

Policy Manual

Subject: Conflict of Interest

Section: HR-Conduct and Performance Management

Number: HR-f-25

Approved: Ethics Commissioner of Alberta O Nov 2018 R April 2019

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1. Principles and Expectations

- 1.1 CAPITALCARE is committed to promoting a standard of conduct that preserves and enhances care services and public confidence in the integrity, objectivity, and impartiality of its care services and business activities. CAPITALCARE relies on CAPITALCARE Representatives to uphold these standards by ensuring private interests do not interfere with or influence their decision-making processes. Recognizing that CAPITALCARE Representatives have interests outside of CAPITALCARE, they are expected to fulfill their responsibilities in a manner that avoids involvement in any conflict of interest situations, and to promptly disclose and address any conflicts should they arise.
- 1.2 This Policy supports the CAPITALCARE value of responsibility and is consistent with the expectation that all CAPITALCARE Representatives act ethically.
- 1.3 CAPITALCARE Representatives must act impartially in carrying out their duties.
- 1.4 CAPITALCARE Representatives must not act in self-interest or further their private interests by virtue of their position or duties as a CAPITALCARE Representative. CAPITALCARE Representatives must take steps to avoid real, apparent, and potential conflicts of interest, whenever possible.
- 1.5 CAPITALCARE Representatives must disclose and manage all real, apparent, and potential conflicts of interests in accordance with this Policy.

2. Definitions

- 2.1 **CAPITALCARE Representative** means:
 - a) Members of the CAPITALCARE Advisory Committee (CCAC);
 - b) CAPITALCARE employees; and any other person, other than a representative of the Government of Alberta, who:
 - i. is acting on behalf of CAPITALCARE or claims to be acting on behalf of CAPITALCARE;
 - ii. is authorized to bind CAPITALCARE or purports to bind CAPITALCARE; or
 - iii. directly or indirectly controls CAPITALCARE funds.
- 2.2 **Consulting services** means organization leadership/management level advisory services. Such services typically involve situational analysis and the provision of advice, options, etc. to guide CAPITALCARE decisions or in respect of which CAPITALCARE can act. Consulting services do not include the implementation or execution of work based on the analysis or advice. Consulting services does not include services for the provision, administration, or management of clinical care or clinical support or medical administrative leadership roles.
- 2.3 **Cooling off period** means the minimum period of time following the termination of employment during which a former employee, who was formerly employed in a

position allocated in the Senior Leader career level and above, cannot engage in a contract with CAPITALCARE for consulting or professional services.

2.4 **Frivolous or vexatious** means:

- a) Misuse or abuse of the process for reporting an alleged breach of this Policy;
- b) A report of an alleged breach that is not reasonably purposeful with no possible outcome that would resolve the subject matter of the report of alleged breach; or
- c) Directed, unreasonable conduct by an individual who:
 - (i) attempts to re-open a matter that has been addressed and closed through the applicable reporting and resolution process and offers no new relevant information;
 - (ii) is unreasonably persistent in pursuing a report of a breach which leads to resources being absorbed disproportionately, and causes disruption, delay, or disadvantage to other individuals who are part of the reporting process or to CAPITALCARE as an organization; or
 - (iii) is abusive or threatening.

2.5 **Manager** means the individual responsible for managing and overseeing a CAPITALCARE Representative, or to whom the CAPITALCARE Representative reports. For further clarity, the Manager of the Chief Operating Officer and CAPITALCARE Advisory Committee members is the Alberta Health Services, Vice President and Chief Health Operations Officer, Northern Alberta.

2.6 **Medical administrative leadership roles** mean roles that are appointed by CAPITALCARE, as determined as necessary by CAPITALCARE to support strategic and operational needs, to provide oversight, direction and/or management of clinical or clinical support portfolios.

2.7 **Person** means an individual, a partnership, a corporation, a company, a joint venture, a trust, and the heirs, executors, trustees, administrators or other legal representatives of a person.

2.8 **Political activity** means an action that supports or opposes a political party, candidate, or cause at any level of government, including but not limited to:

- a) Seeking nomination as, or being a candidate for election;
- b) Volunteering for a political party or candidate;
- c) Campaign visits, tours, or events from candidates and/or their representatives;

- d) Posting political party, candidate, or campaign signs or posters;
 - e) Distributing political party, candidate or campaign literature;
 - f) Wearing or distributing political party, candidate, or campaign attire including buttons;
 - g) Soliciting political donations or fundraising; and
 - h) Soliciting petition/nomination signatures.
- 2.9 **Political donations** means the contribution of funds (including, but not limited to, cash, cheques, purchase orders, purchase cards or “p-cards”/credit card purchases, and funding requests made to accounts payable), time, gifts (including door prizes and silent auction gifts), or resources to a political activity, political party, or candidate.
- 2.10 **Political party** means an organization, including associated constituency associations, established under the *Election Finances and Contributions Disclosure Act* (Alberta) or *Canada Elections Act* (Canada) and registered with Elections Alberta or Elections Canada to nominate candidates in an election.
- 2.11 **Private interest** means a financial, personal, or private affiliation, a relationship, or any other involvement or interest of a CAPITALCARE Representative that is not of general application, that does not affect the CAPITALCARE Representative as one of a broad class of the public that does not concern the remuneration and benefits of the CAPITALCARE Representative, and is not trivial. The private interest could benefit:
- a) The CAPITALCARE Representative directly;
 - b) A corporation for which the CAPITALCARE Representative owns, directly or indirectly, more than 10% of the voting rights;
 - c) A business partner;
 - d) A joint-venture;
 - e) A trust or estate which the CAPITALCARE Representative has a substantial interest in, and/or where the CAPITALCARE Representative serves as a trustee, or similar role;
 - f) An immediate family member (i.e. parent, spouse, sibling, or child);
 - g) An outside employer of the CAPITALCARE Representative, including self-employment or acting as a paid advisor or consultant;
 - h) A political entity such as a political party or candidate;
 - i) A private sector, public sector, non-profit, charitable, or corporate organization or board the CAPITALCARE Representative is involved with or volunteers for that has a connection to the health care sector; or

