Policy on Supplier Representatives

V5

October 2015

Summary

Key Points

- Supplier Representatives must not enter any area without an appointment
- Supplier Representatives must be registered on the Medical Industry Accredited System
- If the meeting is to discuss ANY new product or service then Procurement and Supplies must be informed
- Cold calling is not acceptable
- Pharmacy representatives must report to Pharmacy
- No electro-medical equipment can be used until tested by Medical Physics
- Representatives visit Theatre areas must comply with the Theatre protocol
- No sample products can be trialed until the appropriate trials and indemnity documentation has been completed
- Contractors undertaking work on the Trust's sites must adhere to the Control of Contractors Policy

Do's and Don'ts

- Do meet the supplier representative at an arranged point and Don't allow them to wander around clinical areas unaccompanied
- Do challenge any supplier representative that you see in an area, ask for ID and the purpose of their presence
- Don't allow supplier representatives into stock rooms unaccompanied
- Don't provide any commercial information to a suppliers representative – always refer them to Procurement and Supplies
- Don't allow trial equipment or products to be brought in without the appropriate trials and indemnity document has been completed
- Don't sign any contract or agreement that a supplier representative brings – refer them to Procurement and Supplies
- Don't accept gifts or hospitality without declaring on the Hospitality Register and gaining approval

Table of Contents

1. Introduction

1.1. The Trust appreciates the role that its current and potential suppliers play in supporting health practitioners in providing safe, effective and economic products and services to the patients in their care, and other staff working within the NHS in the delivery of their duties.

1.2. This policy and any accompanying procedure will be available to Trust personnel through the Document Library and supplier personnel via the Procurement and Supplies Department.

1.3. This version supersedes any previous versions of this document.

2. Purpose of this Policy

The aim of this policy is to ensure a sound, transparent and professional relationship between the staff of the Trust and its suppliers and their commercial representatives. It provides information on how they are expected to behave and what behaviour they can expect from the Trust's staff; clinical and non-clinical.

3. Scope

The policy covers all areas of the Royal Cornwall Hospitals NHS Trust (the Trust) and all premises that the Trust operates from. All staff of the Trust should be aware of this Policy.

4. Definitions / Glossary

Supplier Representatives means all supplier personnel.

5. Ownership and Responsibilities

5.1 **Role of the Director of Finance**

The Director of Finance has overall responsibility for ensuring good procurement practice throughout the Trust.

5.2 **Role of the Head of Procurement and Supplies**

The Head of Procurement and Supplies is responsible for ensuring that Supplier Representatives are made aware of this policy, and for monitoring compliance of the reporting requirements contained within the Policy.

5.3 **Role of Trust Managers and Budget Holders**

Trust Managers are responsible for ensuring that all staff are aware of the policy and adhere to the requirements contained within it.

5.4 **Role of the Medical Devices,Clinical & Non Clinical Products Review Group**

The Group is responsible for:

- Receiving feedback on the effectiveness of the policy
- Reviewing content and updating the policy as required

5.5 **Role of Individual Staff**

All staff members are responsible for:

- Adherence to the policy
- Promoting the policy to supplier representatives and Trust colleagues
- Notifying the Head of Procurement and Supplies when they become aware of the policy not being followed

6. Standards and Practice

6.1. Visits to hospital sites

6.2. **Supplier Representatives will NOT be seen by Trust staff without prior appointment. 'Cold calling' is an inefficient use of staff and suppliers' time - it is not permitted.** All supplier representatives must be registered on the Medical Industry Accredited (MIA) system, details of which are attached at Appendix 2. All contractors undertaking work on the Trust sites must adhere to the Trust's Control of Contractors Policy.

6.3. Any Supplier Representative attempting to visit a Trust designated contact, without having made a prior appointment, should be politely but firmly refused and advised to call and make an appointment and register on the Medical Industry Accredited system.

