**DRAFT
QUALITY ASSURANCE
SURVEILLANCE PLAN
(QASP)**

FOR

**Supply/Warehousing
Services**

**In Support of
NATIONAL INSTITUTE OF HEALTH**

**RFP #
263-04-P(BC)-0013**

19 July 2004

(This QASP is for reference purposes only)

Table of Contents

1 INTRODUCTION

This Quality Assurance Surveillance Plan (QASP) is designed for 263-04-P(BC)-0013, National Institute of Health, Supply/Warehousing Services. This section presents the principles associated with award surveillance. The term award is used in lieu of the term 'contract' since the ACO comparison could result in the award of a contract, ISSA, or government staffed MEO. Section 2 presents the collection plans for each award requirement. Section 3 discusses staffing and training of QASP personnel and key award changes

The QASP was developed to comply with the Federal Acquisition Regulation (FAR), Subpart 37.6 - Performance Based Contracting. 37.602-2 Quality Assurance, states agencies shall develop quality assurance surveillance plans when acquiring services. These plans shall recognize the responsibility of the contractor to carry out its quality obligations and shall contain measurable inspection and acceptance criteria corresponding to the performance standards contained in the statement of work. The QASP shall focus on the level of performance required by the statement of work, rather than the methodology used by the contractor to achieve that level of performance.

The QASP will be used as a government document to enforce the inspection and acceptance clauses of the PWS.

1.1 PURPOSE

This QASP specifically corresponds to the RFP Section C, Performance Work Statement (PWS). That document discusses the requirements and standards of performance of the award. The NIH environment has been considered in developing the QASP. The following are specific considerations:

- The NIH operating budget continues to be reduced

- Productivity improvements are paramount

- Each Division and its customers have their own specific requirements for support and may emphasize requirements in different priorities

- QASP provides the surveillance plan necessary to ensure performance

- Compliance with the FAR

The objective of this QASP is to evaluate SP performance across requirements relative to performance standards. All activities included in Section C-5 are grouped into major categories of effort that lead to effective provision of support services. For this reason, the primary interest of the NIH is acceptability of the service and/or final product provided by the SP, rather than the detailed operations procedures utilized to provide the service. The QASP will be utilized to obtain knowledge necessary for the contracting officer to negotiate equitable adjustments in the flow of monetary compensation when it becomes necessary for the Government to accept performance shortfalls from contractually established quality standards.

The SP is responsible for a Quality Control (QC) plan to meet the detailed quality and timeliness standards in Section C-5 of the RFP. The Government is responsible for a

Quality Assurance (QA) plan to measure compliance with overall final standards. The Government's intent is to use QA to ensure the effectiveness of QC.

Note: *Quality Assurance (QA) versus Quality Control (QC)*
QA and QC are frequently confused and mistakenly used interchangeably. They refer to distinctly different actions performed by different organizations. QA involves those actions taken by the government to inspect goods or services to determine whether they meet the requirements of the PWS. QA is performed by the Government's Quality Assurance Evaluator (QAE). QC refers to actions taken by a contractor or the MEO to control their production of goods or services so that they will meet the requirements of the PWS. QC is performed by the contractor's management team or by the supervisors in the MEO.

1.2 TERMS

The following terms and acronyms are provided to facilitate understanding of this QASP.

Acceptable Quality Level (AQL): The maximum percentage of products or services that may be defective (do not meet performance standards) in a lot of SP deliverables for that lot to be considered satisfactory. Specification of an AQL does not allow the SP to knowingly provide defective service; instead, it is recognition of the fact that defective performance may sometimes occur unintentionally. As long as the percentage of defective performance does not exceed the specified AQL, the Government will not deduct for poor performance. However, the SP shall be required to re-perform or correct the defective service or product at no additional cost to the Government.

Service Provider (SP): Successful bidding activity on the NIH RFP. Also includes the employees of the SP who are performing services under the award. This bidding activity could be Government employees, ISSA, or contractor(s).

SP Discrepancy Report (SPDR): This report is the official form for documenting unsatisfactory performance for resolution by the SP.

Quality Assurance (QA): The functions and associated actions performed by the Government to ensure that award requirements are performed in accordance with specified standards, and that an appropriate level of SP quality control activities are in place.

Quality Assurance Surveillance Plan (QASP): A written document that specifies the techniques and procedures the Government will utilize to perform quality assurance inspection and acceptance of SP products and/or services.

Quality Control (QC): Those internal SP management functions that include, but are not limited to, training, documented procedures, inspections, and tests (taken at the point of performance) necessary to ensure that SP products and/or services conform to PWS requirements, specifications, and standards.

Surveillance Positions: The Government will utilize the following positions to perform award management and surveillance:

- **Contracting Officer (CO)** The CO will have ultimate authority for award management in accordance with the FAR.

- **Administrative Contracting Officer (ACO)** Upon award, the CO is referred to as ACO. This term is used throughout this QASP. The ACO has the rights and responsibilities under the FAR assigned to the CO.

- **Contracting Officer's Technical Representative/Project Officer (COTR/PO)** The primary technically oriented representative assigned to monitor total SP performance and interact with the Government personnel and provide technical coordination, as required, with Government organizations.

- **Quality Assurance Evaluator (QAE)** The specific on-site Government representative(s) delegated authority for the day-to-day managerial and technical interaction with the SP personnel. The assignment may be made on an office or functional basis.

1.3 QASP PRINCIPLES

The service provider activity is responsible for QC (inspection at the time of performance.) The receiving activity is responsible for QA (inspection of the delivered product and/or service.) The Acceptance and Inspection clause in the award allows the Government to implement quality assurance procedures. Other award clauses require the SP to implement a quality control plan.

The QASP documents a program undertaken by the Government to provide a measure of the quality and timeliness of products and services purchased from the SP. The Government, as recipient of the products and services provided by the SP, is responsible for developing and implementing methods for quality assurance. IAW the FAR, 37.503 Agency-head responsibilities, (d), strategies are developed and necessary staff training is initiated to ensure effective implementation of the policies in 37.102. This implementation is usually done through the QASP by a COTR/PO and other designated personnel.   Implementation of the program assists in providing assurance that the quantity and quality of products and services received comply with contract requirements. It will accomplish this process by:

> **A.   Providing Government Quality Assurance Evaluators with a guide to systematically and effectively monitor a SP's work performance.**
>
> *Because this plan is to be used as a tool by the Government, the Government at any time as necessary can modify it. In essence, the Government's surveillance effort might need to be increased or decreased throughout the contract performance period and the Government has the inherent right to do so.*

> **B.**   **Outlining the corrective procedures to be taken for deficient performance.**
>
> > *In the case of a contract award, these measures may result in any of the following: the issuance of discrepancy reports requiring corrective action responses, the taking of deductions from payments in fixed-price contracts, or the submission of recommendations to the contracting officer about the nature and significance of any performance shortfalls.*
>
> **C.**   **Providing a means whereby the Government supervisors can evaluate the SP's work performance standards.**

The QASP focuses on the quality of the products and/or services received from the SP rather than on the procedures used to provide them. The QASP details the following:

- The methods for surveillance of each award requirement

- The evaluation procedures to be used for each surveillance method

- The approaches for implementation of the QASP

There is a separate QA approach specified for each required product and/or service. The approaches are step-by-step procedures explaining performance and documentation of the evaluation processes, analysis of evaluation results, and determination of satisfactory or unsatisfactory SP performance.

1.4 SURVEILLANCE METHODS

The following performance monitoring methods can be applied individually or in combination. Table A-6 contains method, frequency, and documentation requirements for each surveillance method contained herein.

1.4.1 DIRECT OBSERVATION (DO)

Observation of direct services and/or products is used to survey the requirements. Observations can be performed periodically or through 100% surveillance. The observations are documented in a Surveillance Log.

1.4.2 MANAGEMENT INFORMATION SYSTEMS (MIS)

This method evaluates outputs of an award requirement through the use of management information reports. When using SP generated reports, this method is best for general surveillance, and may need to be supplemented by periodic inspections. MIS reports can assist all other methods. The key is to recognize that the SP generates many available reports. In a worst-case scenario, SP provided reports might be modified to conceal problems. The QAE can accept the reports at face value, but use other methods to investigate problem areas. MIS analysis may be documented in Surveillance Logs or Reports. The Surveillance Log is used when additional surveillance efforts are required based upon the MIS data. A Surveillance Report is appropriate to document the result of MIS analysis.

1.4.3 PERIODIC INSPECTION (PI)

This method uses a comprehensive evaluation of selected outputs. This is applicable to interim outputs, whose quality is also measured in final outputs. The inspections may be scheduled (Daily, Weekly, Monthly, Quarterly, or Annually) or unscheduled (as required). Periodic inspections may be documented using a Tally Checklist.

1.4.4 USER SURVEY

This method combines elements of validated user complaints and random sampling. A random survey is conducted to solicit user satisfaction. This is appropriate for high quantity activities that have historically been satisfactory. This method may also generate periodic and 100% inspections. The QAE will receive the survey responses. They should be reviewed initially to identify negative responses. SP provided tabulated reports should be reviewed for trends and general issues. The survey results may be documented in a Surveillance Report. The use of performance critiques (as in training courses) is included in this method.

1.4.5 VALIDATED USER/CUSTOMER COMPLAINTS (VU/CC)

This method relies on the user of the service and/or product to identify deficiencies. The complaints are then investigated and validated by the QAE. This is highly applicable to services provided in quantity and where quality is highly subjective. *It is assumed that the user complaints will generate many of the unscheduled periodic inspections.* Even the best surveillance plan will not allow the COTR/PO, and designated personnel, to check all aspects of the SP's performance. Although seldom used to reject a service and not appropriate for deduction of money from the SP, validated user complaints are a means of documenting certain kinds of service problems.

The manner of obtaining and documenting user complaints needs to be carefully planned by the QAE. Once established, the user complaint program and procedures should be presented to every organization receiving such service. Operating instructions should be given to each organization outlining the user complaint program, the format and the content of a validated user complain, and the actions, which can be expected from those, assigned to monitor and manage the award. Users familiar with award requirements will notify the QAE when there is a case of poor performance or nonperformance.

Upon notification, the QAE fills out a User Complaint Record (UCR) and then conducts an inspection to validate or invalidate the complaint. **A sample UCR is located in Attachment A-4**. A user complaint cannot be used to satisfy a random observance or 100% inspection requirement. However, it can be used as further evidence of unsatisfactory performance, if periodic or 100% inspection shows that the specific service is unsatisfactory. These complaints can be used to decide if action should be taken other than requiring rework.

1.4.6 100% INSPECTION

This method evaluates all outputs of the award requirement. This is most applicable to small quantity, but highly important products and/or services. 100% inspections may be documented using a Tally Checklist.

1.4.7 PERIODIC SAMPLING (PS)

This method is also a variation of random sampling. However, the sample is only taken in times when a deficiency is suspected. This method is a good follow-up to MIS analysis. The sample results are applicable only for the specific work inspected. Since the sample is not entirely random, it **cannot** be applied to total activity performance.

1.4.8 RANDOM SAMPLING (RS)

This method is designed to evaluate the outputs of the award requirement by randomly selecting and inspecting a statistically significant sample. This is highly recommended for large quantity, repetitive activities with objective and measurable quality attributes.

