

UC San Diego Health

Policy Name:	Vendor Policy and Guidelines
Policy Number:	UCSDHP 550.1
Authoring Department:	Supply Chain Services
Last Revised Date:	March 22, 2022

APPLICABILITY:

This policy is an institutional policy applicable to all parts of UC San Diego Health Sciences, which reports to the Vice-Chancellor of Health Sciences.

UC San Diego Health Sciences includes UC San Diego School of Medicine, Skaggs School of Pharmacy and Pharmaceutical Sciences, and UC San Diego Health.

UC San Diego Health clinical locations include (but are not limited to): UC San Diego Health - Hillcrest, Jacobs Medical Center, Moores Cancer Center, Sulpizio Cardiovascular Center, Koman Outpatient Pavilion, and other health system outpatient clinic locations.

Departmental policies and procedures are unit-specific within a single department, unit, or service area.

The scope of this policy applies to any team member involved with making business, financial, or purchasing decisions at UC San Diego Health Sciences.

PURPOSE:

This policy establishes guidelines governing the activity of all onsite and offsite vendors who are doing business or intend to do business with the University of California, UC San Diego Health, as applicable. Only registered vendors who have provided all the up-to-date credentials required by the UC San Diego Health will be provided access to the facility. The presence of any vendor in a procedure room, or patient care area, must be justified by their contribution to positive patient outcomes and is subject to approval by the appropriate department personnel. The purpose of this policy is to: (1) Protect the health and privacy of UC San Diego Health patients; (2) Ensure that vendors who visit the UC San Diego Health are registered and aware of the UC San Diego Health vendor policy and vendor code of conduct; (3) Ensure that vendor equipment is delivered at least 36 hours in advance of scheduled surgical cases and special procedures to allow adequate time for sterilization (Attachment B); and (4) Ensure that vendor activities do not disrupt patient care or influence teaching activities and are consistent with this policy. Employees are responsible for ensuring that vendors are registered and that their activities comply with UC San Diego Health policies.

POLICY:

- I. Medical/Surgical Supply Representatives may call upon UC San Diego Health physicians and management subject to pre-registration and health screening requirements as described in Section III. Procedures.
- II. In accordance with UC policy, "Health Care Vendor Relations," vendors shall not provide gifts to UC workforce members, and UC workforce members shall not accept personal gifts.

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- III. Samples. Pharmaceutical samples and medical supply/device samples are not permitted in any UC San Diego Health facility or UC San Diego Health Clinical Practice Organization clinic.
- A. Exception for “loaned equipment” (UCSDHP [428.1](#)). Loaned equipment shall be delivered to UCSDH Biomedical Engineering Services to evaluate and prepare the “Property Loan Agreement.”
- B. Samples may not be provided to prescribers for personal use.
- C. Samples of medical devices or medical supplies intended for use in clinical trials should not be delivered by vendor representatives directly to prescribers.
- IV. All requests for the introduction and/or use of a new product, pharmaceutical, supply, medical device, or new technology require prior approval from the appropriate UC San Diego Health committee, e.g., Medical Staff Pharmacy & Therapeutics (P&T) Committee; or “New Product/Technology Committee.”
- A. Refer to policy UCSDHP [383.3](#), “Innovative Therapy,” for procedures and toolkit to follow related to innovative therapy and necessary prerequisite approvals.
- V. A. As applicable, this policy pertains to offsite services vendors who provide services to UC San Health. (See Procedure sections II. III. IV., and VII.)

PROCEDURE:

- I. Vendor Pre-Registration, Credentialing, and Health Screening Requirements:
- A. Pre-registration is managed via [RepTrax](#)
- Vendors are expected to document the status of their credentialing requirements via the UC San Diego Health Procurement website for “RepTrax.” Each vendor representative who wishes to visit UC San Diego Health shall complete the administrative and compliance credentials. All vendors are expected to satisfy the same screening and documentation requirements applicable to contracted staff (Attachment C).
 - Clinical Support Vendors, who primarily serve in clinical support roles in patient care areas, are required to complete additional training and immunization credentials prior to access to patient care areas. Requirements include:

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- i. Product Training: Training on the medical system, device, drug, or procedure following FDA-approved manufacturer's indications for use for which the Clinical Support Vendor is offering technical support.
- ii. Bloodborne pathogen training.
- iii. HIPAA Privacy & Security Rules - Training regarding the confidentiality, privacy, and security of protected health information (PHI) in all forms - written, oral, created, stored, electronic, or transmitted.
- iv. OR Protocol (also known as "aseptic principles and techniques")
- v. Compliance with UC San Diego Health immunization screening (see Attachment C).

