Supplier Representative (SR) Visits FAQ

1. How do SR arrange appointments?

Visits are by appointment only.

SR are not permitted to visit work areas or departments on the chance that a staff member will be available to see them.

SR should only be on site within normal business hours unless approved by the authorising senior position.

Upon arrival the SR must attend the main reception or information desk to sign in as a visitor to WH. The SR will be issued a visitor identification badge, which must be worn whilst on site. The SR will be required to record their name, company and the staff member being visited on the sign-in sheet. Before leaving WH, each SR will attend the reception desk to return the identification badge and to sign out.

SR can visit NUMs, Directors, Operations Managers, Allied Health, Senior Pharmacists or Procurement staff. Some divisions may require NUMs to seek permission from the relevant Director or Operations Manager before they meet SR.

SR may only visit heads of departments/units and senior medical staff. Appointments with registrars and Nurse Practitioners may only be made if authorised by relevant head of unit or senior medical staff. SR are not permitted to make appointments with medical interns, resident medical officers, nursing staff, allied health staff, food service staff, pharmacy staff (other than detailed above), volunteers or patients. Access to will be at educational meetings / in-services only.

SR shall be under the direct supervision of a nurse, medical officer, a pharmacy staff member, allied health professional or Procurement staff when on WH premises.

Areas where direct patient care is being provided are not to be used for appointments. SR visits should not occur in an environment where promotional information could be easily heard by members of the public.

2. Can SR assist with a procedure?

SR may participate in direct patient care only under certain circumstances at the request of and under the direct supervision of a nurse, medical officer or allied health professional who will remain responsible for the delivery of that care. The circumstances when this may occur are:

- Presence in the operating theatre, procedure rooms, wards or outpatient clinic to assist with implantable device programming for individual patients fitted with that company's device.
- Presence in a clinical area to provide specific advice regarding the use of that company's medical equipment or product.

Prior valid patient consent must be obtained in order for SR to be present during any patient treatment, intervention or operation.

SR are not permitted to be present at clinical meetings where identifiable patient details are discussed.

If an appointment is required in an operating theatre, procedural unit or laboratory the authorised staff member will inform the appropriate divisional director/director/NUM before confirming the appointment with the SR. The SR will be required to sign in upon entry to the operating theatre, procedural unit or laboratory.

3. What other requirements are applicable to SR?

The Procurement – Supplier Code of Conduct should be followed at all times.

SR shall respect and comply with the patient's right to privacy, dignity and confidentiality.

SR will be required to wear the relevant company identification badge and hospital visitors pass.

SR may also be required to produce evidence of credentialing compliance.

Pharmaceutical company SR must comply with the Medicines Australia Code of Conduct, to which this procedure is aligned.

If an emergency code occurs whilst an SR is on site, the SR must seek direction from the person in charge of the area.

4. How do SR introduce new products or equipment?

All product evaluations shall be coordinated through the WH PEEC and/or Perioperative Product Evaluation Committee. Evaluations shall be rigorously conducted, identifying key evaluation criteria and testing a suitable patient sample.
In some cases, WH Human Research Ethics Committee approval may be required.

All products and equipment for evaluation must be accompanied by the appropriate documentation, and where relevant, user and service manuals.

The SR must be in attendance if required whilst a trial is being conducted, e.g. in operating theatres.

SR must not leave product samples in any department without approval from the NUM, Manager, PEEC, Perioperative Product Evaluation Committee or Allied Health Management Committee.

All equipment for evaluation must be accompanied by the loan/lease documentation which includes any faults, damage or loss during use at WH.

5. How do SR introduce new pharmaceutical products?

All pharmaceutical company sample distribution is coordinated by the Pharmacy Department. All pharmaceuticals must be approved by the DTC before being used at WH. All clinical drug trials must be approved by the WH Human Research Ethics Committee

SR are not permitted to leave pharmaceutical samples in any ward / clinic or department or with individual prescribers.

Pharmaceutical company in-service education sessions will usually relate to pharmaceuticals approved for use by the DTC. Where an in-service education session is required for a pharmaceutical that is not approved by the DTC, the session must be approved by the relevant department manager prior to the in-service. In addition, the SR must acknowledge during the session that the pharmaceutical is not approved for use at WH.

6. What do SR need to know regarding Biomedical/Electrical Equipment?

Biomedical / electrical equipment shall not be introduced or evaluated without Biomedical Engineering Services inspection and approval, including:

- A completed and authorised indemnity form.
- User and service manuals.
- Information such as the value of the item, period of loan, location of use, education and support to be provided, contact information of the person and department within the organisation with which the loan has been arranged.

Inspection and approval should address:

- Responsibility for servicing/maintenance/insurance/product extraction upon the completion of loan period.
- Agreed cost of and responsibility for any consumables required for purchase.

7. Will reports of SR activity be required?

When required by the visited division, the SR will submit a report at least every six months to the relevant clinical service director or divisional director to provide a summary of their activity over the time period, including:

- The date and time of the visit(s).
- Organisational site.
- Individual department(s) and personnel visited.
- Products discussed.
- In-service/education provided.

8. What will occur if the above points are not followed?

SR found in breach of point 1-6 may be refused future commercial access to WH