

PMAQ

Conflict of interest guideline

QH-GDL-006-04.09:2025

1. Purpose

Prevocational Medical Accreditation Queensland (PMAQ) is committed to the delivery of fair, impartial and transparent accreditation system that assures and promotes quality education and training for prevocational doctors, providing for their wellbeing, the provision of safe patient care and training that meets the health needs of the community.

PMAQ is accredited by the Australian Medical Council as a prevocational training accreditation authority. The Medical Board of Australia (MBA) has approved PMAQ to accredit prevocational year one training programs and the Health Chief Executive Forum has endorsed the accreditation of prevocational year two training programs.

To enable a fair, impartial and transparent approach, effective and reliable process for the identification and management of conflicts of interests, in relation to the system of accreditation as they relate to the system of accreditation are imperative. This document outlines the processes for the identification and management of conflicts of interest throughout the system of accreditation.

2. Scope

This guideline applies to any individual who works or acts in any capacity for and on behalf of PMAQ. This includes any consultative forums with which PMAQ provides secretariat support.

The application of this guideline extends to all health facilities in Queensland that are accredited or are seeking accreditation to employ and train prevocational (PGY1 and PGY2) doctors. Any prevocational training provider (provider) that is the subject of an accreditation decision has the right to identify actual or perceived conflicts of interest.

3. Requirements

This Conflict-of-interest guideline is a practical reference tool, developed to assist individuals and providers to:

- identify actual, potential or perceived conflicts of interest related to PMAQ's activities.
- recognise their responsibilities to disclose and promptly address any conflicts of interest or potential conflicts of interest.

This guideline also outlines responsibilities in the management of conflicts of interest and the processes for doing so.

3.1 What is an interest?

An interest is anything that can have an impact on an individual or group. The impact can bring a benefit or disadvantage to us or others. Interests can be public or personal. There are two main types of interests – pecuniary and non-pecuniary – that can impact on either the public interest or a private/personal interest.

3.1.1 Public interest

The public interest refers to the collective interest of the entire community – not the sum of individual interests, nor the interest of a particular group.

3.1.2 Private/personal interest

A private or personal interest are those private, professional or business interests that can benefit or disadvantage us as individuals, or others we may wish to benefit or disadvantage. They also include the personal, professional or business interests of individuals or groups we associate with, such as family members and friends. Private interests include a wide range of external activities including financial and economic interests, family or private businesses, clubs or interest groups, and involvement in other employment.

3.1.3 Pecuniary interest

A pecuniary interest involves an actual or potential financial gain or loss. It may result from the individual or someone associated with them (e.g. family member) owning property, holding shares or a position in a company bidding for government work, accepting gifts or hospitality, or receiving an income from a second job. Money does not actually have to change hands for an interest to be pecuniary.

3.1.4 Non-pecuniary interest

A non-pecuniary interest does not have a financial component but may arise from personal or family relationships, involvement in sporting, social, trade union, community or cultural activities. Non-pecuniary interests include any tendency toward favour or prejudice resulting from friendship, animosity or other personal involvement that could bias your judgement or decisions.

3.2 What is a conflict of interest?

3.2.1 Actual conflict of interest

An actual conflict of interest involves a direct conflict between an individual's official current duties and responsibilities and existing private interests.

3.2.2 Perceived conflict of interest

A perceived or apparent conflict of interest can exist where it could be perceived, or reasonably appear, that an individual's private interests could improperly influence the performance of the individual's official duties and responsibilities – irrespective of if this is in fact the case.

3.2.3 Potential conflict of interest

A potential conflict of interest arises when an individual has a private interest that could conflict with their official duties and responsibilities in the future.

4. Identifying a conflict of interest

Individuals are responsible for identifying and disclosing their own conflicts or interests. Consideration is to be given as to whether in performing their role, an individual could be influenced, or appear to be influenced, by personal interests.

Individuals need to consider:

- if they, or someone associated with them, would benefit or be disadvantaged directly or indirectly, now or in the future, from a decision they may be involved in making.

