
SUPPLIER REPRESENTATIVES POLICY

Solent NHS Trust policies can only be considered to be valid and up-to-date if viewed on the intranet. Please visit the intranet for the latest version.

Purpose of Agreement	To ensure that where Supplier Representatives attempt to promote and sell their products and services, this is carried out in a proper and ethical manner and does not contravene Trust, NHS or Government policies.
Document Type	<input checked="" type="checkbox"/> Policy
Reference Number	Solent NHST/Policy/ FI06
Version	Version 1
Name of Approving Committees/Groups	Finance and Infrastructure Committee, Policy Steering Group, Clinical Executive Group
Operational Date	February 2021
Document Review Date	February 2024
Document Sponsor (Job Title)	Commercial Business Partner & Head of Procurement
Document Manager (Job Title)	Commercial Procurement Lead
Document developed in consultation with	Commercial Team
Intranet Location	Business Zone > Policies, SOPs and Clinical Guidelines
Website Location	Publication Scheme
Keywords (for website/intranet uploading)	Sales, Supplier, Representative, Procurement, Supplier Representative Policy, Policy, FI06

Amendments Summary:

Please fill the table below:

Amend No	Issued	Page	Subject	Action Date

Review Log:

Include details of when the document was last reviewed:

Version Number	Review Date	Lead Name	Ratification Process	Notes
1	January 2021	Sue Wareham	To ensure suppliers' representatives are supporting Trust processes	

SUMMARY OF POLICY

For quick reference, this page summarises the actions required by this policy. This does not negate the need to be aware of and to follow the further detail provided in this policy.

The Supplier Representative Policy is in support of and must not contravene Trusts local policies and applies to all suppliers' products and services.

It is recognised that, in addition to providing information to health professionals to improve patient care, the prime function of representatives is to promote and sell their products and services. This function should be carried out in a proper and ethical manner and must not contravene Trust, NHS or government policies.

The Trust works closely with its suppliers to deliver high quality healthcare services. This Policy operates to ensure that an effective partnership exists between all parties.

If this policy is breached, Representatives may be removed or barred from site or, reported to company, commercial / professional organisations if codes of practice are breached, i.e. ABPI for Pharmaceutical and ABHI for other Suppliers as relevant.

Representatives visiting hospitals and clinics within the NHS are expected to observe the Code of Practice for the Pharmaceutical Industry drawn up by the ABPI and ABHI for other goods and services.

10 'Golden rules' apply:

1. The Trust Commercial Team is the first point of contact both for current, new and potential suppliers seeking to develop new or additional business with the Trust.
2. All supplier/company staff whilst on site must wear an ID badge with their name and company clearly visible
3. Where Trust staff have issues or queries relating to an approach from a Supplier, they should seek advice and support from the Trust's Commercial Team.
4. 'Cold calling' or visiting wards/departments by supplier representatives without permission or an appointment is strictly prohibited. Courtesy calls from contracted suppliers are welcomed if an appointment is made.
5. Orders for goods or services must not be solicited from Trust staff – the only recognised documentation is an official purchase order which has followed the correct internal processes.
6. Pricing and commercial discussions can only be conducted as part of a formal quotation or tender exercise.
7. Trust staff are not to be offered samples of products without prior agreement from the Commercial Team.
8. Items of medical equipment loaned to the Trust must be reviewed and approved by the Medical Devices Safety Officer prior to any agreement being undertaken.
9. Leaflets and posters produced by Suppliers may not be distributed or displayed in clinical areas unless approved in writing by the Commercial Team.
10. Representatives are to ensure professionalism and courtesy are shown and this should be reciprocated at all times by Trust staff.

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SUPPLIER REPRESENTATIVES POLICY

1 INTRODUCTION & PURPOSE

- 1.1 Solent NHS Trust appreciates the role that suppliers play to assist health practitioners in providing safe, effective and economic products and services to the patients in their care.
- 1.2 The aim of this Policy is to put the relationship between Solent NHS Trust and its suppliers on a sound and professional basis.
- 1.3 The Department of Health and Social Care recommends that all Trusts have Policies in place to assist with the control of Commercial / Sales representatives on-site. See NHS Standards of Procurement 2013.

