Conflict of Interest Management Plan Template

**2022/25 Skills Assure Supplier**

## Skills Assure Supplier Conflict of Interest Management Plan

Clause 14 of your Skills Assure Supplier (SAS) Agreement requires you to disclose any Conflict of Interest, or risk of a Conflict of Interest to the Department immediately.

“***Conflict of Interest***” means having an interest, affiliation, or relationship, or owing an obligation (whether personal, financial, professional, or otherwise) which conflicts, may reasonably have the potential conflict, or may reasonably be perceived as conflicting, with the ability of the Supplier or its Personnel to perform its obligations under the Skills Assure Supplier Agreement/s fairly or objectively.

The Department takes the view that any subcontract or arrangement between a SAS and a Related Party immediately create actual (real), potential and/or perceived Conflicts of Interest, which impact, or are likely to impact, compliance with the terms of the SAS Agreement and the Department’s Policies.

Where a Conflict of Interest has been identified and declared to the Department, a Conflict of Interest Management Planmust be developed using the SAS Conflict of Interest Management Plan Template.

1. Any financial or beneficial interest held by yourself, your partner or dependents in a recruitment agency or labour hire company;
2. Any arrangement between the RTO or any directors, shareholders, key personnel or related entities of the RTO and a recruitment agency or labour hire company, or any directors, shareholders, key personnel or consultants of a recruitment agency or labour hire company, involving the referral of students;
3. Any arrangement offering valuable consideration with a view to securing the enrolment of a student under the Agreements. Valuable consideration includes, but is not limited to, a financial payment, the offer of a gift, reward, tangible, or non-tangible benefit.

To be clear, in all instances where a Conflict of Interest is identified it will be necessary to implement a plan to manage your conflict.

It is important to have a clear understanding of what a Conflict of Interest Management Plan is designed to achieve and who will be affected by it.

The plan needs to be tailored to your needs and can be identified by examining the functions of your organisation, the activities performed by staff and external affiliations that may pose a conflict with your obligations as a SAS.

You are required to use the *Skills Assure Supplier Conflict of Interest Management Plan Template* (commencing at page 3 of this document). No other format will be accepted for the purposes of a Performance Review or otherwise).

SAS are not required to submit the Conflict of Interest Management Plan to the Department unless requested to do so in accordance with the SAS Agreement. Accordingly, please ensure that you retain any your Conflict of Interest Management Plan/s and supporting documents and ensure they are available upon request of the department.

If you are uncertain as to whether you have any Conflicts of Interest under your SAS Agreement/s and/or how to effectively manage Conflicts of Interest, the department encourages you to seek independent legal advice. The Department cannot provide you with legal advice.

## Skilling Queenslanders for Work

Where you have identified a Conflict of Interest relating exclusively to delivery under the Skilling Queenslanders for Work (SQW) program, you are only required to complete parts 1, 2, 3 and 7 of the Conflict of Interest management plan template.

## Conflict of Interest Statutory Declaration

Once you have implemented a Conflict of Interest management plan, you must submit a *Conflict of Interest Statutory Declaration* to the Department to confirm that you are appropriately managing any conflicts of interest. Please contact Contract Management to obtain the *Conflict of Interest Statutory Declaration* via email to contractmanagement@desbt.qld.gov.au.

## More Information

The *2022/25 Skills Assure Supplier Guide to Conflict-of-Interest Management Plans* provides an overview of the ways in which a Conflict of Interest can be effectively managed – whether actual, perceived, or potential. This can range from registration of any potential or perceived conflict with the SAS, to removal of the individuals concerned from any relevant decision making relating in the case of a direct conflict.

