



**College of  
Occupational Therapists  
of British Columbia**

## **COTBC Practice Standards for Conflict of Interest**

# **Overview**

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# Practice Standards for Conflict of Interest

## Note to Readers



Throughout these practice standards, reference is made to the following support documents. Please check that you have the most recent version by referring to the College website or contacting the College for assistance.

ACOTRO, ACOTUP & CAOT. (2021). *Competencies for occupational therapists in Canada*. Retrieved from <https://acotro-acore.org/wp-content/uploads/2021/11/OT-Competency-Document-EN-HiRes.pdf>

College of Occupational Therapists of British Columbia. (2006). *Code of ethics*. Retrieved from [https://cotbc.org/wp-content/uploads/Code\\_of\\_Ethics.pdf](https://cotbc.org/wp-content/uploads/Code_of_Ethics.pdf)

To ensure timeliness and accuracy, updates to practice standards will be made when necessary. Suggestions and questions regarding the content or application to practice should be forwarded to

[practice@cotbc.org](mailto:practice@cotbc.org)

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The College of Occupational Therapists of British Columbia (COTBC) thanks the College of Occupational Therapists of Ontario for permission to adapt content from their *Standards for Prevention and Management of Conflict of Interest* (2012).

# Practice Standards for Conflict of Interest



## **Practice standards in this series:**

1. Recognizing Conflict of Interest, p. 12
2. Preventing Conflict of Interest, p. 15
3. Managing Conflict of Interest, p. 18

# Practice Standards for Conflict of Interest

## Preamble



The *Occupational Therapists Regulation* under the *Health Professions Act* (RSBC 1996, c. 183) acknowledges occupational therapy as a regulated health profession. COTBC regulates the practice of British Columbia occupational therapists in the public interest.

COTBC practice standards are published by the College to assist the occupational therapist in meeting the *Competencies for Occupational Therapists in Canada* by

- defining registrant responsibilities;
- describing minimal expectations for occupational therapy practice; and
- defining safe, ethical, and competent occupational therapy practice.

The *COTBC Practice Standards for Conflict of Interest* were developed by occupational therapists in British Columbia who work in a variety of practice settings and serve on the COTBC Standards Committee. The Standards Committee reviewed comparable standards and policies from Canadian and international occupational therapy and health regulatory organizations, and considered practice questions, issues, and concerns presented by registrants and others.

# Practice Standards for Conflict of Interest

## Statement of Purpose



The *COTBC Code of Ethics* outlines the obligations and responsibilities that occupational therapists have to their clients, the profession, and the general public. Occupational therapists are committed to providing safe, competent, and ethical care. A conflict of interest, whether perceived, potential, or actual, can jeopardize the occupational therapist's ability to provide care, and the perception of the occupational therapist's ability to provide care, in the client's best interest. As such, the *Code of Ethics* addresses conflicts of interest in three of its occupational therapy values: Dignity and Worth, Accountability, and Honesty and Transparency.

A conflict of interest is a professional boundary issue, and occurs when the occupational therapist's interests interfere or are perceived to interfere with the client's best interests. A conflict of interest is deemed to arise where an occupational therapist has a personal interest in a matter that may be reasonably seen to influence his or her professional conduct in relation to a client. A conflict of interest can be perceived, potential, or actual, and can arise within personal, professional, or business relationships. A conflict of interest can exist even if the occupational therapist does not benefit directly (e.g., a conflict of interest will still arise if the benefit accrues to a family member or the occupational therapist's business). A personal interest can include but is not limited to personal, professional, family, political, academic, financial, or other material gain.

# Practice Standards for Conflict of Interest

## Statement of Purpose, continued



Conflicts of interest can compromise the profession's values. Occupational therapists are in a fiduciary relationship with their clients and, as such, have an ethical and legal responsibility to act solely in their clients' best interests. Client trust is delicate, and can be irrevocably compromised due to conflict of interest concerns. Confidence and respect for the occupational therapist's organization can also be damaged, along with the public's perception of the profession overall.

Given the varied risks that conflicts of interest pose, the College developed practice standards to assist occupational therapists in recognizing, preventing, and managing conflicts of interest. Used in conjunction with COTBC's *Code of Ethics* and related practice standards, these standards clarify occupational therapists' accountabilities and the College's expectations.

