



CONSIGNMENT PRODUCTS / CONTRACT AWARDS

You must sign in at the Supply Chain Services Department. You will be required to show written authorization from the CSPD allowing you to proceed to your destination. If you do not have written authorization you will be turned away. You can download a copy of an appointment request form at www.HonorHealth.com and click on vendor. The only exceptions will be in the OR, Cath Lab or Interventional Areas where you are scheduled for a specific case or in-services have been pre-arranged by one of the Clinical Supply Program Managers.

Please be prepared to show your Authorized vendor credentialing Badge. Vendor Representatives who arrive at a department without a badge will be sent back to Supply Chain Services to check in before being seen. Vendor Representatives will only be allowed in the area(s) of the facility where they have made specific appointments. Prior to departure, you must sign out.

Parking:

You may park in the designated visitor parking area. Vendor Representatives are never to park in reserved parking spaces. There is a "NO PARKING" POLICY ENFORCED IN THE RECEIVING AREA. Vehicles in violation will be towed at owner's expense.

Deliveries:

All deliveries accompanied by a packing slip, receiver, bill of lading, purchase order, product evaluation, or equipment rental are to be made to the Receiving Department at the designated HonorHealth Facility between 7 a.m. and 4 p.m., Monday through Friday. Emergency deliveries (after 4 p.m. and on weekends) are to be made to the SPD Department at the designated HonorHealth facility. ALL DELIVERIES MUST BE SIGNED FOR - NO EXCEPTIONS.

Consignment:

The Vendor Representative MUST work with the appropriate Contract Administrator prior to placing products on consignment; the information related to pricing, quantity and product codes must be submitted on the appropriate Consignment Agreement Form. Any changes to consignment must be submitted and approved by the Contract Administrator before the change can be made.

Contract Awards:

- Contracts will be awarded based on criteria established by HonorHealth. Criteria include, but are not limited to product specifications and quality, service specifications and quality, total delivered costs and logistics.

- New products that are introduced must add value over what exists today and improve patient outcome, reduce costs and/or improve patient safety as defined by: operational feasibility, clinical soundness, financial justification
- Conflict of interest disclosure is required when a new product or vendor is requested
- The Contracting Department will be responsible for ensuring that potential contracts do not conflict with existing HonorHealth and/or Group Purchasing Organization commitments.
- Group purchasing organization and purchasing coalition contracts are given first consideration, given equal clinical impact.
- Prior to any award of business, HonorHealth may at its' discretion request sample products for analysis and evaluation. HonorHealth may also request references from existing customers of the Vendor.
- HonorHealth reserves the right to accept or reject any or all proposals based on criteria established by HonorHealth.
- Contract terms and pricing are applicable to all HonorHealth Facilities unless otherwise noted in the agreement. Individual departments/facilities are not authorized to negotiate or set the terms of a Corporate Contract.
- Any offers for bulk purchases or price reduction of products must be made available to all HonorHealth facilities and submitted to the appropriate Contract Administrator for approval. HonorHealth does not support any kind of facility-based offers and facility personnel are not authorized to approve any kind of pricing agreement.

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IN PROVIDING THE PROCEEDING INFORMATION I AM CERTIFYING MY CAPABILITY AND KNOWLEDGE IN THE USE OF THE PRODUCTS THAT I AM DEMONSTRATING AND ASSUME FULL RESPONSIBILITY FOR THE PROPER WORKING CONDITION OF MY PRODUCTS AND MY ABILITY TO USE IT (THEM). IN CONNECTION WITH THE ABOVE MENTIONED EQUIPMENT, THE UNDERSIGNED VENDOR HEREBY AGREES THAT AS A CONDITION TO PROVIDE A DEMONSTRATION OF THE EQUIPMENT ON THE PREMISES OF HONORHEALTH, AN ARIZONA NONPROFIT CORPORATION, AND TO THE EXTENT PERMITTED BY ARIZONA LAW, VENDOR DOES HEREBY COVENANT AND AGREE TO INDEMNIFY AND HOLD HARMLESS HONORHEALTH, ITS APPOINTED BOARDS AND COMMISSIONS, OFFICIALS, OFFICERS, EMPLOYEES, STUDENTS, AGENTS AND SUBAGENTS INDIVIDUALLY AND COLLECTIVELY FROM ALL FINES, CLAIMS, SUITS OR ACTIONS OF ANY KIND AND NATURE BY REASON OF VENDOR'S ACTS OR OMISSIONS, LOSS, CLAIM AND LIABILITY ARISING OUT OF DEFECTS IN THE EQUIPMENT OR THE EQUIPMENT DEMONSTRATION. (APPLIES ONLY TO BUSINESS PARTNERS WHO SUPPLY MEDICAL EQUIPMENT).