6.4. When on site, all representatives are expected to comply with the Health and Safety at Work Act, as well as all Trust policies, procedures or guidance, as relevant at the time; e.g. the no smoking policy, the car parking policy, etc.

6.5. Supplier representatives must wear a name badge showing the name of the company they are representing as well as their own name.

6.6. When on site, all representatives must comply with any instructions given to them by an authorised member of staff e.g. in the event of an emergency situation such as a fire or major incident.

6.7. Supplier representatives should note that the Trust has an Incident Reporting Policy. Should anyone be affected (patient, staff, student, visitor, volunteer or contractor) by any behavioural actions from a commercial representative, an Incident Report will be raised and appropriate action taken by the Trust's Senior Management. This is also the case should a representative be affected by any behavioural actions from a member of the Trust's staff, a student, visitor, volunteer or contractor.

6.8. Appointments must be made via the appropriate departmental secretary or a Trust host directly. Any literature, product information or samples for consideration must be left with the host or with a representative of the Procurement and Supplies Department.

6.9. Any Supplier representative wishing to visit a clinical area must obtain the prior consent of the Divisional Manager, Clinical Director, Lead Nurse or their appointed nominee(s) and must register the visit on the Medical Industry Accredited system. Approval for the supplier representatives visit relates to the individual department/theatre only, it is not general agreement for access across other locations/theatres. Supplier representatives MUST NOT be left unattended at any time. If direct patient contact is required, patient consent MUST be obtained and documented first, to ensure that the clinician involved has confirmed this with the patient.

6.10. Supplier representatives cannot be present at MDT meetings whilst patient details are being discussed. If supplier representative input is required, this must be within a confined part of the MDT meeting.

6.11. Supplier representatives visiting theatre areas must report to the Theatre Manager or Theatre Matron and not direct to theatre and must be registered on the Medical Industry Accredited system. Supplier representatives must sign the Theatre Record of Visitors, and comply with the RCHT Protocol for Visitors/External Contractors to the Perioperative Environment.

6.12. Supplier representatives should limit their visits to the Trust premises to a reasonable number of visits. If this is not the case, Trust staff can contact the Procurement department, who will ask the sales representative to refrain from conducting business for a defined period of time. In extreme cases, the Trust may make a decision to cease trading with that supplier entirely.

6.13. Supplier representatives cannot seek appointments with junior members of the clinical staff but may hold open meetings with staff in a group e.g. product presentations or training sessions. The emphasis in such meetings must be educational and not exclusively promotional. All such visits must be recorded on the Medical Industry Accreditation system.

6.14. Promotional Activity

6.15. 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, NHS or government policies.

6.16. Representatives should be well informed about the products they are promoting. In addition to standard technical, and where appropriate, clinical data, information should be available on product effectiveness. Price comparisons must not be discussed with a supplier as this may adversely influence any future tendering exercise.

6.17. Where any teaching and/or promotional activity is planned, representatives must advise the Department Manager and record the meeting on the Medical Industry Accreditation system. The intent of the meeting must not contravene existing Trust policies.

6.18. Leaflets and posters produced by suppliers may not be distributed or displayed in clinical areas unless approved by the ward or departmental Senior Nurse / Manager in that area.

6.19. Code of Ethics

6.20. For the purposes of this policy, commercial sponsorship is defined as including: NHS funding from an external, non-charitable, source, including funding of all or part of the costs of NHS research, staff, training, pharmaceuticals, equipment, meeting rooms, or any cost associated with meetings, meals, gifts, hospitality, hotel and transport costs (including trips abroad), or the provision of free services (speakers), building or premises.

6.21. The staff of the Trust are subject to standards of conduct in line with national guidance and staff should be aware of the Standards of Business Conduct for NHS Staff (HSG(93) and Core of Conduct for NHS managers (2002), as well as the Trust's Standards of Business Conduct. Commercial representatives should note the following points:

6.22. All offers of hospitality or gifts made to staff must be recorded in the appropriate register. The relevant permission must be obtained in advance in relation to the acceptance of any hospitality or gift with the exception of items with a nominal finance value (pens, calendars, diaries, etc). If in any doubt, staff must seek advice from the Trust Board Secretary or relevant head of department.

