope |  |  |

### Activity 3

Doctors are sometimes required to conduct home visits and hospital visits to see patients. When the doctor conducts these visits, they will take with them a doctors bag that will include a number of commonly required items. You will not be required to replenish stocks or maintain the items in the bag, however it is helpful that you know about them and can assist with ordering when needed.

Visit the RACGP website ([www.racgp.org.au](http://www.racgp.org.au)) to find out what common supplies are found in a doctors bag. Give some examples of what you will find in a doctors bag:

A medical practice will generally have a supervisor or practice manager who will allocate tasks and provide advice when you are unsure of something. So your role could be as minimal as reporting when stocks are low or as involved as researching the web for complex medical equipment.

When you get a job you should be given a position description. This outlines your tasks and responsibilities. It is advisable to read your position description very carefully and if you have any concerns discuss this with your supervisor or manager. This discussion is very important as it will help you to clearly understand your role and responsibilities.

The size of the medical practice will also influence the nature of your role. If you are working in a large facility the stock requirements might be quite complex and only specialised staff will undertake this duty. If you work in a smaller practice you might have responsibility for monitoring stock, ordering supplies, completing purchase orders and finalising supplier payments.

Depending on your position and experience, your role in a medical environment could involve any or all of the following tasks:

1. Reporting that stocks on a certain item are low.
2. Unpacking new stock as it is delivered.
3. Monitoring and rotating stored stock to make sure there is nothing out of date and that items are stored according to WHS and NSW Health guidelines.
4. Checking the stock control documents such as purchase order, delivery docket and invoice to make sure what has been ordered is delivered.
5. Contacting the supplier when an error or oversight has been made in a delivery.
6. Checking for out of date stock and either reporting it to your supervisor for the appropriate disposal method or ensuring out of date stock items are disposed of according the NSW Health guidelines.
7. Being aware of, or monitoring, the refrigerator temperature of medical stock that must be stored according to the “cold chain system”.
8. Sharing responsibility with other employees in purchasing items using the petty cash system to restock the general office supplies, for example tea, coffee, milk, stamps, envelopes, pens etc.

 Practice activity

### Activity 4

List four tasks that administration staff in a medical environment may be asked to perform in relation to stock control:

| No | Task |
| --- | --- |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |

### Activity 5

Access a job search website (eg Seek, Indeed) and search for an administration role in the medical industry. For example, a receptionist in a medical practice, a ward clerk in a hospital, a medical administrator.

Read the job description and list the tasks below that relate to stock control:

## 1.2 Documented procedures for stock control

Every hospital or medical practice is required to work with many policies and procedures. These are comprehensive guidelines that staff follow to ensure that the organisation is complying with rules and regulations.

Considering the complex nature of the structure of the healthcare industry, the scope of hospital policies and procedures is vast. This is, understandably, a huge headache for healthcare workers as it further adds to the complexity and workload of their already demanding roles.

From patient discharge procedures, to maintaining hygiene of the staff workers, policies and procedures ensure the organisation is complying with the rules and regulations. The maintenance of policies also ensures reduced risk of accidents, improves efficiency, and helps maintain a sound working environment for patients, staff, and visitors.

**NSW Health** guidelines must be followed by all workers in a medical environment. Their website contains the most current information on policy documents and provides copies of all policy directives and guidelines, health warnings, health statistics, information for the public, and a wide range of health information. The majority of hospital websites refer directly to the policies and procedures on the NSW Heath website as these contain the most up-to-date information on polices and general health information.

The Royal Australian College of General Practitioners (**RACGP**) is the professional body for general practitioners in Australia. They are responsible for maintaining the standards for quality clinical practice.

 Practice activity

### Activity 6

Go to the NSW Health website ([www.health.nsw.gov.au](http://www.health.nsw.gov.au)) and review the following policies:

|  |  |
| --- | --- |
| Policy | What is this policy about? |
| Medication Handling in NSW Public Health Facilities |  |
| Vaccine Storage and Cold Chain Management |  |
| High-Risk Medicines Management Policy |  |

### Activity 7

Go to the RACGP website ([www.racgp.org.au](http://www.racgp.org.au)) and search for the *Standards for general practices.* Locate: *GP Standard 5.2 – Practice equipment*. Make a list of consumable items that a medical practice should have in stock.

## 1.3 Who can help you?

If you do not understand instructions or guidelines for assisting with stock supplies and storage of stock you must speak immediately to your supervisor. If this is not possible, you should seek out the help of a more experienced colleague or the Practice Manager. You need to listen closely to all instructions and ask questions if you are not sure of what is being asked of you.

Always follow the organisation's policies and procedures and make sure you understand if there is any legislation imposed on the handling of stocks and supplies. For example, the Royal College of General Practitioners provides standards and guidelines for Medical Practices that aim to provide a framework to follow to ensure that they offer the highest standard of medical treatment possible.

All staff who work in a medical environment will be responsible for following the NSW Health Policy Documents which provide guidelines on issues such as:

* Handling and storage of sterile items; dangerous drugs; poisonous substances and pathology specimens.
* Monitoring, checking and regular recording of refrigerated items such as vaccines.
* Waste management, cleaning spills etc.
* Infection control.
* Shelf life and rotation of stock.
* Safe storage of accountable medicines.

A medical office worker’s role is just to assist and you may be asked to check stock levels, find new suppliers and perhaps do a cost analysis. The medical staff and nursing staff will make the decisions on what the Medical Centre will use in the way of consumables, drugs and medications.

You should always check with your supervisor or line manager if you are unsure about what you need to do. Don’t guess!



 Practice activity

### Activity 8

If you are unsure about the processes for stock control, who can you consult with?

Write two questions that you could ask your supervisor or manager about stock control:

1.

2.

### 

Topic 2

Maintaining stock   
levels

# Topic 2: Maintaining stock levels

In this topic you will learn how to:

* Monitor stock levels against required levels.
* Order stock in a timely manner or in accordance with ordering cycles, to ensure continuity of supplies.
* Identify potential shortfalls in stock levels and take action to ensure stock is replenished in a timely manner.
* Check orders against enterprise documentation and take appropriate actions where any shortfall is identified.
* Complete and store documentation for maintenance of stock levels.

## 2.1 Monitoring stock and supplies

To keep an efficient medical practice it is important to constantly monitor the stock to ensure that you have enough of everything but not too much of anything. The aim of stock control is to make sure you have the right levels of stock on the shelf at all times.

Storing stock can be a significant cost for the practice as they include the cost of the supply, floor space, labour costs (to unpack and monitor supplies), security of stock and unnecessary wastage due to expiry dates (which might occur due to over ordering a supply that is not used within the right timeframe).

Stocks and supplies need to be kept at an **optimum level**. Optimum stock levels are important within the medical environment because you don’t want to have items sitting on a shelf which aren’t being used. Too much stock means having lots of storage space and risking stock becoming out of date and being wasted. Not enough stock means being unable to provide patients with a service. To achieve the optimum level you will need to be aware of the demand for certain stock and re-order requirements. You need to constantly monitor the stock process to avoid under-ordering or over-ordering.

Most practices will provide you with a checklist that lists the equipment and supplies, the desired quantity and re-order quantities. The medical practice may have a manual system in place or they might use a computerised system.

Part of your role may be to determine what stock needs to be ordered. Your supervisor can assist you to identify what the maximum stock required for each supply is.

