

## Organization-wide Procedure

<b>Target Group:</b> All Caregivers, Suppliers	<b>Original Date of Issue:</b> 23/05/2016	<b>Date of Last Review:</b> 22/03/2018	<b>Publication Date:</b> 22/03/2018
<b>Approved by:</b> Chief Operating Officer	<b>Date Last Approved:</b> 23 May 2016	<b>Prepared by:</b> Supply Chain	<b>Version Number:</b> 2

**Printed copies are for reference only. Please refer to the electronic copy for the latest version.**

### Purpose

This Procedure outlines the processes, process owners, and steps to initiate, request, evaluate, coordinate, and schedule approved visitation request for Vendors visiting Cleveland Clinic Abu Dhabi (CCAD) premises (during or off business hours) for the purpose of marketing or distributing information regarding the use of Vendor products or soliciting business services.

This Procedure aims to ensure identification and reasonable control of visiting vendors, while minimizing disruption of care, ensuring patient safety, privacy and confidentiality.

### Procedure

Vendors will not be permitted to meet Caregivers (Clinical and Non-Clinical) without prior appointment. Any Vendor visitation request received in person, via phone or any other medium, must be coordinated by Supply Chain (SC). Please refer to [Supply Chain email](#) below.

Vendors who already provide specific products or services to CCAD as part of a contractual agreement, whether stationed within CCAD or not, and are interested in marketing or distributing information regarding another product or soliciting for another service outside of their current contractual agreement, are also required to follow this Procedure.

Vendors requesting a follow-up visit to a previously approved and completed visit are required to follow the processes detailed herein; however, Vendors are only required to complete the Vendor Visitation Questionnaire each time a new product/service is being marketed/solicited.

Visits stipulated as part of CCAD's contract with Vendors do not require coordination with SC; such visits can be directly coordinated with the concerned Caregiver.

The Procedure does not apply to the activities of entities that lease CCAD property.

For the purpose of segregation of duty and checks and balance, the Concerned Caregiver cannot be the same as other Process Owners- the Director of Planning and Procurement (DOPP), Category Manager, Procurement Specialist, Procurement Manager (PM), Compliance Manager, Quality & Performance Analyst, Medical Secretary, or Administrative Assistant. In instances where the Concerned Caregiver is any of the Process Owners, another Process Owner in similar title shall implement the process, or the Process Owner shall be excluded from the process. For example, if a Category Manager (CM) or Procurement Specialist (PS) is the Concerned Caregiver, another CM or PS will be responsible for implementing the steps delegated to CM or PS herein; also, if the PM is the Concerned Caregiver, the PM will be excluded from evaluating the Conflict of Interest.

The following are the steps to request, evaluate, coordinate, schedule, and cancel approved Vendor visitation.

1. Initiating Vendor Visitation Request
  - 1.1. Vendor sends email with request to visit CCAD and a brief description of the purpose of the visit, to [Supply Chain email](#).
  - 1.2. In the event a Vendor marketing products or soliciting for a business service contacts any Caregiver other-than the Concerned Caregiver, the contacted Caregiver informs the Vendor to send an email

## Vendor Visitation Procedure - Organization-wide Procedure

containing a brief description of the purpose for the visit, with the Subject: "Request to Visit CCAD" to [Supply Chain email](#).

- 1.3. In the event a Vendor directly contacts a Concerned Caregiver- in person, via phone or any other medium, for the purpose of marketing products or soliciting a business service:
  - 1.3.1. The Concerned Caregiver, if disinterested in meeting the Vendor, politely informs the Vendor (via call or phone) of the disinterest. Process ends.
  - 1.3.2. The Concerned Caregiver, if interested in meeting the Vendor, advises the Vendor to send an email containing a brief description of the purpose for the visit, with the Subject: "Request to Visit CCAD" to [Supply Chain email](#).
  - 1.3.3. Please proceed with [step 2.2.2](#).

### 2. Visitation Request by Vendor

- 2.1. Upon receiving the Vendor visitation request, the CM or PS forwards the Vendor email request to the Concerned Caregiver and ask if he/she is interested in meeting the Vendor.
- 2.2. Upon receiving the Concerned Caregiver's response,
  - 2.2.1. If the Concerned Caregiver communicates disinterest in meeting the Vendor, the CM or PS politely informs the Vendor (via call or phone) of the disinterest.
    - 2.2.1.1. No further process.
  - 2.2.2. The CM or PS, if the Concerned Caregiver is interested in meeting the Vendor, sends an email to the Vendor using the [Initiating Vendor Visitation Request Email Template](#) and requests the Vendor to complete the [Vendor Visitation Questionnaire](#).

