

## Guide for Conflict of Interest Disclosure Monitoring—Department Chairs, Deans, and Supervisors

In accordance with **UNCP POL 05.45.01**: Policy on Conflicts of Commitment and Interest Affecting University Employment, part of your responsibilities as Department Chair, Dean, or supervisor include reviewing disclosed conflict of interests and/or External Professional Activities for Pay (EPAP) forms and instituting methods for addressing any such conflicts of interest/commitment for employees in your unit.

Although the primary interests of UNC Pembroke include teaching, scholarship, and service, sometimes our Covered Employees (EHRA employees, including faculty, non-faculty, and designated SHRA employees who are paid with sponsored research funds) have secondary interests that may affect objectivity in conducting their duties as employees of UNC Pembroke. These secondary interests may constitute a Conflict of Interest, or they may create the perception of one. Disclosure of a potential, perceived, or actual Conflict of Interest is a first step towards transparency. How we navigate these disclosures speaks to the integrity of our University.

What do you do once you have received a notification that one of your employees has disclosed a potential Conflict of Interest?

**Step 1: First, ascertain the nature of the conflict, keeping these elements in mind:**

- Whether the conflict has the potential to influence the design, interpretation of data, presentation of results of research; or interferes with the ability of the employee to conduct his/her job responsibilities without influence of a secondary interest.
- What is likelihood of the influence (i.e., is oversight needed to ensure it does not happen)?
- What are the impacts of the influence (such as personnel or student supervision, intellectual property ownership, conflict of commitment by the employee to his/her ability to carry out their employment responsibilities)?

**Step 2: As the supervisor, you must determine whether the conflict can and should be managed:**

- There are four categories of conflicts of interest that an employee might disclose (see section 5 of **POL 05.45.01**). You will also need to identify whether any of the activities falls under one of these categories:

\*\*\*Note: The following bulleted list includes those activities **prohibited** by UNC Pembroke and UNC System policy—and cannot be managed\*\*\*

- i. The conflicted person is making referrals of University business to an external enterprise in which the individual or an immediate family member has a financial interest.
- ii. The conflicted person is associating his or her own name with the University in such a way as to profit financially by trading on the reputation or goodwill of the University.
- iii. The conflicted person is making unauthorized use of privileged information acquired in connection with the Covered Employee's University Employment Responsibilities.
- iv. The conflicted person is signing agreements that assign University patent and/or other intellectual property rights to third parties without prior University approval.
- v. Any activity otherwise prohibited by law or University policy.

\*\*\* Also Note: If the activities have already occurred, consider whether disciplinary action or remediation is needed\*\*\*

- If the situation does not fall under the prohibited categories, you have two options:
  - Review the disclosure to determine whether a management plan is needed (see step 3)
  - Ask the Dean or next tier supervisor to consider requesting a review by the COI Committee (see step 4)

### **Step 3: Developing the Conflict of Interest Management Plan (COIMP):**

- Make sure the plan is complete:
  - i. All conflicted individuals involved in the disclosed activity should be included in the COIMP.
  - ii. Any other affected departments should also review the COIMP.
  - iii. Confirm the conflict is adequately described, including financial and supervisory implications.
  - iv. Ensure the period that the conflict requires management (the duration of the project) is accurate and reasonable.
  - v. Confirm the proposed steps to manage the conflict are appropriate and adequate for the potential risk to research results, probability of the impact, and potential harm of the impact.
- Provide an outline for ensuring objectivity and integrity in the project. Some steps that could be taken include, but are not limited to:
  - Should a neutral/non conflicted party be assigned for oversight of any step? This may be to confirm work is completed, timecards, payments processed, etc.
    - If a party is identified, they should be named in the COIMP.
  - Would it be appropriate to have an objective individual or group review the data collection prior to publication or dissemination? Should data collection be reviewed during the course of the project (if safety of human participants or use of animal subjects is a concern)?
    - If an individual or group is needed, they should be named in the COIMP.
  - When possible, the conflicted individual(s) should divest financial interests of the entity causing the conflict.
  - When possible, the conflicted individual(s) should remove him/herself from role or fiduciary responsibilities generating the conflict.
  - Avoid using UNC Pembroke's name, trademarked logo, or conflicted individual's position at UNC Pembroke as influence for personal gain during the management period without express written permission.
  - Avoid using UNC Pembroke's resources—student help, equipment, oversight bodies, other University services—to support the activity generating the conflict.
  - Disclosure of the conflict to all relevant parties, such as lab personnel, student employees, human subjects, journals, or publications.
  - Limit time on project causing conflict to time not specifically dedicated to employment responsibilities.
  - Consider whether income received by individuals is appropriate (for example, if they are receiving payment for a sponsored project but are also receiving income from a private company involved in the sponsored research).