2 SCOPE & DEFINITIONS

- 2.1 This policy applies to all *locum, permanent, and fixed term contract employees (including apprentices) who hold a contract of employment or engagement with the Trust, and secondees (including students), volunteers (including Associate Hospital Managers), bank staff, Non-Executive Directors and those undertaking research working within Solent NHS Trust, in line with Solent NHS Trust's Equality, Diversity and Human Rights Policy. It also applies to external contractors, agency workers, and other workers who are assigned to Solent NHS Trust.*
- 2.2 This policy applies to all suppliers visiting or making approaches to Solent NHS Trust.

3 PROCESS/REQUIREMENTS

General Information

- 3.1 It is recognised that, in addition to providing information to health practitioners, the prime function of representatives is to promote and sell their products and services. This function should be carried out in a proper and ethical manner and not contravene Trust or NHS policies, Association of British Pharmaceutical Industries (<https://www.abpi.org.uk/our-ethics/abpi-code-of-practice/>), or Association of British Healthcare Industries (<https://www.abhi.org.uk/membership/code-of-business-practice/>).

Visits to Trust Establishments

- 3.2 Representatives seeking to develop new business with the Trust must have the permission of the Commercial Team to be on site.
- 3.3 When on Trust sites, all representatives must comply with all appropriate policies, procedures and guidelines and any instructions given to them by an authorised member of staff in the event of an emergency situation arising – e.g. a fire or major incident.
- 3.4 Representatives may not enter any Trust area (including wards, laboratories, outpatient areas or non-clinical areas) or visit any member of staff or manager without an appointment. Where there is no existing contract with the Trust, suppliers should approach the Commercial Team to provide advice on how appointments might be made with individual departmental managers. 'Cold calling' Trust staff without first approaching the Commercial Team is not permitted.

- 3.5 A representative arriving for an appointment must report to the main reception on arrival at site. The receptionist will ask the representative to sign in and will issue a visitor's badge, which must be returned prior to leaving the site.
- 3.6 Representatives should respect their position as a visitor to the Trust and comply with security regulations by wearing a visitor's identification badge at all times whilst on site.
- 3.7 Representatives for estates must report to the estates department following signing in and may not enter any area without the accompaniment of estates staff.
- 3.8 *Representatives must not approach individual Trust staff directly, any approaches will be referred to Line Managers and escalated to the Commercial Team. Individuals should not approach suppliers and must not accept goods.*
- 3.9 *Trust Line Managers must liaise with the Commercial Team prior to accepting any supplies.*

Supplier Representation

- 3.10 Representatives should be well informed about the products that they are promoting. In addition, standard technical, and where appropriate, clinical data, including information on product effectiveness or comparative efficacy should be available. It is desirable for this information to be provided prior to any meeting. Price comparisons should not be used, unless they are approved by the Commercial Team.
- 3.11 Where any teaching and/or promotional activity is being considered, staff and representatives must seek prior approval from the Commercial Team before making further arrangements. The intent of such activity must not contravene/challenge existing Trust policies, procedures and formularies.
- 3.12 Any clinical product or equipment trials must be arranged in conjunction with Commercial Team and the Trust Medical Devices Safety Officer.
- 3.13 Any product or equipment trials relating to Estates or Facilities must be arranged in conjunction with the Commercial Team and the Head of Estates (or nominated manager).
- 3.14 Leaflets and posters produced by suppliers may not be distributed or displayed in clinical or non-clinical areas unless approved by the Commercial Team in writing.
- 3.15 Supplier representatives must **not** inform staff about any Trust policies or formularies, except with the written permission of the Trust. This is particularly important when such policies relate to the selection and use of products. Misrepresentation of this information within or outside the Trust will be construed as a deliberate attempt to contravene the Trust policy.
- 3.16 Similarly, representatives for pharmaceutical companies must **not** inform staff about the Trust formulary and prescribing policies and pharmaceuticals to be used, except with the written permission of the Chief Pharmacist or Pharmaceutical Adviser. Misrepresentation of this information within or outside the Trust will be construed as a deliberate attempt to contravene the Trust policy.

- 3.17 Orders for goods or services must not be solicited from Trust staff – the only recognised documentation is an official purchase order produced by the Trust’s internal system.
- 3.18 Pricing information should be provided as a formal quotation or tender response as a result of a request from a member of the Trust.
- 3.19 In order to contract with a supplier, the Trust will typically either
- utilise a framework to secure a supplier
 - approach a number of suppliers to provide quotations (for lower value purchases)
 - issue a tender which will be advertised via Contracts Finder or Find a Tender and the Commercial Solutions e-tendering portal. Suppliers should register on the Trust e-tendering portal to be alerted to all forthcoming tenders.
- 3.20 Representatives must not act outside of the Bribery Act 2010 and should be informed as to the Trust’s Counter Fraud, Bribery and Corruption Policy.
- 3.21 Charitable donations to the Trust/ Solent NHS Charity (Beacon) must be made in accordance with the Trust’s Gifts and Donations Policy.