II. Vendor Code of Conduct:

- A. Employees will ensure that vendors are aware of this policy and the Vendor Code of Conduct by checking that the vendor's UC San Diego Health photo identification badge is current and valid.
- B. Faculty or house staff physician receiving unsolicited telephone calls at their home should inform the vendor of the UC San Diego Health policy and should report the name of the sales representative and/or name of the vendor they represent to Procurement for further actions.

III. Vendor Conflict of Interest (See Vendor Code of Conduct - Attachment B):

- A. Vendors should not have a Conflict of Interest (COI) with existing providers and staff at UC San Diego Health which could include financial or nonfinancial inducements or incentives.
- B. Vendors will complete a COI disclosure form that Procurement Services will retain.
- C. Required COI training will be provided to vendors.

IV. Vendor Billing Arrangements:

- A. Vendors are generally prohibited from billing on behalf of UCSDH. Exceptions must be approved by Legal and the Office of Compliance and Privacy.

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V. Gifts:

- A. Personal gifts are not permitted. Under no circumstances shall a Vendor give a personal gift to UC San Diego Health employees, per UC policy "[Health Care Vendor Relations](#)." UC San Diego Health employees shall not provide gifts to vendors. Please refer to UCSDHP, [750.6](#), Gifts Policy.
- B. Gifts from vendors to UC San Diego Health shall be managed in accordance with UC San Diego Gift policies. Refer to UC San Diego's Office of Gift Processing.
- C. In addition, inventorial equipment acquired by gifts from vendors shall be assigned a UCID number and recorded according to UC San Diego policy, [PPM 522-1](#), "Property Inventory Control System Operating Procedures."

VI. Photo Identification Badge Procedures:

- A. Each vendor representative shall check in through designated check-in locations throughout UC San Diego Health to obtain a valid identification (ID) badge. The vendor ID badge is non-transferable and is valid for one day only.
- B. All visits must be arranged by prior appointment.
- C. Pharmaceutical representatives must register with the UC San Diego Health Pharmacy Department to obtain the vendor ID badge.

VII. Enforcement:

- A. Violations may result in a verbal or written warning or exclusion of the vendor and/or vendor representative from doing business with UC San Diego Health.
- B. UC San Diego Health Security Services enforce the requirement for wearing vendor ID badges and shall notify Pharmacy and Procurement departments of any vendor representatives who violate UC San Diego Health/UC's policies.

DEFINITIONS:

- I. **Vendors:** The term "vendors" is broadly used to include any representative, agent, or distributor of a manufacturer or company that produces or markets drugs, devices, nutritional products, or other medical products, equipment, or services. Vendor activities include visits for the purpose

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of soliciting, marketing, research/clinical trials, or distributing products or information regarding the use of medications, products, equipment, and/or services.

FORMS:

None.

REFERENCES/RESOURCES/RELATED DOCUMENTS:

The Joint Commission ([TJC](#))

HIPAA (Health Insurance Portability & Accountability Act of 1996) Privacy and Security Laws, [45 CFR § 160, 162, 164](#)

ATTACHMENTS:

Attachment A: Vendor Check-in Locations

Attachment B: Vendor Code of Conduct

Attachment C: Required Screening and Documentation

RELATED POLICIES:

UCSDHP [14](#), "Business Associate Agreements"

UCSDHP [383.3](#), "Innovative Therapy"

UCSDHP [428.1](#), "Loaned Equipment"

UCSDHP [639.2](#), "Activities of Pharmaceutical Representatives/Device/Medical Technology Representatives"