Some of the things you need to consider when working with the stock levels are:

* how much stock is used normally within a certain time period
* how many patients are usually seen within the same time period
* seasonal demands (such as flu vaccines for colder weather)
* how often an order is placed and how long it will take to arrive
* how much space there is to store purchases
* if the stock levels should be checked on a daily basis.

Ordering too little is called **understocking.** When you order too much, it is called **overstocking** and can result in wastage (stock out of date) and expense.

**Basic stock level** is the amount of stock that will allow the work being carried out in the medical office on a daily basis to continue without shortages.

**Safety stock level** relates to a “buffer” quantity of stock that will allow for unexpected delays in the delivery of goods from suppliers.

**Lead time** levels of stock is the amount of stock that will be required to be on hand to use between placing an order and the time that stock arrives.

**Optimum stock level** = Basic stock + safety stock + lead level time.

Example: If you only have one ream of photocopying paper left and the lead time from the stationery supplier is 48 hours it is highly likely that you will run out of photocopying paper before delivery. Buffer stock (safety stock level) has been depleted and it is obvious that one ream of photocopying is not an optimum stock level for this item.

Therefore OPTIMUM STOCK LEVEL is: 1 ream + 1 ream + 1 ream = 3 reams of copying paper

Monitoring your stock and supply levels helps to ensure that your practice or ward does not run out of any items and ensure the efficient running of the medical office.

 Practice activity

### Activity 9

When you think about monitoring stock, what are some things you may need to consider?

1.

2.

3.

4.

What is **overstocking**?

What is **understocking**?

What is an **optimal stock level**?

What is the difference between a **basic stock level** and a **safety stock level**?

## 2.2 Order stock

It is important to know when to order stock to ensure the continuity of supplies. Items may need to be ordered daily, weekly or monthly depending on usage. It is important to be aware of your suppliers and the process required to order stock from them. Sometimes your workplace will use more than one supplier for the following reasons: in case stock levels are unavailable; the payment terms may suit the practice needs better; pricing differences between suppliers; the country the goods have been sourced from; and the reputation of the manufacturer. Always follow the practice policies and procedure when ordering supplies and equipment.

In a **small medical practice**, the administration staff may monitor all stock and supplies normally supervised by medical professional such as a Nurse or the Practice Doctor. Administration staff in the surgery may share in the responsibility of ordering, unpacking, storing and monitoring medical supplies and notifying suppliers of missing or damaged items.

Staff may also be involved in ordering supplies which will include:

• pharmacy supplies, eg, drug, vaccines etc

• sterile items such as bandages, masks, gloves etc

• equipment such as a range of scissors, stethoscope, sharps containers, etc

• prescription pads (if not computer generated)

• stationery and office supplies including coffee, tea and milk.

In a larger practice or **hospital environment**, nursing staff will monitor the medical items and the administration staff are responsible for items such as stationery and consumables.

In a hospital setting an electronic ordering system is used for ward and linen supplies. The Ward Clerk will use the hospital’s on-line Requisition Order Form to order medical supplies and an on-line Stationery Requisition Order Form for office supplies. These forms are sent electronically to the Stores Department and can only be accessed by the Ward Clerk with the appropriate administrative approval.

Hospitals may have a set time/day to accept Requisition Orders and a set time/day for the delivery of items to the ward or unit. In this way the Stores Department can better manage its stock to provide a more reliable service to the various wards or units.

The Ward Clerk will be responsible for unpacking the delivery and advising the Stores Department of any missing or damaged items.

Pharmacy staff will be responsible for the supply and monitoring of all drugs on the ward. A Pharmacist will check daily for out of date stock and other medication issues. The Nursing Unit Manager (NUM) should contact the Pharmacy directly for urgently needed medications. When a patient is discharged they are supplied with enough prescribed medication to cover them for their first 24 hours at home. The Ward Clerk is to collect these items from the Pharmacy at a set time each day.

Linen Service staff will deliver fresh bed linen, towels etc each day at a set time for each ward.

For all items stock records need to be kept so patient care is not compromised. These records may be electronic or manual, however, either way will contain versions of stock control cards.

### Seasonal Ordering

Staff also need to be aware of medical supplies needed throughout the different seasons:

**Summer** medical needs could be items associated with sunburn, bee stings, back problems due to gardening; or breathing problems from not using a mask when using potting mix; injuries from cricket and other sports.

**Autumn/Winter** is the time for ‘flu and pneumococcal injections for those 65 and over and Aboriginal patients 50 and over. Patients will arrive coughing and sneezing in winter, so have plenty of tissues, and containers for disposal, on hand. Injuries from winter sports such as rugby league and soccer.

**Spring** could bring on allergies or breathing difficulties associated with pollen in the air.

**Outbreaks** and **health alerts** such as SARS, swine flu, bird flu, equine flu.

Each medical environment will differ so requirements will change accordingly.

It’s a good idea to keep manual Medicare claim forms in a medical practice, even if they practice bulk billing. Electricity supplies can be disrupted, so keeping manual claim forms on hand is a good decision.

### Ordering

When doing an order:

* check the stock cards to work out the amount required to be ordered
* place one item per line on the purchase order form
* list the items either alphabetically, catalogue number, or by departments according to the workplace requirements
* document the catalogue numbers and appropriate descriptions clearly to avoid confusion
* identify any specific delivery instructions
* have the order signed by appropriate staff member
* file a copy for your records.

### Purchase order

This is a request to buy supplies and should provide most of the following details:

* order/requisition number
* item name
* stock or code number
* size
* quantity
* delivery details
* contact details
* date of order
* authorisation signature.

### Suppliers

When you have identified what stock needs to be ordered, you need to identify the supplier. If you are employed in a hospital or medical practice with a central supply area you might need to raise a requisition order. You should be able to do this through your internal computer system.

For goods that need to be ordered outside of your organisation you will need to have a discussion with your supervisor or Practice Manager to assist you to identify who the practice preferred suppliers are. Sometimes your practice will use more than one supplier just in case stock levels are unavailable, payment terms better suit the practice needs, price, country the goods have been sourced from, and the reputation of the manufacturer.

Always follow the practice policies and procedure when ordering supplies and equipment. When stock is ordered, it is important that it comes from the correct supplier. Preferred suppliers should be able to offer the following:

* availability of stock
* information about payment plans or the payment terms they offer
* current price list and / or discounts
* manufacturer details eg where it item is made
* Material Safety Data Sheets (MSDS) for items they are supplying. This is a document that contains information on the potential health effects of exposure to chemicals, or other potentially dangerous substances, and on safe working procedures when handling chemical products.

 Practice activity

### Activity 10

If you were working in a small medical practice, what are three responsibilities you may have in relation to ordering stock?

1.

2.

3.

Who is responsible for ordering the following stock in a hospital environment?

General stationery and office supplies

Pharmacy supplies

Urgently needed medications

Bed sheets and towels

Can you think of any seasonal stocks or supplies that may be used in a medical environment?