# Practice Standards for Conflict of Interest

## Definitions



**Benefit** means a financial or non-financial consideration that might directly or indirectly influence, or appear to influence, an [occupational therapist's] professional judgment and/or objectivity. (College of Respiratory Therapists of Ontario, 2014, p. 5)

**Client** means an individual, family, group, community, organization, or population who participates in occupational therapy services by direct referral or contract, or by other service and funding arrangements with a team, group, or agency whose work includes occupational therapy. Client is synonymous with patient or consumer and means a recipient of occupational therapy services. (Townsend & Polatajko, 2007)

# Practice Standards for Conflict of Interest

## Definitions, continued



**Conflict of interest** is the interference of an occupational therapist's interests with a **client's** best interests or the occupational therapist's own responsibilities. Conflict of interest can be **perceived, potential, or actual**.

**Perceived conflict of interest** arises when a **reasonable person** determines that an occupational therapist's ability to act in the best interest of a client might be affected due to competing interests even if this is not the case.

**Potential conflict of interest** occurs when an occupational therapist foresees that his or her **personal interests** might be sufficient to influence his or her duty to serve a client's best interest should he or she become involved.

**Actual conflict of interest** occurs when an occupational therapist carries out duties knowing that he or she has the opportunity to advance his or her private interests.



# Practice Standards for Conflict of Interest

## Definitions, continued



**Fiduciary duty** means the legal duty to act solely in the client’s best interest.

**Gift** means something voluntarily given to another individual without expectation of compensation. Gifts can have varying monetary value and be of varying cultural significance to the giver.

**Personal interest** refers to gains of a personal, professional, political, academic, financial, or material nature. They include the interests of a registrant, a registrant’s friend, family, or colleagues, or those organizations with whom the registrant owes an obligation or debt.

**Professional boundary** is the “implicit or explicit demarcation separating the professional relationship with a client from one that is personal” (College of Occupational Therapists of Ontario, n.d., p. 11). Boundaries make relationships professional and safe for clients (*COTBC Code of Ethics*).

**Reasonable person** refers to the standard of an ordinary, informed, and prudent person who exercises due care.

# Practice Standards for Conflict of Interest

## References & Resources Used in These Practice Standards



ACOTRO, ACOTUP & CAOT. (2021). *Competencies for occupational therapists in Canada*. Retrieved from <https://acotro-acore.org/wp-content/uploads/2021/11/OT-Competency-Documents-EN-HiRes.pdf>

College of Occupational Therapists of British Columbia. (2006). *Code of ethics*. Retrieved from [http://www.cotbc.org/PDFs/Code\\_of\\_Ethics.aspx](http://www.cotbc.org/PDFs/Code_of_Ethics.aspx)

College of Occupational Therapists of British Columbia. (2017, October 2). *College of Occupational Therapists of British Columbia Bylaws*. Retrieved from <https://cotbc.org/wp-content/uploads/JustBylaws-NoFormsQuickPosting-10.20.2017.pdf>

College of Occupational Therapists of Ontario. (n.d.). *Professional boundaries: Defining the lines, a quality assurance program workbook*. Toronto, ON: Author.

College of Occupational Therapists of Ontario. (2012). *Standards for prevention and management of conflict of interest*. Retrieved from <http://www.coto.org/pdf/standardsforconflictinterest2012.pdf>

## Practice Standards for Conflict of Interest



## References & Resources Used in These Practice Standards, continued

College of Pharmacists of British Columbia. (2011, July). Conflict of interest standards: College of Pharmacists of British Columbia. Retrieved from [http://library.bcpharmacists.org/D-Legislation\\_Standards/D-2\\_Provincial\\_Legislation/5111-Code\\_of\\_Ethics\\_Conflict\\_of\\_Interest\\_Standards.pdf](http://library.bcpharmacists.org/D-Legislation_Standards/D-2_Provincial_Legislation/5111-Code_of_Ethics_Conflict_of_Interest_Standards.pdf)

College of Physicians and Surgeons of British Columbia. (2010, September). *Professional standards and guidelines: Conflict of interest*. Retrieved from <https://www.cpsbc.ca/files/pdf/PSG-Conflict-of-Interest.pdf>

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Health and Safety Executive. (1999). *Five steps to risk assessment*. Caerphilly, UK: Author.

