BC 5.110 - Baystate Health Vendor Policy

1. **Policy**
   Vendors conducting business with Baystate Health, Inc. (BH) will do so in accordance with the BH Vendor Policy and the related guidelines herein. Vendors shall interact with BH employees and staff in a manner that meets ethical standards, protects patient confidentiality, does not interfere with patient care, and encourages the appropriate, efficient and cost effective use of equipment, supplies, and pharmaceuticals within BH. This policy shall be enforced by BH which reserves the right to revoke vendor access for cause.

   It is the responsibility of all BH Departments to help ensure that vendors are compliant with this policy.

   The presentation of products and services by vendors at BH is a privilege and not a right. Failure of a vendor to respect this policy may result in termination of the privilege to access BH facilities.

2. **Purpose**
   a) To provide guidelines for BH employees and staff interacting with vendors.
   b) To define the expectations for appropriate vendor conduct.
   c) To maintain control of all vendors having access to BH.
   d) To enhance security and patient confidentiality.
   e) To ensure that unauthorized solicitation does not occur.

3. **Definitions**
   Vendor - Any representative or agent of a manufacturer, distributor or company who visits BH for the purpose of soliciting, marketing, or distributing products, technology, or information regarding the use of products, equipment, medications, or services. This does not include vendors visiting BH solely to deliver or pick-up products, external contractors working under the authority of the Engineering or Facilities Departments, or consultants retained for specific purposes. Vendors are further defined by the following:

   o **Corporate Vendor** – A vendor who has an established or potential contract with BH and who has worked with Supply Chain to complete the Baystate Health Corporate Vendor Requirements accessed through Baystate’ approved web-based vendor management system. This system creates a Corporate Vendor Daily badge which grants access to patient care areas (e.g., Emergency Department, Inpatient Units, Operating Room areas, Clinics, etc.).

     **Note:** In rare instances, it may be necessary for a Corporate Vendor Programmer (CVP) to provide limited assistance in the form of programming or calibrating a medical device, which may have a direct effect on the patient. Such assistance is permitted only if in accordance with specific BH policies (e.g., CO 2.210 and PS 1.003) and if appropriate approvals are obtained from the Department of the physician utilizing the services of the CVP (requiring certification of the CVP and documentation in the patient’s records).

   o **Temporary Vendor** – A vendor who at the discretion of a Department receives temporary privileges and a “Temporary” identification (ID) badge to visit staff by appointment only to
promote medical or products or equipment on a limited basis. It is expected that a BH Department will not allow a Temporary Vendor access to any patient care area.

4. Registration
   a) **Corporate Vendors:** All Corporate Vendors must become a premium member of BH’s chosen web-based vendor credentialing management system. All new Corporate Vendors will schedule a meeting with Supply Chain personnel to review BH vendor access policies and the Value Analysis process.

      BH Clinical Value Analysis
      759 Chestnut Street
      Room SG484
      Springfield, MA TEL: (413)794-2314
      (413)794-2486

      o Once approved, a Corporate Vendor will be responsible to sign in and sign out of the web-based vendor credentialing management system. The appropriate vendor ID badge will be issued upon sign in. Pursuant to the Baystate Health Appearance Standard (see BHS-HR-114A), ID badges shall be worn at all times and be clearly visible, picture side out, and be located between the shoulders and the waist for easy reading.

   b) **Temporary Vendors: Prior to each visit**, all Temporary Vendors must register at the designated BH locations:

<table>
<thead>
<tr>
<th>Location</th>
<th>Contact Information</th>
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<tbody>
<tr>
<td>BMC: Security Office</td>
<td>759 Chestnut Street Room CG345 Springfield, MA TEL: (413) 794-5534</td>
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<tr>
<td>BFMC: Security Department</td>
<td>164 High Street Security Room G4047 Greenfield, MA TEL: (413) 773-2295</td>
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<td>BMLOC: Human Resources</td>
<td>85 South Street Wetherby Wing Ware, MA TEL: (413) 967-2274</td>
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<tr>
<td>BWH: Human Resources</td>
<td>40 Wright Street Griswold Center Ground Floor Palmer, MA TEL: (413) 370-5304</td>
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<tr>
<td>BNH: Surgical Lobby</td>
<td>115 West Silver Street First Floor Westfield, MA TEL: (413) 571-0531</td>
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5. Scheduling an Appointment
   a) **All vendors must have a previously scheduled appointment with a specific individual at BH.**
   b) In order to book the appointment, the vendor is to contact the BH employee and identify the nature of the visit and agree upon a mutually convenient time to meet.
   c) The BH representative must confirm that the Corporate Vendor is active in the web based vendor management system to ensure that all registration requirements (health, confidentiality, safety, product certification) have been met, prior to the vendor accessing any patient care area.
6. **Visitation**  
   a) All vendors are to proceed directly to the area of his/her appointment, conduct their business, and depart the premises.  
   b) Specific appointments do NOT represent authorization to visit other physicians or personnel.  
   c) Admittance to patient care areas is not permitted except as noted below:  
      o Corporate Vendors may be present in patient care areas at the approval of the clinical or medical director (or Department designee) only to the extent that their presence is required to provide staff education or to ensure the proper use of equipment or material. In such instances, it is the responsibility of the individual granting approval to ensure requirements of CO 2.210, CO 11.135, PS 1.003 and PS 1.004 are met.  
   d) The clinical or medical director (or Department designee) of the area to be visited by the vendor, is responsible for ensuring that all BH and Departmental policy requirements are met.  

