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DELIVER PROJECT

Contraceptive Procurement Table Guidance

2010

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Contraceptive Procurement Table Guidance

USAID | DELIVER PROJECT, Task Order 1

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USAID | DELIVER PROJECT

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CPT GUIDANCE

Overview

You are required to prepare CPTs for every reproductive health program the Mission supports with contraceptive commodity donations.

- To document and validate the need, prepare one table and include annexes for each product the recipient program requests from USAID.
- After you complete the CPTs, submit them to CSL to support the email order.
- Orders are maintained in the contraceptive and condom commodities database for central procurement support (DelPHi).

The following section divides the CPT preparation process into 12 steps, including instructions and guidance on how to complete each step.

Summary of Steps in Preparing CPTs

To prepare a CPT, you must follow 12 steps—from data collection, to documentation of figures used in the CPTs, to proposing a supply schedule.

1. Determine the program(s) and contraceptive or condom products that will require CPTs.

For each CPT—

2. Determine or estimate the quantity of stock on hand.
3. Estimate past, present, and future use or distribution to users.
4. Determine or estimate past and future losses, transfers out, and adjustments.
5. Identify the contraceptives received to date or scheduled to arrive (including transfers from other programs).*
6. Set desired end of year stock level.
7. Complete the CPT form with program data. Do the calculations.
8. Complete CPT annex, page 1.
9. Determine quantities needed in CY2010 and CY2011.
10. Propose a new supply for CY2010 and CY2011.
11. Estimate quantity needed for CY2012.
12. Complete CPT annex, page 2.

* If you are preparing CPTs for USAID-supplied contraceptives, please contact the USAID | DELIVER PROJECT or USAID/GH/PRH/CSL in Washington, D.C., or go to deliver.jsi.com in the My Commodities section for a report of past, present, and future shipments to your country. You will need a login and password to access the report. You may request a login on the USAID | DELIVER PROJECT website.

- To complete the first six steps, collect data from the program's logistics management information system (LMIS) and forecast future activity. The steps are the same with or without a computer.
- To complete steps 7 and 8, record and calculate the information on paper in the CPT format; document the sources and/or assumptions used to determine the data. If you use PipeLine software, the computer will do the calculations. If you use your own spreadsheet, use the formulas in this guide for the calculations.
- To complete steps 9 through 12, prepare the procurement plan for ordering contraceptives; these will provide important data to help CSL determine procurement contracts and budgets at the global level. This completes the CPT preparation task.

Each step is important to the procurement process. To ensure timely receipt of shipments, follow each step carefully, then submit the completed CPTs to CSL with the contraceptive order.

Collecting the Data

Step 1. Determine the program(s) and contraceptive products that will require CPTs.

1. First, decide on the program(s) that require CPTs (for example, the Ministry of Health, the local family planning association, etc.).
2. Next, for each program, determine the products that require CPTs. One CPT is needed for each contraceptive product or brand that will be part of the program's procurement plan.
 - In most cases, for logistics purposes, every different size, brand, or packaging of a method is a separate contraceptive product.
 - If the program receives equivalent, but not identical, contraceptive products from suppliers (for example, 52 mm non-colored, no logo condoms from USAID and 52 mm generic condoms from UNFPA), you can combine all the equivalent products on one CPT. In some cases, a program may receive many contraceptives that are used interchangeably (for example, different kinds of condoms). If the contraceptives are prescribed and used interchangeably, prepare one combined CPT for all. You can increase logistics efficiency by managing equivalent products as one product.
 - If you have a good reason to forecast and track similar products separately at the program level, then prepare a separate CPT for each contraceptive product.

Two good reasons might be—

- The two products are used differently (for example, one is distributed through a community-based program while the other is distributed through fixed facilities), and the change in estimated use will be different for each product.
—or—
- The program's clients see them as separate products; therefore, the demand for the two products is different.

