

## **CONFLICT OF INTEREST STATEMENT 2020**

**THE MEDICAL FITNESS ASSOCIATION, ITS AFFILIATES AND COMPONENTS, AND ALL OFFICERS, DIRECTORS, DELEGATES, COUNCIL, COMMITTEE MEMBERS AND FACILITY EXAMINERS SCRUPULOUSLY SHALL AVOID ANY CONFLICT BETWEEN THEIR OWN RESPECTIVE INDIVIDUAL, PROFESSIONAL, OR BUSINESS INTERESTS, AND THE INTERESTS OF THE ASSOCIATION, IN ANY AND ALL ACTIONS TAKEN BY THEM ON BEHALF OF THE ASSOCIATION IN THEIR RESPECTIVE CAPACITIES.**

In the event that any Officer, Director, Delegate, Council, Examiner, or Committee Member of the Association shall have any direct or indirect interest in, or relationship with, any individual or organization which proposes to enter into any transaction with, or on behalf of, the Association, including but not limited to transactions involving:

- the sale, purchase, lease or rental of any property or other asset;
- employment, or rendition of services, personal or otherwise including publication of any material by, on behalf of, or in conflict with the Association;
- the award of any grant, contract, or subcontract;
- the investment, or deposit of any funds of the Association;
- Any consulting arrangement using proprietary MFA information;
- a Best Practice Partner, or MFA Industry Partner agreement;
- a Strategic Partner agreement.

Such person shall give notice of any such interest, or relationship, and shall thereafter refrain from discussing, or voting, on the particular transaction in which he/she has an interest. Said person shall make no attempt to exert any influence on the Association, or any of its components, to affect a decision to participate, or not participate, in any such transaction.

While serving as a member of the Board of Directors, as an Officer, or as a committee member, each individual must maintain the highest level of ethical conduct, especially with regard to public disclosure of affiliation. Furthermore, disclosure should never be made in a context where there may be any doubt whether or not the individual is representing the Medical Fitness Association. The MFA name, or any affiliation with MFA, may not be used in advertising/marketing by any organization/company where said MFA member has acknowledged and disclosed a direct, or indirect, conflict of interest.

Information generated by, or through MFA which is copyrighted, confidential, or the intellectual property of the Association may not be used without permission. No member may disseminate, or otherwise utilize, such information for financial, or other personal gain, before such resources are made available in the public domain by MFA, without the express written consent of the Medical Fitness Association.

### **CORPORATE RELATIONSHIPS, DISCLOSURES, AND CONFLICTS OF INTEREST**

Complaints to the MFA Board of Directors concerning a member's perceived violation of MFA's Code of Ethics are, most often, allegations of misrepresentation, or a conflict of interest. Misrepresentation requires evidence that the individual made intentional misstatements regarding credentials, or relationships. An alleged conflict of interest between a member's dual relationship with the Association and an outside interest requires much more in-context information to arrive at an understanding. To minimize inadvertent conflict of interest situations, the MFA Code of Ethics shall be followed as summarized below.

In the Operating Code of every MFA committee and other structures in which the Association is represented by its professional members, a section on ethics and professional conduct exists that contains five principles that



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are expected to be observed. Completion of this form is an acknowledgement by each individual of his/her understanding of the policies and their expressed intent to follow its rules concerning disclosures of any potential conflict, or affiliation, in accordance with policy. It is a responsibility of the Committee Chair to remind his/her association members of the presence and significance of these five principles, both routinely, and as otherwise warranted. They are (paraphrased):

1. **No member should serve the Association in any capacities where an ongoing, unavoidable conflict of interest exists and cannot be resolved.**
2. **Every member is expected to disclose, for the record, any potential conflict of interest and remove him/herself from presence and/or involvement with relevant agenda items.**
3. **The decision to consider and disclose actual, or avoidable, conflicts of interest is the responsibility of the given member.**
4. **The disclosure and accompanying withdrawal from involvement may be reversed and recorded by one’s colleagues (i.e., The Ethics Committee with recommendations to the Executive Committee, when indicated by the level of the member’s involvement) as being of “no conflict”, or “avoidable”.**
5. **Information acquired by a member while serving in an Association capacity is to be respected as exclusively proprietary and confidential until the Association makes such information available in the public domain.**

Criteria for confirming a member’s inappropriate professional relationship with an outside interest remain elusive out of context. However, they require, at minimum, an unwarranted benefit, or potential benefit, to be gained by that relationship to the detriment of the Association including, but not limited to, an undue influence on an Association course of action, jeopardizing an intellectual property right, or conflict with an Association existing, or planned, program or service.

### MEDICAL FITNESS ASSOCIATION

#### Record of Compliance with Conflict of Interest Policy

\_\_\_\_\_ No Conflict

\_\_\_\_\_ Conflict (direct or indirect). Disclosure noted as follows.

As a member of the Board of Directors, a Committee, Task Force, or Facility Examiner, the following is a record of my disclosure of a direct, or indirect, conflict of interest and my intent to abstain from any discussion, or vote, on the matter during my term in office.

#### CONFLICT:

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\_\_\_\_\_  
(List each Board, Committee, or other MFA capacity in which you serve)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Print Name)