

GHANA SOCIETY FOR MEDICAL PHYSICS

[G S M P]

Promoting the Application of Physics to Medicine and Biology



CODE OF ETHICS

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Code of Ethics

Preamble

The following Principles of the Ghana Society for Medical Physics (GSMP) are core values intended to aid all members and affiliates to act in an ethically professional manner. The Principles are not a set of laws, but standards of ethical conduct. The Principles provide a framework for members and affiliates to conduct themselves with respect to patients, colleagues, and the public. Corporate affiliates shall abide by these same ethical principles, where applicable.

Principles

- i)** Members shall strive to provide the best quality patient care with competent and professional service.
- ii)** Members shall safeguard patient and professional confidences and privacy.
- iii)** Members shall respect the rights of patients, colleagues, health professionals, and those in training.
- iv)** Members must realize their limitations of knowledge, skill, or time and seek consultations and assistance when indicated.
- v)** Members shall respect the law and regulatory requirements for the safe and effective practice of their profession.
- vi)** Members shall be honest in all professional interactions and in their work.
- vii)** The relationship among members of the Association and other health professionals shall be open, collegial, and based on mutual respect.
- viii)** Members shall disclose conflicts of interest when financial or other personal considerations may compromise or appear to affect their professional judgment.
- ix)** Members should strive to support the professional development of their colleagues and those in training.
- x)** The work, including research, of a member shall be truthful, based on accepted scientific principles, and shall cite prior work when applicable.
- xi)** Members shall strive to improve their knowledge and skills, sharing these with their colleagues.
- xii)** Members shall strive to protect the safety and welfare of patients.

Ethics Guidelines

These Guidelines are intended to assist members and affiliates to interpret and implement the Principles. The Guidelines cannot be all-inclusive, so members and affiliates should refer to the Principles for situations not specifically addressed in the Guidelines.

I. Professional Conduct

Members should conform to high standards of ethical, legal and professional conduct. Any activity that fails to conform to these standards compromises the member's personal integrity and casts aspersions on the GSMP and the medical professions.

A. Academic freedom

Members shall strive to pursue scientific inquiry, and to promote a scientific and clinical environment free of political, ideological, or religious pressures or constraints.

B. Honesty

Members shall be honest in all professional interactions and in their work. A medical physicist's work frequently has a direct impact on the quality of patient care. Thus, trust in the fidelity of the work and in the person doing the work is paramount. The foundation of the trust is built on the everyday honesty in all that medical physicists do.

Members will truthfully and accurately document and report their professional credentials such as academic degrees, training, continuing education, and scholarly and research contributions. Members will claim credit only for continuing education courses, programs, and sessions attended and completed.

Members will honestly represent their activities, services, and products delivered. Fraudulent documentation of work not done, backdating reports, signing reports of work done by others, data fabrication, and data falsification are unethical. Members shall not attempt to defraud in connection with obtaining payment or reimbursement for services or products.

C. Maintenance of knowledge and skills

The fund of medical physics knowledge is continuously growing and evolving. Members should strive to improve their knowledge and skills relevant to their professional work. Members should participate in appropriate continuing medical physics education activities. Sharing such knowledge and skills with colleagues is essential. Members should strive to make their experience available to the medical physics community.

D. Competence

Members must be aware of the limitations of their knowledge, skill, and experience. They shall undertake only work that they are qualified to perform and shall seek additional education and training or consultation when indicated. Members should disclose known limitations in their ability when relevant.

E. Professional relationships

Members shall strive to have mutually beneficial relationships with their colleagues. All such interactions should be open, honest, and respectful. Where appropriate, members shall strive to share their skill and experience and to assist the professional development of colleagues. Those who are in a supervisory position have an obligation to guide their associates.

F. Responsibility to public

Members shall strive to improve the community's public welfare through the dissemination of scientific knowledge and pertinent education.

G. Responsibility to patient

Members shall place primary importance on the welfare of patients and only participate in patient care activities that are in the best interest of the patient.

H. Responsibility to institution

Members affiliated with or employed by health care facilities shall consider the interests of the institution. Members shall actively promote a mutually respectful atmosphere with health care providers, administrators, and ancillary staff. Members shall strive to support other staff within the institution in order to achieve quality patient care. Members shall respect institutional policies and procedures and contribute to their continuous improvement.