### 3. Evaluation of Vendor Visitation Questionnaire

- 3.1. The Vendor completes and emails the signed [Questionnaire](#) in reply to the CM or PS.
- 3.2. Upon receiving the [Questionnaire](#) from the Vendor, the CM or PS reviews the [Questionnaire](#) to ensure it is signed and stamped with the company stamp (only applicable to UAE based companies).
  - 3.2.1. The CM or PS also uses the following list as guide in evaluating whether to reject or approve Vendors' visitation request.
  - 3.2.2. Questionnaires without signature will be evaluated as 'reject'.
  - 3.2.3. Questionnaires with questions left unanswered should be evaluated based on the significance of the information not provided, and an evaluation response- reject or approved, reached.
- 3.3. Conflict of Interest through Relationship ([Question #7 of the Questionnaire](#)): The CM or PS emails the list of relationship disclosed by the Vendor to SC Director of Planning & Procurement (DOPP), the Procurement Manager (PM), and the Quality & Performance Analyst.
  - 3.3.1. The DOPP, the PM, and/or the QPA, in consultation with the Compliance Manager (as necessary) evaluates whether the disclosure constitute conflict of interest, and the level of significance.
  - 3.3.2. The QPA emails the conflict of interest deemed significant to the Compliance Manager, for record purpose.
  - 3.3.3. The QPA also sends an email to the CM or PS with the Conflict of Interest evaluation reached.
    - 3.3.3.1. Questionnaire deemed to have significant relational Conflict Of Interest must be evaluated as 'reject,' and all further evaluation stopped.
    - 3.3.3.2. Questionnaire with disclosed Conflict of Interest but deemed non-significant relational Conflict of Interest should be further considered in the evaluation process.
- 3.4. Conflict of Interest through Financial Interest ([Question #8 of the Questionnaire](#)): The CM or PS emails the list of financial interest disclosed by the Vendor to the SC Director of Planning &

## Vendor Visitation Procedure - Organization-wide Procedure

Procurement (DOPP), the Procurement Manager (PM), and the Quality & Performance Analyst (QPA).

- 3.4.1. The DOPP, the PM, and/or the QPA, in consultation with the Compliance Manager (as necessary) evaluates whether the disclosure constitute conflict of interest, and the level of materiality.
- 3.4.2. The QPA emails the disclosure deemed as material financial Conflict of Interest to the Compliance Manager, for record purpose.
- 3.4.3. The QPA also sends an email to the CM or PS with the Conflict of Interest evaluation reached.
  - 3.4.3.1. Questionnaire deemed to have material financial Conflict Of Interest must be evaluated as 'reject,' and all further evaluation stopped.
  - 3.4.3.2. Questionnaire deemed to have non-material financial Conflict Of Interest should be further considered in the evaluation process.

3.5. The CM or PS liaises with, and emails the evaluation points and decision to the Concerned Caregiver.

3.6. The CM or PS completes the '[CCAD Category or Procurement Specialist Evaluation](#)' section of the [Questionnaire](#). The following are steps to perform for each evaluation response.

3.6.1. Reject Visitation

- 3.6.1.1. The CM or PS emails the evaluation response to the Vendor using the [Vendor Visitation Rejected Email Template](#).

3.6.2. Approve Visitation

- 3.6.2.1. The CM or PS emails the evaluation response to the Vendor using the [Vendor Visitation Approved Email Template](#).

- 3.6.2.1.1. If Vendor checks 'Yes' to Question 1 of the [Pre-Questionnaire](#) section of the [Questionnaire](#), the CM or PS also attaches the [Vendor Management Policy](#) and the [Vendor Code of Conduct](#) to the email, or
- 3.6.2.1.2. If there has been updated version of the [Vendor Management Policy](#) and/or [Vendor Code of Conduct](#) after the date the Vendor indicated in Question 2 of the [Pre-Questionnaire](#) section of the [Questionnaire](#), the CM or PS also attaches the [Vendor Management Policy](#) and the [Vendor Code of Conduct](#) to the email.

