POLICY:
The Kettering Health Network (KHN) recognizes the value of sales representatives (hereafter referred to as Vendors) for the purpose of providing products or services to our facilities. Such individuals shall be extended professional courtesy. However, they shall understand and observe all KHN regulations and specific vendor requirements as detailed in this policy.

DEPARTMENTS AFFECTED:
Sponsoring Department: Materials Management. All Hospital Departments.

GUIDELINES:

A. All vendors calling on KHN facilities are authorized to park in visitor parking garages and designated visitor areas. Parking in any other area may lead to a fine and removal of the offending vehicle.

B. All vendors entering a KHN facility must follow the procedures outlined in the “Kettering Health Network Vendor Visit Procedure” which is maintained by the Materials Management Department. To obtain a copy, contact Materials Management at 298-3399, Ext. 43700.

1. Any vendor present in any patient care area is required to obtain a Vendor Credentialing Card (VCC) and display the card during their visit. Procedures for obtaining a VCC are contained in the “Kettering Health Network Vendor Visit Procedure.” Materials Management is the department responsible for collecting documentation related to the VCC, issuing the VCC, and maintaining a network tracking database of card holders. Vendors are required to submit the following information to obtain a VCC:

   a. Verification of company training and documentation of training time.
   b. Certification of training on specific equipment and/or supplies to include hours of training and last certification.
   c. Date and results of last TB test.
   d. Documentation of infection control/asepsis training.

2. Vendors are not permitted to conduct “cold calls” or solicit business. If staff or physicians encounter this, report the name of the company and sales representative to the Materials Management Department.
3. Vendors are required to make appointments with specific individuals at specific times for each visit. Vendors must proceed directly to their appointment. During a visit, vendors must display their company badge and VCC (if required) at all times.

4. Vendors are required to follow Department specific guidelines (for example, Pharmacy), during their visit. Any vendor observing a medical procedure must complete the KHN form, “Request for Non-Physician Observer Privileges”, at least 48 hours in advance of the visit. The request for observer privileges and any approval will be maintained by the approving Department. Departments are also responsible for obtaining patient consent relating to observing a medical procedure.

C. Vendors may not participate in direct patient care. Vendors may only function in a consultative/educational/resource role with staff and physicians. All vendor equipment must be cleared by the Clinical Engineering Department prior to use in a KHN facility. A vendor will be required to present their equipment to the Clinical Engineering Department at least two business days in advance of their visit.

D. Hospital Staff and Physicians may request vendors to leave an area at any time, without explanation. Vendors must leave immediately if requested to do so by Hospital Staff or a physician. Actions that may result in a immediate request to leave include, but are not limited to:

1. Vendor approaches and/or solicits other physicians.

2. Vendor attempts to attend procedures for which he/she has not been cleared.

3. Vendor violates infection control standards.

4. Vendor attempts to access confidential patient information or procedure schedules.

5. Vendor introduces new product whose use was not properly approved for use during the visit by Purchasing. In this instance, product will be provided at no cost to KHN.
E. Hospital staff is required to monitor vendors during their visit to ensure compliance with KHN policies and procedures. Contact Materials Management to report any vendor not adhering to this policy or other KHN policies and procedures. Vendors are subject to disciplinary action up to and including being banned from KHN facilities.

SPONSORING DEPT: Materials Management
DATE OF ORIGIN: 05/25/76
LAST REVIEWED: 01/17/05, 4/19/07, 01/21/08
LAST REVISED: 4/19/07, 01/21/08
DATE APPROVED: 01/17/05
APPROVED BY: Administrative Finance Council
DATE APPROVED: 04/19/07
APPROVED BY: KMC Executive Council
DATE EFFECTIVE: 04/19/07
The following vendor visit procedure has been developed to enhance security, patient confidentiality, and to ensure that vendors adhere to procedures while on the campuses of a Kettering Health Network (KHN) facility.