- This scenario may warrant a review by the COI Committee or University's Office of General Counsel
  - If the project requires oversight by another committee (i.e., the IRB, IACUC, IP Committee, IBC, etc.), request that the appropriate committee consider the conflict of interest as it applies to the regulatory requirements for oversight of the project. Sometimes these committees will add oversight requirements to manage the conflict in order to remain compliant with their respective regulations.
- Who should sign the COIMP?
  - All parties who have a conflict
  - Named party/parties who provide objective oversight or review
  - Named party/parties who will authorize payment or timecards
  - Supervisors
  - Department Chairs
  - Deans
- How frequently should the plan be reviewed and who should review it?
  - i. If the project is less than 1 year in duration, it likely doesn't need review
  - ii. Annual review is generally the accepted minimum, but more frequent reviews may be necessary (for example, if the project is expected to have ongoing turnover of project staff)

**Step 4: Coordinating with the COI Committee:**

- The COI Committee can review complex situations, and it is charged with:
  - i. Providing counsel and assistance to department chairs, directors, supervisors, deans, vice chancellors in determinations of a conflict of interest
  - ii. Determining whether a conflict exists
  - iii. Determining whether the conflict can be managed
  - iv. Providing recommendations for managing the conflict (but does not create a management plan)
    - It is recommended a draft management plan be provided to the Committee as part of the materials to be reviewed
- When the potential Conflict of Interest is **for Non-PHS-Funded Research**, the COI Committee is charged with:
  - i. Review of each disclosure to determine whether it is (1) a disclosure revealing no conflict, or (2) a disclosure requiring additional review. Although the National Science Foundation defines Significant Financial Interests at the minimum financial threshold of \$10,000 or greater in the aggregate over the preceding twelve (12) months, UNC Pembroke COI Committee members will use their reason and judgment to assess potential conflicts of interest regardless of the monetary level.
  - ii. Consultation with the investigator, the chair, and the dean, to develop and recommend an appropriate management plan.
  - iii. along with the chair and dean, be responsible for ongoing monitoring of the management plan, with regular reports provided to the Provost and Vice Chancellor for Academic Affairs.

- When the Potential Conflict of Interest is **for PHS-Funded Research**, the COI Committee is charged with:
  - i. Review of each disclosure to determine whether it is (1) a disclosure revealing no conflict, or (2) a disclosure requiring additional review. Although the PHS agencies defines Significant Financial Interests at the minimum financial threshold of \$5,000 or greater in the aggregate over the preceding twelve (12) months, UNC Pembroke COI Committee members will use their reason and judgment to assess potential conflicts of interest regardless of the monetary level.
  - ii. Consultation with the investigator, the chair, and the dean, to develop and recommend an appropriate management plan.
  - iii. along with the chair and dean, be responsible for ongoing monitoring of the management plan, with regular reports provided to the Provost and Vice Chancellor for Academic Affairs.
  
- Other instances when the COI Committee review may be/is needed:
  - i. If the financial interests creating the conflict is considered significant (greater than \$5000).
  - ii. If the conflicted party/parties are receiving income from an external sponsor as well as from their non-UNC Pembroke interest (such as a private company) that is supporting the sponsored project.
  - iii. The entity sponsoring the research is also a donor to the University.
  - iv. The COIMP you are reviewing seems more complex to manage than using the suggested elements above.
  - v. Your Dean (or equivalent) would like additional review prior to signing the plan. If you aren't sure or need advice.
  
- Confer with the OSRP Office and/or the Office of General Counsel at any time.
- Confer with your Dean.