The monthly random sampling guides are used to record information on observations and defects. **A sample Tally Checklist is located in Attachment A-1.** The details of any defects (defects or discrepancies, hereinafter referred to as defects) discovered during the sampling process are recorded on the checklist. The COTR/PO informs the SP's Program Director, in person, when defects occur and asks the Program Director (or designated SP representative) to correct the problem. A notation is made on the tally checklist of the date and time the deficiency was discovered. The Program Director or SP representative must initial the entry on the checklist. Tally checklists are to be assembled, summarized, and forwarded to the ACO as required. If the SP is responsible for exceeding the AQL as indicated in the sampling guide, the ACO issues a Service Provider Discrepancy Report (SPDR) to the SP. **A sample SPDR is located in Attachment A-5**. If the failure is considered serious, the SPDR is issued at the time of unsatisfactory performance rather than at the end of the month. When completed and signed, the SPDR, along with the random sampling checklist, becomes the documentation supporting payment, nonpayment, or other actions.

1.5 NORMAL INSPECTION

To determine the sample size for a given service and/or product, use Table B-2. Determine the lot size to survey, and choose the sample size from the 'Normal Sample Size' column. **Note:** Use the 'Small Sample Size' column only if there are a limited number of QAEs, or if the cost of inspection makes Normal Inspection cost prohibitive.

Once the sample size has been determined, all the items designated in a lot must be numbered beginning with one through the total of all items in the lot. Once all items in a lot are numbered, the actual sample must be selected. Table B-1 presents an example of a random number table, which can be used by the COTR/PO in developing random samples. The random numbers in this table are arranged in groups of five numbers (i.e., 58651, 25480, etc.) To use the table, begin by picking at random a group of numbers on any page on the table. This can be done by a process as simple as closing the eyes and pointing with a pencil or finger to some initial group of numbers.

The use of variety in the random number table ensures that detectable patterns do not occur. In addition to starting at different points and alternating the patterns used, the use of the first significant digits and last significant digits of the selected numbers will also provide variety. Success in the use of the tables requires consistency and variety. **A further explanation on the usage of the random number table is included in Attachment B.**

Once the total number of random numbers is selected, the numbered items in the lot which match the selected random number table numbers must be inspected. Based upon the fixed AQL, the sample size, and the inspection of the sampled items, the COTR/PO should assess whether or not the SP has equaled or exceeded the AQL based on the prescribed sample size. SP performance or non-performance must be documented by the COTR/PO on the sampling guide tally checklist for each inspection. This documentation should be assembled monthly and forwarded to the ACO.

If the SP has equaled or exceeded the AQL, performance is considered unsatisfactory and the ACO should prepare a SPDR. The sample selection and analysis may begin during or after the performance period being surveyed. Caution must be exercised to ensure that sample results are applied to the correct performance period in which the work was produced.

1.5.1 REDUCED INSPECTION

When a SP's QC program works, good performance results. If the result of COTR/PO surveillance shows consistently good performance, the amount of the surveillance can be decreased for services surveyed by random sampling.

Reduced inspection can be used when conditions, set by the COTR/PO, are met for a sampling guide. The following is an example of conditions that may be adjusted to fit the goals of NIH:

- The preceding four lots, i.e., last four performance periods, have been acceptable

- The number of defects in each of the preceding four lots is less than one-half of the acceptable number. For example, with an AQL of 10% and a sample size of 50, the acceptance number is five. If two or less defects were found in each of the last four lots, reduced inspection could be used

- The normal sample size is being used

- The ACO agrees to use reduced inspection

Reduced inspection decreases the sample size used to evaluate SP performance. To implement the required changes to the existing sampling guide for reduced inspection; the following procedures should be initiated:

- Using the reduced lot size, find the new sampling size using Table B-2

- Apply the AQL in the Surveillance Plan to the new reduced sample size identified in Table B-2. If the AQL is met, continue using Reduced Inspection.

When reduced inspection is in effect, return to normal inspection the next performance period under the following conditions:

- When the number of defects exceeds the AQL under reduced sampling, or

- The ACO deems it necessary to return to normal inspection.

If during the first month normal sampling has been resumed, the number of defects found is again less than 50% of the reject level, a return to reduced inspection may be used the next month. If the number of defects found is over 50% of the reject level, then normal sampling must be performed until four months of less than 50% of the reject level defects are found.

1.6 DOCUMENTATION REQUIREMENTS

Accurate and thorough surveillance documentation is required for an effective and auditable QASP. Easy to use and complete documents are required, and the management and surveillance team must be disciplined in filling out the required documents. The inspection and acceptance of contractor provided products and services cannot be based upon opinion and anecdotal evidence. Completeness, currency and accuracy are required to document both satisfactory and unsatisfactory performance.

The following are the primary general documents required by this QASP. Section 1.6 and Chapter 2 discuses the implementation of these documents. The following discussion includes generic documents.

Surveillance Reports – A sample Surveillance Report can be found in Attachment A-2. The report is used for surveillance methods that are scheduled and completed in a continual process. As shown, the report is summary in nature, under the assumption that most surveillance is satisfactory. However, the results and compliance blocks may be used to document unsatisfactory performance. The blocks are completed in the following manner:

SURVEILLANCE REPORT FOR	Enter Activity Title
Award Requirement	To be inserted from the PWS
Award Reference	Insert the paragraph reference from the PWS
Method of Surveillance	Based on the Collection Matrix, including frequency
AQL	The AQL % from the PWS
Lot Size	The lot size per period
Date(s) Accomplished	Insert the date or dates when the surveillance is performed
Surveillance Results	Insert the results that document satisfactory and unsatisfactory performance. Include any additional comments that may impact the

	efficiency and effectiveness of performance by either the Government or the SP
Compliance	Enter YES or NO
Rationale	Optional for compliance, mandatory for non-compliance
Preparer	Name, title, and date

Surveillance Logs – A sample Surveillance Log can be found in Attachment A-3.
This log is valid for primary surveillance methods that are based on response to observed or reported issues. The logs are used when the surveillance may be conducted as needed, or over an extended period of time. The blocks are completed in the following manner:

SURVEILLANCE LOG FOR	Enter Activity Title
Initiating Action	Enter the surveillance schedule, observation, analysis, or user complaint that generated the need for the surveillance. As applicable, reference the use complaint record or other documentation
Award Requirement	To be inserted from the PWS
Award Reference	Insert the paragraph reference from the PWS
Method of Surveillance	Based on the QASP, including frequency
AQL and Lot size	The AQL % and the lot size per period
Date(s) Accomplished	Insert the date or dates when the surveillance is performed. It is common for a log to have multiple dates.
Surveillance Results	Insert the results that document satisfactory and unsatisfactory performance. Include any additional comments that may impact the efficiency and effectiveness of performance by either the Government or the SP. It is common for a log to be used to document required changes in Government direction or procedures that affect the award performance.
Compliance	Enter YES or NO
Rationale	Optional for compliance, mandatory for non-compliance
Preparer	Name, title, and date

User Complaint Record (UCR) – A sample UCR can be found in Attachment A-4.
The Government Representative or the originating party may fill out the record.

The complaint record should be of sufficient detail to allow a complete investigation that may be documented in a surveillance log. When appropriate, the record should be maintained with the log. A UCR should include the following information:

USER COMPLAINT RECORD FOR	Enter Activity Title
Date	XX/XX/XX
Time	XX:XX
Received by	Enter name of Government Representative
Source	Name of individual, title and organization, office location, and phone number
Nature of Complaint	Describe the situation and events. Include all information, including Government and SP actions
Award Requirement	Enter the PWS requirement
Award Reference	Insert the PWS reference
Log Reference	Reference the surveillance log used to document the investigation
SP Informed	Date, time, person informed, title, and phone number
Action taken by the SP	Document any response or action reported by the SP or attach any documentation provided by the SP
Preparer	Name, title, and date

If the COTR/PO determines that the complaint is valid, the COTR/PO will be required to enter his/her signature, the date, and the time on the UCR. The re-performance period (if applicable) shall commence as though the deficiency was discovered through a scheduled inspection. If the number of user complaints exceeds the AQL, a discrepancy report must also be prepared.

Quality can be subjective. The COTR/PO needs to carefully evaluate the complaint to guard against unfair user opinions. The evaluations can possibly identify areas where users need to give more complete guidance to the SP.

Service Provider Discrepancy Reports (SPDR) – A sample SPDR can be found in Attachment A-5. This report is the official form for documenting unsatisfactory performance for resolution by the SP. This form emphasizes that the goal of the QASP is **not** to build files leading to termination. The goal of the QASP is to assist the SP to provide effective and efficient performance in accordance with the award requirements.

The appropriate Government representative fills in the discrepancy information. In most cases, the QAE will provide this information, and the COTR/PO will provide the SP's Program Director (or designated representative) with the verbal and written notification.

The SP's Project Director shall approve the SP's response and sign the appropriate line. The response shall include corrective actions at the designated location and all other locations, actions to prevent recurrence, and QC procedures to be used or modified.

The COTR/PO shall evaluate the response and recommend the Government action to the ACO. The ACO will approve the required action (if any) and complete the form, with signatures. The SP will then be provided with the original form and a file copy. The original shall be signed by the SP's Project Director and returned to the ACO.

SP DISCREPANCY REPORT FOR	Enter Activity Title
To	Enter the Service Provider and manager's name
From	Enter the name of the QAE
Discrepancy or Problem	Describe in detail, include date and time, and award requirement
Signature of Government Representative	ACO signature
SP Response	The SP's response shall be documented on the form or attached to the form, and be signed and dated by the SP's Project Director
Government Evaluation	List acceptance, partial acceptance, or rejection, and provide rationale
Government Action	List action, if any
Close Out	Ensure all blocks are complete prior to closing and filing the SPDR

1.7 Performance Management Plan (PMP) – A sample found below. This document is modeled from the Balanced Scorecard, which defines what management means by "performance" and measures whether management is achieving desired results. The Balanced Scorecard translates Mission and Vision Statements into a comprehensive set of objectives and performance measures that can be quantified and appraised. These measures typically include the following categories of performance:

- Financial performance (revenues, earnings, return on capital, cash flow);

- Customer value performance (market share, customer satisfaction measures, customer loyalty);

- Internal business process performance (productivity rates, quality measures, timeliness);

- Innovation performance (percent of revenue from new products, employee suggestions, rate of improvement index);

- Employee performance (morale, knowledge, turnover, use of best demonstrated practices).

The appropriate Government representative fills in the PMP form.

The SP's Project Director shall review the PMP and collected data on a monthly basis. The PMP will serve as part of the Continuous Improvement and Total Quality Management Initiatives.

The COTR shall evaluate the response and recommend the Government action to the CA. The CA will approve the required initiatives to ensure product and service quality.

Performance Management Plan (PMP)

Division Approval/Date:	Associate Director Approval/Date:

Service Group

Insert Service Group or Function Name Here

Discrete Services

DS1: Insert Discrete Services here

DS2:

DS3:

Value Proposition

Insert Value Proposition Here

Service Strategy

☐ Operational Excellence		☐ Growth	
☑ Customer Intima·		☐ Sustain	
☐ Product Leadersh		☐ Harvest	

Strategy Description

Insert Strategy Description Here

Team Leader

Insert Name (s) Here

Team Members

Insert Name (s) Here

Date: Date of Revision

Date: Date of Revision

	Objective	Measure	FY 03 Target	FY04 Target	FY05 Target	Initiative	Owner
Customer	Insert Obejctives Here	Insert Items According to Heading Here					
Internal Business	Insert Obejctives Here	Insert Items According to Heading Here					
Learning and Growth	Insert Obejctives Here	Insert Items According to Heading Here					
Financial	Insert Obejctives Here	Insert Items According to Heading Here					

1.8 IMPLEMENTATION

The QASP implementation is based upon careful planning and targeted use. These goals are met through scheduling, documenting, modifying, and implementing the QASP.