### Activity 11

Your supervisor has asked you to find out the best value photocopy paper for the medical practice. Go to the Officeworks website ([www.officeworks.com.au](http://www.officeworks.com.au)) and do research on two different brands. You need to compare price, availability, whiteness, sustainability, etc. You need to recommend one of these brands to your supervisor.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Brand 1 | Brand 2 | |
| Product name |  |  | |
| Price (per ream) |  |  | |
| Availability (in stock?) |  |  | |
| Weight (gsm/grams per sq metre) |  |  | |
| Whiteness |  |  | |
| Sustainability |  |  | |
| The brand you recommend is: |  | |  |
| The reason you recommend it is: |  | |  |

Your supervisor has asked you to order the photocopy paper that you recommended. Use the following order form. You need to order 25 reams and it needs to be delivered to the side entrance. Remember, a carton contains 5 reams.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Order Form | | | | | | | |
| **Order No** | AZ19878 | | **Deliver to** | AA Medical Centre | | | |
| **Date** |  | | **Ordered by** |  | | | |
| **Item No** | **Item Description** | | | **Quantity Required** | **Pack Size** | | **No of Packs** |
|  |  | | |  |  | |  |
|  |  | | |  |  | |  |
|  |  | | |  |  | |  |
| **Authorised by** | |  | | **Contact Phone** | |  | |

## 2.3 Stock shortfalls

In a medical environment such as a doctor’s surgery, medical centre or a hospital ward it is important to have enough medical stocks and supplies on hand to meet the needs of those who are seeking medical advice or intervention and to cope with any emergencies that may arise.

Established procedures will be in place in any medical practice or hospital for the regular checking and monitoring of medical supplies, particularly if there has been a rush on a specific medical treatment eg swine flu injection or the flu injection.

Remember, patients aged over 65 and Aboriginal patients over 50 are entitled to free flu and pneumococcal injections. So, around March/April as winter approaches, search the patient database to identify these specific patients and order accordingly.

 Practice activity

### Activity 12

Review the following graph and identify any stock which has fallen below the optimal stock level.

1.

2.

3.

## 2.4 Check orders

When an order is delivered it is normally accompanied by a delivery docket or an invoice. It is important that the items received are checked against the original purchase or requisition order. As a delivery is unpacked check that the items delivered are on the delivery docket and then compare the delivery docket to the purchase order.

You need to check the order BEFORE you put the items away.

If any of the items are missing, make sure you get the delivery driver’s signature. If there is a discrepancy such as damaged items, or an incorrect item is delivered, it is a good idea to take a photo. When you contact the supplier, you can send them the photos by email as they will need to be replaced. If the supplier does not have them in stock, make sure that they do not appear on the invoice as you do not want to be charged for them. If they are on the invoice, the supplier should issue a credit note.

Follow the Policy & Procedure Manual when completing stock requisitions and order forms. In a large organisation, such as a hospital, the medical office worker may fill in a requisition for another department to arrange stores and consumables.

The order should be checked to see if items are damaged, missing, tampered with and have correct quantities.

In the order also look for information containing:

* back order information for stock that is not available for delivery yet
* MSDS – material safety data sheet
* warranties
* specific handling instructions
* tax invoice
* delivery docket (the record of items sent). On checking, this should be the same as the original order.

 Practice activity

### Activity 13

The photocopy paper has arrived. You wanted 25 reams but 25 boxes (of 5 reams) has arrived. You now have 125 reams of paper and nowhere to store it! What do you think you could do in this situation?

## 2.5 Complete documentation

You will need to enter stock records into the practice record keeping system. The information required will include existing stock levels, what stock has been used, how much stock is wasted, how much stock has been lost, stolen or misplaced, how much stock has been ordered since the last stocktake as an urgent order.

Stock can be checked manually using a stock record card or it can be checked electronically if the data is computerised on a spreadsheet.

As stock is removed the stock card, or spreadsheet, should be filled in and a new balance entered. This is the only way to provide an accurate and up to date balance of remaining stock levels. It is very important to store all the paperwork so you can have up-to-date records as efficient record keeping is part of basic business principles.

It is really important in your job that you know when to place an order for stock. You will also need to know how long it will take to receive the stock once an order is placed.

**Order Form**

The order form contains the details of the items you are ordering. Usually your supervisor will check the order form and authorise the purchase.

**Delivery Docket**

The delivery docket itemises the goods delivered. Check this against the order form when unpacking to look for missing, damaged, unordered, incorrect or out of date items. Should this happen contact the supplier immediately, give details of error and a Credit Note will be issued in your favour.

**Invoice**

The invoice shows the balance owing for items ordered, lists all items in the purchase order plus: address, GST (Goods and Services Tax), and individual cost of each item.

**Credit Note**

This advises of any incorrect items delivered and adjusts the balance owing accordingly.

**Stock Control Card**

Stock records can be manual or electronic. They give full details of each item and including information such as:

1. item description and stock or code number

2. supplier and supplier’s details

3. min/max units stock to hold

4. stock in/stock out

5. order no

6. stock balance.

 Practice activity

### Activity 14

Complete the following stock card for the photocopy paper. As this is a new item, you need to start a new card.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **STOCK CARD** | | | | | | | | | | |
| **ITEM:** | | | | | | **MAXIUM STOCK:** | | | | **25** |
| **MINIMUM STOCK:** | | | | **5** |
| **STOCK No.** | | | | | | **LOCATION:** | | **Storage Cupboard** | | |
| **Date** | | **Ordered** | **Stock In** | | | **Stock Out** | | | **Balance** | **Initials** |
| **Qty** | **Inv No** | **From** | **Qty** | **To** | |
|  |  | |  |  |  |  |  | |  |  |
|  |  | |  |  |  |  |  | |  |  |
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|  |  | |  |  |  |  |  | |  |  |

Topic 3

Store stock

# Topic 3: Store stock

In this topic your will learn how to:

* Unpack stock and check against order for condition and currency.
* Identify damaged or missing stock and take action to replace it.
* Store stock according to established storage systems.
* Identify and store stock requiring specialised storage.
* Rotate stock to minimise stock reaching expiry or use-by-date.

## 3.1 Unpack stock

When you unpack stock and check it against the original order, you need to check the condition and currency of the goods to ensure that they are correct.

Incoming stock may come via:

* post
* delivered by courier
* purchased at the supplier.

If you are asked to sign for the delivery, make sure you check the delivery details. You should verify that the packaging is undamaged, has not been tampered with and that all specified boxes are present.

When you unpack an order, you need to check the following:

* The delivery docket matches the purchase order. Sometimes the delivery docket is attached to the outside of the box but it may be inside the box. The delivery docket may include back ordered items. This means the supplier was not able to supply them at the time of the order but they will be supplied at a later date under a separate delivery.
* Correct quantities and quality. You should physically count all of the items delivered and compare it to the list on the delivery docket. Open one box at a time and tick the items off the delivery docket if the quantity and description is correct.
* Check that the items are the ones that have been ordered and that no substitutions have been made by the supplier.
* You may need to check the use by dates to ensure that you have not been supplied with expired products.
* Some items may require additional documentation (eg MSDS, warranty cards, user manuals). Check that these are included especially if this is a new product.
* If an invoice is included in the delivery, check it to make sure that it matches the delivery docket – including back order items. You won’t pay for these until they are delivered.
* Following the policy and procedures for stock control in your workplace. When the documentation is completed, it should be filed appropriately.

### Guidelines for unpacking stock

1. Open one box at a time and count the contents.
2. Tick off each item when the count and description are correct.
3. Quantities can be spread across several boxes.
4. Check the delivery docket against the order.
5. Check the content and the number of boxes against the packing list.
6. Are there any signs of damage or pilfering?
7. Check shelf life and expiry date.
8. Complete and file the paperwork.

