

# INTERNATIONAL EDUCATION BOARD



## Conflict of Interest Policy

Ensuring Integrity, Impartiality, and Transparency in All IEB Activities

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# 1. Document Control Information

1.1. Document Title: Conflict of Interest Policy

1.2. Document Code: IEB-POL-012

1.3. Version: 1.0

1.4. Effective Date: January 2026

1.5. Next Review Date: January 2029

1.6. Policy Owner: IEB Secretariat

1.7. Approved By: IEB Governing Council

1.8. Classification: Public

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## 2. Introduction

2.1. The International Education Board (IEB) is an independent, private, non-governmental, and non-statutory international education authority.

2.2. IEB is registered in the United Kingdom (Company Registration Number: 13759057).

2.3. IEB provides voluntary accreditation and quality assurance services to educational institutions worldwide.

2.4. The integrity and credibility of IEB's accreditation process depend on impartial and objective decision-making.

2.5. Conflicts of interest can compromise the integrity of decisions and undermine stakeholder trust.

2.6. IEB is committed to the highest standards of ethical conduct in all its activities.

2.7. This policy establishes the framework for identifying, disclosing, and managing conflicts of interest.

2.8. The policy applies to all individuals involved in IEB activities.

2.9. Effective conflict of interest management protects IEB, institutions, and stakeholders.

2.10. This policy reflects best practices in governance and accreditation ethics.

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## **3. Purpose**

### **3.1. Primary Purpose**

- 3.1.1. To establish clear requirements for identifying and disclosing conflicts of interest.
- 3.1.2. To provide procedures for managing conflicts appropriately.
- 3.1.3. To ensure impartiality in all IEB decisions and activities.
- 3.1.4. To protect the integrity and credibility of IEB accreditation.

### **3.2. Supporting Purposes**

- 3.2.1. To provide guidance on recognizing conflicts of interest.
- 3.2.2. To establish consistent standards across all IEB activities.
- 3.2.3. To create a culture of transparency and ethical conduct.
- 3.2.4. To meet stakeholder expectations for governance integrity.
- 3.2.5. To protect individuals from accusations of improper conduct.
- 3.2.6. To document conflict management for accountability purposes.
- 3.2.7. To support compliance with legal and regulatory requirements.

### **3.3. Ethical Foundation**

- 3.3.1. This policy reflects IEB's commitment to Discipline, Excellence, and Merit.
  - 3.3.2. Ethical conduct is fundamental to quality assurance activities.
  - 3.3.3. Public trust in accreditation requires demonstrated impartiality.
  - 3.3.4. All stakeholders benefit from clear conflict of interest management.
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## **4. Scope**

### **4.1. Persons Covered**

- 4.1.1. Members of the IEB Governing Council.
- 4.1.2. Members of all IEB committees and panels.
- 4.1.3. IEB staff at all levels.
- 4.1.4. IEB assessors and peer reviewers.
- 4.1.5. External consultants engaged by IEB.
- 4.1.6. Volunteers participating in IEB activities.
- 4.1.7. Representatives of institutions participating in IEB processes.
- 4.1.8. Any other individuals involved in IEB decisions or activities.

### **4.2. Activities Covered**

- 4.2.1. Accreditation applications and assessments.
- 4.2.2. Site visits and reviews.
- 4.2.3. Accreditation decisions.
- 4.2.4. Monitoring and review activities.
- 4.2.5. Appeals and complaints processes.
- 4.2.6. Policy development and approval.
- 4.2.7. Governance and committee decisions.
- 4.2.8. Procurement and contracting.
- 4.2.9. Staff recruitment and management.
- 4.2.10. Financial decisions and transactions.
- 4.2.11. External relations and partnerships.
- 4.2.12. Any other IEB activities where conflicts may arise.

### **4.3. Scope Limitations**

- 4.3.1. This policy addresses conflicts of interest within IEB activities.
- 4.3.2. Institutional internal conflicts are the responsibility of institutions.

4.3.3. This policy complements but does not replace legal obligations.

4.3.4. Professional conduct standards of individual professions also apply.

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## 5. Definitions

5.1. **Conflict of Interest:** A situation where an individual's personal, financial, or other interests could influence, or could reasonably appear to influence, their judgment, decisions, or actions in IEB matters.

5.2. **Actual Conflict:** A conflict that currently exists and directly affects decision-making.

5.3. **Potential Conflict:** A situation that could develop into an actual conflict if circumstances change.

5.4. **Apparent Conflict:** A situation that may reasonably appear to others as a conflict, regardless of whether an actual conflict exists.

5.5. **Financial Interest:** Any direct or indirect monetary benefit, including salary, fees, shares, dividends, royalties, or other economic advantages.

5.6. **Personal Interest:** Relationships or circumstances that could influence judgment, including family, friendship, social connections, or personal obligations.

5.7. **Professional Interest:** Benefits or obligations arising from professional relationships, employment, partnerships, or career considerations.

5.8. **Institutional Interest:** Interests arising from association with an educational institution, organization, or entity.

5.9. **Close Family Member:** Spouse, partner, parent, child, sibling, grandparent, grandchild, in-law, or any person residing in the same household.

5.10. **Close Associate:** A person with whom one has a significant professional, business, or personal relationship outside of normal IEB activities.

5.11. **Recusal:** The act of withdrawing from participation in a matter due to a conflict of interest.

5.12. **Disclosure:** The act of reporting a conflict of interest to appropriate persons or bodies.

5.13. **Material Interest:** An interest of sufficient significance that it could reasonably be expected to influence judgment.

5.14. **Competing Institution:** An educational institution that competes directly with another institution for students, staff, funding, or recognition.

5.15. **Pecuniary Interest:** An interest involving money or financial transactions.

5.16. **Non-Pecuniary Interest:** An interest not directly involving money, such as reputation, relationships, or career advancement.



## **6. Guiding Principles**

### **6.1. Integrity**

- 6.1.1. All IEB participants must act with integrity in all activities.
- 6.1.2. Decisions must be made based on merit and evidence.
- 6.1.3. Personal interests must not influence IEB decisions.
- 6.1.4. Honesty in disclosure is expected and required.

### **6.2. Impartiality**

- 6.2.1. IEB processes must be fair and unbiased.
- 6.2.2. All institutions must receive equal treatment.
- 6.2.3. Personal relationships must not affect professional judgments.
- 6.2.4. Assessment and decisions must be objective.

### **6.3. Transparency**

- 6.3.1. Conflicts of interest must be disclosed openly.
- 6.3.2. Management of conflicts must be documented.
- 6.3.3. Stakeholders must have confidence in process integrity.
- 6.3.4. Decisions must be able to withstand scrutiny.

### **6.4. Proactive Disclosure**

- 6.4.1. Individuals should disclose conflicts voluntarily.
- 6.4.2. Disclosure should occur at the earliest opportunity.
- 6.4.3. When in doubt, individuals should disclose and seek guidance.
- 6.4.4. Non-disclosure of conflicts undermines trust.

### **6.5. Proportionality**

- 6.5.1. Management measures should be proportionate to the conflict.
- 6.5.2. Minor conflicts may require simple management.
- 6.5.3. Significant conflicts may require recusal.
- 6.5.4. Measures should not be more restrictive than necessary.

**6.6. Protection**

6.6.1. Disclosure should not result in disadvantage to the discloser.

6.6.2. Appropriate confidentiality protects sensitive information.

6.6.3. Good faith disclosure is valued and supported.

6.6.4. The process protects all parties involved.

**6.7. Accountability**

6.7.1. Individuals are responsible for identifying and disclosing conflicts.

6.7.2. IEB is responsible for providing guidance and making decisions.

6.7.3. Records ensure accountability for conflict management.

6.7.4. Non-compliance has consequences.

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## **7. Types of Conflicts of Interest**

### **7.1. Overview**

- 7.1.1. Conflicts of interest may arise from various sources.
- 7.1.2. Different types require different management approaches.
- 7.1.3. Multiple types may be present simultaneously.
- 7.1.4. The cumulative effect of multiple conflicts should be considered.

### **7.2. Classification by Nature**

- 7.2.1. Financial conflicts involve monetary interests.
- 7.2.2. Personal conflicts involve relationships and personal circumstances.
- 7.2.3. Professional conflicts involve career and employment interests.
- 7.2.4. Institutional conflicts involve organizational affiliations.

