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Owner Thomas Harvieux: VP Chief Supply Chain Officer BJC
Area Materials Management-General Administrative
Applicability Saint Luke's Health System – All Facilities & ACRH & SLSPMC

Supplier Visitation Policy, GA-102

PURPOSE

To provide a procedure summarizing Saint Luke's Health System (SLHS) protocol regarding Vendor Representative visitation to all Saint Luke's Health System Facilities. All vendors doing business with Saint Luke's are required to be a current member of Intellicentrics_Rep Trax to provide Saint Luke's with current, accurate, and consistent vendor credentialing tracking. Suppliers 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.

PROCEDURE

1. Responsibility of Resource Management

- A. Make available to all visiting vendor/supplier/representatives a copy of the policy and the procedure to provide for compliance with the policy;
- B. Grant a prompt, courteous reception to all vendor representatives who call with a legitimate

- business purpose;
- C. Initiate and conducts vendor interviews. Vendor Representative introductions to various Departments will be coordinated through Resource Management;
 - D. Keep all known vendor representatives and thier Corporate Offices informed of the provisions of this policy;
 - E. Act promptly on complaints of vendor non-compliance according to the disciplinary guidelines within this policy;
 - F. Review supplier performance measurements;

2. Responsibility of the Sales Representative

- A. All Vendor Representatives that enter any Saint Luke's Facility must obtain a Intellicentrics_Rep Trax ID badge through a designated Rep Trax Kiosk located in each Facility. This badge must be worn at all times during the visit. It is the vendor representative's responsibility to inquire about departmental requirements for visitation. Questions can be directed to Corporate Materials Management at (816) 932-6066.
- B. Vendor Representatives are not permitted to visit any Health System area or meet with any departmental personnel without a prearranged, confirmed appointment. All price quotations, product information, and any presented purchasing terms and conditions must be copied to Corporate Resource Management;
- C. Vendor representatives that have been requested by a Physician to be present at a clinical procedure must notify the Department Manager at least 24 hours in advance. Vendor Representatives are not allowed to go to other Procedure locations or areas of the department while on site and is required to leave the Facility upon the completion of the case;
- D. Keep all credentialing requirements up to date and abide by the terms and conditions of any executed contract between the parties;
- E. Vendor/supplier/representatives will be divided into three classes of visitors:
 - Sales Call
 - Account Support
 - Clinical Support

Each class has different requirements based on the level of their purpose and patient exposure.

- **Sales Calls** are conducted by vendor/ supplier/ representatives purely to show products or to discuss services offered to Saint Luke's Health System by appointment only. There is no patient contact. This supplier is not subject to any competency or qualifications requirements.
- **Account Support** visits are conducted by vendor/supplier/representatives to provide support for product issues or to provide services already contracted for. There is minimal patient contact supervised by an employee of Saint Luke's Health System. This supplier is not subject to any competency or qualifications requirements.
- **Clinical Support** visits are conducted by vendor/supplier/representatives to provide

expertise in product knowledge or services rendered that may be in patient areas. These suppliers are typically invited into the hospital by a licensed independent practitioner to provide care, treatment or services to patients. These suppliers act under the direction of SLHS employees in all situations including all emergencies (code red, code gray, etc.)

- F. All vendor representatives shall review the provisions of this Visitation Policy and Procedure which is to be followed when doing business at SLHS. Vendor 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;
- G. Vendor representatives may be required to adhere to additional department specific guidelines, policies, procedures or mandates. Departmental requirements, infection control, hospital or clinic specific requirements must be followed for vendor representatives to have permission to be on campus at any SLHS site. These requirements are included in the Rep Trax credentialing requirements and will include basic principles of blood borne pathogens in accordance with OSHA standards, basic infection control principles including hand hygiene, asepsis, standard, airborne and droplet precautions, patient rights and confidentiality and HIPPA;
- H. The vendor representative will work with the appropriate Corporate Resource Manager prior to displaying any products, pricing or information to Staff or Physicians. The Resource Manager will coordinate with the appropriate VAT team or department for review and initiate the contract process upon approval.
Pre-approval steps include:
 - 1. Vendor Representative makes an appointment with the appropriate Resource Manager
 - 2. Samples, descriptive literature, FDA Authorization and pricing to be presented at the appointment
 - 3. A financial analysis will be performed by Resource Management
 - 4. The financial analysis and product information is presented to the appropriate Committee or Department by Resource Management
 - 5. Resource Management will notify the vendor of the review decision
- I. The acceptance of pharmaceutical samples must have prior approval of the System Vice President of Pharmacy;
- J. Vendor representatives are not allowed to open sterile supplies, operate autoclaves, scrub into the surgical field, assist in breaking down sets of equipment/instruments after the procedure, assist in moving the patient, have any direct contact with the patient, or enter a procedure room without approval from the circulating nurse;
- K. Limit one Vendor Representative per suite unless approved by Clinical Department Management;
- L. Vendor Representatives are not allowed to use cellular devices in direct patient care areas but use of cellular devices in Lobby areas is permitted:
- M. Instrumentation and/or Implants being carried in for a case must be delivered to the Instrumentation Systems Department by 6:00 p.m. the evening prior to the scheduled procedure to allow for proper sterilization. Sterilization instructions are to be maintained in the Sterilization Department or provided with the delivery of the instrument and/or Implant;
- N. Vendor representatives who perform remote calibration to adjust devices, i.e. pacemakers or

ICD's, or assist with the use of a piece of equipment, i.e. – VAD or robot devices used in the operating room, must have a letter on file in the department from your employer verifying competency to operate such devices and/or equipment. Certification must also be uploaded in RepTrax. This certification must be updated annually and are kept by the department manager and in RepTrax;

- O. Vendor 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;
- P. A vendor 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 vendor/supplier/representative may not make any notations in the patient's medical chart. Vendor/supplier/representatives that have exposure to or utilize patient protected health information (PHI) will adhere to SLHS guidelines relative to HIPAA (CFR 45) including, but not limited to, signing the appropriate Business Associate agreement and/or Confidentiality Agreements.

