

NWHMC Policy – Administration VENDOR AND CONTRACTOR EXPECTATIONS

Purpose:

To outline the expectations for all vendors/contactors doing business on our campus.

To standardize the process and expectations for all vendors and contractors who are on NWHMC campus conducting business.

To provide a safe setting for our patients, staff, and visitors by setting parameters for vendors and contractors while on hospital premises.

Workforce Definition:

A Vendor is identified as a person working for a company that could potentially or is actually selling services/work or delivering goods or supplies to NWHMC. The company does not have a signed agreement with NWHMC.

A Contractor is identified as a person who works for a company that contracts with NWHMC to perform short-term services/work or supplies such as, but not limited to, construction and consulting work. The company pays its staff. NWHMC Accounting pays the company by the job. Personnel engagement with NWHMC is typically less than 1 year.

All employees hired by or brought in by the contractor or vendor are required to follow this policy. No exceptions.

Policy:

All Vendors and Contractors **MUST****:

- Have an identified NWHMC campus Sponsor (manager, director or above).
- Complete an application packet/forms received from your NWHMC campus sponsor. Uncompleted packets will not be reviewed until completed.
- Return the application packet to the Sponsor. Sponsor will sign and send packet to Security for processing.
- Understand that the manager will contact vendor when the review/approval process is complete. If approved, Sponsor will schedule a meeting and escort Vendor or Contractor to the main Security Desk for badging process.
- Agree that after a badge has been issued, NWHMC reserves the right to perform background checks at any time with or without one's knowledge or permission.
- Pay annual fees to cover any applicable costs. If fees are not paid timely, campus privileges will immediately be revoked until paid. Sponsor will be immediately be notified.
- Have an appointment before visiting. No solicitation on campus.
- Park in the parking garage unless pre-arranged with the Facilities Manager due to a specific task.
- Check in and check out each visit at the main Security desk located in the Main Lobby.
- Prominently display an issued NWHMC identification badge or be accompanied by a hospital employee at all times.
- Never enter a patient care area, confidential record, staff only, restricted access, or other security-sensitive areas without the **prior** expressed approval of the sponsor – even with an ID badge.

- Turn in badge immediately if asked to leave the campus.
- Immediately report lost or stolen badges. Obtain replacement badge any pay all applicable fees **before** re-entry or resuming work on campus.
- Understand that failure to comply will result in revocation of access privileges for the individual and/or company.
- Understand that if you are no longer employed or change employment, you must return your badge immediately.
- Understand that all NWHMC badges can be revoked at any time with or without cause.
- Must comply with all applicable campus policies at all times.

**If the vendor's task is deemed patient critical by the NSO on duty and the vendor refuses to comply with the background check procedures, the Security staff will create a badge with the designation of "ESCORTED" and indicate what Northwest Hospital & Medical Center employee will be with the vendor at all times during their visit.

Related Policies & Procedures:

- [Vendor: Managers Procedure to Authorize Vendor/Contractor Badges](#)
- [Workforce Type Definitions](#)
- [HR Workforce Clearance Policy \(75.475\)](#)
- [HR Employment Authorization and Eligibility – Criminal Background Checks](#)

Regulations: TJC EC.02.01; RCW 43.43.830 – 43.43.840; WAC 246-320-126

Effective: 1/1/13
 Reviewed:
 Revised:

Operational Responsibility/Approval: Facilities Manager, Facilities Director
 Vice President for Clinical Services/CNO

VENDOR/CONTRACTOR ACKNOWLEDGEMENT AND AGREEMENT

By signing below, you have read and agree to the terms.

Signature: _____

Printed Name: _____

Company: _____

Date: _____ / _____ / _____