

LAC+USC MEDICAL CENTER POLICY

Subject: VENDOR VISITING POLICY	Original Issue Date: 8/12/08	Policy # 141
	Supersedes: 12/10/13	Effective Date: 2/7/2017
Departments Consulted: Supply Chain Operations	Reviewed & Approved by: Attending Staff Association Executive Committee Senior Executive Council	Approved by: (Signature on File) Chief Medical Officer
		(Signature on File) Chief Executive Officer

PURPOSE

- Coordinate and verify that the outside vendor representative has a prior appointment within the facility.
- Monitor and control vendor access within LAC+USC Medical Center.
- Evaluate the appropriateness of unscheduled vendor visits.
- Ensure compliance with Department of Health Services (DHS) and facility policies and procedures, state and federal rules and regulations and accreditation requirements

POLICY

All outside sales and service representatives are subject to the following rules and regulations when conducting business inside LAC+USC Medical Center.

DEFINITION

Vendor is defined as sales or service personnel who represent a company or distributor that market products, provide services to LAC+USC Medical Center or from whom LAC+USC Medical Center purchases equipment, supply or service support.

Vendor representatives as defined in the following classifications:

Category A – Vendor participation in patient care.

- 1) Direct Participation in Patient Care – Operation or manipulation of equipment that is in direct or indirect contact with a patient, assembling implants or prostheses, entering the sterile field touching a patient in the course of a procedure, or otherwise providing patient care.
 - a. Clinical Procedure Areas:
 - i. Operating Room Suite
 - ii. Labor and Delivery Suite
 - iii. Cardiac Catheterization Lab
 - iv. Special Procedure Unit
 - v. Gastrointestinal Lab (GI)
 - vi. Intensive Care Units
 - vii. Department of Emergency Medicine

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Category B – Vendor activities not related to direct patient care.

- 1) Account/Vendor Representatives – Employee/agent of a medical equipment, medical supply, pharmaceutical company, other manufacturer or vendor having products and/or services that are available for purchase by DHS facilities.
- 2) Technical Advisor – Account representative who is present in a patient care area and is providing advice, recommendations, or instruction to a physician or other care provider regarding the selection or use of supplies, devices, implants or other items provided by the Technical Advisor's employing company. This person may also be an account/vendor representative.
- 3) Indirect patient Care or Contact Sales – Supplies and/or services that have an indirect impact on patient care such as training on equipment, cleaning and repair of equipment.
- 4) Non-patient care, but limited patient and /or employee contact – Contract/vendor staff that have brief contact with patients and/or employees, manage or handle patient/employee personal belongings (Security). These contract/vendor staff may require criminal background check and health screening documentation as determined on a case-by-case basis.
- 5) General Sales (with no patient care/contact) – Non-clinical sales or supplies/services, (e.g., UPS, Sparkletts, County approved employee benefits, insurance, and fundraising vendors, etc.).

DEPARTMENTS

All departments of LAC+USC Medical Center

PROCEDURE

A. Vendor Visiting Hours

Business hours for vendors to check in at Purchasing/Supply Chain Operations is from 7:00 a.m.-4:00 p.m.

- a. For after hour visit or service, vendor representatives must check in at Facilities Management/Environmental Services-General Hospital Basement – Room 501, Telephone No. (323) 226-6873.

B. Vendor Visiting Protocol

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- a. All vendors must check in at the Purchasing /Supply Chain Operations reception desk located in the warehouse at 1900 Zonal Avenue or IPT Warehouse located in the basement room C1L100. The vendor is to go only to their designated area/location.
- b. Purchasing/Supply Chain Operations will contact the identified department to verify the appointment. A periodic phone call to the area/location will verify the vendor is present at the required location.
- c. If the vendor shows up without prior appointment, the Purchasing receptionist desk will contact the impacted department to determine if the representative can be seen.
- d. Authorized vendor(s) will be required to sign the Vendor Visit Log (See Attachment I) to obtain a Vendor Badge by depositing Driver's License or a picture ID Card which is generated by Vendor Credential Services (VCS) as a security. Vendor(s) will not be allowed to conduct business inside the Medical Center without a badge. The badge must be worn at all times during the visit.
- e. The vendor must (1) return the badge to Purchasing/Supply Chain Operations when business is completed and (2) sign-out the Vendor Visit Log prior to leaving the facility. The Driver's License or the Vendor Credential Services (VCS) ID Card will be returned to the vendor.
- f. The vendor badge may not be borrowed or loaned. It is the vendor's responsibility to report a missing badge to Purchasing/Supply Chain Operations.
- g. Proposals provided to Purchasing/Supply Chain Operations staff for the sale or introduction of equipment, supply or service will be distributed to potential user departments for information or evaluation.
- h. Failure to abide by this policy will jeopardize the vendor's relationship with the LAC+USC Medical Center.
- i. A quarterly Broadcast will be sent out to inform all LAC+USC staff **NOT** to meet with any vendor who has not pre-scheduled or arranged a meeting location and time.

ATTACHMENT

Vendor Registration Log

REVISION DATES

December 10, 2013, February 7, 2017



The first part of the document discusses the importance of maintaining accurate records of all transactions. It emphasizes that every entry should be supported by a valid receipt or invoice. This ensures transparency and allows for easy auditing of the accounts.

In the second section, the author details the various methods used to collect and analyze data. This includes both primary and secondary research techniques. The primary research involved direct observation and interviews with key stakeholders, while secondary research focused on reviewing existing literature and industry reports.

The third section presents the findings of the study. It highlights several key trends and patterns observed in the data. For example, there was a significant increase in the use of digital marketing channels, and a corresponding decrease in traditional advertising methods. These findings have important implications for business strategy and decision-making.

Finally, the document concludes with a series of recommendations based on the research findings. These recommendations are designed to help organizations optimize their marketing efforts and improve their overall performance. The author suggests that a more integrated and data-driven approach to marketing is essential for success in the current market environment.