UCSDHP [750.6](#), "Gifts Policy"

UCSD [PPM 522-1](#), "Property Inventory Control System Operating Procedures"

UCSD [PPM 523-9](#) "Employee - Vendor Relationships"

UC Presidential Policy: "[Health Care Vendor Relations Policy](#)"

UC Business & Finance Bulletin G-39, "[Conflict of Interest Policy](#)"

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CONTACT(S):

Director, Supply Chain Services

APPROVALS:

UC San Diego Health Executive Governing Body (EGB)

REVISION HISTORY:

ORIGINAL: 11/10/1987

VENDOR CHECK-IN LOCATIONS

The following locations have been designated as Vendor Check-In locations:

UC San Diego Health - Hillcrest

- Hillcrest - Operating Room Materials Management Department Kiosk
- Hillcrest - Arbor Café Kiosk

UC San Diego Health - La Jolla

- Thornton Hospital - Sulpizio Cardiovascular Center Kiosk
- Moores Cancer Center - Front Desk
- Jacobs Medical Center - Lower Level Sterile Processing Kiosk
- Koman Outpatient Pavilion - Lower Level Operating Room Kiosk

Vendor Code of Conduct

Part - 1. Vendors WILL:

1. Adhere to the highest ethical standards as well as the Vendor Code of Conduct and all legal requirements when interacting with UC San Diego Health professionals and staff, its patients and visitors and will respect the confidentiality and privacy of confidential information.
2. Provide Reptrax.com with all the credentials outlined above to be viewed by any UC San Diego Health personnel.
3. Wear a company identification badge and the UC San Diego Health vendor identification badge signifying "vendor status" at all times while on UC San Diego Health premises. UC San Diego Health badges are non-transferable.
4. Honor and support hospital decisions regarding product selection or non-selection.
5. Be on time for all scheduled appointments and prepared to support staff as requested.
6. Assist the hospital in all aspects of converting the hospital to the vendor's product if the product has been approved for trial or use. As the hospital deems necessary, this includes guidance, instruction, in-service, labor, technical advice, and expertise.
7. If products are approved for trial, provide products during the trial at "no-cost" to UC San Diego Health.
8. Ensure that all new or changed products entering or leaving the hospital are handled as detailed above, or products will be considered free to the facility.
9. Ensure that a valid appointment has been made with the appropriate contact. Vendors will not be allowed on-site to visit without an appointment.
10. Ensure that all equipment brought into the hospital for trial, installation, or temporary use is inspected by the Biomedical Equipment Services Department before issue and use and is FDA approved.
11. All equipment or supply items that have been approved for use and require sterilization before use must be brought to the UC San Diego Health Sterile Processing Department at least 36 hours prior to the scheduled surgical case. The items to be sterilized must be in their own "validated for use" rigid (metal) container for sterilization procedures. In addition;

- Include an inventory set list
- Include manufacturer's instructions for use
- Include in-service for staff when necessary

If the equipment or supply items are not brought in 36 hours in advance of a surgical case for sterilization, it is not to be used unless proper sterilization has already been provided according to the manufacturer's recommendation. This needs to include facility-recommended incubation time of a biological when implants are present. If the vendor does not supply a rigid (metal) container, UC San Diego Health will supply the container and reserves the right to charge the vendor for such use.

12. Follow UC San Diego Health's policy regarding the use of cellular phones, cameras, and video recording equipment, patient privacy, and data security. Personal photography/videos are not permitted.
13. Adhere to infection prevention precautions (e.g., hand-hygiene, wearing Personal Protective Equipment (PPE) such as gloves, hat, mask, face shield, gown, shoe covers or bunny suits, etc., as needed) to prevent the spread of colds and infections.
14. Check-in with the designated UC San Diego Health personnel/department or approved Vendor Badge Kiosk prior to entering and exiting the facility.
15. Comply with all UC San Diego Health Bylaws, Rules and Regulations, Policies and Procedures, all State and Federal laws and regulations, including the requirements imposed by the Joint Commission on Accreditation for Healthcare Organizations, Department of Health Services, and Medicare Conditions of Participation.
16. Familiarize themselves with the fire safety and hazard codes and emergency evacuation routes for each UC San Diego Health facility they access.
17. Report any violation of conduct or suspicious activity.
18. Act in accordance with UC Policy (UCSDHP [639.2](#)): Avoid offering/giving gifts to any UC San Diego Health employees.