Should you prepare separate CPTs for AIDS condoms? If an AIDS program uses a separate logistics system, the program manager could prepare a separate CPT (or CPTs, if more than one condom product is used) for the AIDS program. In an integrated program where demand is stable for AIDS prevention and family planning condoms, prepare a single CPT for each product, including both family planning and AIDS requirements. (You do not need to differentiate between sexually transmitted infection [STI] prevention use and family planning use.)

Step 2. Determine or estimate the quantity of stock on hand.

Stock on hand data should include stock from all levels of the delivery system. The most reliable source of data is an annual physical inventory conducted at all levels of the system. Another good source is an LMIS that collects inventory data from the facilities at all levels, as part of periodic reporting. If you cannot obtain data from lower levels of the delivery system, use stock on hand data from the lowest level for which reliable data are available. Do not use stock on hand at the central level only. If only central-level stock data are available, it is important to regularly monitor supplies at lower facilities to minimize shortages and surpluses.

To calculate Beginning of Year Stock during the year, use the following example:

Physical inventory on June 1 shows a count of 350,000	+350,000
30,000 issued monthly, January through May (30,000 × 5)	+150,000
Two deliveries of 50,000 each received since January 1 (2 × 50,000 = 100,000)	-100,000
<hr/>	
Beginning of Year Stock (BOYS) on January 1	= 400,000

If CPTs were prepared within the past two years, verify the basis for the Beginning of Year Stock (BOYS) 2008 in the most recent CPT. Confirm that it is accurate, or correct it with better data, if available.

If an earlier estimate of BOYS 2008 is not available, use all the stock-level data available (for example, physical inventories, stock cards, LMIS reports) to estimate the current figure. Subtract any receipts since 01/01/2008 from the current estimate of stock on hand, and add estimated dispensed quantities since 01/01/2008. Crosscheck this estimate with warehouse records and program staff (see box above).

Step 3. Estimate past, present, and future use or distribution to users.

For the two historical years of the CPT, CY2008 and CY2009 use the most reliable data available from the lowest level possible in the distribution system to determine use, sales, and/or distribution.

- Ideally, use data on the quantities of contraceptives that were actually dispensed to clients not the quantities of contraceptives that were issued from central or regional warehouses to lower-level warehouses or from lower-level warehouses to clinics.
- If timely, accurate dispensed-to-user data are not available or cannot be obtained, use issues data from the lowest level considered reliable.
- When using issues data to estimate dispensed-to-user quantities, do not double-count issues that represent the same product. For example, condoms issued from the central warehouse to a regional warehouse and from the regional warehouse to a clinic are the same. Count the condoms once, not twice.

Base your future year use, sales, or distribution estimates on historical trends in contraceptive distribution (for example, how much has been dispensed to clients during the past few years) and on projections for program expansion or change. When you estimate future year consumption, consider the impact if you plan to increase the number of reproductive health clinics or trained service providers, change the method mix, or modify the reproductive health service delivery strategy.

- If the logistics data are not reliable, prepare forecasts using demographic and prevalence data, or service statistics, to check your logistics-based forecast.
- To forecast based on demographic and prevalence data, you need a recent national prevalence survey for your country that indicates how much prevalence is attributed to the programs for which you are preparing CPTs.

- To prepare a forecast based on service statistics, the programs for which you are preparing CPTs should report client visits (not users) and should have norms for the quantities of contraceptives dispensed at each visit. Those norms should be consistently followed by service providers.

After you prepare forecasts using the various available data, compare the forecasts based on the strengths and weaknesses of each data source before you finalize your estimate.

Step 4. Determine or estimate past and future losses, transfers out, and adjustments.

Note: Promptly remove from the distribution system and destroy any contraceptives that have expired or are unusable because of damage. Follow local laws and any applicable donor guidelines on contraceptive disposal.

The best information sources on past and present losses or transfers are the total or sample physical inventories, stock cards, or logistics information system records that provide data by manufacture/expiry date. These records should provide data on contraceptives that did or will expire and contraceptives that are transferred to or from other programs.