I. Patient confidentiality

Members shall respect the confidential nature of all patient information and protect the confidentiality of all patient information.

J. Conflict of interest

Conflicts may exist with an institution, within an educational setting, with industry, or with clinical practice activities. Members should be aware when personal interests conflict with other interests. Members shall put the needs of the patient above their own personal interests. Conflicts of interests are not inherently unethical or to be avoided, but they must be disclosed to any involved party and managed appropriately.

K. Discrimination

Members shall treat fairly, equally, and with respect all those with whom they have professional relationships. Members shall judge others on the basis of knowledge, training, skill and quality of service rendered. Prejudicial, biased discrimination not based on merit is reprehensible and unethical.

L. Harassment

Members should contribute to a work environment where people can do their best, most productive work. Members should use positive, supportive language. Verbal abuse, demeaning comments, uncontrolled angry exchanges, or any conduct that directly or indirectly creates a hostile work environment is not acceptable.

M. Sexual harassment

Members shall not sexually harass anyone. Sexual harassment is an unwelcome sexual advance, a request for sexual favors, or other verbal or physical conduct of a sexual nature.

N. Exploitative relationships

Members shall not exploit any person with whom they have a professional relationship. Exploitation can be, but is not limited to, coercing a person to perform work without equitable compensation, forcing a person to act against his or her will or consent, or creating working conditions where some person(s) is treated unfairly for the benefit of others.

O. Response to impaired or incompetent colleagues

The safety and welfare of patients are primary concerns of members. If, due to some impairment, a colleague is perceived to jeopardize the patient's welfare, members should attempt to respond on the patient's behalf. The particular circumstances may be ambiguous and members should proceed judiciously. If a legal, contractual or regulatory obligation to report the concerns exists, the member shall comply with that obligation.

P. Response to impaired or incompetent colleagues

Incidents, defined as unwanted or unexpected changes from normal that cause or have the potential to cause an adverse effect to a person or equipment, shall be reported by members in accordance with local institutional policy and applicable governmental regulations. Learning from incidents is a critically important tool to help minimize the risk of future similar events. Members should also encourage other health care professionals to report incidents.

Q. Relationship with regulators

Members have an obligation to assist and cooperate with regulators in the performance of their duties in an honest and respectful manner.

R. Whistleblower protection

Members shall respect and not participate in taking punitive or retaliatory action against other members (whistleblowers) who report those deficient in competence or engaging in unethical, fraudulent, or deceptive behavior.

S. Reviewing the work of another medical physicist

At least two categories of review may occur: those initiated by the incumbent physicist as part of an ongoing quality assurance process and those initiated by someone else. Procedures and guidelines regarding the former are published on www.gsmphana.org. In the case of reviews not initiated by the incumbent physicist, the GSMP does not affirm or reject the process of review. In the interest of protecting the rights of the incumbents in such cases, the following are the expectations the incumbent should rightfully enjoy.

The review should be performed by a Qualified Medical Physicist peer, i.e., a medical physicist who has similar or senior credentials and is familiar with the type of practice setting.

The medical physicist being reviewed should receive a courtesy call from the reviewer to establish mutually agreeable times and to communicate processes and goals for the review.

Whenever possible, the reviewer should have no present or past professional relationship with the entity requesting the review, e.g., no close personal, professional, or training relationship.

The medical physicist being reviewed should receive a copy of the final report, both oral and written.

Confidentiality should be maintained throughout the review process.

All care must be exercised when reviewing an incumbent not to jeopardize the incumbent's position unnecessarily (e.g., by the expression of personal opinions or judgments beyond those based on the data presented). The process should be used to create the opportunity for improvement (and/or enhancement of the working environment, equipment, personnel, etc.) for all concerned, as well as the community at large.

II. Research Ethics

Biomedical research, including that conducted by or involving medical physicists, has its own set of ethical obligations that should be closely adhered to by investigators and others engaged in research. Ethical obligations arise in the design and conduct of the research, collection and interpretation of data resulting from the research, publication of reports and scientific monographs describing the research, management of intellectual property emanating from the research, and relationships of the research team to the financial sponsors of the research. Lapses in ethical standards can compromise the acceptance of the research findings and seriously damage the careers of researchers responsible for the findings.

