



Policy	Conflict of Interest
Date Approved	November 4 th , 2025
Approved By PGMEC	October 23 rd , 2025
Effective Date	November 4 th , 2025
Approved by SOMAC	November 4 th , 2025
Approved by Faculty Board	TBD
Review to Commence	September 2028
Responsible Portfolio/Unit/Committee	Postgraduate Medical Education
Responsible Officer(s)	Associate Dean, Postgraduate Medical Education
Relevant Policies	Faculty of Health Sciences Policy on Conflict of Interest in Interactions with Industry. Queen's University Conflict of Interest and Conflict of Commitment (faculty). Guidance from the College of Family Physicians of Canada and the Royal College of Physicians and Surgeons of Canada. Trainee Selection Policy

1. Purpose

The purpose of this policy is to define Postgraduate Medical Education's (PGME) position on actual, perceived, or potential conflicts of interest for faculty who participate on committees in support of postgraduate medical education. The policy outlines the requirements to mitigate risks associated with conflicts of interest within the functions of the committee. Further, this document is a guide for programs to use when implementing a program-specific conflict of interest (COI) policy for their own respective committees as needed.

2. Scope

This policy applies to the Postgraduate Medical Education Committee (PGMEC) and all its subcommittees. Program-level committees that adopt this policy template, for example, Residency Program Committee, Competence Committees, Postgraduate Education Committee are also in scope. Interactions within industry are governed by the Faculty of Health Sciences (FHS) Policy on Conflict of Interest with Interactions with Industry. This PGME policy complements relevant university and FHS policies.

3. Definitions

3.1 Conflict of interest (COI): A situation where private, financial or personal interests could improperly influence, or be seen to influence, a member's duties. COI may be actual, potential or perceived.

3.2 Actual COI: A real conflict between a member's committee role and private interests.



3.1.1 Actual COI: A situation where there is real conflict between an individual committee member and their duties and private interests.

3.1.2 Potential COI: Circumstances where a conflict could reasonably arise in future, and preventative steps must be taken to mitigate this risk.

3.1.3 Perceived COI: When a reasonable third party would conclude that an individual faculty or committee member's private interests could improperly influence the member's decisions or actions now, or in the future.

3.2 Bias: Unconscious or implicit attitudes that occur beyond our control and awareness, that can influence judgment or behaviour.

3.3 Close personal relationship: Family or non-work relationships likely to impair impartiality. For example, spouse or partner (current or former), immediate or extended family, close friends, club or team affiliations, neighbours, professional-society ties, etc.

3.4 Recusal: The member does not receive materials for, attend or participate in discussion or decision on the item.

3.5 Routine interaction: Normal, expected contact arising from a person's role (for example, teaching on a service, ordinary supervisory check-ins, or collegial participation in a professional society).

4. Principles

4.1 Integrity and fairness: Decisions must be impartial and defensible.

4.2 Transparency: COIs are declared and recorded; management steps are documented.

4.3 Reasonableness: Manage conflicts of interest in the simplest way while still protecting integrity.

4.4 Confidentiality: Share only what is necessary to manage the COI.

4.5 Equity and bias mitigation: Members actively reflect on and limit the influence of bias.

5. Policy

5.1 Duty to disclose

5.1.1 Members must understand the parameters under which their personal interest may conflict with their responsibilities to the university and their obligation to disclose, including, but not limited to:

5.1.1.1 Existing in a committee role that assesses or evaluates the academic and/or clinical performance of a trainee, or policies related to residents in general, wherein an established personal relationship exists, has recently existed or has the perception or potential to exist. Routine interactions do not constitute a conflict of interest.

5.1.1.2 Existing in an advisory capacity as a committee member wherein there is a potential or perception that a financial, industry or personal conflict of interest may arise or exist (See FHS Policy on COI, pg. 5).

5.1.1.3 Any other relationship, membership or financial or industry affiliations that could be seen by a reasonable, well-informed participant as to having the potential to influence the matters of the committee or educational activity.

5.1.2 Members must disclose actual, potential or perceived COIs as soon as they become aware of them and at the start of any meeting where the COI may be relevant.

5.1.3 Committees must use both per-meeting declarations (standing agenda item) and an annual COI declaration for all standing members.

5.2 Chair's judgement

5.2.1 The determination of a conflict of interest is made using a reasonable person standard (what a fair-minded, informed observer would conclude) and applies proportionate management.

5.2.2 The chair ensures determination and any management of action are recorded in the minutes.

5.2 Personal relationships and supervisory roles

5.2.1 Recusal is mandatory when a close personal relationship exists with the trainee, person or

program under discussion.

5.2.2 Recusal is strongly recommended if the member is directly supervising the trainee under discussion. In the least, the supervisory nature of the committee member should be put before the committee for a decision about the need for recusal.

5.3 Financial and industry COI

5.3.1 Financial or industry relationships are governed by the FHS industry COI policy.

5.3.2 Committee chairs are to ensure appropriate implementation of the FHS industry COI policy and ensure management of the declared COI.

5.4 Management options

Management of a disclosed COIs can include the following, but are not limited to:

5.4.1 Disclosure on the record.

5.4.2 Restricted access to materials.

5.4.3 Reassign the reviewer.

5.4.4 Invite an external reviewer.

5.4.5 Recuse the member from discussion or vote (or both).

5.4.6 Appoint a different chair for the item.

5.5 Documentation and record-keeping

5.5.1 Minutes must note either “No COI declarations” or summarize each declaration and the management action(s) taken.

5.5.2 COI declarations (annual and per-meeting) are retained by the committee secretary for seven years, or as required by the university’s retention schedule.