- j) Any other individual or organization that a reasonable person would believe the CAPITALCARE Representative's actions may be affected.
- 2.12 **Professional services** means services involving the implementation or execution of work, or provision of deliverables that require professional expertise. Professional services may include services that are, in part, also classified as consulting services. Where the primary purpose of a particular procurement is for implementation or execution of certain work or deliverables, all of such services for such procurement will be considered Professional Services notwithstanding that an ancillary part of the procurement includes services that would otherwise be considered consulting services. The provision of reporting/information help lines is also classified as professional services. Professional services does not include services for the provision, administration, or management of clinical care or clinical support or to medical administrative leadership roles.
- 2.13 **Resident** means a person who receives or who has received health care or services from CAPITALCARE and its health care providers or individuals authorized to act on behalf of CAPITALCARE.
- 2.14 **Senior Leader** means any employee who reports directly to the Chief Operating Officer and is a voting member of the Executive Management Committee, and other individuals so designated by the Chief Operating Officer.
- 2.15 **Severance notice period** means the length of time for which an employee received payment in lieu of notice following their termination date. Such period is specified in the release that is signed by the employee in consideration for their severance payment.
- 2.16 **Site Director** means the employee who directs and oversees a particular CapitalCare site. This employee reports directly to the Chief Operating Officer and is a voting member of the Executive Management Committee.
- 2.17 **Termination date** means the last day an employee was employed with CAPITALCARE.
- 2.18 **Vendor** means an individual or company that supplies, or seeks to provide, goods and/or services to CAPITALCARE and includes contractors and suppliers, but excludes CAPITALCARE Representatives.

3. Applicability

- 3.1 Compliance with this Policy is required by all CAPITALCARE Representatives.

4. Conflict of Interest (General): Identifying

- 4.1 A conflict of interest can be real, apparent, or potential. All references to conflicts of interests in this Policy include all three categories:

- a) A real conflict of interest occurs when a CAPITALCARE Representative performs an action, makes a decision, influences a decision, or seeks to influence a decision, which benefits a private interest;

- b) An apparent conflict of interest occurs when a reasonably informed person could believe that a CAPITALCARE Representative's action, decision, influence on a decision, or attempt to influence a decision may benefit a private interest;
 - c) A potential conflict of interest occurs when a CAPITALCARE Representative's action, decision, influence on a decision, or attempt to influence a decision may benefit a private interest.
- 4.2 The scenarios listed below are examples of conflict of interest situations for a CAPITALCARE Representative. This is not an exhaustive list and CAPITALCARE Representatives are required to use reasonable judgment in determining whether an activity or arrangement poses a conflict of interest:
- a) Using their position, power, or authority with CAPITALCARE to influence, or seek to influence, a decision made by CAPITALCARE that benefits a private interest;
 - b) Granting preferential treatment or assistance through their position, power, or authority with CAPITALCARE to benefit a private interest;
 - c) Using knowledge or information in violation of CAPITALCARE's Employee Confidentiality Agreement, which regulates the use or distribution of information not available to the public in accordance with the Alberta Freedom of Information and Protection of Privacy Act;
 - d) Participating in outside employment, self-employment, or volunteer activity, where that outside employment, self-employment, or volunteer activity:
 - (i) interferes or conflicts with their responsibilities to CAPITALCARE;
 - (ii) is performed in a way that makes it appear that they are done on behalf of CAPITALCARE; or
 - (iii) involves the use of CAPITALCARE work time, equipment, supplies, facilities, staff, communication platforms, or other CAPITALCARE resources, unless such use is otherwise authorized.
 - e) Prior to accepting supplementary employment or appointment, CAPITALCARE Representatives must notify their Manager in writing about the nature of such supplementary employment or appointment. The Manager must review the proposed employment or appointment for real or apparent conflicts of interest. If there is no real or apparent conflict of interest, the Manager may approve the employment or appointment in writing. If there is a real or apparent conflict of interest, the Manager must then, in writing, deny the employment or appointment or allow the employment or appointment and put procedures in place to manage the real or apparent conflict of interest.

- f) Establishing or entering into a business arrangement or financial interest if the interest is something known to the CAPITALCARE Representative because of their role with CAPITALCARE; and
 - g) Allowing the performance of their CAPITALCARE duties to be influenced by offers of future employment.
- 4.3 The following scenarios are deemed to not present a conflict of interest for a CAPITALCARE Representative:
- a) Having more than one position with CAPITALCARE;
 - b) Carrying out CAPITALCARE duties at more than one CAPITALCARE location;
 - c) Being employed by or providing goods or services to Alberta Health Services;
 - (i) Covenant Health;
 - (ii) Carewest;
 - (iii) Calgary Lab;
 - (iv) AHS Contracted Health Care Providers;
 - (v) Lamont Health Care Centre;
 - d) Self-employment that has no connection with the health care sector, AHS or AHS' subsidiaries;
 - e) Home-based or direct selling – for example, being a sales representative or consultant for Avon, Mary Kay, Scentsy, PartyLite, etc. For clarity, this includes home-based direct selling of wellness products – for example, Watkins, Herbalife, etc.;
 - f) Serving as a CAPITALCARE- appointee board member for an organization or corporation;
 - g) Volunteering or serving as a board member for a not-for-profit, charitable, religious, professional association, or educational institution that has no connection with the health care sector;
 - h) Having joint appointments as between CAPITALCARE and an Alberta post-secondary educational institution; and
 - i) Participating in union activity.
- 4.4 Any CAPITALCARE Representative engaged in an activity described in sections 4.3(a) – (i) must not use CAPITALCARE resources to engage in the activity, including, but not limited to, CAPITALCARE work time, equipment, supplies, facilities, staff, or communication platforms, unless otherwise authorized.