6.23. Suppliers must not attempt to influence business decision making by offering hospitality to Trust staff. The frequency and scale of any hospitality accepted will be managed openly by the Trust.

6.24. If material gifts or hospitality are accepted, and business is subsequently awarded to the supplier in question, then the individuals who are in receipt of said gifts and hospitality should be aware that they may be in breach of the Standards of Business Conduct, but also open to allegations of corruption under the local Counter Fraud Policy and Bribery Act. Contact the Local Counter Fraud Specialist if unsure.

6.25. Any travel arrangements for conferences or for viewing equipment and services should be paid for by the Trust unless the Director of Finance gives written approval for the supplier to take responsibility for travel arrangements or travel costs.

6.26. Commercial sponsorship relating to conferences or courses is only acceptable if the attendance of the Trust's staff:

- Forms part of an educational/training course approved by an accountable manager of the Trust, or,
- Is with the prior written authorisation of the Divisional Manager.

6.27. It is an offence for employees corruptly to accept any gifts or consideration as an inducement or reward to:

- Doing or refraining from doing, anything in their office capacity; or

- Showing favour or disfavour to any person in their official capacity.

6.28. Anyone incurring expenses, which are to be paid by a supplier, must complete the Third Party Paid Expenses Approval Form in Appendix 1. The activity will not be supported by the Trust unless this is authorised by a Divisional Manager or Director of Finance. Payment of expenses by suppliers must not be undertaken whilst a tender exercise is being considered or undertaken unless specifically agreed by the Director of Finance.

6.29. Ethics Summary

6.30. Staff may not:

- Accept gifts other than those with a nominal finance value (pens, calendars, diaries, etc).
- Accept sponsorship for expenses such as travel, accommodation, food or course fees, unless previously agreed with a Divisional Manager – See Appendix 1
- Show favour to a supplier

6.31. Failure to comply with these rules may lead to disciplinary action, up to and including dismissal

6.32. Staff must:

- Refuse to see a Supplier representative, if a prior appointment had not been made and the visit has not been registered on the Medical Industry Accreditation system
- Report to Procurement and Supplies if the activities of a company representative are affecting their ability to carry out their work
- Report to Procurement and Supplies if a company representative offers any gift or hospitality beyond that outlined as acceptable in paragraph 6.21 above
- Declare any personal interests which may conflict or bias the dealings with a company or contract
- Ensure representatives are not be left unaccompanied, especially with patients
- Act professionally at all times

6.33. Infection Prevention and Control Policy

6.34. All personnel who visit and any equipment brought into the Trust has the potential to introduce infection and the Trust requires that all sales representatives respect the appropriate Control of Infection protocols/procedures when visiting any Trust site.

6.35. It is the responsibility of the company representative to ensure any equipment is sanitised according to the Decontamination Policy and Infection Control Policy and manufacturer's guidelines, where indicated.

6.36. All staff must be aware that the Trust will require a decontamination certificate as proof that a decontamination procedure was performed, prior to a piece of equipment being brought into the Trust for use.

6.37. Product Trials, Evaluations, Studies and Research Projects

6.38. Supplier representatives must not expect to enter into any agreements in relation to the trial of products without adherence to the Trust approved Trials Policy, a copy of which is available to Trust staff on the Document Library or for supplier representatives from the Procurement and Supplies Department. No products or equipment can be trialled until the relevant documentation and authorisation is completed.

6.39. Medical samples must only be left with the Senior Nurse/Manager on duty or a representative of the Procurement and Supplies Department.

