

WINCHESTER DISTRICT MEMORIAL HOSPITAL	MANUAL: Hospital Policy Manual	NUMBER:
	SECTION: Finance	AF0700
POLICY/PROCEDURE	SUBJECT: Purchasing – Equipment, Goods, Services	DATE: November 2025

PURPOSE

The purpose of this policy is to provide a fair and economical way of allocating operating costs in compliance with industry best practices and legislative requirements; and creates measures to ensure transparency and accountability in the spending of public funds by the Hospital. It applies to the Board of Directors, Senior Management and all employees of the Hospital.

POLICY

The Hospital ensures that competitive bidding processes are used to acquire goods and services. All transactions and decisions must be properly approved by a level of authorization commensurate with its nature and size. The Hospital is committed to procurement of Canadian goods and services first and foremost. When a Canadian supplier cannot be sourced, the Corporate Services, Procurement Manager and Chief Financial Officer must be made aware. In all instances, Materials Management/Corporate Manager, Procurement Services will be consulted/utilized to assist with quotes, product replacement, etc.

Written quotations from qualified suppliers are required. An explanation will be provided to the Chief Financial Officer when all quotations cannot be obtained.

All employees are responsible for ensuring that the necessary approvals have been obtained before a major commitment is made on behalf of the Hospital.

DEFINITIONS

“Goods” means any physical (tangible) product, capable of being delivered to a purchaser and involves the transfer of ownership from seller to customer.

“Services” means any work performed by an individual who is not an employee of the Hospital.

“Public tender” means the services are advertised in a minimum of three (3) local newspapers and/or MERX (Public Tendering Company), inviting tenders from suppliers. Tenders shall be opened in public on the day and the time designated in the Request for Proposal (RFP) unless altered by an addendum to the tender.

“Invitational tender” means the goods or services are invited to only to pre-selected suppliers (based on experience, expertise, references, and pricing). The suppliers may also be chosen based on past performance at the Hospital. Invitational tender shall have a tendering period of not less than seven days unless authorized by the Chief Financial Officer or Chief Executive Officer.

“Buying Group” means the Hospital has joined other Healthcare Facilities by coming together to create a larger organization who can save money with bulk pricing and volume rebates. This results in significant time savings for the Hospital.

“Capital Equipment/Process” is the process used to annually determine which equipment will be purchased by the Hospital and is approved by the WDMH Board. This process encompasses all equipment valued at \$5,001 and more. The approved list is shared with the Foundation, Auxiliary

and potential donors and it is understood that the equipment on the list will be purchased before any other purchases are considered. The annual process includes Staff, Physicians and Midwives of each department.

“Minor Equipment” is the equipment valued at \$5,000 or less and may include Donated or Loaner equipment. The equipment is purchased through department budgets.

PROCEDURES

1. Goods and services (with the exception of utilities), shall be requisitioned through the MediSolution Program. Materials Management/Corporate Manager, Procurement Services, shall have the sole authority for making purchases commitments on behalf of the Hospital, with proper authorization.
2. An electronic Purchase Order through MediSolution must be used to order all goods and services.
3. If the required number of qualified suppliers (or received bids) is not met, explanation and authorization will be provided by the Chief Financial Officer.
4. The Hospital will endeavour to support the local business community whenever price, quality, and supply time are comparable.
5. Disagreements between Materials Management and the Manager regarding the supplier of the goods or services are to be resolved by the Department Vice-President, or Chief Financial Officer.
6. All prices quoted are treated as confidential by the Hospital and the supplier.
7. All sales representatives will be directed to the Materials Management Department.
8. Unsuccessful vendors who have provided quotes will be so advised by letter.
9. Consultants will not be paid for any hospitality, food or incidental expenses.
10. When quotes or tenders are received, acceptance is not based on price alone, but on quality and various predetermined criteria.
11. The Hospital will utilize the Buying Group services/contracts primarily to ensure the most cost-effective solution.
12. The cost analysis completed for major purchases must take into consideration expenses such as: construction, demolition, product removal, temporary replacement solutions, wiring, cabling, transportation, import fees, training, potential lost revenue during installation, etc. All components of a major purchase must be captured for a complete project cost versus the equipment only.

APPROVAL AUTHORITY SCHEDULE

For all Goods, Services, Consulting Services and Construction

Procurement Value	Means of Procurement	Authorized By
\$0 up to but not including \$1,000	Purchase Order, Department Budget	Department Manager
\$1,000 to \$5,000	Purchase Order, 3 Quotes, Department Budget, Minor Equipment	Department Manager
\$5,001 to \$121,200	Purchase Order, 3 Written Quotes, Capital Equipment Process (Goods)	Chief Financial Officer
\$121,201 or more	Open Competitive Process (Following BPSAA public tendering process), Capital Equipment Process (Goods)	Chief Executive Officer with recommendation from Chief Financial Officer

*Overall value may not be reduced in order to circumvent the approval authority schedule (e.g. dividing a single procurement into multiple procurements).

