

Declaration of Interests

Good governance requires a solid understanding of conflicts of interest (real or perceived). As a regulator, it is important for BCCOHP to identify and manage conflicts.

A decision-maker needs to be in a position to participate objectively.

- An actual conflict can occur when an individual's own personal interest in the outcome of a situation can influence, impair or prevent that person from pursuing an objective, fair and principled approach to decision making.
- A conflict of interest exists when an individual or their friend, family member, business associate, partnership or corporation could benefit from the result or consequences of that person's participation in a decision made on behalf of BCCOHP.
- The possibility that others will perceive that an individual has a conflict in a given situation is also significant. This can arise when others could perceive that the decision-maker would be unable to make an objective decision about an issue, quite apart from whether the decision-maker believes this perception to be true. Perceptions of conflicts are as important to public confidence as actual conflicts.

BCCOHP board, committee, working group members and staff can use this declaration of interests document to identify and declare their personal interests or connections with others in positions of influence that could result in actual or perceived conflicts.

BCCOHP publishes a compilation of individual declarations as a Register of Interests, publicly available.

The declaration of interests document assists with the identification of positions or relationships that could influence a person's attitude resulting in an actual or perceived conflict.

Please use the table on the next page to provide details as they relate to you and to any other connected person. A connected person could be a spouse, partner, family member or anyone with whom you have a direct financial relationship such as a business partner, employer or employee.

Declaring an interest is only the first step. If you have declared an interest that is determined to be a real or perceived conflict, you must remove yourself from related discussions and decision-making on behalf of BCCOHP.

Name: _____

Role within BCCOHP: _____

Relationship	Details relating to you	Details relating to a connected person
<div>1</div> <div>Paid employment <i>(previous employment if applicable)</i></div> <div><i>Give details of all paid employment including full/part time, consultancies, contract and paid directorships.</i></div>		
<div>2</div> <div>Ownership of any business or consultancy</div> <div><i>Include any relevant details relating to a connected person</i></div>		

Relationship	Details relating to you	Details relating to a connected person
<div>3</div> <div>Appointments, offices and memberships of other bodies, voluntary or otherwise</div> <div><i>Individuals are free to engage in political activities or to maintain associations with professional organizations. A declaration of these positions give assurance that there is no conflict with BCCOHP’s statutory function.</i></div> <div><i>Specifically include any involvement with dental associations/groups. But also:</i></div> <div><ul style="list-style-type: none"><i>• directorships</i><i>• local authority membership</i><i>• tribunals</i><i>• special interest groups</i><i>• political groups, etc.</i></div>		

Relationship	Details relating to you	Details relating to a connected person
<div>4</div> <div>Close personal ties with other BCCOHP advisors, board members or employees</div> <div>Individuals who have close ties with other decision-makers may be perceived as having an undue influence on decisions.</div>		
<div>5</div> <div>Any other declarations</div> <div>Include any information that may be relevant such as:</div> <div><ul style="list-style-type: none">• court of legal findings or published opinions• whether you have been investigated or disciplined by any professional association or body.</div>		

Declaration

I take responsibility for acting in accordance with BCCOHP's code of conduct. I understand I must not receive any benefit that is not explicitly authorized in my appointment letter and must not exert any influence to acquire any preferential treatment for myself or other connected persons.

I agree to:

- a) act honestly and in good faith with a view to the best interests of the public.*
- b) exercise the care, diligence and skill that a reasonably prudent person would exercise in comparable circumstances.*
- c) act in the best interests of the public and not in my own self-interest, nor in the interest of a particular group or constituency.*
- d) make full and timely disclosure of any actual or perceived conflicts of interest in order to protect the integrity of BCCOHP.*

I will update my declaration of interests annually, or more frequently if any significant changes occur.

Name: Shirley Ross Date: _____