

Conflict of Interest

1. Introduction

Providence Health Care (PHC) is committed to promoting a standard of conduct that preserves and enhances public confidence in the integrity, objectivity, and impartiality of its clinical and business activities. Accordingly, staff must fulfill their responsibilities in a manner that avoids involvement in any real, perceived, or potential conflicts of interest and must promptly disclose and address any such conflicts as they arise.

A conflict of interest occurs when a staff member's private affairs or financial interests are in conflict, or appear to be in conflict, with their duties and responsibilities at work in such a way that the staff member's:

- ability to act in the interests of PHC may be impaired;
- conduct may undermine or compromise public confidence in the ability of that Staff member to discharge work responsibilities; or
- conduct may undermine or compromise public trust in PHC.

1.1. Purpose

This policy sets the expectations of all PHC staff regarding real or potential conflicts of interest and outlines the management of conflicts of interest in accordance with legal requirements and the goals of accountability and transparency in PHC operations.

1.2. Scope

This policy applies to all [Staff](#) of PHC. This policy is in addition to any legal obligation and professional code(s) of ethics or standards of conduct that may apply to Staff.

2. Policy

While PHC recognizes the right of every member of staff to be involved in activities as citizens of the community, conflicts must not exist between a staff member's private interests and the discharge of their duties at PHC. To ensure that the personal interests of staff do not conflict or appear to conflict with PHC decision making, staff must arrange their private affairs in a manner that will prevent conflicts of interest, or the perception of conflicts of interest, from arising.

In particular, a conflict of interest will exist where a staff member:

- benefits personally, whether directly or indirectly, from any business transaction which accrues from or is based on their official position or authority;
- benefits personally, whether directly or indirectly, from confidential or non-public information which they gain by reason of their official position or authority;

- accepts “educational grants” (e.g. paid attendance at a conference) from an individual or industry, unless the payment is explicitly part of an existing contract for goods or services between PHC and that individual or industry;
- accepts travel or other subsidies for presentations, education, or studies unless part of a formal contract negotiated by PHC or its agents; or
- participates in any PHC decision when their objectivity may be compromised for any reason (e.g. an employment selection decision involving a family member).

2.1. Working Relationships

2.1.1. Relationship amongst staff

Staff members who are related must not be employed in a situation where:

- a reporting relationship exists between the two staff members and the ranking staff member has influence, input, or decision-making power over the other staff member’s performance evaluations, salary or premiums, special permissions, potential for promotion, working conditions or other similar matters; or
- the relationship affords an opportunity for collusion between the two staff members which could detrimentally affect PHC.

The above may be waived where it is essential to do so in order to meet operational needs and there are sufficient safeguards in place to ensure that PHC’s interests are not compromised.

2.1.2. Relationship between staff members and patients or residents

Staff members must conduct themselves in a professional manner with patients and residents and are prohibited from:

- participating in an intimate, personal, or sexual relationship with any patient or resident, whether during or outside work hours; or
- providing medical treatment or rendering other PHC services to patients or residents with whom they are or were previously related.

2.2. Outside Remuneration and Volunteer Work

Staff may engage in remunerative employment with another employer, carry on a business, receive remuneration from public funds for activities outside their position with PHC or engage in volunteer activities outside of PHC only if such activities do not:

- interfere with the performance of their PHC duties;
- negatively affect PHC’s reputation in the community;
- appear to be an official PHC act or appear to represent PHC opinion or policy; or
- involve the unauthorized use of work time or PHC premises, services, equipment or supplies

2.3. Gifts

A member of staff must not demand, solicit, or accept any gift, favour, or service from any patient, resident, individual or industry unless the gift:

- has no more than nominal value (e.g. a box of chocolates) and where it may reasonably be expected that PHC would approve a reciprocal expense for a legitimate business purpose;
- is a normal exchange of hospitality or a customary gesture of courtesy between persons doing business together;
- is a token exchanged as part of established protocol;
- is the normal presentation of a gift to staff participating in a public function, presentation, workshop, or conference; or
- is a normal exchange of gifts between friends.