### WHS Considerations

When you unpack any orders you need to consider the following Manual Handling guidelines:

* use appropriate equipment such as trolleys for moving large and heavy items
* if necessary, wear Personal Protective Equipment (PPE) if handling chemicals or hazardous items
* follow correct lifting and carrying techniques
* read labels on cartons to check the weight before you attempt to lift them
* ask for help from colleagues.

 Practice activity

### Activity 15

When is the best time to unpack a stock order?

|  |  |  |
| --- | --- | --- |
| 1. At the end of the month | 1. Immediately | 1. When you are not busy |

When you unpack an order, which two documents would you use to check that the items delivered match what you have ordered?

1.

2.

## 3.2 Damaged or missing stock

When unpacking medical supplies you need to check that what was ordered was delivered and that the items are not damaged and are current (ie not out of date). Once this is checked the items can be added to your current supply.

You will need to take steps to remedy the situation if you discover on unpacking that some items are:

• missing

• damaged

• out of date

• not what you ordered.

If there is a discrepancy such as missing or damaged items, or an incorrect item is delivered, the supplier will need to be advised. In a medical practice, you would tell your supervisor or the Practice Manager. If a hospital environment, you may have to contact the Stores Department or the Nursing Unit Manager. Usually the supplier will issue a credit note to balance this discrepancy.

Remember that a medical practice and hospital ward will have to work to a budget. So it is important to carefully monitor and check the purchase order against the delivery docket to make sure that what was ordered is delivered and that items delivered are not damaged or out of date.

 Practice activity

### Activity 16

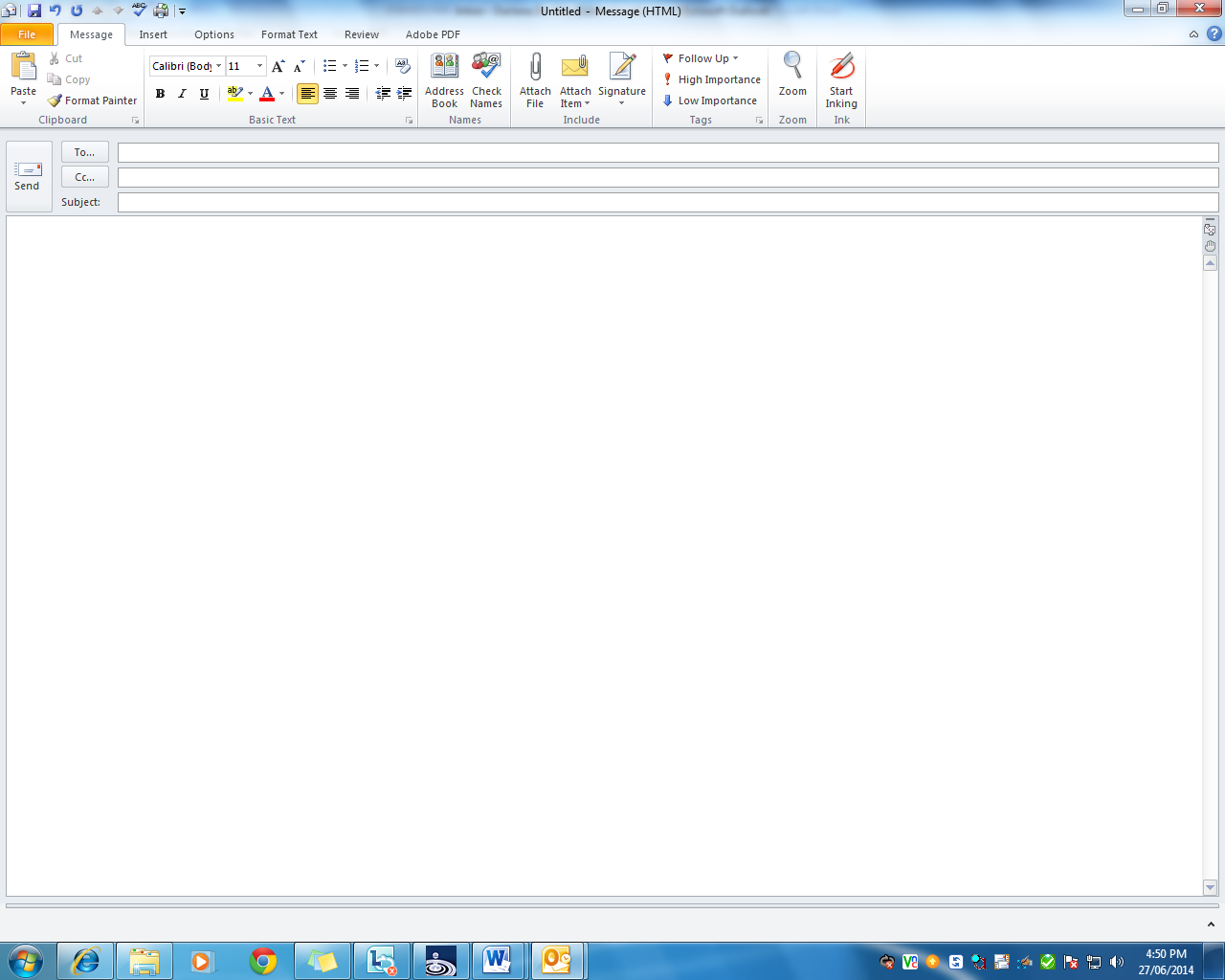
If you have just unpacked a stock order and an item is missing or damaged, what would you do in the following environments?

Medical Centre:

Hospital:

### Activity 17

You have completed the unpacking of your stock delivery and have identified you have received the incorrect amount of gloves (5 boxes instead of 10). Your Practice Manager has asked you to create an *Email Message* to the Supplier for any missing items or wrong items delivered. Using the template below, write/type an email to the supplier advising them of the issue.



## 3.3 Store stock

A medical practice or hospital will have in place an established storage system for various stocks and supplies. Storage space is a consideration when ordering supplies – how much storage space is available will impact on how much stock you can keep on hand. Each medical environment will have their own rules or guidelines on how and where stock is stored. As well as medical supplies don’t forget that stationery, toilet and kitchen supplies, spare items, personal items of staff and computer equipment will all need space for storage too.

There are a few important issues regarding storagethat will also contribute to the frequency of stockmonitoring and ordering. The stock needs to be safefrom possible deterioration as many medical stockitems require strict temperature control for the productto remain effective.

Some products requirerefrigeration, air conditioned storage, and others needto be stored at room temperature.

Some stock itemsheld in a medical practice are dangerous, and otherswill be attractive to thieves. This type of stock shouldbe kept in a secure environment, and may requiresupervisor approval for release.

All stock is to be keptclean and protected against any possiblecontamination, either from pests or environmentalhazards, such as dust or inadequate lighting. It isessential that health and safety requirements areadhered to ensuring shelves are safe, stock is notpiled too high, step ladders are used whereappropriate, and heavy objects are not placed indangerously high areas.

Rotation of stock is also important so that older stock items are brought to the front, and new items placed behind them to ensuing the older items are used first.

