## 

## Conflict of Interest – Assessment Guide and Record

All sections of this form must be completed prior to submission to: Assistant Director – People and Development

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **EMPLOYEE DETAILS** | | | | | | | | | |
| Name |  | | | | | Date | | | Click here to enter a date. |
| Position |  | | | | | | | | |
| Location/Dep |  | | | | | Phone | | |  |
| Email |  | | | | | | | | |
| 1. **NATURE OF THE POSSIBLE CONFLICT OF INTEREST** | | | | | | | | | |
|  | | | | | | | | | |
| 1. **DETERMINE IF A CONFLICT OF INTEREST SITUATION EXISTS** | | | | | | | | | |
| Consider questions below, if “Yes” to any factors this indicates the conflict of interest should be reported and the context behind the response needs to be elaborated in the next section: | | | | | | | | | |
| **Private Interest:**   |  |  |  | | --- | --- | --- | | Do I have any significant ties, obligations, financial relationships  and/or affiliations with organisations, clubs, groups or individuals who stand to gain or lose from this matter? | Yes | No | | Do I, or anyone associated with me, have a private business (or  secondary employment) interest in this matter? | Yes | No | | Do I have significant family or other relationships with clients,  contractors or other people involved in the matter? | Yes | No | | Does the matter relate to financial (pecuniary) interest as defined in legislation and regulations? | Yes | No | | If there is a private interest, is it sufficiently influential or motivating  so that it may lead to a conflict of interest? | Yes | No | | Do I have doubts about my ability to act impartially in the public interest (i.e. to absolutely ensure that any private considerations do not affect my decisions/actions)? | Yes | No |   **Potential Impacts:**   |  |  |  | | --- | --- | --- | | Could I, or anyone associated with me, benefit now or in the future  from my actions or decisions in relation to the matter? | Yes | No | | Could I, or anyone associated with me, be detrimentally affected  now or in the future by my actions/decisions in this matter? | Yes | No | | Have I received a benefit, gift, donation or hospitality (e.g. meals,  drinks, tickets, etc.) from someone who stands to gain or lose from a decision or action in relation to this matter? | Yes | No | | Am I, or anyone associated with me (e.g. a relative, friend or  associate) likely to gain or lose financially if the matter is resolved a certain way? | Yes | No | | Could the matter have an influence on my future employment  opportunities? | Yes | No |   **Perceptions:**   |  |  |  | | --- | --- | --- | | Would it appear to a neutral or disinterested observer that my  private interests were in conflict with my public duty? | Yes | No | | Could a neutral or disinterested observer reasonably believe my  private interests had influenced me? | Yes | No | | Do I hold any private or professional views and biases that may  lead others to conclude that I am not an appropriate person to deal with this? | Yes | No | | Are there perception risks for the MHC or myself if I remain involved? | Yes | No | | Would I think it was wrong or improper if I saw someone else doing  this? | Yes | No |   **Proportionality:**   |  |  |  | | --- | --- | --- | | If I am not involved, is there a better way to ensure impartiality and fairness and to protect the public interest? | Yes | No | | Is my involvement illegal? | Yes | No | | Is my involvement contrary to MHC policies and procedures and/or  those of the public sector? | Yes | No | | Do I need to seek advice from someone who knows about these  things or who is an objective party? | Yes | No |   **Public Scrutiny Test:**   |  |  |  | | --- | --- | --- | | Is the matter one of significant public interest? Is it controversial and likely to attract significant public attention? | Yes | No | | Would I be unhappy if my private connection or association was  made public? Would I feel ashamed if my private interest was exposed on the evening news or the front page of a newspaper? | Yes | No | | Would I find it hard to defend and justify my actions and/or  involvement if questioned publicly? | Yes | No | | Could my involvement result in negative consequences for others,  the MHC or myself? | Yes | No |   **Promises and Obligations:**   |  |  |  | | --- | --- | --- | | Have I made any promises or commitments, been involved in or  contributed privately to the matter? | Yes | No | | Do I have a current or previous relationship with interested parties that would place me under an obligation? | Yes | No | | Do I have affiliations past or present (e.g. political, union, profession, religious) that could place me under an obligation? | Yes | No | | | | | | | | | | |
| 1. **CONTEXT BEHIND ANY ‘YES’ RESPONSES** | | | | | | | | | |
|  | | | | | | | | | |
| 1. **TYPE OF CONFLICT** | | | | | | | | | |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  | An actual conflict |  | A perceived conflict |  | A potential conflict | |  | A financial conflict |  | A partiality conflict |  | A role conflict | |  |  |  |  |  |  | | | | | | | | | | |
| 1. **PROPOSED STRATEGY FOR RESOLUTION/MANAGEMENT** | | | | | | | | | |
|  | | | | | | | | | |
| 1. **ACKNOWLEDGEMENTS AND APPROVALS** | | | | | | | | | |
| **Employee Signature[[1]](#footnote-1)** | | |  | | Date | | Click here to enter a date. | | |
| **Direct Manager Endorsement** | | | | | | | | | |
| Name | |  | | | Position | |  | | |
| Signature | |  | | | Date | | Click here to enter a date. | | |
| **Assistant Commissioner Endorsement** | | | | | | | | | |
| Name | |  | | Department | | | |  | |
| Signature | |  | | Date | | | | Click here to enter a date. | |
| **Forward to Manager, Audit and Risk Management** | | | | | | | | | |
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1. This completed form to be stored in container MHC-01780 and the Conflict of Interest Register (MHC16/5959) must be completed. [↑](#footnote-ref-1)