Part - 2. Vendor Will Not:

1. Offer or provide anything in a manner or on condition that would interfere with the independence of a healthcare professional's prescribing practice and the utilization of the vendor's equipment, products, or services.
2. Provide "hands-on" assistance with any patient care services.

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3. Open sterile hospital supplies in the surgical/operating/special procedures environment.
4. Have access to any patient-specific health information for which specific patient authorization has not been given.
5. Use UC San Diego Health for “cold” call sales. All visits require an appointment with the department supervisor.
6. Intentionally undermine the hospital in any way or for any reason with doctors, patients, or hospital personnel.
7. Provide samples directly to staff or patients under any circumstances.
8. Bring items into the facility without gaining appropriate approval.
9. Attend continuing medical education (CME) conferences, or bring promotional materials into the clinics or CME meeting areas.
10. Conduct off-label marketing activities, e.g., promoting drugs or medical devices for off-label use other than FDA-approved uses.
11. Photocopy, photograph, videotape, record, audio-tape, or remove patient information or patient images/data or attempt to contact patients without authorization.
12. Enter clinic areas to inspect or inventory drug storage and supply areas.
13. Use the patient care areas, UC San Diego Health offices, or telephones to conduct vendor’s business.

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**REQUIRED SCREENING AND DOCUMENTATION
For Contracted Clinical Staff**

- A. All Staff shall be required, if applicable to their position, to have available their resume/application, licensure, certification and/or registration, and Primary Source Verification (PSV) as well as photo identification, CPR cards, and all other applicable certification cards with them at all times during their assignment at Client.
- B. Staff shall, if applicable to their position, present their original license, photo identification, and required certificates on the first day of work at Client.
- C. The following documentation will be provided to Client by Supplier for Staff submitted by Supplier for consideration. This documentation will be made available to the Client prior to the Client conducting an interview:
 - 1. Completed Application/Demographics of candidate (name, address, phone number, etc.)
 - 2. Proof of **two (2) years** of acute experience in the requested specialty area.
 - 3. Skills evaluation checklist.
 - 4. Two (2) current and verified references within one year.
- D. Post interview, upon offer of position by Client and job acceptance by Staff, all documentation must be secured and provided to Client by Supplier ten (10) days prior to commencement of the assignment.
 - 1. Primary Source Verification.
 - 2. Current AHA or Red Cross BLS for Healthcare Providers for **all** RNs, LVNs, CNAs, and MHWs. Online certification will require additional documentation of hands-on mannequin competency.
 - i. ER Nurses: ACLS certified, CEN preferred.
 - ii. ICU Nurses: ACLS certified
 - iii. Pediatric Nurses: PALS certified
 - iv. Neonatal ICU, L&D, and Post-Partum: NRP certified
 - 3. Psychiatric Care Units: Professional assault training course, such as P.A.R.T, M.A.B., or equivalent standard preferred for RN, LVN, or MHW.
 - 4. LVNs must provide documentation of completed BVN/PT Board-approved courses of IV therapy and blood withdrawal/phlebotomy.
 - 5. Documentation of successful completion (>85%) score of a medication/dosage calculation exam in the specialty.
 - 6. Health certificate, to include-proof of immunity to measles, mumps, rubella, and varicella. Have evidence of vaccination, titer, or declination of vaccination for Hepatitis B and/or any other health screening requirements mandated by the Client.
 - 7. Negative 9-Panel Drug Screen within **thirty (30) days** of a new start or within the past **sixty (60) days** per UCSDHP [611.3](#), prior to placement at Client.
 - 8. Proof of a lawful background check performed by a reputable company, which shall include at a minimum: a national records criminal search covering **seven (7) years** prior to assignment; education verification of all stated diplomas, degrees, and/or certifications; a sanction search

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of the Office of Inspector General, the General Services Administration, or other federal agency for listing as debarred, excluded or otherwise ineligible for federal program participation; and a national registry search of violent sexual offenders and predators. Criminal Background Checks will be run on all alias names found in the Social Security Trace.