### **7.3. Classification by Status**

- 7.3.1. Actual conflicts currently exist and affect judgment.
- 7.3.2. Potential conflicts may arise in the future.
- 7.3.3. Apparent conflicts appear to exist regardless of actuality.

### **7.4. Classification by Directness**

- 7.4.1. Direct conflicts involve the individual personally.
- 7.4.2. Indirect conflicts involve close family or associates.
- 7.4.3. Imputed conflicts arise through organizational relationships.

### **7.5. Positive and Negative Conflicts**

- 7.5.1. Positive conflicts may predispose favorable treatment.
- 7.5.2. Negative conflicts may predispose unfavorable treatment.
- 7.5.3. Both types compromise impartiality.
- 7.5.4. Both require appropriate management.

## **8. Financial Conflicts of Interest**

### **8.1. Employment and Compensation**

- 8.1.1. Current employment with an institution under consideration.
- 8.1.2. Past employment within the last five (5) years.
- 8.1.3. Pending employment negotiations or applications.
- 8.1.4. Consulting arrangements with an institution.
- 8.1.5. Fee-based services provided to an institution.
- 8.1.6. Honoraria received from an institution.

### **8.2. Ownership and Investment**

- 8.2.1. Ownership interest in an institution or its parent company.
- 8.2.2. Shareholding in a publicly traded educational company.
- 8.2.3. Investment in funds with significant educational holdings.
- 8.2.4. Partnership or proprietorship interests.
- 8.2.5. Investment in companies providing services to institutions.

### **8.3. Financial Benefits**

- 8.3.1. Scholarships or tuition benefits for family members.
- 8.3.2. Research funding received from an institution.
- 8.3.3. Grants or donations received from an institution.
- 8.3.4. Gifts or hospitality exceeding nominal value.
- 8.3.5. Loans from an institution.

### **8.4. Business Relationships**

- 8.4.1. Commercial contracts with institutions.
- 8.4.2. Supplier or vendor relationships.
- 8.4.3. Joint venture arrangements.
- 8.4.4. Licensing or intellectual property arrangements.
- 8.4.5. Sponsorship arrangements.

**8.5. Financial Interest of Family Members**

8.5.1. Close family members' employment with institutions.

8.5.2. Close family members' ownership interests.

8.5.3. Close family members' business relationships.

8.5.4. Financial dependency creating indirect interest.

**8.6. Financial Interest Thresholds**

8.6.1. Any direct financial interest is disclosable.

8.6.2. Equity holdings exceeding one percent (1%) require disclosure.

8.6.3. Gifts exceeding fifty British pounds (£50) require disclosure.

8.6.4. Cumulative benefits are considered together.

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## **9. Personal Conflicts of Interest**

### **9.1. Family Relationships**

- 9.1.1. Family members employed by an institution.
- 9.1.2. Family members enrolled at an institution.
- 9.1.3. Family members serving on an institution's board.
- 9.1.4. Family members holding ownership in an institution.
- 9.1.5. Family members in decision-making positions at institutions.

### **9.2. Personal Relationships**

- 9.2.1. Close friendships with institutional leaders.
- 9.2.2. Romantic or intimate relationships.
- 9.2.3. Long-standing personal associations.
- 9.2.4. Social relationships that create obligations.
- 9.2.5. Relationships arising from shared community involvement.

### **9.3. Educational Relationships**

- 9.3.1. Graduation from an institution under consideration.
- 9.3.2. Honorary degrees or awards from institutions.
- 9.3.3. Student-teacher relationships.
- 9.3.4. Mentor-mentee relationships.
- 9.3.5. Doctoral supervision relationships.

### **9.4. Negative Personal Relationships**

- 9.4.1. Personal disputes with institutional representatives.
- 9.4.2. Previous litigation or complaints.
- 9.4.3. Public criticism of an institution.
- 9.4.4. Known personal animosity.
- 9.4.5. Historical grievances or resentment.

### **9.5. Personal Circumstances**

9.5.1. Pending applications or negotiations with institutions.

9.5.2. Personal obligations to institutional representatives.

9.5.3. Debts of gratitude or reciprocal obligations.

9.5.4. Shared memberships creating loyalty.

9.5.5. Circumstances creating personal bias.

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## **10. Professional Conflicts of Interest**

### **10.1. Current Employment**

- 10.1.1. Employment with an institution seeking accreditation.
- 10.1.2. Employment with a competing institution.
- 10.1.3. Employment with an organization partnering with an institution.
- 10.1.4. Employment with a regulatory body overseeing an institution.
- 10.1.5. Employment creating professional loyalty to an institution.

### **10.2. Past Employment**

- 10.2.1. Previous employment with an institution within the last five (5) years.
- 10.2.2. Significant role in an institution's development or leadership.
- 10.2.3. Involvement in programs or initiatives being assessed.
- 10.2.4. Departure under adverse circumstances.
- 10.2.5. Ongoing professional connections from past employment.

### **10.3. Professional Relationships**

- 10.3.1. Collaboration on research, publications, or projects.
- 10.3.2. Joint grants or funding arrangements.
- 10.3.3. Professional mentorship relationships.
- 10.3.4. Shared professional activities or committees.
- 10.3.5. Professional referral relationships.

### **10.4. Career Considerations**

- 10.4.1. Potential future employment with institutions.
- 10.4.2. Career benefits from relationships with institutions.
- 10.4.3. Professional reputation interests.
- 10.4.4. Impact of decisions on career prospects.
- 10.4.5. Interests in maintaining professional networks.

### **10.5. Competing Professional Interests**



10.5.1. Service to competing accrediting bodies.

10.5.2. Consulting for institutions competing with applicants.

10.5.3. Professional services to multiple institutions.

10.5.4. Interests in alternative educational models.

10.5.5. Professional advocacy positions.

**10.6. Professional Association Relationships**

10.6.1. Leadership roles in professional associations.

10.6.2. Committee service with institutional representatives.

10.6.3. Conference organization involving institutions.

10.6.4. Editorial relationships with institutional publications.

10.6.5. Shared professional society membership creating obligation.

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## **11. Institutional Conflicts of Interest**

### **11.1. Employment Affiliation**

- 11.1.1. Current employment creates institutional loyalty.
- 11.1.2. Institutional culture and values may influence judgment.
- 11.1.3. Institutional competitive interests may create bias.
- 11.1.4. Colleagues' relationships may create indirect conflicts.
- 11.1.5. Institutional reputation interests may affect objectivity.

### **11.2. Governance Roles**

- 11.2.1. Board membership at educational institutions.
- 11.2.2. Advisory committee roles at institutions.
- 11.2.3. Trustee positions at educational foundations.
- 11.2.4. Governance roles at institutional networks.
- 11.2.5. Honorary positions at institutions.

### **11.3. Competing Institutions**

- 11.3.1. Affiliation with institutions competing for students.
- 11.3.2. Affiliation with institutions competing for ranking.
- 11.3.3. Affiliation with institutions in the same geographic market.
- 11.3.4. Affiliation with institutions competing for resources.
- 11.3.5. Competitive dynamics affecting objectivity.

### **11.4. Partner Institutions**

- 11.4.1. Affiliation with institutions in partnership with applicants.
- 11.4.2. Franchise or validation relationships.
- 11.4.3. Articulation or transfer agreements.
- 11.4.4. Joint programs or dual degrees.
- 11.4.5. Research partnerships between institutions.

### **11.5. Institutional Networks**

11.5.1. Membership in the same institutional networks.

11.5.2. Common ownership or corporate relationships.

11.5.3. Shared governance structures.

11.5.4. Alliance or consortium relationships.

11.5.5. Religious or philosophical affiliations.

**11.6. Institutional Interests**

11.6.1. Decisions affecting the value of own institution's accreditation.

11.6.2. Precedents affecting own institution's future applications.

11.6.3. Policy developments affecting institutional compliance.

11.6.4. Competitive advantage considerations.

11.6.5. Reputational impact on affiliated institutions.

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## **12. Apparent and Potential Conflicts**

### **12.1. Importance of Apparent Conflicts**

- 12.1.1. Apparent conflicts can undermine confidence even without actual bias.
- 12.1.2. Perception of conflict can damage institutional reputation.
- 12.1.3. Apparent conflicts should be managed to protect process integrity.
- 12.1.4. The reasonable observer standard applies.