6.40. Unless sterile, suitable and agreed by the Medical Devices, Clinical and Non Clinical Products Group**, medical samples are not to be used clinically and must be clearly marked as not for clinical use.**

6.41. Medicine and Drug samples (including interactive dressings) must only be left with Pharmacy with clear indication of the requesting Consultant. Pharmacy will accept samples for use in the hospital only if there has been a written and signed request from a Consultant.

6.42. Electro-Medical equipment must be left with the Medical Physics Department in order that appropriate testing can be carried out before use.

6.43. Representatives leaving samples must complete a proforma regarding compliance, reason for provision of the samples, and at whose request. This proforma must be completed prior to any of the sample products being used or trialled, and provided to the Trust personnel involved with the use or trial of the products, together with details of the supplier representatives Competencies for Training documentation. A copy of the completed proforma must be provided to the Head of Procurement and Supplies in order that a register can be maintained for reference in the event of a product safety alert/recall.

6.44. The necessary Indemnity Forms and Pre Purchase Questionnaire (where appropriate) must be completed prior to any trial or evaluation being undertaken.

6.45. Any equipment or products being trialled on patients must have the necessary informed consent approval, and ethics committee approval where appropriate.

6.46. NHS Conditions of Contract

6.47. All goods (donated or otherwise) and services offered to the Trust will be procured against the standard NHS Conditions of Contract, these include the following conditions which are also applicable to items supplied on loan which will require an Indemnity Agreement being signed by both the supplier and the Trust.

6.48. **Condition 12 – Indemnity**

6.49. This ensures that the Trust is given protection of an obligation on the part of the supplier to pay compensation for damage or injury to persons or property. This is in addition to any specific rights under the contract or under statute or common law. Indemnity documentation is available upon request from the Procurement and Supplies Department.

6.50. **Condition 14 – Insurance**

6.51. This condition imposes an obligation to insure against the liabilities resulting from that indemnity. It specifies a minimum sum for insurance cover.

6.52. Signing Of Contracts/Agreements and Samples

6.53. Commitment to purchase goods and services is only entered into by the raising of an official Trust Purchase Order. Suppliers must not deliver goods or provide a service without first receiving an official Trust Purchase Order.

6.54. Contracts and product trials for all equipment/services, e.g. medical devices, clinical products and non-medical items like photocopiers, mobile phones, window cleaning, taxis, print, stationery, furniture, etc, must be arranged in accordance with the Policy for the trial and evaluation of Medical Devices and/or through Procurement and Supplies Department. Individual departmental managers are NOT authorised to enter into contracts or trials with referral to the Procurement and Supplies Department.

6.55. All medical samples must be CE marked (Conformité Européenne). 'CE' marking is an indication that the product has undergone some form of verification and validation process acceptable to the European Community (EC).

6.56. The Trust requires that **all** electro-medical equipment is obtained in agreement with the Medical Physics department. This includes all equipment on loan (for trial or testing) and free issues (for trial or testing).

6.57. All electro-medical equipment must be tested prior to delivery to a ward or department. Under no circumstances should electro-medical equipment be delivered directly to a ward/department without the prior knowledge of Medical Physics. Medical Physics will notify the Medical Device Training Officer.

6.58. For the purposes of signing contracts and agreements for the purchase/hire/leasing of goods and services, the first point of contact must be the Procurement and Supplies Department

7. Dissemination and Implementation

7.1 The policy will be disseminated via the members of the Medical Devices, Clinical and Non Clinical Products Review Group; Trust-wide e-mail and via the Procurement and Supplies Department. The policy will be held on the Document Library.