- If large quantities of stock are due to expire, try to move excess stock to other programs where they can be used before expiry.
- If you transfer stocks, focus on other in-country programs that forecast supply shortages in future years. When considerable shelf life remains on an overstocked product, and the quality of the product has not been compromised, it may be possible to transfer it to another country in time for use.
- Remember, the donor of the commodities must approve any transfer of products from one country to another before the transfers are initiated. When you consider an international transfer of contraceptives supplied by USAID, be sure to include CSL during the planning stage.
- If you have any data on amounts of contraceptives usually damaged or lost in transit or storage at the peripheral levels of the logistics system, include these amounts in the CPT as probable future losses.
- Note transfers of contraceptives out of the program and the reasons for those transfers separately from losses or expiry. Transfers are usually beneficial; they help maintain adequate stock levels throughout the country by moving contraceptives to programs that need them most.
- Occasionally, you may need to record an adjustment in a CPT. An adjustment is a subtraction from or an addition to inventory. While the adjustment balances the Beginning of Year Stock for the following year, it represents an error in consumption or stock-level data or unknown/unreported losses; this will require some analysis and explanation.
- Notify the program manager and document all adjustments in the CPT annex.

Calculating an Adjustment:

A program conducts an annual physical inventory in January.

In January 2008, the inventory count showed 1,500,000 condoms.	+1,500,000
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During 2008, shipments totaling 1,400,000 condoms were received.	+1,400,000
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During 2008, 1,000,000 condoms were distributed to users.	-1,000,000
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2008 End of Year Stock should be—	1,900,000
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In January 2009, the inventory count showed 1,800,000 condoms.	-1,800,000
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Amount of adjustment.	= 100,000
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The actual inventory is 100,000 less than expected. An adjustment of -100,000 is made in 2008 to calculate the reported 2009 Beginning of Year Stock (1,900,000-100,000 = 1,800,000.)

Step 5. Identify the contraceptives received to date or scheduled to arrive (including transfers from other programs).

Identify all shipments received or scheduled to be received from 2008 through 2012 from all sources, including local suppliers, international donors, and nongovernmental organizations (NGOs). Include any transfers received or scheduled to be received from other programs.

If the reproductive health program has a firm commitment from a local supplier or international donor to receive a certain quantity in a future year, even though there is no specific shipping schedule, count that quantity as well. However, do not count any quantity from any supplier unless you have a firm commitment.

If the reproductive health program does not have records of past and future shipments, local donor or NGO representatives may be able to provide records for the contraceptives they supply. In addition, two on-line tools can assist you in finding past and current shipment information for a variety of donors.

For USAID-donated shipments, visit the USAID | DELIVER PROJECT website's My Commodities section (deliver.jsi.com/dhome/mycommodities), which can inform you of past and current procurement actions, by country. You must have a login to access this information. To obtain a login from the USAID | DELIVER PROJECT website, access the Register link at the top of the home page and complete the brief request form.

Access the Reproductive Health Interchange (RHInterchange) online to locate shipments from donors that include the United Nations Population Fund (UNFPA), International Planned Parenthood Federation (IPPF), USAID, and other organizations—when UNFPA has acted as the procurement agent. The RHInterchange offers summaries of shipments to a specific country and detailed information on individual shipments. A login and password are required to obtain detailed shipment information. Access the RHInterchange home page for navigation instructions and important notes on the data.

Where to find shipment information online:

- USAID | DELIVER PROJECT website:
deliver.jsi.com
Register to view USAID shipment details.
- Reproductive Health Interchange (RHI) database:
rhi.rhsupplies.org
Register to view UNFPA and other donor shipment details.

Step 6. Set desired End of Year Stock level.

Set the desired End of Year Stock level high enough to ensure continuous availability of contraceptives at all program levels, but do not set it so high that the commodities routinely expire; managing and maintaining excess supplies increase costs.