7. **Vendor Limitations**  
   a) Vendors shall not come to BH if they are sick with a potentially contagious illness.  
   b) There shall be no more than two vendors present in a patient care area unless deemed necessary by Department designee.  
   c) Vendors are prohibited from using the BH overhead paging system.  

8. **Parking**  
   *Vendors are prohibited from utilizing any valet service, since this is a convenience reserved for patients and families. Vendor parking is limited to the following areas:*  
   a) BMC: The Center Lot, 24 hours per day Monday – Friday; closes at 3PM on Fridays (shuttle service is provided). Starting at 3PM on Friday and through the weekend, on campus parking is available.  
   b) BFMC: Behind the Hospital or on Beacon Street  
   c) BMLOC: Behind the Hospital’s Parking Lot A  
   d) BNH: Patient/Visitor parking (Parking Lot A)  
   e) BWH: At any visitor designated parking area  

9. **New Products or Product Upgrades**  
   a) BH is interested in product advancements and new technologies and welcomes registered vendors (see Sec. 4) to discuss the merits of their products through scheduled appointments (see Sec. 5) with Supply Chain, Clinical Value Analysis, Physicians, Department Managers and/or their designees.  
   b) The BH proponent advocating for the new or upgraded product is responsible for presenting its merits to the appropriate Value Analysis Committee, Clinical Practice Committee, or Department meeting.  
   c) Following Committee or Department approval to pursue product acquisition, Clinical Value Analysis will collaborate with the BH proponent and other BH partners to identify and resolve potential issues (e.g., the impact on other Service Lines/Departments/Divisions, projected budget ramifications, educational needs, etc.).
Note: Pathology Services Administration (413-794-5474) and Pharmacy Services (413-794-4044) are responsible for the review and approval of new or upgraded laboratory or pharmacy products, and will collaborate with other BH Departments to identify and resolve any potential issues.

10. Pharmacy Observership Programs
   ☐ Programs that involve education for pharmaceutical representatives by involving contact with, discussion of, or observation of individual patients, are prohibited unless approved in advance by the Chief/Chair/Vice President and or Senior Vice President of Division.
   ☐ Pharmacy Product Detailing: Products may be detailed ONLY if they meet ALL of the following criteria:
     1) Product is on formulary.
     2) Product is on contract via the Hospital Buying Group if applicable.
     3) Detail information is consistent with any guidelines/restrictions established by the Pharmacy and Therapeutics Committee. (Refer to policy BH-AA-2.06 for sample drug management)

   Contact BH Director of Pharmacy, or designee, by calling: (413)794-4044.

11. Negotiations and Product Acquisitions
   a) The BH proponent advocating for the new or upgraded product is responsible for informing BH Supply Chain of the need to negotiate with the vendor.
   b) BH Supply Chain will lead the negotiations with the vendor, and will include the proponent and any other interested parties (e.g., Clinical Value Analysis, BH Financial Analysis, etc.) in negotiating price, quantities, service levels, and any other terms and conditions.
   c) The authority to contractually obligate BH for new or upgraded products resides with the proponent’s Department Manager/Director/Vice President as outlined in the BH Approval and Execution of Contracts Policy (Corporate Policy GO 08).
   d) All vendors are required to obtain a valid purchase order before bringing new or upgraded products and/or equipment into BH.

12. Product Samples
   a) Medical/surgical product samples, pharmacy samples, and laboratory samples are expressly forbidden within public and patient care areas.
   b) The vendor may provide samples to physicians within their own PRIVATE offices according to FDA, Public Health and DEA guidelines. The vendor and private physician office will assume joint responsibility for all samples.
   c) The Department of Pathology must be notified before bringing any laboratory samples/testing products into BH since laboratory products are strictly regulated by CMS, JCAHO, CAP, etc.

13. Patient Confidentiality
   Vendor representatives shall not acquire record, convey or have access to any information which compromises patient confidentiality. A BH Department representative considering any exception to this rule should contact the BH Compliance Department.
14. **Vendor Policy Violations**

Violations of this policy may result in any or all of the following:

a) Verbal warning to the vendor and/or the vendor’s Manager.
b) Written reprimand to the vendor and/or the vendor’s Manager.
c) Termination of the privilege to access BH facilities.

15. **POLICY CROSS-REFERENCES**

- GO 08 Approval and Execution of Contracts policy
- CO 11.135 Safety Education for Employees
- PS 01.003 Corporate Vendor Representatives or Programmers in the Operating Room
- PS 01.004 Visitors in the OR
- BH-AA-2.06 Policy on observation experiences
- BC 1.124 Interactions with Drug, Device, Biological, Medical (Industry)

**APPROVALS**

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<tr>
<th>Approved:</th>
<th>BH Policy Management Committee</th>
<th>Date</th>
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<tbody>
<tr>
<td>Policy Owner: (department name)</td>
<td>Finance and Pharmacy</td>
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<tr>
<td>Revising Author:</td>
<td>Donald Keene, Sr. Director, Supply Chain</td>
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<td>Reviewers: (Stakeholders)</td>
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<td>Replaces:</td>
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