8. Monitoring compliance and effectiveness

Element to be monitored	Adherence to use of the Medical Industry Accredited system requirement of the policy will be monitored
Lead	Medical Devices, Clinical and Non Clinical Products Review Group
Tool	Monitoring will be undertaken by the Head of Procurement and Supplies reviewing the Medical Industry Accredited system
Frequency	Quarterly
Reporting arrangements	Results of the review will be presented to the Medical Devices, Clinical and Non Clinical Products Review Group
Acting on recommendations and Lead(s)	Medical Devices, Clinical and Non Clinical Products Review Group
Change in practice and lessons to be shared	Required changes to practice will be identified and actioned within three months. A lead member of the team will be identified to take each change forward where appropriate. Lessons will be shared with all the relevant stakeholders

8.1. Adherence to this policy will be monitored by the incidences of complaints relating to behaviour to either the Security or Procurement and Supplies Departments. These will be reviewed annually or more frequently if continued complaints are received directly by any Trust member of staff, and the findings maintained by the Procurement and Supplies Department.

8.2. These arrangements may be subject to review under the Trust's Internal Audit Plan, either on a cyclical or ad-hoc basis. Any allegations/suspicions of fraudulent activity, either by Trust staff or suppliers, should be reported to the Local Trust Counter Fraud Specialist.

9. Updating and Review

The policy will be reviewed every 3 years, unless the on-going monitoring indicates that a review is required earlier.

10. Equality and Diversity

10.1. This document complies with the Royal Cornwall Hospitals NHS Trust service Equality and Diversity statement which can be found in the 'Equality, Diversity & Human Rights Policy' or the Equality and Diversity website.

10.2. The Initial Equality Impact Assessment Screening Form is at Appendix 4.

Appendix 1. Third Party Paid Expenses Approval Form

Requester Details			
Employee Name		Position and Directorate	
Details of travel			
Supplier Name			
Date of travel	From	To	
Details of all expenses covered by Supplier			
Anticipated total cost	£		
How will this be paid (eg to the Trust/direct to the employee?)			
Benefits to Trust			
Requester	Signature	Date	
Authorisation Print Name	Signature	Date	

This form must be completed by the employee seeking approval and must be signed by a Divisional Manager or Director of Finance **before** travelling.

Send a copy to Head of Procurement and Supplies and to the Royal Cornwall Hospitals NHS Trust Board Secretary

Appendix 2. Medical Industry Accreditation system

What is MIA?

The Medical Industry Accredited (MIA) system was launched in 2013 by the medical technology industry to:

- raise standards of training for company representatives and service engineers visiting acute and critical care areas of hospitals
- provide assurance to hospital staff that company personnel admitted to sensitive areas are properly trained and are fully aware of their responsibilities
- help the NHS and private sector fulfil its duty of care to protect patients and ensure safe surgical and clinical outcomes
- provide an efficient and effective national solution for industry and NHS

It is sponsored by the Association of British Healthcare Industries (ABHI) with the support of leading trade associations[1] and clinical organisations,[2] and administered by Wellards.

How does it work?

To qualify for a MIA photo-ID card, field-based company personnel must successfully complete a recognised[3] and accredited training course and ensure that they keep their training up to date. Accrediting bodies include the Association for Perioperative Practice, BTEC and the Royal College of Nursing.

The MIA system can provide the capacity to capture representative movements in hospitals (particularly in acute and critical care) and store the appointment records so that approved staff[4] can check the credentials of visiting industry staff to ensure they are properly qualified to engage with healthcare professionals, and enter sensitive areas within a hospital.

The service is free of charge to the NHS and private healthcare providers — all that is required is access to the internet and the ID code of the MIA cardholder. There is also no exclusive contract precluding the recognition of other credentialing service providers.

It is non-profit-making; photo-ID cards cost the industry £18 per person per annum.

www.miaweb.co.uk

Participating companies and industry support

The MIA system is designed to be a partnership between the healthcare industry and the NHS/private sector — over 5,000 field-based staff have undergone accredited theatre and acute training and are registered on the MIA system. This represents nearly 90 per cent of all representatives that venture into acute and critical care in the UK.