Surveillance Schedules – Surveillance schedules should be developed or modified on a monthly basis. The QAEs and the COTR/PO develop a monthly inspection schedule for activities based on the surveillance plan's requirements. The monthly schedule should be completed by the last workday of the preceding month. The monthly inspection schedule is developed by identifying the required tasks. Items to be inspected during the month are to be incorporated into the schedule and noted in such a manner as to clearly indicate what the representative is monitoring. Time to validate user complaint items should also be incorporated into the inspection schedule to the extent possible. The primary scheduling requirements are tracking surveillance as it occurs and scheduling surveillance, as it is required.

During the course of the award, the appropriate representative must retain a copy of all inspection schedules. The COTR/PO must maintain the SPDRs, UCRs, surveillance activity checklists for 100% inspected items, and surveillance checklists for MIS reported information. At the end of the award period, the COTR/PO will forward these records to the ACO for inclusion in the award file.

If the specific service is judged to be unsatisfactory during an inspection, the documentation supporting the award deficiency report is to be forwarded to the COTR/PO within five (5) working days after the inspection. The COTR/PO will notify the ACO upon receipt of the report. When the output is based on a SP developed procedure, the procedures themselves are only analyzed when the Government considers the level of service unsatisfactory. When this is the case, the COTR/PO must determine whether the unsatisfactory performance is the fault of the Government or the SP.

When the Government has caused the SP to perform in an unsatisfactory manner, no action is required of the SP and the discrepancies are not counted against the SP's performance. Rather, the COTR/PO must prepare a letter addressed to the responsible Governmental organization requesting that corrective action be taken. This letter is sent to the organization through the ACO. When unsatisfactory performance is the SP's fault, the SP is informed of the deficient performance and requested to take corrective action. If further progress on improving performance is not made, the Government reserves the right to terminate the award.

Documentation – Section 1.5 presented the required documentation and the previous paragraphs discussed the schedule. The following are the key elements concerning documentation in the implementation of the QASP:

- The forms may appear to present a formal and bureaucratic front to the QASP. However, just the opposite is true. The forms are intended to allow a more informal and surveillance-as-required approach. The formality of the form is not the critical issue. The ability to consistently document surveillance is the important point to the forms. Surveillance of the award requirements is subjective in nature to some degree. Therefore, consistent documentation allows for the evaluator to build more objectivity into the process.

- SP performance must be documented to provide a legal basis to take action. Informal or anecdotal evidence cannot be used to reward the SP or to initiate corrective actions.

- It is equally important to document both satisfactory and unsatisfactory performance. Documentation of satisfactory performance assists in documenting that the award is properly implemented and executed. It also assists in identifying SP approaches that are working, when unsatisfactory performance is documented for the same requirement at a different location. *It is anticipated that the vast majority of surveillance will result in documenting satisfactory performance.*

- The documentation does not require complex writing. Simple and clear sentences are preferred. The key is to be complete. Some documents may be reviewed months later. The discussions should always allow for complete understanding based solely on the form.

- The forms are set up as one page. However, they may be extended to as many pages as required. Formatting is easier when using the computer files retained by the COTR/PO.

Modification – the Government can modify The QASP unilaterally. Such modifications are not subject to the modification clause in the award and cannot be grounds for increasing the cost of the award. The QASP represents the Government's acceptance and inspection program for the award requirements.

Note: Award Modifications refer to changes in the QASP requirements, as reflected in the PWS. Award Modifications do not refer to monthly adjustments in surveillance schedules by individual QAEs or other representatives.

The COTR/PO will present all recommended QASP modifications to the ACO for approval. The COTR/PO may provide QASP modifications to the SP for information only. The COTR/PO will be responsible for distributing all QASP modification to the QAEs.

It is anticipated that all components will use the same QASP. The QAE is responsible for identifying to the COTR/PO any specific modifications required for just their functional area.

It is anticipated that many recommended modifications will be provided by the QAEs. They will be in a unique situation to test the QASP and recommend improvements. The COTR/PO may be the primary input for modifications to the management reports and the MIS analysis.

Discussed further in Chapter 2, it is anticipated that the QASP will be most stringently followed during the initial months of the award. As all parties become more familiar with the requirements and the operational environment, surveillance tends to become less formal and more directed to the most critical problems. QASPs are routinely modified as the award progresses to reflect these changes.

Note:

This QASP is written prior to award. As such, many variables remain unknown, such as:

- Will there be any critical changes in the requirements or governing directives and laws?
- Will there be any major reorganization that could affect the award?

Any and/or all of these variables may affect the need to modify the QASP.

2. COLLECTION PLAN

This chapter presents the collection matrix for each requirement in the PWS

2.1   COLLECTION MATRIX

The collection matrix provides a consistent approach to tracking performance in terms of quantity and quality. The standards of timeliness listed in the PWS shall be used to support the quality standards in the collection matrix.   When it is suspected that the timeliness standards are not being met, then the QAE shall document performance utilizing the appropriate surveillance.

This QASP is designed for all award surveillance and management issues. The collection matrix is specifically designed to achieve the following goals:

- Consistency with the primary mission of NIH

- Emphasis on the identification of satisfactory performance and rapid resolution of problems

- Reliance on the QAEs to assist in prevention of unsatisfactory performance through timely surveillance and direct communication with the appropriate award personnel

- Reliance on the COTR/PO in review of management reports to spot general and broad issues for rapid resolution

- Research of the Government's role in any performance problems and take rapid action to correct problems and assist in total program performance

The activity-specific collection plans conclude with the following discussion of the surveillance plan, phase-in requirements, and activity specific Surveillance Plan and Surveillance Schedule.

2.2   SURVEILLANCE PLAN

The Surveillance Plan in Attachment C-1 displays the recommended surveillance method by functional area for each output to be measured, utilizing the procedures discussed in Section 1. The primary considerations for the choice of surveillance method are the limited resources available for surveillance, and the diversity of services and unique users. Therefore, the collection plan is based upon the following:

- The plan is stringent and comprehensive. This level of surveillance is best suited for the beginning of the award, when new award employees begin performance, and during periods of prolonged unsatisfactory performance.

- The plan is designed to encourage surveillance as required as soon as the SP has demonstrated satisfactory performance over four (4) performance periods. Thereby, the limited resources can be targeted to the most critical issues. In this approach, the periodic surveillance methods are implemented only when

problems are suspected or on a less frequent basis. The more stringent approach is returned to whenever the environment dictates (new employees, changed procedures, new information system, etc.) or when unsatisfactory performance is observed more than once in a performance period at a specific location for a specific service.

NOTE: *IN NO WAY DOES REDUCED SURVEILLANCE IMPLY ACCEPTANCE OF UNSATISFACTORY PERFORMANCE. REDUCED SURVEILLANCE IS ONLY RECOGNITION OF SATISFACTORY PERFORMANCE OVER TIME. THE SP MUST COMPLY WITH AWARD REQUIREMENTS REGARDLESS OF THE GOVERNMENT'S SURVEILLANCE METHODS.*

This emphasis on consistent, but targeted, surveillance allows each QAE to comply with the general QASP principles, but be flexible to the functional-specific requirements and available resources.

2.3   PHASE-IN-REQUIREMENTS

As mentioned above, and throughout this document, the phase-in period is of critical concern to proper implementation of the QASP. This is to assist in the following:

- The SP providing the required quality and quantity of services from the very beginning of the award

- The Government testing the QASP and personnel assignments, and modifying as necessary

- The Government identifying issues and problems in its own processes and operations that affect award performance

It is anticipated that the phase-in period will include numerous issues related to the new award requirements and this QASP. These issues will require more continued involvement of higher-level Government personnel during the phase-in period. The Government is responsible for providing a transition plan to the SP prior to the phase-in period. The Government will also provide an orientation of the QASP and how it is applied to the QC. The SP is responsible for assumption of requirements, within stated quality and quantity standards, in accordance with the transition plan. The goal of the phase-in surveillance is to assist in the proper assumption of the requirements. A fine balance is required between insuring required performance and assisting a smooth initiation of duties.

2.4 SURVEILLANCE PLAN MATRIX EXPLANATION

Surveillance methods can be applied individually or in combination to the requirements where performance is measurable, the requirement headings are highlighted. The measurable requirements are in the white rows.

		Note 2	Note 3	Note 4	Note 2	Note 3	Note 5								
RFP # *(Note 1)*	**Requirement**	**Quality Standard**	**AQL**	**Lot**	**Timeliness Standard**	**AQL**	**Max**	**Surveillance Method**							
								DO	**MIS**	**PI**	**US**	**VU CC**	**100 %**	**PS**	**RS**
5.1 Gaither Distribution Center															
5.1.3	GDC – Storage (Physical Inventory Control)														
5.1.3.1	Conduct cycle counts of material in storage	Correctly perform cycle counts, accurately verify item counts and locations. Results are entered into RIMS.	10%	#of cycle counts monthly	Cycle counts are completed within 1 WD of assignment	5%	2 WD								

Notes
- (1) The **RFP#** corresponds to the RFP# of the PWS.
- (2) Standards of performance are measures of **quality** and **timeliness**. **Quality standards** measure performance level.
- (3) Acceptable Quality Level **(AQL)** is the maximum acceptable deviation from standard, expressed in terms of a percentage of a lot.
- (4) **Lot** identifies units of output, i.e., the number of times a service is performed during a specified period of time.
- (5) **Max** reflects the maximum amount of deviation, expressed in time, permitted to deviate from the **timeliness standard**. This is the "Not to exceed value".

2.5   SURVEILLANCE SCHEDULE

Once the award has been made, the government representative will review the SP's Quality Control Plan for completeness and thoroughness. The Government representative will then devise a surveillance schedule to include the following key elements:

- The surveillance schedule is initially designed for the normal inspection required.

- The scheduled surveillance is balanced throughout the month and between the days according to days of the week and anticipated workload.

- The schedule is month specific, and incorporates surveillance requirements with longer cycles.

- There is room in the schedule for other surveillance, as required. This may be generated from scheduled surveillance of from user complaints. These surveys would be reflected in the schedule as they are planned, or as they occur.

- Surveillance of complaints are not scheduled, but are tracked as they are received.

The schedule is the baseline documentation to reflect the surveillance activity. As discussed in Section 1.5, a complete and current schedule assists in avoiding criticism of the Surveillance Plan. (See Surveillance Schedule Attachment C-2)

3. ISSUES

3.1   TIMING OF QASP DEVELOPMENT

OMB policy requires that the QASP be developed prior to award, sufficient enough to be subjected to the Independent Review. QA experts will contend that the best QASPs are developed after the award, and be based on a review of the SP's Quality Control processes. This is particularly true in an A-76 competition involving best value evaluations. *This QASP is a living document*. The Government reserves the right to change the surveillance method and frequency based on SP performance. This QASP should be modified once the final best value terms and SP processes are known, after the award decision.

3.2   TRAINING

It is anticipated that very little training funds will be available for QASP implementation. Therefore, the COTR/PO will need to provide informal training to customers who may initiate complaints. Formal training should be provided to individuals that serve as QAEs. The ACO and/or COTR/PO may provide this.

3.3   KEY AWARD CHANGES

The following are the primary changes between the new award and the current activities:

- The current activities are based upon effort, not performance

- There are few processes where the performers are held accountable for the results

- The current QA and QC programs are more informal than called for in the PWS and QASP

- It is anticipated that the SP will be selected based upon significant process improvements

It is anticipated that these changes will result in both more work and less work: more work, as a result from a change to a more structured QA environment; and less work, as a result of anticipated improvements in initial services and the formal surveillance information that will be available to quickly identify issues before they become problems.