4.5 Despite section 4.3, if they have reasonable grounds, a Manager or the Director of Human Resources (or designate) may direct a CAPITALCARE Representative to complete a Conflict of Interest Declaration Form (Declaration Form) for any of the scenarios listed in sections 4.3(a) – 4.3(i), identifying the activity as a conflict of interest and including a management plan for the activity.

5. **Conflict of Interest (General): Disclosing**

- 5.1 Self-disclosing of conflicts of interest is done through the Declaration Form. Management plans for addressing conflicts of interest are also set out in the Declaration Form.
- 5.2 If a conflict of interest has been identified, the Declaration Form must be completed every two years or whenever there are relevant changes to the information previously disclosed, whichever is more recent.
- 5.3 CAPITALCARE Representatives do not have a positive duty to disclose that they have no conflict of interest unless:
 - a) Their Manager directs them to make such a disclosure (see section 5.10); or
 - b) They are a Senior Leader (see section 5.4).
- 5.4 Despite section 5.2, all Senior Leaders and CAPITALCARE Advisory Committee members must submit a Declaration Form annually, or whenever there are relevant changes to the information previously disclosed, whichever is more recent. Despite section 5.3, this Declaration Form must be submitted regardless of whether or not the Senior Leader or CAPITALCARE Advisory Committee member actually has a conflict of interest.
- 5.5 All CAPITALCARE Representatives will be subject to annual review regarding knowledge of the Policy during mandatory education.
- 5.6 Declaration Forms are submitted as follows:
 - a) CAPITALCARE Representatives, excluding CAPITALCARE Advisory Committee members and the Director of Human Resources, must submit their completed Declaration Form for approval to the Director of Human Resources.
 - b) The Director of Human Resources must submit their completed Declaration Form for approval to the Chief Operating Officer;
 - c) CAPITALCARE Advisory Committee members, excluding the CAPITALCARE Advisory Committee Chair, must submit their completed Declaration Form for approval to the CAPITALCARE Advisory Committee Chair; and

- d) The CAPITALCARE Advisory Committee Chair must submit their completed Declaration Form for approval to the Alberta Health Services Board Chair.
- 5.7 CAPITALCARE Representatives have an ongoing duty to self-disclose a conflict of interest, in writing, to their Manager. Disclosures of a conflict of interest must take place in advance of any action that may lead to a conflict of interest, or, if the conflict of interest could not be foreseen, immediately upon being aware of the conflict of interest.
- 5.8 CAPITALCARE Representatives have an ongoing duty to alert their Manager of actual or suspected breaches of the Conflict of Interest Policy. Should the Manager fail to act, the CAPITALCARE Representative may report the actual or suspected conflict of interest to the Director of Human Resources.
- 5.9 CAPITALCARE Representatives have an ongoing duty to alert their Manager of any situations that may place another CAPITALCARE Representative in a conflict of interest situation. Should the Manager fail to act, the CAPITALCARE Representative may report the conflict of interest to the Director of Human Resources.
- 5.10 The Manager of a CAPITALCARE Representative and the Director of Human Resources (or designate) have authority to direct a CAPITALCARE Representative to complete a Declaration Form.
- 5.11 Declaration Forms must be retained for a period of five (5) years after they have been superseded or become obsolete.
- 5.12 Completed Declaration Forms must be kept confidential except where:
 - a) The disclosure is for assessing and managing a conflict of interest;
 - b) There is a legitimate need to inform a CAPITALCARE Representative's new Manager of the Declaration Form following the CAPITALCARE Representative taking a new role or a change in reporting structure;
 - c) The disclosure is related to investigative, disciplinary, administrative tribunal, quasi-judicial, or legal proceedings;
 - d) There is a legal or regulatory obligation to disclose the Declaration Form; or
 - e) The CAPITALCARE Representative has given permission to disclose the Declaration Form.
- 5.13 When a CAPITALCARE Representative participates in a meeting where any matter arises where the CAPITALCARE Representative has a conflict of interest, the CAPITALCARE Representative must verbally declare their conflict of interest as soon as they are aware of the conflict of interest and any meeting minutes should reflect their statement. The chair of the meeting has the discretion to:

- a) Ask the CAPITALCARE Representative to not participate in the discussion or any decision related to the matter;
 - b) Ask the CAPITALCARE Representative to leave the meeting for the duration of the matter; or
 - c) Indicate that the CAPITALCARE Representative should not be presented with meeting materials related to the matter (assuming the CAPITALCARE Representative has not previously received the materials).
- 5.14 The Director of Human Resources (or designate) may establish administrative processes for the receipt, processing, and approval of Declaration Forms.

6. Conflict of Interest (General): Approving a Declaration Form and Management Plan

- 6.1 For any CAPITALCARE Representative other than CAPITALCARE Advisory Committee members and the Director of Human Resources, the Director of Human Resources (or designate) may approve in writing the Declaration Form and any management plan for a declared conflict of interest.
- 6.2 For the Director of Human Resources, the Chief Operating Officer may approve in writing the Declaration Form and any management plan for a declared conflict of interest.
- 6.3 For any CAPITALCARE Advisory Committee members other than the CAPITALCARE Advisory Committee Chair, the CAPITALCARE Advisory Committee Chair may approve in writing the Declaration Form and any management plan for a declared conflict of interest.
- 6.4 For the CAPITALCARE Advisory Committee Chair, the Alberta Health Services Board Chair may approve in writing the Declaration Form and any management plan for a declared conflict of interest.
- 6.5 If a CAPITALCARE Representative does not accept the decision of the Director of Human Resources (or designate) regarding whether a conflict of interest exists and is being adequately managed, then the CAPITALCARE Representative will have the right to appeal the decision to the Chief Operating Officer.

