

CORPORATE POLICY, STANDARDS and PROCEDURE

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<u>POLICY TITLE</u> CONFLICT OF INTEREST (COI)		<u>NUMBER</u> TBA
<u>AUTHORIZATION</u> President and Chief Executive Officer	<u>DATE APPROVED</u> October 2002	<u>CURRENT VERSION</u> <u>DATE</u> July 2016

DATE(S) REVISED / REVIEWED SUMMARY

Version	Date	Comments / Changes
1.0	October 2002	Initial Fraser Health Corporate Policy
2.0	March 2008	Updated Policy
3.0	September 2013	Updated Policy including Examples, Public Posting
4.0	November 2013	Removed unnecessary external references at Page 21 Financial, Appendix A
5.0	March 2014	Additional examples added to Appendix A for greater clarity: golf, hockey tickets, "Networking discussions and vendor paid events", paid travel to showrooms, soliciting or accepting false billings, hiring decisions involving relatives, etc.
6.0	July 2016	Changed Health Shared Services BC (HSSBC) to their new name of BC Clinical and Support Services (BCCSS) Society

INTENT / PURPOSE

To refresh Fraser Health's Conflict of Interest (COI) policy and to identify to whom it applies.

To establish the procedures for the review of conflicts of interest and to provide relevant working examples for the organization.

This policy applies to all Fraser Health (FH) employees including volunteers and members of Fraser Health's medical staff in leadership, advisory or decision-making roles and/or who may become involved in the assessment and evaluation of products or services. This policy also applies to agents or contractors engaged by Fraser Health and their directors, officers, employees and agents, individuals with access to Fraser Health's information systems and researchers and research staff (hereafter employees and medical staff).

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This policy also applies in instances where the responsibility for Fraser Health decision-making has been delegated to a third-party agent who may control the procedural and information flow related to procurement and evaluation of products and product/service performance.

POLICY

Fraser Health employees are expected to act to the highest standards of conduct with respect to conflicts of interest whether real or perceived. As soon as a conflict situation is identified it should be brought forward for discussion. Prompt and early disclosure often permits an easy resolution of any conflicting situations.

This policy is in addition to any legal obligation and professional code(s) of ethics or standards of conduct that may apply to the employee or physician or interested party.

Persons potentially acting in an advisory position or engaged directly in a decision-making capacity on behalf of Fraser Health are required to disclose to their Vice President/President and Chief Executive Officer, as appropriate, all potential situations in which a conflict of interest or the appearance of a conflict of interest may arise. Depending upon the disclosed situation it may be required that the person be restricted from involvement in the transaction or remedy the conflict to the satisfaction of the organization.

The Vice President, People and Organization Development will advise in all discussions/decisions pertaining to real, perceived and/or potential conflicts of interest and maintain the written documentation required under this policy.

Situations that result in a real or perceived conflict of interest are to be avoided.

For purposes of this policy, potential future conflict, any real conflict and the potential for public perception of a conflict of interest shall have the requirement for a disclosure.

A non-exhaustive list of examples may include:

- Any positions or financial interests held in any concern from which Fraser Health purchases goods or services;

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- Any positions or financial interests held in any concern that is in competition with Fraser Health;
- Any direct or indirect competition with Fraser Health in the purchase or sale of property or property rights, interest or services;
- Any governing body memberships or managerial or consultative relations with any outside concern that does business with or competes with Fraser Health;
- Any reporting relationship in which a spouse [including a common law spouse], romantic partner, child, parent, next of kin or other relative [a "Relative"] reports to such person;
- Any relationship with an outside interest, organization or association that may give rise to the appearance of a conflict with the mission, vision, values and policies of Fraser Health;
- Any other matter in which the individual's ability to act in the best interest of Fraser Health may be compromised by a competing interest outside of Fraser Health;
- More detailed examples are provided in Appendix A and are considered an integral part of this policy.

Departure from this policy by employees or medical staff without the prior specific approval of the President and Chief Executive Officer may lead to disciplinary action up to and including dismissal or suspension of privileges.

Gifts, hospitality, favours, sponsorships or funds shall not be solicited nor accepted from any outside concern that either provides goods or services to Fraser Health, seeks to provide goods or services to Fraser Health, does business with Fraser Health or is in competition with Fraser Health outside the normal exchange of hospitality between persons doing business in this province. The normal exchange of hospitality may include small gifts of nominal value and inexpensive meals where it may reasonably be expected that Fraser Health would approve a reciprocal expense for a legitimate business purpose.

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Disclosure or use of inside information relating to Fraser Health for the personal profit of the individual or to the advantage of any business entity in which the individual holds a position or has a financial interest or to benefit a relative is prohibited.

Employees and members of the medical staff shall:

- Not benefit personally either directly or indirectly from any business transaction which accrues from or is based upon their official position or authority or upon confidential or non-public information which they gain by reason of such position or authority;
- Not accept “educational grants” [e.g. paid attendance at a conference] from a vendor unless the payment is explicitly part of an existing contract for goods or services between Fraser Health, or its agents, and that vendor.
- Not accept travel or other subsidies for presentations, education or studies unless part of a formal contract negotiated by Fraser Health or its agents.
- Not have pecuniary or other interests that could conflict in any manner with the discharge of their duties. Involvement or employment outside the corporation or financial or other interests which reduce or demonstrate the potential to reduce the ability to give the corporation impartial or disinterested service must be clearly avoided;
- Arrange their private affairs in a manner which prevents conflicts of interest from arising including, but not limited to, declining to appoint and/or declining to participate in the appointment of a Relative to a position within Fraser Health. When a Relative has been hired by Fraser Health the person may not make decisions respecting salary benefits or any perquisites for the Relative;
- Not divulge confidential or restricted information to any unauthorized person or release such information in advance of authorization for its release.