- When you set the program's desired End of Year Stock level, determine the minimum and maximum desired stock levels at each level of the pipeline within the country. The desired End of Year Stock level should be between the minimum and maximum levels. You may need to consider storage capacity, normal lead time for ordering and receiving the contraceptives, potential delays in delivery, and other issues when you set the minimum and maximum stock levels at the service delivery and storage facilities.
- To determine the desired End of Year Stock level:
 - Add the maximum number of months of supply to be maintained at each level of the delivery system and the minimum months of supply to be maintained at each level of the delivery system.

- Divide this number by two; this answer is the average stock level in months.
- Choose a desired End of Year Stock level that is equal to or greater than the average stock level in months but not greater than the total maximum months of stock.

The desired End of Year Stock level should generally not exceed 12 months because of potential problems with contraceptive expiry. A program should never run short of contraceptives; neither should it have to manage excess stocks that would waste resources and risk expiry. A long pipeline, indicated by a desired EOYS longer than 12 months, increases the risk that contraceptives will expire before they can be distributed.

Setting Desired End of Year Stock		
	Months	
	Max	Min
Central warehouse	7	3
District level	2	1
Service delivery level	3	2
Total	12	6
Average stock	(12 + 6)/2 = 9	
Desired End of Year Stock	≥9 and ≤12	

Completing the 2010 Procurement Table (CPT)

Use the CPT forms to record the basic data needed for CPT calculations and to determine the quantities required and the supply shortfall. When you complete the CPT, remember to complete the annex. The following pages provide detailed instructions on how to complete a CPT form by hand. Refer to the form when you review these instructions.

Step 7. Complete the CPT form with program data. Do the calculations.

Complete the Country, Program, Contraceptive, Prepared by, and Prepared date lines on each CPT.

Express all quantities in units.

Complete as follows:

Item 1 Beginning of Year Stock (BOYS)

The Beginning of Year Stock in CY2008 and CY2009 should equal the actual amount in inventory at all program levels; or, if actual data are not available, use the program manager's best estimate.

The Beginning of Year Stock figures for the three future years of the CPT are estimates based on the following calculations:

Beginning of Year Stock 2010 =

Item 4, End of Year Stock 2009

Beginning of Year Stock 2011 =

Item 4, End of Year Stock 2010 + Item 7, Quantity Proposed 2010

Beginning of Year Stock 2012 =

Item 4, End of Year Stock 2011 + Item 7, Quantity Proposed 2011

Item 2 Received/Expected

Item 2a For CY2008, CY2009, and CY2010, record the quantity of the contraceptive actually received from all suppliers.

- If a shipment has arrived in-country but has not been cleared from port, do not include it in item 2a; but, instead, include the shipment in item 2b.
- For each shipment in item 2a, include the following in the annex: supplier, quantity, receipt date, and order number.

Item 2b Complete this item for CY2009 through CY2012 to include shipments from all suppliers that are ordered, confirmed, and expected to arrive but have not been received by the program when the CPT is completed. For each shipment in item 2b, include the following in the annex: supplier, quantity, expected receipt date, and order number.

Item 2c Record any stock that was transferred in from a different program and any adjustment quantity required if the EOYS is lower than the beginning of year stock for the following year.

Item 3 Estimated Dispensed

Item 3a Enter actual figures for contraceptive use/sales/distribution to clients for CY2008 and CY2009; estimate/forecast figures for CY2010 through CY2012.

Item 3b Record any stock that has been or will be removed from the program's inventory for any reason other than distribution to clients (for example, stock that was damaged in a flood).

- Item 3b Include any stock that expired or will not be usable, including any stock expected to expire before it can be used.

Item 3c If the calculated EOYS is higher than the beginning of year stock for the following year, record an adjustment to balance the beginning of year stock for the following year.

Item 4 End of Year Stock (EOYS)

This item is a calculation.

$$\text{Item 1} + \text{Item 2 (a, b, and c)} - \text{Item 3 (a, b, and c)} = \text{Item 4}$$

Item 5 Desired EOYS

Fill in the months field with the desired EOYS that you determined in step 6.