### **12.2. Reasonable Observer Standard**

- 12.2.1. Would a reasonable, informed observer perceive a conflict?
- 12.2.2. The standard is objective, not subjective.
- 12.2.3. The observer is assumed to have relevant background knowledge.
- 12.2.4. Conservative interpretation protects process integrity.

### **12.3. Identifying Apparent Conflicts**

- 12.3.1. Consider how relationships might appear to others.
- 12.3.2. Consider public perception of affiliations.
- 12.3.3. Consider media or public scrutiny.
- 12.3.4. Consider stakeholder expectations.
- 12.3.5. When uncertain, disclose and seek guidance.

### **12.4. Managing Apparent Conflicts**

- 12.4.1. Apparent conflicts may be managed similarly to actual conflicts.
- 12.4.2. Transparency about the situation may address concerns.
- 12.4.3. Recusal may be appropriate even without actual conflict.
- 12.4.4. Documentation protects against future allegations.

### **12.5. Potential Conflicts**

- 12.5.1. Potential conflicts may materialize in the future.
- 12.5.2. Examples include pending applications or negotiations.
- 12.5.3. Potential conflicts should be disclosed when identified.

12.5.4. Management may be deferred until conflict becomes actual.

12.5.5. Monitoring ensures timely response if conflict materializes.

#### 12.6. **Evolving Conflicts**

12.6.1. Circumstances may change during processes.

12.6.2. New conflicts may arise after initial disclosure.

12.6.3. Ongoing duty to disclose new conflicts.

12.6.4. Regular review of conflict status.

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## **13. Disclosure Requirements**

### **13.1. General Disclosure Duty**

- 13.1.1. All individuals must disclose conflicts of interest.
- 13.1.2. Disclosure applies to actual, potential, and apparent conflicts.
- 13.1.3. Disclosure applies to direct and indirect conflicts.
- 13.1.4. Disclosure applies to positive and negative conflicts.

### **13.2. What Must Be Disclosed**

- 13.2.1. The nature of the conflict.
- 13.2.2. The parties or institutions involved.
- 13.2.3. The relationship or interest creating the conflict.
- 13.2.4. The duration and significance of the relationship.
- 13.2.5. Any financial aspects and amounts.
- 13.2.6. Assessment of how the conflict might affect judgment.

### **13.3. Disclosure Threshold**

- 13.3.1. Disclose when a reasonable person might perceive a conflict.
- 13.3.2. When in doubt, disclose.
- 13.3.3. Under-disclosure is more serious than over-disclosure.
- 13.3.4. IEB will assess whether management is required.

### **13.4. Annual Disclosure**

- 13.4.1. All Governing Council members complete annual declarations.
- 13.4.2. All committee members complete annual declarations.
- 13.4.3. All staff complete annual declarations.
- 13.4.4. All assessors complete annual declarations.
- 13.4.5. Annual declarations are updated as circumstances change.

### **13.5. Activity-Specific Disclosure**

- 13.5.1. Disclosure is required before participating in specific activities.

13.5.2. Assessment team members disclose before each assessment.

13.5.3. Committee members disclose at each meeting.

13.5.4. Panelists disclose before each panel.

13.5.5. Decision-makers disclose before each decision.

**13.6. Supplementary Disclosure**

13.6.1. New conflicts arising after initial disclosure must be reported.

13.6.2. Changes to previously disclosed conflicts must be reported.

13.6.3. Supplementary disclosure should be made promptly.

13.6.4. Failure to update is treated as non-disclosure.

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## **14. Timing of Disclosure**

### **14.1. General Timing Principles**

- 14.1.1. Disclose as soon as a conflict is identified.
- 14.1.2. Disclose before participating in affected activities.
- 14.1.3. Early disclosure allows effective management.
- 14.1.4. Late disclosure may compromise process integrity.

### **14.2. Annual Declaration Timing**

- 14.2.1. Initial declaration upon appointment or engagement.
- 14.2.2. Annual renewal at the beginning of each calendar year.
- 14.2.3. Updates within fourteen (14) days of changes.
- 14.2.4. Review before completing annual declaration.

### **14.3. Meeting and Activity Timing**

- 14.3.1. Disclose at the beginning of meetings when agenda is known.
- 14.3.2. Disclose when relevant items arise during meetings.
- 14.3.3. Disclose before receiving confidential information.
- 14.3.4. Disclose before participating in discussions.

### **14.4. Assessment Timing**

- 14.4.1. Disclose when proposed for assessment team.
- 14.4.2. Disclose before receiving assessment materials.
- 14.4.3. Disclose before site visits.
- 14.4.4. Disclose before preparing reports.
- 14.4.5. Disclose before participating in panel deliberations.

### **14.5. Decision Timing**

- 14.5.1. Disclose before participating in decision-making.
- 14.5.2. Disclose before voting or contributing to consensus.
- 14.5.3. Disclose before signing decisions.



14.5.4. Disclose before communicating decisions.

**14.6. Consequences of Late Disclosure**

14.6.1. Late disclosure may require review of decisions.

14.6.2. Late disclosure may require repetition of processes.

14.6.3. Late disclosure may be treated as non-disclosure.

14.6.4. Deliberate late disclosure is a serious matter.

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## **15. Disclosure Procedures**

### **15.1. Written Disclosure**

- 15.1.1. Disclosures should be made in writing.
- 15.1.2. The Conflict of Interest Declaration Form should be used.
- 15.1.3. Written disclosure creates a permanent record.
- 15.1.4. Electronic submission is acceptable.

### **15.2. Verbal Disclosure**

- 15.2.1. Verbal disclosure is appropriate for meeting situations.
- 15.2.2. Verbal disclosure should be recorded in minutes.
- 15.2.3. Verbal disclosure should be followed by written confirmation.
- 15.2.4. Verbal disclosure is sufficient for immediate withdrawal.

### **15.3. Disclosure Recipients**

- 15.3.1. Governing Council members disclose to the Chair.
- 15.3.2. The Chair discloses to the Vice-Chair or Council.
- 15.3.3. Committee members disclose to the Committee Chair.
- 15.3.4. Staff disclose to their line manager or the Director.
- 15.3.5. Assessors disclose to the Lead Assessor or Secretariat.
- 15.3.6. External consultants disclose to their IEB contact.

### **15.4. Disclosure to the Secretariat**

- 15.4.1. The Secretariat maintains the conflict of interest register.
- 15.4.2. All written disclosures should be copied to the Secretariat.
- 15.4.3. The Secretariat tracks disclosure compliance.
- 15.4.4. The Secretariat facilitates conflict assessment.

### **15.5. Disclosure Content**

- 15.5.1. Full description of the conflict.
- 15.5.2. Names of parties and institutions involved.

15.5.3. Nature and duration of relationships.

15.5.4. Financial details where relevant.

15.5.5. Assessment of potential impact on IEB activities.

15.5.6. Suggested management approach if appropriate.

**15.6. Disclosure Forms**

15.6.1. Annual Declaration of Interests Form (Annexure A).

15.6.2. Activity-Specific Conflict Declaration Form (Annexure B).

15.6.3. Supplementary Disclosure Form (Annexure C).

15.6.4. Meeting Conflict Declaration (verbal, recorded in minutes).

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## 16. Assessment of Disclosures

### 16.1. Assessment Responsibility

- 16.1.1. The recipient of disclosure conducts initial assessment.
- 16.1.2. The Secretariat provides guidance and support.
- 16.1.3. Significant conflicts escalated to the Director.
- 16.1.4. Complex conflicts may be referred to the Governing Council.

### 16.2. Assessment Criteria

- 16.2.1. Nature and significance of the interest.
- 16.2.2. Likelihood of the interest affecting judgment.
- 16.2.3. Significance of the affected decision or activity.
- 16.2.4. Perception of conflict by stakeholders.
- 16.2.5. Availability of alternative arrangements.
- 16.2.6. Impact of management measures on the individual.

### 16.3. Assessment Categories

- 16.3.1. **No Conflict:** Disclosed interest does not constitute a conflict.
- 16.3.2. **Minor Conflict:** Conflict exists but is not significant.
- 16.3.3. **Moderate Conflict:** Conflict requires active management.
- 16.3.4. **Significant Conflict:** Conflict requires recusal.
- 16.3.5. **Disqualifying Conflict:** Conflict prevents any participation.