Exceptions

- Foundations are excluded from this policy except that there is an expectation that they coordinate their vendor related fund-raising initiatives with Fraser Health’s Vice President,

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Corporate Services Integration who will ensure that there are no solicitations during a contracting process.

- Vendor support of education sessions within Fraser Health, including multidisciplinary rounds, is permitted provided it is in the form of an unrestricted grant in support of education.
- Small volume distribution by work e-mail or other means of information pertaining to promoting Continuing Education events sponsored by professional organizations/ associations where Fraser Health promotes memberships may contain sponsoring vendor materials incidental to the promotion of the meetings or conference.
- Value Added offerings within the Request for Proposal or contracting processes are acceptable within the context of this policy. Value Added offers are evaluated in accordance with the policy approved by the Board of BC Clinical and Support Services (BCCSS) Society.

PROCEDURE

Employees and members of the medical staff shall advise their Administrative Director or designate, as appropriate, in writing the nature of a potential conflict of interest. A written record of this notice must be kept by the Administrative Director and a copy sent by them to their Vice President. The Vice President will advise the Director on the necessary restraints and documentation after the following steps are taken.

The President and Chief Executive Officer or the respective Vice President, combined with the Vice President, People and Organization Development, shall determine the potential for a conflict of interest related to the conduct of Fraser Health business and the extent of restraint necessary.

The Vice President, People and Organization Development shall be copied on all COI filings and will be a party to all COI restraint decisions. At the discretion of any member of the Executive

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involved in a COI review, the matter and any proposed restraint may be referred to the Executive Committee for decision.

In the event that a potential COI involves the Vice President, People and Organization Development, the President and Chief Executive Officer and one other Vice President shall then be involved in signing-off on any restraint plan.

Any departure/waiver of the COI policy will require the written approval of the President and Chief Executive Officer and will be documented in the COI Registry.

The Vice President, People and Organization Development will maintain the corporate Conflict of Interest Registry.

Additional Disclosures

Employees and members of the medical staff who become or may be likely to become a member of a decision-making or advising committee must also disclose and declare conflicts to the committee or its chair and may be required to withdraw from decisions wherein a conflict exists. Decision-making or advising committee's Terms of Reference should clarify their requirements by clearly stating whether the member roles assigned are intended to be corporate/organizational or personal/expert and whether there is any obligation to consult within the organization.

Employees and members of the medical staff who become or may likely become a Fraser Health delegate to a Request for Proposal/Contract evaluation team must be independent and free from bias and conflict of interest.

A Vice President must disclose and declare to the President and Chief Executive Officer in writing if any personal conflict of interest or potential conflict of interest exists. The President and Chief Executive Officer in conjunction with the Vice President, People and Organization Development shall determine the potential for a conflict and the extent of the restraint

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necessary. The Conflict of Interest Registry will be updated to reflect any COI reviews and any restraint.

The President and Chief Executive Officer is required to declare any personal conflict of interest or potential for conflict of interest at a duly constituted meeting of the Board of the Fraser Health Authority. The Board shall determine the potential for a conflict of interest and the extent of the restraint necessary. The Conflict of Interest Registry will be updated to reflect any COI reviews and any restraint.

REFERENCES

- Fraser Health Board Policy – “Conflict of Interest”
- Fraser Health Policy – “Patient and Family Gifts”
- Fraser Health Policy – “Research Integrity”
- Fraser Health Policy – “Sponsorship and Partnership”
- Fraser Health Policy – “The Ethical Conduct of Research and Other Studies Involving Human Subjects”
- Fraser Health Policy – “Theft, Fraud and Corruption”
- Fraser Health Policy – “Whistleblower Protection”
- BCCSS - “Vendor Relations Guidelines”
- BCCSS Evaluation Team “Confidentiality and Conflict of Interest Agreement”
- BCCSS Policy – “Fair and Competitive Bidding”
- Lower Mainland Pharmacy Services – “Conflict of Interest”

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REFERENCES - External

Conflict of Interest Policy of the Canadian Medical Association

Conflict of Interest Policy of the College of Physicians and Surgeons of British Columbia

BC Public Service Agency: Conflicts of Interest, Allegations of Wrongdoing, Working Relationships, Outside Remunerative and Volunteer Work ...

http://www.bcpublicserviceagency.gov.bc.ca/policy/HR_policy/09_Standards_Conduct.htm

British Columbia Institute of Technology (BCIT), Human Resources. *Standards of Conduct and Conflict / Interest Policy*. Policy Number 1504. Effective November 26, 1991

Canadian Medical Association. *Code of Ethics* downloaded June 3, 2013 from <http://www.cma.ca/conflict-of-interest>

Canadian Medical Association. *Physicians and the Pharmaceutical Industry* Updated: 2001.