Townsend, E., & Polatajko, H. (2007). *Enabling occupation II: Advancing an occupational therapy vision for health, well-being & justice through occupation*. Ottawa, ON: CAOT Publications ACE.



**College of  
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**COTBC Practice Standards for  
Conflict of Interest, 2016**

# **Practice Standard #1: Recognizing Conflict of Interest**

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# Practice Standards for Conflict of Interest



## Practice Standard #1: Recognizing Conflict of Interest

### Principle Statement:

The occupational therapist will recognize proactively any perceived, potential, or actual conflict of interest.

### Practice Expectations

The occupational therapist will do the following:

1. Identify types of conflict of interest.
2. Identify situations that may lead to conflicts of interest.
3. Consider the implications that conflicts of interest have for clients and the public's perception of the profession.
4. Identify activities that may influence the occupational therapist's ability to be impartial in a client–therapist relationship.
5. Recognize if a situation involves any direct or indirect benefit (i.e., personal, professional, political, academic, financial, or material) to the occupational therapist that could affect his or her professional judgment.

## Practice Standards for Conflict of Interest



### Practice Standard #1: Recognizing Conflict of Interest, continued

#### Principle Statement:

The occupational therapist will recognize proactively any perceived, potential, or actual conflict of interest.

#### Practice Expectations, continued

6. Recognize any personal beliefs or opinions which affect the occupational therapist's ability to meet the client's needs (e.g., beliefs about race, sexual orientation, or nationality).
7. Consider whether others could potentially perceive a conflict of interest which could compromise the occupational therapist's credibility and quality of client care.
8. Seek proper advice when uncertain if a perceived, potential, or actual conflict of interest exists.
9. Identify any conflict of interest–related policies and procedures of the occupational therapist's organization.
10. Consider feedback from others who may perceive a conflict of interest.



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# **Practice Standard #2: Preventing Conflict of Interest**

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# Practice Standards for Conflict of Interest

## Practice Standard #2: Preventing Conflict of Interest



### Principle Statement:

The occupational therapist will prevent or avoid any perceived, potential, or actual conflict of interest from occurring.

### Practice Expectations

The occupational therapist will do the following:

1. Avoid participating in activities or arrangements which may potentially compromise professional judgment.
2. Manage professional boundaries.
3. Avoid using status as an occupational therapist to receive benefits other than proper payment for professional services.
4. Avoid preferential or discriminatory treatment towards particular clients or organizations.



## Practice Standards for Conflict of Interest



### Practice Standard #2: Preventing Conflict of Interest, continued

#### Principle Statement:

The occupational therapist will prevent or avoid any perceived, potential, or actual conflict of interest from occurring.

#### Practice Expectations, continued

5. Apply any conflict of interest–related policies and procedures of the occupational therapist’s employer or organization.
6. Maintain a relationship of trust and confidence by not taking advantage of his or her position, including access to privileged information or knowledge received in dealings with clients or organizations.
7. Provide clients with alternative options for receiving occupational therapy services in circumstances where a perceived or actual conflict of interest exists or a potential conflict of interest may arise.



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# **Practice Standard #3: Managing Conflict of Interest**

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# Practice Standards for Conflict of Interest

## Practice Standard #3: Managing Conflict of Interest



### Principle Statement:

The occupational therapist will manage and mitigate an unavoidable conflict of interest.

### Practice Expectations

The occupational therapist will do the following:

1. Seek appropriate assistance as required.
2. Attempt to resolve a situation involving an actual or perceived conflict of interest or remove him or herself from that situation.
3. Take action when a conflict of interest cannot be resolved. In these situations, the occupational therapist will do the following:
  - a. Disclose to the client and/or stakeholders the perceived, potential, or actual conflict of interest.
  - b. Provide the client with information about options available and allow the client to make an informed choice.
  - c. Inform the client that he or she has the right to decline service at any time.
  - d. Document the steps taken to address the conflict.



**College of  
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**COTBC Practice Standards for  
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# **Risk Assessment and Management**

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# Practice Standards for Conflict of Interest

## Risk Assessment and Management



### Step One: Identify Potential Risk Factors

Risk management is “nothing more than a careful examination of what, in your work, could cause harm to people, so that you can weigh up whether you have taken enough precautions or should do more to prevent harm” (Health and Safety Executive, 1999, p. 1).

Occupational therapists can benefit from using a risk management approach to assist them in recognizing, preventing, and managing actual, potential, and perceived conflicts of interest.

