



WHEELING AND BELMONT HOSPITAL

Vendor Policy Guide

How to do Business with Hospital Purchasing



WHEELING HOSPITAL

Vendor Policy Guide

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Wheeling Hospital Purchasing

Vendor Keys to Success

Vendors are required to notify Purchasing representatives (Buyers/Sr. Buyers) of all projects and requests concerning affiliate departments. Compliance with this requirement is mandatory to continue vendor in good standing status.

Purchasing will assure all value analysis for new products and standardization criteria are met prior to any purchase agreement.

Purchasing will solicit three competitive bids on all purchases with a total requisition cost exceeding \$5,000. To negate this process, the requesting department must provide sole source documentation.

An Authorized requisition is essential to begin the purchase order process. Verbal notification of potential purchases is not acceptable without such review.

Contracts should be reviewed by the Wheeling Hospital Legal Department. No vendor provided contracts will be accepted.

Corporate officers of the selected vendor will be required to sign all legal documents and return these documents to Purchasing for signature approval. At this time an authorized representative of the Wheeling Hospital will execute and the vendor will receive a copy of the contract.

Quotations must be submitted to Purchasing. Validity of quotes received with requisitions will be the prerogative of Purchasing. Quotations must be current and all line items must be individually discounted indicating list price, percentage discount, dollar discount, and final cost. It is essential that each line item be separately priced.

Purchasing will begin the purchasing/bid process with written notification from a department or affiliate.

Purchasing will validate invoices. Price increases on fixed pricing will not be tolerated.

If price caps have been negotiated, a 30-day written notice must be delivered to Purchasing prior to effective pricing date.

Vendor Selection Criteria

Purchasing is responsible for the selection of vendors that will provide the Health System with cost effective products and services in a timely manner.

Vendor selection criteria:

Existing vendors will be evaluated on the following:

1. **Responsiveness to emergencies**
2. **Vendor innovation (helping the institutions improve quality and reduce costs.)**
3. **Adherence to policies (Vendormate, invoice processing, etc.)**
4. **Back orders**
5. **Invoice discrepancies**
6. **Committed pricing**
7. **Price increases**
8. **Order errors**
9. **Invoices with items in same order as the purchase order**
10. **Delivery lead times**
11. **Product support**
12. **Product packaging**
13. **Distribution programs**
14. **Financial stability (based on consideration of increased contracting or on poor performance)**
15. **Favorable terms negotiations**
16. **Contractual compliance**
17. **Discount pricing.**

Purchasing will monitor vendors with input from end user departments on a continuing basis. Various purchasing data reports, user inquiries, purchasing/expediting experiences, meetings with users and other inputs will be cataloged and maintained in vendor-specific files within Purchasing by the contract administrator.

Users may request information on specific vendors at any time. Vendors may also request information on themselves at any time. If particular information is judged to be significant, a

general correspondence may be created to present information to all users of a particular vendor.

If vendor performance is deemed to be unacceptable on a continuing basis or because of a serious incident, the vendor will be notified by Purchasing. Depending on the type, severity, past history, etc. of the unacceptable performance the vendor may be issued a warning, disqualified for additional business or disqualified from any business with the Wheeling Hospital System. Fines may be imposed per previous contractual agreement.

Vendor Relations

Guidelines for the Hospital's interactions with vendors of supplies, pharmaceuticals, equipment and services. These guidelines are intended to encourage disclosure and discussion and to provide guidance for decision making. Employees and medical staff must disclose to and receive prior approval from their Unit Administrator or Director for vendor-related activities.

We are committed to honest business dealings with our vendors, and we strive to develop mutually advantageous relationships. In conducting business with vendors, employees and medical staff are also expected to act fairly and objectively and in the best interest of the Hospital. Our selection of vendors will be based on quality, price, and services offered, which make them competitive with other suppliers.

Gifts

Employees and medical staff may not accept gifts or gratuities from suppliers, with the exception of novelties of nominal value. Gifts received which are unacceptable according to this policy, should be returned to the donors or donated to an appropriate charity.

Entertainment

Employees and medical staff may not accept primarily social entertainment offered or sponsored by vendors. Entertainment with vendors must be for valid business purposes and must benefit the Hospital. Entertainment is not construed to mean a business meal or function that is directly related to business. The business meal or entertainment functions should be unsolicited and proportional to the related business activity.