- whether they, or someone associated with them, has received a gift or benefit from another person or business who stands to benefit from a decision the individual makes or can influence.
- whether a member of the public would view the individual's decision as being influenced by their personal interests or associations with other persons/entities.

Prevocational training providers in Queensland that are accredited or are seeking accreditation to employ and train prevocational (PGY1 and PGY2) doctors may also identify any actual, perceived or potential conflict of interest of any individual who is, or is proposed to be involved in the adjudication, including any activity leading to this point, of a decision related to the provider.

In doing so the provider needs to consider:

- if the situation gives rise to a circumstance where an individual would or be reasonably perceived to benefit or be disadvantaged directly or indirectly, now or in the future, from a decision they may be involved in making.
- if the situation gives rise to a circumstance where an individual has a known affiliation with a person or business of such a nature that it could be reasonably considered they stand to benefit from a decision the individual makes or influences.
- whether a member of the public would view the individual's personal interests or associations with other persons / entities to unduly influence their decisions.

5. Declaration of conflict of interest

PMAQ committee members and assessors are required to complete a Conflict of Interest (COI) Declaration prior to participation in any PMAQ accreditation activity. If no conflicts of interest exist, this is to include a declaration of such.

Receipt of a declared interest is to be brought to the attention of the PMAQ Accreditation Committee for consideration and decision as to what, if any, future involvement the individual should have in the relevant matter.

Prevocational training providers are invited to provide feedback on any individuals proposed to be involved in an accreditation activity. Through this process facilities are afforded opportunity to identify any actual, perceived or potential conflict of interest and bring this to the attention of PMAQ. Health facilities are required to describe the nature of the conflict, in detail sufficient for consideration by the PMAQ Accreditation Committee.

The PMAQ Accreditation Committee is responsible for:

- assessing the situation.
- determining whether a conflict of interest exists.
- deciding about the most appropriate strategy to manage or resolve the conflict.
- implementing and recording the strategy to resolve the conflict.

6. Examples of conflicts

Any committee member or assessor that has an affiliation with a provider that is the recipient of an adjudication outcome is automatically excluded from this adjudication, including any associated activities that may lead to the formation of recommendation prior to adjudication.

Affiliation comprises:

1. Upcoming, current or previous employment within the provider, interpreted as greater than or equal to 6 months employment in the last 18 months. (This excludes any immediate previous experience that individuals have had as Medical Students.)
2. Membership of governing bodies of that provider.
3. A commercial interest in that provider. This may include direct relationships in regard to prevocational doctor training, for example a direct rotational arrangement between providers.
4. Personal relationship with key management or governance personnel associated with that provider.

7. Strategies to manage or resolve conflicts of interest

There are six major options for managing conflicts of interest, as outlined below:

Options	Description
Record	The disclosure of a conflict of interest is to be recorded in writing using the appropriate form. This provides the delegate with transparency of information to assess the level of risk associated with the actual or perceived conflict of interest to manage the situation appropriately.
Restrict	Where restrictions are placed on the committee members or assessors' involvement in the matter.
Recruit	Where a neutral third party is used to oversee part or all of the process that deals with the matter.
Remove	Where the committee member or assessor is removed from their involvement in the matter creating the conflict.
Relinquish	Where the committee member or assessor relinquishes the private interest that is creating the conflict.
Resign	Where the committee member resigns from their position with the department. or Where the committee member resigns from their position on the committee.

The strategy adopted to manage or resolve the conflict should:

- restrict the extent to which a private interest could compromise, or be seen to compromise, impartiality when carrying out official duties.
- ensure there can be no perception of receiving an improper benefit that could influence the performance of official duties.
- remove the individual from involvement in official decisions and actions which could be compromised by private interests and affiliations.

PMAQ staff will generally be responsible for the implementation of the committee's decision and any associated formal correspondence.

8. Monitor

Ongoing monitoring and regular reviews of identified and arising conflicts of interest allow changes to be made to the management strategy if the need arises. Formal written records should be kept of all accreditation assessments, decisions made, and actions taken in relation to all conflicts of interest.

