



Conflict of Interest

The public can expect licensed healthcare professionals to act at all times in the interests of their patients, free from actual, potential, or perceived conflicts of interest. Licensed healthcare professionals must avoid or, in appropriate circumstances, disclose and mitigate any personal or financial interests that could influence or otherwise compromise—or be perceived to influence or compromise—their professional judgment and delivery of health services.

This Practice Standard applies to all professional activities of licensed healthcare professionals whenever a personal, sexual, social, cultural, political, financial, or business interest may improperly influence, or be perceived to influence, professional judgment, actions, or decisions in the course of delivering health services.

A licensee must:

- 1. *Minimize the risk of actual, perceived, or potential conflicts of interest, which means to:***
 - 1.1. Identify all situations in which a personal, sexual, social, cultural, political, financial, or business interest could influence, or be perceived to influence, their professional decision making.
 - 1.2. Refrain from entering into, or continuing, a professional/patient relationship that prevents or could prevent the licensee from prioritizing the needs and interests of the patient over the licensee's own interests.

- 2. *Manage unavoidable conflicts of interest, which means to:***
 - 2.1. Disclose any real or perceived conflict of interest to all relevant parties, with sufficient information to enable the patient to understand the potential risk that the real or perceived conflict could compromise the licensee's professional judgment in providing health services.
 - 2.2. Recognize that in Indigenous, close-knit, or resource-limited communities, personal relationships may be unavoidable, making it necessary for a licensee to assess the impact of any personal relationship on their own impartiality and on patient trust, and to provide or continue care only when the benefits to the patient clearly outweigh the risks.
 - 2.3. Provide health services only if:
 - 2.3.1. The patient understands the real or perceived conflict of interest.
 - 2.3.2. The licensee and patient agree that the patient's interests are served if the licensee provides health services.
 - 2.3.3. The patient provides consent to proceed with the health services in accordance with the Ethics and Practice Standards.



- 2.4. Mitigate conflicts of interest to the fullest extent possible in the exceptional circumstances where the interests of the patient are best served by continuing to provide health services to them by:
 - 2.4.1. Removing themselves from care-planning processes if doing so will not compromise the patient's care.
 - 2.4.2. Establishing clear and documented relationship boundaries appropriate to the situation that protect the patient's interests as fully as possible.
- 3. *Document the rationale where health services must be provided to a patient in a situation where a real or perceived conflict of interest arises, which means to:***
 - 3.1. Document in the patient record the information provided to the patient regarding the real or perceived conflict of interest.
 - 3.2. Document in the patient record the patient's understanding of the real or perceived conflict of interest and their consent to proceed with the health services.
- 4. *In engagements with third-party involvement:***
 - 4.1. Specifically address with the third party any potential conflicts before proceeding and document appropriately.
 - 4.2. Explain to the affected individual(s) the purpose and scope of the health services to be provided and the nature of the relationship with the third party before proceeding.
 - 4.3. Provide impartial, evidence-informed opinions in assessments and reports.
 - 4.4. Ensure that the interests of the referring or contracting party do not compromise the integrity or objectivity of the opinions, assessments, reports, or other services provided.
- 5. *Avoid undue influence, which means to:***
 - 5.1. Decline gifts, incentives, or benefits that could influence or appear to influence the delivery of health services in the interests of the patient.
 - 5.2. Refuse to accept or offer incentives for referrals for health services or products.
- 6. *Ensure transparency in financial and commercial practices, which means to:***
 - 6.1. Clearly disclose fees, billing arrangements, and methods of payment, as well as any financial interest in products or services, in advance of the patient receiving the health services or products.



- 6.2. Recommend or provide only those health services and products that are supported by a professional rationale, aligned with the patient's identified goals and cultural values, and offered in the patient's interests.

7. *Identify conflicts of interest in research, education, and publishing activities, which means to:*

- 7.1. Disclose compensation or rewards—including funding sources, affiliations, and sponsorships—for teaching, research, publication, and speaking engagements.
- 7.2. Ensure that any teaching activities or materials they use are objective and evidence based.
- 7.3. Ensure clinical research studies being used or cited have been appropriately evaluated and approved by a recognized and reputable research ethics board.

8. *If practicing or delivering services in more than one role, whether both roles are regulated or not, recognize and manage conflicts of interest inherent in multiple or dual roles¹, which means to:*

- 8.1. Perform the functions of each role as a separate and distinct practice.
- 8.2. Refrain from representing non-regulated services as an aspect of a professional regulated role.
- 8.3. Clearly explain to patients which role is being exercised at any given time and the implications, including any implications for professional responsibility, funding, or insurance coverage.
- 8.4. Maintain separate billing and financial records for each role.
- 8.5. Where both roles are regulated, adhere to all relevant Standards and obligations in both roles.
- 8.6. Refrain from using or advertising their reserved title in relation to the delivery of non-regulated services.
- 8.7. Ensure the patient fully understands which services are regulated and which are not.

9. *Manage conflicts of interest with former patients, which means to:*

- 9.1. Recognize that a personal, sexual, social, cultural, political, financial, and/or business relationship formed after a therapeutic relationship ends may give rise to an actual or perceived conflict of interest or perceptions of impropriety, and mitigate the risk by refraining from entering into such a relationship with a former patient until sufficient time has passed and the licensee can demonstrate that:

¹ Dual roles arise where a licensee holds more than one professional, commercial, supervisory, or personal role in relation to the same individual or service.



- 9.1.1. The professional relationship has formally and fully ended.
- 9.1.2. The patient is no longer dependent on the licensee or in a vulnerable position in relation to the licensee.
- 9.1.3. The new relationship will not compromise public trust or the integrity or reputation of the profession.

10. *Never enter into a sexual relationship with a patient to whom they have provided psychotherapy.*

Related Standards and Legislation

Communications

Discontinuing Health Services and Ensuring Continuity of Care

Marketing, Advertising, and Promotion

Professional Boundaries and Prevention of Sexual Misconduct and Abuse