Following are factors to be considered when dealing with stock levels and storage:

* ◦ check manufacturer’s instructions to stop deterioration and damage
* follow storage instructions on the item's MSDS (Material Safety Data Sheet) for staff safety and patient care
* fragility of the item regarding storage
* check the items are stored the right way up
* regularly review Government regulations and legislation that demand specific storage requirements.

Storage areas of stock used in the medical environment should be kept clean and tidy and stock levels should be maintained at optimum levels.

What does Optimum levels mean?

Optimum levels will have been worked out to ensure the ongoing efficient and productive management of the Practice or Hospital environment. Maintenance of optimum stock levels will ensure that the needs of the patients are met and that patient care and comfort are not compromised. It will also ensure the Health Professionals in your workplace are not inconvenienced. Instructions on how to maintain optimum levels of stock should be documented in the Policy and Procedures Manual at your workplace.

## 3.4 Specialised storage

Storing poisons securely is vital to the safety and wellbeing of staff and patients. Some stocks will need to be stored in a dry environment while others will need to be in sterile environment and stored at a certain temperature. Make sure you know the requirements for each item and you follow the procedures of the medical practice. For security reasons some stock needs to be stored in secure cabinets whilst others will require specialised storage requirements such as refrigeration.

### Supply Rooms/Storage Areas

The expense of storing and maintaining stationery and medical supplies is high and some method of controlling stock is required. There are three ways of doing this: *Open, Closed and Controlled Supply Room Systems*.

Open supplies room: In an open supply room (storeroom) staff may enter and take items as required. A member of staff is given the responsibility of stocking, maintaining and reordering supplies.

Advantages: No delay for individual staff requiring stock.

Less administration time and paperwork needed.

Disadvantages: Items of stock are used more quickly through wastage and pilferage. Staff member responsible for stock control must check more often. On the spot demands for large quantities may cause stock shortages.

This type of supply room would include stock such as:

General Storeroom: tea/coffee, paper towel, toilet paper, cleaning products etc

General stationery cupboard: pens, paper, paper clips etc

Closed supplies room**:** In a closed supply system the supply room (storeroom) is locked. Staff obtain supplies by requisition to the staff member responsible for stock control.

Advantages: More efficient record keeping. Reduced waste and pilferage. More efficient reordering.

Disadvantages: Delay for staff obtaining supplies. More administration and paperwork.

Controlled supplies room: In a controlled supply room (storeroom) staff enter the supply room and fill in a requisition for supplies under supervision of the staff member responsible for stock control. They can then take the supplies immediately.

Advantages: No delay for staff obtaining supplies, efficient stock control through on the spot checks of stock taken, simple recording of costs. Reduction in waste and pilferage as well as adequate monitoring of the stock control system.

Disadvantages: Provided stock levels are maintained the only disadvantage would be if the supply room was only open at set times, in which case there would some delay in staff obtaining supplies.

### Medicines/Drugs

In a medical environment, all accountable drugs are to be kept in a secure room away from the public. There is a system that places drugs in the following categories:

• Schedule 2 Pharmacy Medicine (pharmacy ‘over the counter’ medication)

• Schedule 3 Pharmacist Only Medicine (pharmacist controlled ‘over the counter’ medication)

• Schedule 4 Prescription Only Medicine (also known as a ‘restricted substance’)

• Schedule 8 Controlled Drug (also known as a ‘drug of addiction’)

The acquisition, use, storage and disposal of Schedule 4 and Schedule 8 medicines are subject to jurisdictional legislative requirements. They must be:

• kept in a locked cupboard

• in a secure or locked room where the public do not have access

• keys to the locked cupboard must be carried by a registered nurse

• keys are not to be left in a drawer or unattended at any time

• a drug register for S4 and S8 drugs must be kept near the locked cupboard with the drugs

• all entries to this register must be sighted and signed by two registered nurses

• there must be a count of these drugs every 24 hours.

### Sterilised instruments and equipment

The guidelines relating to sterile items says they must be stored and handled in a manner that maintains the integrity of the packaging material and prevents contamination of the contents.

Sterilised items must be stored so that packaging is not crushed, bent, compressed, punctured, exposed to heat or direct sunlight and free of vermin and insects or held together with elastic bands, staples or paperclips. The contents of any sterilised package must be considered contaminated if the packaging is either damaged or becomes wet.

#### Sterile storage areas must be:

• dedicated for the purpose

• cleaned to a routine schedule

• free from dust, insects and vermin.

#### Sterile items on open shelving must be stored:

• at least 250mm off the floor

• at least 440mm from the ceiling

• out of direct sunlight.

### Vaccines

Management of storing vaccines in a domestic refrigerator has changed. Vaccines are at greater risk of becoming compromised (not affective) in domestic refrigerators. They must not be adversely affected by heat or cold.

Vaccines are delicate biological substances that can become less effective or destroyed if they are:

• frozen

• allowed to get too hot

• exposed to direct sunlight or fluorescent light.

#### Cold chain management

The cold chain is the system of transporting and storing vaccines within the safe temperature range.

The cold chain begins from the time the vaccine is manufactured, moves through to the state or territory vaccine distribution centres and ends when the vaccine is administered.

The success of any vaccination program depends on the potency of vaccines when they are administered to patients.

• A cold chain management system for the transportation and storing of vaccines aims to keep vaccines within the safe temperature range of 2–8ºC.

• Self auditing of cold chain management is an essential part of a routine quality assurance and risk management process.

• There needs to be a member of the practice team with primary responsibility for cold chain management, however it is vital that all staff are trained in the cold chain management process.

Refer to link below for NSW Health Cold Chain Breach Protocol.

[Managing a Cold Chain Breach](https://www.health.nsw.gov.au/immunisation/Documents/ccb-protocol-printable.pdf)

**Vaccines must be stored and transported within the recommended safe temperature range of 2-8 degrees Celsius at all times.**

* It is recommended that vaccines are stored in a purpose-built vaccine refrigerator.
* Bar refrigerators and domestic fridges are not recommended for vaccine storage.

Vaccines are expensive and in order to be effective must not be adversely affected by heat or cold.

Vaccines are delicate biological substances and microbes that can become less effective or destroyed if they are:

* frozen
* allowed to get too hot, and
* exposed to direct sunlight or fluorescent light.

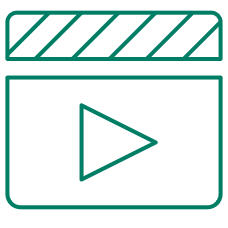
#### Strive for 5

NSW Health and National Vaccine Storage Guidelines set out the basic principles of vaccine storage management. The objective is that all vaccines must be kept in the temperature range **+2oC to +8oC** (hence “Strive for 5”). A data logger records the inside temperature of the refrigerator and can be programmed to sound an alarm if the temperature reaches **0oC.**

Vaccine refrigeration storage equipment eg data logger, thermometer, thermostat must be monitored, adjusted and maintained to maintain the temperature accuracy. Action must be taken if the refrigerator temperature goes outside the recommended range.

If there is a **cold chain breach**, a power failure or equipment breakdown which spoils the vaccines there are procedures to follow.

