

Conflict of Interest

Operational Guidance

20 July 2012





CONTENTS

1	Policy intent	3
2	Policy context	4
3	Document context	5
4	Definitions	5
5	Operational Guidance	6
	5.1 Principles	6
	5.2 Disclosure	11
	5.3 Personal relationships	12
	5.4 Gifts, benefits and hospitality	12
	5.5 Use of position	13
	5.6 Use of information	14
	5.7 Influence	14
	5.8 Managing conflicts	15
6	Administration	17
	6.1 Qld Health Chief Executive (Director General)	17
	6.2 Hospital and Health Board Chair responsibilities	17
	6.3 Health Service Chief Executive (HSCE) responsibilities	17
7	More information	18



Section 1: Policy intent

Public sector policies on ethical behaviour of public officers and persons acting with public sector responsibilities include policies on conflicts of interest. Some of those policies are referred to in this Guideline. This Hospital and Health Board (HH Board) Conflict of Interest – Operational Guidance establishes the expectations regarding the conduct of members of a HH Board in Queensland in respect of conflicts of interest.

Public confidence in the integrity of a HH Board is essential to the accountability and efficient operation of a HHS within the provisions of the *Hospital and Health Boards Act 2011* (the HHB Act). Public confidence may be jeopardised if there exists or emerges a public perception of a conflict of interest for a HH Board member.

This Conflict of Interest – Operational Guidance is intended to apply to all members of a HH Board, and particularly to Public Sector employees. **Public Sector Employees** is defined in section 4 of the guideline.

In particular, Public Sector employees must be aware that their private interests as well as their fiduciary duties to their public sector employer organisation could conflict with their duties and responsibilities to a HH Board. Non-public sector members of a HH Board also must be aware that their personal and private interests could conflict with their duties and responsibilities to a HH Board.

A HH Board member has a duty:

- Of disclosure to the HH Board Chair of real, perceived or potential conflicts of interest
- To take appropriate action on the conflict of interest according to these guidelines.

A HH Board Chair has a responsibility to:

- Determine whether there is or could be a conflict of interest or a perceived conflict of interest
- Determine what action needs to be taken where there is a conflict.

A HH Board Chair should disclose any personal conflict of interest to the Minister.

The selection and appointment of a HH Board member may require the disclosure by an applicant of any real, perceived, or potential conflict of interest. Under the circumstances of the interest, it may be necessary to require a successful applicant to divest interests that present real or potential conflicts in the performance of their duties.



Section 2: Policy context

The Queensland Government Code of Conduct for the Queensland Public Service applies to all Queensland public sector employees, as well as any person who is not subject to the *Public Sector Ethics Act 1994* but who works in any capacity for a Queensland public service agency¹. This Code of Conduct also applies to a Health Services Contractor as a condition of their terms of engagement. The *Public Sector Ethics Act 1994* applies to all individuals who are appointed to a HH Board, including Queensland public sector employees.

A member of a HH Board who is an Australian Government Public Sector employee is bound by the *Public Service Act 1999 (Cth)*, and the Australian Public Service (APS) Values and Code of Conduct under that Act². The related guidelines are established in APS Values and Code of Conduct in Practice³.

A member of a HH Board who is a Local Government employee is bound by the Local Government Act 2009 and its provisions in respect of the *Public Sector Ethics Act 1994*⁴.

Members of a HH Board will be a “Designated Person” as defined in the *Integrity Act 2009*, and may seek the advice of the Integrity Commissioner in respect of a conflict of interest issue⁵.

A member of a HH Board is required to act impartially and in the public interest in performing the member’s duties⁷. A member of a HH Board, or a committee established by the HH Board, is required to follow the provisions for the disclosure of interests as outlined in the *Hospital and Health Boards Act 2011*⁸ in the event that the member has a direct or indirect interest in an issue being considered by the HH Board or Committee which could conflict with the proper performance of the members duties in relation to the consideration of the issue.

A member of a HH Board may also be bound by the information privacy principles of the *Information Privacy Act 2009*, the *Public Interest Disclosures Act 2010* and where applicable, the *Public Service Act 2008*. Australian Government Public Service employees who are a member of a HH Board also are subject to information privacy and disclosure provisions under legislative and statutory requirements detailed in the APS Values and Code of Conduct in Practice.

A member of a HH Board will be subject to the *Crime and Misconduct Act 2001* in respect of the persons conduct⁹.

