

Region VI Workforce Development Board 17 Middletown Road White Hall, WV 26554	Classification: Conflict of Interest Policy
	Approval Date: 9/11/2025

Approved by: Region VI WDB

Review by date: 9/11/2030

Region VI Guidance Letter No. 35-25

1. PURPOSE: The purpose of this policy is to provide guidance to the Region VI Workforce Development Board (Region VI WDB) in identifying and handling potential, actual and perceived conflicts of interest in conducting business with integrity, honesty and ethical principles.
2. REFERENCE: Workforce Innovation and Opportunity Act (WIOA), Public Law 113-128
29 CFR § 683.200 – Administrative Provisions on Conflict of Interest
29 CFR § 679.430 – Local Workforce Development Board Functions
West Virginia Governmental Ethics Act, W.Va. Code §§ 6B-1-1 et seq.
Office of Management and Budget (OMB) Uniform Guidance, 2 CFR Part 200
WorkForce West Virginia Policy # GAS-COI-25-VI – Conflict of Interest Requirements for Local Workforce Development Boards
3. BACKGROUND: WIOA requires recipients of Title I funds—including Local Workforce Development Boards (LWDB's)—to implement internal controls that prevent real or perceived conflicts of interest in governance, procurement, service delivery, oversight, and other operational activities.
4. SCOPE: Region VI WDB defines the scope of its local COI policy to apply to all individuals and entities involved in its governance and operations. At a minimum, this includes:
 - LWDB members;
 - Standing and ad hoc committee members;
 - Administrative and program staff;
 - Contractors, vendors, and subcontractors;
 - Service providers and partner entities;
 - Any individual or entity with actual or potential influence over LWDB decision-making.
5. DEFINITIONS:
 - Conflict of Interest**: A situation in which a person's personal, financial, or professional interests could impair or appear to impair their objectivity in decision-making on behalf of the LWDB.
 - Appearance of a Conflict**: A situation in which a reasonable person could question a decision-maker's impartiality due to personal, professional, or financial ties.
 - Covered Individuals**: Refers to any individual who is subject to the conflict-of-interest provisions set forth in this policy.
 - Financial Benefit**: Direct or indirect monetary gain, including contracts, gifts, salaries, or commissions.
 - Non-Financial Benefit**: Preferential treatment, employment opportunities, or honorary roles that may influence objectivity.
 - Immediate Family**: A spouse, dependent child(ren), dependent grandchild(ren), and dependent parent(s) residing in the same household.
 - Relative**: Includes all individuals defined as *immediate family* and extends to the following, regardless of place of residence or dependency status:
 - Stepparent, grandparent, or step-grandparent

- Stepchild, grandchild, or step-grandchild
- Brother or sister, including half-siblings, step-siblings, and siblings-in-law
- Aunt, uncle, niece, or nephew, including step and in-law relationships
- First or second cousin
- Father-in-law, mother-in-law, son-in-law, daughter-in-law, and their step equivalents

•**Domestic Partner:** An individual in a committed personal relationship residing in the same household and sharing financial/domestic responsibilities.

•**Business Partner:** Any person or entity with a business relationship with a covered individual, including joint ownership or shared financial interests.

•**Recusal:** The act of abstaining from participating in a matter due to a real, potential, or perceived conflict of interest.

6. POLICY:

6.1 Conflict of Interest Prohibition

Region VI WDB covered individuals are prohibited from:

- Voting or participating in decisions involving contracts or services provided by an entity they represent.
- Participating in decisions where they, their relative, domestic partner, or business partners could benefit.
- Receiving personal, familial, or partnership-related benefits from contracts or agreements in which they had influence or decision-making authority, including those involving a relative, domestic partner, or business partner.
- Entering into business relationships arising from their official role.
- Accepting gifts, favors, or other items of value from individuals or entities when such acceptance could reasonably be perceived as compromising impartiality or influencing official decision-making *

**Region VI WDB shall adopt procedures consistent with the WV Ethics Act and interpretive guidance issued by the WV Ethics Commission on the solicitation and acceptance of gifts. (Attachment D – Gift Guidelines)*

6.2 Disclosure Requirements

Region VI WDB covered individuals must:

- Complete the Conflict-of-Interest Acknowledgement and Disclosure Form (**Attachment A**) upon appointment, employment, or contract execution.
- Renew the Conflict-of-Interest Acknowledgement & Disclosure Form annually.
- Notify the Region VI WDB and update the Conflict-of-Interest Acknowledgement & Disclosure Form within 2 business days if a new conflict arises.
- Disclose personal, familial, or partnership/business-related financial interests with entities seeking Region VI WDB administered funds.
- Promptly disclose, in writing and within 24 hours, upon obtaining credible evidence of any violation of federal criminal law involving fraud, conflict of interest, bribery, or gratuity violations in accordance with 2 CFR 200.113 – Mandatory Disclosures.*