Conflicts of interest are not always easy to identify. Reflecting on risk factors can be helpful. Risk factors are circumstances or facts that influence the probability of the risk occurring and the impact.

# Practice Standards for Conflict of Interest

## Risk Assessment and Management, continued



### Step One: Identify Potential Risk Factors, continued

#### Complexity of Client's Presentation

- Client's cultural beliefs and values related to gift giving and compliance with authority.
- Vulnerability of client given any physical, mental, or social issues.
- Client's ability to direct care and give informed consent.

#### Therapeutic Relationship

- Power imbalance and occupational therapist's ability to influence the course of treatment.
- Client-centred approach and trusting relationship.

#### Occupational Therapist's Skills and Knowledge

- Knowledge of employer's policies and procedures.
- Knowledge of various cultural and social norms related to giving and receiving benefits and gifts.
- Ability to identify client's possible impaired capability.
- Ability to establish and maintain professional boundaries.
- Ability to communicate information to client, client representative, and other stakeholders.



## Practice Standards for Conflict of Interest

### Risk Assessment and Management, continued

#### Step One: Identify Potential Risk Factors, continued

##### Practice Setting and Environmental Conditions

- Accessibility of other occupational therapists to provide care (e.g., rural vs. urban practice environments).
- Existing social norms (e.g., a history of participating in vendor incentive programs).
- Availability of employer policies and procedures.
- Pressure from others for occupational therapist to engage in an activity that might be a potential or perceived conflict of interest.
- Power of referral source to influence funding or continuation of services.
- Accessibility of other professional staff to discuss conflict of interest concerns, options, and alternatives.

# Practice Standards for Conflict of Interest

## Risk Assessment and Management, continued

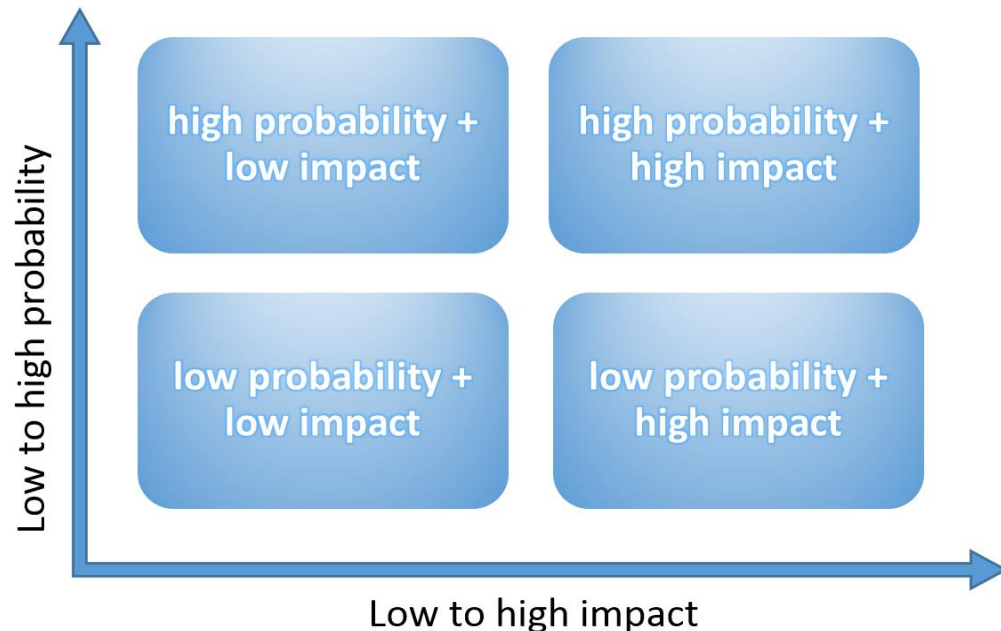


### Step Two: Consider the Probability and Severity of Impact

Once the factors are identified, the occupational therapist assesses

1. the probability of each risk (i.e., how likely is it); and
2. the negative impact (i.e., what degree of harm could the risk cause the client).

The risks can be classified from low probability and low impact to high probability and high impact.





# Practice Standards for Conflict of Interest

## Risk Assessment and Management, continued



### Step Three: Take Action

Conflicts of interest can be challenging to prevent and manage. Sometimes, they cannot be avoided.