7. Conflicts of interest in CAPITALCARE Contracting and Procurement

- 7.1 The CAPITALCARE Contracts and Acquisitions Coordinator will establish administrative processes for the declaration, receipt, processing, and approval of conflict of interest disclosure forms for use in CAPITALCARE contracting and procurement initiatives. Such processes will pertain to all individuals responsible for the development of a procurement initiative methodology, the assessment, evaluation and selection of proponents, or the negotiations with selected or preferred proponents.

8. Receipt of Gifts

- 8.1 CAPITALCARE Representatives are not permitted to accept personal gifts or prizes from Vendors, Residents, Residents' families or any other individual or organization. As part of this:
- a) CAPITALCARE Representatives must not seek out gifts, hospitality, or other benefits from any Person. An exception to this is that CAPITALCARE Representatives may solicit gifts, hospitality, or other benefits from Persons other than Residents or Residents' families or friends for the purpose of CAPITALCARE-sponsored charitable, club, or team activities (e.g. CAPITALCARE Foundation, Staff Appreciation Events) providing that the principles of this Policy are adhered to.
 - b) CAPITALCARE Representatives may not provide a Resident with preferential priority of access to publicly-funded health services managed by CAPITALCARE due to receipt of a gift, hospitality, or other benefit, from a Resident or the Resident's family or friends. CAPITALCARE Representative may not influence, or seek to influence, a Resident's priority of access to publicly-funded health services managed by CAPITALCARE due to receipt of a gift, hospitality, or other benefit, from a Resident or the Resident's family or friends.
 - c) CAPITALCARE Representatives may not accept gifts, hospitality or other benefit at any time from Vendors to CAPITALCARE. All money or gifts received from Vendors are to be donated to the CAPITALCARE Foundation.
- 8.2 CAPITALCARE acknowledges that in conducting our daily operations, CAPITALCARE Representatives may be presented with offers of appreciation from Residents, Residents' families, coworkers, and others. When this occurs, the Representative must report it to their Manager as soon as possible, and the following guidelines will apply:
- Personal Gifts from Residents, or Residents' Family Members/Loved Ones**
- a) CAPITALCARE Representatives are not permitted to accept money or personal gifts for their or others' personal use from any Resident, family member or loved one, and are required to report the offer to their Manager as soon as possible.
 - b) CAPITALCARE Representatives who are offered a gift(s) or money by a Resident(s), their relative(s) or loved one(s) or from an organization(s) such as a Vendor(s) are required to politely inform them of the Conflict of Interest Policy and its "no gift" provisions. This can also be used as an opportunity to recommend that the individual or organization consider making a tax creditable donation to the CAPITALCARE Foundation so that the gift or money may be used for the benefit of CAPITALCARE and/or the Residents.
 - c) Should the individual or organization offering the gift in the form of food, or money to purchase food (including gift cards), that is valued at \$200 or

less insist it go to the CAPITALCARE Representative, they may accept the gift on behalf of the team and forward the gift to their immediate Manager for distribution to the team.

- d) Should the gift be in the form of plants or flowers, such gifts will only be accepted and placed within the unit/centre/organization for the enjoyment of all those who are within the unit/centre/organization.
- e) Gifts and donations of money in excess of \$200 may be accepted for the program/unit/centre/organization as outlined below (item j, k and l).

Personal Gifts or Prizes from Other Sources

- f) Only upon the approval of their immediate Manager can CAPITALCARE Representatives accept gifts as part of the exchange of gifts between colleagues; or the exchange of hospitality between Persons doing business together; or token exchanges as a part of protocol; or the presentation of a gift(s) to a Person(s) participating in a public function.
- g) If a CAPITALCARE Representative is sponsored by CAPITALCARE to attend any event, either by virtue of being at the event on paid time and/or by having the registration for the event paid for by CAPITALCARE, and the Representative wins a prize, the following will occur:
 - if the value of the prize is less than two hundred dollars (\$200) the Representative may elect to keep the prize or donate the prize to the CAPITALCARE Foundation;
 - if the value of the prize is two hundred dollars (\$200) or more, the Representative must donate the prize to the CAPITALCARE Foundation.

Gift Policy Exceptions

- h) Exempted from this policy are gifts such as t-shirts, pens, trade show bags and all other “trinkets” (mugs, key chains, calendars etc.) that are offered equally to all participants participating at or are registered attendees at events such as conferences, training events, seminars, trade shows, and association gatherings.
- i) Exempted are occasion cards, thank you notes, paper certificates or other written forms of thanks and recognition.

Gifts / Donations over \$200

- j) Monetary gifts over \$200 may be accepted, by Seniors Leaders for the program/unit/centre/organization. However, Senior Leaders will consult with the Chief Operating Officer before accepting a large monetary donation (i.e. over \$5,000) to ensure that there is a clear understanding of donor expectations, agreement about recognition for the donation and agreement on where the donation is to be directed in accordance with Policy FOU-a-12 Receiving Donations.

- k) Gifts in kind such as capital assets, real estate, art and other items of significant value may be accepted at the discretion of the CAPITALCARE Foundation.
 - l) Managers must contact the CAPITALCARE Foundation with details of any Vendor donations of money or gifts so that proper acknowledgement can be made.
- 8.3 CAPITALCARE Representatives should contact their Manager or the Director of Human Resources if they have any questions or need assistance with interpreting Section 8.