### 16.4. Assessment Process

- 16.4.1. Review the disclosure information.
- 16.4.2. Seek clarification if needed.
- 16.4.3. Apply assessment criteria.
- 16.4.4. Consider management options.
- 16.4.5. Make determination.
- 16.4.6. Communicate decisions.

16.4.7. Document assessment and decision.

**16.5. Assessment Timeframe**

16.5.1. Assessment should be completed promptly.

16.5.2. Urgent matters should be assessed within twenty-four (24) hours.

16.5.3. Standard assessment within five (5) working days.

16.5.4. Complex assessment within ten (10) working days.

16.5.5. Interim measures may be applied pending assessment.

**16.6. Communication of Assessment**

16.6.1. The individual is informed of the assessment outcome.

16.6.2. Required management measures are specified.

16.6.3. Reasons are provided for the determination.

16.6.4. The individual may seek review of the assessment.

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## **17. Conflict Management Strategies**

### **17.1. Management Hierarchy**

- 17.1.1. Conflicts should be managed at the least restrictive level appropriate.
- 17.1.2. Escalation to more restrictive measures if needed.
- 17.1.3. Measures should be proportionate to the conflict.
- 17.1.4. Effectiveness of measures should be monitored.

### **17.2. Register and Monitor**

- 17.2.1. Record the conflict in the register.
- 17.2.2. Monitor for any change in circumstances.
- 17.2.3. No active management required.
- 17.2.4. Appropriate for minor or potential conflicts.

### **17.3. Disclose and Proceed**

- 17.3.1. Disclose the conflict to relevant parties.
- 17.3.2. Record disclosure in meeting minutes or records.
- 17.3.3. Proceed with participation.
- 17.3.4. Appropriate for minor conflicts with transparency.

### **17.4. Restrict Participation**

- 17.4.1. Participate in some aspects but not others.
- 17.4.2. Exclude from specific decisions.
- 17.4.3. Limit access to particular information.
- 17.4.4. Appropriate for conflicts affecting only part of an activity.

### **17.5. Enhanced Oversight**

- 17.5.1. Additional review of decisions.
- 17.5.2. Additional persons involved in oversight.
- 17.5.3. Documentation of reasoning.
- 17.5.4. Appropriate for moderate conflicts where participation is necessary.

**17.6. Recusal**

17.6.1. Complete withdrawal from the affected matter.

17.6.2. No participation in discussions.

17.6.3. No access to related information.

17.6.4. Appropriate for significant conflicts.

**17.7. Divestment**

17.7.1. Removal of the interest creating the conflict.

17.7.2. Termination of the conflicting relationship.

17.7.3. Sale or transfer of financial interests.

17.7.4. Appropriate where conflict is ongoing and significant.

**17.8. Removal from Role**

17.8.1. Complete removal from the IEB role.

17.8.2. Resignation or termination of appointment.

17.8.3. Appropriate for pervasive or disqualifying conflicts.

17.8.4. Last resort measure.

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## **18. Recusal and Withdrawal**

### **18.1. When Recusal Is Required**

- 18.1.1. Significant actual conflict exists.
- 18.1.2. Apparent conflict would undermine confidence.
- 18.1.3. Management measures are insufficient.
- 18.1.4. Assessment determination requires recusal.
- 18.1.5. Individuals believe recusal is appropriate.

### **18.2. Scope of Recusal**

- 18.2.1. Recusal covers all aspects of the affected matter.
- 18.2.2. No participation in discussions.
- 18.2.3. No voting or decision-making.
- 18.2.4. No influence over others' decisions.
- 18.2.5. No access to related documents or information.

### **18.3. Recusal Process**

- 18.3.1. Declare the conflict.
- 18.3.2. State intention to recuse.
- 18.3.3. Leave the meeting room during relevant discussions.
- 18.3.4. Return only when discussion and decision is complete.
- 18.3.5. Recusal recorded in minutes.

### **18.4. Partial Recusal**

- 18.4.1. Recusal from specific items while participating in others.
- 18.4.2. Appropriate where conflict affects only part of proceedings.
- 18.4.3. Clear boundaries must be established.
- 18.4.4. Careful management to prevent information leakage.

### **18.5. Voluntary Recusal**

- 18.5.1. Individuals may voluntarily recuse even if not required.



18.5.2. Voluntary recusal demonstrates commitment to integrity.

18.5.3. Voluntary recusal should be respected.

18.5.4. Voluntary recusal is recorded.

#### **18.6. Required Recusal**

18.6.1. IEB may require recusal based on conflict assessment.

18.6.2. Required recusal is mandatory.

18.6.3. Failure to comply is a serious breach.

18.6.4. Required recusal is documented.

#### **18.7. Quorum Implications**

18.7.1. Recusal may affect meeting quorum.

18.7.2. Alternative arrangements may be needed.

18.7.3. Decisions may be deferred if quorum cannot be achieved.

18.7.4. Substitute members may be appointed.

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## **19. Conflicts in Accreditation Processes**

### **19.1. Application and Eligibility**

- 19.1.1. Staff reviewing applications disclose conflicts.
- 19.1.2. Conflicted staff do not process affected applications.
- 19.1.3. Eligibility decisions involve no conflicted persons.
- 19.1.4. Initial review is conducted impartially.

### **19.2. Assessment Team Formation**

- 19.2.1. Potential assessors are screened for conflicts.
- 19.2.2. Conflicted individuals are not appointed to teams.
- 19.2.3. Screening considers all conflict types.
- 19.2.4. Assessors confirm no conflict before appointment.

### **19.3. Assessment Team Conflicts**

- 19.3.1. Team members disclose any conflicts before site visits.
- 19.3.2. Conflicts arising during assessment are reported immediately.
- 19.3.3. Conflicted team members may be replaced.
- 19.3.4. Lead Assessor manages conflicts within the team.

### **19.4. Site Visit Conduct**

- 19.4.1. Team members maintain appropriate boundaries.
- 19.4.2. Offers of gifts or hospitality are declined.
- 19.4.3. Personal relationships are not developed during assessment.
- 19.4.4. Professional conduct is maintained throughout.

### **19.5. Report Preparation**

- 19.5.1. Assessment reports are objective and evidence-based.
- 19.5.2. Personal opinions or biases are excluded.
- 19.5.3. Reports are reviewed for objectivity.
- 19.5.4. Conflicted persons do not prepare or review reports.

**19.6. Panel and Committee Decisions**

19.6.1. Panel members disclose conflicts before deliberation.

19.6.2. Conflicted members recuse from affected decisions.

19.6.3. Decisions are made by unconflicted members.

19.6.4. Recusals are recorded in decision records.

**19.7. Accreditation Decisions**

19.7.1. Decision-makers disclose conflicts.

19.7.2. Conflicted decision-makers do not participate.

19.7.3. Final approval involves no conflicted persons.

19.7.4. Integrity of decision-making is protected.

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## **20. Conflicts in Governance**

### **20.1. Governing Council**

20.1.1. Council members complete annual declarations.

20.1.2. Conflicts are disclosed at each meeting.

20.1.3. Conflicted members recuse from affected items.

20.1.4. Recusals are recorded in minutes.

### **20.2. Council Chair Conflicts**

20.2.1. The Chair discloses conflicts to the Vice-Chair or Council.

20.2.2. The Chair recuses from chairing affected items.

20.2.3. The Vice-Chair chairs during Chair's recusal.

20.2.4. Chair conflicts are handled transparently.

### **20.3. Committee Membership**

20.3.1. Committee members complete declarations.

20.3.2. Pervasive conflicts may preclude committee membership.

20.3.3. Committee composition avoids institutional concentration.

20.3.4. Balance of perspectives is maintained.

### **20.4. Policy Development**

20.4.1. Policy developers disclose relevant interests.

20.4.2. Stakeholder consultation includes conflict consideration.

20.4.3. Policy approval involves conflict-free decision-making.

20.4.4. Policies are developed objectively.

### **20.5. Strategic Decisions**

20.5.1. Strategic decisions require conflict disclosure.

20.5.2. Decisions affecting specific institutions require recusal.

20.5.3. Organizational interest conflicts are managed.

20.5.4. Governance integrity is paramount.

**20.6. Appointments**

20.6.1. Conflicts in staff appointments are disclosed.

20.6.2. Conflicts in committee appointments are disclosed.

20.6.3. Conflicted persons do not participate in related decisions.

20.6.4. Merit-based appointment is protected.

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## **21. Conflicts in Appeals and Complaints**

### **21.1. Appeals Panel Formation**

- 21.1.1. Panel members are screened for conflicts.
- 21.1.2. Conflicted persons are excluded from panels.
- 21.1.3. Screening considers relationships with all parties.
- 21.1.4. Independence is essential for appeals.