College of Physicians and Surgeons of British Columbia. *Professional Standards and Guidelines: Conflict of Interest (professional standards and guidelines)*. Board approved: September 2010. Downloaded June 3, 2013

College of Physicians and Surgeons of British Columbia. *Professional Standards and Guidelines: Sale of Products in the Office* Dated: September 2010

Providence Health Care. *Conflict of Interest Policy*, May 2000,
Providence Health Care, *Code of Conduct*, February DRAFT CPL1400. Dated: February 2009

Provincial Health Services Authority. Board Policy – Administrative Parameters. *Human Resource Policies, Code of Ethics*. AB 600. Dated: December 2012.

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Provincial Health Services Authority. Board Policy – Board Process. *Code of Conduct & Conflict Of Interest Guidelines for Directors*. AB205. Dated: April 13, 2011

Provincial Health Services Authority. Board Policy – Research Policies, *Research Conflict of Interest Policy*, AB 207. Dated: August 2011.

Provincial Health Services Authority. Board Policy – Human Resource Policies, *Standards of Business Conduct*. AB 610. Dated: December 2012.

Simon Fraser University, Policy and Procedures. *Conflict of Interest (GP 37)*. Dated: May 31, 2007. Downloaded June 3, 2013 from www.sfu.ca/policies/gazette/general/gp37.html

University of British Columbia, *Conflict of Interest and Conflict of Commitment* Policy # 97, downloaded June 3, 2013 from <http://universitycounsel.ubc.ca/coi/>

Vancouver Coastal Health Authority. *Standards of Conduct, Conflict of Interest and Whistleblowing Protection (Policy)*. Dated: March 26, 2013

Vancouver Coastal Health Authority. *Fraud and Conduct Policy*. Dated: January 14, 2012

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Appendix A

**Examples, Case Studies and Guidance for Fraser Health
Real, Perceived and Avoidance of Conflicts of Interest**

Appendix A contains examples of conflicts of interest and guidance. Appendix A forms an integral part of the Conflict of Interest policy. This listing is not intended to be a finite list nor does it replace the notice and consultation process required with Leadership should a conflict of interest situation arise.

The following examples of conflict of interest situations are not exhaustive; they are intended to be illustrative of situations that may arise and how they should be handled within the guidance of the Fraser Health Conflict of Interest (COI) Policy. To avoid embarrassment to either party and in consideration of observer's impressions some suggestions are made as to how to navigate these situations on a one time basis.

Where Director is noted in the examples as the approval body the next higher approval authority is followed as appropriate; similar to expense approvals: Director approves employee requests, ED approves Director where applicable, VP approves ED or Director requests, CEO approves VP requests, Board Chair approves CEO. "Employee" is used for simplicity; the definition in policy covers all levels of staff including management, bargaining unit staff, contracted and management, contracted physicians and those under fee-for-service arrangements, contractors and sub contractors, agents and volunteers.

Employees must not contravene the Health Authority Confidentiality and Security of Personal Information Policy in any presentations or as a participant to an event.

Exceptions may have to be made to ensure continuity of operations; in such cases documentation and vetting of decisions at the VP level is required. To avoid conflict in the organization some disclosures may need to be recorded publicly; under Transparency Policies all disclosures may require some level of public disclosure to demonstrate that appropriate due diligence has occurred.

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This document attempts to describe Conflict of Interest (COI) situations and challenges that may be faced by Fraser Health staff at all levels including Governance, Executive, management and staff employees, physicians and volunteers. It is intended to be indicative and offer guidance; it is not an exhaustive list of situations that may be faced. Where there is uncertainty or a latent issue is discovered a discussion at the appropriate level is recommended to obtain guidance. Documentation is required.

This document is focused to Fraser Health selected business, commercial and administrative ethical issues. It is not an exhaustive list and does not cover issues that may arise in specific divisions. It is not intended to discuss Fraser Health academic / research ethics / conflicts of interest or medical ethics and conflict of interest however some overlaps may arise and guidance from this document may be useful.

In the review of other Fraser Health and other HA policies there is some crossover where *conflicts of interest* are discussed under various headings including *employment standards, conflict of interest, and fraud* and *whistleblower* language. To the extent that these examples inform the discussion of conflict of interest they have been included; there are also examples in the literature where the parties to some decisions *all have interests* that must be reconciled for the business of the organization to continue without interruption and in an expeditious manner.

COI Issue / Example	Issue Description	Policy Response and Guidance
Receives loans or favours from clients, patients or residents or purchases items from them below value. (PHC CPL 1400)	Potential conflict as persons in a position of power or trust.	The organization prohibits gifts of all types; minor exceptions as noted in this policy.
Business Lunch and Hospitality	Vendor offers a paid lunch / dinner.	There is a risk that "customary" hospitality becomes an expectation. Also, others may see the transaction and our objectivity may be questioned. Business lunches should be