ATTACHMENT A

Sample Forms

The attached sample forms will be helpful to Government Representatives in implementing and tracking the QASP.

The Government reserves the right to modify the forms as required.

A-1 TALLY CHECKLIST

TALLY CHECKLIST							MONTH OF
OBSERVATION	TYPE OF	DATE					
NUMBER	SERVICE	REC'D	DEL'D	INSPT'D	S1	O2*	REMARKS

S1: Satisfactory
O2*: Other than satisfactory (requires SP initials)

A-2   SURVEILLANCE REPORT

<table>
<tr><td colspan="4" style="text-align:center">SURVEILLANCE REPORT FOR

_____</td></tr>
<tr><td colspan="2">AWARD REQUIREMENT:</td><td colspan="2">AWARD REFERENCE:</td></tr>
<tr><td colspan="2">METHOD OF SURVEILLANCE:</td><td>AQL:</td><td>LOT:</td></tr>
<tr><td colspan="4">DATE (S) ACCOMPLISHED:</td></tr>
<tr><td colspan="4">SURVEILLANCE RESULTS:</td></tr>
<tr><td>COMPLIANCE:</td><td colspan="3">RATIONALE:</td></tr>
<tr><td colspan="4">PREPARER:</td></tr>
<tr><td>NAME:</td><td colspan="2">DATE:</td><td>TITLE:</td></tr>
</table>

A-3 SURVEILLANCE LOG

SURVEILLANCE LOG FOR:			
INITIATING ACTION:			
AWARD REQUIREMENT:			AWARD REFERENCE:
METHOD OF SURVEILLANCE:	AQL:	LOT:	
DATE (S) ACCOMPLISHED:		SURVEILLANCE RESULTS:	
COMPLIANCE:	RATIONALE:		
PREPARER:	NAME:	DATE:	TITLE:
SURVEILLANCE LOG FOR:			
INITIATING ACTION:			
AWARD REQUIREMENT:			AWARD REFERENCE:
METHOD OF SURVEILLANCE:	AQL:	LOT:	
DATE (S) ACCOMPLISHED:		SURVEILLANCE RESULTS:	
COMPLIANCE:	RATIONALE:		
PREPARER:	NAME:	DATE:	TITLE:

A-4 USER COMPLAINT RECORD

USER COMPLAINT RECORD FOR:		
DATE/TIME:	RECEIVED BY:	
SOURCE OF COMPLAINT: (Include Name, Organization, and phone number		
NATURE OF COMPLAINT:		
AWARD REQUIREMENT:		
AWARD REFERENCE:	LOG REFERENCE:	
SP INFORMED		
NAME:	TITLE:	
DATE:	TIME:	PHONE:
ACTION		
ACTION TAKEN BY THE SP:		
PREPARER		
NAME:	TITLE:	DATE:

A-5   SERVICE PROVIDER DISCREPANCY REPORT

SERVICE PROVIDER DISCREPANCY REPORT (SPDR)			
TO: (SP and manager name)		FROM: (Name of QAE)	
DATES			
PREPARED	ORAL NOTIFICATION	RETURNED BY SP	ACTION COMPLETE
DISCREPANCY OR PROBLEM (Describe in detail. Include reference in PWS. Attach continuation sheet if necessary			
SIGNATURE OF GOVERNMENT REPRESENTATIVE			
TO: (Government Representative)		FROM: (SP)	
SERVICE PROVIDER'S RESPONSE AS TO CAUSE, CORRECTIVE ACTION, AND ACTIONS NECESSARY TO PREVENT RECURRENCE. (Cite applicable QC program procedures) Attach continuation sheet(s) as necessary			
SIGNATURE OF SP			DATE
GOVERNMENT EVALUATION (Acceptance, partial acceptance, rejection. Attach continuation sheet(s) as necessary)			
GOVERNMENT ACTIONS			
CLOSE OUT			
	NAME AND TITLE	SIGNATURE	DATE
SP NOTIFIED			

A-6   SURVEILLANCE METHOD TABLE

Surveillance Method	Frequency	Documentation
Direct Observation (DO)	As required	Surveillance Log
Management Information System (MIS)	As required	Surveillance Log: additional surveillance efforts
	As required	Surveillance Report: result of MIS analysis
Periodic Inspection (PI)	Set by QAE	Tally Checklist
100% Inspection	Set by QAE	Tally Checklist
Validated User/Customer Complaint	As required	UCR
User Survey	As required	Surveillance Report
Periodic Sampling	Set by QAE	Tally Checklist
Random Sampling	Set by QAE	Tally Checklist
	As required	SPDR: if AQL exceeded

ATTACHMENT B

Random Number Tables

The random number table is a list of random one digit numbers (from 0 to 9, inclusive) that have been grouped into sets of 5 digits and divided into groups of 10 rows.

Note: *the row letter is NOT part of the table.*

Each entry in the table is equally likely to be one of the values from 0 to 9; each pair of digits in the table is equally likely to be one of the values from 00 to 99; each triplet in the table is equally likely to be one of the values 000 to 999; and so on.

Suppose that you wanted to randomly select 10 survey units from a population that contains 500 units.

- Label the survey units from 1 to 500.

- Enter the table at an arbitrary row and position in the row, and pick off successive three (3) digit groups. Each three-digit group will select one of the experimental units. Ignore 000, and 501-999; these numbers fall out of the sequence of the population. For example, suppose that you enter the table at row VV. The random digits are:

46499 94631 17985 09369 19009 51848 58794 48921 22845 55264

When this line is grouped into three-digit numbers, the result is:

46499 **946**31 **179**85 **093**69 **190**09 **518**48 **587**94 **489**21 **228**45 **552**64

It is critical to keep a consistent pattern when selecting the three digit groups from the random numbers. You may choose the first three, the last three, or the middle three digits. In this instance, the pattern is to pick the first three digits from each number.

It is also important to be consistent with the direction that you move within the random number table to maintain a valid distribution. If you choose to go from left to right across the rows or up and down the columns this must remain consistent during the whole process.

And so, the three-digit groups from this line are:

464 946 179 093 190 518 587 489 228 552

The first 10 distinct three-digit groups that are between 001 and 500 (inclusive) are used to select the units for the survey. From the above example, units 464, 179, 093, 190, 489 and 228 would be selected to sample. Additional row(s) would be necessary to complete the example of 10 survey units.

Note: *Additional rows might be needed to complete your survey, dependent upon the sample size.*

B-1 TABLE OF UNIFORM RANDOM NUMBERS

Row	Uniform Random Numbers									
A	57245	39666	18545	50534	57654	25519	35477	71309	12212	98911
B	42726	58321	59267	72742	53968	63679	54095	56563	09820	86291
C	82768	32694	62828	19097	09877	32093	23518	08654	64815	19894
D	97742	58918	33317	34192	06286	39824	74264	01941	95810	26247
E	48332	38634	20510	09198	56256	04431	22753	20944	95319	29515
F	26700	40484	28341	25428	08806	98858	04816	16317	94928	05512
G	66156	16407	57395	86230	47495	13908	97015	58225	82255	01956
H	64062	10061	01923	29260	32771	71002	58132	58646	69089	63694
I	24713	95591	26970	37647	26282	89759	69034	55281	64853	50837
J	90417	18344	22436	77006	87841	94322	45526	38145	86554	42733
K	78886	86557	11295	07253	29289	44814	58898	36929	66839	81250
L	39681	54696	38482	48217	73598	93649	92705	34912	18981	74299
M	38265	45196	31143	82190	27279	79883	20219	38823	84543	22119
N	34270	41885	00079	63600	59152	10670	27951	77830	05368	58315
O	73869	34748	75787	88844	89522	71436	04166	06246	20952	56808
P	21732	36017	69149	70330	90500	73110	92908	55789	73450	68282
Q	72583	49811	67519	98476	97889	37112	94963	91140	24571	23446
R	72678	49483	57039	18420	74773	16869	72077	27720	14058	66743
S	88572	01294	14117	56884	77107	53023	02243	26415	52233	12818
T	82868	59988	42323	96542	96733	00056	74887	21914	48300	96404
U	09949	56572	28104	64281	01217	76250	39511	19059	85172	35273
V	41942	91440	81609	38147	59406	88491	18079	29786	81499	85390
W	46777	74928	91290	55022	56629	01335	61379	71134	86187	70717
X	58280	17867	07990	85055	55279	83390	37598	93350	05666	55402
Y	87042	55080	76185	19947	79551	77594	87381	99430	44251	30896
Z	72183	39856	94385	55160	50680	68443	95437	74302	06204	71004
AA	76768	16066	94109	90685	92058	81744	99133	36354	34292	90092
BB	21703	64616	03431	47610	31968	61593	36259	70600	53491	95542
CC	78269	12087	32204	81177	30333	83630	06026	89308	94179	54907
DD	49285	16579	22109	63651	34778	28631	27285	95751	91704	59819
EE	90016	10303	81862	41351	88681	76632	15336	91955	38436	43892
FF	63651	93677	08027	80384	71134	79937	23322	10577	21413	86688

Row	Uniform Random Numbers									
GG	02780	37186	74076	33376	03782	64199	77333	12812	78027	89926
HH	49414	09022	38644	53038	34634	36565	01984	88477	83879	60943
II	53861	74046	04778	08365	83104	79004	88335	54047	99675	41864
JJ	78677	55123	73447	00158	61482	02808	83475	59932	19044	27318
KK	74550	84403	56850	83780	88847	65591	03859	58670	60057	25225
LL	22866	64152	35023	35701	98228	53388	82321	34392	09589	97340
MM	17601	32926	06120	27626	48687	42885	25858	53920	95764	84716
NN	20862	64222	96951	19524	15866	52508	03763	98033	87268	71167
OO	71490	83428	78903	81931	24345	37331	03971	38118	01065	36010
PP	21050	12825	28217	99510	86900	09987	91244	06520	81108	87266
QQ	91632	96199	54191	77480	33049	00849	96668	65865	25164	98330
RR	46988	84607	55711	43874	26532	76307	38846	55961	83227	16069
SS	72200	24023	55848	09162	44976	15663	34697	83365	82930	63392
TT	88621	25822	78463	72191	00625	85945	72522	29613	46473	51177
UU	15384	03326	32091	20199	70046	64343	20566	79050	43837	15831
VV	46499	94631	17985	09369	19009	51848	58794	48921	22845	55264
WW	13520	96795	79714	66338	79836	44430	89290	06167	69090	29476
XX	24323	00280	73922	43447	00319	92899	75411	91840	39594	17621
YY	99090	55543	87734	80685	74261	70848	87196	59085	28471	74971
ZZ	97585	33311	68919	33189	49987	24081	79404	45363	46920	94760
A1	97622	85282	58594	83977	25002	39124	58350	67845	17771	58031
B2	24260	21646	75111	41560	90082	57613	93807	04060	94811	60124
C3	65250	83876	34806	08796	53719	94310	94363	55289	81226	18190
D4	45817	37470	73508	84200	73933	80187	26207	69917	58064	95000
E5	48898	28088	77723	81458	18981	35389	17199	85718	18019	66290
F6	23900	87304	91349	27541	42047	23002	47976	99586	96453	06861
G7	38635	66539	55139	56894	01608	05068	21910	41858	15382	98701
H8	58095	49005	59108	12315	35856	19651	55545	79711	42424	67008
I9	76474	40345	47744	45224	42903	86698	09851	87819	81523	34272
J10	03535	70021	61645	84268	65636	94414	06266	12237	43147	16894
K11	14364	82782	07176	53522	06834	46016	42758	04753	00023	15300
L12	91751	29817	90578	31800	13393	35965	41128	92983	61660	50106
M13	56151	59329	22926	66357	41724	68645	04327	27543	18723	11957
N14	57881	15295	43246	47103	15977	84216	78875	06677	77219	50803
O15	36126	70899	51669	79958	93311	62555	70694	16626	35623	18758
P16	73389	33283	66929	73444	31434	10263	16868	74346	84838	82770
Q17	77383	40683	84063	45412	21358	84024	88935	77583	33522	53090

