



## CONFLICT OF INTEREST POLICY

### **Purpose**

This policy outlines Grief Journeys Ltd's approach to managing actual, perceived or potential conflicts of interest. Grief Journeys aims to conduct its operations in a transparent, accountable and impartial manner, and to ensure that members, volunteers and participants are treated equitably and fairly. All members of Grief Journeys' community are expected to act with integrity, and not inappropriately influence a decision or process, or act according to their own personal benefit.

### **Scope**

This policy applies to all members of Grief Journeys who may be in a position to inappropriately influence decisions according to their own interests, including Directors, members, contractors, and volunteers.

### **Definitions**

*Conflict of interest:* a situation where there is a divergence between the individual interests of a person and their professional responsibilities such that an independent observer might reasonably conclude that the professional actions of that person may have been unduly influenced by their own interests. This includes actual, perceived or potential, and financial and non-financial, conflicts of interest.

### **Policy**

1. Grief Journeys is committed to fostering the highest standards of administrative and professional conduct, aligned with its common objects and priorities. We recognise that an apparent conflict of interest may create bias and be damaging to individual members, and adversely affect the reputation and standing of Grief Journeys and its ability to operate effectively.
2. All Grief Journeys office bearers are to seek independent advice, disclose, and take reasonable steps to avoid, conflicts of interest. This includes, but is not limited to, conflicts of interest in relation to:

- Grant applications,
  - Financial transactions,
  - Decision making by Directors, and
  - Authorisation of expenditure.
3. Grief Journeys ensures all Directors, members, contractors and volunteers are aware of situations that constitute a conflict of interest, how to avoid such situations, and how to disclose conflicts of interest.
  4. Declaration of conflicts of interest is a standing agenda item for Directors’ meetings.
  5. Grief Journeys will seek to resolve conflicts of interest to ensure ethical governance and to have minimal impact on its members.
  6. When a conflict of interest arises, Directors and contractors are responsible for disclosing the conflict to the Chairperson. If the Chairperson has a conflict of interest, they are to declare the conflict of interest to another Director. Declared conflicts of interest using the form in Appendix one are assessed by a meeting of Directors on a case-by-case basis, taking account of the particular context and nature of the conflict.
  7. Failure to disclose: A failure to follow this policy may be considered serious misconduct and be subject to disciplinary action, depending on the nature of the conflict of interest. The consequences of serious misconduct may include termination of the Director’s term, following the process outlined in the Constitution.
  8. Disclosures of conflict of interest by Directors or contractors, and written advice on steps to be taken, will be recorded in meeting minutes.

**Responsibilities**

The **Directors** have responsibility for the oversight of policy implementation.

**All members of the Grief Journeys’ community** are responsible for ensuring that their activities and interests do not conflict with their obligations and functions and must disclose actual, perceived or potential conflicts of interest in writing to the Chairperson or other Director as appropriate .

**Related Documents**

Constitution

**Version Control**

<b>Document:</b>	Conflict of Interest Policy		
<b>Approved by:</b>	Directors	<b>Date:</b>	September 2022

<b>Version:</b>	V1.0	<b>Replaces Version:</b>	NA	<b>Next Review:</b>	2022
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**Appendix One**

DECLARATION REGARDING A CONFLICT OF INTEREST

To: \_\_\_\_\_ (Chairperson/Director)

**Declaration of a Conflict of Interest**

I declare the following actual, perceived or potential conflict of interest in the discharge of my duties in Grief Journeys Ltd:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Signature**

**Full name**

**Date**