Policy Name: Vendor Access & Control - 09-14

Applies to: OSU Wexner Medical Center [University Hospital, East Hospital, Brain and Spine Hospital, Richard M. Ross Heart Hospital, Harding Hospital, Dodd Rehabilitation Hospital, Ambulatory Clinics and Services] and Arthur G. James Cancer Hospital and Richard J. Solove Research Institute and Outreach Sites

POLICY

This policy applies to Vendor Representatives who conduct business in buildings owned or operated by The Ohio State University Wexner Medical Center (OSUWMC). It does not apply to Contracted Personnel (see definitions below).

This policy is intended to assure the safety and security of patients, visitors, staff, and Vendor Representatives, while providing reasonable access for Vendor Representatives when such access benefits the Medical Center. Vendor Representatives must provide their services in accordance with the requirements as stated below, and as set forth in the Vendor Interaction Policy and other cross-referenced documents.

This Policy is not intended to apply to Contracted Personnel, which are distinguished from Vendor Representatives, as set forth in the Definitions. Similarly, this Policy does not apply access to OSUWMC IT computer systems. For each of the forgoing, separate policies apply.

Definitions

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Vendor Representatives</td>
<td>Employees of another company or agency who are performing work on behalf of their employer, typically for the purposes of supporting the evaluation, purchase and/or implementation of specific supplies, equipment, or services. Examples include: “sales reps,” product trainers, service technicians, project managers, short-term management consultants, and patient services representatives that provide patient/family education and/or discharge coordination related to their agency (e.g. insurer, home health, long-term care reps).</td>
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<tr>
<td>Contracted Personnel</td>
<td>Employees of another company or agency who are performing work that would otherwise be performed by an OSUWMC employee, typically for the purposes of meeting increased workload, covering vacancies or providing outsourcing solutions. Examples include: third party staffing, nursing agency staff (e.g. AMN), “temps,” long-term contract management staff (e.g. Crothall), custodial workers, interpreters, pastoral care, and IT consultants. NOTE: This policy does not apply to Contracted Personnel; they are subject to the same access and control requirements as employees. See Human Resources policies for additional information.</td>
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<tr>
<td>Vendor Management System</td>
<td>The electronic system used to register and screen Vendors (the companies) and Vendor Representatives (the individuals), and to record Vendor visits to OSUWMC buildings, to assure they have met all requirements necessary to a) assure patient, visitor, staff and Vendor Representative safety and security, b) assure federal and state funds are not used inappropriately (see Downstream Entity Compliance Policy for additional information), and c) support standard purchasing practices within the medical center.</td>
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Policy Details

I. Prior to Visit: Credentialing and Scheduled Appointments

To ensure compliance with various state and federal regulations, OSUWMC is required to screen all companies with which we do business -- this includes the company and the individual company representatives who conduct business within OSUWMC owned or operated buildings.

A. Vendor (Company) Credentialing

At least five (5) business days prior to any visit by a Vendor Representative, and annually thereafter, the Company represented by the Vendor Representative must register in OSUWMC’s vendor management system.

B. Vendor Representative Credentialing
At least five (5) business days prior to first visit, and annually thereafter, each individual Vendor Representative must register in the vendor management system, which requires them to review policies and submit required information as indicated below.

1. Review and agree to all relevant policies, e.g., vendor interaction, Health Insurance Protection and Portability Act (HIPPA), tobacco-free environment, concealed carry and others, which may be updated periodically.