Samples of Goods and Services

Samples of goods and services may be accepted only for purposes of evaluation and must be procured in accordance with Hospital policy. Free samples for patient use, when permitted by Hospital policy, may be dispensed only with a disclaimer regarding hospital endorsement. Pharmaceutical samples, in accordance with Hospital policy, are prohibited from being distributed for patient use.

Consulting and Research Activities

Participation in consulting and research activities with vendors shall be in accordance with Hospital policy. Refer to Administrative Policy and Procedure Manual Section: Ethics, Rights, Responsibilities Policy #15 Investigational Studies and/or Clinical Trials.

Vendor Sponsorship

Vendor sponsorship of travel, educational conference and seminars must be valid business purposes and must benefit the Hospital. Travel expenses paid by vendors, if any, must be proportional to the business activity that will occur during the trip.

Confidentiality of Business Matters

Official business matters such as price negotiations and contractual arrangements are considered to be confidential. Employees and staff should exercise discretion when discussing price negotiations and contractual arrangements.



Vendor Protocol

Establish general operating procedures for all vendor representative visits, and the receipt and delivery of products to the Wheeling Hospital System.

These procedures apply to all vendors servicing the Wheeling Hospital System.

Vendor Receipt and Delivery to the Wheeling Hospital System

- All packing slips, invoices, manifests, and like documentation must have reference to the purchase order numbers.
- All packing slips, invoices, manifests, and like documentation must include the stock number assigned when supplied on the purchase order. This applies to storeroom, stocked items.
- Multiple purchase order invoices and packing slips must be illustrated in such a way that each line item is identifiable to a specific purchase order.
- Reference must be made on the packing slip and invoice to those items that were not filled to complete status (partial, back orders, etc.) on the purchase order processed.
- Shipments that are drop-shipped by a vendor not indicated on the Purchase Order must have the original vendors name and Hospital issued purchase order number on the packing slip.

Vendor Representative Visitation Protocol – Wheeling Hospital

- All vendors who wish to visit a specific individual within a unit or a department must schedule an appointment following the guidelines established in that area. All Vendors must be registered with Vendormate, our vendor tracking system.
- Only designated entrances at each institution will permit vendor representative access with requirements for Vendormate sign in and out. Parking is permitted to vendors in parking lot sections S & T behind the flood wall, located behind the hospital.
 - A printed badge from Vendormate indicating “vendor representative” will be issued and returned upon completion of the vendor representative appointments. Failure to secure and return the badge and utilize the Vendormate sign-in/sign-out process will be cause for reprimand based on said procedure.

WHEELING HOSPITAL

- No vendor will be permitted in patient care areas without specific written permission or accompanied by department employee.
- No vendor will be permitted to enter supply storage areas unless accompanied by department employee.
- Vendor representatives should not schedule any social or academic meetings on their own accord. Such meetings should be coordinated through the Administrator and a faculty or staff member who is ultimately responsible for the Department.
- Any loaner/rental equipment that is brought into the hospital by a vendor must be inspected by the Biomedical Department prior to use and notification sent to the Staff Development Department for nursing and through the director/manager of ancillary departments as appropriate.
- Any education, training or orientation on equipment, products or services must be approved by the Staff Development Department for nursing before the vendor works with staff/departments or the director/manager of ancillary departments before the vendor works with staff/departments.

Vendor Representative Visitation Protocol –Purchasing

- Vendor representatives must secure an appointment from the appropriate individual within purchasing prior to a visit.
- A daily approved vendor visit list will be forwarded to Hospital Security and those vendor representatives on that list will be permitted in the building.
- Any observed or reported violation of the Wheeling Hospital visitation policy will be handled in the following manner:
 - **1st Occurrence** – A written confirmation of the incident and a notification that if the incident occurs again, the vendor representative may be barred from returning to the institution for sales marketing activities and notification will be sent to the vendor representatives immediate superior.
 - **2nd Occurrence** – A letter to the vendor representatives immediate superior with a copy to the vendor’s senior sales and marketing officer informing them that a second incident occurred violating the Wheeling Hospital System policy and that this specific individual will not be permitted to the institution again. Another representative may be substituted as to continue the vendor/institutional relationship.