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COI Issue / Example	Issue Description	Policy Response and Guidance
		considered in the context of reciprocity or exchange and avoid incurring obligation. Consider whether the HA organization would approve the reciprocal expense as a legitimate and reasonable business expense. The organizational travel policy and per diem provides guidance.
Patient and Family Gifts	Employees shall not request, persuade, induce nor accept a gift from a patient / resident / client or their family.	Incidental gifts should not be encouraged however minor expressions of goodwill may be accepted (i.e.: seasonal). Patient / residents / clients or their family who wish to bestow a gift should be directed to the appropriate Foundation as per Fraser Health policy of the same name. Gifts or bequests received should be renounced.
Gifts	Vendor offers gifts to the Employee including gifts of a nominal value such as coffee, pens, paper, chocolates / biscuits, etc.	<p>Employees should decline gifts unless it can be reciprocated in the normal course of business. Would the HA approve a gift to this person and under what circumstances?</p> <p>Incidental gifts should not be encouraged as it will soon become "expected". Getting the word out early at key times of year is also a proactive approach. Consistency across the organization is also very important.</p> <p>Transition to a "new" understanding can be managed by making items available for raffle, charitable goods for food bank, etc. If a gift or offer is significant it should be declined and mentioned to a FH superior.</p> <p><i>Example:</i> Tickets to a NHL hockey game would not be accepted.</p>

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COI Issue / Example	Issue Description	Policy Response and Guidance
Gifts - Hospitality	Vendor offers a "networking opportunity" for you / members of your staff to play golf with members of their company / other industry associates.	<p>The offer of golf is declined.</p> <p>While networking is valuable it can take place in the office or other work environment; equal opportunity should be offered all prospective vendors and care must be taken to long term optics and unintended bias. The RFP cycle is also an important consideration.</p> <p>Exceptions to policy would require the 2 VP sign-off and CEO approval. Documentation is required and may be subject to proactive disclosure under the Transparency Policy.</p> <p>NB: Foundation charitable events offer an alternative opportunity for vendor / contractor / consultants to engage with staff on a social basis. Participation requires Executive approval and is not guaranteed.</p>
Gifts - Hospitality	A unique networking opportunity arises to play golf with Health Authority leaders from another jurisdiction /country.	<p>Normally the offer of golf is declined.</p> <p>While networking is valuable it can take place in the office or other work environment. However, special circumstances such as government trade sponsorship of an event etc may lead to valid exceptions and will require Executive approvals.</p> <p>Exceptions to policy would require the 2 VP sign-off and CEO approval. Documentation is required and may be subject to proactive disclosure under the Transparency Policy. A business report on the learning from the exchange of ideas is a good conclusion to the event.</p>

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COI Issue / Example	Issue Description	Policy Response and Guidance
Gifts - Hospitality	Vendor offers tickets to a "networking event" at a Canuck's hockey game. <i>Other Health Authority or vendor clients will be attending ...</i>	The offer of hockey tickets is declined. While networking is valuable it can take place in the office or other work environment; equal opportunity should be offered all prospective vendors and care must be taken to long term optics and unintended bias. The RFP cycle is also an important consideration. Exceptions to policy would require the 2 VP sign-off and CEO approval. Documentation is required and may be subject to proactive disclosure under the Transparency Policy. NB: Foundation charitable events offer an alternative opportunity for vendor / contractor / consultants to engage with staff on a social basis. Participation requires Executive approval and is not guaranteed.
Gifts - Hospitality	A former work colleague, social friend, golf buddy, sports team mate now works for a vendor, etc.	This is a special circumstance which should be documented. Special care needs to be taken to ensure that you continue to pay your fair share of expenses and that there is proper separation of work and social / sport... activities. Documentation is required under the 2 VP rule. Probity is important and it may be appropriate to change certain behaviours in order to preserve the integrity of contract award processes. You may be required to step aside from contract award processes or other mitigation must be considered.

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COI Issue / Example	Issue Description	Policy Response and Guidance
Gifts - Hospitality	Vendor offers to fly you to their show room, manufacturing plant or reference sites / facilities to showcase their process, equipment, expertise, operations.	<p>This travel would not be permitted unless key conditions are met.</p> <p>Typically, a legitimate procurement or specification would be the foundation for any such trips. Processes inside an RFP may require that site visits are a precondition to short-listing or award. These steps involve multi-vendor sites, evaluation scripts and travel is set to the closest and least expensive destinations. Travel for RFx processes are first approved through BCCSS or the agent and should receive approval under the 2 VP rule and be documented.</p> <p>If there is no RFx in process but leadership considers the opportunity of merit the HA should consider assuming the expense and documenting in either case.</p> <p>Ideally, the HA covers the expense outside of an RFx process to maintain its independence and a 2 VP level executive approves the need for travel.</p>
Accepting Samples / Free Product Sampling	Vendor provides "free samples" to clinician, physician office, clinic, or hospital departments.	<p>Samples are recognized as powerful drivers of after-visit consumer behaviours. Sampling may unintentionally undermine clinical initiatives or standards set in other HA processes (e.g. generic drugs, HA standard products or evaluation processes, HA Formulary / Value Analysis Teams, teaching. Ex: Dressings, breastfeeding initiatives etc.)</p> <p>Sampling also poses risks when unregistered samples enter the HA system other than via approved channels. (See the Policy: Product Hazard Alerts, Recall & Notification Process)</p>