2. Provide evidence of the health screenings and immunizations listed below. Description of acceptable forms of documentation can be found on the Supplier Onboarding Guide at https://wexnermedical.osu.edu/utility/footer/supplier-interaction.
   a. 10-panel drug-screen
   b. TB Skin-Test, or an Interferon-Gamma Release Assay (IGRA), and/or a chest X-ray and physical examination to ensure the individual is free from active Mycobacterium tuberculosis infection
   c. Two (2) MMR vaccines OR positive measles, positive mumps AND positive rubella titers
   d. Two (2) Varicella vaccines OR a positive Varicella titer
   e. Tdap (one adult dose)
   f. Flu shot; signed declination is acceptable – by 12/1 annually
   g. Hepatitis B: positive Hepatitis B surface antibody or up to six (6) vaccines; signed declination is acceptable

3. Provide evidence of a background check(s) completed within the last 12 months that includes the following databases
   a. National Criminal Database/FBI Search
   b. County Felony and Misdemeanor/Ohio Bureau of Criminal Identification & Investigation Search
   c. National Sexual Offender Registry Search
   d. Social Security Number Validation
   e. Address History Validation – for all addresses in the last 7 years

Acceptable forms of evidence include: a) a copy of the report from background search company, or b) a letter from the Vendor Representative’s company, on company letterhead, and signed by the company’s authorized representative, stating the full name of the vendor and attesting that a background check meeting the requirements below has been performed within the last year. Any changes in the background check information must be updated within the vendor management system immediately.

4. Provide evidence of necessary training, if required for visits to specific area, e.g. perioperative services.

5. Pay a nominal registration fee to the vendor/representative credentialing company via credit card.

C. Review and Approval

Staff of the vendor management system and/or OSUWMC staff will review all submissions for accuracy and completeness prior to approving Vendor Representatives’ access. Vendor Representatives will receive notification only if submitted information requires supplementation.

D. Scheduling Appointments
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Prior to visiting the OSUWMC, a Vendor Representative are encouraged to schedule an appointment with a specific department, staff member, or patient. Initial sales appointments should be made through Supply Chain. New product introductions must follow approved processes (see section IV.B. below).

E. Permanent Badges

At the request of a management-level OSUWMC Sponsor may request an OSUWMC-issued permanent badge for a vendor representative. See “OSUWMC Badge Request Process” document for additional information.

II. At Each Visit: Check-In, Badging and Check-Out

Vendor Representatives must check-in, wear an identification badge and check-out at each visit. If more than one Vendor Representative from the same company is in attendance, each individual must be registered, check-in, wear a badge and check-out.

A. Buildings With Vendor Kiosks (dedicated computer terminals)

In buildings where a vendor kiosk is available, the Vendor Representative must check-in electronically, and print a temporary identification badge, which is to be worn above the waist at all times while visiting. A current list of vendor kiosks is available at https://wexnermedical.osu.edu/utility/footer/supplier-interaction. Kiosks are generally located in the building's lobby or the reception areas of procedural units.

When leaving the premises, the Vendor Representative should check-out, either at a kiosk or using a mobile application. Temporary badges should be removed, torn and discarded.

B. Buildings Without Vendor Kiosks

In buildings where a vendor kiosk is not available, the Vendor Representative must check in with the nearest available staff member and leave a record of their name, company, destination departmental contact, and purpose for visiting, in a visitors or vendors check-in log. (To be clear, the vendor representative must still be credentialed in the vendor management system.) Whenever possible, a temporary badge will be issued by the department, and/or the Vendor Representative should wear their company name tag or badge. Check-out should be completed whenever possible. All additional responsibilities of this policy will apply to the occupant staff members of those buildings.

III. Conduct While On Premises

A. Sales Calls

Vendor Representatives are not permitted to solicit or “pitch” products or services without an appointment. Sales calls should be scheduled through the Supply Chain department and/or the relevant department. Vendor Representatives are strictly prohibited from soliciting patients or visitors.