### **21.2. Appeals Handling**

- 21.2.1. Staff handling appeals disclose conflicts.
- 21.2.2. Conflicted staff do not process affected appeals.
- 21.2.3. Information is protected from conflicted persons.
- 21.2.4. Impartiality is maintained throughout.

### **21.3. Complaints Investigation**

- 21.3.1. Investigators disclose conflicts.
- 21.3.2. Conflicted persons do not investigate related complaints.
- 21.3.3. Investigation is objective and fair.
- 21.3.4. All parties' interests are considered.

### **21.4. Complainant and Respondent Conflicts**

- 21.4.1. Relationships with complainants create conflicts.
- 21.4.2. Relationships with respondents create conflicts.
- 21.4.3. Prior involvement in the matter creates conflicts.
- 21.4.4. Both positive and negative relationships are relevant.

### **21.5. Decision-Making**

- 21.5.1. Appeals and complaints decisions require impartiality.
- 21.5.2. Conflicted persons do not decide outcomes.
- 21.5.3. Perception of bias is avoided.
- 21.5.4. Decisions can withstand scrutiny.

**21.6. Institutional Bias**

21.6.1. Prior involvement with the institution is considered.

21.6.2. Involvement in the original decision creates conflict.

21.6.3. Fresh perspectives are applied.

21.6.4. Institutional loyalty does not influence appeals.

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## **22. Conflicts for IEB Staff**

### **22.1. Employment Obligation**

- 22.1.1. All staff owe a duty of loyalty to IEB.
- 22.1.2. Personal interests must not conflict with IEB interests.
- 22.1.3. Staff act in IEB's best interests.
- 22.1.4. Conflicts with this duty must be disclosed.

### **22.2. Outside Employment and Activities**

- 22.2.1. Outside employment that could create conflicts requires disclosure.
- 22.2.2. Outside consulting for institutions requires approval.
- 22.2.3. Board positions require disclosure.
- 22.2.4. Teaching or examining for institutions requires disclosure.

### **22.3. Previous Employment**

- 22.3.1. Previous employment with institutions is disclosed.
- 22.3.2. Staff do not handle matters involving previous employers.
- 22.3.3. Cooling-off periods may apply.
- 22.3.4. Ongoing relationships are disclosed.

### **22.4. Financial Interests**

- 22.4.1. Financial interests in institutions are disclosed.
- 22.4.2. Investment in educational companies requires disclosure.
- 22.4.3. Financial relationships with stakeholders are disclosed.
- 22.4.4. Gifts and hospitality are reported.

### **22.5. Personal Relationships**

- 22.5.1. Personal relationships with institutional representatives are disclosed.
- 22.5.2. Staff do not handle matters involving close relationships.
- 22.5.3. Professional boundaries are maintained.
- 22.5.4. Relationships developed during IEB work are reported.



**22.6. Post-Employment**

22.6.1. Staff intending to leave should disclose job seeking.

22.6.2. Staff should not be involved with potential future employers.

22.6.3. Post-employment restrictions may apply.

22.6.4. Confidential information is protected after departure.

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## **23. Conflicts for Assessors and Reviewers**

### **23.1. Pre-Assessment Screening**

23.1.1. Assessors complete conflict declarations before appointment.

23.1.2. Screening identifies institutional relationships.

23.1.3. Screening identifies personal and professional connections.

23.1.4. Conflicted assessors are not appointed.

### **23.2. Institutional Relationships**

23.2.1. Current or recent employment with the institution.

23.2.2. Education received at the institution.

23.2.3. Board or advisory positions.

23.2.4. Consulting or contracted services.

23.2.5. Any relationship creating obligation or bias.

### **23.3. Competitor Relationships**

23.3.1. Employment with competing institutions.

23.3.2. Competitive bias must be avoided.

23.3.3. Assessment must be fair regardless of competition.

23.3.4. Disclosure allows appropriate management.

### **23.4. Professional Connections**

23.4.1. Close colleagues at the institution.

23.4.2. Co-authors or collaborators.

23.4.3. Supervisor-supervisee relationships.

23.4.4. Professional society connections.

### **23.5. Personal Connections**

23.5.1. Family members at the institution.

23.5.2. Close personal friends.

23.5.3. Social or community relationships.

23.5.4. Any relationship affecting objectivity.

**23.6. Assessment Conduct**

23.6.1. Assessors maintain objectivity throughout.

23.6.2. Evidence-based assessment is required.

23.6.3. Bias must not influence findings.

23.6.4. Assessors decline gifts and excessive hospitality.

**23.7. Ongoing Disclosure**

23.7.1. New conflicts arising during assessment are reported.

23.7.2. Assessors may withdraw if conflicts emerge.

23.7.3. Team composition may be adjusted.

23.7.4. Process integrity is protected.

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## **24. Conflicts for Committee Members**

### **24.1. Appointment**

24.1.1. Prospective members complete conflict declarations.

24.1.2. Pervasive conflicts may preclude appointment.

24.1.3. Committee composition balances perspectives.

24.1.4. Institutional diversity is sought.

### **24.2. Annual Declaration**

24.2.1. Committee members complete annual declarations.

24.2.2. Declarations are updated when circumstances change.

24.2.3. Declarations are maintained by the Secretariat.

24.2.4. Declarations inform conflict management.

### **24.3. Meeting Conduct**

24.3.1. Conflicts are disclosed at the start of meetings.

24.3.2. Conflicts relating to specific items are declared.

24.3.3. Recusal occurs for significant conflicts.

24.3.4. Disclosures and recusals are recorded in minutes.

### **24.4. Decision Integrity**

24.4.1. Decisions are made by unconflicted members.

24.4.2. Conflicted members do not vote.

24.4.3. Conflicted members do not unduly influence discussions.

24.4.4. Decision records demonstrate integrity.

### **24.5. Specific Committee Considerations**

24.5.1. Accreditation Committee members recuse from own institutions.

24.5.2. Appeals Committee members have no prior involvement in matters.

24.5.3. Finance Committee members disclose financial interests.

24.5.4. Quality Committee members disclose professional interests.

**24.6. Committee Chair Responsibilities**

24.6.1. Chairs ensure conflicts are disclosed.

24.6.2. Chairs manage recusals appropriately.

24.6.3. Chairs ensure balanced discussion.

24.6.4. Chairs model conflict management behavior.

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## **25. Conflicts for External Consultants**

### **25.1. Engagement Process**

- 25.1.1. Prospective consultants disclose conflicts.
- 25.1.2. Conflicts are assessed before engagement.
- 25.1.3. Engagement contracts include conflict provisions.
- 25.1.4. Ongoing disclosure obligations are specified.

### **25.2. Types of Consultant Conflicts**

- 25.2.1. Prior work for institutions affected by consulting.
- 25.2.2. Business interests in the educational sector.
- 25.2.3. Relationships with institutional representatives.
- 25.2.4. Competing engagements or interests.

### **25.3. Managing Consultant Conflicts**

- 25.3.1. Conflicts are managed according to this policy.
- 25.3.2. Conflicted consultants may be excluded from specific tasks.
- 25.3.3. Information barriers may be implemented.
- 25.3.4. Engagement may be terminated for significant conflicts.

### **25.4. Confidentiality**

- 25.4.1. Consultants maintain confidentiality of IEB information.
- 25.4.2. Information is not used for personal benefit.
- 25.4.3. Information is not shared with conflicted parties.
- 25.4.4. Confidentiality obligations continue after engagement.

### **25.5. Consultant Responsibilities**

- 25.5.1. Consultants disclose conflicts proactively.
- 25.5.2. Consultants maintain independence.
- 25.5.3. Consultants avoid creating new conflicts.
- 25.5.4. Consultants comply with this policy.

