K	MUSKOKA ALGONQUIN	Policy/Procedure Name:	Supply Chain Code of Ethics
Manual:	Administration	Number:	
Section:	Materials Management	Effective Date:	1 JAN 2018
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# <u>Purpose</u>

To ensure an ethical, professional and accountable supply chain process is followed at all times.

# <u>Scope</u>

The policy pertains to all staff members and credentialed staff at Muskoka Algonquin Healthcare (MAHC).

# **Policy Statement**

All members of the supply chain process will conduct themselves in a manner that any reasonable and informed third party would conclude as being appropriate to a professional in supply chain management. All individuals involved with purchasing or other supply chain related activities must act, and be seen to act, with integrity and professionalism. Honesty, care and due diligence must be integral to all supply chain activities within and between the hospital, suppliers and other stakeholders.

# **Definitions**

# **Procedure**

# **STANDARDS OF CONDUCT:**

**Environmental and Social Responsibilities:** Respect must be demonstrated for each other and the environment. Staff shall exercise their responsibilities in a manner that promotes and provides opportunities for the protection and preservation of the natural environment. Staff shall favour the use and distribution of resources in an efficient, effective, and ethical manner. Staff will be cognizant of the social rights extended to all people, including the conventions of the International Labour Organization with respect to labour standards, and will encourage and support supplier diversity. Staff will make every attempt to ensure that the goods and services that a supplier is proposing to provide to the hospital are not the result of, and in no way involve, forced labour or child labour (as such terms are defined in Canada's Fighting Against Forced Labour and Child Labour in Supply Chains Act).

**Protection of Confidential or Sensitive Information:** Confidential information must be safeguarded at all times. Where staff have been privy to confidential or sensitive information, it is their responsibility to ensure that it remains so. Such information must not be used for any personal gain or advantage. Information given in the course of a professional activity should be forthright and not intended to mislead or deceive others.

Avoidance of Conflicts of Interest: Staff must not engage in any activity that may create, or appear to create, a conflict of interest. All staff should exercise professional judgment and discretion in order to avoid any

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apparent or actual conflict of interest when performing their duties. Should a conflict of interest arise, the staff member is required to disclose their interests to the Purchasing Department and/or other impacted parties as soon as possible. Staff should consider removing themselves from any decisions in which they have a conflict of interest, declared or undeclared, until express direction from the hospital is obtained.

**Business Relationships; Gifts, Gratuities and Hospitality Inducements:** Staff should maintain relationships with suppliers and third parties in a manner that contributes to and promotes fair competition in the market and protects the interests and reputation of the hospital. Staff should not use their position to garner personal favours or advantages. Staff must ensure that the objectivity of their decisions is not compromised or unduly influenced by the acceptance of gifts, gratuities, or hospitalities of any kind.

**Transparency:** Supply chain activities must be open and accountable. In particular, contracting and purchasing activities must be fair, transparent and conducted with a view to obtaining the best value for public money. All participants must ensure that public sector resources are used in a responsible, efficient and effective manner.

# **PROFESSIONAL PRINCIPLES:**

**Professional Competency:** Staff will maintain their professional competency by staying informed of, and complying with, the best supply chain management practices. They will continuously work to improve supply chain policies and procedures; to improve their supply chain knowledge and skill levels; and to share best practices.

**Professionalism:** Staff will provide professional advice on the procurement of goods and services to the best of their knowledge, recognizing that any final decision is the prerogative of the senior authority within the requesting department; they will act with courtesy and due consideration in dealings with other professional members and in all business relationships.

**Honesty and Integrity:** Staff will maintain an unimpeachable standard of integrity and honesty in all their business relationships both inside and outside the organization.

**Responsible Management:** Staff will optimize, without prejudice, the use of resources for which they are responsible so as to provide the maximum value as defined by the organization. They will denounce all forms of business practice which may compromise value or bring discredit to the organization.

**Compliance with Legal Obligations:** Staff will be aware of and comply with (a) all laws, regulations, bylaws and standards that are relevant to supply chain management practices. All individuals involved in purchasing or other supply chain related activities must comply with this Code of Ethics and the laws of Canada and Ontario.

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# **Cross Reference**

# <u>Notes</u>

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#### **References / Relevant Legislation**

Supply Chain Management Association of Canada - Code of Ethics; Ontario Public Buyers Association; Broader Public Sector - Supply Chain Directive Canada's Fighting Against Forced Labour and Child Labour in Supply Chains Act

#### **Appendices**

Appendix 1 – Document Consultation & Approval Tracking Record

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# Appendix 1 – Document Consultation & Approval Tracking Record



**Document Consultation & Approval Tracking Record** 

# Document Title: Conflicts of Interest & Purchasing Gifts

Document Status:	Document Type:	
New	Policy/Procedure	Clinical Pathway
🔀 Revision of Existing	Protocol/Guideline	🗌 Order Set
Reviewed, no edits required	Standard Operating Procedure	Standard of Care
	Medical Directive	Rules & Regulations
	🗌 Order Set	🗌 Form
	Other:	

**Development Team** (list the names and designations of those involved in the development/review of the document):

Name	Designation
Jo-Anne Chandler	Director Materials Management
Broader Public Sector Directive Requirement	

Scope of Document: Department specific	Two or more depar	tments/services	Corporate/Hospital-wide
Groups Impacted by Document: Nursing Credentialed Staff Clerical/Support Staff	Administration All Staff/Credentialed Staff	Allied Health (spe Support Staff (spe Other (specify): A Procurement Project	ecify): nyone Participating in a

**Consultation Phase** (list below the stakeholders/committees that will provide feedback and input into the document prior to submission to the Signing Authority for final approval):

Stakeholder/Committee	Date Consulted	Feedback/Comments	Development Team
			Response

#### Education & Communication Plan: (select all that apply)

Tool(s) / Method(s)	Timeline for Completion	Lead Responsible
Huddles/Staff meetings	Ongoing As Required	Director Materials
		Management
Education Blitzes		
Learning Management System (LMS)		
Module		
Posters		
Electronic Mail	Ongoing As Required	Director Materials

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		Management
Communication Binder		
Department Meetings		
Frequently Asked Questions (FAQ)		
Memo		
MAHC Matters		
Other: RFP Project Meetings	Ongoing As Required	Director Materials
		Management or Shared
		Services Representative

Approval Phase (for list of Signing Authorities, view the "Policy, Procedure and Guideline Development" policy):Signing Authority:Date Review:

Senior Leadership	Dec 10 2024	_ Approved

Comments:

# DOCUMENT MANAGEMENT SYSTEM INFORMATION

Not Approved

(complete for the purpose of uploading to the DMS via executive assistant/document support person assigned to portfolio)

# 1. Category(manual/section):

# Administration / Materials Management

 Key Words: (Indicate if there are any additional key words or common words used by staff to reference the document that should be added beyond what is currently in the purpose or policy statements.)
 Procurement / Materials Management / Ethics / Code of Conduct

3. Is this document an ROP (Required Organizational Practice):

Yes

4. Is there a preferred URL or external link:

No

5. Who will be accountable for leading any policy review?

**Director Materials Management** 

6. Review Period: (Indicate is the review period is less than three year. All documents must be reviewed at least every three years.)

Aug 2027

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