

Task 1: Daily Clinic Inventory Micro-Audit

STEP 1 — Identify High-Risk Medicines

Objective:

To focus daily inventory checks only on medicines most likely to cause entry errors and stock mismatches.

Selection Criteria:

- Medicines with high daily sales volume
- Medicines entered manually with multiple name variations
- Medicines where small quantity errors can go unnoticed

Medicine	Why this medicine is high-risk in this clinic
Dolo 650	Sold daily, entered with multiple name variants (e.g., Dolo, Dolo 650, Dolo kind), high chance of typing or quantity errors
Azithromycin 500	Abbreviated differently in sales entries, manual entry causes mismatch

Action Taken:

- Only these medicines will be included in daily micro-audits.
- Other medicines are excluded to reduce audit load.

Time Required:

30 minutes (one-time setup)

STEP 2: Daily Name-Variation Check

Objective:

To detect inconsistent or new medicine name entries in daily sales that can cause inventory mismatch.

Daily Check Process:

- From the Sales Register, filter entries for the selected high-risk medicines.
- List all distinct medicine names entered for each high-risk medicine on that day.
- Compare these names with the approved master medicine name.

Flag Rule:

- If any new or inconsistent name variant appears, flag it for review.

Action Taken:

- Inform billing staff of the correct medicine name.
- No stock correction or escalation on the same day.

Time Required:

5 minutes per day

STEP 3: Daily Usage Reasonableness Check**Objective:**

To identify possible sales-entry or inventory errors by checking whether daily medicine usage is reasonable based on existing inventory records.

Daily Check Process:

- For each selected high-risk medicine, use the provided table values:
 - Opening Stock
 - Purchases
 - Sales
 - Closing Stock
- Calculate the expected closing stock using:
Opening Stock + Purchases – Sales
- Compare this expected value with the actual Closing Stock already recorded.

Flag Rule:

- If the difference between expected and actual closing stock exceeds a small tolerance ($\pm 2\%$), flag the medicine for review.

Action Taken:

- Recheck sales entries for the flagged medicine.
- Verify if any sales were missed or wrongly entered.
- Record the issue; no immediate correction unless deviation is significant.

Time Required:

5 minutes per day

STEP 4: Randomized Bill Spot Check**Objective:**

To detect billing entry errors and discourage careless sales entries without increasing staff workload.

Daily Check Process:

- Randomly select 2–3 bills from the day’s sales records.
- Verify the medicine names and quantities against the sales register entries.

Flag Rule:

- If a mismatch is found between the bill and the sales entry, flag it for review.

Action Taken:

- Inform the billing staff of the error.
- Correct the entry if required.
- Record the error for pattern tracking.

Time Required:

5 minutes per day

STEP 5: Weekly Error Pattern Tracking

Objective:

To identify repeated inventory and billing errors that indicate process or training issues rather than one-time mistakes.

Weekly Review Process:

- Review all flagged issues from daily checks (name variations, usage mismatches, bill errors).
- Group errors by medicine name and error type.
- Identify errors that repeat multiple times during the week.

Flag Rule:

- If the same error occurs **3 or more times in a week**, mark it as a recurring issue.

Action Taken:

- Discuss recurring issues with the billing or inventory staff.
- Reinforce correct SOPs or clarify naming rules.
- Escalate to the doctor only if errors persist after correction.

Time Required:

Approx 20 minutes per week

STEP 6: Doctor Escalation Rules

Objective:

To involve the doctor only when necessary, while protecting their time from routine operational issues.

Escalation Criteria:

- Repeated inventory or billing errors for the same medicine despite staff correction.
- Large or unexplained stock mismatches affecting patient billing or availability.
- Patterns indicating potential misuse or serious process failure.

Non-Escalation Rules:

- One-time or minor discrepancies.
- Issues already corrected at the staff level.
- Name-variation issues without stock impact.

Action Taken:

- Share a brief summary of the issue with the doctor.
- Recommend a simple corrective action if required.
- Update SOPs only if the issue repeats.

Time Required:

Minimal doctor involvement

Daily Checklist (Runs Every Day)

- Review selected high-risk medicines
- Check for new name variations in sales entries
- Perform usage reasonableness check using opening, purchases, sales, and closing stock
- Conduct random spot check of 2–3 bills
- Log any flagged issues

Weekly Checklist

- Review all flagged issues from the week
- Identify repeated name-variation or billing errors
- Discuss recurring issues with staff
- Escalate to doctor only if errors persist or are significant

Sample Tables**Sample: Name Variation Log**

Date	Master Name	Entered Name	Issue Flagged
12-Jun	Dolo 650	Dolo kind	Yes

Sample: Usage Reasonableness Check

Medicine	Opening	Purchases	Total Sales	Expected Closing	Actual Closing
Dolo 650	1000	500	30	1470	1440
Azithromycin 500	300	200	10	490	480

Clear Action Rules

- One-time or minor issue → record only
- Repeated issue (3+ times/week) → staff correction
- Significant mismatch → immediate review
- Doctor escalation → only for repeated or high-impact issues