

Texas Tech University Health Sciences Center El Paso Institutional Compliance Procedure

Health Care Vendor TB Testing	Policy: HSCEP OP 52.16 PRO
	Effective Date: April 25, 2016
References: HSCEP OP 52.15	
TTUHSC El Paso Institutional Compliance Website: http://elpaso.ttuhscc.edu/compliance/	

Procedure Statement

It is the policy of the Texas Tech University Health Sciences Center El Paso (TTUHSC El Paso) to assure that vendors entering our clinical facilities have a current tuberculosis (TB) test on file with the Vendormate System.

Scope

This policy applies and will be distributed to the TTUHSC El Paso's Compliance Department and all ambulatory clinics.

Procedure

1. On the third Monday of each month the Compliance Department will produce a report that will correlate the vendors that have accessed the Texas Tech Physicians of El Paso (TTP El Paso) clinics within the past three months and also have an expired TB test on file with the Vendormate System.
2. Compliance will accomplish by:
 - a. Running the Vendormate report titled "Documentation Verification Status" to identify and all vendors that have had expired TB tests.
 - b. Running the Vendormate report titled "Badge Station Activity" for the prior three months of El Paso vendor activity.
3. The reports will be compared to determine if any of the vendors with an expired TB test have accessed the TTP El Paso clinics within the past three months. If there is a positive match the Compliance Department will contact the vendor notifying the individual that they have one month to provide a current negative tuberculosis test or a negative chest x-ray report.
4. Vendors that fail to complete the requirement will be notified that they cannot access TTP El Paso clinics until they have completed the steps listed in item number three. In addition, the list of the noncompliant vendors will be distributed to the administrators of each clinical department with the instructions to forbid the vendor from entering their service area until the steps in the number three have been completed.
5. Report will be presented to the Clinical Operations Committee.

Frequency of Review

Review Date:

Revision Date: April 25, 2016