The Desired EOYS for CY2010 and CY2011 is equal to the Desired EOYS in months multiplied by the average monthly consumption for the following year, plus losses or transfers anticipated for the following year.

2010 Contraceptive Procurement Table					
Country:			Prepared by:		
Program:			Prepared date:		
Contraceptive:					
(Enter Actual Quantity)					
	2008	2009	2010	2011	2012
1. Beginning of Year Stock (BOYS)					
PLUS					
2. Received/Expected					
(a) Received					
(b) Expected					
(c) Transfers/Adjustments In					
MINUS					
3. Estimated Dispensed					
(a) Dispensed to Users					
(b) Losses/Transfers Out					
(c) Adjustments Out					
EQUALS					
4. End of Year Stock (EOYS)					
MINUS					
5. Desired EOYS	Months				
EQUALS					
6. Surplus (+) OR Quantity Needed (-)					
PLUS					
7. Quantity Proposed					
EQUALS					
8. Surplus (+) OR Shortfall (-)					

(Do not complete shaded cells)

For CY2010 Desired EOYS:

Desired EOYS in months ×
(CY2011 Item 3a /12) + CY2011
Item 3b

For CY2011 Desired EOYS:

Desired EOYS in months ×
(CY2012 Item 3a /12) + CY2012
Item 3b

The Desired EOYS for CY2012 is
equal to the Desired EOYS 2011.

For CY2012 Desired EOYS:

Desired EOYS in months × (CY2012 Item 3a /12)

To calculate Desired End of Year Stock, use the following example:

Desired EOYS in months:	9		
Item 3a Dispensed to Users	2008: 12,000	2009: 13,200	
Item 3b Losses/Transfers Out	2008: 200	2009: 50	

Calculate DEOYS for 2010:

$$9 \times (\text{CY2011 Item 3a}/12) + \text{CY2011 Item 3b} \\ 9 \times 12,000/12 + 200 = 9 \times 1,000 + 200 = 9,200$$

Calculate DEOYS for 2011:

$$9 \times (\text{CY2012 Item 3a}/12) + \text{CY2012 Item 3b} \\ 9 \times 13,200/12 + 50 = 9 \times 1,100 + 50 = 9,950$$

Calculate DEOYS for 2012:

$$\text{Repeat value for 2011 in 2012} = 9,950$$

Item 6 Surplus (+) or Quantity Needed (-)

- For CY2010, CY2011, and CY2012, subtract the Desired EOYS in item 5 from the EOYS in item 4. Enter the result in item 6.
- If the EOYS in item 4 is less than the Desired EOYS in item 5, then item 6 is negative and represents a Quantity Needed.
- The program or a donor is required to provide additional stock to ensure that Estimated Dispensed (item 3) and Desired EOYS (item 5) levels can be met. Note the quantity as Quantity Proposed in item 7.
- If the EOYS in item 4 is greater than the Desired EOYS in item 5, then item 6 represents a surplus. In this case, new supplies should not be planned for the specified year. If the overstock is significant, you may want to negotiate with the supplier to cancel, delay, or reduce an order that has not shipped.

Item 7 Quantity Proposed

- Item 7 should show the total quantity of new supplies that you will propose to suppliers.
- If enough shipments are proposed (item 7) to meet the Quantity Needed (item 6), there is no supply shortfall. Leave item 8 blank.

Item 8 Surplus (+) or Shortfall (-)

The supply shortfall is the amount below the desired EOYS after all possible supplies are proposed.

Add item 6 and item 7; enter the result in item 8. If the quantity needed is greater than the quantity proposed, then item 8 is a negative number:

$$\text{Item 8} = \text{Item 6} + \text{Item 7}$$

If the supply shortfall identified in item 8 threatens contraceptive security, notify donors, program managers, and CSL.

Step 8. Complete CPT annex, page 1.