I AGREE TO COMPLY WITH AND OBSERVE ALL APPLICABLE RULES AND REGULATIONS CONCERNING CONDUCT ON THE PREMISES, WHICH HONORHEALTH IMPOSES UPON ITS EMPLOYEES AND AGENTS. IF I AM REQUESTED OR PERMITTED TO OBSERVE CLINICAL PROCEDURES CONDUCTED ON PATIENTS AT ANY HONORHEALTH FACILITY, I SHALL COMPLY WITH ALL POLICIES AND PROCEDURES OF HONORHEALTH, INSTRUCTIONS FROM THE PHYSICIAN AND HEALTH CARE PROVIDERS, AND SHALL IN ALL EVENTS RESTRICT ACTIVITIES TO OBSERVATION AND VERBAL CONSULTATION TO PHYSICIAN. HONORHEALTH RESERVES THE RIGHT TO BAN ANY BUSINESS PARTNER REPRESENTATIVE FROM PROVIDING SERVICES TO ANY HONORHEALTH FACILITY. HONORHEALTH MAY REQUEST VENDOR TO REPLACE ANY REPRESENTATIVE DEEMED INAPPROPRIATE, FOR WHATEVER REASON.

I UNDERSTAND THAT PRIOR TO ANY DEMONSTRATIONS, IN-SERVICES OR EDUCATIONAL TRAINING SESSIONS, THE CLINICAL SUPPLY CHAIN MANAGER MUST REVIEW ALL EDUCATIONAL MATERIAL.

I FURTHER UNDERSTAND THAT ANY DEMONSTRATION, IN-SERVICE OR EDUCATIONAL TRAINING SESSIONS ARE TO BE LIMITED TO THE SPECIFIC PRODUCTS OR EQUIPMENT AGREED UPON.

I AM AWARE OF THE FEDERAL AND STATE LAWS AND REGULATIONS THAT GOVERN FALSE CLAIMS AND STATEMENTS AND THE ROLES THESE LAWS PLAY IN PREVENTING AND DETECTING FRAUD, WASTE AND ABUSE. I HAVE REVIEWED THE HONORHEALTH CODE OF CONDUCT ON THE HONORHEALTH WEBSITE ([HTTPS://WWW.HONORHEALTH.COM/](https://www.honorhealth.com/)).

HONORHEALTH WILL NOT BE RESPONSIBLE FOR ANY UNAUTHORIZED PRODUCTS BROUGHT IN OR SENT INTO ANY HONORHEALTH FACILITY WITHOUT PRIOR WRITTEN AUTHORIZATION. PRODUCTS BROUGHT IN OR SENT INTO ANY HONORHEALTH FACILITY WITHOUT PRIOR WRITTEN AUTHORIZATION WILL BE DONE SO AT THE VENDOR'S EXPENSE.

I AGREE TO UPDATE MY PROFILE ANY TIME INFORMATION CHANGES OR TO TURN IN MY VENDOR TAG IF MY EMPLOYMENT STATUS CHANGES.

I UNDERSTAND THAT IT IS THE RESPONSIBILITY OF MY EMPLOYER TO MAINTAIN CURRENT VACCINATION RECORDS AND THAT I MUST RECEIVE A FLU SHOT ON AN ANNUAL BASIS PRIOR TO DECEMBER 1ST EACH YEAR. IF I DECLINE A FLU SHOT, I MUST CHECK THE BOX BELOW AND AGREE TO WEAR A MASK AT ALL TIMES WHILE IN PATIENT CARE AREAS. YOUR EMPLOYER WILL BE SUBJECT TO RANDOM AUDITS TO CHECK FOR COMPLIANCE.

APENDIX (DEFINITIONS)

1. **Use**: means the sharing, employment, application, utilization, examination, or analysis of Confidential Information.
2. **Disclosure**: The release, transfer, provision of, access to, or divulging in any other manner Confidential Information.
3. **Personal Health Information (PHI)**: Any information, whether oral or recorded in any form or medium, that relates to the past, present, or future physical or mental health or condition of an individual, the provision of health care to an individual, or the past, present or future payment for the provision of health care to an individual. This includes, but is not limited to, patient identity, information regarding admission to or discharge from a HonorHealth facility, and patient demographic information.
4. **Loaner tray**: Instruments and/or implants provided by a vendor into the network for an intra-operative procedure.
5. **Value Analysis**: An interdisciplinary, decision-making process to perform product and service selection in the context of cost effective, safe and quality patient care. This process is supported by senior management, has buy-in from physicians and is infused throughout the organization as a way of doing business.
6. **Symlr**: The vendor credentialing system the network is presently utilizing to track vendor mandatory requirements established per network policies.
7. **CSCM**: Clinical Supply Chain Manager.
8. **Instruction for Use (IFU)**: Written instruction from manufacturer on care/handling, cleaning, sterilization and storage.

SUPPORTIVE DATA / CONTRIBUTORS & AUTHORS

Supportive Data:

- ASHCSP/IAHCMM position paper on Loaner Instrumentation (April 2004)
- Rutala, Guideline for Disinfection and Sterilization in HealthCare Facilities, 2008.CDC
- AORN (2011). Recommended practices for sterilization in the perioperative practice setting. *Perioperative standards and recommended practices*. Denver: AORN.
- Association for the Advancement of Medical Instrumentation (2010). *Comprehensive guide to steam sterilization and sterility assurance in healthcare facilities, ANSI/AAMI ST79:2010*. Arlington, VA: ANSI/AAMI.
- Scottsdale Lincoln Health Network, Policy #MM1653, Supplier Sales Representative Access and Privileges; November 2014

Contributors/Authors:

CSPD Leadership

Supply Chain