

Memo To: All UH-Downtown/PS Holders UH-Downtown/PS 06.A.09
Issue No. 2
From: Loren J. Blanchard, President Effective date: 11/30/2021
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Subject: Financial Conflicts of Interest in Research & Scholarship

1. PURPOSE

This PS on Financial Conflicts of Interest in Research (FCOI) applies to all Investigators, Administrators, and Research Support staff. This policy is intended to assist UH-D researchers and staff with institutional requirements regarding the disclosure, review, and reporting of conflicts of interest in research, in line with the requirements of research sponsors, such as the National Science Foundation (NSF) and the National Institutes of Health (NIH).

The term “conflict of interest in research” refers to situations in which financial or other personal considerations may compromise, or have the appearance of compromising, a researcher's professional judgment in conducting or reporting research.

All members of the academic community need to be familiar with this policy. When questions or doubts around conflict of interest come up, a researcher should discuss the situation with their Department Chair or Dean, ORSP, and/or the Conflict of Interest Committee (COIC).

In accordance with System Administrative Memorandum [02.A.29](#) – Ethical Conduct of Employees, no employee shall accept consulting or paid professional service which could result in any conflict of interest that would impair his/her independence of judgment in performance of university duties or induce the employee to disclose confidential information acquired through his/her position.

This policy requires annual certification by faculty, exempt and other key staff involved in funded research activities, including disclosure of any external consulting, employment, and professional activities, including service on governing boards and ownership in outside enterprises. Disclosure is required for any actual, perceived, or potential conflicts of interest related to external employment, benefits or external investments.

The 2011 revised Code of Federal Regulation ([42 CFR part 50.604](#)) promotes objectivity in research by establishing standards that provide a reasonable expectation that the design, conduct, and reporting of research funded under Public Health Service (PHS) grants or cooperative agreements will be free from bias resulting from Investigator financial conflicts of interest.

2. DEFINITIONS

- 2.1 The definitions for this policy follow [42 CFR part 50.603 - Definitions](#)
- 2.2 Investigator: An Investigator is not just the Project Director/Principal Investigator. "Investigator" is defined as any person, regardless of title or position, who is responsible for the design, conduct, or reporting of research funded or proposed for such funding -

potentially including collaborators or consultants. Students should be included if they are conducting research on these projects - whether on wages or stipends.

- 2.3 Administrators and Research Support Staff: Department Business Administrators (DBAs) and College Business Administrators (CBAs), and Research Support staff serve a vital role in providing layered internal controls to ensure best practices, mitigate risk, and adhere to standards of Uniform Guidance in financial matters related to research activities and sponsored programs.
- 2.4 Research: An activity is considered research if it meets the definition of research provided by the agency funding the project, or any agencies that oversee the project. If unfunded or not otherwise defined, the following definitions apply:
 - 2.4.1 A systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge. Activities which meet this definition constitute research for purposes of this policy, whether or not they are conducted or supported under a program which is considered research for other purposes.
 - 2.4.2 Systematic study directed toward fuller scientific knowledge or understanding of the subject studied. Research is classified as either basic or applied according to the objectives of the sponsoring agency.
- 2.5 Certification/ Disclosure Process: All individuals who meet the definition of Investigator as defined above must provide certification of their knowledge of and compliance with this policy on an annual basis. The certification process involves either a certification that no significant financial interests exist, or the disclosure of existing significant financial interests to the Institution.

In addition to the annual requirement, the acquisition or discovery of new financial interests requires disclosure within thirty (30) days. It is the responsibility of investigators to notify ORSP if real or potential conflicts of interest arise. As part of regular post-award monitoring and reporting, investigators will be reminded of these obligations. Forms for annual and new disclosures are available at the ORSP website.
- 2.6 Significant Financial Interest: A Significant Financial Interest (SFI) is a financial interest consisting of one or more of the interests of the Investigator (and those of the Investigator's family) that reasonably appears to be related to the Investigator's institutional responsibilities. These interests are defined at [42 CFR part 50.603](#) and in Section 5.3 below.
- 2.7 Financial Conflict of Interest: A significant financial interest that could directly and materially affect the design, conduct, or reporting of research. Similarly, if a significant financial interest could reasonably appear to be affected by the research, or the interest is in entities whose financial interests would reasonably appear to be affected by the research, review and elimination or management of the conflict is required.