¹ Code of Conduct for the Queensland Public Service, January 2011, p3

² APS Values is in s10(1) and APS Code of Conduct is in s13

³ See <http://www.apsc.gov.au/values/conductguidelines.htm>. In particular, The guidelines at Section 4, Chapter 10 address Conflict of Interest. Other chapters refer to other related ‘Interests’ matters.

⁴ *Local Government Act 2009*, s13 (2) (i) which states that a Local Government employee is required to comply with the code of conduct under the *Public Sector Ethics Act 1994*

⁵ *Integrity Act 2009*, Part 1 s12

⁶ *Integrity Act 2009*, Part 2 s15; A Conflict of Interest Issue is defined in Part 1 s10

⁷ *Hospital and Health Boards Act 2011* s31

⁸ *Hospital and Health Boards Act 2011 Schedule 2, s9*

⁹ *Crime and Misconduct Act 2001* s14



Section 3: Document context

This Guideline is consistent with all other Queensland and Australian Government publications and documents relating to ethical behaviour of public officers and conflict of interest identification, disclosure and management. Its purpose is to assist HH Board members in addressing conflicts of interest issues that may arise in the course of HHS business operations, and their personal obligations and responsibilities.

In particular it addresses conflicts of interest that may arise in respect of a HH Board member who has concurrent duties and responsibilities as a Queensland public sector employee.

Persons who have Queensland public sector duties and responsibilities in the context of their employment would normally be expected to be bound by the Code of Conduct for the Queensland Public Service. This Guideline will apply to matters of conflict of interest in addition to any other requirements of a person's employment.

Section 4: Definitions

In this document and within the intent of this document and its related policy, the following definitions apply:

“Health Services Contractor” means a person other than a public sector employee who is engaged under a form of services agreement, employment contract, or other form of services contract either full time or part time, to provide health services to the Queensland public sector.

“Hospital and Health Board” is defined in the *Hospital and Health Boards Act 2011* and means the governing body of a Hospital and Health Service as outlined in the National Health Reform Agreement¹⁰.

“Official duties” means the duties and responsibilities stated in the terms of appointment of a member of a HH Board including the roles, tasks and assignments of a HH Board member as may be assigned to them from time to time and which might reasonably be publicly expected in fulfilling the duties of their appointment.

“Public sector employee” means an employee of federal, state or local government; employee of a semi-government organisation (either federal or state), including a statutory authority; persons employed under the *Hospital and Health Boards Act 2011* or an employee of a state or local government owned corporation or college¹¹.

“Public resources” means goods, services, materials, facilities, assets, and human resources of a HHS or the Queensland Government, or other public property, public resources, and public facilities.

¹⁰ National Health Reform Agreement between the Commonwealth of Australia and the States and Territories (August 2011), Clauses D11-D21

¹¹ Note that the Code of Conduct for the Queensland Public Service 2011 has a broader definition to include volunteers, students, contractors, consultants or anyone who works in any other capacity for a Queensland public service agency.



Section 5: Operational guidance

The nature of conflicts of interest can be extremely varied; but include pecuniary interests, and non-pecuniary interests such as legal interests, social interests, associations with external organisations, family interests, and non-direct personal interests including moral interests. While human nature makes it difficult to be completely objective, in carrying out one's official duties, public officers must not allow themselves to be improperly influenced by direct or indirect personal interests.

In performing their official duty, a member of a HH Board must:

- Recognise and deal with any conflict of interests, including perceived conflicts of interest
- Deal consistently and even-handedly with matters within their responsibility
- Consider seeking appropriate integrity advice
- Not compromise the standing of the Queensland Government or their HH Board by accepting inappropriate gifts or hospitality
- Be scrupulous in their use of public property
- Maintain a fiduciary duty to their public sector organisation in the matters of the responsibilities of their employment, appointment, or association
- Comply with all duties and obligations including the Queensland Government's Code of Conduct, or the APS Values and Code of Conduct, or a Code of Conduct specified under the terms of their appointment, whichever is applicable.

5.1 Principles

As a general principle of governance, decision-making should assure probity through integrity, fairness and honesty. This includes integrity in managing conflicts of interest. The following principles apply to conflicts of interest in a HH Board.

Principle 1

A HH Board member should perform the official duties of his or her office impartially and objectively, uninfluenced by fear or favour.

Hint:

Within conflicts of interest, perception is most important. In considering the existence and nature of a conflict of interest, the established test is an objective test of whether a reasonable member of the public, properly informed, would conclude that inappropriate factors could influence an official action or decision. The objective test principle applies to these Guidelines.

