



College of Paramedics of Manitoba		
Policy Name: Council Conflict of Interest	Policy Number: GP-7	Total # of Pages: 4
Approval Signature: <i>Original Signed by J. Wade</i>	Section: Governance	
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1.0 PURPOSE

1. To ensure Council is able to pursue its mandate to protect the public, free from Conflict of Interest.
2. To formalize the Council’s process for completion of annual conflicts of interest statements and the process for managing actual, perceived, or structural conflicts of interest.
3. To ensure that Council members recognize, and declare conflicts of interest, whether actual, perceived, or structural when they have an interest that competes or conflicts with their role as a council member or as an Officer of Council
4. To ensure the College is aware of any conflicts and puts in place appropriate measures to manage the conflict, while allowing the Council member to serve on Council in all other respects.

2.0 DEFINITIONS

2.1 A Conflict of Interest may include, but is not limited to:

- a. A circumstance where a Council member has a private or personal interest sufficient to appear to influence the objective exercise of their official duties.
- b. Any matter in which the Council member or member of their immediate family has a direct or indirect financial interest in an Operations matter of the College.
- c. Any matter that arises for discussion affecting or of interest to another organization to which a Council member belongs and where they have significant involvement or are in a position of authority.
- d. When a Council member fails to disclose information that is relevant to a vital aspect of the affairs of the College.
- e. Where information obtained in the course of performing duties for or on behalf of the College is used for personal gain or the benefit of a Council member, some other person or entity.
- f. A structural conflict where the ability to uphold the fiduciary responsibilities as a Council member is conflicted by divided loyalties.

3.0 POLICY

3.1 The business of the College of Paramedics shall be conducted professionally, objectively and without interference or the perception of interference arising from the direct or indirect personal, professional, or financial interests of the individuals involved in making decisions for the College.



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- 3.2 A primary obligation of the College is the protection of the public interest. Council members of the College shall perform their duties in such a manner that instills public confidence in the integrity, objectivity, and impartiality of the College.
- 3.3 No council member, immediate family, or business partner of a Council member or any other organization the council member may be affiliated as a board member, or as a member of the executive shall enter into any business relationship with the College.
- 3.4 Council members will not use their employment role, or any other positions they hold with other organizations outside of Council to influence College decisions.
- 3.5 Pre-existing or work related or personal relationships amongst council members or with staff of the College must be declared.
- 3.6 To eliminate a structural conflict holding one of the following roles will exclude an individual from serving as an Officer on College Council:
 - An executive leadership role responsible for strategic delivery of ERS service/EMS service
 - An administrative or council/board position that has an advocacy role for the paramedic profession
 - An administrative or council/board position with a union whose purpose is related to managing collective agreements that involve the paramedic profession
 - A senior government position that has responsibility for EMS Service Licensing
 - An owner/director of a company that has been issued an HPC permit by the College
- 3.7 Council members must not accept tokens, gifts, or favours from a College Supplier, service vendor, contractor, or from any individual or other entity subject to decisions made by Council.

4.0 PROCEDURE

- 4.1 All Council members shall review the conflict-of-interest policy on an annual basis and affirm that they have reviewed and understand the contents of the policy.
- 4.2 All Council members will complete and sign a document outlining actual and perceived and structural conflicts on an annual basis.
- 4.3 College general legal counsel will review all declarations and determine if a conflict of interest exists. If a conflict of interest is identified the College general legal counsel may ask the Council member for additional information before reaching a decision.
- 4.4 If it is determined that an actual, perceived or structural conflict of interest exists, the Chair will meet with the Council member to develop a strategy to address the conflict.
- 4.5 Where the Chair of Council has an actual, perceived or structural conflict of interest the Chair's declaration will be reviewed by the Chair Elect, Treasurer, and the Executive Director. The Chair Elect, and Treasurer will meet with the Chair and the Executive Director to develop a strategy to manage the conflict.
- 4.6 All COI declarations will be held on a need-to-know basis at the College's office. Should a Council Member breach an agreed upon strategy for managing a COI, the



Council Chair or Chair of Committee will immediately address the issue by asking the Council member to recuse themselves and then follow up with further discussion as warranted by the facts.

- 4.7 All new Council members must review the COI policy and provide a written COI declaration as part of the on-boarding process.
- 4.8 In addition to the foregoing measures, a call for COI declarations will be part of standing agendas for all meetings, so that conflicts that may have emerged since the written declaration may be declared and addressed. An amended COI form shall be completed as soon as possible after the verbal declaration has been made.

Appendices

Appendix A – Conflict of Interest Declaration Form



APPENDIX A

COUNCIL CONFLICT OF INTEREST DECLARATION FORM

I, _____, have read and understand the College of Paramedics of Manitoba’s Council Conflict of Interest (COI) policy.

Please describe below any relationships, transactions, positions you hold, both voluntary and otherwise, or circumstances that are, or could be reasonably perceived to be a Conflict of Interest.

I have no Conflict of Interest to declare

I have the following Conflict of Interest to report:

I am proposing the following plan to address the identified conflict(s):

I certify that the information set forth is true and complete to the best of my knowledge.

Signature: _____ Date: _____



LEGAL COUNSEL REVIEW:

I have reviewed the COI declaration and find that no Conflict of Interest exists.

Signature: _____ Date: _____

COUNCIL CHAIR REVIEW:

A Conflict of Interest does exist, and I support the members plan to address the conflict.

Signature: _____ Date: _____

COUNCIL CHAIR-ELECT/TREASURER/EXECUTIVE DIRECTOR REVIEW (IF APPLICABLE):

A Conflict of Interest does exist, and I support the members plan to address the conflict.

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____