



Policy Number:	26-07
Policy Name:	Graduate Medical Education: Policy on Resident and Fellow Access to Pharmaceutical/Vendor Representatives/Corporations
Authority:	ACGME Institutional Requirements effective September 3, 2025, section 4.12.
Original Policy Date:	February 27, 2026 Effective Date: 02/27/26
Supersedes:	24-01
Policy Last Revised:	N/A
Attachments:	N/A

PURPOSE

Behavioral Health and Recovery Services, San Mateo County (BHRS-SMC) is committed to providing quality, evidence-based client care and to creating an educational and treatment environment that is free from inappropriate influence by pharmaceutical and device representatives/corporations. This policy establishes standards for the interactions between BHRS-SMC trainees and the pharmaceutical/device industries to safeguard educational integrity, prevent actual or perceived conflicts of interest, and ensure that trainees develop clinical judgement in objective, evidence-based environments free from influence.

BACKGROUND

BHRS-SMC, as a Graduate Medical Education Sponsoring Institution, is responsible for ensuring that Accreditation Council for Graduate Medical Education (ACGME) accredited programs maintain policies that addresses interactions between vendor representatives/corporations and residents/fellows at each of its ACGME accredited programs. This policy applies to all trainees in BHRS-SMC ACGME-accredited programs, as well as all faculty and staff who interact with trainees in a clinical or educational environment.

DEFINITIONS

Vendor: A company demonstrating products or services, including pharmaceutical, device, healthcare, and laboratory companies.

Pharmaceutical/Vendor Representative (PVR): An individual working for a vendor or pharmaceutical company whose purpose is to demonstrate and/or detail its products and services.



POLICY

I. Interaction between PVRs and BHRS-SMC Trainees

- A. PVRs may not be permitted unsupervised access to BHRS-SMC trainees. PVRs are not allowed to contact (including contact by direct in-person visits, telephone, text, email, fax) BHRS-SMC trainees. Trainees must report their clinical supervisor and Program Director of any PVR violations of this policy including PVR attempted contact of trainees.
- B. Faculty and trainees must disclose any financial relationships with vendors.

II. Prohibition of Gifts and Incentives:

- A. BHRS-SMC trainees may not accept gifts, meals, financial incentives, or any other goods or services from PVRs.
- B. PVRs may not distribute items such as trinkets, pens, pads, notebooks, textbooks, software, etc. to BHRS-SMC Trainees.
- C. PVRs may not place nor give to trainees to place any literature for distribution to clients.
- D. BHRS-SMC sponsored program faculty and staff are expected to model compliance with this standard.

III. Drug Samples:

- A. Drug sampling is a marketing tool that encourages physicians and clients to rely on medications that are branded and expensive, but not necessarily more effective than other available drugs. Therefore, drug samples, vouchers or drug specific discount cards are prohibited and cannot be provided to or by BHRS-SMC trainees.

IV. Educational Activities:

- A. PVR sponsored educational sessions, if allowed, must be reviewed and approved by program leadership to ensure that all materials are evidence-based, balanced, and free from promotional bias, and that funding sources are disclosed transparently.

V. Clinical Decision-Making:

- A. BHRS-SMC trainees must develop prescribing and clinical judgement based on objective evidence, not marketing influence. PVR relationships must never be allowed to compromise patient care of trainee education.

VI. Compliance:

- A. Program Directors are responsible for monitoring compliance and ensure that violations are addressed via disciplinary procedures.
- B. The GMEC will review compliance with this policy on an annual basis to ensure continued alignment with ACGME requirements and evolving best practices. Program directors are expected to report to the next GMEC meeting any known violations if they occur prior to the annual review.



SIGNATURES

Approved: _____ *Signature on File*
 Dr. Jei Africa, PsyD, FACHE
 BHRS Director

Approved: _____ *Signature on File*
 Dr. Tasha Souter, MD, FASAM
 BHRS Medical Director

Approved: _____ *Signature on File*
 Dr. Peter Dell, MD
 BHRS ACGME Designated Institutional Official

REVISION HISTORY

Date of Revision	Type of Revision	Revision Description