Row	Uniform Random Numbers									
R18	62798	96248	60474	36149	21187	23194	03696	74445	54525	12869
S19	12283	00561	29955	05775	34520	47217	26059	35414	65998	49766
T20	78433	49762	41177	80949	32843	64714	40450	15064	11389	78409
U21	26348	29480	65497	34615	12888	19977	17597	25914	36394	79315
V22	26078	36705	83043	61592	12459	61255	40550	59892	66163	97848
W23	40115	70829	00654	12791	85668	19015	82785	92889	35041	18949
X24	81560	62666	77627	09123	63484	49481	60451	88073	71000	63511
Y25	34074	51484	59356	20301	22365	95862	46995	26284	45273	35706
Z26	42176	81350	05941	09754	16987	98248	90319	33116	39120	34765
AA1	63288	62381	58461	13225	57138	19619	30877	82640	24888	02600
BB2	88820	33240	78977	98928	41160	29671	33299	95592	38493	05321
CC3	63532	20433	25690	09557	90207	95808	57383	68622	13359	25371
DD4	39033	68857	74705	91718	77485	32496	30737	28551	69056	95615
EE5	46964	90715	01804	14953	97658	71613	90353	78189	03195	73795
FF6	03528	92683	29740	31679	22941	92131	69021	21325	70930	19548
GG7	67027	36641	74347	54500	80074	94364	10164	99309	66272	24925
HH8	65462	73352	17392	09552	74361	46123	13020	63169	98318	91666
II9	55797	95254	84279	88885	65569	96791	66118	05817	17867	88254
JJ10	58697	56009	20438	06653	93978	51961	97609	97367	02795	04718
KK11	97876	76551	19215	87623	55326	85282	86292	18328	55016	84126
LL12	72443	02607	13183	06156	76680	62398	79369	77374	78292	41027
MM13	96152	80526	62087	12197	59252	68312	39759	63535	23675	47358
NN14	10277	64926	33378	48335	35488	47577	85954	97588	75873	31350
OO15	77557	25011	86663	97410	99845	42709	48407	63841	14727	00484
PP16	68784	85951	54232	30976	48666	15927	73072	00907	76237	56914
QQ17	67778	30262	16944	36130	77604	34923	92336	66565	94490	68039
RR18	94104	06985	81837	53674	36266	21688	68769	18492	12242	34164
SS19	70107	17900	53497	71908	18186	59909	00400	53236	23016	70860
TT20	07847	64852	37719	68837	60757	92158	80433	17687	08916	01706
UU21	33167	35411	27473	13393	17714	59680	30888	98213	93364	03219
VV22	84527	88986	01665	23547	74666	25487	34977	59681	38520	57293

B-2   TABLE OF INSPECTION SAMPLE SIZES

Lot Size	Normal Inspection Sample Size	Reduced Inspection Sample Size	Small Sample Size
2-8	2	2	2
9-15	3	2	2
16-25	5	2	3
26-50	8	3	5
51-90	13	5	5
91-150	20	8	8
151-280	32	13	13
281-500	50	20	13
501-1,200	80	32	20
1,201-3,200	125	50	32
3,201-10,000	200	80	32
10,001-35,000	315	125	50
35,001-150,000	500	200	80
150,001-500,000	800	315	80
500,001-Over	1250	500	125

ATTACHMENT C

QASP Report

RFP#	Requirement	Quality Standard	AQL	Lot	Timeliness Standard	AQL	MAX	Primary
5.1.1.1	Generate Requests for Quotes (RFQs) and verify price reasonableness for RFQ over $2500.	RFQs, via written or verbal request, are generated accurately and fairly distributed amongst qualified vendors. Prices evaluated and the best fair and reasonable price selected.	5%	# of RFQs over $2,500 generated monthly	Within 2 WD of receipt of replenishment	5%	Within 5 WD of receipt of replenishment	RS
5.1.1.2	Review vendor bids/quotes and make recommendations for procurement.	Bids/quotes are reviewed, analyzed and procurement recommendations are forwarded to PA.	10%	# of bids/quotes received monthly	Review within 1 WD of RFP closing date	10%	Review within 2 WD of RFP closing date	RS
5.1.1.3	Generate Federal Supply Schedule (FSS) and verify price reasonableness	FSS requisitions over $1000 are generated completely, accurately, and costs analyzed to to get the best fair and reasonable price.	5%	# of FSS requisitions over $1,000.	Within 2 WD of receipt of requisition	5%	Within 3 WD of receipt of requisition	RS
5.1.1.4	Generate purchase orders or records of call to procure stock items from vendors.	POs, open market & FSS, are generated and submitted to purchasing agent error free	2%	# of POs monthly	Within 5 WD of receiving routine replenishment	2%	Within 7 WD of receiving routine replenishment	RS
		ROCs are generated and submitted to purchasing agent error free	30%	# of ROCs monthly	Within 5 WD of receiving routine replenishment	30%	Within 7 WD of receiving routine replenishment	RS
		Emergency POs are generated and submitted to purchasing agent error free	2%	# of emergency orders monthly	Within 1 WD of receiving emergency replenishment	2%	Within 3 WD of receipt of receiving emergency replenishment	RS

RFP#	Requirement	Quality Standard	AQL	Lot	Timeliness Standard	AQL	MAX	Primary
5.1.1.5	Generate FEDStrip orders to procure stock items from GSA.	FEDStrip orders are generated and submitted error free	3%	# of FEDStrip orders monthly	Within 5 WD of receipt of routine replenishment	3%	Within 7 WD of receipt of routine replenishment	RS
5.1.1.6	Enter orders into ADB.	All orders are accurately entered into and reflected in ADB.	5%	# of line items ordered monthly	Within 5 WD of receipt of routine replenishment	5%	Within 7 WD of receipt of routine replenishment	RS
5.1.1.7	Update stock item prices in ADB according to price lists received from vendors.	Prices in ADB are accurate and up- to-date	5%	# of line item price changes annually	Updates are made within 2 WD of receipt of new price list.	5%	Updates are made within 3 WD of receipt of new price	RS
5.1.1.8	Investigate and rectify all RODs, through coordinating with vendors.	Discrepancies investigated to determine problem, cause, viable solution, discrepancies are rectified and results forwarded to Project Officer	6%	# of RODs monthly	Within 3 WD of receipt of ROD	6%	Within 5 WD of receipt of ROD	RS
5.1.2.1.1	Schedule incoming deliveries.	Incoming deliveries scheduled to maximize utilization of warehouse personnel and minimize vehicle time at delivery dock	5%	# of deliveries scheduled monthly	Within 1 WD prior to delivery	15%	Within 4 hours prior to delivery	RS
5.1.2.1.2	Check deliveries in, verifying PO numbers.	Deliveries properly checked in. Materials checked for visible damages, leakages or safety deficiencies. PO #'s verified and entered into RIMS	10%	# of deliveries received monthly	Within 1 hour of delivery receipt	5%	Within 2 hours of delivery receipt	RS
5.1.2.1.3	Unload material and place in assigned staging lanes.	Material properly unloaded and placed in assigned lanes. Materials are checked for visible damages, leakages or safety deficiencies	10%	# of general items unloaded and staged weekly	Within 1 hour of delivery receipt	10%	Within 2 hours of delivery receipt	RS

RFP#	Requirement	Quality Standard	AQL	Lot	Timeliness Standard	AQL	MAX	Primary
5.1.2.1.3	Unload material and place in assigned staging lanes	AFB received, processed and staged IAW NIH procedures. Materials are checked for visible damages, leakages or safety deficiencies	10%	# of AFB items unloaded and staged weekly	Within 1 hour of delivery receipt	10%	Within 2 hours of delivery receipt	RS
	.	Chemicals/ Hazardous material items unloaded and staged. Materials checked for visible damages, leakages or safety deficiencies	10%	# of Chemical/ Hazardous items unloaded and staged weekly	Within 1 hour of delivery receipt	10%	Within 2 hours of delivery receipt	RS
5.1.2.1.4	Store material in locations assigned through RIMS.	Items are properly and safely stored in locations assigned by ADB	15%	# of AFB items unloaded weekly	Within 1 hour of delivery receipt	10%	Within 2 hours of delivery receipt	RS
		AFB is properly and safely stored in locations assigned by RIMS	10%	# of general items stored weekly	Within 1 hour of delivery receipt	10%	Within 2 hours of delivery receipt	RS
		Chemical/ Hazardous material is properly and safely stored in locations assigned by RIMS	10%	# of Chemical/ Hazardous items unloaded and staged weekly	Within 1 hour of delivery receipt	10%	Within 2 hours of delivery receipt	RS
5.1.2.2.1	Receive, process and maintain local purchase orders.	POs are correctly processed, quality and quantity verified against documentation. POs are correctly filed and maintained.	10%	# of POs processed monthly	Within 1 hour of delivery receipt	10%	Within 2 hours of delivery receipt	RS

RFP#	Requirement	Quality Standard	AQL	Lot	Timeliness Standard	AQL	MAX	Primary
5.1.2.2.2	Post receipts of material in database.	Required fields for receipts accurately posted & verified in RIMS & ADB.	10%	# of receipts posted monthly	Within 1 hour of delivery receipt	3%	Within 2 hour of delivery receipt	RS
5.1.2.2.3	Correct all RIMS system exceptions and violations of incoming Purchase Order requisitions.	Exceptions and violations are verified and required corrections posted to RIMS	20%	# of corrections made annually	Within 1 hour of receipt of PO	5%	Within 2 hours of receipt of PO	RS
5.1.2.2.4	Identify all concealed damages, shortages and overages within containers on SF 364 (Report of Discrepancy).	All damages, shortages and overages correctly identified, and documented and notification sent to PA.	20%	# of RODs established monthly	Within 1 hour of delivery receipt	7%	Within 2 hours of delivery receipt	RS
5.1.2.3.1	Perform denial research if requisitioned stock order specifications, approved by ADB, to satisfy the requirement are not met.	Research performed to document shortage and resolve discrepancy	10%	# of unsatisfied lines investigated	Within 4 hours of discrepancy identification	5%	Within 1 WD of discrepancy identification	RS
5.1.3.1	Conduct cycle counts of material in storage.	Correctly perform Cycle counts, accurately verify item counts and locations. Results are entered into RIMS	10%	# of cycle counts monthly	Cycle counts are completed within 1 WD of	5%	Cycle counts are completed within 2 WD of assignment	MIS
5.1.3.2	Identify and document damage or deterioration of materials.	All damaged material properly identified, documented, and disposition resolved.	20%	# of reports generated monthly	Within 1 WD of cycle count	10%	Within 2 WD of cycle count	RS
5.1.3.3	Rewarehouse material from one location to another within the GDC.	Warehouse space is appropriately maximized with correct material in assigned location	8%	# of items rewarehoused monthly	Material is rewarehoused within 1 WD of RIMS notification	10%	Material is rewarehoused within 2 WD of RIMS notification	MIS