B. New Products

1. Vendor Representatives who have new products to introduce to OSUWMC must follow the New Product Introduction process and contact the Value Analysis team within Supply Chain for additional information. See https://onesource.osumc.edu/departments/SupplyValueAnalysis/Pages/default.aspx; or email: valueanalysis@osumc.edu

2. Vendor Representatives are not to present unapproved equipment suppliers or participate in any procedure, demonstration, or training prior to registering in OSUWMC's vendor management system.
C. Patient Interaction

Vendor Representatives may only have contact with patients if and when all of the following requirements are met:

1. The patient requests contact with a Vendor Representative, OR an OSUWMC staff member requests a Vendor Representative have contact with a patient, AND both the patient and OSUWMC staff agree that the Vendor Representative may have contact with the patient.

2. An OSUWMC staff member escorts the Vendor Representative while the Vendor Representative is in the patient care area.

3. An OSUWMC staff member introduces the Vendor Representative to the patient.

4. The OSUWMC staff member documents in the patient’s medical record that a Vendor Representative visited with a patient.

5. The patient’s medical record information is not shared with the Vendor Representative unless the patient has authorized that action in accordance with the applicable OSUWMC Policy regarding the release of patient information to third parties.

6. If the Vendor Representative is a patient service representative or a case manager representing a third-party payor, that Vendor Representative must coordinate his/her discharge planning responsibilities with the patient’s OSUWMC caregivers, particularly the Patient Care Resource Manager and/or social worker.

IV. OSUWMC Staff Responsibilities

A. Providing Notice

Any staff member scheduling a meeting with a Vendor Representative should make the vendor aware of our vendor interaction and access policies and provide additional information about doing business with OSUWMC by directing the vendor to the Supplier Interaction page on the OSUWMC website at https://wexnermedical.osu.edu/utility/footer/supplier-interaction.

B. Assisting With Check-In

Staff who are expecting Vendor Representatives will assure that the vendor and the representative are properly registered, checked-in and badged.

C. Directing Un-Badged Vendor Representatives

If a Vendor Representative is found to be on the premises without an appointment and/or proper identification badge, staff will direct that individual to the appropriate vendor kiosk/check-in area. If the Vendor Representative is not registered in the OSUWMC vendor management system, staff will ask them to leave and to return only when registration is complete. If a Vendor Representative fails to comply, staff will contact the department director, administrator, or Security, who will escort the individual from the building and report the incident to the Supply Chain Department.

V. Non-Compliance
Vendor Representatives who fail to comply with this Policy will be prohibited from entering OSUWMC buildings and jeopardize their company’s standing as an approved, or potential, vendor with OSUWMC.

VI. Resources and Related Policies

4.15, 02-57 Background Check, Background Check 02-57 (48104) (02-57)
4.17 Self-Disclosure of Criminal Convictions

Vendors in the Operating Room Policy, https://policytech.osumc.edu/dotNet/documents/?docid=54031
OSUWMC Badge Request Process, Self-Disclosure of Criminal Convictions 02-47 (48139)
E-7, Monitoring Imaging Patient Care Equipment Vendors, https://policytech.osumc.edu/dotNet/documents/?docid=54337

Wexner Medical Center Vendor Interaction Policy, Vendor Interaction Policy 5.18.17
09-07 (James), 09-11 (UH) Use of Patient Information by the Hospital and Medical Staff, Use of Patient Information by the Hospital and Medical Staff 09-07,09-11

09-09 Release of Information to Patients, Release of Information to Patients 09-09
09-03 Patient Information & HIPAA, Patient Information and HIPAA 09-03
Downstream Entity Compliance Policy, https://policytech.osumc.edu/dotNet/documents/?docid=51976

Contacts

<table>
<thead>
<tr>
<th>Subject</th>
<th>Office</th>
<th>Telephone</th>
<th>E-mail/URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supply Chain Vendor Relations</td>
<td>Supply Chain</td>
<td>614-293-0512</td>
<td><a href="mailto:supplierrelations@osumc.edu">supplierrelations@osumc.edu</a></td>
</tr>
</tbody>
</table>

History

Revised: April 7, 2008; September 2017; May 1988; December 2018
Approved by: Wexner Medical Center Supply Chain, Safety, Security, Epidemiology, Human Resources