A. Acquisition, management, sharing, and ownership of research data

Members should ensure that all data collected during a study are real, and that fabrication, falsification of data, or plagiarism have not occurred. All members of the team should respect the confidentiality of research data and should not disclose data to other scientists or the public without the consent of all team members. Members of the research team should fully understand who owns research data.

B. Conflict of interest

The most commonly discussed conflict of interest is a financial one, where one or more members of the research team or their immediate family members stand to gain financially if the results or reports of the research turn out in a particular way. If significant, such a conflict should be reported.

It is possible to have a conflict of interest with regard to proposed or actual research even if there is no potential financial gain. For example, researchers gain prestige among their peers and within their institution or organization if their research results are positive and progressive. There is nothing inherently wrong with a conflict of interest, but it should be acknowledged to eliminate the perception of possible impropriety. The best protection against conflict of interest accusations is full disclosure and the acquisition, interpretation, and publication of research findings in a manner that is transparent and above suspicion.

C. Human participants

Research involving human participants should adhere to national standards and international standards (Helsinki declaration and the Belmont principles of respect for persons, beneficence and justice). Respect for persons recognizes the autonomy of individuals and the right of each research volunteer to be treated with respect, to be fully informed about the

research and its potential benefits and risks, and to be granted the ability to decide for him- or herself whether to participate in the research. Beneficence assures that some potential benefit will accrue from the research, to the participants themselves, to others with similar conditions who may benefit in the future, or to society at large. Justice means that potential participants in a study are not excluded without a valid reason for exclusion. Most institutions subscribe to the “General Rule” which says that all research involving human participants is subject to the same degree of oversight and follows the guidance of the Belmont Principles.

D. Research misconduct

Specific examples of research misconduct are data fabrication, data falsification, and plagiarism. Fabrication is the artificial manufacturing of research data rather than obtaining data by experiment. Falsification is manipulation of data by selectively choosing only those data that support a research hypothesis. Plagiarism is the misrepresentation of data from another researcher as one’s own. These ethical breaches are intentional wrongdoings that are considered abhorrent and intolerable by the research community.

E. Animal welfare

Animals should be used as research subjects only when alternatives are not available. Researchers have a moral obligation to handle animals used for experimental investigation humanely and with respect. Researchers shall adhere to the pertaining laws and standards relevant to their research, their laboratory rules, and their funding agencies.

F. Collaborative science

Research is often collaborative and interdisciplinary by its very nature; the concept of the sole investigator working independently in the laboratory is rare today. Invariably a research effort is a partnership involving several individuals from different disciplines and, frequently, different institutions. Member research collaborators shall treat all team members with respect and trust. All collaborators must sustain the confidential nature of the research and its findings until their agreed-on presentation and publication.

G. Authorship

Authorship of a scientific publication should be reserved for only those individuals who have contributed substantially to the conception and design of a research investigation and/or to the analysis and interpretation of data resulting from the investigation. Authorship also implies that the individual was directly involved in the drafting and revising of the publication. Authors are discouraged from awarding authorship to an individual if the individual did not contribute substantially to the publication.

H. Editorship and peer review

The editor is responsible for ensuring that the peer review process of the journal is objective and fair, and that reviews do not contain derogatory critiques or disparaging remarks. Editors should recuse themselves if they have a conflict of interest related to the reported research that could compromise their objectivity. The editor and reviewers are ethically bound to ensure the confidential nature of reviews and to protect the identity of authors and/or reviewers when reviews are single or doubly blinded.

The integrity of research relies heavily on the process of peer review, which means that one's work is transparent and subject to review by scientific peers. Peer review should always be conducted with total objectivity, honesty, thoroughness, and confidentiality and with respect for those doing the review and those whose work is being reviewed. Reviewers must remember that the work they are reviewing is confidential and should not be disclosed to anyone outside the review team. They must not appropriate the work or any of the results into their own research, even though they may be working in a similar field.

I. Author or reviewer conflict of interest

Authors should report any conflict of interest they may have regarding research reported in a scientific publication. Individuals asked to review papers should decline the journal's invitation to review if they have a conflict of interest related to the reported research or if they have a personal relationship with the authors that could compromise their objectivity.