## 4. Scheduling of Approved Vendor Visitation

4.1. The CM or PS sends an email to the Medical Secretary (MS) or Administrative Assistants (AA) of the Concerned Caregiver, requesting him/her to:

- 4.1.1. Assign a Clinical Staff Caregiver(s) ('Escort')- This is only if the Vendor is visiting Patient Care Area- include Nursing units, the Emergency area, Outpatient area, Operating Room (OR) area, Radiology area, other inpatient/outpatient areas, and Patient areas- such as corridors, where Patients wait to obtain such care or services.
- 4.1.2. Coordinate appointment date and time with the concerned Caregiver, the Escort (if one is assigned), and the Vendor.
- 4.1.3. Send an email with the appointment time and date to all parties including the Security Department and CC to the CM or PS.
- 4.1.4. The CM or PS also attaches the following contact information to the email:
  - 4.1.4.1. Name(s) and email address(es) of the Vendor approved for visitation.
  - 4.1.4.2. CCAD Security Department,  
[SecurityCommandCentre@ClevelandClinicAbuDhabi.ae](mailto:SecurityCommandCentre@ClevelandClinicAbuDhabi.ae).
- 4.1.5. The CM or PS also informs the MS or AA if he/she will be present at the meeting.

4.2. The MS or AA assigns an Escort if the Vendor is visiting Patient Care area, and coordinates Vendor visit schedule with the concerned Caregiver, the Vendor, the Escort (if one is assigned), and the CM or PS.

- 4.2.1. The MS or AA must have received an email request ([step 4.1](#)) from the CM or PS, to grant Vendor access to meet a Concerned Caregivers.

## Vendor Visitation Procedure - Organization-wide Procedure

- 4.3. The MS or AA sends an email with the Subject: 'Vendor Visitation Schedule', and containing the following details, to the Vendor and cc's the Security Department, the Escort (if one is assigned); and the CM or PS.
  - 4.3.1. The appointment date, meeting location and time.
  - 4.3.2. Instruction for the meeting location, using the [Instruction for Vendor Meeting Location](#) document.

### 5. Vendor Visitation: Day of Visit

- 5.1. Vendors Scheduled to Meeting Locations in Al Maqam:
  - 5.1.1. Vendors scheduled to meeting locations in Al Maqam Tower proceeds to Al Maqam Reception Security Officer, and inform Al Maqam Reception Security Officer of meeting schedule.
  - 5.1.2. Al Maqam Reception Security Officer reviews Vendor's ID and issues a Visitor Pass.
  - 5.1.3. Vendor proceeds to CCAD Security Front desk of the floor, in Al Maqam, where meeting will be held.
  - 5.1.4. Please proceed with [step 5.3](#).
- 5.2. Vendors Scheduled to Meeting Locations in CCAD Hospital:
  - 5.2.1. Vendors scheduled to meeting locations in CCAD Hospital proceeds to CCAD Hospital P3 Security Front Desk.
  - 5.2.2. Please proceed with [step 5.3](#).
- 5.3. The Escort (if one is assigned) waits at the CCAD Security Front Desk to receive the Vendor(s).
- 5.4. Upon arrival of the Vendor, the CCAD Security personnel on duty checks [SecurityCommandCentre@ClevelandClinicAbuDhabi.ae](mailto:SecurityCommandCentre@ClevelandClinicAbuDhabi.ae), for Vendor's visitation schedule from the MS or AA:
  - 5.4.1. If the CCAD Security personnel is unable to confirm Vendor Visitation schedule from the MS or AA, for the Vendor:
    - 5.4.1.1. The CCAD Security personnel advises the Vendor to send an email containing a brief description of the purpose of visit, with the Subject: "Request to Visit CCAD" to [Supply Chain email](#) below.
    - 5.4.1.2. Proceed to [step 2.1](#) if Vendor subsequently sends request to Supply Chain email; otherwise, this process ends.
  - 5.4.2. If the CCAD Security personnel has a valid 'Vendor Visitation Schedule' email from MS or AA, for the Vendor:
    - 5.4.2.1. For validity check, the CCAD Security personnel reviews the confirmation email to ensure it is from a MS or AA and that the CM or PS is cc'd. Emails without a CM or PS copied are deemed invalid; the CCAD Security personnel in such instance must refuse the Visitor entry.
    - 5.4.2.2. The Vendor requests the Vendor to complete the Visitation Log with time of arrival, purpose of visit, name of Caregiver vendor is visiting, and signature.
    - 5.4.2.3. The CCAD Security personnel obtains the Vendor(s) identification card, confirms the identity, and retains the ID card.
    - 5.4.2.4. The Security personnel issues the Vendor a Visitor badge
    - 5.4.2.5. The CCAD Security personnel or the Escort (if one is assigned) directs or takes the Vendor to the meeting location.
    - 5.4.2.6. The Escort accompanies Vendor visiting Patient Care Area, throughout the Vendor's visit.
    - 5.4.2.7. The CM or PS may be present to participate in the Vendor visitation meeting, where the Vendor is marketing his products or soliciting for business services.