Enhancements — MIA as a credentialing service and rep tracking service

The system has been enhanced in 2014 to include the ability to provide credentialing services such as:

- Disclosure and Barring Service (DBS) and relevant inoculation records
- recording on a daily, weekly and monthly basis all visitors to hospitals and pre-booking of appointments
- confirmation that individual hospital policies have been read and understood

This optional capability is customised to individual trusts or hospitals and is available on request.

Supporting organisations

Courses

MIA cardholders have up-to-date accredited qualifications in the areas of:

- theatre access
- acute care
- radiation protection
- blood borne pathogens

They may also demonstrate a working knowledge of the requirements of various codes of practice and conduct* (if required) from bodies such as:

- Association of British Healthcare Industries
- Association of the British Pharmaceutical Industry
- Surgical Dressing Manufacturers Association

The MIA site details evidence of both online and face-to-face training qualifications.

*Industry codes are non-accredited.

Contacts

Please call on 01892 752 407 or email help@miaweb.co.uk.

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1 Barema, Optic UK, Surgical Dressing Manufacturers Association
2 Association for Perioperative Practice, Association of Surgeons of Great Britain and Ireland
3 Companies are free to choose from a number of course formats or providers
4 As determined by the healthcare facility

www.miaweb.co.uk

Appendix 3 Governance Information

Document Title	Policy on Supplier Representatives			
Date Issued/Approved:	24 August 2012			
Date Valid From:	01 November 2015			
Date Valid To:	31 October 2018			
Directorate / Department responsible (author/owner):	Lisa Symons, Head of Procurement and Supplies, Finance Department			
Contact details:	01209 310040			
Brief summary of contents	Outlines the Trust's requirements and controls in respect of Supplier Representatives visiting Trust premises			
Suggested Keywords:	Procurement, Supplies, Company Reps, Supplier Reps, Reps Policy, Product Trials, Sample products, Supplier Representatives, Company Representatives			
Target Audience	RCHT	PCH	CFT	KCCG
	✓			
Executive Director responsible for Policy:	Director of Finance			
Date revised:	31 October 2015			
This document replaces (exact title of previous version):	Policy on Supplier Representatives			
Approval route (names of committees)/consultation:	Medical Devices, Clinical and Non Clinical Products Group			
Divisional Manager confirming approval processes	Director of Finance			
Name and Post Title of additional signatories	Not Required			
Name and Signature of Divisional/Directorate Governance Lead confirming approval by specialty and divisional management meetings	Not Required			
	Name: Not Required			
Signature of Executive Director giving approval	{Original Copy Signed}			
Publication Location (refer to Policy on Policies – Approvals and Ratification):	Internet & Intranet	✓	Intranet Only	

Document Library Folder/Sub Folder	Finance / Finance General
Links to key external standards	Key Governance Document
Related Documents:	Procurement Policy Policy for the Trial and Evaluation of Medical Devices Standing Orders and Standing Financial Instructions Trust's Standards of Business Conduct Control of Contractors Policy
Training Need Identified?	No

Version Control Table

Date	Version No	Summary of Changes	Changes Made by
10.01.12	V1.0	Original policy revised and re-written following comments on members of Medical Devices, Clinical and Non Clinical Products Group, ready to be issued for Trust-wide consultation	Lisa Symons, Head of Procurement and Supplies
08.03.12	V2.0	Amendments to policy made following comments received during Trust-wide consultation	Lisa Symons, Head of Procurement and Supplies
24.08.12	V3.0	Paragraph 6.2 amended to show where Supplier Reps should report to, and incorporating comments from Counter Fraud Officer	Lisa Symons, Head of Procurement and Supplies
18.12.14	V4.0	Date valid to extended to 31 May 2015 to enable a trial of a supplier representative accreditation process to be undertaken	Lisa Symons, Head of Procurement and Supplies
06.05.15	V4.1	Date valid to extended to 31 August 2015 to enable it to go to the Medical Devices Group meeting on 31 July 2015	Garry Cooper, Senior Finance Manager
31.10.15	V5	Policy reviewed and amended to incorporate changes regarding reporting arrangements, introduction of Medical Industry Accreditation system	Lisa Symons, Head of Procurement and Supplies

All or part of this document can be released under the Freedom of Information Act 2000

This document is to be retained for 10 years from the date of expiry.