J. Privacy and confidentiality

Authors shall respect the confidentiality of patients by not revealing their identities in publication or otherwise. This protection of privacy extends to individuals serving as volunteers in research involving humans.

K. Overlapping publications

It is unethical for an author to simultaneously or sequentially submit for publication substantially the same material to two or more journals, unless permission is granted by the editors of all affected journals, except in the case of rejected manuscripts.

III. Education Ethics

Formal educational settings present an environment within which the student will have the opportunity to absorb the intellectual and ethical atmosphere of the institution and its educators. Thus, it is of paramount importance that teachers/educators exhibit the highest ethical standards, and students begin the practice of ethical behavior that will guide them for the remainder of their careers.

In this Education Ethics section, the following definitions apply:

“Teacher” refers to any person responsible for the education or supervision of a student engaged in any educational or training program.

“Student” refers to a person engaged in any educational or training program.

A. Teacher

1. Student program completion

Teachers shall endeavor to contribute to the intellectual development and to support students in achieving their education goals. They shall guide students toward an efficient path to reaching these goals. Students entrust their educational outcome in their teachers, advisers, and mentors. As such, teachers shall act as advocates for their students. For example, work on institutional grants or research projects that primarily benefits the

teacher or institution may be a component of a student's education, but should not unduly delay his or her overall progress.

2. Safe environment

Teachers shall promote a safe environment for learning and shall educate students regarding the hazards and methods to control and minimize potential risks.

3. Respect for students

Teachers shall interact with students in a respectful manner. Teachers are in a position of power and authority. They have the responsibility to relate with students in a positive manner. Their verbal, nonverbal, and written communication with students should be constructive and reasoned with the intent to enhance the education experience.

4. Nondiscrimination

Teachers shall treat all students fairly and equally irrespective of age, race, color, creed, sex, national origin, marital status, political or religious beliefs, family, social or cultural background, or sexual orientation.

5. Equal opportunity

Teachers shall fairly consider all students for participation in any program or for any benefits that may aid the student, including, but not limited to, attendance at scientific meetings or training programs, research projects, internships, and scholarships.

6. Student confidentiality

The trust inherent in a good teacher-student relationship will be irrevocably damaged if a teacher casually divulges confidential information. Teachers shall maintain the confidentiality of nonpublic student information. Evaluations of the student's work along with verbal and electronic communications between the teacher and student shall be confidential unless required to document the student's work.

7. Consensual student relationship

A consensual or romantic relationship between a teacher and a student should be avoided. The teacher bears the primary burden of accountability to ensure proper relationships are maintained.

8. Sexual harassment

Sexual harassment of a student by a teacher is unacceptable. Sexual harassment is an unwelcome sexual advance, a request for sexual favors or other verbal or physical conduct of a sexual nature, and any conduct that directly or indirectly creates a hostile environment.

9. Acknowledgment of student or others' work

Teachers shall acknowledge and cite prior work by others if used in their teaching media presentations or within their course material. Teachers shall acknowledge significant academic or scholarly assistance from students. This acknowledgement may be as recognition of the student as a coauthor of a publication. The mentor-trainee or researcher-student relationship and issues related to authorship are further described in the Research Ethics section.

10. Fair evaluation

Teachers shall make fair evaluations of student efforts and document those evaluations in the students' record when appropriate.

11. Intellectual and academic freedom

Teachers shall encourage an open atmosphere of scientific inquiry and promote an environment free of political, ideological, or religious pressures and constraints.

B. Student

1. Review and inspection of personal records

Students have a right to review and inspect their personal records. They may request amendments to their records if they can show evidence that the record is not correct.

2. Whistleblower protection

Students shall be free to report or provide information regarding violations of this code without fear of retaliation and/or reprisal.

3. Work requirements of educational program

Students have a right to expect that completion of the educational program will not be contingent on performing work for a teacher or institution that is not a formal, documented part of the educational program.

4. Program requirements

Students have the right to be informed and to have clearly defined requirements for the completion of their educational program.

5. Adherence to institutional policies and procedures

Students shall adhere to the policies and procedures of their institution.