Example 1:

A health service employee who is employed by a Queensland government department is appointed to work within a HHS. That person is also appointed as a member of a HH Board.

The person is a departmental representative on a Radiopharmaceuticals Advisory Group for the state-wide strategic development, management, and implementation of radiopharmaceuticals. In the interests of the strategic positioning of supply across Queensland health facilities, the Committee identifies three supply sites, none of which is located within the person's HHS.

The person might argue a sub-optimal strategic solution to benefit their HHS, and while it will advantage the clinical management in the HHS, it will disadvantage other HHSs and the overall equity of the state-wide clinical management.

The person would be acting without objectivity or impartiality, and not in the best interests of the State.

Principle 2

A HH Board member should avoid situations in which the member's personal and private interest, whether pecuniary or otherwise, conflicts or might reasonably be thought to conflict with the member's public duty.

Example 2a:

A member of a HH Board is a member of an industry association, and is seeking election to the association executive management committee. The person should not seek to represent their election or appointment using their HHS position as a defining reason.

Example 2b:

In their regular employment as a health services employee, a HH Board member may be employed either by the HHS or by the State. In either case the person is likely to be subordinate to the Health Service Chief Executive (HSCE). The HSCE is appointed by the HH Board, and therefore a conflict of interest exists within the duties of the HH Board member in respect of matters of managing the performance of the HSCE.

In such cases, the interest must be disclosed by the member, and it is possible that the member is unable to participate in matters of performance of the HSCE while that member is subordinate to that HSCE.



Principle 3

When a HH Board member possesses, directly or indirectly, an interest which conflicts or might reasonably be thought to conflict with the member's public duty, or to influence improperly the member's conduct in the discharge of the member's responsibilities in respect of some matter of official duty with which the member is concerned, the member should disclose that interest as provided in this Guideline.

Example 3:

The HH Board enters into an agreement with the Commonwealth to select two suitable health services to provide indigenous defined health care within the HHS, and to oversee the performance management of the services as well as the grants provided. There are four potential service providers and only two will be selected.

A member of the HH Board has previously worked in a health care role with one of the four potentially suitable services, including assisting with grant funding applications. The person should disclose details of the relationship to the HH Board Chair, and should not act in any related matter until the HH Board Chair has determined the person's ability to do so.

Principle 4

A HH Board member should be scrupulous in the member's use of public materials; and should not permit or condone their misuse by other persons.

Example 4:

Within the HHS certain outpatient clinical services are provided both in suburban secondary health care clinics as well as at the primary health care facilities. It was noted within the HHS that the health service delivery of patient care that contributed to co-morbidity could be more efficiently and effectively managed by re-organising the health care services and collocating certain services.

A HH Board member provides services in clinical health care at one of the affected facilities. Such a reorganisation would mean that the HH Board member would travel further from home to the workplace.

The person should set aside their personal interests and the related efficiency impacts, disclose the related interests and conflict, and contribute objectively and impartially to the most efficient and effective outcomes.



Principle 5

A HH Board member should not use information obtained in the course of their official duty to gain directly or indirectly a pecuniary advantage for the member or for any other person.

Example 5:

The Commonwealth is investigating the potential to introduce a new model of health care to regional and remote communities. The Commonwealth consults with the relevant HHSs on the matters, and as the information crystallises, there is a strong probability that the initiative will proceed. It will involve staffing and accommodation for the long term, and it is likely to increase rental accommodation demand and returns in the affected communities.

With such knowledge, a HH Board member might be tempted to use the information for themselves or a relative or colleague to make personal gain from real estate investment.

Such use of information would be a conflict of interest and misuse of information.

Principle 6

When an interest of a family member or family relative of a HH Board member is involved, the HH Board member should disclose the interest(s), to the extent that they are known to that member. The HH Board member should seek independent advice on the relevance of the interest of the family member or relative.

Example 6:

The son-in-law of a HH Board member is appointed as an Executive Director of a major primary health care service in the HHS.

The HH Board member should not only disclose the relationship as soon as it is known, but also when matters arise which directly or indirectly affect the related interests of the member and the son-in-law, fully disclose those interest to the chair, and take no role in the decisions or processes until formally advised by the HH Board Chair.



Principle 7

Whether for the member, or for the member's family, or for an associate of the member, a HH Board member should not solicit or accept any advantage, promise of advantage, remuneration or benefit for the discharge of the member's duties over and above the official remuneration or benefit.