**Region VI WDB must ensure that all subrecipients and sub-contractors understand and comply with the federal reporting requirements under 2 CFR 200.113 by disseminating the policy at the time the contract is signed and reviewing internal control processes during annual subrecipient and/or sub-contractor monitoring.*

6.3 Recusal Procedures

Region VI WDB covered individuals must:

- Declare any conflicts in writing when known

-Recuse themselves from related discussions or votes

** Recusals will be documented in the Region VI WDB meeting minutes or official records and documentation of such recusals will be managed by the Region VI WDB Ethics Officer.*

6.4 Ethics Oversight and Conflict Management

-Region VI WDB will designate an Ethics Officer as approved by the board of directors at the meeting whereas the said policy is approved – scheduled for September 11, 2025.

-The Ethics Officer will be responsible for reviewing all initial and annual disclosures and report any potential conflicts to the board at such times a conflict is perceived or should arise.

- The Ethics Officer will be responsible for recording all disclosures, actions taken, and resolutions during each reporting period. (**Attachment C – Annual Conflict of Interest Disclosure Log**)

- The Ethics Officer's own annual disclosure will be reviewed by the CLEO and Executive Director for potential conflicts and noted to the board if any arise.

-The Ethics Officer and/or CLEO shall make recommendations to the board regarding the need for mitigation plans, if necessary.

-Mitigations measures may include, but not limited to, duty reassignment, divestiture, or role modifications.

- All mitigation measures will be documented in the official records and/or meeting minutes of Region VI WDB.

UPDATE: Amy Hall, Program Director/EEO Officer, was approved by unanimous vote at the September 11, 2025 board meeting to serve as the Region VI WDB Ethics Officer until rescinded. Amy's contact information is as follows: Phone: 304-368-9530 and email address: ahall@region6wv.org

6.5 Reporting and Transparency

-The Region VI WDB Ethics Officer will maintain secure records and documentation of all regional Conflict of Interest Forms, recusals and mitigations.

- The Region VI WDB Ethics Officer shall submit an annual Conflict of Interest Summary Report (**Attachment B**) to WorkForce West Virginia along with the annual Conflict Disclosure Log to WorkForceEO@wv.gov no later than September 30 of each program year.

-Region VI WDB staff will post a redacted version of the summary report – removing all Personally Identifiable Information (PII) – on the region's public website no later than October 1 of each program year.

- The Region VI WDB Ethics Officer or designated staff will retain all Conflict-of-Interest Disclosures, training material and report summaries for a minimum of three (3) years following the end of the program year in which they were created, or longer if subject to ongoing audit, litigation, or investigation.

6.6 Enforcement and Sanctions

Any violations of this policy are subject to investigation through the appropriate legal channels and may result in (but not limited to) the following:

- Reprimand

- Removal from position

- Contract termination

- Action under the state's WIOA Sanctions Policy

* The Governor or the Chief Elected Official can remove a member of the board for a

violation of conflict-of-interest code with or without a recommendation from the Region VI WDB.

6.7 Training and Education

- Region VI WDB will provide workforce-relevant Ethics and Conflict of Interest training during onboarding and annually.
- Training will be updated to reflect new guidance and/or legal changes within 30 days of notification of changes.

6.8 Policy Review and Updates

- Region VI WDB will conduct an annual review of its Conflict-of-Interest policy and revise it as needed to incorporate changes in WIOA law, CFR updates, and ensure continued alignment with current guidance and requirements.
- Region VI WDB will submit their updated local Conflict of Interest policies to WorkForce West Virginia at WFWVTAC@wv.gov for review and feedback.

7. ATTACHMENTS:

The following attachments will be utilized in conjunction with this policy:

- Attachment A - Conflict of Interest Acknowledgement and Disclosure Form
- Attachment B – Annual Conflict of Interest Summary Report
- Attachment C – Annual Conflict of Interest Disclosure Log
- Attachment D – Region VI WDB Gift Guidelines

8. ACTION:

The Region VI WDB will make all stakeholders in the Region VI Workforce area aware of this policy.

A copy of this policy can be obtained from the Region VI WDB or by downloading it from the Region VI WDB website at www.regionviwv.org in Guidance Policies under the “About” tab.

9. EXPIRATION DATE:

Effective until rescinded or modified by the Region VI Workforce Development Board.