9. Receipt of Education from a Vendor

- 9.1 Subject to section 9.5, CAPITALCARE Representatives may receive education provided by a vendor, either directly or indirectly, and the commercial value of any gift, hospitality, or other benefit that accompanies that education must not exceed a total of \$400.00 from one source (as defined in section 8.3) in a calendar year. Examples of gifts, hospitality, or other benefit that accompany vendor education and that would be subject to the \$400.00 annual total are meal expenses, travel expenses, complimentary resource materials, and promotional items such as pens, mugs, etc.
- 9.2 The time that a vendor uses to travel to, prepare for, or deliver education to a CAPITALCARE Representative will be considered to have no value when calculating the commercial value of any vendor-sponsored education.
- 9.3 Any registration fee or conference fee for education that is paid for by a vendor must not exceed a total of \$400 from one source (as defined in section 8.3) in a calendar year. Registration fees or conference fees for education that are paid for or waived by a vendor which exceed a total of \$400 from related corporate entities in a calendar year may be accepted only with prior written permission from the Representative's Manager, whose permission shall only be granted reasonably, in accordance with the principles of this Policy, and if there is no real or apparent conflict of interest.
- 9.4 All reasonable steps must be taken to receive vendor-sponsored education at a CAPITALCARE site rather than at a restaurant or similar venue.
- 9.5 Despite section 9.1, no CAPITALCARE Representative shall accept any vendor-sponsored education at any time if there is a competitive procurement process underway where that vendor has submitted a response to a request for proposals or other competitive procurement process. The onus is on the CAPITALCARE Representative to determine whether such a competitive procurement process is underway by contacting the CAPITALCARE Acquisitions Coordinator.
- 9.6 This Policy does not limit the ability of a CAPITALCARE Representative to receive vendor-sponsored education or training as expressly agreed to as "value adds" in contracts between CAPITALCARE and its vendors. These contractual items are

not subject to the monetary limits indicated in section 9.1 and shall not be considered to be gifts under this Policy.

- 9.7 This Policy does not limit the ability of a CAPITALCARE Representative to apply for or receive scholarships or bursaries from industry-funded organizations or non-profit professional organizations for purposes of continuing education. These scholarships or bursaries are not subject to the monetary limits indicated in section 9.1 and shall not be considered to be gifts under this Policy.

10. Contracting with Current and Former CAPITALCARE Advisory Committee Members

- 10.1 Restrictions on contracting with current or former CAPITALCARE Advisory Committee members apply whether the CAPITALCARE Advisory Committee member is providing the goods or services directly to CAPITALCARE or through a company that is owned, controlled, or managed by the CAPITALCARE Advisory Committee member or by an immediate family member of the employee.
- 10.2 CAPITALCARE shall not enter into a contractual or business relationship with a current CAPITALCARE Advisory Committee member. This restriction does not apply to services for the provision, administration, or management of clinical care or clinical support or to medical administrative leadership roles.
- 10.3 CAPITALCARE shall not enter into a contractual or business relationship with a former CAPITALCARE Advisory Committee member for a period of twelve (12) months following the end of their term, unless otherwise explicitly approved by the CAPITALCARE Advisory Committee.

11. Contracting with Current and Former CAPITALCARE Employees

- 11.1 Restrictions on contracting with current or former employees apply whether the employee is providing the goods or services directly to CAPITALCARE or through a company that is owned, controlled, or managed by the employee or by an immediate family member of the employee.
- 11.2 CAPITALCARE shall not enter into contracts for goods and/or services, including but not limited to consulting services or professional services, with current CAPITALCARE employees outside of any terms of the individual's employment.
- 11.3 The current or former employment relationship must be disclosed by the current or former employee as part of the normal procurement process and/or during the negotiation of any contract.
- 11.4 Contracts for consulting or professional services with former employees who held positions at the Senior Leader career level are subject to the completion of a cooling off period as set out in sections 11.5 and 11.6.
- 11.5 A cooling off period must occur before a former CAPITALCARE employee who held a position Senior Leader career level can enter into a contract with

CAPITALCARE for the provision of consulting or professional services. The cooling off period shall begin on the later of:

- a) The date that the individual's employment with CAPITALCARE has ended; or
 - b) In situations where a severance was provided, the end date of the severance notice period.
- 11.6 The cooling off period shall be twelve (12) months for all former employees who held positions at the Senior Leader career level and above as determined by the last position held by the employee prior to the termination date.
- 11.7 For positions below the Senior Leader career level, there shall not be any required cooling off period.
- 11.8 All requests to waive the cooling off period in whole or in part shall be reviewed and approved by the Chief Operating Officer in consultation with the Director of Finance and the Director of Human Resources. The approved waiver must be appended to the contract documentation.
- 11.9 Contracts with former employees who were employed at the level of Chief Operating Officer or Director, irrespective of the cooling off period set out in Part 11, must be reviewed and approved by the Chief Operating Officer in consultation with the Director of Finance and the Director of Human Resources.
- 11.10 Contracts with former employees, who were employed in positions allocated in the Senior Leader career level and above, before the end of their cooling off period, must be reviewed and approved by the Chief Operating Officer in consultation with the Director of Finance and the Director of Human Resources.
- 11.11 The approvals required in sections 11.9 and 11.10 are in addition to any approvals required in accordance with standard contracting provisions.
- 11.12 Contracts with former employees who were employed in positions allocated below the Senior Leader career level must be reviewed and approved in accordance with standard contracting provisions.

12. Post-Termination Requirements

- 12.1 Upon termination of employment, contract, or other relationship with CAPITALCARE, a former CAPITALCARE Representative must abstain from the following activities for a period of twelve (12) months following the end of their relationship with CAPITALCARE:
- a) Using their former position with CAPITALCARE to influence, or seek to influence, a decision made, or to be made, on behalf of CAPITALCARE that would benefit a private interest; and

- b) Using or communicating knowledge and information not available to the general public and gained through their involvement with CAPITALCARE to benefit a private interest.

13. Political Activity: Donations

- 13.1 CAPITALCARE Representatives may make political donations using their personal funds and/or attend political events, including fundraising events, in a personal capacity.
- 13.2 CAPITALCARE funds or resources shall not be donated or otherwise used to support any political activity, political party, or candidate including attendance at or donations to fundraising events. Personal funds or resources shall not be donated to a political activity, political party, or candidate on behalf of CAPITALCARE.