[Cold Chain Breach Protocol](https://www.health.gov.au/sites/default/files/strive-for-5-cold-chain-breach-protocol-poster.pdf) by NSW Health

 Watch

### Video: Vaccine Storage and Cold Chain Management

[Vaccine Storage and Cold Chain Management NSW Health](https://nswhealth.seertechsolutions.com.au/public_content/HETICP/HETI/CCMWebv3/story_html5.html)  - Video and training module from NSW Health.



https://nswhealth.seertechsolutions.com.au/public\_content/HETICP/HETI/CCMWebv3/story\_html5.html

 Practice activity

### Activity 3.4: Specialised storage

**Select the correct storage facility for each item from the following list:**

|  |  |
| --- | --- |
| Sharps container | Locked filing cabinet/room |
| Locked storage room | Document security bin/shredder |
| General stationery cupboard | Bagged in tray in the clean area |
| Drug register | Archiving cabinet and archiving register |
| Pathology supplies cupboard | Vaccine refrigerator |

The first entry has been completed for you:

| Item | Storage Facility |
| --- | --- |
| Recording of S8 drugs used | Drugs register |
| Flu vax vaccine |  |
| **Used** scalpel blades |  |
| Sterile instruments |  |
| New blue pens |  |
| **Unused** needles |  |
| Prescription pads |  |

## 3.5 Rotate stock

It is important to rotate stock to minimise the stock reaching its expiry or use-by-date. Old stock is used first and hopefully, has not reached its use by date following the ‘Shortest Life First Out Rule’ (SLFO). Items without an expiry date use the ‘First In, First Out Rule’ (FIFO). May need to mark the stock with the day it was received. It is illegal under the Poisons and Therapeutic Goods Act to supply any prescription or over-the counter medication without following appropriate guidelines

Benefits of FIFO:

• older stock is moved to the front with newer stock placed behind

• use of older stock ‘versions’ first to get rid of them when a new item of the same type is chosen

• assists with disposal or product recall as all items from the same batch/shipment are grouped together

• no stock wastage or money by having to throw out old or deteriorated product.



 Practice activity

### Activity 3.5: Rotate stock

Medical staff need to rotate stock to ensure that the most recently ordered/delivered stock is placed at the back to the shelf allowing the oldest stock to be used first.

1. Identify the out of date stock by placing an X on the box, todays date is 1/09/2019.

Medicine boxes with the following dates;
29/12/18
16/10/19
1/3/19
22/9/19
2/11/19
15/12/19
25/8/19
18/10/19
12/11/19

1. Write the dates from the boxes above, which have not expired, from the oldest to the newest.

Topic 4

Assist in  
Stocktaking

# Topic 4: Assist in stocktaking

In this topic your will learn how to:

* Provide assistance in stocktaking to identify, count, move and locate items.
* Complete and store stocktaking documentation.
* Assist with other stocktaking actions as directed.

## 4.1 Provide assistance in stocktaking

A stocktake is when you physically count the stock that you have in your workplace and compare it to the documentation of your stock count. It is used to check that you actually have the stock that you think you have.

Whether you work in a hospital or a medical practice you might be required to participate in a stocktake procedure. This might be a full stocktake, cyclical stocktake or a spot check. If you are working in a manual system you might need to prepare stocktake sheets or cards to assist with the counting of stock and to identify any discrepancies in expected stock levels.

At all times make sure you follow the directions of your supervisor and provide practice staff with enough notice of the upcoming stocktake.

Increasingly large hospitals are using advanced technologies such as robotics to assist with stock control and ordering. The following videos will help you to see how technology is changing the modern medical practice.

Stocktaking is a legal requirement for taxation and audit purposes.

There are three main types of stocktake:

1. A full stocktake that may take place half yearly or yearly where the entire stock in the workplace is counted.
2. A cyclical stocktake when stock is counted on a rotating roster, or is an ongoing partial count of stock. This may apply in large workplaces where physical counts would take too long (eg they may stocktake weekly as they carry a large range of limited shelf range stock).
3. A spot check - which is just that. A certain area of a department or workplace may have a check on stock quantity to verify a discrepancy.

The steps to following during a stocktake are:

1. identify the stock item
2. count the stock systematically
3. record the stock numbers of a stock sheet. it is useful if this has already been printed for all the items being counted.
4. calculate the totals
5. compare to the stock levels which have already been documented on stock cards or a computerised system.

Stocktakes can help the organisation identify if stock is missing, either through incorrect storage or theft.

 Practice activity

### Activity 4.1: Provide assistance in stocktaking

Work as a group and do a stocktake of your classroom or work environment. You need to make a list of all the item details you are counting and the totals.

## 4.2 Complete stocktaking documentation

Stocktaking documentation needs to include:

* date
* item – this could include barcode, product code etc
* minimum quantity
* stock recorded
* actual stock on hand
* discrepancies
* name and position of staff member completing the stocktake.

Example:

**MONTHLY FIRST AID KIT STOCKTAKE - September 2019**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Item | Minimum Quantity | Stock Record Card  30/9/19 | Stock Take  30/9/2019 | Discrepancy |
| Small sterile dressing | 6 | 15 | 15 |  |
| Medium sterile dressing | 6 | 4 | 4 | Stock ordered  29/9/2019 |
| Large sterile dressing | 4 | 6 | 6 |  |
| Safety Pins | 12 | 20 | 15 | 5 missing |
| Nitrile gloves  (pairs) | 20 boxes | 30 boxes | 26 boxes | 4 boxes missing |
| Sterile eye pads | 2 | 1 | 1 | Need to order |
|  |  | **Name** | **Position** | **Date** |
|  |  |  |  |  |

 Practice activity

### Activity 4.2: Stocktaking documentation

Using the information from the previous task, create a document in Word or Excel to record the stocktake you conducted. Print it and attach to the back of your workbook.

## 4.3 Assist with other stocktaking actions

A stocktake provides opportunity for the medical centre or ward to review or revise ordering procedures so that expensive stock is not over ordered and then wasted. If shortages have occurred since the last stocktake then this is noted and action taken to avoid this happening again.

Conducting a stocktake could also highlight bad or incorrect record keeping procedures and result in the need for tighter controls, improved procedures or staff training in this area. Damaged or out of date items need to be removed and disposed of according to NSW Health guidelines. If stocktake reveals missing, damaged, stolen or out of date stock can be identified via a stocktake and dealt with by reporting to the appropriate supervisor, manager or authority.

Topic 5

Assist in disposal  
of stock

# Topic 5: Assist in disposal of stock

In this topic your will learn how to:

* Dispose of stock marked for disposal according to legislation and other industry specific or manufacturer requirements and under direction of supervisor
* Complete and store required documentation of disposal of out-of-date stock

## 5.1 Dispose of stock marked for disposal

The Practice Manager, your work colleagues and yourself have a duty of care to the patients and staff that work in the medical practice. In previous topics in this unit we have considered safe storage of medical supplies and equipment but we now need to consider how we dispose of out of date stock. This is really important when you are dispensing items such as vaccines and medications.

Manufacturers and suppliers sometimes recall products when they become aware that a product is faulty, has been contaminated, tampered with or their own quality control processes have not been followed properly. These items are returned to the supplier for a full refund and they should not be used under any circumstances once you have been notified of a recall.

### Waste Management

NSW Health provides guidelines for a minimum standard for safe and efficient waste management. The aims of the guidelines are to protect public health and safety and to provide a safer working environment while minimising waste generation and environmental impacts of waste treatment/disposal.

#### Disposal of Vaccines, Schedule 8 and Schedule 4 Drugs

The NSW Health website has the most current information on the disposal of hazardous waste e.g. vaccines, chemicals and toxic substances.