### 6. Product Sampling

## Vendor Visitation Procedure - Organization-wide Procedure

- 6.1. The concerned Caregiver notifies SC of any sample the Vendor presents. Please refer to the [Receiving of Samples Procedure](#) for further details.
7. Document Filing
  - 7.1. The CM or PS saves all Vendor visitation related documents in the 'Vendor Visitation Schedule' folder located in the Supply Chain YDrive.
8. Vendor Visitation Schedule Cancellation
  - 8.1. Vendor sends a Vendor cancellation notification in reply to the MS, AA CM or PS.
  - 8.2. The contacted Process Owner emails the cancellation notification to the concerned Caregiver, the Escort (if one is assigned), and/or the MS, AA CM or PS.
    - 8.2.1. Vendors are requested to send visitation cancellation email 24 hours prior to their scheduled appointment.
  - 8.3. The CM or PS sends an email stating that the Vendor Visitation Schedule has been cancelled, to the Vendor, the concerned Caregiver, the Escort (if one is assigned), and/or the MS or AA.

### **Oversight and Responsibilities**

1. The Category Manager (CM) is responsible for processing Vendor Visitation requests, evaluating Questionnaires from Clinical Vendors, and communicating Vendor Visitation Request Evaluation response to the Concerned Caregiver, Medical Secretary (MS, for Clinical Vendors) or Administrative Assistants (AA, for Non-Clinical Vendors) of the Concerned Caregiver, and the Vendor.
2. The Procurement Specialist (PS) is responsible for processing Vendor Visitation requests, evaluating Questionnaires from Non- Clinical Vendors, and communicating Vendor Visitation Request Evaluation response to the Concerned Caregiver, Medical Secretary (MS, for Clinical Vendors) or Administrative Assistants (AA, for Non-Clinical Vendors) of the Concerned Caregiver, and the Vendor.
3. The Medical Secretary (MS) or Administrative Assistants (AA) of the Concerned Caregiver is responsible for assigning a Clinical Staff Caregiver for Vendors visiting Patient Care Area; coordinating Visitation schedule and emailing the Visitation schedule (for Vendors approved to visit) to the Vendor, the Concerned Caregiver, the Escort (if one is assigned), the CM or PS, and the Security Department.
4. All CCAD Caregivers are responsible for directing Vendors to contact SC, or to CCAD Security front desk.
5. Security Department is responsible for issuing Visitor's badge to vendors pre-approved for visitation, and maintains a log of Vendor's visit consisting time of arrival, time of departure and Vendor signature.

### **Definitions**

1. CCAD premise: Floors dedicated to CCAD in Al Maqam Tower, CCAD Hospital, and any other CCAD business sites.
2. Contacted Caregiver: Any Caregiver other than the Concerned Caregiver, as defined below.
3. Concerned Caregiver: Caregiver that has direct interest in meeting the Vendor.
4. Escort: Clinical staff Caregiver.
5. Patient Care Area: Patient Care area include Nursing units, the Emergency area, Outpatient area, Operating Room (OR) area, Radiology area, other inpatient/outpatient areas, and Patient areas- such as corridors, where Patients wait to obtain such care or services.

