LOUISIANA STATE UNIVERSITY HEALTH SCIENCES CENTER – SHREVEPORT

VENDOR SOLICITATION POLICY

Purpose:

To assure vendors entering LSUHSC for the purpose of conducting business, do so in such a manner as to not interfere with the normal operations of the institution, and comply with institutional requirements regarding confidentiality of information.

Definition:

Vendor – bonafide representatives of companies providing goods or services to the healthcare industry for the purpose of profit; for the purpose of this policy, vendors with contracts for services with LSUHSC, (i.e., elevator repair, construction or maintenance) are excluded.

Policy:

1. All vendors conducting business within the medical center complex have a legal and ethical responsibility to safeguard the privacy of all patients and protect the confidentiality of their health information. By completion of the vendor registration process, the individual agrees to comply with all rules and regulations set forth in this and any other applicable institutional policy or directive.

2. All vendors, in order to be approved for sales or service access within the LSUHSC, must register and maintain a current data file in the Purchasing Department. Such registration data shall include but not be limited to the following:

   Vendor name
   Company, which the vendor is representing
   Vendor address
   Vendor telephone number
   Signed Confidentiality Statement
   Official business card

The Purchasing Department shall maintain a database of all authorized vendors; information contained in the database shall be made accessible to Patient Information, University Police and Hospital Administration.
3. Under no circumstance shall a vendor proceed directly to a hospital department or physician office. Vendors are not allowed in patient care areas of the hospital or clinics without specific permission from Hospital Administration. While in a patient care area, the vendor must be accompanied by an employee of the institution at all times.

4. Supplies or equipment are never left for evaluation or sample purposes without specific permission from the appropriate Hospital Department. In the case of equipment to be used for evaluation purposes, written permission must be granted by the Biomedical Department. As per hospital safety requirements, no equipment is to be used without a safety inspection.

5. LSUHSC assumes no responsibility for supplies or equipment left by vendors for the purpose of evaluation.

6. Food shall not be brought into the hospital or patient care areas by vendors.

Procedure:

All vendors seeking access to any LSUHSC department shall follow the following procedure:

1. Obtain approved vendor status from the Purchasing Department; process includes signing confidentiality statement.

2. Schedule appointment(s) with individual or groups with whom the vendor would like to meet. This shall be done directly with the individual(s) involved. Purchasing will not schedule vendor appointments.

3. Upon arrival, shall check in at the Patient Information desk located in the hospital lobby (King’s Highway entrance).

4. Patient information shall verify by phone the vendor appointment with the office, department or Biomedical engineering, issue a vendor badge and direct the representative to the office/department.

5. Upon completion of the appointment, the representative shall return to the Patient Information desk, returning the vendor badge.

6. In the event that there is no one available at the Information desk, the vendor shall check in through the University Police station located adjacent to the lobby.
7. Vendors selling or performing maintenance service on medical equipment must proceed to the Biomedical Engineering Department to sign in and out.

8. Vendors performing maintenance service on medical equipment shall leave service reports; indicating services provided Biomedical Engineering, upon completion of work. After hours service reports are to be left in the appropriate box outside Biomedical Engineering.

Failure to comply with this policy shall result in action taken against the vendor, including possible banning from the institution and reporting to parent company.

Hospital Administrator

3/16/11
Date

Approved by Clinical Board: 2/20/01, 5/18/04, 5/15/07, 3/15/11
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