The CPT annex, page 1, provides details and explanations for the figures shown on the CPT. Each CPT submitted must include this information. The CPT annex form offers limited space for recording this information. If more space is needed, include a memo with the CPT.

Complete the *Country, Program, Contraceptive, Prepared by, and Prepared date* lines on each CPT.

Documentation of CPT Figures

Item 1 Beginning of Year Stock

- List the facilities visited.
- Clearly explain what inventory data, from which levels, are included in the totals; how current and accurate the data appear to be; and what methodology was used (if any) to adjust for missing data.

Item 2 Received/Expected

- List all contraceptives received or expected (items 2a and 2b). State the supplier, quantity, receipt date (or estimated/scheduled receipt date), and any identifying information about the shipment (for example, order number). For transfers into the program, note the origin of the transfer in the supplier column.

Item 3 Estimated Dispensed

- Clearly state the assumptions and methodology used to calculate the figures, as well as data sources used (for example, service statistics, logistics data, and prevalence data).

Loss/Disposal: If any loss or disposal is noted in the CPT, specify the source of these data.

Transfers/Adjustments: If transfers or adjustments are noted in the CPT, specify the destination of transfers out of the program or the reason for the adjustment.

CPT Annex, Page 1: Documentation of CPT Figures

Country:

Prepared by:

Program:

Prepared date:

Contraceptive:

1. Beginning of Year Stock:

Where figures are estimated, explain basis for calculation. Show source of information.

2. Received/Expected:

List shipments received and any expected future shipments as shown in lines 2a and 2b. Also include any transfers in or positive adjustments as shown in 2c. If USAID shipments, include DeLPHi RO number. Do not include ordered shipments that you proposed to change.

Supplier	Quantity	Receipt Date	RO Number

3. Estimated Dispensed:

Specify basis for consumption estimates and forecasts. Explain any substantial variations in year-to-year consumption figures. Provide source of information for any loss, disposal, transfer out, or adjustment: items 3b and 3c.

Requirements Estimation

Step 9. Determine quantities needed in CY2010 and CY2011.

If there is a Quantity Needed in CY2010, CY2011, and/or CY2012 (line 6 of the CPT), propose and order additional contraceptives to maintain an adequately stocked pipeline. If there is no Quantity Needed in CY2010 and CY2011, skip step 10.

Step 10. Propose new supply for CY2010 and CY2011.

A proposed shipping schedule includes any shipment that host country suppliers and donors will be asked to supply and are expected to deliver to the program in CY2010 and CY2011. Proposed shipments represent commitments above and beyond the shipments included in item 2 (Received/Expected).

- Determining an appropriate shipping schedule for the Quantity Proposed (6) depends on general considerations:
 - total length of the contraceptive pipeline
 - seasonal variations
 - storage capacity at all levels
 - time required for clearance procedures
 - any supplier-specific or port-specific constraints on shipment size or frequency.
- In general, a program manager must balance the time and money required to clear shipments with the cost of maintaining stock in the warehouse.
- The proposed shipping schedule suggests the ideal times and quantities for products to arrive.
- If you cannot identify enough proposed new supply to meet the Quantity Needed, at best the program risks having a smaller security buffer in its contraceptive pipeline than is desirable; at worst the program risks stocking out. Inform senior program managers and appropriate donor representatives about all possible shortfalls as soon as possible.

Step 11. Estimate quantity needed for CY2012.

USAID procedures do not require you to order shipments for CY2012, but you must determine the quantity each donor or supplier is expected to supply to meet the Quantity Proposed for CY2012.

In your planning with donors or suppliers, consider the following:

- If you know a supplier is limited in the amount of a product they can supply in CY2012, determine the amount (for example, UNFPA, 50,000).
- If the program is in a phaseover plan, and the responsibility for meeting the required quantity will gradually shift from one donor or supplier to another, determine the quantity each will provide.

Step 12. Complete CPT annex, page 2.

