

ECCE CONFLICT OF INTEREST DOCUMENTATION: updated July 2017

CONSTITUTION:

- 8.6 A **conflict of interest** on the part of a member in any matter under discussion must be declared by the said member either before or during the meeting. In all cases, the member will be excluded from the meeting for the said matter.

A *perceived conflict of interest* of any member in any matter under discussion can also be raised by any member of the Council either before or during the meeting. If this objection is supported by a simple majority vote, then the said member will be excluded from the meeting for the said matter.

3.3 **Requirements for ALL members of the Council:**

- 3.3.5 NOT engage in activities which constitute a conflict of interest with the Council's affairs.

Members of the CoA must:

- 10.1.3.2 Not engage in activities that constitute a conflict of interest with the affairs of the CoA. (See CoA conflict of Interest document below)

EVALUATION TEAM MANUAL: (See Evaluation Team Manual Conflict of Interest Statement below)

- 4.2 On appointment, a member of an Evaluation Team will be required to sign a Conflict of Interest Statement to the effect that either there is or there is not a declaration to be made. Where a declaration is made, this will be reviewed by the Executive and a decision made as to whether the appointment should proceed. In the case that it does so, the written declaration will be made known to the institution/programme before the final decision of the Executive (Pt.4, 1.4.2 and 1.4.3).

- 2.8 No conflict of interest considered by the Executive that would compromise the objectivity and fairness of decisions, judgements and opinions made as part of the evaluation process

STANDARDS:

1.4.2 Proposed members of the Team are required to sign a written declaration to the Executive Committee regarding any personal or professional interest, which might, or might be perceived to, impact on their capacity to undertake impartially their role as members of the Evaluation Team. If such a declaration is made, and it is decided that the member should continue to participate, this declared interest will be disclosed to the

institution. Where a proposed member has given informal advice to an institution, this must also be declared to the Executive Committee. Persons from institutions/programmes that have given substantial advice or significant parts of their curriculum to another institution/programme may be prevented from participating on the evaluation team pending a decision by the Executive.

EVALUATION TEAM MANUAL: AGREEMENT TO SERVE AND MAINTAIN CONFIDENTIALITY FOR TEAM MEMBERS AND OBSERVERS ON ECCE EVALUATION VISITS (revised July 2017)

Team members

I agree to be a member of the Evaluation Team to visit between

..... and

I understand that all information I collect before and during the visit is strictly confidential and is only to be used in connection with the evaluation process and should be revealed only to Evaluation Team Members. Furthermore, I understand that the documentation submitted by the Institution is the property of the Institution and only to be used with the permission of the Institution.

Name.....Date.....

Signature.....

Conflict of Interest Statement

A Conflict of Interest occurs whenever there is a conflict (or appearance of a conflict) between the personal or private interests and the professional responsibilities of ECCE Evaluation Team Members. Such conflicts of interest include, but are not limited to, the Evaluation Team Member being an employee (either in a permanent, visiting or temporary capacity) of the institution within the last 5 years, or related to an employee or student of the institution being evaluated, or when the Evaluation Team Member served as an external examiner currently or during the previous 5 years for the Institution, or when the Evaluation Team Member is a current student of the institution being evaluated or graduated from the institution within the last 5 years.

I declare that there is no conflict of interest for me as a member of the Evaluation

Team visiting

Name.....Date.....

Signature.....

I wish to declare the following that may influence my role and constitute a conflict of interest on the Evaluation Visit. *

.....

.....

Name.....Date.....

Signature.....

Conflict noted by Executive and not deemed sufficient to prevent member performing duties satisfactorily.

Signed..... President

* Conflicts of interest declared on this form will be made known to the ECCE Executive and to the Institution being evaluated.

Below is the Conflict of Interest form updated in 2017.

Conflict of Interest Disclosure Form: Commission on Accreditation (CoA)

Definition of a Conflict of Interest

A Conflict of Interest occurs whenever there is a conflict (or appearance of a conflict) between the personal or private interests and the professional responsibilities of ECCE CoA members. A conflict of interest may compromise the objectivity and fairness of accreditation decisions, judgments and opinions made as part of an evaluation process. Conflicts of interest arise when the CoA member is an employee (in a permanent, visiting or temporary capacity), or related to an employee or student of an institution or programme currently being evaluated for accreditation or re-accreditation, or when the CoA member serves as an external examiner currently or during the previous 5 years for the institution, or when the CoA member is a current student of the institution or programme or graduated from the institution/programme within the last 5 years.

Disclosing and Managing Potential Conflicts of Interest

ECCE CoA members will notify the ECCE President if they have a potential conflict of interest – or if they believe anyone else is facing a potential conflict of interest. The ECCE President will notify the other ECCE executive members. If it is determined that a true conflict of interest exists, the CoA member must remove him/herself from all activities relating to the accreditation process for the involved institution/programme. If the Chair of the CoA has a conflict of Interest, the Vice-Chair will take over all duties pertaining to the accreditation process of the relevant institution/programme.

Conflict of Interest Statement:

I, _____ (name) understand that this Conflict of Interest Policy for the European Council on Chiropractic Education (ECCE) CoA pertains to all members, including the Chair and Vice-Chair.

I have read the Conflict of Interest Policy and understand that it is my obligation to notify the ECCE President of any potential or real conflicts of interest. I also understand that I may be asked to resign from the ECCE if I do not disclose potential conflicts of interest.

I, _____ (print name), understand this Conflict of Interest Statement and agree to abide by this Policy.

SIGNATURE: _____

DATE: _____