

Family Mental Fitness North East

Advisory Panel –Agreement & Conflict of Interest Declaration



As an Advisory Panel member, I confirm that I:

1. Understand my role is advisory and I have no legal or financial responsibility for FMFNE.
2. Will act in the best interests of FMFNE at all times.
3. Will treat staff, volunteers, service users, and fellow panel members with respect.
4. Will keep all non-public information about FMFNE confidential.
5. Will declare any conflicts of interest and avoid situations where my personal or professional interests could influence my advice.
6. Will follow FMFNE's Safeguarding Policy and report any concerns immediately.
7. Will only speak on behalf of FMFNE if authorised by the Director.
8. Will make every effort to attend meetings, read materials in advance, and contribute constructively.
9. Accept that FMFNE may remove me from the Advisory Panel if I fail to meet these expectations.

Conflict of Interest Declaration

Please declare any roles, relationships, or financial interests that could be relevant to FMFNE's work, or leave blank if there are none.

(Examples: trustee of another charity, employed by a partner organisation, relative of a service user, etc.)

Conflicts: _____

I agree to update FMFNE if my circumstances change.

Declaration

I have read and understood the above statements and agree to follow them while serving on the Advisory Panel of Family Mental Fitness North East.

Signed:

Date:

Name:

Signed:

Director:

Date: 13/08/2025

Version: 1.0

Approved by: Director

Date: 13/8/25

Review Date: 13/8/25