Complete the *Country*, *Program*, *Contraceptive*, *Prepared by*, and *Prepared date* lines on each CPT.

Fill in the tables.

Item 1 Cancel the following previously ordered shipments.

If shipments should be canceled (see step 5), record those shipments in the table. Transfer this information to the order email.

Note: A change in consumption data may show stock at the end of the year above the desired stock level. To avoid overstocking, you may be able to delay or cancel a scheduled shipment. It is important to include in the order email any existing shipments that need to be delayed or canceled.

Item 2 Change the following previously ordered shipments.

If shipment quantity or ship dates should be changed (see step 5), record those shipments in the table. Transfer this information to the order email.

Item 3 Order the following proposed shipments.

If additional shipments are required to meet any quantity needed in CY2010 and CY2011 (see step 10), record those shipments in the table. Transfer this information to the order email.

Item 4 Enter expected amounts to be supplied in CY2012.

Enter projected quantities by supplier (see step 11).

CPT Annex, Page 2: Proposed Supply

USAID shipments on this page need to be included in the order e-mail to CSL

Country: _____

Prepared by: _____

Program: _____

Prepared date: _____

Contraceptive: _____

1. **Cancel** the following previously ordered shipments:

Supplier	Quantity	Scheduled Receipt Date	Shipment ID

2. **Change** the following previously ordered shipments:

Supplier	Previous Quantity	Proposed Quantity	Previous Receipt Date	Proposed Receipt Date	Shipment ID

3. **Order** the following proposed shipments for CY2010 and CY2011:

Supplier	Quantity	Receipt Date

4. **Enter** expected amounts to be supplied in CY2012:

Supplier	Quantity

CPT CRITERIA: FOR PRODUCT CATALOG

CRITERIA FOR CPT QUALITY EVALUATION

COMPLETE?

-
1. The methodology and data used to prepare the forecast (demographic, dispensed-to-user, issues) are described, including the rationale behind which data were ultimately chosen for the forecast.

 2. The forecast is validated using at least one other method of estimation; the secondary method used for validation is described, or if no validation is performed, the rationale is given.

 3. An explanation is given for any change in the forecast compared to trends in the historical data over the previous 6 months or at the time of the last CPT.

 4. Forecasts are prepared for all USAID recipients and contraceptive products in the country, and ideally, for all contraceptives in the country (including non-USAID products and recipients).

 5. Sources of data for historical consumption (based on issues, dispensed-to-user, or | service statistics) are documented.

 6. Sources of data for beginning stock balances are documented.

 7. An explanation is given for each loss or adjustment to stock levels in historical data.

 8. The supply plan is prepared for two years beyond the submission date of the CPT. The submission date of the CPT is the date it is submitted to the USAID Mission in-country.

 9. The rationale behind the max, min, and desired end of year stock (DEOYS), and considerations for determining these levels (including storage capacity) is described.

 10. Shipments are appropriately planned to ensure consistent supplies for each product (supplies do not fall below minimum or rise above maximum stock levels).

 11. Constraints in preparing the CPTs according to these criteria are documented.

 12. The first screen of each PipeLine database resulting from the CPT should contain complete contact information for the person managing the database.
OR
The headers of the manually prepared CPT (e.g., country, program, contraceptive, etc.) are complete for each product.

 13. Documentation describes the presentation of the supply plan to stakeholders, suppliers, and/or donors in-country.

 14. Documentation identifies which suppliers have been presented shipments proposed in the plan, if any have agreed to the supply plan, and where gaps in supply remain.

 15. Stock issues (overstock, shortage, or stockouts) identified for future years of the supply plan are documented and have been highlighted for suppliers.

 16. Documentation shows to whom at USAID the supply plan was submitted and the date on which it was submitted.

 17. The CPT and all its documentation are submitted to the USAID | DELIVER PROJECT within one month of completion.

 18. USAID shipments are scheduled in DelPHi on the correct dates and for the approved quantities recommended in the supply plan.
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