EMERGENCY CONDITIONS

Where emergency conditions exist, procedures will be assessed and dictated by the Vice-President responsible for the department in consultation with the Chief Financial Officer.

MINOR EQUIPMENT PROCESS

Department Managers are to work in conjunction with Materials Management for goods/services valued between \$1,000 and \$5,000. Department budgets must be consulted, and adequate funding be available for each purchase. The Capital List (located on the Shared Drive) which tracks all expenses, equipment, repairs, etc. must be kept up to date and referenced so accurate budgeting may be projected and assets accounted for.

CAPITAL EQUIPMENT PROCESS

The annual Capital Equipment Process involves Department Managers, Chiefs and staff identifying equipment/systems which the department identifies as approaching end of life or as a need for the department. The Capital List (located on the Shared Drive) shall be referenced and maintained by the Department Manager. The Department Manager will provide the agreed upon listing of capital equipment to the Department VP for review by the deadline. The equipment will be prioritized as High, Medium or Low priority. The prioritized list (each department will provide) will be sent to the

Procurement Manager. The Department Manager in conjunction with Materials Management will obtain quotes for the equipment and communicate closely with the Procurement Manager. All quotes and equipment lists must be received by the Procurement Manager by December 31st each year.

The Office of Corporate Services will coordinate the annual Capital Planning Meeting in January where all Department Managers, Chiefs, Team Leaders, CEO and Foundation Staff will attend. The meeting is used to discuss each listing and consensus on the order items will be purchased is achieved. The Capital Equipment Listing is sent to the Board of Directors for approval at the February Board Meeting.

Upon approval from the Board of Directors, the Capital Equipment Listing is shared with the Foundation, Auxiliary and potential donors for funding. If the High-Priority items are funded, then consideration may be given to Medium-Priority and then Low-Priority items.

Items not funded through the year will be placed on the Capital Listing for the following year and the process of evaluation will begin again.

TENDERS

Tenders are required for goods/services/construction valued at \$121,201 or more. The tendering process must follow the Broader Public Sector Accountability Act (BPSAA). All tenders shall be created in conjunction with the Vice President (VP) Corporate Services. The Office of Corporate Services shall act as custodian for all original tendering documents. Requests for Proposals (RFP) will include concise compliance and evaluation criteria. The Hospital's standard RFP document will be reviewed by the Hospital's legal retainer on an annual basis and/or as required to keep current of industry practices. When the Hospital is part of a Buying Group, the RFP and legal review will be completed by that organization.

Tenders may include Request for Proposal (RFP) or public tenders which appear in local newspapers, online, etc. The VP Corporate Services will direct the process for each, and the Office of Corporate Services will oversee the RFP process including posting to MERX (public tendering company), responding to questions, posting amendments, coordinating onsite visits, and accepting proposals. Once the RFP is posted to MERX, all communications with the Hospital from possible vendors will be directed to the Office of Corporate Services. This is to maintain the integrity of the process, to prevent potential conflicts of interest or the potential for litigation due to lack of fairness or transparency. The Office of Corporate Services will notify vendors as they progress through the steps of the RFP process and will be responsible for notifying the successful vendor and beginning contract negotiations. Debriefs for unsuccessful vendors will be offered and arranged by the Office of Corporate Services.

In the event of litigation from the procurement process, the Office of Corporate Services will represent WDMH to defend the process/outcome.

STEPS/RESPONSIBILITIES

1. All equipment acquisitions, plus donated, loaned and on-trial equipment will be introduced to the Hospital in a systematic fashion.
2. The Department Manager will communicate with Materials Management when any equipment is required. Materials Management will investigate contracts/vendors for possible equipment options.

3. Materials Management will prepare the purchase order and send to the vendor of choice once a decision has been made. Materials Management will also arrange for presentation and trials of new equipment, inform the Material Evaluation Committee, and assess donated equipment offers when required.
4. All equipment is received through, and is coordinated with, Materials Management. Upon receipt of equipment, the Department Manager is notified.
5. Materials Management inspects, labels (asset tags) and records receipt of the equipment. The Corporate Manager, Finance and Procurement Services is notified of receipt.
6. Materials Management coordinates arrangements with Biomedical or other agencies where applicable.
7. The Vendor &/or Manager delivers the equipment (or makes arrangements for delivery) to the department and sets up or installs/arranges installation of the new equipment.
8. The Department Manager coordinates training needs.
9. In the event equipment fails the trial process or has to be returned to the vendor for any reason, Materials Management will coordinate the details of return.
10. In all circumstances of new equipment being introduced to the Hospital, the Manager will include the Manager, Education and Infection Control for their input and consideration of education needs and infection control issues.

REFERENCES AND RELATED STATEMENTS OF POLICY AND PROCEDURE:

- AF0100 Contracts – Signing Authority Limits

ORIGINAL: June 2005

REVISED: September 2009, May 2017, February 2021, November 2025

APPROVED:

Chief Financial Officer

Date

Chief Executive Officer

Date