6. Academic honesty and integrity

Students shall uphold and maintain academic honesty and integrity. Examples of academic dishonesty include cheating, plagiarism, falsifying or fabricating information or data, and unauthorized collaboration.

7. Acknowledgment of work of others

Students must fully acknowledge the prior work of others when including it in their own work.

8. Freedom of expression

Students shall respect the freedom of expression of others.

9. Patient and institutional confidentiality

Students shall respect the confidentiality of institutional and patient information.

10. Respect for students, teachers, staff, and patients

Students shall interact with other students, teachers, staff, and patients in a respectful manner. They will respect and support other students' classroom participation.

11. Respect institutional property

Students shall not use professional information, data, or property belonging to a teacher or institution that is not part of their educational materials for their own professional practice without express permission. This could be either intellectual or physical property. Some examples are institutional procedures, policies, worksheets, checklists, quality assurance protocols, teaching aids, presentations, and research protocols. While a

teacher or institution may permit or release such information or data, it is the students' responsibility to obtain permission to use it.

IV. Business/Government Ethics

A. Seeking or changing jobs

The solicitation of an offer for employment must be entered into with the full intent that there is a reasonable prospect of serious consideration by the candidate. Both parties have an ethical responsibility to represent themselves and their mutual situations in an honest and thorough manner. A candidate may reasonably expect that on tendering of an offer to a candidate the employer will suspend action on other candidates for a reasonable period of time to allow for the candidate's responsible consideration of the offer. The candidate in turn should give a specific and reasonable time by which he or she expects to make a decision or to make a counteroffer. If the candidate is considering multiple offers, it is incumbent on the candidate to respect the needs of the employers and to respond to each in a timely manner.

Under normal circumstances once an offer for employment is accepted, it is unethical for either party to withdraw or modify, in a material way, their respective commitments made under the terms of their agreement. It is recognized that extraordinary circumstances do arise from time to time, making it impossible to proceed under the terms of an agreement already made. Under such circumstances, it is considered good practice not only to inform the other party as soon as possible, but also to provide a reasonable explanation of the situation that prevents the party from fulfilling his or her obligations.

B. Employment investigation

It is considered good and responsible professional practice during an employment investigation to act with respect and consideration of the existing parties and of their relationship(s) specifically, the employer and any fellow medical physicist whose position might be affected.

C. Vacating a position

On leaving an institution, members have an obligation to leave all information for which compensation was made and to make a reasonable effort to facilitate an orderly transition of physics services.

Documentation should be left in an intelligible, legible order and format. Materials generated as well as the notes from work compensated for by the institution is the property of the institution paying the salary or consulting fee of the individual doing the work. Such materials should be left in the possession of the institution unless otherwise instructed by the institution or agreed by the parties.

D. Relationships with recruiters

Communications between recruiters and members (job candidates) will be open, honest, and transparent. Recruiters will faithfully and honestly represent candidates to employers and likewise will honestly provide information about employers to candidates. Candidates will provide candid, honest information about themselves to recruiters whom the candidates have

accepted for a business relationship. Recruiters will receive permission from a candidate for release of his or her resume (curriculum vitae) to each and every potential employer client. Recruiters will maintain the confidentiality of a job search in each and every instance unless specifically released in writing from such confidentiality by the candidate.

E. Corporate affiliates and member relations

Corporate affiliates shall conduct their business with ethically sound practices.

1. Relationships with medical physicists

A vendor's products and services are often related to patient care. The purchase of the product or service must be based on its merits. Corporate affiliates shall avoid consultation arrangements, gifts, or grants to an individual or institution that could be considered inducements to purchase a particular product. Other industry codes of ethics should be carefully reviewed by Corporate affiliates for additional guidance.

2. Sponsorship of research

A vendor must separate review and decisions about research and educational grants from any influence by sales staff or others who are compensated in proportion to the sales of the company through commissions or other bonuses whether in cash or other things of value such as stock, stock options, or special trips.

3. Member conflict of interest

Members are frequently asked to participate in the selection of equipment and software for their institution or client. When members are engaged in this activity, the best interests of patients must come first. Safety and quality of the product to meet the needs of patients should be the highest priority in choosing a product.