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## **26. Institutional Conflict Management**

### **26.1. Institutional Expectations**

26.1.1. Institutions should have their own conflict of interest policies.

26.1.2. Institutional policies should address accreditation activities.

26.1.3. Institutions should manage conflicts in their submissions.

26.1.4. Institutional governance should demonstrate integrity.

### **26.2. Institutional Representatives**

26.2.1. Representatives participating in IEB processes disclose conflicts.

26.2.2. Conflicts with assessors or reviewers should be reported.

26.2.3. Prior relationships should be disclosed.

26.2.4. Representatives act in good faith.

### **26.3. Self-Study and Submissions**

26.3.1. Institutional submissions should be accurate and objective.

26.3.2. Internal conflicts affecting submissions should be managed.

26.3.3. Self-assessment should be honest and balanced.

26.3.4. Material conflicts within the institution should be disclosed.

### **26.4. Institutional Governance Conflicts**

26.4.1. Institutional board conflicts may be relevant to accreditation.

26.4.2. Governance integrity is an accreditation consideration.

26.4.3. Systemic conflict management failures may affect status.

26.4.4. IEB may request information on institutional conflict management.

### **26.5. Site Visit Conduct**

26.5.1. Institutions should not attempt to create conflicts.

26.5.2. Inappropriate offers to assessors should be avoided.

26.5.3. Normal professional hospitality is acceptable.

26.5.4. Excessive gifts or entertainment are not appropriate.

**26.6. Reporting Assessor Conflicts**

26.6.1. Institutions may report concerns about assessor conflicts.

26.6.2. Concerns should be raised promptly.

26.6.3. IEB will investigate and respond appropriately.

26.6.4. Legitimate concerns are addressed without prejudice to the institution.

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## **27. Confidentiality of Disclosures**

### **27.1. Confidentiality Principles**

- 27.1.1. Conflict disclosures are treated confidentially.
- 27.1.2. Information is shared only on a need-to-know basis.
- 27.1.3. Confidentiality encourages open disclosure.
- 27.1.4. Disclosures are not used for unrelated purposes.

### **27.2. Who Has Access**

- 27.2.1. The recipient of the disclosure.
- 27.2.2. Those responsible for assessing the conflict.
- 27.2.3. Those responsible for implementing management measures.
- 27.2.4. The Secretariat for record-keeping purposes.
- 27.2.5. Auditors and oversight bodies as required.

### **27.3. Information Sharing**

- 27.3.1. Sharing is limited to what is necessary.
- 27.3.2. Sensitive personal information is protected.
- 27.3.3. Financial details are handled confidentially.
- 27.3.4. Sharing with third parties requires justification.

### **27.4. Record Security**

- 27.4.1. Conflict records are stored securely.
- 27.4.2. Electronic records are protected appropriately.
- 27.4.3. Physical records are secured.
- 27.4.4. Access is controlled and logged.

### **27.5. Transparency vs. Confidentiality**

- 27.5.1. The fact of recusal may be disclosed.
- 27.5.2. The general nature of conflict may be recorded.
- 27.5.3. Detailed personal information is protected.

27.5.4. Balance is maintained between transparency and privacy.

**27.6. Data Protection**

27.6.1. Conflict information is personal data.

27.6.2. Data protection requirements apply.

27.6.3. The Data Protection and Privacy Policy (IEB-POL-007) applies.

27.6.4. Individuals have rights regarding their data.

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## **28. Record Keeping**

### **28.1. Conflict of Interest Register**

28.1.1. IEB maintains a central conflict of interest register.

28.1.2. The register records all declared conflicts.

28.1.3. The register is maintained by the Secretariat.

28.1.4. The register is updated regularly.

### **28.2. Register Contents**

28.2.1. Name and role of the individual.

28.2.2. Nature of the conflict.

28.2.3. Date of disclosure.

28.2.4. Assessment outcome.

28.2.5. Management measures applied.

28.2.6. Date of resolution or closure.

### **28.3. Annual Declarations**

28.3.1. Annual declarations are retained on file.

28.3.2. Historical declarations are archived.

28.3.3. Declarations are accessible for reference.

28.3.4. Retention is in accordance with data protection requirements.

### **28.4. Activity Records**

28.4.1. Meeting minutes record disclosures and recusals.

28.4.2. Assessment records include conflict declarations.

28.4.3. Decision records document conflict management.

28.4.4. Activity records support accountability.

### **28.5. Retention Periods**

28.5.1. Conflict records are retained for seven (7) years.

28.5.2. Records related to accreditation decisions are retained longer.

28.5.3. Records supporting appeals or disputes are retained as needed.

28.5.4. Destruction follows IEB records management procedures.

**28.6. Audit Trail**

28.6.1. Records provide an audit trail of conflict management.

28.6.2. Records support review of process integrity.

28.6.3. Records demonstrate compliance with this policy.

28.6.4. Records are available for internal and external audit.

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## **29. Training and Awareness**

### **29.1. Training Program**

- 29.1.1. IEB provides conflict of interest training.
- 29.1.2. Training is part of induction for all new personnel.
- 29.1.3. Refresher training is provided periodically.
- 29.1.4. Specialized training is provided for specific roles.

### **29.2. Training Content**

- 29.2.1. Understanding conflicts of interest.
- 29.2.2. Types and examples of conflicts.
- 29.2.3. Disclosure requirements and procedures.
- 29.2.4. Management strategies.
- 29.2.5. Consequences of non-compliance.
- 29.2.6. Role-specific guidance.

### **29.3. Training Delivery**

- 29.3.1. Online training modules are available.
- 29.3.2. In-person training is provided for key roles.
- 29.3.3. Training materials are accessible.
- 29.3.4. Training completion is recorded.

### **29.4. Training Requirements**

- 29.4.1. Governing Council members complete training upon appointment.
- 29.4.2. Committee members complete training upon appointment.
- 29.4.3. Staff complete training during induction.
- 29.4.4. Assessors complete training before first assessment.
- 29.4.5. Refresher training every three (3) years.

### **29.5. Awareness Resources**

- 29.5.1. This policy is published and accessible.

29.5.2. Guidance documents are provided.

29.5.3. FAQs address common questions.

29.5.4. Case studies illustrate conflict management.

29.5.5. Contact points for advice are publicized.

**29.6. Promoting Ethical Culture**

29.6.1. Leadership models ethical behavior.

29.6.2. Open discussion of conflicts is encouraged.

29.6.3. Proactive disclosure is valued.

29.6.4. Integrity is recognized and reinforced.

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## **30. Monitoring and Compliance**

### **30.1. Compliance Monitoring**

- 30.1.1. The Secretariat monitors compliance with this policy.
- 30.1.2. Monitoring includes tracking declaration completion.
- 30.1.3. Monitoring includes reviewing conflict management.
- 30.1.4. Monitoring includes spot checks of records.

### **30.2. Declaration Compliance**

- 30.2.1. Annual declaration completion rates are tracked.
- 30.2.2. Reminders are sent for outstanding declarations.
- 30.2.3. Non-compliance is escalated to supervisors.
- 30.2.4. Persistent non-compliance is addressed.

### **30.3. Process Compliance**

- 30.3.1. Meeting records are reviewed for disclosure compliance.
- 30.3.2. Assessment processes are reviewed for conflict management.
- 30.3.3. Decision records are checked for conflict documentation.
- 30.3.4. Compliance is reported to the Governing Council.

### **30.4. Internal Audit**

- 30.4.1. Conflict management may be included in internal audits.
- 30.4.2. Audits assess compliance with policy requirements.
- 30.4.3. Audits identify areas for improvement.
- 30.4.4. Audit findings are reported and addressed.

### **30.5. Self-Assessment**

- 30.5.1. Committees conduct periodic self-assessment.
- 30.5.2. Self-assessment includes conflict management review.
- 30.5.3. Good practices are identified and shared.
- 30.5.4. Improvements are implemented.

### 30.6. **Reporting**

30.6.1. Annual compliance report to the Governing Council.

30.6.2. The report includes declaration statistics.

30.6.3. The report includes a summary of conflicts managed.

30.6.4. The report identifies trends and issues.

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## **31. Non-Compliance and Consequences**

### **31.1. Types of Non-Compliance**

- 31.1.1. Failure to complete required declarations.
- 31.1.2. Failure to disclose a conflict.
- 31.1.3. Late disclosure of a known conflict.
- 31.1.4. Providing false or misleading information.
- 31.1.5. Failure to comply with management measures.
- 31.1.6. Failure to recuse when required.
- 31.1.7. Attempting to influence decisions despite conflict.