14. Political Activity: Use of CAPITALCARE Facilities

- 14.1 CAPITALCARE facilities shall not be used for any political activity, including, but not limited to use for the purposes of canvassing, campaigning, making political announcements, touring and other activities. During an election campaign, political parties are not permitted to use CAPITALCARE facilities as a backdrop or host location for any campaign event or activity.
- 14.2 Elected officials may access CAPITALCARE facilities for the purpose of carrying out their duties to the elected office provided they do not engage in any political activity and comply with applicable CAPITALCARE policies and all standard access requirements in place at the facility.
- 14.3 In accordance with the *Election Act (Alberta)*, *Canada Elections Act (Alberta)*, and *Local Authorities Election Act (Alberta)*, CAPITALCARE facilities may be used for polling stations and for special/mobile polling provided the polling does not interfere with health care delivery and CAPITALCARE business.
- 14.4 Residents may participate in political activities related to their personal political affiliation.

15. Political Activity: Candidates for Election

- 15.1 The following CAPITALCARE Representatives must not be a candidate in a provincial election while serving in their position or appointment with CAPITALCARE:
 - a) CAPITALCARE Advisory Committee Members;
 - b) The Chief Operating Officer;
 - c) Any executive that reports directly to the Chief Operating Officer; and
 - d) Any other person so designated by the Chief Operating Officer.
- 15.2 All other CAPITALCARE Representatives must disclose their candidacy using a Declaration Form in order to manage any real, potential, or apparent conflicts of

interest that may arise from being a candidate in an election or serving in an elected office. Upon disclosure, the candidate's Manager, in consultation with the Director of Human Resources, will determine whether a real, potential, or apparent conflict of interest exists and if so, the appropriate management plan to mitigate or remove the conflict position.

15.3 CAPITALCARE Representatives who are:

- a) Elected to the Legislative Assembly of Alberta, the Parliament of Canada, or a municipal office (including school trustee) are required to disclose the elected position using a Declaration Form and to comply with the decision of the Director of Human Resources to remove or mitigate a real, potential, or apparent conflict position; or
- b) Not elected, and are on an approved leave of absence from CAPITALCARE, may return to their position or similar position with CAPITALCARE effective the first day after the election.

15.4 CAPITALCARE Representatives requesting time off to assist in another individual's campaign are required to follow the standard processes for processing and approving paid or unpaid time off (e.g. vacation request, unpaid leave of absence).

16. Alleged Breach of this Policy: Reporting

16.1 There are three avenues to report an alleged breach of this Policy:

- a) **Manager** – Unless their Manager is believed to be involved in the alleged breach, a CAPITALCARE Representative should report any alleged breach to their Manager. Such a report may be made in a manner which maintains the confidentiality of CAPITALCARE Representatives but must be in accordance with sections 16.2, 16.3, and 16.4. The Manager must ensure that a written submission of the report is submitted by either the Manager or the CAPITALCARE Representative to the CAPITALCARE Director of Human Resources for consultation or to direct follow-up and/or investigation. If the alleged breach pertains to the Manager, the report should be made to the next highest level of management; Human Resources Manager, Human Resources Director or Medical Director.
- b) **Director of Human Resources** – If a CAPITALCARE Representative is unable to report an alleged breach of this Policy to his or her Manager (as described above) or to the next highest level of management, the reporter can report the alleged breach to the Director of Human Resources. Such a report may be made in a manner which maintains the confidentiality of CAPITALCARE Representatives but must be in accordance with sections 16.2, 16.3, and 16.4.
- c) **Confidential Reporting and Disclosure Service** – If reporting to the Manager is not appropriate, the reporter can report the alleged breach through the CAPITALCARE Staff Hotline at 1-844-257-7287. The information contained in the report is submitted by the Staff Hotline to the

Director of Human Resources for follow-up and/or investigation unless the alleged breach involves the Director of Human Resources, in which case the report must be submitted to the Chief Operating Officer.

- 16.2 All initial reports of an alleged breach of this Policy can be made confidentially; however, subsequent to the initial report the maintenance of absolute confidentiality may be limited in order to conduct an appropriate and fair investigation.
- 16.3 Reports of alleged breaches of this Policy made pursuant to section 16.1(a), (b) and (c), may require follow-up contact with the reporter in order to conduct an effective investigation of an alleged breach.
- 16.4 Reports of alleged breaches of this Policy should be factual rather than speculative and contain as much specific information as possible. Lack of detail and/or anonymous reports may limit CAPITALCARE's ability to conduct a thorough investigation.
- 16.5 An allegation of a breach of this Policy that occurred more than two (2) years prior to the date of the report will generally not be open for review.
- 16.6 CAPITALCARE retains the authority to review any allegation of an alleged breach that has surpassed the limitation period in section 16.5 if the matter represents a continued or future risk to CAPITALCARE personnel, the public, Resident safety, the integrity and reputation of CAPITALCARE, and/or to the clinical or business operations of CAPITALCARE.
- 16.7 All reports of alleged breaches of this Policy are taken seriously by CAPITALCARE and are reviewed and/or investigated by the Director of Human Resources or in consultation with the Director of Human Resources. Dependent upon the outcome of the review, the report may be investigated by the Director of Human Resources, the appropriate CAPITALCARE department.
- 16.8 All reports must be reviewed to determine if they fall under the *Public Interest Disclosure (Whistleblower Protection) Act* (Alberta) prior to any investigation or response taking place.

17. Alleged Breach of this Policy: Reporting that is Frivolous or Vexatious

- 17.1 CAPITALCARE Representatives are prohibited from making reports of alleged breaches of this Policy which are frivolous or vexatious in nature.
- 17.2 CAPITALCARE will take all necessary steps to appropriately manage frivolous or vexatious reports of alleged breaches, regardless of whether the report is from a CAPITALCARE Representative or another person. The Director of Human Resources may refuse to accept a report if it is deemed frivolous or vexatious as per section 17.3.
- 17.3 The determination of whether a report of an alleged breach is frivolous or vexatious is made by a three (3) member group consisting of the Director of Human Resources, the Director of Finance and the Chief Operating Officer. If any

one of these individuals is not available or if their presence in the group constitutes a conflict of interest or is otherwise not appropriate then the membership will consist of one other Senior Leader. A consensus on the determination is required.