In hospital environments vaccines, Schedule 8 and Schedule 4 drugs which have been deemed *unusable...for whatever reason1* must be destroyed or disposed of in the presence of a Registered Pharmacist or Director of Nursing **and** a Registered Nurse. In other medical environments, they must be **destroyed or disposed of** under observation from an authorised body such as the Health Department or Police.

It is permissible to take any out of date, compromised drugs to a pharmacy where they will be disposed of under the correct conditions.

Note: Specialist medical waste disposal companies are used by surgeries and hospitals to collect and dispose of medical waste and they must dispose of these bags and containers strictly according to the NSW Health guidelines.

#### Clinical Sharps wWte

A sharp is any object capable of inflicting a penetrating injury. This includes needles, broken glass, broken capillary tubes and any other sharp objects or instruments designed to perform penetrating procedures. Health organisations must have written policies for the safe handling and disposal of sharps and should ensure training is provided annually to healthcare workers in sharps handling and disposal.

Sharps must be disposed of in a puncture resistant container immediately or as soon as practical following use. The sharps container must comply with AS/NZS 4261 and AS 4031. If you need to take the sharp/s to the container it must be put into a puncture proof tray, using forceps, taken to the sharps container and placed into it using the forceps.

You should **NEVER** attempt to recap injection needles before disposing of them in the sharps container.

#### Clinical Waste (including Pathological Waste)

Clinical waste is items like unrecognisable human tissue, Blood or other body fluids, material and/or equipment stained by bodily fluids or lab specimens. These are disposed in a special BRIGHT YELLOW leak-proof bag or container with the black BIOHAZARD symbol.

#### Cytotoxic Waste

This is material which is contaminated with preparations containing toxic materials, this includes residue of cytotoxic drugs. Cytotoxic waste is disposed of in a special PURPLE bag or container with the white or black CYTOTOXIC symbol.

#### Radioactive Waste

Radioactive waste is material which might be contaminated with radioisotope which may have been used in nuclear medicine. This is disposed of in A SCARLET RED bag or container with the black RADIOACTIVE symbol printed on each one.

Note: A doctor’s surgery may not handle Cytotoxic or Radioactive material, but administration staff need to be aware of the disposal methods so they can order the appropriate disposal containers.

 Practice activity

### Activity 5.1: Management of Clinical Waste

Access the Clinical and related waste management for health services document on the NSW Health Website - <https://www1.health.nsw.gov.au/pds/ActivePDSDocuments/PD2017_026.pdf>.

Complete the following table

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Waste Stream | Clinical Sharps | Clinical Waste | Cytotoxic Waste | Pharmaceutical Waste | Radioactive Waste |
| Example |  |  |  |  |  |
| Bin colour |  |  |  |  |  |
| Bin liner |  |  |  |  |  |
| Symbol (Draw or copy/paste) |  |  |  |  |  |
| Symbol description |  |  |  |  |  |

#### Complete and store required documentation re disposal of out of date stock

The Nurse in Charge of a ward is responsible for ensuring that a record is kept of all **Schedule 8 drugs** in a "**ward register**”. A ward register must be in the form of a **bound book** (whose pages cannot be removed or replaced without trace), with **consecutively numbered pages**.

Medical practices are to record all Schedule 8 transactions according to their State legislation requirements The Policy and Procedures Manual for the medical practice or ward will contain more detailed information on any other supplies that need to be recorded when disposed of or destroyed.

For more information on the documentation and disposal of drugs click on the link below and go to section 5.8 of the NSW Health policy document

[Handling of Medicines Policy Directive](https://www1.health.nsw.gov.au/pds/ActivePDSDocuments/PD2013_043.pdf)

 Practice activity

### Activity 5.2: Dispose of stock

Go online to the Department of health, Therapeutic Goods Administration. Under the Safety Information tab, find information about Australian recall actions.

In your own words, write a brief explanation of the following recall actions:

|  |  |
| --- | --- |
| TGA Recall Action | What does this mean? |
| Recall |  |
| Product defect correction |  |
| Hazard alert |  |
| Product defect alert |  |

## 5.2 Complete documentation for disposal of stock

Any expired stock or unwanted stock must be entered into a disposal register and placed in an appropriate disposal container such as a mediwaste container for safe return to the supplier or pharmacist. Please check your organisation's procedure prior to carrying out this activity as you might need a witness to verify the items and the reasons why they are being disposed of.

The disposal record should identify the date, the item name and numbers, the quantities that were disposed of and the reason and the signature of the person responsible for the disposal.

 Practice activity

### Activity 5.3: Complete and store documentation for disposal of stock

List key points relating to the disposal of Schedule 4 & Schedule 8 drugs.

# Appendix A - Extract of AA Medical Centre policies and procedures

**AA Medical Centre - Policy and Procedures**

**Stock Control - Stock and Supplies**

* The Practice Manager or Clinical Nurse checks and maintains stock ensuring perishable materials are rotated so oldest is used first.
* All medical stock and supplies are checked weekly and items are ordered when supplies reach re‑order levels. Out-of-date stock should be identified during the weekly stocktakes. All staff are responsible for notifying the Practice Manager when stock is low or missing.
* Incoming goods are checked against delivery dockets, orders and invoices. The Medical Office Workers assist the Practice Manager and the Clinical Nurse as required.
* Schedule 4 drugs must be kept in the General Medication Cupboard to which customers do not have access. Schedule 8 drugs are stored in the Locked Medication Safe. Only the Practice Manager and Clinicians have access to the Safe. The Practice Manager is responsible for the security of all drugs in the Practice.
* A Stationery List is kept inside the cupboard door to record incoming and outgoing items. Only authorised staff have access to the stationery supplies. Stationery supplies should be checked weekly (Medical Office Worker) to ensure minimum supplies are maintained.
* When the stock of an item is below the Minimum stock requirements, it is considered URGENT. When urgent supplies or new items are needed, all requests are to go to the Practice Manager or delegate. The order is to be signed by the Practice Manager for both medical and non-medical items. The Practice Manager is responsible for ordering urgent supplies. The Medical Office Worker is to assist the Practice Manager with orders.
* Details about incoming and outgoing stock and consumable items (eg: gloves, masks, hand cleaner etc) is kept on stock cards. The Practice Manager is responsible that the stock cards are kept up to date. The Medical Office Worker is to assist the Practice Manager with stock control. The stock cards are housed in the filing cabinet in the Practice Manager’s Office. The Practice Manager is responsible for the security of all stock and supplies.
* Any stock which is identified as being out-of-date must be disposed of according to the NSW Health Regulations and under supervision by the Practice Manager. Schedule 4 and Schedule 8 drugs must be disposed of following strict guidelines monitored by the Practice Manager. Any record of disposal should be updated on the stock cards.
* Formal stocktakes of equipment, stock and supplies will be carried out every six (6) months by the Practice Manager (non-medical) and Clinical Nurse (medical). Medical Office Workers are expected to assist in the stocktakes as directed.

***If you do not understand any aspect of this policy, please speak to your manager or supervisor.***

**Extract from Job Description - Medical Office Worker – AA Medical Centre**

**Roles and responsibilities**

* Greet clients and perform general reception duties
* Complete allocated administrative and service tasks including accurate documentation, ensuring timeframes and schedules are adhered to
* Assist with stock take and ordering of stock
* Maintain stationery supplies
* Comply with privacy and confidential principles of work

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| Figure 3  Images of medicine boxes | 41 | Photo by TAFE NSW Staff |
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|  |  |  |
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# Document checklist

This resource was developed before this checklist was created – therefore I can’t tick all boxes because in most instances they did not happen. This resource was moved to TAFE NSW templates from a third party resource which we bought and are allowed to use in this way.

