

CPL1400: Standards of Conduct

Approved Date: February 2009

Reviewed/Revised Date: November 2014

draft

1.0 Introduction

Description

The purpose of this policy is to establish minimum standards of conduct for all staff of Providence Health Care (PHC).

Scope

This policy applies to all Providence Health Care (PHC) staff.

2.0 Policy

2.1 Integrity

PHC expects all staff to conduct themselves with the highest standards of conduct with respect to legal, ethical and professional behaviour amongst themselves and with clients, patients, residents and other members of the public.

When conducting business on behalf of PHC, employees are personally responsible to ensure that they adhere to the highest codes of conduct with respect to conflicts of interest, outside activities, the acceptance of gifts and hospitality, and in all dealings with both the business community and the public. Staff should ensure that they do not place themselves in a position of conflict of interest or breach of trust. As soon as such circumstances arise, or have the potential for arising, the employee must disclose the circumstances to their supervisor. In most cases, prompt and early disclosure will permit the problem to be resolved.

In addition to any other professional code of ethics or standards of practice to which they are bound, PHC staff will refer to this Policy to provide them with guidance on appropriate conduct.

Staff must conduct themselves in an honest manner. Staff members must not engage in acts of dishonesty or commit theft, fraud, assault or willful destruction of PHC property, or that of a client, resident or patient. Staff is expected to be in full compliance with any applicable laws.

In particular, staff should familiarize themselves with the following core policies:

- [CPF0300: Information Privacy and Confidentiality Policy](#)

Providence Health Care (PHC) has value-based, ethical, and legal obligations to protect Personal Information about its patients, residents and Staff.

The purpose of this Information Privacy & Confidentiality Policy ("Policy") is to establish the guiding principles and framework by which PHC and its Staff will comply with its obligations regarding the protection and management of Personal Information and other Confidential Business Information under the custody and control of PHC. It also applies to information

under the custody and control of any other Health Organization that PHC provides services and to which PHC employees have access to while performing their role, such as services provided through Lower Mainland Consolidation.

This policy applies to all Staff relating to Personal and Confidential Business Information regardless of format or how it is stored or recorded. This policy applies while in the course of working and conducting business for or on behalf of PHC, including when off-duty, and extends beyond the completion of the employment or business relationship.

- [CPL1700: Respect at Work](#)

Mutual respect and a discrimination free workplace are priorities of Providence Health Care. The benefits of a respectful workplace include positive patient/client experience, greater job satisfaction and higher productivity.

All persons associated with Providence Health Care are accountable for their own actions and words and must conduct themselves in a civil, respectful, and non-discriminatory manner at the workplace and at work-related gatherings.

Providence Health Care has the right to investigate incident(s), with or without the person's consent, where there are concerns about the alleged disrespectful conduct and/or discrimination and the impact of such conduct on maintaining a respectful workplace.

- [CPF1500: Safe Reporting](#)

Providence Health Care is committed to enhancing early identification and correction of issues that may undermine safe, high quality health care and effective organisational management.

The goal of Providence Health Care ("PHC") is to create a workplace environment in which everyone feels they can report their legitimate concerns without risk of discrimination or other adverse employment actions. PHC is an open and accountable organization which encourages a culture of discussion, and which provides channels of communication for physicians and staff to convey their concerns. However, in those circumstances where there is a fear of reprisal, alternate avenues for reporting confidentially or anonymously will be provided.

Under this policy, anyone, including patients, residents and families, who observe alleged wrongdoing as defined below, may make use of the provisions of this policy to report such wrongdoing.

Staff will address their full attention during working hours to carry out their duties and responsibilities and to further the interests of PHC. Activities outside of work must not impact on a staff member's ability to perform his/her job during working hours.

Staff members, while receiving paid sick leave from PHC, shall not work elsewhere without PHC's approval. Approval will only be granted where medical advice, satisfactory to PHC, recommends the alternate employment as part of a treatment/rehabilitation program. Wages earned during the

approved alternate employment shall be paid, upon receipt, to PHC. The staff member's sick leave bank shall be credited for the number of hours represented by the payment.

2.2 **Public Communication:** See [CPD0200: Media Relations Policy](#)

Providence Health Care (PHC) is committed to open communications with representatives of the media within the limits of the *Freedom of Information and Protection of Privacy Act* as it pertains to patient and employee confidentiality.

PHC balances its responsibility as a source of information about health care and Providence Health Care services with the need to protect the privacy of our patients, residents, clients, their families, and our employees.

The Media Relations policy guides our interaction with the free press, and ensures this balance is preserved.

2.3 **Political Activity**

Staff political activity must be clearly separated from activities related to their employment. Staff must not engage in political activities during working hours or use PHC facilities, equipment or resources in support of these activities.

2.4 **Misuse of Property, Services and Information:** See [CPN1301: Acceptable Use of Technology Policy](#)

Staff requires approval from their leader to use property or equipment owned by the PHC for personal purposes.

PHC property, including equipment, materials, and information, whether electronic or other, shall be used only in the performance of duties and shall not be used for any other purposes, for personal benefit, or for non-PHC use, unless authorized.