Health professionals, such as medical physicists, who are involved in decisions about lease or purchase of equipment, services, and software should disclose relationships that exist between themselves and Corporate affiliates. When performing acceptance tests on products from a company with which a relationship exists, an institution or client may choose to enlist a colleague not similarly encumbered. Members may appropriately recuse themselves from decisions about purchases from a vendor where conflicts of interest exist.

4. Gifts or kickbacks

Promotional items, educational items, and modest gifts given as a courtesy of business that are of a nominal value (less than GH¢ 100) are acceptable. Gifts or kickbacks given with the expectation of obtaining a contract or to sell, lease, or refer a product or service are not acceptable. Gifts may not be in the form of cash or cash equivalents. Gifts such as tickets or fees for sporting, entertainment or recreational events are not appropriate.

5. Sales, marketing, advertising

Sales communications and advertisements shall truthfully describe the product or service. False, misleading, or deceptive communications or advertisements are not acceptable practices. Known deficiencies of the product or service must be disclosed by the vendor. If a product is in development or not yet ready for clinical use, that information must be stated. Explicit and implicit commitments about a product or service shall be honored.

6. Confidentiality

Corporate affiliates shall respect the confidential nature of all patient information and protect the confidentiality of all patient information.

Complaint Procedure

Preface

Any allegation of ethical misconduct by a member reported to the Ethics Committee will be carefully considered in a fair, impartial manner. It is the strong preference of the GSMP Ethics Committee to encourage good ethical behavior, not to punish poor behavior. The Ethics Committee is a resource available to members to assist them in resolving questionable ethical situations when possible, without resorting to filing an official complaint.

- 1.0 Any person may file a written complaint against a GSMP Member.
- 1.1 The complaint must be filed within two years of the date of the alleged incident(s) giving rise to the complaint. If the Complainant is, or was, a student at the date of the alleged incident(s) giving rise to the complaint, the two-year statute of limitations may be extended at the Ethics Committee's discretion to begin on the date of the student complainant's graduation from his or her graduate program.
- 1.2 The written complaint shall be sent only to the Chair of the Ethics Committee to maintain confidentiality of the initial communication. Whenever possible, the complaint should specify the violation(s) of the GSMP Code of Ethics of which the member is accused. The complaint must describe specific events, provide available evidence, and be as specific as possible as to times, places, and persons involved.
- 1.3 At his or her discretion, on receipt of the complaint, the Ethics Committee Chair may attempt to mediate the dispute between the parties in an effort to resolve the matter prior to referral to the Ethics Committee and the initiation of a formal GSMP Ethics Proceeding.
- 1.4 All complaints will be treated confidentially.
- 1.5 The GSMP and/or the Ethics Committee may choose to defer any action if there is any civil or criminal legal action, or if other administrative action has been filed, or if any such action is anticipated as a result of actions giving rise to the complaint. The Complainant or Respondent must report to the Chair if any legal action is initiated. If the complaint procedure has been initiated before the beginning of any legal action, the GSMP proceeding may be stayed until the legal and/or administrative action has been resolved.
- 2.0 Within 30 days of receipt of the complaint, the Chair shall thoroughly review the complaint, and distribute copies, redacted for anonymity, of the complaint to all members of the Ethics Committee for review. If the Chair has elected to mediate the dispute between the parties pursuant to section 1.3, the 30-day time period may be extended at the Chair's discretion. However, the Chair must, within 30 days of receipt of the complaint, notify the Committee members that a complaint has been received and that it is being mediated.

Prior to distribution of copies of the complaint to the Ethics Committee for review, the Chair will remove any and all proper names, addresses, and information that may tend to identify the parties involved in the underlying matter or persons referenced as witnesses in the allegations of the complaint. The removal of identifiers is necessary to ensure the confidentiality and anonymity of the Complainant and the accused Member during the preliminary Committee review process. The anonymous complaint shall then be distributed to all members of the Committee and be reviewed by the Committee. The Committee will determine whether or not the complaint is valid. Legal counsel may be requested to review the anonymous complaint and advise the Committee of its opinion with respect to the validity of the allegations contained therein.

Valid complaints are those that are clear violation(s) of the GSMP Code. They must be made in the atmosphere of mutual respect, and they must have merit.

