

**SUBJECT:** Supplier Visitation Policy

**SECTION:** Materials Management

**Purpose:** To effectively manage the volume of supplier visitations, ensure that staff can effectively manage their time, and to see that patient care is not adversely affected. While many supplier visits are with Materials Management staff, we recognize that, occasionally, it is helpful for suppliers to call on non-Materials Management staff. Suppliers, in turn, should respect the true mission of SLHS employees and clinicians, and work to eliminate any unnecessary intrusions. The procedure below outlines the process of supplier visitation for Saint Luke's Health System entities.

Business between all parties will be conducted in accordance with the highest ethical standards of the medical and business professions with special attention to the care, sensitivity and safety of patients and staff.

**Policy:**

**Responsibility of Materials Management**

- 1.) Make available to all visiting Sales Representatives a copy of the policy and the procedure to provide for compliance with the policy.
- 2.) Keep all known Sales Representatives and the Corporate offices of all companies currently doing business with SLHS informed of the provisions of the policy.
- 3.) Act promptly on complaints of non-compliance according to the disciplinary guidelines within this policy.
- 4.) Review supplier performance measurements as outlined in the contracts.

**Responsibility of the Sales Representative**

- 1.) The Sales Representative shall review the provisions of the Visitation Policy and Procedure after being issued a copy of the brochure outlining the specific guidelines to be followed when doing business at SLHS. Sales Representatives will be held accountable for their actions and behavior at all SLHS entities, whether or not they have reviewed SLHS policies or material pertinent to supplier visitation or behaviors within SLHS facilities.
- 2.) The Sales Representative may be asked to sign an agreement (or agreements) to abide by the provisions established and acknowledge that the policy is strictly enforced. The agreement(s) may include the following:
  - a. Confirmation for knowledge of and compliance with OSHA requirements consisting of, but not limited to:
    - i. 29 CFR 1910-146 Confined Space Entry
    - ii. 29 CFR 1910-147 Lockout/Tagout

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- iii. 29 CFR 1910-1030 Occupational Exposure to Bloodborne Pathogens
- iv. 29 CFR 1910-1200 Hazard Communication

- 3.) Confirmation of the Bloodborne Pathogens inservice, knowledge of Universal Personnel Protective Equipment, Hepatitis B vaccination, and negative TB skin test.
- 4.) The Sales Representative will work with the appropriate Resource or Materials Manager prior to displaying any products, books or journals. The Resource or Materials Manager will coordinate with the appropriate department for approval.
- 5.) The acceptance of pharmaceutical samples must have prior approval of the System Director of Pharmacy
- 6.) Sales Representative may attend the meetings of medical groups or departmental committees only with the invitation of the Chair. Contact with the medical staff shall be on an appointment basis only.
- 7.) A Sales Representative may not have any contact with a patient without the prior approval of the attending or consulting physician. SLHS Nurse representative must be present at all times. The Sales Representative may not make any notations in the patient's medical chart. Sales Representatives that have exposure to or utilize patient protected health information will adhere to SLHS guidelines relative to HIPAA including, but not limited to, signing the appropriate Business Associate agreement and/or Confidentiality Agreements.
- 8.) Suppliers are required to make appointments in advance with any and all SLHS staff. Each appointment authorization is for that appointment only, and does not provide authorization to visit any other areas of the hospital or meet with any other staff.

### **Disciplinary Guidelines**

The intent of this policy to strictly enforce this procedure, with the following disciplinary guidelines for non-compliance:

**First Offense:** Violation documented, verbal warning issued, and policy reviewed.

**Second Offense:** The supplier's regional or corporate office will be notified of the representative's non-compliance to policy. The sales representative may be temporarily barred from SLHS premises and/or replaced at SLHS request.

**Third Offense:** The company may be suspended from further business with SLHS for a period of time to be determined by SLHS.

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The Corporate Director of Materials Management, reserves the right to accelerate the disciplinary process or to add additional disciplinary provisions.

### **Responsibility of the Department**

- 1.) The Department Managers shall assist in the compliance to this policy by allowing Sales Representatives in their areas only in accordance with the provisions of this policy.
- 2.) All contacts with Sales Representatives should be limited to offices or public reception areas. No Sales Representatives should be allowed access to drug storage areas, especially unattended. Access for the Sales Representative to supply inventory areas must be approved by the Department Manager. Access for the Sales Representative to patient care areas must be approved by the Department Manager and they must be accompanied by nursing staff at all times.
- 3.) The Department Manager shall provide all department specific instructions (including Bloodborne Pathogens instructions) to the Sales Representative. Any additional department specific rules will be provided at this time.
- 4.) It is the responsibility of the department to keep all pricing and current vendor information confidential. Questions pertaining to pricing and/or competitive vendor information should be referred to Corporate Materials Management.
- 5.) Requests by departments for pharmaceutical inservice will be directed to the System Director of Pharmacy, or his designee. All other requests for product inservice will be directed to the appropriate Resource or Materials Manager.

### **Visitation Guidelines by Facility**

#### **Appointments and Check-In:**

Although each facility is unique, suppliers should comply with the following general instructions for visiting all SLHS facilities:

- 1.) All appointments must be made by telephone in advance. Unexpected visits will not be accepted.
- 2.) Appointments and check-in will not begin earlier than 7:00 a.m. or later than 5:00 p.m.. After hours visits are prohibited, unless authorized in advance.
- 3.) Upon the suppliers arrival, but before meeting their appointment, the supplier must check in at the appropriate location.

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- 4.) The attendant will verify the suppliers' appointment, ask the supplier to sign in, and give the supplier a temporary ID badge. Suppliers not wearing a temporary ID badge will be returned to the check-in location.
- 5.) When the suppliers' visit is over, supplier will return to the check-in location, sign out, and return the temporary ID badge.

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