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COI Issue / Example	Issue Description	Policy Response and Guidance
		HA Policy directs sales representatives and sampling through controlled access points where policy is applied. These access points, such as Pharmacy in the acute hospital, will document the sample and provide appropriate labels. In another example, FH does not permit sampling of infant formula.
Requesting surplus goods for charitable purposes / distribution	Vendor / employee requests samples or surplus goods for a charitable purpose.	Processes are in place for the owners of surplus materiel to release their goods. Typically, the Finance / Supply Chain staff (BCCSS) or LMPS is involved to transfer goods to other areas of need in FH or BC and / or they aggregate surplus items for charitable distribution concurrently addressing any liability issues. All goods released are documented on a Materials Release.
Off-Label Uses	Vendor promotes off-label uses for a product.	<p>Supplies and medications are subject to rigorous approval by regulators and are approved for specific situations including specified processes for cleaning and sterilization (instruments).</p> <p>Products approved for use in the organization should only be used for the intended purpose and instructions / methods unless otherwise indicated.</p> <p>Typically, approved use is supported by formal clinical documentation at the organization level. (e.g. Addition to Formulary, SOP for cleaning instruments). Individual practitioners cannot use products outside these formal organization approved parameters.</p> <p>While vendor resources may be relied upon for in-service education (implementation or refresh / maintenance) the</p>

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COI Issue / Example	Issue Description	Policy Response and Guidance
		<p>Canadian federal regulator Health Canada sets the parameters within which Fraser Health operates.</p> <p>Exceptions are permitted under set rules and process. Internally, the organization sets the parameters through a central body (e.g.: P& T Committee – ex: pediatric guidance for HC approved drugs.)</p>
Continuing Education (CE) Events Organized by Vendors	Vendor directly provides, organizes and funds a CE event (e.g. Online, Lunch or Dinner meeting)	<p>CE events sponsored by an incumbent, contracted vendor are typically <u>expected and accepted</u> within the context of maximizing value under an existing contract. These opportunities are focused to contracted products and can be confirmed.</p> <p>The Director of the Department should approve the event in advance. Typically, events within the lead-up to a contract renewal are declined.</p> <p>The venue and expense should be guided by the Fraser Health per diem meal expense policy whether the HA / the employee is paying or whether the vendor is providing this as a vendor paid event.</p> <p>Events organized by vendors who did not win the competition or focused to products not awarded to a presenting vendor are declined. Formal opportunities and processes are used to review new product and new technology developments.</p>
CE Events Organized by Licensing	Professional body organizes a CE event or conference. Maintenance	The professional association provides sufficient separation in most cases to avoid a conflict of interest.

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COI Issue / Example	Issue Description	Policy Response and Guidance
Bodies (e.g. College of Pharmacists, College of Physicians and Surgeons, CA-CMA-CGA including local chapters)	of Certification, etc.	<p>Employees who serve on professional bodies and who may also have influential roles in the competition for new / renewal procurement opportunities should not be actively involved in fund raising for Professional Association led CE events or conferences.</p> <p>The Director of the Department should approve participation in the event in advance. Typically, an approach to vendors within the contract renewal period is tasked to an independent third-party.</p> <p>The venue and expense should be guided by the Fraser Health per diem meal expense policy whether the employee is paying themselves or whether the vendor is providing for the expense as a vendor paid event.</p>
CE Events Organized by Professional or Industry Associations (e.g. local chapters such as CSHP, ORNAC, HSCN, Health Accountants of BC, CADTH, Canadian College of Health Leaders (CCHL) Employer based program /	Professional / trade / industry associations / para-government body organize a CE event or conference.	<p>The association provides sufficient separation in most cases to avoid a conflict of interest however care is taken to avoid a conflict or the perception of conflict of interest.</p> <p>Employees who serve on these professional / advisory bodies and who may also have influential roles in the competition for new / renewal procurement opportunities should not be actively involved in fund raising for the Organization / Association led CE events or conferences.</p> <p>The Director of the Department should approve the event in advance. Typically, an approach to vendors within the contract renewal period is tasked to an independent third-party.</p>

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department / Nursing or Medical Grand Rounds Events organized by the Agent for group Purchasing whether BCCSS or HealthPro or other formal agents.		
CE Events – Financial Sponsorship from a Vendor	Vendor offers any of travel, accommodation, registration or other fees <u>directly to a staff member</u> for an education event or program.	No acceptance of the offer.
CE Events – Financial Sponsorship from a Vendor	Vendor offers any of travel, accommodation, registration or other fees <u>directly to a Department</u> for an education event or program.	No acceptance of the offer.

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Special Purpose Vendor Funds CE Managed by the Provincial Committee	A vendor offers funding for CE <u>above</u> the level negotiated in the contract and X months in the run down to the next competitive bid.	<p>No acceptance of the offer.</p> <p>However... All funds must be acquired through the RFX process as Value Added benefits. <u>Enhancements to the contract benefits would not normally be declined however these should be accepted via the agent prior to expiry of the contract and with consideration of the renewal period and any other ongoing / negotiation issues.</u></p> <p>There is an expectation from Fraser Health that <u>all benefits arising from a contract</u> are communicated to the FH stakeholders and that <u>FH makes its best effort to maximize its return under the negotiated contract.</u></p> <p>Contacts with vendors should align with the process defined in the issue of the RFX during a competition period and protocols should provide for routine business contacts for FH stakeholders; quarterly vendor meetings and formal or informal reports attesting to the utility / maximized benefits from each contract are expected.</p> <p>Fraser Health should work collaboratively with its' agents (BCCSS, LMI etc.) and suppliers to ensure maximum values are received, performance is monitored / improved and documented where required etc.</p>
Presenting / Speaking / Facilitating / Moderating or Presenting at a Vendor	Vendor or industry organization directly invites the employee to participate, as a private individual , to be a presenter, speaker,	<p>Approval from appropriate Director is required prior to participating in this capacity. The Director may advise that a potential for a conflict of interests exists and the event should be declined.</p> <p>Typically attendance is on personal time and care is taken</p>