Use this checklist when creating resources using TAFE NSW templates for delivery either as electronic files (PDF or docx) or for printed documents.

**Do not remove this checklist.**These tables will be removed after QA is approved, before the resource goes onto the Learning Bank.

**Formatting text**

|  |  |  |
| --- | --- | --- |
| # | When formatting the text in this document, I have: | Done |
|  | Structured the content logically using section headings, headings, paragraphs, tables, bullet lists and table of contents. |  |
|  | Nested the heading styles in order, for example H1, H2, H3. |  |
|  | Avoided manual styling, for example coloured text and different fonts. |  |
|  | Created bullet and numbered lists using the format in the style gallery. |  |
|  | Formatted bullet lists correctly using one of these two structures:   1. One sentence per line with capitals and a full stop on each line. 2. No capitals and a single full stop at end of the list. |  |
|  | When using heading numbering, I have made sure it is consistent throughout the document. For example, numbering practice activities. |  |
|  | Used sentence case for headings with only the first word capitalised. |  |
|  | Manually checked heading spelling (auto spell checker may not work). |  |
|  | Formatted tables using styles. Avoided using nested cells, merged cells or nested tables. |  |
|  | Repeated table heading rows across new pages. |  |
|  | Ensured tables and forms *have not* been inserted as images. |  |

**Using Word**

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| # | When preparing this resource using Microsoft Word, I have: | Done |
|  | Used the most recent TAFE Digital document template as downloaded from the [Learning Bank](https://share.tafensw.edu.au/share/access/searching.do?in=C53e8944e-5f29-4e1d-af0c-06f64257bfbe&q=&type=standard&sort=rank&dr=AFTER). |  |
|  | Styled each text element using the Word styles built into template. For example, use ‘strong’ style instead of bold. |  |
|  | Used the *Quick Parts* menu to insert new topics and components. |  |
|  | Pasted imported text using the *Text only* setting, with no style. |  |
|  | Not imported styles from other documents. |  |
|  | Used *Page Breaks* to move headings to the next page (*Layout* tab in the *Page Setup* group under *Breaks*), rather than lots of paragraph returns. |  |
|  | Checked the footers include the correct information. For example, page number, file name, copyright statement, student name, etc. |  |
|  | Deleted the template guide text and instructions when finished. |  |
|  | Named documents correctly using [TAFE file naming conventions](https://share.tafensw.edu.au/share/file/ee758805-ee07-4a7b-9f5e-4148a29afc10/1/Training%20Product%20Naming%20Conventions.pdf). |  |

**Inserting images**

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| # | When inserting images in this document, I have: | Done |
|  | Inserted images using the image single or image double quick part. |  |
|  | Ensured the image quality is good quality, using images that are between 500 and 2000 pixels wide and are not blurry or jagged. |  |
|  | Reduced the size of large images of more than 1MB before inserting into documents. |  |
|  | Not ‘squeezed’ images when resizing (e.g. maintaining image aspect). |  |
|  | Ensured all images are kept *Inline with Text*. |  |
|  | Used only images with permission. For example, Creative Commons (CC), ©Copyright, written permission, license purchase. |  |
|  | Listed all image sources underneath each image or placed in the *Image attribution* table at the end of the document or used [copyright compliant labelling](https://share.tafensw.edu.au/share/file/08f92fab-c504-4c31-b405-c1fafaae1784/1/Copyright%20compliant%20labelling%20in%20learner%20resources.pdf). |  |
|  | Provided ALT text for images with text or that contain learning content. Images purely for decoration do not need ALT text; however, they need to be marked as decorative. Examples of this include background images, duplicate logos, decorative page elements, etc. |  |
|  | Obtained written permission to use photos of TAFE students, usually with a release form signed by student. |  |

**Writing content**

|  |  |  |
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| # | Before and during the writing of content, I have: | Done |
|  | Downloaded and referred to the [TAFE NSW Writing Style Guide](https://staff.tafensw.edu.au/documents/2017/03/writing-style-guide.pdf/). |  |
|  | Used direct language and common words with simple sentence structures. For example, ‘use’ not ‘utilise’, ‘begin’ not ‘commence’. |  |
|  | Used language that is appropriate to the student’s level. |  |
|  | Written the full description of acronyms on first use. For example, Workplace Health and Safety (WHS). |  |
|  | Used words to write the numbers 0-9 in words and all other numbers as numerals. |  |
|  | Used meaningful text for hyperlinks that describes the destination of the link. Don’t use ‘click here’ for links. URLs can be used for print. |  |
|  | Used inclusive, gender neutral and culturally appropriate language. For example, salesperson, firefighter, ‘they’ rather than he or she. |  |

**Accessibility**

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| # | To ensure the accessibility of this resource, I have: | Done |
|  | Used Word styles to format text and to structure your document. |  |
|  | Not used images for decorative text or headings or tables. |  |
|  | Provided long descriptions for images with important text such as graphs or infographics or process diagrams. |  |
|  | Used the *Word Accessibility Checker* on the document and addressed issues where possible. Where concerned I have referred to the [Accessibility checklists](https://share.tafensw.edu.au/share/items/2778f7bf-0b13-4b15-862f-4743dee10d44/1/). |  |
|  | Re-checked the accessibility in PDF format (where the final format is PDF). Where concerned I have referred to the [Accessibility checklists](https://share.tafensw.edu.au/share/items/2778f7bf-0b13-4b15-862f-4743dee10d44/1/). |  |

**Copyright**

|  |  |  |
| --- | --- | --- |
| # | To ensure correct copyright of the material in this resource, I have: | Done |
|  | Not plagiarised text or used third party text without permission. |  |
|  | Used content from third party only within [National Copyright Guidelines](https://www.smartcopying.edu.au/copyright-guidelines/what-can-i-copy-communicate-). For example, 10% or one chapter of a printed work. |  |
|  | Correctly acknowledged original text sources even if they are not directly quoted. Provide full references using a consistent referencing style (e.g. Harvard or APA). |  |

**Cultural protocol**

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| --- | --- | --- |
| # | To observe appropriate cultural protocols in this resource, I have: | Done |
|  | Ensure that the Acknowledgment of Country is at the front of the document. This is included in the document templates. |  |
|  | Ensure that appropriate [Aboriginal and Torres Strait Islander language and referencing protocols](https://share.tafensw.edu.au/share/file/a5730763-33bb-42fc-bcd6-4f4ba966b9bb/1/Aboriginal%20and%20Torres%20Strait%20Islander%20Protocols%20for%20appropriate%20language%20and%20referencing_V2.pdf) are used throughout |  |
|  | Check that images identified as Aboriginal or Torres Strait Islander are authentic and the use of the work has been negotiated with the owner(s) using appropriate protocols |  |
|  | When using video, images or works that are Aboriginal and Torres Strait islander identified content, the following statement should be included at the front of the workbook:  *WARNING: Aboriginal and Torres Strait Islander learners are warned that the following resource may contain images and voices of deceased persons.* |  |