RFP#	Requirement	Quality Standard	AQL	Lot	Timeliness Standard	AQL	MAX	Primary
5.1.3.4	Perform special inspections of AFB and chemical storage areas.	All AFB and chemical storage areas inspected for proper and safe storage as required by local AFB and chemical/ hazardous material storage procedures	3%	# of special inspections semi-annually	Within 3 days of notification	3%	Within 5 days of notification	RS
5.1.4.1.1	Select required materials and forward them to packing/shipping area.	Correct materials selected and forwarded to packing/shipping area	1%	# of items picked weekly	Within 4 hours of receipt of requisition	10%	Within 1 WD of receipt of requisition	RS
5.1.4.1.2	Prepare materials for shipping.	General materials are properly packed for shipment	1%	# of general line items prepared weekly	Within 4 hours of receipt of requisition	10%	Within 1 WD of receipt of requisition	RS
		AFB materials are properly packed for shipment	1%	# of AFB line items prepared weekly	Within 4 hours of receipt of requisition	10%	Within 1 WD of receipt of requisition	RS
		Chemical/Hazardous materials are properly packed for shipment	1%	# of chemical/ hazardous line items prepared weekly	Within 4 hours of receipt of requisition	10%	Within 1 WD of receipt of requisition	RS
5.1.4.1.3	Perform manual allocation of material for priority walk-through.	Requested material is correctly picked, processed and packaged for pick-up.	10%	# of manual allocations performed annually	Within 1 hour of receipt of requisition	20%	Within 2 hours of receipt of requisition	RS
5.1.4.2.1	Plan and schedule deliveries.	Deliveries planned and scheduled to meet customer requirements	10%	# of deliveries scheduled monthly	Within 4 hours of receipt of requisition	10%	Within 1 WD of receipt of requisition	RS

RFP#	Requirement	Quality Standard	AQL	Lot	Timeliness Standard	AQL	MAX	Primary
5.1.4.2.2	Deliver materials to all assigned locations.	General materials delivered to correct locations, in an undamaged condition, with proper documentation. Signature received for each delivery	5%	# of general material pallets delivered weekly	Within 4 hours of receipt of requisition	10%	Within 1 WD of receipt of requisition	RS
		AFB material is delivered to correct locations, with proper documentation. Signature received for each delivery	5%	# of AFB material pallets delivered weekly	Within 1 hours of receipt of requisition	10%	Within 2 hours of receipt of delivery receipt	RS
		Chemicals/Hazardous material is delivered to correct locations with proper documentation. Signature received for each delivery	5%	# of Chemicals/ Hazardous material pallets delivered weekly.	Within 1 hours of receipt of requisition	10%	Within 2 hours of receipt of delivery receipt	RS
5.1.4.2.3	Pickup returns.	Correct materials are validated, collected and returned to the receiving area, with proper documentation	5%	# of line items returned monthly	Within 4 hours of notification	10%	Within 1 WD of notification	RS
5.1.5.1.1	Make recommendations on continuation of contracts based on vendor performance	Contract thoroughly reviewed for vendor compliancy and factual recommendations made	13%	# of active contracts reviewed annually	Within 7 WD after receipt of invoice	13%	Within 14 WD after receipt of invoice	RS
5.1.5.1.2	Determine suitability of stock trial items.	Usage requirements for stock items adequately reviewed and determination made	10%	# of stock items analyzed quarterly	Items are rejected or accepted to the inventory within one month of trial	5%	Items are rejected or accepted to the inventory within 2 months of trial	RS

RFP#	Requirement	Quality Standard	AQL	Lot	Timeliness Standard	AQL	MAX	Primary
5.1.5.1.3	Recommend adjustments to reorder points and safety levels for stock items and make adjustments to the ADB, after approval	Stock items are correctly reordered and maintained above the safety level and adjustments are reflected in the main inventory system.	2%	# of stock items which reach a ROP monthly	Ordering criteria is changed within 2 WD of change in customer demand/trend	2%	Within 3 WD of change in customer demand/trend	reordered RS
5.1.5.1.4	Enter pending quantity in ADB to requisition/replenish stock, and provide supporting documentation to the Purchasing Agent.	Stock items are correctly reordered on a timely basis to retain stock levels above the safety level.	2%	# of stock line items ordered monthly	Within 2 WD of stock reaching ROP	2%	Within 4 WD of stock reaching ROP	RS
		ADB accurately updated	2%	# of stock line items ordered monthly	Within 2 WD of stock reaching ROP	2%	Within 4 WD of stock reaching ROP	RS
		Completed Documentation is provided to the purchasing agent.	2%	# of stock line items ordered monthly	Within 2 WD of stock reaching ROP	2%	Within 4 WD of stock reaching ROP	RS
5.1.5.1.5	Identify and make recommendations on removal of dead stock	Stock items identified as dead stock are removed from warehouse location, NIH catalog, master item list, ADB & RIMS	20%	# of items removed quarterly	Dead stock items are identified monthly and removed within 60 WD of identification	15%	Dead stock items are removed within 90 WD of	RS
5.1.5.1.6	Assist with annual inventory of freezer and refrigerator stock	Semi-annual inventory of freezer and refrigerator stock is complete and accurate.	5%	# of freezer and refrigerator stock line items inventoried semi-annually	Reconcile and adjust inventory within 5 WD of annual inventory	8%	Reconcile and adjust inventory within 10 WD of annual inventory	RS
5.1.5.1.7	Request stock physical inventory in order to resolve discrepancies between ADB and RIMS.	Inventory discrepancies correctly resolved and documentation provided to Project Officer	6%	# of line items with out-of-balance inventories monthly	Adjustments made to stock inventory within 1 WD of identification	6%	Adjustments made to stock inventory within 2 WD of identification	MIS

RFP#	Requirement	Quality Standard	AQL	Lot	Timeliness Standard	AQL	MAX	Primary
5.1.5.1.8	Respond to customer feedback product evaluations and make recommendations for courses of action	Products accurately evaluated for vendor compliance with product specs	3%	# of spot check product evaluations conducted monthly	Conduct evaluation within 1 WD of request	3%	Conduct evaluation within 3 WD of ROD request	RS
5.1.5.1.9	Establish new items in the Central Stockroom Program and enter required inventory control data in the database	Item specs are accurately reflected in the database and item folder established with complete and accurate information.	5%	# of new items added monthly	New items added to the Central Stockroom Program and ADB within 2 WD of receipt.	5%	New items added to the Central Stockroom Program and ADB within 4 WD of receipt.	RS
5.1.5.1.10	Generate messages for NIH Central Stockroom customers and submit them to CIT to be posted on the Delpro message board.	messages are correct, clear, timely and concise	10%	# of emergency messages annually	Within 2 hours of emergency order receipt	10%	Within 3 hours of emergency order receipt	100%
		Emergency messages are correct, clear, timely and concise	20%	# of messages annually	Within 10 WD prior to event	20%	Within 5 WD prior to event	100%
5.1.5.2.1	Conduct customer surveys designed to improve products maintained in inventory	Customer surveys conducted, complaints accurately resolved, and suggestions forwarded to Project Officer for approval	5%	# of surveys conducted monthly	100 surveys are conducted within 30 WD	2%	100 surveys are conducted within 45 WD	RS
5.1.5.2.2	Receive customer phone calls and investigate complaints and suggestions pertaining to the Central Stockroom	Complaints and suggestions are documented, investigated and resolved to customers satisfaction	5%	# of calls received monthly	Complaints resolved within 3 WD of receipt	5%	Complaints resolved within 5 WD of receipt	US
5.1.5.2.3	Coordinate product/vendor shows at NIH facilities.	Product shows professionally set-up to allow the customers to view the latest products available	5%	# of product/vendor shows annually	Shows are conducted bi-monthly	20%	Shows are conducted quarterly	RS

RFP#	Requirement	Quality Standard	AQL	Lot	Timeliness Standard	AQL	MAX	Primary
5.1.5.2.4	Participate in product shows on and off the NIH Campus.	Products are professionally displayed to potential customers and display booth is manned at all times.	5%	# of product shows participated in annually	Shows participated in quarterly	20%	Shows participated in semi-annually	RS
5.1.5.2.5	Submit updates for the Central Stockroom website to the webmaster.	Accurate updates are submitted to the website	10%	# of updates to website semi-annually	Website updates submitted within 2 WD of changes to Central Stockroom	10%	Website updates submitted within 5 WD of changes to Central Stockroom Program	RS
5.1.5.2.6	Design/redesign and distribute flyers promoting Central Stockroom stock.	Flyers are up-to-date, generated correctly and approved for distribution by Project Officer	5%	# of flyers designed/redesigned annually	Within 10 WD prior to event/show	3%	Within 5 WD prior to event/show	100%
5.1.5.2.7	Establish and delete GDC delivery codes	Delivery codes are entered accurately and completely to identify the current IC information for delivery points	5%	# of delivery codes established/deleted monthly	Revisions to delivery codes shall be entered within 1 hr after receipt	5%	Revisions to delivery codes are make within 1 WD of receipt	PS
5.1.5.2.8	Maintain customer call log and provide report to Project Officer	Log reflects all incoming calls accurately and completely and report identifies each call and resolution of enquiry	10%	# of customer calls logged monthly	Customer calls resolved to customer satisfaction within 10 WD of logged call	10%	Customer calls resolved to customer satisfaction within 5 WD of logged call	RS
5.1.5.3.1	Categorize all new stock items and assign local NSNs.	Local NSNs, with correct federal stock class, assigned to all stock items.	1%	# of NSNs assigned annually	Within 4 days of stock item being approved for inclusion in the Central	2%	Within 7 days of stock item being approved for inclusion in the Central Stockroom	RS
5.1.5.3.2	Obtain NSNs from GSA for permanent stock items.	Correct and accurate item specifications are forwarded to GSA for permanent NSNs.	5%	# of requests to GSA for NSNs annually	Within 6 MO after item is established in the Central Stockroom	5%	Within 1 year after item is established in the Central Stockroom	RS

RFP#	Requirement	Quality Standard	AQL	Lot	Timeliness Standard	AQL	MAX	Primary
5.1.5.3.3	Record and maintain item and vendor information in the ADB and catalog file folders.	Vendor information and stock item specs are accurately entered into ADB and catalog file folders are complete & data is current.	2%	Total # of line items stocked annually	Information is updated within 2 WD of receipt.	5%	Information is updated within 4 WD of receipt	RS
5.1.5.3.4	Create a catalog file for each new item in the inventory.	An accurate and complete catalog file is created for each new stock item	10%	# of new items added to inventory	Catalog file established within 14 WD of NSN assignment	10%	Catalog file established within 21 WD of NSN assignment	RS
5.1.5.3.5	Maintain the NIH Supply Catalog and submit web updates to the webmaster.	Supply Catalog correctly identifies all available items within the GDC and SSS	5%	# of stock line items updated monthly	Catalog updated by the 1st of every month	5%	Catalog updated by the 5th of every month	RS
5.1.5.3.6	Produce and distribute hard copy NIH Supply Catalogs.	Supply Catalog correctly distributed to current customer base	5%	# of catalogs distributed annually	Distributed by Jan 30th each year	5%	Distributed by March 1st each year	RS
5.1.5.4.1	Create and issue new or replacement SSS charge cards.	New or replacement SSS cards with proper CAN assigned correctly issued to requesting ICs	4%	# of new or replacement SSS cards created monthly	Within 1 WD of receipt of request	0%		RS
5.1.5.4.2	Create and issue annual renewal SSS charge cards, according to IC requirements.	Annual renewal SSS cards, with proper CAN assigned, correctly issued to requesting ICs	1%	# of renewal SSS cards created annually	Prior to the 15th of September for requests received by the assigned deadline	1%	Within 5 WD of receipt after assigned deadline	RS
5.1.6.1.1	Assist with VRP and AAALAC inspections.	VRP inspections received satisfactory rating and all discrepancies are corrected	2%	# of VRP inspections conducted annually	Discrepancies are corrected within 2 WD of scheduled date	2%	Discrepancies are completed within 4 WD of scheduled	RS