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Sponsored Event as an individual.	<p>facilitator, moderator, or participant / committee member in a vendor sponsored event.</p> <p>Expenses are typically the Employee's responsibility. If reimbursed by the vendor this must be declared to the Director.</p> <p>Travel is typically on employee time unless otherwise approved.</p>	<p>with respect to the use of Fraser Health materials, logos, etc.</p> <p>Generally a person is asked to participate because of their expertise and the potential influence which is derived from their employment status.</p> <p>Acceptance of an honorarium / appreciation gift is acceptable only if provided by a professional organization or professional industry association and is reported to the Director after the event.</p> <p>Honorarium / appreciation gifts for participating in these types of events shall not be accepted from Vendors unless these are nominal in value and are reported to the Director after the event.</p> <p>In some circumstances it may be appropriate to speak to a vendor organization / forum as a representative of the organization if it can be established that the business objectives of Fraser Health can be advanced. In such cases the expenses / financial aspects of the transaction should be pre-approved at the appropriate level in Fraser Health. See below.</p>
Presenting / Speaking / Facilitating / Moderating or Presenting at a Vendor Sponsored Event	Vendor or industry organization directly invites the employee, as a member of Fraser Health , to participate as a presenter, speaker, facilitator, moderator, or	<p>Approval from appropriate Director is required prior to participating in this capacity. Typically attendance is on Fraser Health time, travel policy applies, and the use of Fraser Health materials, logos etc. is supported.</p> <p>Generally a person is asked to participate because of their expertise and the potential influence which is derived from</p>

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as a formal representative of Fraser Health.	<p>participant / committee member in a vendor sponsored event.</p> <p>Expenses are typically paid by Fraser Health or by agreement are reimbursed by the organizer.</p> <p>Fraser Health travel policy applies which may include some travel on business time.</p> <p>(Fraser Health Speaker Bureau)</p>	<p>their employment status.</p> <p>The FH organization sees positive benefits to being profiled in the conference, on the subject matter, presentation approach, and with the speaker. (Mutual gain)</p> <p>Speaker fees and honorarium are typically refunded to Fraser Health. Nominal value recognition is reported to the Director after the event.</p> <p>See also, the FH policy Sponsorship and Partnership for additional guidance in this area.</p>
Ghostwritten Articles	<p>Ghostwritten articles are a sometimes a sophisticated marketing practice that may include elements of promotion (individual and organizational prestige).</p>	<p>A careful consideration is required to ensure a proper balance of issues is achieved. Care should be taken to ensure that articles are factual, data driven, aligned with organizational values and strategic directions and preserve the authors' and organizations independence and integrity.</p> <p>Articles are typically cleared through a Director/Executive Director or VP and / or Communications when referencing Fraser Health.¹ A right of preview before publication is a typical expectation of Fraser Health.</p> <p>Care is taken to ensure the independence of the organization and its influential members with respect to</p>

¹ Writing for academic publication is governed by the Research Division

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		future contracting and clinical decisions.
Third Party Surveys free or reimbursed	Survey organization invites the staff member to complete a survey regarding products, issues, evaluation, usage, acceptance or suggestions for improvements. Remuneration may / may not be offered. Typically a fee is \$25-\$100 / survey is offered.	No acceptance of offer unless first coordinated with the FH Director and through them to the Purchasing Agent (BCCSS) to determine if there is any conflict with existing contracts, evaluations or disputed performance. FH typically strives to determine a consolidated rating for products and services and communicates this to the Agent. Vendors may survey key stakeholders and use the information to undermine our negotiation position. Copies of evaluations are to be provided to the Agent. Fees, if offered, are not accepted personally. Fees, if offered may be directed to any approved FH Hospital Foundation
General education "donations" from a Vendor	Vendors offer an unrestricted educational grant.	No acceptance of the offer. No refusal either. Direct the vendor to the negotiating Agent at BCCSS and alert the Executive Director LMPS or the VP Corporate Services Integration as to the context and for follow-up with the Agent.
HA staff solicitation of funds	HA staff directly solicit funds from a vendor	There is no direct solicitation / acceptance of funds for financial sponsorship of Professional Associations. Organizations that solicit funds are directed to do so through a third party or their official Executive in an independent capacity or a person who will be at arms length from any contract performance rating or evaluation. As HA staff may serve on executive roles in various associations it may be necessary for them to be at arms length with respect to soliciting funds from HA vendors.

