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| **Staff Student Relationship - Conflict Management Plan** |
| Following a declaration from a member of staff, managers can choose to use this template to create a conflict management plan. |
| The conflict of interest will be managed, mitigated or eliminated by: |
| * Disclosing the conflict of interest to the relevant areas will manage the conflict.
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| * Putting in place the following **Conflict Management Plan**
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| Details of the Plan:*Please use the below prompts to create your conflict management plan;** ***Restrict*** *- where a conflict of interest exists or is perceived to exist it will be necessary to ensure that the member of staff does not;*
	+ *have sole responsibility for aspects of the student’s work which require judgement, e.g. academic assessment;*
	+ *be solely in a position to take decisions affecting the student, including the provision or withholding of any of the following: facilities for research; the allocation of places on courses, bursaries or scholarships for research;*
* ***Recruit*** *– use a third party or increase numbers on panel to oversee impartiality.*
* ***Remove*** *– the removal of the staff member from decision making or relevant activity related to this.*
* ***Relinquish*** *– the staff member relinquishes the interest, for example where there is a business conflict of interest*
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| **DECLARATION BY STAFF MEMBER**  |
| I, (print full name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ have disclosed all relevant information to the conflict of interest and hereby agree to:* Update this disclosure on an annual basis or until such time as the conflict ceases to exist; and
* Comply with any conditions or restrictions required by the University (as set out above, following discussion with me) to manage, mitigate or eliminate any actual, potential or perceived conflict of interest.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date / / |
| **ENDORSEMENT BY MANAGER** |
| I, (print full name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ have discussed this conflict management plan with the staff member concerned and endorse the conflict management plan outlined above**.**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date / /**I,**  |
| **APPROVAL BY PVC/DIRECTOR OF SERVICE** |
| I, (print full name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ have reviewed the conflict management plan outlined and (**delete as appropriate**):* Believe that the conflict management plan outlined will adequately manage, mitigate or eliminate the conflict of interest and will continue to monitor the situation.
* Cannot adequately resolve the conflict of interest with the staff member concerned and have referred the matter to the manager. Manager to reconsider the plan with the employee.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date / / |
| ***This Disclosure Statement must be stored confidentially on the staff member’s*** ***ITRENT file, in accordance with the University’s Policies.*** |