- 2.8 Institution Responsibilities: Professional responsibilities of Investigators, Administrators, and Research Support Staff on behalf of the Institution including, but not limited to, activities such as research, research consultation, teaching, professional practice, Institutional committee memberships, and service on panels or committees.
- 2.9 Designated Official: The individual at the Institution responsible for the solicitation and review of disclosures of significant financial interests from each Investigator who is participating in, or is planning on participating in, research. The Designated Official for the University of Houston - Downtown is the Provost.
- 2.10 Family: as defined in the University of Houston System - [SAM 02.A.29](#) this includes a family member related to an employee or official within the second degree by affinity or consanguinity. A family member under this definition includes the following relatives of the employee or official: child, parent, spouse, domestic partner, sister, brother, grandchild, grandparent, mother-in-law, father-in law, son-in-law, daughter-in-law, stepson, stepdaughter, stepmother, stepfather, brother-in-law, sister-in-law, spouse's grandparent, spouse's grandchild, grandchild's spouse, or the spouse of a grandparent.

3. POLICY

- 3.1 Conflicts of interest are common in a modern university. They can arise out of the fact that a mission of the University is to promote public good by fostering the transfer of knowledge gained through university research to the private sector. Such a conflict is not inherently bad but does require transparency and possible management to maintain the integrity of the research.
- 3.2 This policy aims to inform individuals about situations that generate research-related financial conflicts of interest, and to provide means for faculty, staff, students, and the University to identify, manage, reduce, and/or eliminate actual or potential conflicts of interest.
- 3.3 All significant financial interests held by Investigators, Administrators, Research Support Staff, and members of their family must be disclosed - [42 CFR 50.603](#). Significant Financial Interests fall into one of the following categories and could be reasonably related to any of an investigator's institutional duties:
- 3.3.1 Remuneration in excess of \$5,000 from a publicly-traded entity during the preceding 12 months. This includes salary and any payment for services not otherwise identified as salary (consulting fees, honoraria, paid authorship);
 - 3.3.2 Equity interest (stock, stock options or other ownership interest) in a publicly traded company in excess of \$5,000 at the time of certification;
 - 3.3.3 Any combination of the above two items (equity and income) that exceeds \$5,000 during the preceding 12 months;

- 3.3.4 Any amount of equity (stock, stock options or other ownership interest) in a non-publicly traded entity, including a start-up company;
 - 3.3.5 Remuneration that exceeds \$5,000 from a non-publicly traded entity in the past 12 months, or
 - 3.3.6 Intellectual Property Rights and interests (e.g. patents and copyrights), upon receipt of such income related to such rights and interests income related to intellectual property rights in excess of \$5,000 paid by any source other than the Investigator's current institution.
 - 3.3.7 From a foreign institution of higher education or the government of another country: all financial interests;
 - 3.3.8 Gifts (personal) received from an outside entity in the preceding 12 months that exceed \$50 in value.
 - 3.3.9 Travel: Generally, Public Health Service (PHS)-funded investigators and staff must disclose reimbursed or sponsored travel paid for by a third-party entity, including non-profit organizations. Disclosure is not required for travel sponsored or reimbursed by a government agency, a U.S. Institution of higher education or a research institute affiliated with such, a U.S. medical center of a U.S. academic teaching hospital.
 - 3.3.10 Investigators, Administrators, and Research Support staff must disclose if they plan to purchase, or recommend, or approve the purchase of, goods or services for UHD from an entity with which they or a member of their family have a direct or indirect financial or other interest.
- 3.4 The following do not require disclosure:
- 3.4.1 Salary, royalties, or other remuneration paid by the Institution to the Investigator if the Investigator is currently employed for otherwise appointed by the Institution;
 - 3.4.2 Income from seminars, lectures, or teaching engagements sponsored by a federal, state, or local government agency, or an institution of higher education within the United States as defined at 20 U.S.C. 1001 (a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education;
 - 3.4.3 Income from investment vehicles, such as mutual funds and retirement accounts, as long as the Investigator does not control the investment decisions made in those vehicles;
 - 3.4.4 Income from service on advisory committee or review panels for a federal, state or

local government agency or Institution of higher education within the United States as defined at 20 U.S.C. 1001 (a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education; or