## **Vendor Visitation Procedure - Organization-wide Procedure**

6. Process Owners: Individuals primarily responsible for implementation of the steps.
7. Vendor: A company that supplies or intends to supply goods and/or services to CCAD. This constitutes manufacturers, suppliers, distributors, or providers of products, equipment or services, or their representatives- sales person, manager, liaison, account executive, contact, administrator, company technician, clinical support, nurse clinician, home healthcare personnel, manager, or medical/scientific liaison, or service agents.
8. Vendor Visitation: The approved presence of a Vendor at CCAD, for the purpose of soliciting, marketing or distributing information regarding the use of products or services not already procured by CCAD under the Contractual or P.O. Terms.

### **References**

1. Supply Chain email:  
Vendors marketing Clinical goods or soliciting for Clinical services can reach SC at [DL-ClinicalCategoryManagers@ClevelandClinicAbuDhabi.ae](mailto:DL-ClinicalCategoryManagers@ClevelandClinicAbuDhabi.ae).  
For Vendors marketing Non- Clinical goods or soliciting for Non- Clinical services can reach SC at [DL-SCMNonClinicalProcurement@ClevelandClinicAbuDhabi.ae](mailto:DL-SCMNonClinicalProcurement@ClevelandClinicAbuDhabi.ae).
2. Vendor Code of Conduct.
3. Vendor Management Policy.

### **Institute / Department / Committee Involved in Procedure Development / Revision**

1. Supply Chain.
2. Protective Services (Security) Department.

### **Contact for Questions / Clarifications**

1. Supply Chain Category Managers.

### **Related/Supporting documents**

1. Appendix A: Initiating Vendor Visitation Request- Email Template.
2. Appendix B: Instructions for Vendor Meeting Location.
3. Appendix C: Vendor Visitation Approved- Email Template.
4. Appendix D: Flow Chart: Vendor Visitation Procedure
5. Appendix E: Vendor Visitation Questionnaire
6. Appendix F: Vendor Visitation Rejected- Email Template.

Appendix A: Initiating Vendor Visitation Request- Email Template



A Mubadala Company

THURSDAY, JUNE 02, 2016

*SUBJECT OF EMAIL:* Initiating a Vendor Visitation Request- **Name of Vendor**

Dear **Vendor**,

Thanks for your interest in visiting Cleveland Clinic Abu Dhabi (CCAD). For consideration of your visit request please complete the attached Vendor Visitation Questionnaire with the requested details.

Email the completed Questionnaire and related supporting documents to Supply Chain at the below email address related to the kind of goods you are marketing or services you are soliciting.

Vendors marketing Clinical goods or soliciting for Clinical services, send email to [DL-ClinicalCategoryManagers@ClevelandClinicAbuDhabi.ae](mailto:DL-ClinicalCategoryManagers@ClevelandClinicAbuDhabi.ae).

Vendors marketing Non-Clinical goods or soliciting Non-Clinical services, send email to [DL-SCMNonClinicalProcurement@ClevelandClinicAbuDhabi.ae](mailto:DL-SCMNonClinicalProcurement@ClevelandClinicAbuDhabi.ae).

Our team will review your response and provide you feedback shortly.

Yours faithfully,

CCAD Supply Chain

## Appendix B: Instructions for Vendor Meeting Location

### CCAD Vendor Visitation Procedure:

#### Instructions For Vendor Meeting Locations

##### Instructions for Meeting Locations in CCAD Hospital

1. Park on level Podium 3 of CCAD Hospital.
2. Ask a CCAD Security personnel or CCAD Caregiver to direct you to the Hospital Security front desk in level Podium 3.
3. Present your identification to the Hospital Security Personnel, who will issue you a Visitor badge.
4. During the period of your visit, you may be required to wear accessories such as scrub or safety equipment. A CCAD Caregiver will guide you through this.
5. The CCAD Security personnel will retain your ID for the period of your visit.
6. Visitor badge must be worn and visible at all times.