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		This should be reviewed with their Director before becoming involved in any solicitation.
HA staff solicitation of kickbacks or secret commissions or other rewards based upon the value of business or the awarding of contracts	HA staff directly solicit funds or benefit from a vendor	<p>There is no solicitation / acceptance of funds for personal gain.</p> <p>Favours, kickbacks or commissions by any name from suppliers to individuals or groups are neither solicited nor accepted. Soliciting favours or kickbacks may lead to a loss of employment or physician privileges.</p> <p>Any funds that may be negotiated and returned / returnable from a business arrangement or contract are returned as a Value Added benefit to the organization, typically these benefits are fully documented in the RFP process and scored according to the weighted RFP criteria. Formal policies exist at the level of BCCSS, as agent for purchasing, which apply to Value Added benefits.</p>
Approval of Overbillings on Invoices, Creating off-books accounts, etc. (Solicitation of kickbacks, commissions, etc)	<p>A vendor bills an amount above the value received and an employee or department shares in the proceeds with the external party. by approving the payment</p> <p>A person in an "official capacity" contracts with oneself in a "private" capacity and confers a benefit on oneself.</p>	<p>All invoice approvals are to be for goods or services received or are progress billings for approved work-in-process.</p> <p>Accounting rules apply. No vendor funds or other off-books accounts for personal gain or HA purposes are permitted under Fraser Health Accounting policy.</p> <p>Special situations may require disclosure and scrutiny. If necessary, a third-party may be required to sign-off. No solicitation of benefits to individuals or departments in the form of kickbacks, commissions or any allowance for personal benefit is allowed.</p>

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Arms Length Transactions in Contracting and Human Resources		
Contracting at arms length. Maintaining the integrity and independence of processes Disclosures required and no influence (PHC CPL 1400)	Processes are designed to be independent of influences from relationships such as family and friends, associates and bias outside of approved scoring systems.	Processes are typically designed to be independently scored on the merits of proponents, weighted scoring systems and the merits of submissions or the individual applicants. Persons involved in "selection" processes that may have close relationships to proponents, vested interests in the outcomes of a processes or bias outside of the weighted scoring must declare the potential interest / bias to the VP responsible for the process. (or next senior level) Based on the declarations it may be necessary to exclude someone from a process / evaluation in order to maintain the integrity of the process. Exclusions are not always automatic. Conflicts must however be managed to mitigation bias, real or perceived. Present or future. Documentation is required.
Personal, Professional and Working Relationships (HR200)	Staff who are family members or who permanently reside together may not be employed in situations where a relationship exists in which one staff member has influence, input or decision making over the others performance, salary,	Staff must not involve themselves in human resource decisions when their objectivity would be compromised for any reason. (e.g. selection decision involving a family member) The decision of the HR manager responsible for the recruitment shall be binding as to their role and any accommodations that must be made.

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	evaluations and potential for promotion, contracts that may be awarded or processes that will be studied / evaluated.	
Reporting relationships or hiring decisions where both parties are related (Personal, Professional and Working Relationships)	A husband / wife / life-partner works in a department which is overseen by their spouse / partner or there is a close familial relationship between the superior and subordinate. A husband / wife / life-partner is involved in the hiring process where their spouse / partner or family member is a candidate.	Staff must not involve themselves in human resource decisions when their objectivity could / would be compromised for any reason or where the probity of the selection process would be challenged. Staff must reclude themselves from processes involving close family members. The decision of the subordinate manager or the subordinate manager and a HR manager responsibility for the functional area shall be binding.
Staff acting in a role of authority, trust and guidance and must not take advantage of this position	Staff must conduct themselves in a professional manner with clients, residents and patients.	There is a prohibition on intimate or sexual relationships with clients, residents and patients while under care.
Outside Remuneration, Volunteer Work	Staff volunteerism, employment outside of their official work /	Outside employment, volunteerism and political activity is permitted so long as it is not in conflict with the performance of HA duties, does not appear to represent

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and Participation in the Political process (HR200)	employment capacity and their political activity is permitted so long as it is not in conflict with their obligations to the Health Authority.	the position of a HA, does not bring the HA into disrepute, does not involve the unauthorized use of HA resources and does not gain an advantage that is derived from being a HA employee. Political activities must be outside of working hours and not use HA facilities, equipment or resources and not infer any association with the HA.
Remuneration is paid while receiving paid sick leave from Fraser Health (PHC CPL1400)	Alternative employment income is earned while receiving sick leave payments from the HA.	The HA should approve any alternative employment consistent with medical advice indicating that the alternative employment is part of a treatment / rehabilitation program or in consideration of other factors. Wages earned during the rehabilitation period may be requested by the HA in certain circumstances
Financial		
Financial interests potentially in conflict or perceived to be in conflict ²	The employee has ownership or major holdings of shares or other interests, including ownership interests in a company or an individual interest that is in dealings with the Health Authority	Mutual Funds wherein the employee / individual has limited or minimal / no influence over investments or disinvestments are <u>not</u> considered to be a conflict of interest. Pension Funds which may invest in financial instruments including suppliers of goods and services are not considered to be a conflict of interest. Special

² Financial interests is anything of monetary value including but not limited to: (1) Compensation, (2) Equity Interests (including common or preferred stocks, stock options, partnership units, warrants and other convertible security) and (3) Revenue and Royalties from Intellectual Property Rights (including patents, copyrights, trademarks and publishing)