### **31.2. Assessment of Non-Compliance**

- 31.2.1. Non-compliance is investigated appropriately.
- 31.2.2. The individual is given an opportunity to respond.
- 31.2.3. Severity is assessed considering:
  - 31.2.3.1. Nature and significance of the undisclosed conflict.
  - 31.2.3.2. Whether non-disclosure was deliberate or inadvertent.
  - 31.2.3.3. Impact on decisions or processes.
  - 31.2.3.4. History of compliance.
  - 31.2.3.5. Response when the issue was identified.

### **31.3. Consequences for Staff**

- 31.3.1. Guidance and counseling for minor inadvertent breaches.
- 31.3.2. Formal warning for more serious breaches.
- 31.3.3. Disciplinary action for significant breaches.
- 31.3.4. Dismissal for severe or repeated breaches.
- 31.3.5. Consequences are proportionate to the breach.

### **31.4. Consequences for Assessors**

- 31.4.1. Removal from the assessment in question.

31.4.2. Removal from the assessor pool for serious breaches.

31.4.3. Report to the individual's employer if appropriate.

31.4.4. Exclusion from future IEB activities.

### **31.5. Consequences for Committee Members**

31.5.1. Removal from the matter in question.

31.5.2. Formal warning.

31.5.3. Suspension from committee.

31.5.4. Removal from committee for serious breaches.

### **31.6. Consequences for Council Members**

31.6.1. Formal censure.

31.6.2. Removal from specific matters.

31.6.3. Suspension from Council.

31.6.4. Removal from Council for serious breaches.

### **31.7. Impact on Decisions**

31.7.1. Decisions affected by undisclosed conflicts may be reviewed.

31.7.2. Decisions may be set aside if integrity was compromised.

31.7.3. Processes may be repeated with conflict-free participation.

31.7.4. Affected parties are informed and remedies provided.

### **31.8. Legal Consequences**

31.8.1. Serious breaches may have legal implications.

31.8.2. Fraud or corruption may be referred to authorities.

31.8.3. Individuals may be liable for losses caused.

31.8.4. IEB may pursue legal remedies.

## **32. Reporting Concerns**

### **32.1. Encouraging Reporting**

32.1.1. All stakeholders are encouraged to report conflict concerns.

32.1.2. Reporting helps protect process integrity.

32.1.3. Concerns are taken seriously.

32.1.4. Reporters are protected from retaliation.

### **32.2. What to Report**

32.2.1. Suspected undisclosed conflicts.

32.2.2. Apparent conflicts that may not have been identified.

32.2.3. Failure to manage disclosed conflicts appropriately.

32.2.4. Attempted influence by conflicted individuals.

32.2.5. Any concerns about impartiality.

### **32.3. How to Report**

32.3.1. Reports may be submitted in writing.

32.3.2. Reports may be made to the Secretariat.

32.3.3. Reports may be made to the Director.

32.3.4. Reports about senior personnel may be made to the Council Chair.

32.3.5. Anonymous reports are accepted.

### **32.4. Report Contents**

32.4.1. Names of individuals involved.

32.4.2. Nature of the suspected conflict.

32.4.3. Circumstances giving rise to concern.

32.4.4. Any evidence available.

32.4.5. Contact information (if not anonymous).

### **32.5. Handling Reports**

32.5.1. Reports are treated confidentially.

32.5.2. Reports are acknowledged within five (5) working days.

32.5.3. Investigation is conducted appropriately.

32.5.4. Outcome is communicated to the reporter if contact is provided.

**32.6. Malicious Reports**

32.6.1. Malicious or vexatious reports are not acceptable.

32.6.2. Knowingly false reports may result in consequences.

32.6.3. Good faith reports are protected regardless of outcome.

32.6.4. Distinction is made between mistaken and malicious reports.

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## **33. Protection from Retaliation**

### **33.1. Non-Retaliation Commitment**

33.1.1. IEB does not tolerate retaliation against those who disclose or report conflicts.

33.1.2. Retaliation includes any adverse action related to disclosure or reporting.

33.1.3. Protection applies regardless of the investigation outcome.

33.1.4. Retaliation is itself a serious breach.

### **33.2. Protected Activities**

33.2.1. Disclosing one's own conflicts.

33.2.2. Reporting suspected conflicts of others.

33.2.3. Participating in conflict investigations.

33.2.4. Providing information about conflicts.

33.2.5. Raising concerns about conflict management.

### **33.3. Forms of Prohibited Retaliation**

33.3.1. Termination or removal from role.

33.3.2. Demotion or reduction in responsibilities.

33.3.3. Harassment or intimidation.

33.3.4. Exclusion from activities or information.

33.3.5. Negative references or evaluations.

33.3.6. Any other adverse treatment.

### **33.4. Reporting Retaliation**

33.4.1. Suspected retaliation should be reported immediately.

33.4.2. Reports are made to the Director or Council Chair.

33.4.3. Reports are investigated promptly.

33.4.4. Protective measures are taken as needed.

### **33.5. Consequences of Retaliation**

33.5.1. Retaliation results in disciplinary action.

33.5.2. Serious retaliation may result in termination.

33.5.3. Retaliators may face personal liability.

33.5.4. IEB takes retaliation very seriously.

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## **34. Roles and Responsibilities**

### **34.1. IEB Governing Council**

- 34.1.1. Approves this policy and amendments.
- 34.1.2. Models ethical behavior and disclosure.
- 34.1.3. Ensures appropriate conflict management in governance.
- 34.1.4. Receives compliance reports.
- 34.1.5. Addresses serious conflict matters.

### **34.2. Council Chair**

- 34.2.1. Receives disclosures from Council members.
- 34.2.2. Manages conflicts within Council proceedings.
- 34.2.3. Ensures conflicts are properly recorded.
- 34.2.4. Escalates complex matters as appropriate.

### **34.3. Director**

- 34.3.1. Overall responsibility for policy implementation.
- 34.3.2. Receives and assesses significant disclosures.
- 34.3.3. Makes decisions on complex conflicts.
- 34.3.4. Reports to the Governing Council.
- 34.3.5. Ensures adequate resources for conflict management.

### **34.4. IEB Secretariat**

- 34.4.1. Administers the conflict of interest program.
- 34.4.2. Maintains the conflict register.
- 34.4.3. Provides guidance on conflict matters.
- 34.4.4. Monitors compliance.
- 34.4.5. Coordinates training.
- 34.4.6. Processes disclosure forms.

### **34.5. Committee Chairs**

34.5.1. Ensure conflicts are disclosed at meetings.

34.5.2. Manage recusals during meetings.

34.5.3. Ensure conflicts are recorded in minutes.

34.5.4. Escalate concerns as appropriate.

**34.6. Line Managers**

34.6.1. Receive disclosures from staff.

34.6.2. Assess and manage staff conflicts.

34.6.3. Ensure staff complete required declarations.

34.6.4. Model ethical behavior.

**34.7. All Participants**

34.7.1. Identify personal conflicts.

34.7.2. Disclose conflicts proactively.

34.7.3. Complete required declarations.

34.7.4. Comply with management measures.

34.7.5. Report concerns about others' conflicts.

34.7.6. Participate in training.

**34.8. Accredited Institutions**

34.8.1. Manage institutional conflicts appropriately.

34.8.2. Ensure representatives act with integrity.

34.8.3. Report concerns about IEB conflicts.

34.8.4. Cooperate with conflict management procedures.



## **35. Policy Review**

- 35.1. This policy will be reviewed every three (3) years.
  - 35.2. Reviews will assess the effectiveness of conflict management.
  - 35.3. Reviews will consider best practices in governance and ethics.
  - 35.4. Reviews will incorporate feedback from stakeholders.
  - 35.5. Reviews will consider lessons from compliance monitoring.
  - 35.6. Reviews will consider any incidents or concerns.
  - 35.7. Amendments will be approved by the IEB Governing Council.
  - 35.8. Stakeholders will be notified of significant amendments.
  - 35.9. The current version of this policy will be published on the IEB website.
  - 35.10. Forms and guidance documents may be updated more frequently.
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## 36. Disclaimer and Legal Position