##### Instructions for Meeting Locations in Al Maqam Tower

1. Park on Sowwah Square North, or South Car Parks.
2. We recommend the use of South Square South Car Park (via the Visitors entrance lane) for proximity to Al Maqam Tower.
3. Between 07.00 am to 10.00 am: on arrival at the car park entrance visitors are requested to tell the Car Park Guide that they are a "Visitor to CCAD in Al Maqam". You will be allowed entry and advised to park on Level 4 which is the car park entry level.
4. After 10.00 am: the car park barrier will be open. Visitors are advised to enter the car park and park on Levels 4, 3 or 2.
5. Proceed to the lift bank and select P4 for the most convenient access to Al Maqam Reception.
6. Present your identification to the Al Maqam Tower receptionist, who will issue you a Visitor Pass.
7. Proceed to the CCAD Floor where your appointment is scheduled to occur.
8. Present your identification to the CCAD Security personnel, who will issue you a Visitor badge.
9. The CCAD Security personnel will retain your ID for the period of your visit.
10. Upon completion of your visit, sign-out and return the Visitor badge to the CCAD Security personnel where you initially signed-in.
11. The Security personnel will return your ID to you.



Appendix C: Vendor Visitation Approved- Email Template



A Mubadala Company

THURSDAY, JUNE 02, 2016

*SUBJECT OF EMAIL:* Vendor Visitation Request Response- **Name of Vendor**

Dear **Vendor**,

Thank you for sending the completed and signed CCAD Vendor Visitation Questionnaire. Your response was reviewed by our team, and your visitation request for the indicated purpose has been approved. <sup>1</sup>**Please read the attached Vendor Code of Conduct and Vendor Management Policy.** Your compliance with the Code and Policy is vital for effective management of our relationship with you.

You will receive an email containing your appointment details and other helpful information for your visit, shortly. If you would like to cancel your appointment please send us an email at least 24 hours prior to your appointment date.

Please feel free to respond to this email if you have any question.

Yours faithfully,

CCAD Supply Chain

---

<sup>1</sup> *INSTRUCTION FOR TEMPLATE USERS: Only attach the Vendor Code of Conduct and Vendor Management Policy:*

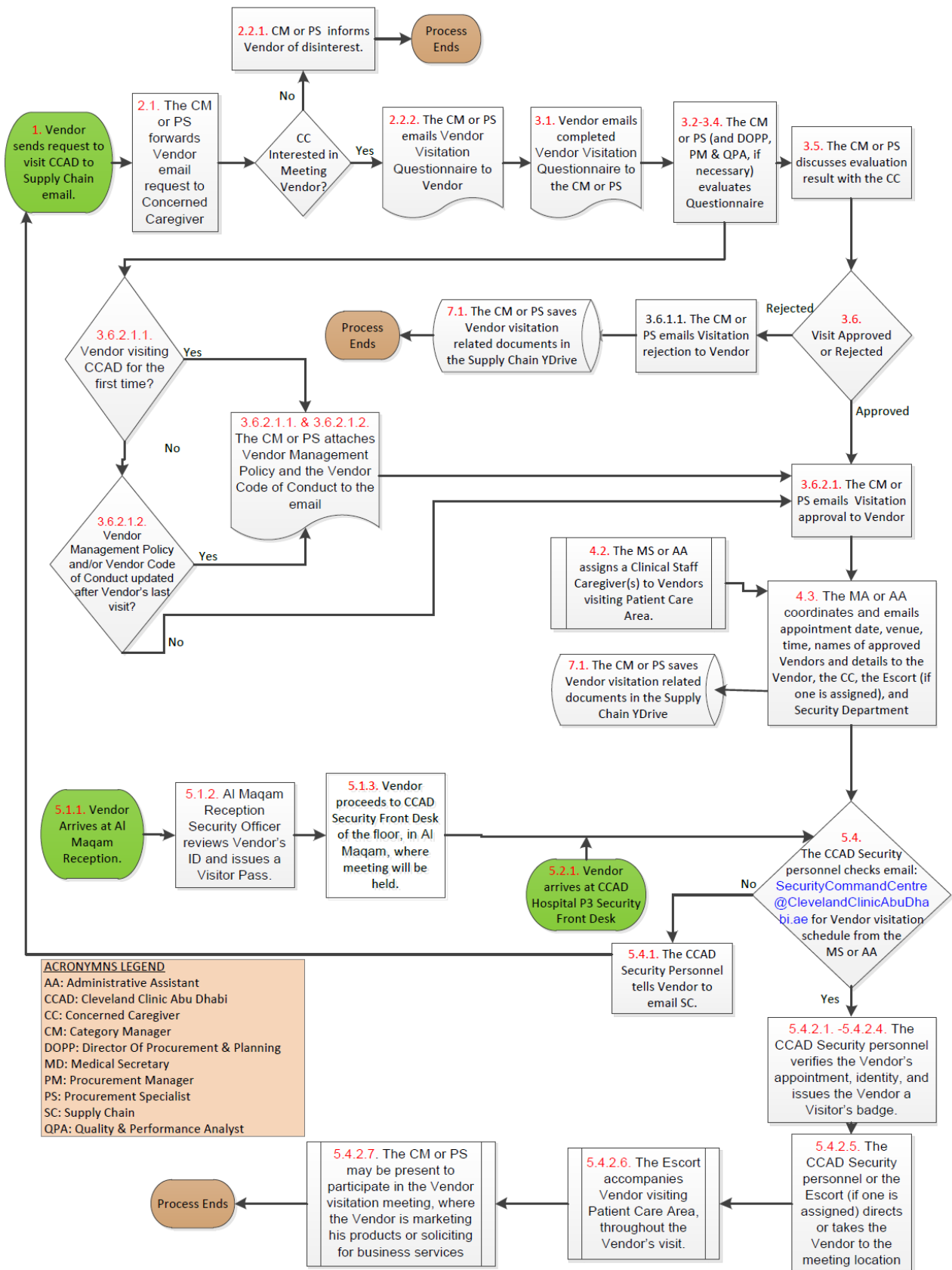
- *If Vendor checks 'Yes' to Question 1 of the [Pre-Questionnaire section](#) of the [Vendor Visitation Questionnaire](#).*

