

CATEGORY: Program Specific  
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 TITLE: **CONFLICT OF INTEREST**

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| <b>Document Owner:</b> Regional Manager, Centre for Prehospital Care                                                                                                         | <b>Name:</b> Corey Petrie         |
| <b>Update Schedule:</b> Annually.                                                                                                                                            |                                   |
| <b>Stakeholder Consultation and Review:</b><br>HSN CPC Quality of Care Committee                                                                                             | <b>Date:</b><br>December 16, 2025 |
| <b>Approval:</b> Corey Petrie, Chair, HSN CPC Program Council<br><br>Electronic signature:  | <b>Date:</b><br>December 16, 2025 |

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## PURPOSE:

To guide staff members in the event a conflict of interest situation presents itself during the course of their duties as HSN CPC employees.

## POLICY STATEMENT

- A. In accordance to HSN's code of conduct and section 9.0 of the Regional Base Hospital Performance Agreement, all HSN CPC staff shall avoid situations where personal interests conflict with the best interests of the Base Hospital Program, its mandate and/or HSN as a whole.
- B. Where such a situation is recognized or possible, every staff member shall act in accordance to this policy.
- C. Where an actual or potential conflict of interest exists, no staff member shall make, participate in making or in any way attempt to utilize their position within the organization for leverage or to influence a Base Hospital, stakeholder or committee decision

## PROCEDURE

### Method

#### A. Disclosure

- i. The staff member shall disclose to their manager, in writing, the existence of any circumstance that represents an actual or possible conflict of interest and remove him/herself from all activities pertaining to the actual or perceived conflict of interest.
- ii. This disclosure will then be reported, in writing, to the Emergency Health Program Management and Delivery Branch, Senior Program Lead of the North Field Office and HSN's Critical and Emergency Care Program Administrative Director.
- iii. The Regional Manager or designate, when possible, will assign an alternate staff member to assume all responsibilities of the staff member declaring the conflict of interest, pertaining solely to the activities surrounding the declaration.
- iv. Based on operational requirements, the Regional Manager or designate may decide to permit the declaring staff member to continue to perform limited duties relative to the conflict of interest providing that he/she distance him/herself from decision making, voting or corrective processes.

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**B. Conflict of interest discovered “post facto”**

If a conflict of interest, which should have been disclosed, is discovered after the activity or decision has taken place, it remains the responsibility of the staff member to disclose the actual or perceived conflict as per the procedure articulated above.

**C. Confidential Information**

No staff member shall communicate or use confidential information acquired through the HSN CPC to enhance, either directly or indirectly, personal or family interest.

**References and Related Documents**

HSN Conflict of Interest Policy

Regional Base Hospital Performance Agreement