RFP#	Requirement	Quality Standard	AQL	Lot	Timeliness Standard	AQL	MAX	Primary
5.1.6.1.1	Assist with VRP and AAALAC inspections.	AAALAC inspections receive satisfactory rating and all discrepancies are corrected.	0%	# of AAALAC inspections conducted tri-annually	Discrepancies are corrected within 2 WD of scheduled date	0%		PS
5.1.6.2.1	Receive and inspect SSS Stock Shipments.	All received shipments are inspected for condition and quantity. Discrepancies are documented & GDC notified. Documentation is correctly processed. Freezer and refrigerator stock verified and order form forwarded to GDC IM.	5%	# of SSS shipments received monthly	Shipments are checked in within 4 hours of receipt	5%	Within 1 day of receipt	RS
5.1.6.2.2	Conduct daily inventories of SSS high dollar value & secured stock.	All high dollar and secured items are accurately inventoried prior to store opening, quantities logged and discrepancies immediately reported to SSS supervisor	5%	# of SSS high dollar and secured stock line items inventoried weekly	Within 2 hours of store opening	5%	Within 30 minutes of store opening	MIS
5.1.6.2.3	Conduct cycle counts of SSS materials in stock.	Correctly perform cycle counts to verify inventory and locations. Discrepancies are reported to SSS supervisor.	5%	# of SSS cycle counts monthly	Cycle counts are completed within 1 WD of	5%	Cycle counts are completed within 2 WD of assignment	MIS

RFP#	Requirement	Quality Standard	AQL	Lot	Timeliness Standard	AQL	MAX	Primary
5.1.6.2.4	Recommend SSS reorder points and safety levels for stock.	Stock reorder and safety levels are adjusted to maintain adequate stock levels, adjustments authorized by Project Officer or SSS supervisor are correctly rejected in the ADB.	10%	# of SSS ROP/safety levels revised annually	Ordering criteria is revised within 2 WD of change in customer demands/trend identification	5%	Ordering criteria is revised within 3 WD of change in customer demands/trend identification	RS
5.1.6.2.5	Check out SSS customers.	Customers are correctly checked out, in a professional manner	1%	# of SSS customers served daily	Within 30 minutes of checkout	1%	Within 1 hour of checkout	RS
5.1.6.2.6	Provide SSS customer delivery services.	Purchased items are delivered to correct location as scheduled by customer. In undamaged condition, with proper documentation	5%	# of SSS deliveries monthly	Within requested timeframe	5%	Within 1 day	RS
5.2.1.1	Generate purchase orders or records of call to procure stock items from vendors	POs generated and submitted to purchasing agent error free	8%	# of POs generated monthly	Within 5 WD of receiving routine replenishment	8%	Within 7 WD of receiving routine replenishment	RS
5.2.1.2	Generate FEDStrip orders to procure stock items form GSA	FEDStrip orders are generated and submitted error free	11%	# of FEDStrip orders monthly	Within 10 WD of receipt of routine replenishment	11%	Within 5 WD of receipt of routine replenishment	RS
5.2.1.3	Enter orders into ADB	All orders are accurately entered into and reflected in ADB	5%	# of line items ordered monthly	Within 5 WD of receipt of routine replenishment	5%	Within 5 WD of receipt of routine replenishment	RS
5.2.2.1.1	Check deliveries in, verifying PO numbers	Deliveries are checked in, materials checked for visible damage, leakage of safety deficiencies. PO numbers verified and entered into ADB.	10%	# of deliveries received monthly	Within 1 hour of delivery receipt	5%	Within 2 hours of delivery receipt	RS

RFP#	Requirement	Quality Standard	AQL	Lot	Timeliness Standard	AQL	MAX	Primary
5.2.2.1.2	Unload material and place in assigned staging lanes	Material properly unloaded and placed in assigned staging area	10%	# of items unloaded and staged weekly	Within 1 hour of delivery receipt	10%	Within 2 hour of delivery receipt	RS
5.2.2.1.3	Store material in designated location	Material properly & safely stored in assigned locations	15%	# of materials stored weekly	Within 1 hour of delivery receipt	10%	Within 2 hour of delivery receipt	RS
5.2.2.2.1	Receive, process and maintain local purchase order	POs are correctly processed, quality and quantity verified against documentation. POs correctly filed and maintained	10%	# of POs processed monthly	Within 1 hour of delivery receipt	10%	Within 2 hours of delivery receipt	RS
5.2.2.2.2	Post receipts of material in OAMAS database	Required fields for receipts accurately posted & verified in OAMAS	10%	# of receipts posted in OAMAS monthly	Within 1 hour of delivery receipt	3%	Within 2 hours of delivery receipt	RS
5.2.3.1	Conduct 100% inventory annually of all items in stock	All items in stock accurately inventoried with correct material in correct location.	2%	# of line items inventoried annually	Within 1 month prior to end of FY	2%	By end of FY	100%
5.2.4.1.1	Select required materials and stage them in packing/shipping area	Materials are correctly selected and staged for packing/shipping area	1%	# of items picked weekly	Within 4 hours of receipt of requisition	10%	Within 1 WD of receipt of requisition	RS
5.2.4.2.1	Deliver materials to all assigned locations	Deliver materials to correct locations, in an undamaged condition, with proper documentation. Received signature for each delivery	5%	# of deliveries weekly	Within 4 hours of receipt of requisition	10%	Within 1 WD of receipt of requisition	RS

RFP#	Requirement	Quality Standard	AQL	Lot	Timeliness Standard	AQL	MAX	Primary
5.2.5.1.1	Recommend adjustments to reorder points and safety levels for stock items and make adjustments in OAMAS	Stock items correctly reordered and maintained above the safety level and Adjustments are reflected in the OAMAS inventory system.	2%	# of stock items which reach a ROP monthly	Ordering criteria is changed within 2 WD of change to customer demand/trend	2%	Within 3 WD of change in customer demand/trend	RS
5.2.5.1.2	Enter pending quantity in OAMAS to requisition/replenish stock and provide supporting documentation to the purchasing agent	Stock items are correctly reordered to retain stock levels above the safety level. Completed documentation provided to the PA.	2%	# of stock line items ordered monthly	Within 2 WD of stock reaching ROP	2%	Within 4 WD of stock reaching ROP	RS
5.2.5.1.3	Identify and make recommendations on remove of dead stock	Stock items identified as dead stock are removed from warehouse location	9%	# of items removed annually	Dead stock items are identified monthly and removed within 60 WD of identification	9%	Dead stock items are identified monthly and removed within90 WD of identification	RS
5.2.5.1.4	Establish new items in the OAMAS program and enter required inventory control data in the database	Item specs are accurately reflected in the database	9%	# of new items added annually	New items added to the OAMAS program within 2 WD of receipt	9%	New items added to the OAMAS database within 4 WD of receipt	RS
5.3.1.1.1	Check deliveries in, verifying PO numbers	Deliveries are properly checked in materials inspected for visible damage, leakages or safety deficiencies. PO numbers are verified & entered into ADB.	10%	# of deliveries received monthly	Within 1 hour of delivery receipt	5%	Within 2 hours of delivery receipt	RS
5.3.1.1.2	Received materials are place in assigned staging area	Material properly unloaded and placed in assigned staging area	10%	# of items unloaded and staged weekly	Within 1 hour of delivery receipt	10%	Within 2 hour of delivery receipt	RS
5.3.1.1.3	Deliver materials to proper section	Requested materials delivered to correct section	2%	# of material deliveries monthly	Materials are delivered within 2 hours of receipt	2%	Materials are delivered within 4 hours	RS

RFP#	Requirement	Quality Standard	AQL	Lot	Timeliness Standard	AQL	MAX	Primary
5.3.1.2.1	Receive, process and maintain local purchase orders	POs correctly processed, quality and quantity verified and documentation correctly filed & maintained.	10%	# of POs processed monthly	Within 1 hour of delivery receipt	10%	Within 2 hours of delivery receipt	RS
5.3.1.2.2	Identify all concealed damages, shortages and overages within containers on SF 364 (ROD)	All damages, shortages and overages are correctly identified and documented.	20%	# of RODs established monthly	Within 1 hour of delivery receipt	3%	Within 1 hour of delivery receipt	RS
5.4.1.1.1	Check deliveries in, verifying PO numbers	Deliveries are properly checked in, materials checked for visible damage, leakage, or safety deficiencies. PO numbers are verified and documentation signed	10%	# of deliveries received monthly	Within 1 hour of delivery receipt	5%	Within 2 hours of delivery receipt	RS
5.4.1.1.2	Unload material and place in assigned staging area	Material is properly unloaded and placed in assigned staging area.	10%	# of items unloaded and staged weekly	Within 1 hour of delivery receipt	10%	Within 2 hour of delivery receipt	RS
5.4.1.1.3	Store material in designated locations	Material properly and safely stored in assigned locations	15%	# of materials stored weekly	Within 1 hour of delivery receipt	10%	Within 2 hours of delivery receipt	RS
5.4.1.2.1	Receive, process and maintain local purchase orders	POs are correctly processed, quality and quantity verified against documentation. POs correctly filed and maintained	10%	# of POs processed monthly	Within 1 hour of delivery receipt	10%	Within 2 hours of delivery receipt	RS
5.4.2.1	Conduct cycle counts of material in storage	Correctly perform cycle counts, verify item counts and locations. Report results to cycle count requestor.	10%	# of cycle counts monthly	Cycle counts are completed within 1 WD of	5%	Cycle counts are completed within 2 WD of assignment	RS

RFP#	Requirement	Quality Standard	AQL	Lot	Timeliness Standard	AQL	MAX	Primary
5.4.2.2	Conduct 100% inventory annually of all items in stock	All items in stock accurately inventoried with correct material in correct location. The results are reported to IM	2%	# of line items inventoried annually	Within 1 month prior to end of FY	1%	By end of FY	100%
5.4.3.1.1	Select required materials and stage them in packing/delivery area	Materials correctly selected and staged in packing/shipping area	2%	# of items picked weekly	Within 4 hours of receipt of requisition	10%	Within 1 WD of receipt of requisition	RS
5.4.3.1.2	Prepare materials for delivery	Materials are properly packed for delivery	1%	# of line items delivered weekly	Within 4 hours of receipt of requisition	10%	Within 1 WD of receipt of requisition	RS
5.5.1.1.1	Check deliveries in at loading dock	Deliveries are checked in, material checked for visible damage, leakage or safety deficiencies. PO numbers are verified.	10%	# of deliveries received monthly	Within 1 hour of delivery receipt	5%	Within 2 hours of delivery receipt	RS
5.5.1.1.2	Store material in designated location	Material properly and safely stored in assigned locations.	15%	# of materials stored weekly	Within 1 hour of delivery receipt	10%	Within 2 hour of delivery receipt	RS
5.5.1.1.3	Unload material and place in assigned staging area	Unloaded material placed in assigned staging area	10%	# of items unloaded and staged weekly	Within 1 hour of delivery receipt	10%	Within 2 hour of delivery receipt	RS
5.5.2.1.1	Select required materials and stage them for delivery	Materials are correctly selected and staged for delivery	2%	# of items picked weekly	Within 4 hours of receipt of requisition	10%	Within 1 WD of receipt of requisition	RS
5.5.2.1.2	Deliver materials to proper locations	Materials are delivered to correct locations	2%	# of materials deliveries monthly	Materials are delivered within 2 hours of receipt	2%	Materials are delivered within 4 hours of receipt	RS