9. Documentation for Infectious Disease Surveillance & Baseline Testing to include the following:
 - a. Proof of immunity to measles, mumps, and rubella by:

Documentation of two (2) MMR vaccines (One dose must be after the age of one (1) year) or serum immunity to measles, mumps, and rubella.
 - b. Proof of immunity to varicella by:

Documentation of proof of serum two (2) Varicella vaccines (given at least **four (4) weeks** apart) or serum immunity.
 - c. TB Surveillance: TST and IGRAs (blood test for TB) are both accepted for TB surveillance done within **three (3) months** from the start date.
 - d. TST (PPD): Documentation of two (2) negative TST within **one (1) year** (2 step). One TST must be within **three (3) months** of assignment at Client. TST must be reported in millimeters (mm).
 - e. IGRAs (QuantiFERON Gold (QFT) or T Spot): Negative test within **three (3) months** of assignment at Client.
 - f. **IF** a history of positive (+) TST or positive (+) IGRA (blood), provide documentation of negative chest x-ray (PA) report within **three (3) months** of assignment to Client **AND** a negative symptom review at the time of assignment to Client.
 - c. Ishihara test for color deficiency (if essential job tasks involve a point of care test (POCT) reading or color vision acuity).
 - d. Pertussis Vaccine (Tdap) - Adult dose; one (1) within the past **ten (10) years**.
 - e. Annual Influenza vaccine documentation per UC San Diego Health policy UCSDHP [611.9](#). Documentation of current seasonal flu vaccine. Declinations are accepted only as described in UCSDHP [611.9](#).
 - g. If exposed to blood or bodily fluids, provide documentation of Hepatitis B vaccine series (three (3) doses) **and** positive (+) post-vaccination Hepatitis B Surface Antibody (anti-HBs) titer (if duties involve exposure to sharps) or signed declination.
 - h. Client to offer free of charge Hepatitis B vaccine if the worker is exposed to blood or bodily fluids.
 - g. Fit Testing: All health workers who have direct patient contact or exposure to patients with infectious tuberculosis must have fit testing performed at the facility every **twelve (12) months** per ATD control plan policies.
10. Summary of satisfactory completion of required annual competencies (see below section E).
11. Signed statement of confidentiality based on Client protocols.

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- E. As required and applicable per position, Supplier shall provide Client with a complete set of all Supplier orientation documents, skills checklists, and competency evaluation forms, as listed below. Upon request from Client, Supplier shall also be required to provide the same completed documentation for all current and former staff who currently work at or has worked at Client. The client will require all Supplier performance evaluations and competency evaluations to be completed satisfactorily and timely by each Staff.

1. Job Description;
2. Annual Cumulative Sanction Report (OIG);
3. Annual Cumulative Excluded Parties/Debarment (GSA);
4. Annual performance evaluation and clinical competence evaluation;
5. Skills evaluation checklist;
6. Work area-specific competency evaluation tools;
7. Annual education, training, and competency on the following topics:
 - a. Age Specific Competencies (Infants to Adolescents, Adults, and Elder Adults);
 - b. Identification and reporting of victims of abuse (domestic, child, and elder abuse);
 - c. Pain management;
 - d. HIPAA
 - e. Patient safety, use of restraints, lifting, and body mechanics;

Additional topics as required by unit:

- f. Patient rights and responsibilities (including consent, patient confidentiality, and Advance Directive);
- g. Medication administration and adverse reaction identification, interventions, and reporting;
- h. Standards for Business Conduct;
- i. Cultural diversity and customer relations;
- j. National Patient Safety Goals;
- k. Emergency conditions, fire, electrical, and radiation safety;
- l. Hazardous materials;
- m. Fire, disaster, and emergency preparedness and procedures;
- n. Infection Control, blood-borne pathogens, standard universal precautions and isolations standards for airborne, droplet, and contact precautions;
- o. Personal protective equipment and workplace safety;
- p. Ability to recognize, intervene, and document changing patient conditions needs, including patient response(s) to interventions;
- q. Evidence of annual completion of a course in coping with assaultive and aggressive behavior; and
- r. Fetal Monitoring (for Labor and Delivery).