Example 7:

The supplier of computer systems to the HHS is likely to do so under more advantageous pricing and quality standards than normally available for personal or private use. It would be a conflict of interest and misuse of the position of a HH Board member were the person to solicit from or make any representations to the IT supplier for an advantageous deal to supply a computer to the person or a relative or associate of the person.

Principle 8

Except as may be permitted under the approved entitlements applicable to the member's official duty, a HH Board member should not solicit or accept any gift, hospitality or benefit including concessional travel, in connection with the discharge of their official duty.

Example 8:

A supplier of medical equipment and related services is aware that a HH Board is reviewing their current arrangements for the related health care. The supplier decides to hold a technical workshop to demonstrate the care and cost benefits of their equipment and services; and convenes the workshop at a Noosa conference facility over two days, sponsoring the travel and accommodation for the invitees, as well as providing the workshop at no cost.

A HH Board member, who is not involved in the related health care delivery, considers that they also should attend the workshop and requests a personal invitation from the supplier.

Similarly, another HH Board member who is invited, asks the supplier to include invitations for three of the member's colleagues. There may be reasonable justification to attend the workshop for the importance of the related information; but the invitation acceptance or solicitation leading to the associated benefits both personally and for colleagues may be a conflict of interest.

These matters should be discussed and resolved with full transparency and full disclosure of the benefits as well as the risks of the benefits compromising the supply decision-making processes.



5.2 Disclosure

Transparency in public sector offices and functions is a fundamental requirement of accountability in the public interest, and for auditability. It is an inappropriate action for a Public Sector employee to avoid openness and transparency in a conflict of interest.

Transparency is achieved through disclosure.

Hint:

A person who becomes aware of a real, perceived or potential conflict of interest should disclose the interest and related matters. Such disclosure can be handled sensitively, and where necessary, confidentially.

It is not the prerogative of the person to determine that they know of and can manage the issue and any conflict. Disclosure is essential to meeting the objective test.

- Pecuniary Interests register:

A Pecuniary Interests Register is to be established and maintained by the Health Service Chief Executive (HSCE) of a HHS. A HH Board member is required to disclose for the register all pecuniary interests; and update their disclosure at least annually.

- Other employment:

A member of a HH Board must disclose in writing to their HSCE the essential details of their employment in any paid or voluntary capacity with any organisation other than the HHS. This also might include employment with the State or the Commonwealth or related public sector entity. Such disclosure should be updated at least annually.

- Contracted interests:

A member of a HH Board should disclose interests in which the member has a contractual obligation or terms of any agreement that could or could be seen to impact upon the member's official duties or responsibilities. This might also include contracted responsibilities with the State or the Commonwealth. Such disclosure should be updated at least annually.

- Personal relationships:

A member of a HH Board should disclose the names and activities of family and other personal relationships that could or could be seen to impact upon the employee's responsibilities. The nature and timing of such disclosure is to be in accordance with these Guidelines.

- Memberships and associations:

A member of a HH Board should disclose in writing to their HSCE the essential details of their membership in any membership-based association or institution, and any executive or committee appointment held. Such disclosure should be updated at least annually.



- Other private interests:

When a private interest arises which may influence the objectivity and/or impartiality of a member of a HH Board, the member should disclose the interest in writing to their HSCE. In this context a private interest may arise not only in respect of the member's personal, professional or business interests, but also the personal, professional or business interests of individuals or groups with whom they are associated.

5.3 Personal relationships

A member of a HH Board may have family or other personal relationships with people or organisations engaged in activities that could have an interest in issues with which the member is dealing in the course of the member's official duty. A member of a HH Board is entitled to hold such relationships, but should be open about them.

Hint:

Examples could include family members, close associates, associated organisations, media, lobbyists, or people who have business dealings within the HHS.

5.4 Gifts, benefits, and hospitality

Queensland public sector officers are bound by strict rules which apply to gifts, benefits, and hospitality¹².

The scope for gifts, benefits and hospitality is broad, and in many cases a member of a HH Board may consider that the provision of gifts, benefits and hospitality, some of which may have both real and intrinsic value, is commonplace, and in the normal course of business.

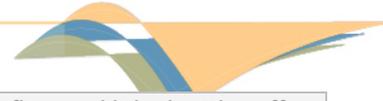
Both the offer and potential receipt of any gift, benefit or hospitality must be transparent and open.