- 2.1 Members of the Committee reviewing a complaint must be able to perform in a disinterested and objective manner. If unable to do so, members of the Committee must recuse themselves.
- 3.0 If the Committee's review determines that a valid complaint has been received, then the Chair will notify the Complainant and the Respondent, and may notify legal counsel at the Committee's discretion. The notification shall include a copy of the complaint, along with an explanation of options available to the Respondent.

Following review, if the Committee decides to take no further action, the Chair will notify the complainant and the case will be closed.

A 2/3 majority of the voting Ethics Committee members present is required to validate a complaint. A quorum of at least 3 committee members is required for a vote. The vote may be conducted at the Ethics Committee discretion either: a) face to face; b) by phone or video teleconference; c) via Web conference; d) or in another venue deemed appropriate by the Committee.

To vote in favor of validating a complaint, the Committee members should be convinced that the allegations and supporting evidence have created a reasonable probability that a violation of the GSMP Code of Ethics has taken place.

- 3.1 The Respondent must respond to the complaint within 30 days of receipt of notification and complaint. In this response, the Respondent may dispute the allegations and/or challenge any Committee member for conflict of interest. The Respondent may also request a hearing. The Chair may relax the response deadline at his or her discretion with a show of good cause.

If the Respondent disputes the allegations contained within the complaint, but does not request a hearing, the Respondent may submit a written response to all the allegations set forth within the complaint, as well as any relevant evidence and/or documents in support of response. The Ethics Committee will then decide the matter on the basis of the complaint, the response, and any evidence submitted by the involved parties. In the absence of a hearing, the Committee will make its decision on the basis of materials received from the interested parties. The Committee's decision shall be rendered under the same standards as are applied at a hearing, as set forth in section 6.0 of this policy.

- 3.2 If the Respondent admits to having committed an ethical violation, the Committee will decide the appropriate action, which may include sanctions (section 7.0). If the respondent fails to respond within the 30-day time period, the Committee will make its determination on the basis of the complaint and any other relevant materials the Committee may have acquired.
- 4.0 If a hearing is requested, the Chair shall set the date, time and place in conjunction with the Committee and legal counsel, and shall notify the Respondent and Complainant in writing at least 30 days in advance. The Notice of Hearing shall be sent via certified mail, with return receipt requested or by other method at the discretion of the Chair. The hearing may be conducted at the Ethics Committee discretion either: a) face to face; b) by phone or video teleconference; c) via Web conference; d) or in another venue deemed appropriate by the Committee.

If any parties can properly show good cause as to why they cannot participate at the hearing on the date and time set, the Chair may reset the time and date of hearing and promptly deliver notice of the new hearing date. The hearing shall be completed in one day. GSMP shall be responsible for the costs of the hearing, including the attendance of the Ethics Committee panel members, transcription of the hearing, and the meeting facility. The Complainant and Respondent shall cover their own individual expenses.

- 5.0 The Chair of the Ethics Committee shall preside over the hearing in an atmosphere of mutual respect for all parties involved. Appropriate documentation will be made of the proceedings. Each side shall be allowed 30 minutes to present their respective cases. However, this time limit may be relaxed by the Chair at his or her discretion. Committee panel members may question all presenters,

and all parties shall be provided the opportunity to cross-examine any witnesses presented by the opposing party. However, all cross-examination shall be limited according to the discretion of the Chair in the interests of time and efficiency. All relevant evidence shall be admissible. Hearsay evidence shall be admissible during the hearing. Hearsay evidence that is admitted shall be accorded whatever weight the Committee panel deems appropriate taking into account the nature, character and scope of the evidence, the circumstances of its creation and production, and, generally, its reliability. At the end of the presentations and Ethics Committee panel questions, each side is given 5 minutes for final statements and rebuttal of facts.

