

Health Provider Conflict of Interest Policy

Office of Accountability:	Undergraduate Medical Education office Postgraduate Medical Education office
Office of Administrative Responsibility:	Undergraduate Medical Education office Postgraduate Medical Education office
Approver:	Undergraduate Medical Studies committee Postgraduate Medical Education committee
Approval Date:	July 11, 2019
Review Date:	July 11, 2022

Definitions

Assessment	A method used to measure learner achievement.
Competence Committee	The committee responsible for synthesizing and reviewing the assessment data of residents to determine resident progress in achieving the specialty-specific requirements of a Competency by Design (CBD) residency program.
Learner	Individual enrolled in the Doctor of Medicine (M.D.) program or a residency program at Memorial University of Newfoundland.
Phase Lead	The individual responsible for leading the delivery of a phase; for providing guidance for the implementation and monitoring of the curriculum and assessment of student progress through a phase of the Doctor of Medicine (M.D.) program.
Phase Management Team	The team responsible for overseeing the delivery of the Phase curriculum as outlined in the University Calendar.
Program Director	The faculty member assigned responsibility for the overall conduct of the residency program in a given clinical discipline.



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Residency Program Committee	A committee established to assist the Program Director in the planning, organization, and supervision of the residency program.
Student Promotions Committee	The committee responsible for reviewing assessments of all medical students in each Phase of the M.D. program.

Overview

The Faculty of Medicine (FoM) is committed to facilitating fair and unbiased assessment of learner performance. Health care professionals play an integral role in the delivery of the undergraduate and postgraduate medical education programs which involves the assessment of learners. The FoM recognizes that learners may be currently, or have previously been, involved in a doctor-patient relationship with faculty members who are involved with the delivery of their educational program. These relationships can potentially create a Conflict of Interest (COI) in learner assessment or the teaching dynamic and must be mitigated accordingly. This policy is in addition to the Memorial University of Newfoundland (Memorial) [COI policy](#) and outlines the FoM's directive that such relationships must be avoided or be found at an appropriate distance.

Purpose

To set out the FoM's position on conflicts of interest related to a health professional's involvement in the assessment of a learner that is currently, or has previously been, their patient.

This policy was also created to ensure the Doctor of Medicine (M.D.) program meets or exceeds the **Committee on Accreditation of Canadian Medical Schools (CACMS)** accreditation standard 12.5 which states the following:

"The health professionals who provide health services, including psychiatric/psychological counseling, to a medical student have no involvement in the academic assessment or advancement of the medical student receiving those services, excluding exceptional circumstances. A medical school ensures that medical student health records are maintained in accordance with legal requirements for security, privacy, confidentiality, and accessibility."

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Scope

The M.D. program and all residency programs in the FoM at Memorial.

Policy

- 1.0 All reasonable efforts will be undertaken to ensure that a health professional who provides/provided psychiatric, psychological, or other health services to a learner will have no current or future involvement in:
 - 1.1 the academic assessment of the learner;
 - 1.2 decisions regarding the promotion or graduation of the learner;
 - 1.3 the consideration or recommendation of the learner for a position in a residency program.
- 2.0 In situations where a conflict of interest is unavoidable, such as emergency situations or rural locations, both parties need to be aware of the existence of a dual relationship and the potential for bias. The Phase Lead/Program Director must be made aware of this dual relationship prior to the onset of the rotation, if possible, or at the onset. Reasonable efforts must be taken to find an appropriate person to take the place of the treating physician or teaching faculty.
 - 2.1 If a dual relationship exists and cannot easily be resolved in the short term, the Phase Lead/Program Director must be made aware of this dual relationship and efforts will be taken to support both parties involved. The conflict must be brought forward to the Policy Development Committee for review.
- 3.0 The FoM does not maintain health records of learners. An undergraduate learner's immunization record is maintained with Memorial's Student Nurse in the Student Wellness and Counselling Centre. A postgraduate learner's immunization record is maintained with Occupational Health, Eastern Health. Learners can review their immunization records at any time, upon request.
- 4.0 The UGME and PGME office shall inform faculty and learners of the Health Provider COI Policy.



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Procedure

In recognition of a physician's primary responsibility to uphold patient confidentiality, the reason a conflict exists does not need to be disclosed.

A.0 Proactive Disclosure

- A.1. Faculty and learners should proactively disclose any real, perceived or potential conflict of interest pertaining to learner assessment to the Phase Lead/Program Director, in writing, to ensure the conflict is addressed promptly and appropriately.
 - A.1.1. When a conflict exists and the potential for subjectivity in assessments also exists, efforts will be made by the Phase Lead/Program Director, in consultation with the Student Assessment Subcommittee or Residency Program Committee respectively, to arrange an alternate supervisor or assessment plan for the learner. The Associate Dean of UGME or PGME respectively, must agree with the mitigation plan. For automated forms of assessment (example: multiple choice questions) the assessment shall proceed as planned.
 - A.1.2. If the faculty member's role is that of delivering a large group or lecture based learning, there will be no need to change faculty responsibility.
- A.2. Any member of a Phase Management Team, Student Promotions Committee, Residency Program Committee or Competence Committee who has previously provided, or currently provides, psychiatric, psychological or other health services to a learner whose case is under consideration for promotion or graduation must declare a conflict of interest, recuse themselves from that portion of the meeting, and abstain from commenting or voting upon the individual situation.

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B.0 Third Party Disclosures

- B.1. Any individual who is aware of, or has reasonable grounds to believe, a real, perceived or potential conflict of interest exists pertaining to the assessment of learner should pursue the matter in one of the following ways:
 - B.1.1. Raise the matter with the learner and/or faculty member and refer them to this policy;
 - B.1.2. Raise the matter with the appropriate Phase Lead/Program Director if it appears that the policy has not been followed or where raising the issue with the learner and/or faculty member is inappropriate in the circumstances;
 - B.1.3. Report the matter under the provisions of the Memorial [Protected Disclosure](#) policy.

C.0 Senior Leaders in Curriculum

- C.1. When a COI arises with a faculty member that is in a senior position within the UGME or PGME program (e.g. Clerkship Discipline Coordinator (CDC); Phase Lead; Program Director), the faculty member in question will report their the conflict, in writing, to the Associate Dean of UGME or PGME respectively, as soon as they become aware that a former or current patient is enrolled in a course/phase/program under their jurisdiction. Upon notification, the appropriate Associate Dean will take measures to ensure that any decision/special consideration regarding the learner in question (e.g. academic difficulty, professionalism concerns, etc.) is handled by a suitable alternate. The faculty member in conflict may be involved only insofar as is deemed necessary to ensure consistent treatment of all learners. The involvement of the alternate will be duly documented.
- C.2. When a COI arises with the Associate Dean of UGME or PGME respectively or the Assistant Dean of Student Affairs, they will report, in writing, their conflict to the Vice Dean of Medicine as soon as they become aware that a former or current patient is enrolled in the M.D. program or a residency program. Upon notification, the Vice Dean of Medicine will take measures to ensure that any decision/special consideration regarding the learner in question (e.g. academic



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difficulty, professionalism concerns, etc.) is handled by a suitable alternate. The Assistant/Associate Dean in conflict may be involved only insofar as is deemed necessary to ensure consistent treatment of all learners. The involvement of the alternate will be duly documented.