

The objective of the study was to establish the influence of inventory controls on the availability of essential medicines and medical supplies in HCIVs of Wakiso district. This is comes after realizing gaps in availability of essential medicines and medical supplies. Findings of the study will be critical in drawing interventions and also acting as an addition to existing studies.

A cross sectional study design with both quantitative and qualitative approaches of data collection was used and study design was considered suitable for this study because of its ability to consolidate information on each variable of study at a single point in time without necessarily the need of any follow up of data collection. A census was considered as a sampling criterion where all the seven HCIVs in Wakiso district were reached. Questionnaires were made; data collected by the researcher and entered into EPIDATA before exporting to SPSS version 21 for analysis. Bivariate analysis was conducted to determine relationships between inventory control variables against the dependent variable (availability of essential medicines and medical supplies). A Chi-square p-value of <0.05 with CI at 95% was considered to show associations between the dependent and independent variables.

Accuracy of stock card data among factors of accurateness of store record keeping practices significantly ($p=0.021$) influences availability of essential medicines and medical supplies. When stock cards are not accurately filled, there are high chances of a health facility missing out on tracking stock which eventually translates to stock outs at a given point in time point.

Among appropriateness factors that influence availability of essential medicines and medical supplies, storage conditions and storage systems and practices play significant role ($p=0.048$ and $p=0.044$ respectively). An assessment of these relationships for the two factors showed that majority of health facilities that had experienced shortages in essential medicines and medical supplies in the last 5 months did not have appropriate storage conditions in regard to management of minimal temperatures required for maintenance of medicines. On the side of storage systems and practices, medicines were not arranged with identification labels, there were no separate lockable cupboards while expiries were not clear.

Requisitioning factors in the study significantly influenced availability of essential medicines and medical supplies. These include the Time orders are made ($p=0.030$), Requisition Records ($p=0.031$), Quantity of what is ordered ($p=0.021$) and frequency of making orders ($p=0.001$). All the factors are strong players in determining availability of essential medicines and medical supplies. Untimely practices of making orders, limitations in requisition records management for tracking purposes exposes facilities to shortages in essential medicines and medical supplies.

Similarly, facilities that do not accurately calculate quantities ordered and also take long to place orders are bound to experience stock.

There is need to generally draw interventions to adherence to good practices of accuracy of record keeping, quantity count, prompt and frequent requisitioning and observation of other management systems such as good storage conditions. Health facilities should be trained on importance of these practices if stock outs are to be minimized in Wakiso district.