4 ROLES & RESPONSIBILITIES

- 4.1 Trust Board – has overall responsibility for the strategic and operational management of the Trust, including ensuring that Trust policies comply with all legal, statutory and good practice requirements.
- 4.2 Managers must ensure that all staff are aware of this policy and that any representatives visiting their location abide by this policy.
- 4.3 The Trust’s staff are aware of the policy statement and this procedure so that if direct contact is made between an individual member of staff and a commercial representative, the procedure is followed.
- 4.4 Any offer of a gift or hospitality made by a Supplier Representative to any employee must be disclosed in line with the Trusts Managing Conflicts of Interest Policy.
- 4.5 All Representatives who visit any Trust location must abide by this policy.

5 TRAINING

- 5.1 Staff should read and understand the guidelines laid out in this policy.
- 5.2 There are no specific training requirements associated with the implementation of this policy.

6 EQUALITY IMPACT ASSESSMENT

- 6.1 The equality impact assessment is appended as Appendix A.

7 SUCCESS CRITERIA / MONITORING EFFECTIVENESS

- 7.1 Implementation of the policy will be reviewed after the first year, the review will be conducted by the Commercial Team

- 7.2 A record will be kept of all supplier representatives requesting permission to attend site and engage with staff, the record will also need to log any non-compliance
- 7.3 Any non-compliance must be reported to the Commercial Team.
- 7.4 Non-compliance reports will be used to raise issues with those suppliers who persistently make contact directly through members of staff rather than through the agreed channels.

8 REVIEW

- 8.1 This document may be reviewed at any time at the request of either staff side or management, but will automatically be reviewed 3 years from initial approval and thereafter on a triennial basis unless organisational changes, legislation, guidance or non-compliance prompt an earlier review.
- 8.2 The Policy will be reviewed by the Head of Procurement.

9 REFERENCES AND LINKS TO OTHER DOCUMENTS

- GO09 Local Counter Fraud, Bribery and Corruption Policy
- Solent NHS Trust Code of Conduct (v2)
- [NHS Better Procurement, Better Value, Better Care](#)
- [NHS Standards of Procurement 2013](#)
- The Bribery Act 2010
- Gifts and Donations Policy
- Managing Conflicts of Interest Policy

APPENDIX A:

Equality Analysis and Equality Impact Assessment

Equality Analysis is a way of considering the potential impact on different groups protected from discrimination by the Equality Act 2010. It is a legal requirement that places a duty on public sector organisations (The Public Sector Equality Duty) to integrate consideration of Equality, Diversity and Inclusion into their day-to-day business. The Equality Duty has 3 aims, it requires public bodies to have due regard to the need to:

- **eliminate unlawful discrimination**, harassment, victimisation and other conduct prohibited by the Equality Act of 2010;
- **advance equality of opportunity** between people who share a protected characteristic and people who do not;
- **foster good relations** between people who share a protected characteristic and people who do not.

Equality Impact Assessment (EIA) is a tool for examining the main functions and policies of an organisation to see whether they have the potential to affect people differently. Their purpose is to identify and address existing or potential inequalities, resulting from policy and practice development. Ideally, EIAs should cover all the strands of diversity and Inclusion. It will help us better understand its functions and the way decisions are made by:

- **considering the current situation**
- **deciding the aims and intended outcomes of a function or policy**
- **considering what evidence there is to support the decision and identifying any gaps**
- **ensuring it is an informed decision**

Equality Impact Assessment (EIA)

Step 1: Scoping and Identifying the Aims

Service Line / Department	Commercial	
Title of Change:		
What are you completing this EIA for? (Please select):	Policy	<i>(If other please specify here)</i>
What are the main aims / objectives of the changes	Not applicable	

Step 2: Assessing the Impact

Please use the drop-down feature to detail any positive or negative impacts of this document /policy on patients in the drop-down box below. If there is no impact, please select "not applicable":

Protected Characteristic	Positive Impact(s)	Negative Impact(s)	Not applicable	Action to address negative impact: <i>(e.g. adjustment to the policy)</i>
Sex			Not applicable	
Gender reassignment			Not applicable	

Disability			Not applicable	
Age			Not applicable	
Sexual Orientation			Not applicable	
Pregnancy and maternity			Not applicable	
Marriage and civil partnership			Not applicable	
Religion or belief			Not applicable	
Race			Not applicable	

If you answer yes to any of the following, you MUST complete the evidence column explaining what information you have considered which has led you to reach this decision.