- 17.4 If a report of an alleged breach of this Policy is deemed frivolous or vexatious, the Director of Human Resources is required to promptly notify in writing the individual who made the report and members of CAPITALCARE's Executive Management Committee.
- 17.5 The Director of Human Resources must maintain a record of all reports of alleged breaches made under this Policy that are deemed frivolous or vexatious. The record shall indicate:
 - a) The name of the individual making the report;
 - b) The names and positions of individuals who participated in the determination;
 - c) The rationale for the determination; and
 - d) A copy of the notification to the individual who made the report.

18. Alleged Breach of this Policy: Investigating a CAPITALCARE Advisory Committee Member

- 18.1 The CAPITALCARE Advisory Committee Chair has authority to investigate an alleged breach of this Policy by another CAPITALCARE Advisory Committee member and any such investigation will be consistent with the principles indicated in sections 21.3 - 21.11 of this Policy.
- 18.2 The Alberta Health Services Board Chair has authority to investigate an alleged breach of this Policy by the CAPITALCARE Advisory Committee Chair and any such investigation will be consistent with the principles indicated in sections 21.3 to 21.11 of this Policy. An exception to this is that any alleged breach by the CAPITALCARE Advisory Committee Chair of their statutory obligations outlined in Part 23 will be investigated by the Ethics Commissioner for Alberta pursuant to the *Conflicts of Interest Act (Alberta)*. Any investigation of the CAPITALCARE Advisory Committee Chair under this section shall be carried out in accordance with the rights of procedural justice described in section 21.7.

19. Alleged Breach of this Policy: Investigating the Chief Operating Officer

- 19.1 The CAPITALCARE Advisory Committee Chair has authority to investigate an alleged breach of this Policy by the Chief Operating Officer and any such investigation will be consistent with the principles indicated in sections 21.3 to 21.11 of this Policy. An exception to this is that any alleged breach by the Chief Operating Officer of their statutory obligations outlined in Part 23 shall be

investigated by the Ethics Commissioner for Alberta pursuant to the *Conflicts of Interest Act* (Alberta). Any investigation of the CAPITALCARE Chief Operating Officer under this section shall be carried out in accordance with the rights of procedural justice described in section 21.7.

20. Alleged Breach of this Policy: Investigating the Director of Human Resources

- 20.1 The CAPITALCARE Advisory Committee Chair has authority to investigate an alleged breach of this Policy by the Director of Human Resources and any such investigation will be consistent with the principles indicated in sections 21.3 to 21.11 of this Policy. Any investigation of the Director of Human Resources under this section shall be carried out in accordance with the rights of procedural justice described in section 21.7.

21. Alleged Breach of this Policy: Investigating an Employee

- 21.1 Investigations are conducted by personnel from stakeholder departments. The composition of an investigation team is dependent on the nature of the allegation.
- 21.2 Allegations that are serious, complex or high risk or could potentially have a significant impact on CAPITALCARE, are referred to the team appointed by CAPITALCARE's Executive Management Committee.
- 21.3 As part of the investigation, and in accordance with applicable laws, legislation, and CAPITALCARE policies, procedures, and directives, investigators have authority to:
- a) Access CAPITALCARE owned or operated premises and CAPITALCARE records; and/or
 - b) Examine, copy, and/or remove all or any portion of the contents of files, desks, cabinets, equipment, or other storage facilities used for CAPITALCARE related activities on CAPITALCARE owned or operated facilities. The examination, copying, and/or removal does not require the consent of the individual who might use or have custody of the items or facilities.
- 21.4 CAPITALCARE Representatives are expected to cooperate fully with Investigators.
- 21.5 Any employee who is under investigation and is a member of a collective bargaining unit shall have the right to union representation throughout the investigative process.
- 21.6 At the conclusion of an investigation the investigator will provide a written decision/recommendation with reasons describing the investigation's conclusions and of further actions to:
- a) The person against whom an allegation was made;
 - b) The person making an allegation; and

- c) The written decision/recommendation will be provided in accordance with applicable privacy legislation and privacy policies.

Further actions may include, without limitation:

- a) Forwarding an allegation, as required or permitted by applicable law or legislation, to external agencies including, but not limited to, the police, a professional body, and/or a government department.
- 21.7 All investigations under this Policy shall be carried out in a timely manner which is consistent with the principles of due diligence, procedural fairness and the requirements of this Policy. Any party investigated under this Policy shall enjoy rights to:
- a) Receive fair notice of the details of the allegations;
 - b) Respond in fully orally and/or in writing to the allegations prior to a decision being made;
 - c) Receive a decision in writing with reasons following the conclusion of an investigation; and
 - d) Appeal a decision to an appropriate party.
- 21.8 In the event of a conflict between the timelines of an investigation conducted pursuant to this Policy and the timelines of another applicable process, the shorter timeline shall be used.
- 21.9 Information collected during an investigation shall be kept confidential to the extent possible, subject to applicable legislation and CAPITALCARE policies and procedures. Unauthorized breaches of confidentiality of an investigation may result in disciplinary action up to and including termination of employment, appointment/privileges, contractual, or other relationship with CAPITALCARE.
- 21.10 Follow-up contact must be conducted in a manner which maintains the confidentiality and anonymity of the reporter, where possible.
- 21.11 Investigation or other actions related to a report of an alleged breach may not be pursued where insufficient information prevents due process, or where the identity of the individual disclosing the alleged breach cannot be confirmed and is required by law in order to proceed.
- 21.12 A decision/recommendation made by the appropriate party as a result of a review and/or investigation of an alleged breach of this Policy may be appealed to an ad hoc committee appointed by the CAPITALCARE Advisory Committee and must include members from the CAPITALCARE Advisory Committee and/or CAPITALCARE Senior Leadership. The ad hoc committee must not include the party who made the original decision