The goal is to choose actions or precautions that help minimize the risks as much as possible.

**In the case of recognizing, preventing, and responding to conflicts of interest, these actions could include but are not limited to the following:**

- Reviewing any existing policies and procedures to mitigate risks.
- Collaborating with colleagues and leadership to develop employer policies where absent.
- Discussing with the client or stakeholder any employer conflict of interest policies.
- Increasing understanding of the significance of gifts in various cultures.
- Strategizing various culturally and socially acceptable alternatives to gift giving and receiving.
- Discussing with trusted colleagues and supervisors any concerns regarding potential conflicts of interest.
- Disclosing any actual conflicts of interest in accordance with Standard #3.
- Informing the client of all available options and obtaining informed consent. Note: The client's providing consent in a conflict of interest situation does not negate the occupational therapist's responsibility to mitigate any risks.

## Practice Standards for Conflict of Interest

### Risk Assessment and Management, continued



#### Step Four: Record Your Actions

This risk management process is dynamic and ongoing throughout the care continuum and even after the file is closed.

It is important to record the risk management actions taken, to demonstrate that precautions were taken to protect the client from harm and to minimize risk.

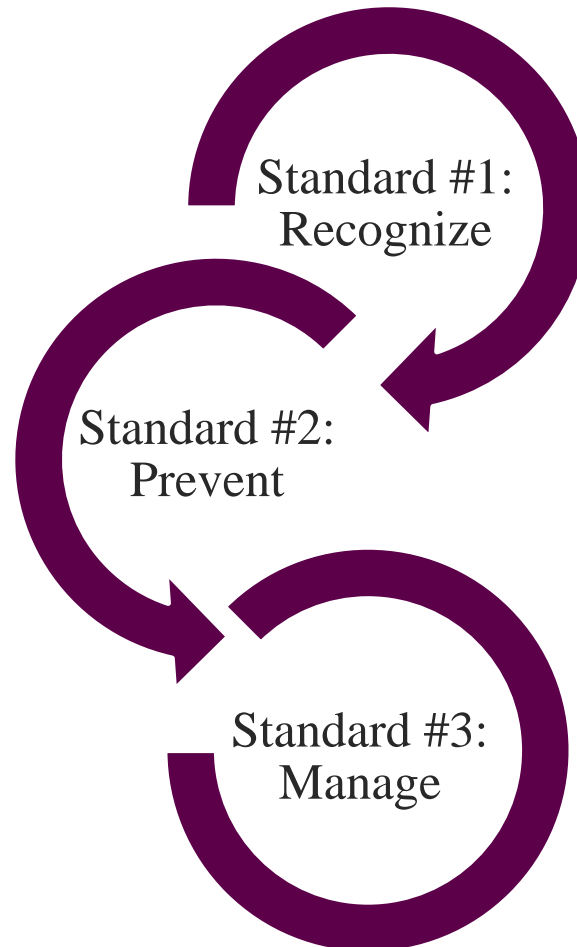
# Practice Standards for Conflict of Interest



## Expectations in Action

Below are examples of how an occupational therapist may recognize, prevent, or manage a perceived, potential, or actual conflict of interest. Please note that this list is not exhaustive, and an occupational therapist's specific actions will vary depending on situational factors.

- Do not sign contracts that result in a conflict of interest.
- When working in two environments, avoid soliciting clients from one practice context to another unless no personal, professional, or business gain can be demonstrated, and the referral is in the client's best interest.
- Do not recommend products or services that offer a potential for self-gain.
- Decline participation in incentive programs that give awards or prizes for referrals obtained.



- Identify that treating relatives or friends creates a conflict of interest.
- Chat with colleagues regarding identified conflicts of interest.
- Refer to COTBC standards and employer conflict of interest policies.

- Develop a list of alternative treatment options in case a conflict of interest is identified.
- Remove oneself from a decision-making body when a conflict of interest arises.
- Avoid exchanging gifts with clients.



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**Practice standards in this series: *Conflict of Interest*  
(Revised May 2023, Originally Issued 2016)**

- 1. Recognizing Conflict of Interest**
- 2. Preventing Conflict of Interest**
- 3. Managing Conflict of Interest**

For more information regarding this series of practice standards, or other practice supports, please contact the College at [practice@cotbc.org](mailto:practice@cotbc.org) or  
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