Medical/Surgical Representatives

- Wheeling and Belmont Hospitals have a product review process mandated by the Value Analysis Committee and Product Selection Committees, our internal governing bodies. This process involves product evaluation, economic evaluation, training and inventory matters, etc.
- We appreciate the working relationship you have with our facility and the work done on your part to bring in products on a rapid basis. Please note you must obtain written prior approval from Purchasing as directed by the VAC or Product Selection Committees for items to be considered payable. Unless you've obtained written prior approval from either of these committees or from the Administrator of the requesting department for items to be purchased, we will consider them to be in a no-charge trial basis status. This gives us an opportunity to consider staff education needs as well as perform the due diligence associated with our current products and contracts.
- Marketing or discussing any non-pharmaceutical products with physicians or staff at Wheeling Hospital is strictly prohibited. Should there be an incidence of noncompliance, we will reserve the right to suspend the vendor and company from Wheeling Hospital and all associated facilities.
- With appropriate permission of either of these committees, vendors may inform physicians or staff of new products.
- Our physicians are not authorized to act as agents to amend or renegotiate these provisions nor can they legally bind the institution in purchase/lease/rental agreements.

If the two violations cycle occurs again with the same vendor, Purchasing will request the vendor to attend a meeting which will inform them that another violation will result in the vendor being removed from the approved vendor status list at the Wheeling Hospital System for a period of ninety (90) days.

A contract signed by other than an Administrator of the associated department, or by the Purchasing Department, is invalid and voidable. No employees (except those above) have the authority to bind any Wheeling Hospital System entity to a contract, purchase order or agreement, promise to pay, sale or trade-in, custodial obligation or equipment evaluation, contractual change or relief, lease or rental agreement, or purchase order modification, addition, or deletion. Any such improper obligation, even if initially honored by the Health System, is voidable at the discretion of the Health System.

Purchase Order Required for Vendor Payment

Orders are not considered binding, nor will respective invoices be paid, without a corresponding purchasing order and receiving report, service contract and corresponding signed work order, or consulting agreement.

Purchasing is solely authorized to commit funds for any purchases. This committal is accomplished by issuing a purchase order.

Any orders placed directly to a vendor by a department (unauthorized request issued by department) are not valid.

Invoices for unapproved orders must be presented from the vendor to the individual responsible for placing the order.

If you bring an approved medical device into Wheeling or Belmont Hospital you are required to provide Wheeling or Belmont Hospital with a completed price work order on the day the device(s) were used. The work order must be signed for by the department requesting the device. The original work order must be submitted to Wheeling or Belmont Hospital Purchasing on the same day the device was used and a copy must be left with the requesting department.

Wheeling or Belmont Hospital will not add to, or amend any purchase order once the paperwork has been submitted to Wheeling or Belmont Hospital Purchasing. Any “forgotten” items will be considered a donation to the hospital.