- 5.1 The hearing panel will consist of at least three voting members of the Ethics Committee.
- 6.0 The Ethics Committee may consider only the evidence and testimony introduced in conjunction with the complaint process and submitted at the hearing, including any evidence independently acquired and submitted by the Committee or the Chair. The Ethics Committee panel decision will be by 2/3 majority vote of the voting members present at the hearing. The decision will be issued in writing within 30 days of the hearing and will indicate which actions the panel deemed a violation of the GSMP Code of Ethics. Copies of the written decision will be delivered to the Complainant and the Respondent in a timely fashion.
- 7.0 If the Ethics Committee panel finds in favor of the Complainant, sanctions against the Respondent are limited to one or more of the following options (a) through (e). A minimum quorum of 3 members is required for a vote, with a 2/3 majority required for passage. The Ethics Committee shall execute only sanction (a) on its own authority. Sanctions (b) through (e) shall be forwarded to Professional Council for concurrence. Professional Council may elect to refer the Ethics Committee recommendation to the Board of Directors for action.
 - (a) A written warning to the Respondent with a copy to the Complainant including a statement that the matter is strictly confidential among the parties and the Ethics Committee. Public disclosure of the warning is neither appropriate nor necessary.
 - (b) The Respondent is excluded from future consideration for Fellow status in the GSMP. If the Respondent is already a Fellow, this status is revoked. (The Awards and Honors Committee is informed in writing, and is required to keep a list of individuals who have been excluded from Fellow status.)
 - (c) The Respondent is excluded from holding any national office in the GSMP, or Chapter office serving concurrently in a national GSMP office. Further, the Respondent is prohibited from speaking to the media or otherwise presenting him- or herself as a representative of the GSMP.
 - (d) The Respondent is expelled from membership or affiliation in the GSMP. After a period of five years, the Respondent may reapply for membership, but any such application shall be reviewed by the Ethics Committee. Approval of the Ethics Committee must occur in addition to other membership application and approval processes.
 - (e) If other censures are deemed appropriate by the Ethics Committee panel, such suggested censures shall be brought to the Ethics Committee for approval (by majority vote) and these will then be reviewed by legal counsel prior to implementation.
- 8.0 If the Committee panel finds in favor of the Respondent, the case is closed unless the Complainant appeals the decision per section 9.0.
- 9.0 The Complainant or Respondent may appeal the decision to the Chair of the Professional Council via the Ethics Committee Chair within 30 days of the party's receipt of the Ethics Committee panel's decision. The appeal shall be decided entirely on the record before the Ethics Committee panel, and no additional evidence shall be submitted on appeal. The appellant may attend the next scheduled Professional Council meeting and give a 15-minute presentation to explain why the

Ethics Committee's decision should be reversed. Only Professional Council members may question the respondent. The Professional Council shall not disturb the Ethics Committee panel's decision absent an affirmative showing by the appellant that the decision was against the weight of the evidence presented in the record. The Professional Council shall vote on the respondent's appeal with three options: affirm the panel's decision, affirm the panel's decision but reduce the discipline, or reverse the panel's decision. The Professional Council's decision on the appeal shall be based on a majority vote, and the decision is final. The Respondent and Complainant shall be notified in writing of the Professional Council's decision within 30 days of the Professional Council meeting which shall be sent by certified mail, with return receipt requested.

- 10.0 Records of Ethics Committee complaint proceedings, including all related documentation and written materials, will be kept in either paper or electronic form for at least 2 years following the conclusion of all related proceedings and appeals.
- 11.0 This policy is intended to serve as a protection to members of the GSMP to assure that the members' due process rights are protected and to serve as a guideline for the Ethics Committee. The Ethics Committee may determine the specific manner in which the provisions of this procedure are to be implemented, provided that due process is protected. Any inadvertent omission or failure to conduct a proceeding in exact conformity with this policy shall not invalidate the result of such proceeding, so long as a prudent and reasonable attempt has been made to assure due process according to the general steps set forth in this policy.

Due process refers to the following basic rights:

- (a) The Respondent will be notified of the charges.
- (b) The Respondent will have an opportunity to be heard at a hearing in which witnesses may appear and may be cross-examined and at which evidence may be introduced.
- (c) An opportunity to appeal shall be available.
- (d) Basic principles of fairness shall govern.

Professions Specific Committee Members:

1. Dr Issahaku Shirazu (Chairman)
2. Dr. Stephen Inkoom
3. Mr. Samuel Nii Adu Tagoe (Secretary)
4. Dr. Francis Hasford
5. Mr. Edem Kwabla Sosu