*Or,*

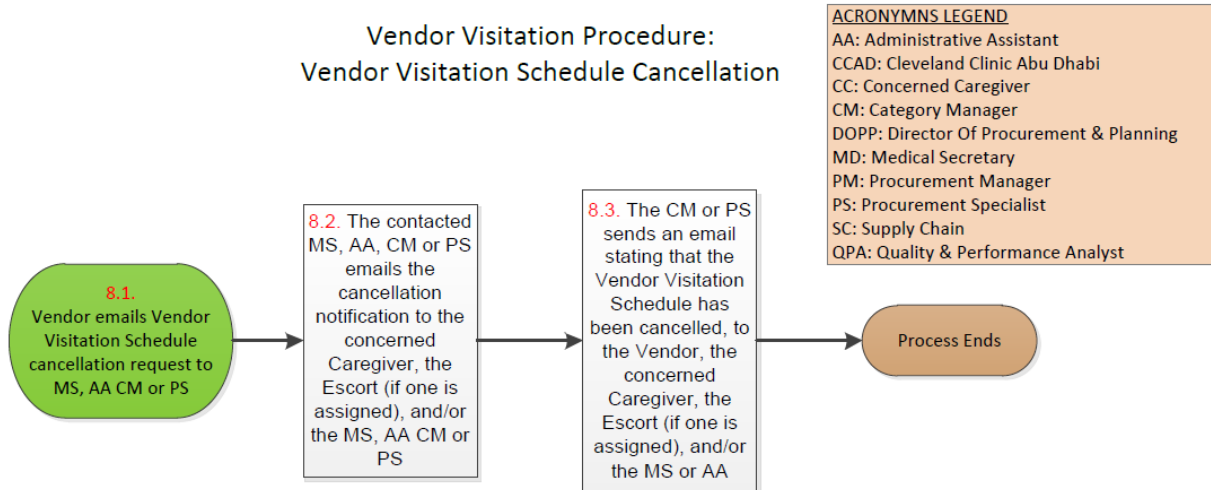
- *If the Code and Policy have been updated after the date the Vendor indicated in Question 2 of the [Pre-Questionnaire section](#) of the [Vendor Visitation Questionnaire](#).*

Appendix D: Flow Chart: Vendor Visitation Procedure

Flow Chart: Vendor Visitation Procedure



Vendor Visitation Procedure:  
Vendor Visitation Schedule Cancellation



**Appendix E: Vendor Visitation Questionnaire**



**VENDOR VISITATION QUESTIONNAIRE**

**INSTRUCTION:** Please complete, sign and email this Vendor Visitation Questionnaire along with the requested documents to one of the Supply Chain email address related to your business. **Response to all fields are mandatory; insert 'N/A' for fields not applicable.**

Vendors marketing Clinical goods or soliciting for Clinical services, send email to:  
[DL-ClinicalCategoryManagers@ClevelandClinicAbuDhabi.ae](mailto:DL-ClinicalCategoryManagers@ClevelandClinicAbuDhabi.ae).

