 

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **HETI Prevocational Accreditation Committee (PAC)**  **Conflict of Interest and Confidentiality Agreement** | | | | | |
| The Health Education and Training Institute’s Prevocational Accreditation Committee (PAC) is responsible for ensuring the health services it accredits are compliant with the national standards for prevocational training programs and terms and for communicating these requirements to training providers.  Conflicts of duty and interest may not always be straightforward. If you are unsure about a conflict, please contact Ms Kathryn Vaughan, Manager – Allocation, Accreditation and Faculty at [Kathryn.Vaughan@health.nsw.gov.au](mailto:Kathryn.Vaughan@health.nsw.gov.au). | | | | | |
| 1. **Duties and Interests** | | | | | |
| 1. Please list all facilities/organisations/committees you have an affiliation with, that may have a potential for conflict with your duties on the PAC. HETI considers current employment, previous employment, and memberships to associations as conflicts of interest:  |  |  |  | | --- | --- | --- | | Facility/Organisation/  Committee | Position Held | Comment | |  |  |  | |  |  |  | |  |  |  | |  |  |  |  1. Please list all facilities/organisations/committees your immediate family or people you are closely linked to have an affiliation with, that may have a potential for conflict with your duties on the PAC:  |  |  |  |  | | --- | --- | --- | --- | | Name (optional) | Relationship  to you | Facility/  Organisation/  Committee | Position | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  |   Please describe any other interests or duties where a conflict may exist. HETI considers hospitals within the same prevocational training network and Local Health District as conflicts of interest: | | | | | |
| I agree to:   * 1. assess whether my multiple roles and interests have a potential for conflict with my duties at PAC   2. formally disclose all actual, potential or perceived conflicts of duty and interest to HETI   3. avoid where possible, conflicts of duty and or interest and manage those that cannot be avoided | | | | | |
| Signature: |  | Name: |  | Date: |  |
| 1. **Confidentiality Declaration** | | | | | |
| I understand that all material viewed by me as a part of my duties at PAC is to be treated confidentially and that no information sent by HETI or seen by committee members should be discussed or distributed to a third party without the prior written permission of the Chair. | | | | | |
| Signature: |  | **NAME:** |  | Date: |  |