REQUIRED SCREENING AND DOCUMENTATION for Contracted Non-Clinical Staff

1. All temporary Staff contracted to work at any UC San Diego Health location must meet all health standards required by Title 22, TJC/JCAHO, and must comply with UC San Diego Health's Immunity and Testing Requirements. In the event Staff assigned to UC San Diego Health by a contract, the agency does not comply with these requirements and adverse consequences result (for example, Staff exposes patients and personnel to measles), the contracting agency will be billed for any expenses associated with the follow-up evaluation(s) and surveillance necessitated by the exposure.
2. The following documentation must be sent to the requesting Manager at least seven (7) days prior to Staff being on-site at any UC San Diego Health facility.
 1. Health Certificate includes an annual physical exam proof of immunity to measles, mumps, rubella, and varicella. Have evidence of vaccination or declination of vaccination for Hepatitis B and/or any other health screening requirements mandated by Facility.
 2. Negative drug screen; 9 panel, within thirty (30) days of new start or within the past six (6) months of returning Staff, prior to placement.
 3. Documentation for Infectious Disease Surveillance & Baseline Testing to include the following:
 - i. Proof of immunity to measles, mumps, and rubella by:

Documentation of two (2) MMR vaccines (One dose must be after the age of one (1) year) or serum immunity to measles, mumps, and rubella.
 - j. Proof of immunity to varicella by:

Documentation of proof of serum two (2) Varicella vaccines (given at least **four (4) weeks** apart) or serum immunity.
 - k. TB Surveillance: TST and IGRAs (blood test for TB) are both accepted for TB surveillance done within **three (3) months** from the start date.
 - l. TST (PPD): Documentation of two (2) negative TST within **one (1) year** (2 step). One TST must be within **three (3) months** of assignment at Client. TST must be reported in millimeters (mm).
 - m. IGRAs (QuantiFERON Gold (QFT) or T Spot): Negative test within **three (3) months** of assignment at Client.
 - n. **IF** a history of positive (+) TST or positive (+) IGRA (blood), provide documentation of negative chest x-ray (PA) report within **three (3) months** of assignment to Client **AND** a negative symptom review at the time of assignment to Client.
 - c. Ishihara test for color deficiency (if essential job tasks involve a point of care test (POCT) reading or color vision acuity).
 - d. Pertussis Vaccine (Tdap) - Adult dose; one (1) within the past **ten (10) years**.
 - e. Annual Influenza vaccine documentation per UC San Diego Health policy UCSDHP [611.9](#). Documentation of current seasonal flu vaccine. Declinations accepted only as described in UCSDHP [611.9](#).

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- o. If exposed to blood or bodily fluids, provide documentation of Hepatitis B vaccine series (three (3) doses) **and** positive (+) post-vaccination Hepatitis B Surface Antibody (anti-HBs) titer (if duties involve exposure to sharps) or signed declination.
 - p. Client to offer free of charge Hepatitis B vaccine if a worker is exposed to blood or bodily fluids.
 - g. Fit Testing: All health workers who have direct patient contact or exposure to patients with infectious tuberculosis must have fit testing performed at the facility every **twelve (12) months** per ATD control plan policies.
4. Proof of a lawful background check performed by a reputable company, which shall include at a minimum: a national records criminal search covering seven (7) years prior to assignment; education verification of all stated diplomas, degrees, and/or certifications; a sanction search of the Office of Inspector General, the General Services Administration, or other federal agency for listing as debarred, excluded or otherwise ineligible for federal program participation; and a national registry search of violent sexual offenders and predators. Criminal Background Checks will be run on all alias names found in the Social Security Trace.