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| **Skills Assure Supplier Conflict of Interest Management Plan Template** Note: you must use this Conflict of Interest management plan template (no other format is acceptable).  |
| **Part 1 – Skills Assure Supplier Details**  |
| **Legal Name of Skills Assure Supplier** |  |
| **ACN (if applicable)** |  |
| **ABN** |  |
| **RTO Number** |  |
| *this symbol indicates you need to attach further documents to this document*  |
| **Part 2 – Details of the Organisation and/or Individuals with Conflict of Interest**Please provide details of the parties involved in the conflict of interest |
| **Organisation:** |
| **ACN:** |  | **ABN** |  |
| **Legal Name:** |  |
| **Relationship/s with SAS:** |  |
| **Details/comments:** |  |
| **Individual:** |
| **First Name:** |  | **Surname:** |  |
| **Relationship/s with SAS:** |
| **First Name:** |  | **Surname:** |  |
| **Relationship/s with SAS:** |
| **First Name:** |  | **Surname:** |  |
| **Relationship/s with SAS:** |
| **Details/comments:** |
| If required, please duplicate this section to include multiple individuals related to the conflict. |
| **Part 3 – Identify the program the Conflict of Interest relates to** |
| **Program/s conflict is related to:** | User Choice |[ ]  VETiS |[ ]
|  | Queensland VET Investment  |[ ]  Other (please specify below) |[ ]
|  | Skilling Queenslanders for Work\* |[ ]  Click or tap here to enter text. |
| If your conflict relates to SQW delivery only, please provide details below and then proceed to part 6, Declaration.**Click or tap here to enter text.** |

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| **Part 4 – Identify the type of Conflict of interest**Please provide full details of the conflict of interest identified including details about what the conflict relates to, and whether the conflict is Actual, Perceived or Potential. *For further information refer to Guide to Conflict of Interest Management Plans, Stage 1, pages 2-4* |
| **Type of conflict:** | Actual | [ ]  |
|  | Perceived |[ ]
|  | Potential |[ ]
| Click or tap here to enter text. |
| **Part 5 – Management Strategies** Please select the relevant checkboxes which apply to the strategy chosen to manage the conflict. In the free text section, provide detailed information regarding how this strategy will be implemented.*For further information refer to Guide to Conflict of Interest Management Plans, Stage 1, pages 4-6*Please retain a copy of your Conflict-of-Interest Management Plan detailing your conflict-of-interest management strategy  |
| Register |[ ]  Click or tap here to enter text. |
| Restrict |[ ]   |
| Recruit |[ ]   |
| Remove or Relinquish |[ ]   |
| Resign |[ ]   |
| Other |[ ]   |
| **Part 6 – Supporting Documentation**identify and retain all relevant supporting documentation to accompany your management plan (\* required) |
| \*Current and historical ASIC extract of the conflicted party (where a party to the conflict is a Company other than the SAS) |[ ]   |
| \*Your Conflict-of-Interest Policy  |[ ]  Shape  Description automatically generated with low confidence |
| \*Conflict of Interest Management Plan |[ ]   |
| \*Your Conflict-of-Interest Register |[ ]   |
| Any written agreements/contract/s associated with conflicted party |[ ]   |
| Copies of company resolution/s adopting conflict of interest policy |[ ]   |
| Company constitution  |[ ]   |
| Other (specify below) |[ ]   |
| Click or tap here to enter text. |  |

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| **Part 7 – Declaration by Skills Assure** **Supplier** (this section must be signed by the person with the declared conflict as well as a Director of your organisation or Chief Executive Officer as currently listed on www.training.gov.au) |
| **\*\*\*\*IMPORTANT\*\*\*\**** **This form may be executed in counterparts, each of which, taken together, will constitute one form.**
* **The witness in this form must not be related to the declaring individual, which is taken to mean any spouse or relative.**
* **The form must be retained by you along with any attachments referenced in the form.**
 |
| **I, [insert name of person declaring the conflict of interest], certify that all information provided on this form is complete, true and correct:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | **Position:** |  |
| **Signature:** |  | **Date:** |  |
| **Witness Name:** |  |
| **Signature:** |  | **Date:** |  |

**I, [insert name of Director or Chief Executive Officer as listed on** [**www.training.gov.au**](http://www.training.gov.au)**] certify that all information provided to you is complete, true and correct:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | **Position:** |  |
| **Signature:** |  | **Date:** |  |
| **Witness Name:** |  |
| **Signature:** |  | **Date:** |  |

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