5.6 Non-compliance

5.6.1 Failure to disclose or to comply with management may result in removal of the member from specific agenda item, from the meeting or from the committee.

5.6.2 Matters may be escalated to the program director, department head or associate dean, PGME.

6. Procedures

6.1 Before the meeting

6.1.1 The program administrator (or delegate) circulates the agenda, materials, policy and the COI form; COI appears as a standing item before approval of the agenda and minutes.

6.1.2 Committee administrators pre-flag supervisory or personal-relationship conflicts against the resident list and/or items under discussion.

6.2 During the meeting

6.2.1 The chair calls the COI item.

6.2.2 Members declare COIs as needed (personal, financial, industry or other).

6.2.3 If none are declared, the secretary records “No COI declarations.”

6.2.4 If a COI is declared, the chair proposes a management plan, and the committee votes on plan (simple majority).

6.2.5 The decision and rationale are recorded in the committee minutes, and the chair verifies quorum after any recusals.

6.3 Post-meeting

6.3.1 The program administrator (or delegate) files the signed declarations and minutes and updates the internal COI log; if no log, minutes that explicitly record “No COI declarations” or summarize each declaration must be completed suffice

6.3.2 Where patterns occur, if necessary, the chair consults the appropriate delegate (e.g. program director, department head or associate dean, PGME), for standing management.

6.4 Annual cycle

6.4.1 The program administrator (or delegate) collects an annual declaration or attestation from all standing members.

7. Responsibilities

7.1 Members

- 7.1.1** Disclose COIs promptly.
- 7.1.2** Complete annual and per-meeting declarations.
- 7.1.3** Comply with management plans.
- 7.1.4** Reflect on bias and mitigate its impact.

7.2 Chairs and acting chairs

- 7.2.1** Call the COI item and facilitate determinations.
- 7.2.2** Ensure recusals and material-access controls.
- 7.2.3** Confirm quorum after recusals.
- 7.2.4** Ensure minutes capture decisions and rationales.

7.3 Program administration

- 7.3.1** Distribute the policy and forms.
- 7.3.2** Collect and retain declarations.
- 7.3.3** Minute declarations and management actions.
- 7.3.4** Maintain the COI log and coordinate annual attestations.

7.4 Associate Dean, PGME

- 7.4.1** Provide oversight and address non-compliance if requested.
- 7.4.2** Consult on standing recurrent management arrangements.
- 7.4.3** Ensure oversight is aligned with FHS and university policy.

Approval History:

PGMEC	Oct 23 rd , 2025	SOMAC	Nov 4 th , 2025	Faculty Board	TBD
-------	--------------------------------	-------	-------------------------------	---------------	-----

Appendix: Template: Program-specific COI Policy.

Instructions: Replace bracketed fields, delete/adjust any sections that do not apply.

Note, that this is a procedural adjustment for program's use to assist with decisions and procedures that may require amendment due to program size. Ensure on program template there is reference to the PGME policy for over-arching policy statements. It is important to note in the program-specific template that when not addressed specifically, it is assumed that the PGME policy applies (see 1.2). This includes definitions.

Example header to program procedures: This document is a procedural sub-policy under the PGME COI Policy wherein the operationalization of the policy may require flexibility. It does not replace the PGME policy, it provides program-specific procedures. Where a conflict exists, the PGME policy governs.

1. Adoption

1.1 The [Program Name] adopts and follows the PGME Conflict of Interest (COI) Policy, as amended from time to time.

1.2 Where this document is silent, the PGME policy prevails. (e.g., the program institutes the PGME policy, but uses this template for adjustments to procedures and process)

1.3 Reference to current PGME policy: [Insert URL or shared drive location].

2. Program-specific adjustments (if required)

Insert adjustments to section Procedures, Section 6 of PGME Policy here. Examples of adjustments may be:

2.1 **Committee name:** [Residency Program Committee / Competence Committee / Other].

2.2 **Small-program management options:** The program may use discuss-but-abstain, a substitute chair, or an ad hoc external reviewer to maintain quorum.

2.3 **Chair's discretion:** The chair uses a reasonable-person standard and proportionate management.

2.4 **Small-program decision hierarchy** (options for consideration listed):

2.4.1 Restrict materials (if sufficient).

2.4.2 Discuss-but-abstain (member provides background but abstains from decision).

2.4.3 Substitute chair for the item

2.4.4 External/adjacent reviewer.

2.5 **Quorum check:** The chair confirms quorum after any recusals/abstentions.

2.6 **Minutes:** Record the determination and management, or "No COI declarations"

3. Responsibilities (adjust PGME Section 7 here, as per program requirements/chair's direction):

3.1 **Chair:** Applies the PGME policy; documents determinations; confirms quorum; seeks an external reviewer when needed.

3.2 **Program administration:** Distributes forms; collects/retains declarations; minutes declarations and management; coordinates external reviewers/adjacent members.

3.3 **Members:** Disclose COIs; follow COI management directions.

4. Committee Approval

4.1 **Reference:** PGME COI Policy and program-specific adjustments: [Insert link or document location].

4.2 **Program procedural adjustments approval:** (Insert committee approval date here, review date)