- Internet usage must be able to survive public scrutiny and/or disclosure. Users must avoid accessing sites that might bring the public services into disrepute, such as those that carry Offensive Material.
- Communication tools are to be used for legitimate business purposes only. It is acknowledged that from time to time, communication tools may be used for limited personal use which does not involve the reproduction, dissemination or other handling of Offensive Material or is otherwise contrary to law or the employment obligations of the staff member. If a communication tool is used for non-PHC purposes, the employee will pay for any costs attributable to such use.

2.5 **Gifts** See: [CPB0600: Bequests, Legacies, Donations, Solicitations and Fundraising](#)

The solicitation of any gifts, hospitality or other benefits is not permitted. Staff are prohibited from persuading or inducing clients / patients / residents to make a bequest or gift to their benefit. Staff who receive a gift or bequest are required to renounce the gift / bequest.

If a health care client/patient/resident, or his/her family or a vender/supplier insists on offering a gift and the gift is of nominal value, the gift may be accepted.

Accepting a gift is not a conflict of interest if:

- the gift has no more than nominal value (e.g. lunch or a box of chocolates);
- the gift is a normal exchange of hospitality or customary gesture of courtesy between persons doing business together;
- the gift is a normal presentation of gifts to persons participating in a public function, presentation, workshop, or conference;
- the gift is a normal exchange of gifts between friends.

If a health care client/patient/resident; or his/her family or a vender/supplier insists on offering a gift and the gift is above nominal value, they should be referred to one of PHC's Foundations.

Fees or honoraria received when participating in a function held or sponsored by an entity with which the PHC does business must be reported to PHC. PHC may require either the return of such fee or honorarium to the giver or remittance to the PHC if, in PHC's sole discretion, retention of the fee or honorarium by the staff member would present a conflict of interest, real or perceived.

2.6 Conflict of Interest

2.6.1 Conflict of Interest – See [CPF0400: Conflict of Interest Policy](#)

Conflict of interest is defined under Definitions. Conflict of interest situations include, but are not limited to, circumstances where a staff member or a staff member's family member:

- has a direct or indirect financial interest in a proposed contract or transaction with PHC;
- is a shareholder, officer, director, employee or agent of, or is otherwise associated in business directly or indirectly with any entity which seeks to contract, transact or otherwise do business with PHC;
- realizes a benefit as a direct or indirect result of any negotiations or dealings undertaken in the course of employment.

Further, conflict of interest includes situations:

- where a staff member's private or financial interests are in conflict with her/his work duties, responsibilities and obligations or result in a public perception that a conflict exists;
- where staff use their position to solicit clients for their business or a business operated by a family member, close friend, business associate, or a person to whom the staff member owes an obligation;
- where staff accept loans from clients, patients or residents or purchase items from them below value;
- where staff accept favours, either financial or personal, from clients, patients or residents;
- which could impair a staff member's ability to act in the public interest; or

- where a staff member's actions might compromise or undermine the trust that the public places in the organization.

Where an actual or potential conflict of interest arises, or may arise, the affected individual shall immediately disclose in a signed statement to her/his immediate supervisor the nature and extent of such conflict of interest. Where PHC determines that an individual has concealed, or has unreasonably failed to disclose a conflict of interest, PHC may take disciplinary action, up to and including termination.

2.6.2 Personal, Professional and Working Relationships

Staff must conduct themselves in a professional manner with clients, residents and patients, and are prohibited from initiating or participating in intimate or sexual relationships with them, both during and outside work hours, for the duration of their employment with PHC or for the duration of the client's, resident's and patient's stay in a PHC facility and, in all events, in compliance with ethics and responsibilities required of them by virtue of their profession.

Employees shall not, personally, make any decision to hire, or engage any spouse or relative for employment with PHC whether temporary, full-time, part-time or seasonal.

Employees shall not influence, or attempt to influence, any other PHC employee to hire, or engage, any spouse or relative, without disclosing the nature of the relationship to their supervisor.

Employees shall not permit themselves to be placed in supervision over another PHC employee who is a spouse or relative, without disclosing the nature of the relationship to their supervisor.

2.6.3 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 or engage in volunteer activities provided such activities do not:

- interfere with the performance of their PHC duties;
- bring PHC into disrepute;
- represent a conflict of interest or create the reasonable perception of a conflict of interest;
- appear to be an official act or to represent PHC opinion or policy;
- involve the unauthorized use of work time or PHC premises, services, equipment or supplies; or
- gain an advantage that is derived from their employment as a PHC staff member.

2.7 Protection of Corporate Information: See [CPF2700: Disclosure of Corporate Information](#)

Providence Health Care (PHC) is accountable to the people of British Columbia and is committed to openness and transparency in all its activities, including managing its finances, operating its programs

and patient safety and outcomes. PHC will provide the public with access to its records as set out in the *Freedom of Information and Protection of Privacy Act (FIPPA)*.

The purpose of this Policy is to: ensure an effective and standardized approach to responding to requests for Corporate Records; and communicate our processes and identify Staff responsibilities in responding to such requests

This policy applies to all PHC Staff and to all records in PHC's custody or control including administrative and business records created in the conduct of PHC business. The obligations under this policy endure even after staff leave their employment with PHC. This policy does not apply to personal information or personal health information.