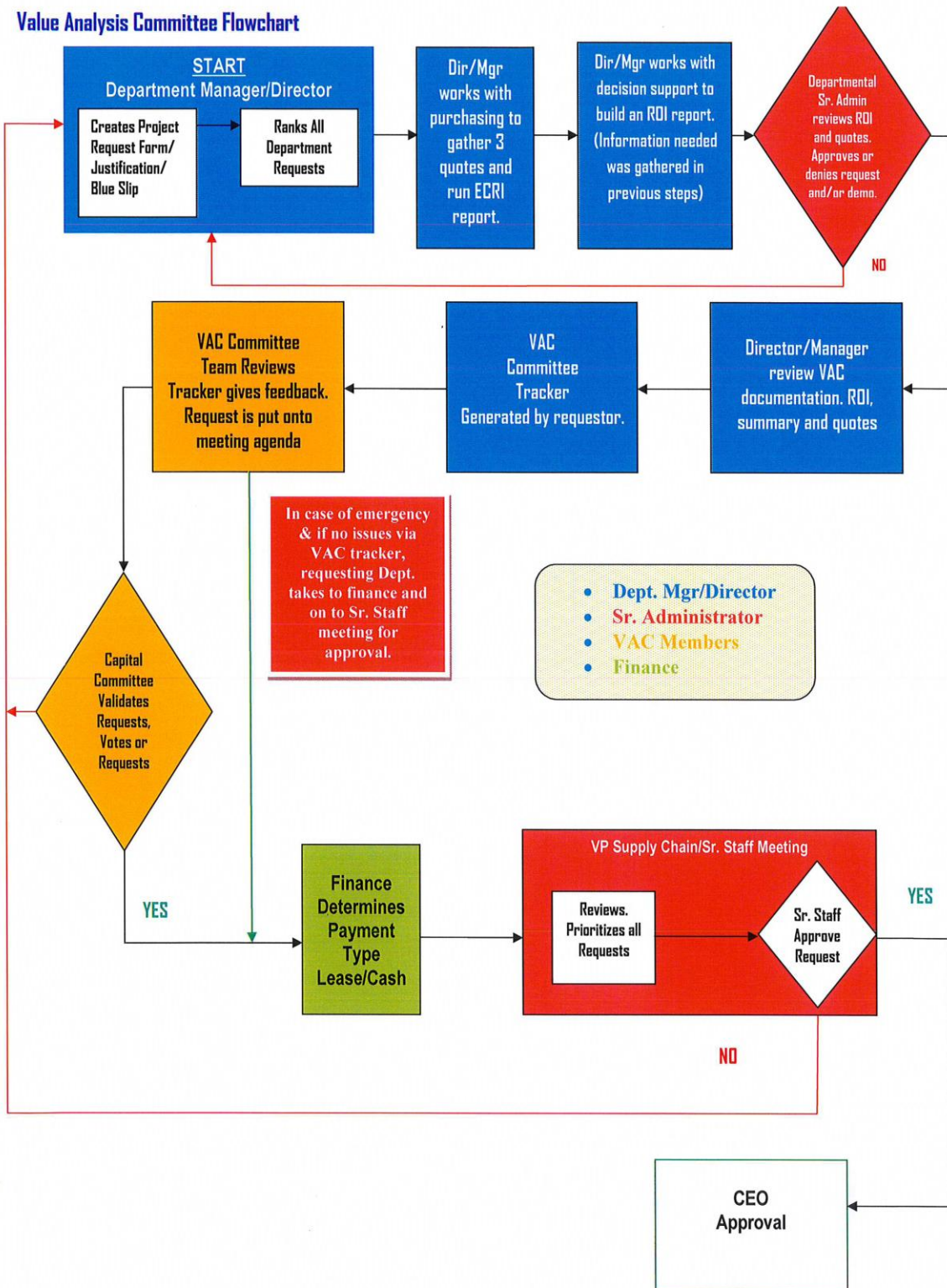
Any product that has been used by the hospital for which completed paperwork is not received within 24 hours will be considered a donation.

Wheeling or Belmont Hospital will not pay for any device that has not been approved by the Supply Chain Department PRIOR to being used at Wheeling or Belmont Hospital, these will be considered donations.

Under NO circumstances will Wheeling or Belmont Hospital pay for anything that has not been invoiced within 30 days of receipt by the hospital.

WH Capital Equipment Procurement Process

Value Analysis Committee Flowchart



Purchasing/Materials Management Telephone List

- **James Murdy, Chief Financial Officer**
304-243-3681 jmurdy@wheelinghospital.org
- **Scott Satkoske, Director – Clinical Engineering Supply Chain Mgmt.**
304-243-5090 ssatkoske@wheelinghospital.org
- **Ralph Brandon, Manager - Purchasing**
304-243-5127 rbrandon@wheelinghospital.org
- **Andy Cross, Buyer – Purchasing**
304-243-3258 kcross@wheelinghospital.org
- **Chris Erbacher, Assistant – Purchasing**
304-243-8632 cerbacher@whzimbra.wheelinghospital.org
- **Ginny Johnson, Buyer – Purchasing**
304-243-3265 vjohnson@wheelinghospital.org
- **Teresa Mahoney, OR Inventory Controller – Purchasing**
304-243-7135 tmahoney@wheelinghospital.org
- **Cheryl Tucker, Buyer – Purchasing**
304-243-3696 ctucker@wheelinghospital.org

Vendor Representatives in Restricted Areas

The vendor may have access to restricted patient care areas only under the following condition:

1. Documentation of a completed Vendor Profile and signed Confidentiality Agreement are on file in Purchasing.
2. Documentation of an annual negative TB test or negative Chest X-ray.
3. It is the sole responsibility of the vendor to keep this information current on an annual basis.
4. The vendor may act as a resource regarding their product only and may not scrub in or participate in direct patient care.
5. The vendor may not handle sterile supplies or visit sterile supply storage areas without a department staff member present.
6. The vendor may not have access to procedural schedules. Time of arrival will be given to the vendor by a designated HMHP staff member or Department Manager.
7. Medical equipment and other vendor devices must be reviewed and approved prior to use by the Biomedical Department as appropriate.
8. Vendors with specialized training may perform remote calibrations to adjust devices as delineated by physician specification.
9. Vendor access to a restricted procedural area will not be granted until the patient is prepped and properly draped. Appropriate attire is required in all restricted areas.
10. The presence of a vendor during a procedure must be disclosed to the patient. Documentation for notification and approval of vendor presence on behalf of the patient may be noted on the informed consent form or within the physician progress note.
11. The vendor is to remain in their assigned area/procedural room. The vendor is not to be in the physician lounge, staff lounge or restricted hallways unless previous arrangements and permission has been granted by department management.
12. No brochures or vendor sales material is to be distributed without approval of the Department Director.
13. Sales representatives or observers must immediately vacate the procedure room at the request of any member of the medical team.

Infection Control and YOU at Wheeling Hospital

- ◆ **YOU** are ultimately responsible for understanding the risk of exposure to blood or other potentially infectious materials at the workplace.
- ◆ The Infection Control program at Wheeling Hospital works only if **YOU** are committed to following the guidelines described in this handout.

Glossary of Terms-

Transmissible infections- infections caused by microorganisms that are highly contagious and easily spread to and from healthcare personnel.

Microorganisms- a potentially infective agent that is so small it can only be seen with a microscope.

Hand Hygiene

- ◆ **Hand Hygiene is the foundation of Infection Control.** This is the single most important procedure for PREVENTING healthcare associated infections!!
- ◆ Liquid soap dispensers are available at each sink. An alcohol-based hand rub is available as an alternative to handwashing. Hand lotion is provided by the hospital for use in clinical areas.

When Should I Wash My Hands With Soap and Water?

- ◆ Hands should be washed when they are visibly dirty, utilize gloves if anticipation of contamination with blood, body fluids, or other bodily substances.
- ◆ Hand hygiene should be completed before and after patient contact.
- ◆ After contact with body fluids, excretions, mucous membranes, non-intact skin and wound dressings if hands are **NOT** visibly soiled.
- ◆ Before eating, drinking, smoking or applying makeup.
- ◆ After using the restroom.
- ◆ In patient care areas when working with patients that have **C-Difficile**.

Key Point for Handwashing:

1. Wet hands under warm running water keeping hands lower than elbows.
2. Use a generous amount of liquid soap.
3. Wash hand vigorously for at least **20 seconds**. Clean surfaces of hands, fingers, and around nails.
4. Keeping your hands down rinse them well with warm running water (Avoid splashing).
5. Dry well with a paper towel.
6. Use a **CLEAN** paper towel to turn off faucets and open the restroom door.
7. Discard paper towels in trash receptacle.

When Should I Use the Alcohol-Based Hand Rub?

- ◆ When hands are **NOT** visibly soiled.

- ◆ Before and after each patient contact - after removal of gloves.
- ◆ Before any invasive procedure (insertion urinary catheter, central lines, peripheral vascular catheter, or invasive device) and donning sterile gloves.
- ◆ After contact with body fluids, excretions, mucous membranes, non-intact skin and wound dressings if hands are **NOT** visibly soiled.
- ◆ When going from a contaminated body site to a clean body site during patient care.
- ◆ After contact with items in the patient room (including medical equipment).

Key Points for Using the Alcohol-Based Hand Rub: Hand Hygiene stations are provided at the entrance/egress of the hospital and should be utilized as people come and leave the facility

1. Apply alcohol-based foam to palm of one hand.
2. Rub hands together, covering all surfaces on hands and fingers.
3. Continue to rub hands together until hands are dry.

NOTE: The Wheeling Hospital Hand Hygiene guidelines ban artificial nail use if you handle patient care items or provide patient care. Reinforcement of hand hygiene practices with our patients and families is an important component of personal hygiene.

