

### Personal and Business Relationships Disclosure Form

Office of Ethics & Compliance



#### Purpose

To assist University Hospital employees in determining whether they have personal or financial interests that are incompatible with the performance of their public duties related to the procurement process.

If such interests create a conflict of interest or the appearance of a conflict, recusal is required.



#### Personal & Business Relationships Disclosure Form

## Filled out by University Hospital employees involved in the procurement process.

Office of Ethics & Compliance



#### **Procurement Process**

### Drafting, Reviewing, Evaluating or Awarding Contracts OR Substantively assisting in those tasks OR

Authorizing payment under such contracts



#### **Personal Relationships**

Disclose relationships with:

- Family members/relatives
- Friends
- Work colleagues
- Neighbors you interact with regularly
- Members of professional and trade organizations you see regularly
- Former classmates you have ongoing relationships with



#### **Disclose Personal Relationships with:**

Persons you socialize with, such as dining, playing golf, visiting for the holidays, work within the community, or have more than one casual interaction with.



#### **Business Relationships**

Disclose interests in firms, associations, partnerships, corporations or other business organizations that do business with University Hospital or seek to do business with University Hospital.



#### **Professional Relationships**

Disclose relationships with professionals who do business with University Hospital or seek to do business with University Hospital, including, but not limited to:

Attorneys, Accountants, Contractors, Doctors, Electricians, Engineers, Landscapers, Plumbers, etc.



#### **Disclosure Period**

Disclose personal, business, and professional relationships for five years prior to completion of the form up to the date of filing.



#### **Updating the Form**

After the initial filing:

Review the form annually to ensure that is correct and complete.

Update as necessary when there is a material change to any response.



#### **Review and Processing**

File the form with the University Hospital Ethics Liaison Officer (ELO). In turn, the ELO is required to send a copy of the form to the State Ethics Commission.



#### Recusal

If an employee has a business, personal or professional relationship with an entity or individual seeking to contract with University Hospital, the employee must recuse from any involvement in the procurement process involving the entity or individual.



#### How to Recuse

The recusal must be in writing, filed with the Ethics Liaison Officer. All recusals will be forwarded and filed with the State Ethics Commission.



#### When In Doubt

# The State Ethics Commission advocates more, rather than less disclosure.

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#### The Personal and Business Relationships Disclosure Form is available on the Office of Ethics & Compliance website: <u>www.uhnj/org/compliance</u>

If you have any questions, contact the ELO at 973-972-3450