36.1. IEB is an independent, private, non-governmental, and non-statutory international education authority.

36.2. IEB is registered in the United Kingdom (Company Registration Number: 13759057).

36.3. This policy establishes IEB's framework for managing conflicts of interest.

36.4. This policy supports ethical conduct in all IEB activities.

36.5. This policy does not create legal obligations beyond those established by applicable law.

36.6. IEB reserves the right to amend this policy at any time.

36.7. Compliance with this policy is required for participation in IEB activities.

36.8. Non-compliance may result in consequences as specified.

36.9. This policy complements but does not replace legal obligations.

36.10. Professional conduct requirements of individual professions also apply.

36.11. Participants remain responsible for their own ethical conduct.

36.12. Disputes regarding this policy shall be resolved in accordance with IEB procedures.

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## 37. Conclusion

37.1. This policy establishes IEB's comprehensive framework for conflict of interest management.

37.2. Effective conflict management is essential for accreditation integrity.

37.3. All IEB participants share responsibility for identifying and disclosing conflicts.

37.4. Proactive disclosure demonstrates commitment to ethical conduct.

37.5. Management measures protect process integrity and individual reputations.

37.6. IEB provides training and resources to support compliance.

37.7. Non-compliance has consequences proportionate to the breach.

37.8. Reporting concerns is encouraged and protected.

37.9. This policy reflects IEB's commitment to Discipline, Excellence, and Merit.

37.10. Questions about this policy should be directed to the IEB Secretariat.

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## **38. Annexures**

### **38.1. Annexure A: Annual Declaration of Interests Form**

- 38.1.1. Annexure A provides the form for annual conflict declarations.
- 38.1.2. The form covers all categories of interests.
- 38.1.3. The form is completed annually by all relevant personnel.
- 38.1.4. The annexure is available as a separate document from IEB Secretariat.

### **38.2. Annexure B: Activity-Specific Conflict Declaration Form**

- 38.2.1. Annexure B provides the form for activity-specific declarations.
- 38.2.2. The form is used before assessments, panels, and decisions.
- 38.2.3. The form identifies conflicts related to specific matters.
- 38.2.4. The annexure is available as a separate document from IEB Secretariat.

### **38.3. Annexure C: Supplementary Disclosure Form**

- 38.3.1. Annexure C provides the form for reporting new or changed conflicts.
- 38.3.2. The form is used to update previous declarations.
- 38.3.3. The form is submitted when circumstances change.
- 38.3.4. The annexure is available as a separate document from IEB Secretariat.

### **38.4. Annexure D: Conflict Assessment Checklist**

- 38.4.1. Annexure D provides guidance for assessing disclosed conflicts.
- 38.4.2. The checklist covers assessment criteria and considerations.
- 38.4.3. The checklist supports consistent conflict assessment.
- 38.4.4. The annexure is available as a separate document from IEB Secretariat.

### **38.5. Annexure E: Conflict Management Plan Template**

- 38.5.1. Annexure E provides a template for documenting management measures.
- 38.5.2. The template records the conflict, assessment, and actions.
- 38.5.3. The template supports monitoring and accountability.
- 38.5.4. The annexure is available as a separate document from IEB Secretariat.

**38.6. Annexure F: Meeting Conflict Disclosure Protocol**

- 38.6.1. Annexure F provides guidance for managing conflicts in meetings.
- 38.6.2. The protocol covers disclosure, recusal, and recording.
- 38.6.3. The protocol supports consistent meeting conduct.
- 38.6.4. The annexure is available as a separate document from IEB Secretariat.

**38.7. Annexure G: Assessor Conflict Screening Checklist**

- 38.7.1. Annexure G provides a checklist for screening assessor conflicts.
- 38.7.2. The checklist covers institutional, professional, and personal relationships.
- 38.7.3. The checklist supports appropriate assessor assignment.
- 38.7.4. The annexure is available as a separate document from IEB Secretariat.

**38.8. Annexure H: Examples of Conflicts and Management**

- 38.8.1. Annexure H provides illustrative examples of conflict situations.
- 38.8.2. Examples cover various conflict types and management approaches.
- 38.8.3. Examples support understanding and consistent application.
- 38.8.4. The annexure is available as a separate document from IEB Secretariat.

**38.9. Annexure I: Conflict of Interest Concern Report Form**

- 38.9.1. Annexure I provides the form for reporting concerns about conflicts.
- 38.9.2. The form may be used by any stakeholder.
- 38.9.3. The form supports confidential reporting.
- 38.9.4. The annexure is available as a separate document from IEB Secretariat.

**38.10. Annexure J: Training Acknowledgment Form**

- 38.10.1. Annexure J provides the form acknowledging training completion.
- 38.10.2. The form confirms understanding of policy requirements.
- 38.10.3. The form is completed after training.
- 38.10.4. The annexure is available as a separate document from IEB Secretariat.

## **39. Document Control**

### **39.1. Document Information**

39.1.1. Document Title: Conflict of Interest Policy

39.1.2. Document Code: IEB-POL-012

39.1.3. Version: 1.0

39.1.4. Effective Date: January 2026

39.1.5. Next Review Date: January 2029

39.1.6. Prepared by: International Education Board Governance Division

39.1.7. Approved By: IEB Governing Council

39.1.8. Classification: Public

### **39.2. Version History**

39.2.1. Version 1.0 represents the initial release of this policy.

39.2.2. Future versions will be documented with version number, date, and summary of changes.

39.2.3. All previous versions are archived and available upon request.

### **39.3. Related Documents**

39.3.1. IEB Accreditation Framework and Standards Policy (IEB-POL-001)

39.3.2. IEB Accreditation Process Policy (IEB-POL-002)

39.3.3. IEB Eligibility Criteria Policy (IEB-POL-003)

39.3.4. IEB Accreditation Levels and Status Policy (IEB-POL-004)

39.3.5. IEB Accreditation Validity, Monitoring, and Review Policy (IEB-POL-005)

39.3.6. IEB Complaints, Appeals, and Grievance Policy (IEB-POL-006)

39.3.7. IEB Data Protection and Privacy Policy (IEB-POL-007)

39.3.8. IEB Recognition and Representation Policy (IEB-POL-008)

39.3.9. IEB Logo Use and Intellectual Property Policy (IEB-POL-009)

39.3.10. IEB Accreditation Decision-Making and Oversight Policy (IEB-POL-010)

39.3.11. IEB Fee Structure and Payment Policy (IEB-POL-011)

39.3.12. IEB Code of Conduct (Operational Document)

39.3.13. IEB Governance Charter (Operational Document)

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## 40. Approval

40.1. This policy has been reviewed and approved by the IEB Governing Council.

40.2. This policy is effective from the date specified in Document Control.

40.3. All stakeholders are expected to comply with this policy.

40.4. Queries regarding this policy should be directed to the IEB Secretariat.

## Summary of IEB-POL-012

Aspect	Details
<b>Document Code</b>	IEB-POL-012
<b>Total Sections</b>	40
<b>Review Cycle</b>	Every 3 years
<b>Key Topics Covered</b>	Conflict types, financial conflicts, personal conflicts, professional conflicts, institutional conflicts, disclosure requirements, timing, procedures, assessment, management strategies, recusal, accreditation processes, governance, appeals, staff, assessors, committee members, consultants, confidentiality, record keeping, training, monitoring, non-compliance, reporting concerns, protection from retaliation
<b>Declaration Frequency</b>	Annual + activity-specific
<b>Record Retention</b>	7 years



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## Conflict Types Summary

Type	Description
<b>Financial</b>	Employment, ownership, investments, gifts, business relationships
<b>Personal</b>	Family, friendships, educational relationships, negative relationships
<b>Professional</b>	Employment, past employment, collaborations, career interests
<b>Institutional</b>	Employer affiliation, governance roles, competing institutions, partnerships
<b>Actual</b>	Currently exists and affects judgment
<b>Potential</b>	May arise in the future
<b>Apparent</b>	Appears to exist regardless of actuality

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## Management Strategies Summary

Strategy	Description	When Used
<b>Register and Monitor</b>	Record and track	Minor/potential conflicts
<b>Disclose and Proceed</b>	Transparent participation	Minor conflicts
<b>Restrict Participation</b>	Partial involvement	Conflicts affecting only part of activity
<b>Enhanced Oversight</b>	Additional review	Moderate conflicts, participation necessary
<b>Recusal</b>	Complete withdrawal	Significant conflicts
<b>Divestment</b>	Remove the interest	Ongoing significant conflicts
<b>Removal from Role</b>	Exit from IEB role	Pervasive/disqualifying conflicts

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**End of Document**

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