Vendors marketing Non-Clinical goods or soliciting Non-Clinical services, send email to:  
[DL-SCMNonClinicalProcurement@ClevelandClinicAbuDhabi.ae](mailto:DL-SCMNonClinicalProcurement@ClevelandClinicAbuDhabi.ae).

**PRE-QUESTIONNAIRE**

1. Are you requesting to visit CCAD for the first time?  No  Yes
2. If No, provide date (dd/mm/yyyy) of your last visit? \_\_\_/\_\_\_/\_\_\_\_ Provide brief description of product marketed or service solicited for, during your last visit?: \_\_\_\_\_

For Reference Only

**QUESTIONNAIRE**

1. Legal Business Name: \_\_\_\_\_
2. Primary Business Locations (per License): \_\_\_\_\_
3. Type of Organization (please check one)
  - Business Corporation  Limited Liability Company
  - Not-for Profit Corporation  Joint Venture
  - Sole Proprietorship  Other-indicate type: \_\_\_\_\_
  - Partnership (please check one):  General  Limited  Limited Liability
4. Purpose of Visit (brief description): \_\_\_\_\_
5. Will you present free sample of your product during your visit? If yes, please check method.  No  Yes  
 Product Sample Method (please check one):
  - View-Only Sample (brief description) \_\_\_\_\_
  - Sample for Trial (Testing on Patient?)  No  Yes (brief description) \_\_\_\_\_
  - Other (please specify): \_\_\_\_\_
7. Do you or someone in your company has any relative currently working at CCAD? If yes, please provide details and indicate the relationship (attach a separate sheet if necessary).  No  Yes

	<u>Name and Title</u>	<u>CCAD Department</u>	<u>Relationship</u>
A.			
B.			
C.			

8. Do you know anyone currently working at CCAD who has financial interest- by stock investment or capital, in your Company? If yes, please provide details and indicate the value of the financial interest (attach a separate sheet if necessary).  No  Yes

**Vendor Visitation Procedure - Organization-wide Procedure**

	<u>Name and Title</u>	<u>Fair Value of Investment or Capital</u>	<u>Currency</u>
A.			
B.			
C.			

9. Do you have a valid Commercial license to provide the product and/or services you are offering, and for your country of business operation?  No  Yes

10. *At any time during the past five (5) years, has the submitting vendor or any of its affiliates, been subject to any of the following actions, whether pending or completed. If yes, please explain.*

Prohibited from entering into any government contract?  No  Yes

Declared in default and/or contract terminated for cause?  No  Yes

Suspended from bidding or entering into any government contract (e.g. due to conflict of interest, etc.)?  No  Yes

Please provide explanation if you answered 'Yes' to any of question 10 \_\_\_\_\_

11. List All Vendor personnel that will be in attendance:

	<u>Name and Title</u>	<u>Contact Email</u>	<u>Phone Number</u>
A.			
B.			
C.			

12. Section to be completed by Vendor contact person or person filling this Questionnaire:

Name & Title: _____	Phone Number: _____
Email Address: _____	Alternative Phone Number: _____
_____	_____
Signature	Date
_____	
Company Stamp	

13. **CCAD Category or Procurement Specialist Evaluation**

Name and Job Title: _____
Evaluation Remark: <input type="checkbox"/> Approve <input type="checkbox"/> Reject Evaluation Comment: _____
_____
_____
_____
Signature
_____
Date

Appendix F: Vendor Visitation Rejected-Email Template



THURSDAY, JUNE 02, 2016

*SUBJECT OF EMAIL:* Vendor Visitation Request Response- **Name of Vendor**

Dear **Vendor**,

Thank you for sending the Vendor Visitation Questionnaire. Your responses were reviewed by our team and we regret to inform you that your request was rejected. Currently, we have and are satisfied with existing business solution(s) in the area of the products and/or services you offer; as such, we do not seek new business relationships.

We have your information and will reach out to you if a need in the area of your business arises. You may also initiate a new Vendor visitation request six months after this date.

Thanks for reaching out to us, we wish you the best.

Yours faithfully,

CCAD Supply Chain