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	<p>or its agents.</p> <p>Mutual Funds, Pension investments and other institutional investment funds beyond the reasonable, direct investment control of the employee are excluded.</p>	<p>circumstances may apply to named representatives of Pension investment committees and require disclosure.</p> <p>Major or significant holdings equaling more than 1% of shares outstanding or an individual investment interest worth more than \$25K inclusive of relatives (see hiring policy spouse / relative definitions) holdings also.</p> <p>Interests above these amounts must be declared to the Vice president if the employee is in any way able to influence an evaluation or the assessment of performance of a vendor, competitor or alternative decision. A management plan with official documentation and mitigation is recommended. Employees may be asked to divest of holdings and may have to reclude themselves from involvement / discussions.</p>
<p>Financial Interests / Employment Interests, Commercial and Patents ³</p>	<p>The employee has a consulting or (FFS) fee-for-service relationship that may impose obligations that conflict with the organizations interests.</p> <p>The employee has a financial interest personally or with another individual, industry, property, patent or organization that may</p>	<p>Disclosure to the Director / VP is required in order to discuss whether the Employee may have to reclude themselves from involvement / discussions.</p> <p>As more physicians are engaged in leadership roles some may continue their clinical and FFS contracts. Fraser Health will need mitigation strategies vs. exclusion categories. This may include decisions below quorum in some cases.</p> <p>Disclosure practices are expected. A management plan with official documentation and mitigation is recommended.</p>

³ As above

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	benefit from a contract or sub-contract with Fraser Health. Potential conflict. May influence or be perceived to have influence over a decision.	
The employee receives income as a trainer / instructor / demonstrator for implementation work related to product awards in the HA or other HA	The employee is a recognized trainer / in-service education specialist and is occasionally employed by firms to support their implementation work related to new business gains in other HA or to supplement HA staff for awards in their home HA	Disclosure to the Director / VP is required in order to discuss whether the Employee may have to reclude themselves from involvement / discussions. As HA become larger these relationship boundaries become more complex and are likely to impact staff who may have gained <i>supplemental work</i> in other parts of the province or across several provinces. Staff who might work as trainers / demonstrators for vendors may be ineligible to serve on product evaluation committees. Disclosure is required.
Holds an ownership, patent or other right in a product or service being considered by the HA	Potential conflict. May influence or be perceived to have influence over a decision.	Disclosure to the Director/ED/VP as required in order to discuss whether the Employee may have to reclude themselves from involvement / discussions. A management plan with official documentation is recommended.
Research is being conducted by the individual which may be	Potential conflict. . May influence or be perceived to have influence over a decision.	Disclosure to the Director/ED/VP as required in order to discuss whether the Employee may have to reclude themselves from involvement / discussions.

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impacted by the decisions of the Health Authority with respect to continuity of current products or services, linkages to past practices or future research funding		A management plan with official documentation is recommended. Research decisions should not bind the organization to continuing with a particular product or service beyond the natural end date of a contract / service. Disclosures through the agent (i.e. BCCSS) may be required at the time of competitive bidding vis. a vis. total / partial participation in contracts and the role of representatives.
Received money on loans, supply contract, guarantees, capital equipment loan, staff subsidy or other financial assistance from a vendor	Potential conflict influencing decision making.	Disclosure to the VP as required in order to discuss whether the Employee / Medical Staff may have to reclude themselves from involvement / discussions. A management plan with official documentation is recommended.
Financial interests from a previous employment or other relationship	May have a contingent benefit associated with having been an employee of / consultant to a vendor, a Director and / or Officer of a vendor company, and if a private company a shareholder of a vendor company.	Disclosure to the VP as required in order to discuss whether the Employee may have to reclude themselves from involvement / discussions. A management plan with official documentation is recommended.

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Remediation		
Reporting of Violations	A potential violation is observed; as disclosures are in private how does one proceed.	Employees are required to report on any violation of Policy to HR who in turn notifies Internal Audit. Internal Audit will follow with the leadership involved and Management will respond with remedial action if required. HR will advise of the outcome and if any actions are being taken. The employee has Whistleblower protection if this outcome is not satisfactory.
Failure to Comply	Employee remains in a conflict and does not respond to direction from the Director ED/VP & Director ED/VP has limited alternatives and the function is critical to the performance of duties / roles of employment.	Subject to discipline up to and including the possibility of termination or cancellation of contract. Possibility of criminal prosecution or civil liability.
Opportunities for Mutual Benefits Within Fraser Health Policy		
Sponsorship and Partnership Arrangements Approved via Exemptions or Strategic Initiatives	Permits Sponsorship and Partnership Arrangements: <ul style="list-style-type: none"> • Applies to new agreements • Renewals • Demonstrates mutual benefit, 	Examples include: <ul style="list-style-type: none"> • Funded Conferences • Funded Community Health fairs / events Partnership Agreements include FH in-kind support: <ul style="list-style-type: none"> • FH Speakers Bureau • FH staff speak at health education sessions • Paid advertising

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	<p>May be shared or sponsored Funding.</p> <ul style="list-style-type: none"> • Aligned to mission and values • Arms length from transactional business • Independent of Contracts and does take FH out of provincial group purchasing. 	<ul style="list-style-type: none"> • Do not conflict with Contracting (BCCSS) <p>Fraser Health should declare its initiatives so that staff may understand the difference between individual actions and Corporate-wide sponsorship decisions.</p>