ATTACHMENT A -

Conflict of Interest Acknowledgment and Disclosure Form

WIOA Title I Programs

Purpose

To promote transparency, integrity, and compliance with federal and state ethics requirements, all individuals engaged in activities funded under the Workforce Innovation and Opportunity Act (WIOA) Title I must annually review and acknowledge their understanding of and agreement to comply with the Local Workforce Development Board's (LWDB) Conflict of Interest Policy.

This requirement applies to, but is not limited to employees, officers, agents, and board members of the LWDB, which can include:

- Workforce Development Board members
- Standing and ad hoc committee members
- Administrative and program staff
- Contractors, subrecipients, and service providers
- One-Stop Operator staff
- Any individual involved in procurement, oversight, or decision-making processes

Section I: Individual Information

Full Name: _____

Title/Role: _____

Organization/Agency (if applicable): _____

Date: _____

Section II: Disclosure of Potential Conflicts of Interest

Please disclose any relationships, affiliations, or financial interests (direct or indirect) that may present a real or perceived conflict of interest in relation to your role within the WIOA Title I workforce system. This includes, but is not limited to:

- Employment with or financial interest in entities receiving or seeking WIOA Title I funds

- Service on boards or advisory committees of training providers or contractors

- Personal, familial, or business relationships with individuals or organizations engaged with the LWDB

- Participation in procurement or oversight processes that could be affected by such interests

Attach additional pages as needed.

Affiliations/Interests to Disclose: ☐ None ☐ Yes – Please describe below:

Section III: Acknowledgment and Certification

By signing below, I certify the following:

- I have received, reviewed, and understand the LWDB's Conflict of Interest Policy.
- I understand that the policy applies to my role in all WIOA Title I-funded activities, regardless of my position as staff, board member, contractor, or partner.
- I agree to disclose any actual, potential, or perceived conflicts of interest as soon as they arise and to recuse myself from related decisions or discussions when applicable.
- I understand that failure to comply with the Conflict-of-Interest Policy may result in corrective action, including removal from position, contract termination, or other appropriate remedies.

Signature: _____

Title/Role: _____

Date: _____

ATTACHMENT B

Annual Conflict of Interest (COI) Summary Report

Program Year: Local Workforce Development Board: Date of Submission: Submit to: WorkForce West Virginia at WorkForceEO@wv.gov

Section I: General Information

- Name of Ethics Officer or Responsible Party:**
- Contact Information:** *Email: Phone:*
- Date of Local COI Policy Review/Update:**
- Date of Most Recent COI Training Conducted:**

Section II: Conflict of Interest Disclosure Log Instructions

All identified conflicts of interest must be recorded in **Attachment C**. This log serves as the official record of all disclosures, actions taken, and resolutions during the reporting period.

The completed log (**Attachment C**) must be submitted alongside Attachment B – the Annual Conflict of Interest Summary Report.

Instructions for Completing the Log:

Each entry should be completed using the following guidance:

- Name of Individual:** Enter the full name of the individual disclosing the conflict.
- Role/Title:** Specify the person's role or job title.
- Nature of Conflict:** Provide a short but clear description of the conflict (e.g., "Board member's spouse works for a subrecipient vendor").
- Date Identified:** Enter the date when the conflict was disclosed or first identified.
- Action Taken:** Describe what was done to manage or mitigate the conflict (e.g., individual recused from vote, alternate member assigned, etc.).
- Resolution Date:** Enter the date when the conflict was fully resolved or when mitigation efforts were finalized.

Ensure that each field is completed to the best of your ability. Blank fields should only be left empty if the information is not yet available, in which case the entry **must** be updated later.

Attachment C is a required component of your annual submission package.

Section III: Summary of Recusals and Mitigation

•**Total COI disclosures submitted:**

•**Total recusals recorded in official meeting minutes:**

•**Mitigation actions taken:**

- Duty reassignment
- Recusal from vote/discussion
- Contract modification
- Ethics consultation
- Other: [Specify]

•**Any unresolved or ongoing conflict issues?** ☐ Yes ☐ No If yes, please explain:

Section IV: Training and Awareness

•**Number of new staff/board members trained this year:**

•**Annual COI training completed:** ☐ Yes ☐ No

•**Training materials attached:** ☐ Yes ☐ No (Attach sign-in sheets, agenda, or materials if available)

Section V: Process Improvements or Recommendations

•[Briefly describe any changes made to strengthen internal COI processes.]

•[Note any challenges encountered or recommendations for policy updates.]

Section VI: Certification

I certify that the information contained in this report is complete and accurate to the best of my knowledge, and that all required disclosures and mitigation steps were handled in accordance with our local COI policy and WFWV requirements.

Signature: _____

Name (Printed): _____

Title: _____

Date: _____