This document is only valid on the day of printing

Controlled Document

This document has been created following the Royal Cornwall Hospitals NHS Trust Policy on Document Production. It should not be altered in any way without the express permission of the author or their Line Manager.

Appendix 4. Initial Equality Impact Assessment Form

Name of Name of the strategy / policy /proposal / service function to be assessed (hereafter referred to as *policy*): Policy on Supplier Representatives	
Directorate and service area: Finance, Procurement	Is this a new or existing Policy? Existing
Name of individual completing assessment: Lisa Symons	Telephone: 01209 310040
1. Policy Aim* Who is the strategy / policy / proposal / service function aimed at?	To ensure a sound and professional relationship between the staff of the Trust and its suppliers and their commercial representatives
2. Policy Objectives*	The objective is to provide information on how staff of the Trust, its suppliers and commercial representatives are expected to behave and what behaviour representatives can expect from the Trust's staff
3. Policy – intended Outcomes*	Compliance with national and local guidelines and requirements
4. *How will you measure the outcome?	Monitoring, review and audit through inspection of the Medical Accreditation Industry register, reporting to the Medical Devices, Clinical and Non-Clinical Products Group and the Audit Committee
5. Who is intended to benefit from the policy?	All staff
6a) Is consultation required with the workforce, equality groups, local interest groups etc. around this policy? b) If yes, have these *groups been consulted? C). Please list any groups who have been consulted about this procedure.	No Medical Physics Department Medical Devices, Clinical and Non-Clinical Products Group

7. The Impact
Please complete the following table.

Are there concerns that the policy **could** have differential impact on:

Equality Strands:	Yes	No	Rationale for Assessment / Existing Evidence
Age		✓	The policy requires that supplier representatives of all companies are treated equally and fairly
Sex (male, female, trans-gender / gender reassignment)		✓	The policy requires that supplier representatives of all companies are treated equally and fairly

Race / Ethnic communities /groups		✓	The policy requires that supplier representatives of all companies are treated equally and fairly
Disability - Learning disability, physical disability, sensory impairment and mental health problems		✓	The policy requires that supplier representatives of all companies are treated equally and fairly
Religion / other beliefs		✓	The policy requires that supplier representatives of all companies are treated equally and fairly
Marriage and civil partnership		✓	The policy requires that supplier representatives of all companies are treated equally and fairly
Pregnancy and maternity		✓	The policy requires that supplier representatives of all companies are treated equally and fairly
Sexual Orientation, Bisexual, Gay, heterosexual, Lesbian		✓	The policy requires that supplier representatives of all companies are treated equally and fairly

You will need to continue to a full Equality Impact Assessment if the following have been highlighted:

- You have ticked "Yes" in any column above and
- No consultation or evidence of there being consultation- this excludes any *policies* which have been identified as not requiring consultation**. or**
- Major service redesign or development

8. Please indicate if a full equality analysis is recommended.		**No**

9. If you are not recommending a Full Impact assessment please explain why.

There are no concerns that the policy could have differential impact on any equality strand

Signature of policy developer / lead manager / director Lisa Symons	Date of completion and submission 31 October 2015

Names and signatures of members carrying out the Screening Assessment	1. Lisa Symons 2. Garry Cooper	Head of Procurement and Supplies Senior Finance Officer

Keep one copy and send a copy to the Human Rights, Equality and Inclusion Lead, c/o Royal Cornwall Hospitals NHS Trust, Human Resources Department, Knowledge Spa, Truro, Cornwall, TR1 3HD

A summary of the results will be published on the Trust's web site.

Signed _____

Date _____