Assessment Questions	Yes / No	Please document evidence / any mitigations
In consideration of your document development, did you consult with others, for example, external organisations, service users, carers or other voluntary sector groups?)	No	
Have you taken into consideration any regulations, professional standards?	Yes	GO09 Local Counter Fraud, Bribery and Corruption Policy; Solent NHS Trust Code of Conduct (v2); NHS Better Procurement, Better Value, Better Care ; NHS Standards of Procurement 2013 ; The Bribery Act 2010

Step 3: Review, Risk and Action Plans

How would you rate the overall level of impact / risk to the organisation if no action taken?	Low	Medium	High
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What action needs to be taken to reduce or eliminate the negative impact?			
Who will be responsible for monitoring and regular review of the document / policy?	Head of Procurement		

Step 4: Authorisation and sign off

I am satisfied that all available evidence has been accurately assessed for any potential impact on patients and groups with protected characteristics in the scope of this project / change / policy / procedure / practice / activity. Mitigation, where appropriate has been identified and dealt with accordingly.

Equality Assessor:		Date:	01/02/2021
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Additional guidance

Protected characteristic	Who to Consider	Example issues to consider	Further guidance
1. Disability	A person has a disability if they have a physical or mental impairment which has a substantial and long term effect on that person's ability to carry out normal day today activities. Includes mobility, sight, speech and language, mental health, HIV, multiple sclerosis, cancer	<ul style="list-style-type: none"> • Accessibility • Communication formats (visual & auditory) • Reasonable adjustments. • Vulnerable to harassment and hate crime. 	Further guidance can be sought from: Solent Disability Resource Group
2. Sex	A man or woman	<ul style="list-style-type: none"> • Caring responsibilities • Domestic Violence • Equal pay • Under (over) representation 	Further guidance can be sought from: Solent HR Team
3. Race	Refers to an individual or group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.	<ul style="list-style-type: none"> • Communication • Language • Cultural traditions • Customs • Harassment and hate crime • "Romany Gypsies and Irish Travellers", are protected from discrimination under the 'Race' protected characteristic 	Further guidance can be sought from: BAME Resource Group
4. Age	Refers to a person belonging to a particular age range of ages (eg, 18-30 year olds) Equality Act legislation defines age as 18 years and above	<ul style="list-style-type: none"> • Assumptions based on the age range • Capabilities & experience • Access to services technology skills/knowledge 	Further guidance can be sought from: Solent HR Team
5. Gender Reassignment	" The expression of gender characteristics that are not stereotypically associated with ones sex at birth" World Professional Association Transgender Health 2011	<ul style="list-style-type: none"> • Tran's people should be accommodated according to their presentation, the way they dress, the name or pronouns that they currently use. 	Further guidance can be sought from: Solent LGBT+ Resource Group
6. Sexual Orientation	Whether a person's attraction is towards their own sex, the opposite sex or both sexes.	<ul style="list-style-type: none"> • Lifestyle • Family • Partners • Vulnerable to harassment and hate crime 	Further guidance can be sought from: Solent LGBT+ Resource Group
7. Religion and/or belief	Religion has the meaning usually given to it but belief includes religious and philosophical beliefs, including lack of belief (e.g Atheism). Generally, a belief should affect your life choices or the way you live for it to be included in the definition. (Excludes political beliefs)	<ul style="list-style-type: none"> • Disrespect and lack of awareness • Religious significance dates/events • Space for worship or reflection 	Further guidance can be sought from: Solent Multi-Faith Resource Group Solent Chaplain
8. Marriage	Marriage has the same effect in relation to same sex couples as it has in relation to opposite sex couples under English law.	<ul style="list-style-type: none"> • Pensions • Childcare • Flexible working • Adoption leave 	Further guidance can be sought from: Solent HR Team
9. Pregnancy and Maternity	Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth and is linked to maternity leave in the employment context. In non-work context, protection against maternity discrimination is for 26 weeks after giving birth.	<ul style="list-style-type: none"> • Employment rights during pregnancy and post pregnancy • Treating a woman unfavourably because she is breastfeeding • Childcare responsibilities • Flexibility 	Further guidance can be sought from: Solent HR team