**Vendor Credentialing Card (VCC):** A VCC is required for any vendor present in any patient care area. These areas include, but are not limited to, the Operating Room, Intensive Care Units, Cardiac Cath Lab, and the Emergency Department. A VCC must be obtained prior to your first visit to a KHN facility. To obtain a card, visit the Purchasing Department located at the Administrative Support Building, 2110 Leiter Road, Miamisburg OH 45342 with the following information:

1. Date and results of last TB Test (must be within past 12 months). The VCC will expire 12 months after the date of the TB test. Vendors must submit updated test information on an annual basis;
2. Verification of company training and documentation of training time.
3. Certification of training on specific equipment and/or supplies to include hours of training and last certification.
4. Documentation of infection control/asepsis training.

**Visiting KHN Facilities:** Vendors are not permitted to conduct “cold calls” or solicit business. Appointments must be made with specific individuals at specific times for each visit. A vendor must display company badge/identification (and VCC, if required), at all times. Upon arriving to a network entity, proceed directly to the department where you have scheduled your appointment. Any additional visit will require approval of Purchasing or the affected Department prior to visiting. If a Department has specific guidelines, you will be expected to follow them while visiting their area.

In the event of an urgent requirement that precludes obtaining a VCC in advance of your visit, you must provide all required documentation to the Purchasing Department prior to any future visit.

**Specific Guidelines:** Vendors may not participate in direct patient care. Vendors may only function in a consultative/educational/resource role with staff and physicians. In the event your equipment is required to complete your visit, it must be cleared by the Clinical Engineering Department prior to use in a KHN facility. For your convenience and ours, you are asked to coordinate this clearance with the Clinical Engineering Department at least two business days in advance of your visit.

Hospital Staff and Physicians may request vendors to leave an area at any time, without explanation. Vendors must leave immediately if requested to do so by Hospital Staff or a physician. Actions that may result in an immediate request to leave include, but are not limited to:

1. Vendor approaches and/or solicits other physicians.
2. Vendor attempts to attend procedures for which he/she has not been cleared.
3. Vendor violates infection control standards.
4. Vendor attempts to access confidential patient information or procedure schedules.
5. Vendor introduces new product whose use was not properly approved for use during the visit by Purchasing. In this instance, product will be provided at no cost to KHN.

Vendors are subject to disciplinary action up to and including being banned from KHN facilities.

If you have any questions regarding this procedure, please contact the Purchasing Department at (937) 298-3399, Ext 43700.

I agree to abide by the Vendor Visit procedure.

Print Name:_________________________ Signature:________________________

Company:__________________________ Date:__________________
REQUEST FOR NON-PHYSICIAN OBSERVER PRIVILEGES

Date of Request: ________________ Date observation will occur: ________________

Department where the observation will occur: __________________________

Company/Facility/School requesting the observation: ____________________

Objective/purpose for the visit/observation: ____________________________

1. I am aware that patient/family information obtained at any entity within the Kettering Health Network (KHN) is confidential. I will not access or review protected health information regarding KHN patients. I will not discuss the health status of KHN patients outside of conversations necessary to facilitate support of KHN operations. If I have questions regarding whether or not patient information should be disclosed in a particular situation, I will contact the KHN Privacy Office to discuss prior to disclosing KHN patient protected health information.

2. I will not participate or assist with patient care. I am aware of patient rights and responsibilities and the principles of basic aseptic technique. I have received a negative tuberculosis (TB) screening in the past year. I am aware that I am not to attend a procedure if I have a fever, respiratory infection or recent exposure to chickenpox.

3. My signature acknowledges that I have reviewed and understand KHN’s Vendor Policy.

Do you have a current Vendor Credentialing Card (VCC)? Yes_____ Expiration Date______

Name of non-physician observer: ________________________ Date: ____________

Signature of non-physician observer: ____________________________

Permission granted: o Yes o No

______________________________ (Date)

Signature of the Administrative Director/Manager/Other