A member of a HH Board must be able to demonstrate that they cannot be improperly influenced in the performance of their official duty by any offer(s) or provision of gifts, benefits, hospitality, or other inducements.

The HSCE of a HHS should establish a gift register, and the acceptance and registration provisions of the Queensland Public Service Directive on Gifts and Benefits should apply. A member of a HH Board must disclose gifts and benefits in accordance with the prescribed Directive. The acceptance of any gift or benefit in accordance with the Directive can occur only retrospectively of the disclosure.

¹² Public Service Commission, Directive 22/09, Gifts and Benefits; also 22/09 Gifts and Benefits Guideline

Hint:



There is a common characteristic within all policy and guidance on gifts and benefits, and it is that the offer and /or acceptance of gifts, benefits, and hospitality not only has real potential to affect the objectivity and/or impartiality of a person, but also may lead to corruption.

A practical test is to establish whether a person would be embarrassed to answer a question honestly from a Crime and Misconduct Commission enquiry regarding the gift, benefit or hospitality.

5.5 Use of position

A member of a HH Board also will have entitlements to access and use public resources; and also to influence the acquisition and use of public resources. A member of a HH Board must not use their position to unreasonably influence the acquisition of public resources or to misuse public resources.

Hint:

A HH Board member should ensure that their personal requirements for, and use of public resources is reasonable and efficient; and should not condone the inefficient use or misuse of public resources by others.

Hint:

The role of a HH Board is likely to include decisions on and/or consideration of the acquisition of goods and services. The probity requirements of the State Procurement Policy, and where applicable the Commonwealth Procurement Guidelines must be applied.

A member of a HH Board must always act with reasonable objectivity, and avoid bias or the apprehension of bias. The apprehension of bias¹³ is justified in the basic principle that the public interest expects that a member of a HH Board will act independently, impartially, and without prejudice.

Hint:

A test of the apprehension of bias is whether an appropriately informed and fair minded lay observer might entertain a reasonable apprehension that the person might not bring an impartial and unprejudiced mind to the conduct of their responsibilities and their decision-making.



Hint:

In mitigating bias or subjectivity, one strategy is to ensure that the number of persons involved in the consideration and decision-making is reasonable so that there is objective balance in the process and the outcomes. Note however that the mitigation actions need to pass the objective test.

5.6 Use of information

The misuse of information obtained during the conduct of the official duty of member of a HH Board for personal or private interests or benefit is a conflict of interest, and may constitute misconduct.

It is misuse of position and a conflict of interest for a member of a HH Board to request a subordinate employee or contractor of a HHS or a staff member of a health service to provide information which is either misused or inconsistent with the official duty of the member of a HH Board.

Hint:

In the event that the access or use of information might constitute a real, perceived or potential conflict of interest, a member of a HH Board should disclose the circumstances and the interest.

5.7 Influence

Membership of a HH Board carries responsibilities or opinions which can influence or be influenced. A member of a HH Board has responsibilities for leadership, and should not be seen to unreasonably or improperly influence decisions or other persons in respect of their official duty. Unreasonable or improper influence could include matters of personal interests and relationships that could involve real or potential bias.

A HH Board member who also is a public sector employee, or is a Health Services Contractor, should not unduly influence those entities in respect of matters of the HHS.

Hint:

In the conduct of their official duty, a HH Board member should not improperly influence matters or other persons through private or personal interests or relationships. In these matters, the member should declare the interest as a potential conflict.

Conversely, a member should not allow their HHS official duty and interests to unduly influence their roles and responsibilities to other public or private entities with which they have a duty or interest.

¹³The test of an apprehension of bias was stated in *Gascor v Ellicott* [1997] 1 VR 332 in respect of an Arbitrator; but the test applies equally to a public sector employee with responsibility to act impartially and without prejudice.



5.8 Managing Conflicts

In order to manage the impunity of a HH Board member in respect of conflicts of interest, it is necessary to demonstrate both objectivity and impartiality.

The circumstance of actual bias is a serious matter of law and liability. Whereas, apprehended bias is more likely to be the basis for challenge of a person's objectivity or impartiality.

The principle of apprehended bias admits the frailty of human behaviour. It applies therefore that:

- The integrity of the HH Board must demonstrate that it is independent and impartial; and by logical connection
- What is said or what occurs should not lead the HH Board to make decisions other than on objective merits.

Hint:

The most appropriate practical guidance is for a HH Board member to:

Be aware of the requirements of law, policy and accountable governance, and to conduct themselves in light of that awareness.