In the Workplace

Exposure to bloodborne pathogens in the workplace is a major concern to employees and those doing contracted work for the facility. The majority of exposures to bloodborne diseases in a hospital is by direct exposure from needles or sharps but also can occur from splashing of blood or body fluids/substances into eyes, nose, or mouth.

- The Occupational Safety and Health Administration (OSHA) standards address this concern in the Bloodborne Pathogen Rule which requires both employers, employees, and those contracted for work in the facility to prevent the spread of bloodborne diseases.

USE CAUTION with any type of secretion or excretion that comes from the human body!

At Wheeling Hospital our facility practices the principles of **Standard Precautions** which means handling all blood and body fluids/substances as if they are potentially contaminated to prevent exposure to bloodborne pathogens (HIV, Hepatitis B, and Hepatitis C).

The facility also practices the principles of **Transmission-Based Isolation Precautions** which applies to patients with suspected or documented infectious or contagious diseases or for some type of multi-drug resistant organisms.

Transmission-Based Precautions include:

Contact Precautions (Neon Green Sign) - Must wear gowns and gloves.
(Applies to C-difficile, gastroenteritis, rotavirus, lice, scabies, multi-drug resistant organisms like VRE and MRSA, etc.).

Droplet Precautions (Neon Gold Sign) - Must wear gowns, gloves, and yellow isolation mask.

(Applies to influenza, meningitis, mumps, meningococcal pneumonia, etc.).

Airborne Precautions (Neon Pink Sign) - Must wear gowns, gloves, N-95 respirator. (Applies to Tuberculosis, Chicken pox, etc.).

Patient will be in a **Negative Pressure Room** and both doors of the room must be closed to allow for proper ventilation to occur.

Response to Blood or Body Fluid Exposures- contact with blood, body fluid or substances the individual should **IMMEDIATELY** cleanse the area.

- ◆ Wash exposed skin with soap/water-stop bleeding.
- ◆ Flush mucous membranes with large amount of water at eye wash stations.
- ◆ Report the exposure to the director/manager/supervisor in the area.
IMMEDIATELY.
- ◆ Report to Corporate Health Monday-Friday 7:30-4:30; Emergency Department other hours.
- ◆ Ensure Infection Control is notified.



Regulated Waste-

Place regulate waste in a receptacle that exhibits the **biohazard symbol** (signs are red). The biohazard symbol is the universal symbol placed on any container or area that may contain regulated waste.

Regulated Waste Includes:

- ◆ Blood/Body Fluids/Substances.
- ◆ Other potentially infectious material.
- ◆ Contaminated sharps.
- ◆ Any pathological or microbiological wastes.

Sharp Containers are provided for disposal of needles and sharps. The containers are puncture proof containers and should be changed when sharp items are at the fill line on the container.

Pharmaceutical Waste Containers are provided for disposal of medication. The containers are puncture proof containers and are blue/black with designation on what should be placed in each container.

NOTE: Refer to the Infection Control policies in the Administrative Policy Manual – Chapter 6 and the Infection Control Manual on the intranet under resource tab for information related to blood/body fluid spills and clean up of infectious waste.

Workplace Practices Utilized to Reduce Risk of Infectious Exposures:

- ◆ **Do not eat, drink, or put objects into mouth** in areas where contamination is likely.
- ◆ **Do not apply cosmetics, lip balm, or contact lenses** in areas where contamination is likely.
- ◆ Utilize **Personal Protective Equipment** (gowns, gloves, masks, goggles, aprons, respirators, head covers and shoe covers) when appropriate and consider the task to be complete so that correct PPE is chosen. Also, utilize a CPR mask when performing mouth to mouth CPR.
- ◆ Minimize the risk of exposure by containing, removing, and disinfecting all blood or body fluid spills immediately.
- ◆ Stay current on immunizations such as Hepatitis B, Tetanus, Meningococcal, and Influenza; do yearly PPD testing.
- ◆ Utilize correct technique for removal of all PPE.

CAUTION:

Remember that wearing gloves does not replace hand hygiene, which is the most basic element of infection control. Gloves may be perforated during use and bacteria may multiply rapidly on gloved hands so **wash your hands!!!**

6/7/11