3. Disciplinary Guidelines

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

- A. **First Offense:** Violation documented, verbal warning issued, and policy reviewed.
- B. **Second Offense:** The supplier's regional or corporate office will be notified of the representative's non-compliance to policy. The vendor representative will receive a thirty (30) day suspension from access to SLHS premises and/or replaced at SLHS request.
- C. **Third Offense:** The vendor representative will be permanently banned from SLHS and the company may be suspended from further business with SLHS for a period of time to be determined by SLHS.

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

4. Responsibility of the Department

- A. The Department Managers and all department staff shall assist in the compliance to this policy by allowing vendor representatives in their areas only in accordance with the provisions of this policy;
- B. All contact with vendor representatives should be limited to offices or public reception areas. No vendor representative should be allowed access to drug storage areas. Access for the vendor representative to supply inventory areas must be approved by the Department Manager. Access for the vendor representative to patient care areas must be approved by the Department Manager and the representative must be accompanied by nursing staff at all times.
- C. The Department Manager shall provide all department specific instructions (including

Bloodborne Pathogens instructions) to the vendor/supplier/representative. Any additional department specific rules will be provided at this time.

- D. It is the responsibility of all department staff to keep all pricing and current vendor information confidential. Questions pertaining to pricing and/or competitive vendor information should be referred to Corporate Materials Resource Management.
- E. Requests by departments for a pharmaceutical inservice will be directed to the System Vice President of Pharmacy, or his designee. All other requests for product inservices will be directed to the appropriate Resource or Materials Manager who will work with the requesting department to coordinate.

5. Visitation Guidelines by Facility

Appointments and Check-In:

Although each facility is unique, vendor/supplier/representatives 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 vendor Representative's arrival, but before meeting their appointment, the vendor Representative must check in at the appropriate Rep Trax Kiosk and obtain a Rep Trax badge.
4. The attendant will verify the appointment and confirm check in through Rep Trax.
5. When the suppliers' visit is over, the Representative must return to the Rep Trax kiosk and sign out or sign out through a mobile device.

IN COLLABORATION WITH

Corporate Resource Management

THIS DOCUMENT APPLIES TO:

Anderson County Hospital (d/b/a for Saint Luke's Hospital of Garnett, Inc.)

Anderson County Hospital Long Term Care Unit (d/b/a for Saint Luke's Hospital of Garnett, Inc.)

Family Care Center (FCC) at Anderson County Hospital (d/b/a for Saint Luke's Hospital of Garnett, Inc.)

Bishop Spencer Place

Hedrick Medical Center (d/b/a for Saint Luke's Hospital of Chillicothe)

Hedrick Family Care at Hedrick Medical Center (d/b/a for Saint Luke's Hospital of Chillicothe)

Saint Luke's East Hospital

Saint Luke's Hospital of Kansas City

Saint Luke's Hospital of Kansas City Crittenton Children's Center Campus

Saint Luke's North Hospital

Saint Luke's South Hospital, Inc.

Saint Luke's South Pain Management Center

Wright Memorial Hospital (d/b/a for Saint Luke's Hospital of Trenton, Inc.)

Saint Luke's Mercer County Clinic at Wright Memorial Hospital (d/b/a for Saint Luke's Hospital of Trenton, Inc.)

Wright Memorial Physician Group at Wright Memorial Hospital (d/b/a for Saint Luke's Hospital of Trenton, Inc.)

Saint Luke's Health System

Saint Luke's Health System Home Care and Hospice

Saint Luke's Neighborhood Clinics, LLC

Advanced Urologic Associates, Inc.

Medical Plaza Imaging Associates, Inc.

Risk Retention Group

Saint Luke's Physician Group

Saint Luke's Care

Saint Luke's Radiation Therapy - Liberty

Allen County Regional Hospital (d/b/a for Saint Luke's Hospital of Allen County, Inc.)

Allen County Regional Clinic at Allen County Regional Hospital (d/b/a for Saint Luke's Hospital of Allen County, Inc.)

Allen County Regional Clinic - Humboldt at Allen County Regional Hospital (d/b/a for Saint Luke's Hospital of Allen County, Inc.)

Allen County Regional Clinic - Moran at Allen County Regional Hospital (d/b/a for Saint Luke's Hospital of Allen County, Inc.)

REPLACES PREVIOUS DOCUMENTS

HMC – Supplier Visitation Policy

WMH – Sales Representatives

Approval Signatures

Step Description	Approver	Date
	Mary Eidson: Program Coordinator SLHS Policies	2/23/2022

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