Bring an objective, impartial and unbiased mind to the roles, tasks and duties.

Apply transparency and rigor to the conduct of the matters of the HH Board. Take care in the making of public statements or conveying information outside of the HH Board proceedings.

Be aware of the effects on the HH Board of the member's social and professional conduct.

Be aware of how things will look to a fair-minded observer and to conduct themselves is a way which will avoid the appearance of bias or impropriety

Public Sector policies and guidance on managing conflicts of interest identify the following practical measures:

- **Disclose** the details of a possible or potential conflict of interest in writing
 - Disclosure of a conflict of interest is important to transparency and accountability
- **Restrict (or isolate)** involvement in matters in which the conflict of interest exists
 - Become clearly separated from the aspects of the matter in conflict, particularly if the particular circumstance is infrequent
- **Replace (or superimpose)** with another impartial person into the role, responsibility, or matter in which conflict exists
 - It might not be feasible to be replaced, even temporarily, but the option should be considered where it can be isolated to the particular matter(s) in conflict, and/or



- An independent party participates to balance objectivity, to provide probity advice, or to provide expert opinion
- **Remove** from involvement in matter(s) in which there is a conflict of interest
 - This may occur if restriction or replacement is not possible
- **Relinquish** the interest(s)
 - This should occur where the commitment to public duty outweighs the retention of the conflicting interest.
- **Resign** from the appointment.
 - Considered ultimately where none of the options are appropriate

Hint:

Note that, in any case the interest may be a real, perceived or potential conflict of interest; or addressing an apprehension of bias.

Case Study:

A HHS covers a large area of regional and remote health care facilities. Its HH Board is necessarily appointed with a majority of members represented in the communities within the HHS.

The nature of these communities can often present difficulties in having clear strategies to avoid or mitigate conflicts of interest, which may be more directly managed in HHSs with greater centralisation of communities and interests.

The need for disclosure of interests is uniformly required, but the management strategies may differ. For example the frequency for seeking independent third party involvement or advice in decision processes may increase, such as an independent expert or a probity adviser.



Section 6: Administration

6.1 Qld Health Chief Executive (Director General)

Consistent with the *Hospital and Health Boards Act 2011*, the Director General will:

- Ensure that this guideline is brought to the attention of any Queensland public sector employees who are members of a HH Board;
- Encourage the organisations of other Public Sector employees to be aware of this guideline;
- Where considered appropriate, seek the advice of the Integrity Commissioner on any related matter.

6.2 HH Board Chair's responsibilities

As part of the overall responsibilities for managing the integrity of the HH Board, the Chair will:

- Provide informed advice to HH Board members and the HSCE on matters of disclosure and managing conflicts of interest;
- Receive and consider matters of conflicts of interest from the Board members;
- Where considered appropriate, seek the advice of the Integrity Commissioner on any related matter.

Hint:

The management action should apply the objective test.

6.3 Health Service Chief Executive (HSCE) responsibilities

As part of the executive responsibilities of a HSCE, in relation to this guideline, the following registers should be established and maintained as public records:

- 'Pecuniary Interests Register';
- 'Other Employment, Contracted Interests, and Associations Register';
- 'Conflicts of Interest Register'; and
- 'Gifts and Benefits Register'.

Documentary records also should record the written conflict of interest disclosures of all members a HH Board, including a copy of any disclosure made as part of the appointment process of a HH Board member. The HSCE of a HHS should seek through the HH Board Chair updates to both the Pecuniary Interests Register and Employment and Contracted Interests Register of records pertaining to a member of a HH Board, at least annually.



Section 7: More information

More information on Conflicts of Interest is available from:

Queensland Government

Code of Conduct for the Queensland Public Service - www.ethics.qld.gov.au

Crime and Misconduct Commission - www.cmc.qld.gov.au

Managing Conflicts of Interest in the Public Sector: Guidelines and Toolkit

Receiving Gifts and Benefits: Managing the risks

Queensland Public Service Commission - www.psc.qld.gov.au

Directive No. 3/10 Declaration of Interests – Public Service Employees

Directive No. 22/09 Gifts and Benefits and Guideline

Australian Public Service Commission - www.apsc.gov.au

APS Values and Code of Conduct in Practice, Section 4, Chapter 11 Conflict of Interest

In whose interests? Preventing and managing conflicts of interest in the APS

APS Values and Code of Conduct in Practice, Section 4, Chapter 12 Gifts and benefits