2.8 Responsibilities

2.8.1 Staff

Staff are responsible for complying with this policy and for any PHC policy that govern their activities and behavior.

2.8.2 Management

Management is responsible for supervising staff compliance with this policy, and with any PHC policy that governs the activities and behavior of staff, within the scope of their responsibilities.

2.8.3 Human Resources

Human Resources are responsible for the maintenance and operation of this policy.

3.0 Procedure

3.1 Disclosure and Approvals

An employee shall disclose to their Leader, who in turn will advise Human Resources, any involvement in outside employment or other activities, assets and liabilities if such involvement:

- May give rise to a real, apparent or potential conflict of interest between the employee's duties and responsibilities and his or her personal interests, or
- May affect that employee's capacity to perform his/her duties and responsibilities objectively and impartially.

Where it is determined by PHC that a real, apparent or potential conflict of interest exists or that the employee's capacity to perform his/her duties and responsibilities is potentially compromised by the employee's:

- Involvement in outside employment or other activities, the employee must immediately discontinue, curtail or modify his/her involvement, or
- Ownership of assets and presence of liabilities, the employee shall divest the assets and terminate the liabilities in question in a timely and orderly basis.

3.2 Reporting of Violations

Employees should report any violation of this policy of which they become aware to Human Resources, who, depending on nature and materiality of the violation, will report to the Internal Audit Office. In any case where such a report has been made, the report will be treated confidentially to the extent possible and consistent with PHC's responsibility to address the issue raised. See Reporting of Improprieties Policy.

3.3 Failure to Comply

Employees who fail to comply with any provision of this policy may be subject to disciplinary action, up to and including the possibility of termination of employment. It is also important to understand that a violation of certain provisions of this policy may also be a violation of law and may subject the individual employee involved and/or PHC to criminal prosecution or civil liability

3.4 Post Employment Restrictions for Senior Management

[Reference to: Post Employment Restrictions for Senior Management in the BC Public Service \(Human Resources Policy 13\)](#)

Senior Management will not divulge, disclose or otherwise use Confidential Information obtained through their employment at PHC or Proprietary Material following the conclusion of their employment with PHC without the written permission of PHC. Until one year after their employment ends, employees will not:

- disclose confidential information that you obtained through your employment;
- if you had a substantial involvement in dealings with an outside entity at any time during the year immediately preceding the end of your employment then, for a year after the end of your employment, you 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 that outside entity to the government; or
 - give counsel to that outside entity, for its commercial purposes, concerning the programs or policies of any organization or ministry of the government in which you were employed at any time during the year immediately preceding the termination of your employment; or
- must not lobby or otherwise make representations for any outside entity to any ministry or organization of the government in which you were employed at any time during the year immediately preceding the termination of your employment; or
- act for an outside entity in connection with any ongoing proceedings, transaction, negotiation or case in which the outside entity and the government are involved
 - if you, during your former employment with the government, acted for or advised the government concerning the proceedings, transaction, negotiation or case; and

- acting for the outside entity in that connection would result in the receipt by the outside entity of a private or commercial benefit or of any benefit not for general application.

4.0 References

Related Policies

- [CPN1301: Acceptable Use of Technology Policy](#)
- [CPB0600: Bequests, Legacies, Donations, Solicitations and Fundraising](#)
- [CPF0400: Conflict of Interest Policy](#)
- [CPF2700: Disclosure of Corporate Information](#)
- [CPF0300: Information Privacy and Confidentiality Policy](#)
- [CPD0200: Media Relations](#)
- [CPL1700: Respect at Work](#)
- [CPF1500: Safe Reporting](#)
- [Post Employment Restrictions for Senior Management in the BC Public Service \(Human Resources Policy 13\)](#)

Keywords

Standards of Conduct, Integrity, Political Activity, Personal Use, Equipment, Communications, Media, Public

Definitions

“**Staff**” means excluded staff, employees, researchers, students, volunteers and medical staff who are engaged by PHC;

“**Benefit**” means any right or acquisition capable of being measured in terms of financial value or affecting or having the potential to affect a person’s financial worth or assets, or personal gain;

“**Family member**” means persons related by blood, marriage or common law relationship, including same-sex relationships, and by legal declaration, such as guardian or foster parent;

“**Offensive Material**” includes but is not limited to, pornography, hate literature or any material which contravenes the BC Human Rights Act;

“**Conflict of Interest**” means a situation in which a staff member’s personal or financial interests in a PHC decision or transaction are or may be perceived to be in conflict with PHC’s interests or with the proper performance of the employee’s job duties and responsibilities. Such actions may undermine or compromise public confidence in PHC or PHC’s trust in the employee’s ability to properly discharge his/her work responsibilities. Such conflicts include but are not limited to:

- financial gain for the staff person or his/her family member;
- a personal or business association with a PHC vendor or other contractor; or
- when a staff member’s personal or financial interests are inconsistent with or are perceived to be inconsistent with their PHC duties, responsibilities and obligations.