22. Finding a Breach of this Bylaw

- 22.1 CAPITALCARE Representatives found to have committed a breach of this Policy may be subject to disciplinary action up to and including termination of employment, appointment, privileges, contractual, or other relationship with CAPITALCARE.
- 23. Statutory Provisions Applicable to CAPITALCARE Advisory Committee Chair and Chief Operating Officer.**
- 23.1 Part 23 sets out provisions of the *Conflicts of Interest Act* (Alberta) that apply only to the CAPITALCARE Advisory Committee Chair or Chief Operating Officer of CAPITALCARE.
- 23.2 The *Conflicts of Interest Act* (Alberta) imposes statutory obligations on both the CAPITALCARE Advisory Committee Chair and Chief Operating Officer regarding:
- a) Taking part in, influencing, or seeking to influence a decision making process, in the course of carrying out one's duties, to further one's own private interest, the interest of an immediate family member or individual(s) with a direct association with the senior official [Section 23.925(1 & 2) of the *Conflicts of Interest Act* (Alberta)];
 - b) Communicating insider information gained through one's role to further one's private interests, the interests of immediate family members, or those individuals with a direct association with the senior official [Section 23.925(3) of the *Conflicts of Interest Act* (Alberta)]; and
 - c) Failing to disclose actual or apparent conflicts of interest on the part of a senior official [Section 23.925(4) of the *Conflicts of Interest Act* (Alberta)].
- 23.3 If there is any inconsistency between the terms of this Policy and the *Conflicts of Interest Act* (Alberta), the *Conflicts of Interest Act* (Alberta) shall prevail.
- 23.4 All section numbers and headings that follow in the remainder of Part 23 are taken directly from the *Conflicts of Interest Act* (Alberta). Any terms used in the balance of Part 23 have the meaning given to them in the *Conflicts of Interest Act* (Alberta).

Excerpts from the *Conflicts of Interest Act (Alberta)*

The entire *Conflicts of Interest Act (Alberta)* is available to the public at www.qp.alberta.ca/Laws_Online.cfm

Decisions furthering private interests

[Section 23.925 applies to both the CAPITALCARE Advisory Committee Chair and the CAPITALCARE Chief Operating Officer.]

[Section 23.925 came into effect for the incumbent CAPITALCARE Advisory Committee Chair and the incumbent CAPITALCARE Chief Operating Officer on December 15, 2017]

[Section 23.925 will come into effect for any new CAPITALCARE Advisory Committee Chair or new CAPITALCARE Chief Operating Officer immediately upon their appointment]

23.925(1) A senior official breaches this Part if he or she takes part in a decision in the course of carrying out his or her office or powers knowing that the decision might further a private interest of the senior official, a person directly associated with the senior official or the senior official's minor or adult child.

(2) A senior official breaches this Part if the senior official uses his or her office or powers to influence or to seek to influence a decision to be made by or on behalf of the Crown or a public agency to further a private interest of the senior official, a person directly associated with the senior official or the senior official's minor child or to improperly further any other person's private interest.

(3) A senior official breaches this Part if he or she uses or communicates information not available to the general public that was gained by the senior official in the course of carrying out his or her office or powers to further or seek to further a private interest of the senior official or any other person's private interest.

(4) A senior official breaches this Part if the senior official fails to appropriately or adequately disclose a real or apparent conflict of interest.

Concurrent employment

[Section 23.926 applies only to the CAPITALCARE Chief Operating Officer.]

[Section 23.926 will come into effect for the incumbent CAPITALCARE Chief Operating Officer when they are reappointed when their contract is extended or renewed, or on December 15, 2019, whichever comes first]

[Section 23.926 will come into effect for any new CAPITALCARE Chief Operating Officer immediately upon their appointment]

23.926(1) If any of the following senior officials is involved in any appointment, business, undertaking or employment, including self-employment, other than the appointment, business, undertaking or employment that is subject to this Act, that senior official breaches this Part:

- (a) A [Chief Operating Officer];**

- (b) A chair whose position has been designated for the purposes of section 24.921(4)(b);
 - (c) A person holding a position identified under section 23.921(3) (c), if that position has been designated for the purposes of section 24.921(4) (b).
- (2)** A person referred to in subsection (1) may apply to the Ethics Commissioner for approval in writing to engage in an appointment, business, undertaking or employment, including self-employment, other than the appointment or employment that is subject to this Act.
- (3)** The Ethics Commissioner may provide approval in writing on any conditions that the Ethics Commissioner considers to be appropriate if the Ethics Commissioner is satisfied that the appointment, business, undertaking or employment proposed in an application under subsection (2) will not constitute a real or apparent conflict of interest.
- (4)** Subsection (1) does not apply if the Ethics Commissioner approves the application referred to in subsection (2) in writing and the person referred to in subsection (1) complies with the conditions, if any, that the Ethics Commissioner has included in the approval.

24. Effective Date

- 24.1 The Policy replaces the CAPITALCARE Conflict of Interest Policy approved and effective December, 2013. The receipt of Gifts and Donations effective October, 2013.
- 24.2 This version of the Policy will be published on or before April 30, 2019 upon approval by the Ethics Commissioner. Publication will occur by no later than April 30, 2019.
- 24.3 This version of the Policy is effective 90 calendar days after it is published.
- 24.4 This Policy may be approved in counterpart.

Approved and adopted by CAPITALCARE this
_____ day of _____, 2019.

Isabel Henderson, Chair
CAPITALCARE Advisory Committee

Approved in accordance with the *Conflicts of Interest Act* this _____ day of _____, 2019.

The Honourable Marguerite Trussler, Q.C.
Ethics Commissioner for Alberta

*Approvals received
electronically on April 3, 2019 from
Isabel Henderson,
and by letter on April 10, 2019 from
the Honourable Marguerite Trussler.*