A member of staff must report any fee or honorarium received when participating in a function held or sponsored by an individual or industry. PHC may require the staff member to return such fee or honorarium or to remit the sum to PHC if, in PHC's sole discretion, retention of the fee or honorarium by the staff member would present a real or perceived conflict of interest.

2.4. Procurement

A member of staff must not participate in the procurement evaluation or decision making relating to potential vendors of goods or services to PHC where the staff member has an actual or perceived conflict of interest with any of the potential vendors. Actual or perceived conflicts of interest in such circumstances may include:

- business or personal relationships (present or past) that the staff member has with any potential vendor (or its employees) or any other person related to any potential vendor; and
- any financial or business interest (present or past) that the staff member has with or related to any potential vendor.

The existence of any such conflict of interest and the involvement of the staff member in any decision-making related to the relevant procurement could potentially create a risk that the evaluation of potential vendors and the final decision on the successful vendor is not fair and objective.

Staff asked to participate in the evaluation or decision-making process associated with any procurement must declare to the procurement project lead, any actual or perceived conflict of interest relating to potential vendors involved in the procurement. If the procurement project lead determines that an actual or perceived conflict of interest exists, the relevant staff member will not be eligible to participate in the evaluation or decision-making process relating to that procurement.

3. Responsibilities

Employees who find themselves in an actual, perceived, or potential conflict of interest must disclose the matter to their supervisor, manager, or ethics advisor.

3.1. Staff Members

Staff are responsible for complying with this policy and must:

- ensure that their personal interests do not conflict, or appear to conflict, with PHC decision making;
- arrange their private affairs in a manner that will prevent conflicts of interest, or the perception of conflicts of interest, from arising;
- disclose any real or potential conflict of interest to their manager. This disclosure must take place at the time the staff member becomes aware of the conflict or when the staff member first anticipates that a conflict may arise. The disclosure must be made in writing; and
- follow any directions from a manager, to prevent or manage a conflict, including directions to immediately discontinue, curtail, or modify involvement in non-PHC activities.

3.2. Management

Management is required to receive staff disclosure of conflicts of interest and respond appropriately within the scope of their responsibility, which might include:

- determining that no conflict exists;
- determining what action should be taken to mitigate the conflict; or
- requesting advice regarding a conflict of interest from PHC Human Resources department as required.

3.3. Senior Staff* Post-Employment Restrictions

Confidential information restrictions

After the employment of a senior staff member at PHC ends, that person must not disclose or otherwise use confidential information obtained through their employment with PHC without the prior written permission of PHC.

Other restrictions

If a senior staff member had a substantial involvement in dealings with an outside entity at any time during the year immediately preceding the end of that person's employment with PHC, then for one year after the end of such employment, that person must not:

- accept an offer of employment, an appointment to the board of directors or a contract to provide services to that outside entity;
- lobby or otherwise make representations for or on behalf of that outside entity to PHC; or

- give counsel to or advise that outside entity, for its commercial purposes, concerning the programs or policies of PHC.

PHC may reduce the one year restriction period, upon written application, after considering the following factors:

- the circumstances under which the senior staff member's employment with PHC ended;
- the senior staff member's general employment prospects;
- the significance to PHC of information in possession of the senior staff member by virtue of his/her position with PHC;
- the desirability of a rapid transfer of the senior staff member's skills to an employer other than PHC;
- the degree to which a new employer might gain unfair commercial advantage by hiring the senior staff member;
- the authority and influence the senior staff member possessed while employed by PHC; and
- the disposition of other cases.

- * Senior staff in this section means staff of PHC at Vice-President level (or equivalent) and above.

4. Compliance

All staff members are responsible for adhering to this policy and monitoring their activities in accordance with the policy. Staff members may warn others if they observe a violation of this policy. Failure by staff to comply with this policy may result in disciplinary action up to and including termination of employment, services or privileges.

5. Supporting Documents

5.1. Related Policies

[Standards of Conduct](#)

[Signing Authority](#)

[Clinical Product & Equipment Selection and Evaluation](#)

6. Definitions

"Staff" means all employees (including management and leadership), medical staff (including physicians, midwives, dentists and nurses), residents, fellows and trainees, health care professionals, students, volunteers, contractors, researchers and other service providers engaged by PHC

7. References

[Standards of Conduct for Public Service Employees](#)

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