9. Definitions

Term	Definition
DCT	Director of clinical training
DMS	Director of medical services
EDMS	Executive director of medical services
Evaluation	Evaluation is the process of using the measurements (data) to assess outcomes and impact of an entity (individual, service, program). It is the formal process of gathering evidence (data), reviewing it and using those measures to assess the outcomes and impact of a program or project according to terms of reference or established standards.
External data source	A data source external to the training program, it's hospital or health service. The national standards require the use of both internal and external data sources in its evaluation and monitoring activities. An example is the Medical Board of Australia's medical training survey results.
Formal education program	An education program the facility provides and delivers as part of the prevocational training program curriculum. Sessions are usually weekly and involve a mixture of interactive and skills-based face-to-face or online training.
PGY1	A doctor in their first year of postgraduate training, holding provisional registration with the Medical Board of Australia. Also referred to as an intern.
PGY2	A doctor in their second year of postgraduate training, holding general registration with the Medical Board of Australia.
Junior house officer (JHO)	A prevocational doctor who holds general registration by the Medical Board of Australia, usually but not always in their second postgraduate year (PGY2) and who has not yet been accepted onto a college training pathway. Also referred to a resident or a resident medical officer.
Prevocational training program	PGY1: A 47-week period of mandated, supervised, work-based clinical training that must meet both the requirements of the Medical Board of Australia's registration standard <i>Granting General Registration as a Medical Practitioner to Australian and New Zealand Medical Graduates on Completion of Postgraduate Year One Training and the parameters outlined in the National Requirements for Prevocational Training Programs and Terms</i> . This includes exposure to required clinical experiences, participation in a longitudinal assessment process, and access to education and training opportunities.

	<p>An assessment review panel will make a recommendation on eligibility for progression to general registration. The training program may be delivered by one or more accredited training providers.</p> <p>PGY2: A 47-week period of mandated, supervised, work-based clinical training that must meet the parameters outlined in the <i>National Requirements for Prevocational Training Programs and Terms</i>. This includes exposure to required clinical experiences, participation in a longitudinal assessment process, and access to education and training opportunities. An assessment review panel will determine eligibility to receive a certificate of completion. The training program may be delivered by one or more accredited training providers.</p>
MEO	Medical education officer
PMEO	Principal medical education officer
MEU	<p>Medical education unit</p> <p>The primary function of the medical education unit is to oversee prevocational medical training and associated accreditation activities.</p>
Monitoring	The process of measuring of what is happening. It is the periodic collection of data and information (measures) for the purposes of tracking progress (measuring) of an entity (individual, service, program) according to terms of reference or established standards.
PGY	<p>Postgraduate year usually used with a number to indicate the number of years after graduation from medical school.</p> <p>For example, PGY1 is the first postgraduate year, also known as internship.</p>
Prevocational	A prevocational doctor in the postgraduate years prior to being accepted onto a college pathway.
Quality improvement (QI)	The framework used to provide for a systematic, formal approach to the analysis of practice or program performance and efforts to improve performance, including the implementation of changes in practice if needed.
Term	A component of a medical training program, usually a nominated number of weeks in a particular area of practice. Also called clinical rotation, post or placement.
Triangulation	The process of using different sources and/or methods for data collection to cross check data, reduce bias, and ensure data is valid, reliable and complete. This process lends credibility to an evaluation or assessment process.

10. Approval and implementation

Policy Custodian	Policy Contact Details	Approval Date	Approver
Manager, PMAQ	pmaq@health.qld.gov.au	4 September 2025	PMAQ Accreditation Committee

11. Version control

Version	Date	Comments
1.0	29 January 2020	Endorsed by Delegate
1.1	23 February 2021	Updated to reflect current governance structure and terminology
2.0	4 March 2021	Endorsed by Accreditation Committee
2.1	29 November 2022	Reviewed and updated to include specific employment types & durations
2.1	15 December 2022	Approved by Accreditation Committee
3.0	2 February 2023	Approved by Delegate
4.0	13 September 2024	Updated to reflect current processes. Approved by Accreditation Committee
4.1	4 September 2025	Updated on new template