Surveillance Schedule

RFP	Requirement	INSPECTION INTERVAL	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
5.1	**Gaither Distribution Center (GDC)**													
5.1.1	**GDC - Requisitioning**													
5.1.1.1	Generate Requests for Quotes (RFQs) and verify price reasonableness for RFQ over $2500.	Quarterly												
5.1.1.2	Review vendor bids/quotes and make recommendations for procurement.	Quarterly												
5.1.1.3	Generate Federal Supply Schedule (FSS) and verify price reasonableness	Quarterly												
5.1.1.4	Generate purchase orders or records of call to procure stock items from vendors.	Quarterly												
5.1.1.5	Generate FEDStrip orders to procure stock items from GSA.	Quarterly												
5.1.1.6	Enter orders into ADB.	Weekly												
5.1.1.7	Update stock item prices in ADB according to price lists received from vendors.	Quarterly												
5.1.1.8	Investigate and rectify all RODs, through coordinating with vendors.	Monthly												
5.1.2	**GDC - Receiving**													
5.1.2.1	**GDC - Offload, Tally & Put-Away**													

RFP	Requirement	INSPECTION INTERVAL	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
5.1.2.1.1	Schedule incoming deliveries.	Monthly												
5.1.2.1.2	Check deliveries in, verifying PO numbers.	Monthly												
5.1.2.1.3	Unload material and place in assigned staging lanes.	Monthly												
5.1.2.1.4	Store material in locations assigned through RIMS.	Monthly												
5.1.2.2	**GDC - Receipt Process Documentation**													
5.1.2.2.1	Receive, process and maintain local purchase orders.	Monthly												
5.1.2.2.2	Post receipts of material in database.	Monthly												
5.1.2.2.3	Correct all RIMS system exceptions and violations of incoming Purchase Order requisitions.	Monthly												
5.1.2.2.4	Identify all concealed damages, shortages and overages within containers on SF 364 (Report of Discrepancy).	Monthly												
5.1.2.3	**GDC - Denial Research**													
5.1.2.3.1	Perform denial research if requisitioned stock order specifications, approved by ADB, to satisfy the requirement are not met.	Monthly												
5.1.3	**GDC - Storage (Physical Inventory Control)**													
5.1.3.1	Conduct cycle counts of material in storage.	Monthly												

RFP	Requirement	INSPECTION INTERVAL	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
5.1.3.2	Identify and document damage or deterioration of materials.	Monthly												
5.1.3.3	Rewarehouse material from one location to another within the GDC.	Monthly												
5.1.3.4	Perform special inspections of AFB and chemical storage areas.	Monthly												
5.1.4	**GDC - Picking & Shipping**													
5.1.4.1	**GDC - Stock Selection**													
5.1.4.1.1	Select required materials and forward them to packing/shipping area.	Monthly												
5.1.4.1.2	Prepare materials for shipping.	Monthly												
5.1.4.1.3	Perform manual allocation of material for priority walk-through.	Monthly												
5.1.4.2	**GDC - Transport Materials**													
5.1.4.2.1	Plan and schedule deliveries.	Monthly												
5.1.4.2.2	Deliver materials to all assigned locations.	Monthly												
5.1.4.2.3	Pickup returns.	Monthly												
5.1.5	**GDC - Inventory Control**													
5.1.5.1	**GDC - Stock Item Inventory**													
5.1.5.1.1	Make recommendations on continuation of contracts based on vendor performance	Quarterly												
5.1.5.1.2	Determine suitability of trial stock items.	Semi-Annual												

RFP	Requirement	INSPECTION INTERVAL	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
5.1.5.1.3	Recommend adjustments to reorder points and safety levels for stock items and make adjustments to the ADB, after approval	Quarterly												
5.1.5.1.4	Enter pending quantity in ADB to requisition/replenish stock, and provide supporting documentation to the Purchasing Agent.	Weekly												
5.1.5.1.5	Identify and make recommendations on removal of dead stock	Quarterly												
5.1.5.1.6	Assist with semi-annual inventory of freezer and refrigerator stock	Annual												
5.1.5.1.7	Request stock physical inventory in order to resolve discrepancies between ADB and RIMS.	Monthly												
5.1.5.1.8	Respond to customer feedback product evaluations and make recommendations for course of action	Quarterly												
5.1.5.1.9	Establish new items in the Central Stockroom Program and enter required inventory control data in the database.	Quarterly												
5.1.5.1.10	Generate messages for NIH Central Stockroom customers and submit them to CIT to be posted on the Delpro message board.	Monthly												
5.1.5.2	**GDC - Marketing**													
5.1.5.2.1	Conduct customer surveys designed to improve	Monthly												

RFP	Requirement	INSPECTION INTERVAL	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
	products maintained in inventory													
5.1.5.2.2	Receive customer phone calls and investigate complaints and suggestions pertaining to the Central Stockroom.	Weekly												
5.1.5.2.3	Coordinate product/vendor shows at NIH facilities.	Quarterly												
5.1.5.2.4	Participate in product shows on and off the NIH Campus.	Quarterly												
5.1.5.2.5	Submit updates for the Central Stockroom website to the webmaster.	Semi-Annual												
5.1.5.2.6	Design/redesign and distribute flyers promoting Central Stockroom stock.	Monthly												
5.1.5.2.7	Establish and delete GDC delivery codes	Monthly												
5.1.5.2.8	Maintain customer call log and provide report to Project Officer	Monthly												
5.1.5.3	**GDC - Catalog**													
5.1.5.3.1	Categorize all new stock items and assign local NSNs.	Quarterly												
5.1.5.3.2	Obtain NSNs from GSA for permanent stock items.	Semi-Annual												
5.1.5.3.3	Record and maintain item and vendor information in the ADB and catalog file folders.	Semi-Annual												
5.1.5.3.4	Create a catalog file for each new item in the inventory.	Semi-Annual												

RFP	Requirement	INSPECTION INTERVAL	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
5.1.5.3.5	Maintain the NIH Supply Catalog and submit web updates to the webmaster.	Semi-Annual												
5.1.5.3.6	Produce and distribute hard copy NIH Supply Catalogs.	Annual												
5.1.5.4	**GDC - Self Service Store (SSS) charge cards**													
5.1.5.4.1	Create and issue new or replacement SSS charge cards.	Semi-Annual												
5.1.5.4.2	Create and issue annual renewal SSS charge cards, according to IC requirements.	Annual												
5.1.6	**GDC - Special Functions**													
5.1.6.1	**GDC - VRP Inspections and AAALAC Certification**													
5.1.6.1.1	Assist with VRP and AAALAC inspections.	Monthly												
5.1.6.2	**GDC - Self Service Store Operations**													
5.1.6.2.1	Receive and inspect SSS Stock Shipments.	Monthly												
5.1.6.2.2	Conduct daily inventories of SSS high dollar value & secured stock.	Monthly												
5.1.6.2.3	Conduct cycle counts of SSS materials in stock.	Monthly												
5.1.6.2.4	Recommend SSS reorder points and safety levels for stock.	Monthly												
5.1.6.2.5	Check out SSS customers.	Monthly												
5.1.6.2.6	Provide SSS customer delivery services.	Monthly												

RFP	Requirement	INSPECTION INTERVAL	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
5.2	National Library of Medicine (NLM)													
5.2.1	NLM - Requisitioning													
5.2.1.1	Generate purchase orders or records of call to procure stock items from vendors	Monthly												
5.2.1.2	Generate FEDStrip orders to procure stock items from GSA	Monthly												
5.2.1.3	Enter orders into ADB	Monthly												
5.2.2	NLM - Receiving													
5.2.2.1	NLM - Offload, Tally and Put-away													
5.2.2.1.1	Check deliveries in, verifying PO numbers	Monthly												
5.2.2.1.2	Unload material and place in assigned staging lanes	Monthly												
5.2.2.1.3	Store material in designated location	Monthly												
5.2.2.2	NLM - Receipt Process Documentation													
5.2.2.2.1	Receive, process and maintain local purchase order	Monthly												
5.2.2.2.2	Post receipts of material in OAMAS database	Monthly												
5.2.3	NLM - Storage (Physical inventory Control)													
5.2.3.1	Conduct 100% inventory annually of all items in stock	Annual												
5.2.4	NLM - Picking and Delivery													
5.2.4.1	NLM - Stock Selection													

RFP	Requirement	INSPECTION INTERVAL	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
5.2.4.1.1	Select required materials and stage them in packing/shipping area	Monthly												
5.2.4.2	**NLM - Transport Materials**													
5.2.4.2.1	Deliver materials to all assigned locations	Monthly												
5.2.5	**NLM - Inventory Control**													
5.2.5.1	**NLM - Stock item inventory**													
5.2.5.1.1	Recommend adjustments to reorder points and safety levels for stock items and make adjustments in OAMAS	Monthly												
5.2.5.1.2	Enter pending quantity in OAMAS to requisition/ replenish stock and provide supporting documentation to the purchasing agent	Monthly												
5.2.5.1.3	Identify and make recommendations on remove of dead stock	Monthly												
5.2.5.1.4	Establish new items in the OAMAS program and enter required inventory control data in the database	Monthly												
5.3	**National Institute of Aging (NIA)**													
5.3.1	**NIA - Receiving**													
5.3.1.1	**NIA - Check-in, Tally and Deliver**													
5.3.1.1.1	Check deliveries in, verifying PO numbers	Monthly												

RFP	Requirement	INSPECTION INTERVAL	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
5.3.1.1.2	Received materials are place in assigned staging area	Monthly												
5.3.1.1.3	Deliver materials to proper section	Monthly												
5.3.1.2	**NIA - Receipt Process Documentation**													
5.3.1.2.1	Receive, process and maintain local purchase orders	Monthly												
5.3.1.2.2	Identify all concealed damages, shortages and overages within containers on SF 364 (ROD)	Monthly												
5.4	**National Institute of Dental and Craniofacial Research (NIDCR)**													
5.4.1	**NIDCR - Receiving**													
5.4.1.1	**NIDCR - Offload, Tally and Put-Away**													
5.4.1.1.1	Check deliveries in, verifying PO numbers	Monthly												
5.4.1.1.2	Unload material and place in assigned staging area	Monthly												
5.4.1.1.3	Store material in designated locations	Monthly												
5.4.1.2	**NIDCR - Receipt Process Documentation**													
5.4.1.2.1	Receive, process and maintain local purchase orders	Monthly												
5.4.2	**NIDCR - Storage (Physical inventory Control)**													
5.4.2.1	Conduct cycle counts of material in storage	Monthly												

RFP	Requirement	INSPECTION INTERVAL	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
5.4.2.2	Conduct 100% inventory annually of all items in stock	Annual												
5.4.3	**NIDCR - Picking and Delivery**													
5.4.3.1	**NIDCR - Stock Selection**													
5.4.3.1.1	Select required materials and stage them in packing/delivery area	Weekly												
5.4.3.1.2	Prepare materials for delivery	Weekly												
5.5	**Center for Scientific Research (CSR)**													
5.5.1	**CSR - Receiving**													
5.5.1.1	**CSR - Offload, Tally and Put-Away**													
5.5.1.1.1	Check deliveries in at loading dock	Monthly												
5.5.1.1.2	Store material in designated location	Weekly												
5.5.1.1.3	Unload material and place in assigned staging area	Weekly												
5.5.2	**CSR - Picking and Delivery**													
5.5.2.1	**CSR - Stock Selection**													
5.5.2.1.1	Select required materials and stage them for delivery	Weekly												
5.5.2.1.2	Deliver materials to proper locations	Monthly												