- 3.4.5 Intellectual Property Rights assigned to the Institution and agreements to share in royalties related to such rights.
- 3.4.6 This policy does not apply to Phase 1 Small Business Innovation Research (SBIR) and Small Business Technology Transfer (STTR) applications/awards.
- 3.5 Disclosures must include:
 - 3.5.1 The Investigator's current or pending relationship with the outside enterprise or entity in which a significant financial interest exists;
 - 3.5.2 The relationship of the research to the enterprise or entity;
 - 3.5.3 The means by which the Investigator proposes to address actual or potential conflicts of interest that arise from his/her (or members of family) dual University and enterprise or entity roles, and
 - 3.5.4 The dollar amount of the financial interest in specified ranges.
- 3.6 Common sense should prevail in these interpretations, such as whether a reasonable, disinterested person would question the relationship. If that is the case, it should be disclosed, and approval sought for the proposed arrangement.
- 3.7 Travel
 - 3.7.1 Generally, Public Health Services (PHS) funded Investigators, Administrators, and Research Support Staff must disclose reimbursed or sponsored travel paid for by a third-party entity, including non-profit organizations.
 - 3.7.2 Disclosure is not required for travel sponsored or reimbursed by a government agency, a U.S. Institution of higher education or a research institute affiliated with such, a U.S. medical center of a U.S. academic teaching hospital.
 - 3.7.3 When a travel request submitted through the UHD travel office indicates that an employee's travel is sponsored or reimbursed by a third party and the traveler is listed on a PHS award, the applicable Department Business Administrator or College Business Administrator should notify ORSP. ORSP will determine if further disclosure of travel and reimbursement information is needed.
 - 3.7.4 Travel disclosures should include the purpose of the trip, the identity of the sponsor, the destination, and the duration. The appropriate reviewing parties will determine if further information is required, including the monetary value, to ultimately

establish whether the travel might be considered and FCOI with the funded research.

3.8 Procurement

3.8.1 All institutional employees who are involved in procurement or contract management must disclose if they plan to purchase, or recommend or approve the purchase of, goods or services for UHD from an entity with which they or a member of family¹ have a direct or indirect financial or other interest.

3.9 Certification/Disclosure Review Process

3.9.1 All disclosures indicating a significant financial interest will be acknowledged by the appropriate department chair/unit head, appropriate dean, ORSP, and then reviewed by the UHD Conflict of Interest Committee (COIC). The COIC will collectively advise the Provost. This review will take into consideration any comments or concerns provided by the Investigator.

3.9.2 An actual financial conflict of interest (FCOI) exists when the Conflict of Interest Committee reasonably determines that the significant financial interest could directly and materially affect the design, conduct or reporting of the research conducted on behalf of UHD. The committee may request further information to make this determination, including but not limited to a management and oversight plan.

3.9.3 If it is determined that a conflict with the research exists, a written agreement to manage the conflict will be established by the COIC. The appropriate Department Chair/Unit Manager and Dean will be tasked to monitor adherence to this plan and report to the COIC on an annual basis until the conflict no longer exists.

3.10 Examples of conditions or restrictions that might be imposed to manage, reduce or eliminate actual or potential conflicts of interest can include- [42 CFR 50.606\(c\)](#):

3.10.1 Public disclosure of the conflict in publications and presentations;

3.10.2 Disclosure to human subjects participating in the research;

3.10.3 Disclosure to other research team members;

3.10.4 Appointment of an independent third party to monitor the research;

3.10.5 Modification of the research plan, with approval by the sponsor;

3.10.6 Change of personnel or personnel roles so that the individual in conflict does not participate in the part of the research that could be affected;

3.10.7 Reducing or eliminating the financial interest (e.g., sale of an equity interest);

- 3.10.8 Severance of relationships that create financial conflicts.
- 3.11 The institution may also request active monitoring of relationships that are determined not to represent direct and significant conflicts of interest if there is a reasonable potential for a conflict to develop in the future, based on the direction of the research and/or the relationship with the financial interest.
- 3.12 The COIC has responsibility for documenting and retaining information relevant to real and perceived potential conflicts of interest for at least three (3) years after the submission of the final expenditure report on the project.
- 3.13 Periodic monitoring will be carried out by ORSP as part of annual post-award reviews per funded project, or more often as required by the funding sponsor.
- 3.14 Departments, Colleges, and relevant Center Directors are responsible for ensuring that required management plans are carried out and monitored until the completion of the research.
- 3.15 Should an investigator wish to appeal a decision made by the COIC, he or she may present the appeal in writing to the Provost. If the Provost has a potential conflict of interest in the decision, the appeal will go to the President. The Provost/President decision on the appeal is final.
- 3.16 Training
- 3.16.1 All individuals meeting the definition of Investigator in Section II must take an Institutionally-recognized FCOI training course before utilizing research funds and at least once every four years - [42 CFR 50.604\(b\)](#).
- 3.16.2 UHD utilizes the FCOI modules 1 and 2 provided through the Collaborative Institutional Training Initiative (CITI Program), of which UHD is a member:
- Financial Conflicts of Interest: Overview, Investigator Responsibilities, and COI Rules (COI- Basic) (ID 15070)
 - Institutional Responsibilities as They Affect Investigators (COI-Basic) (ID 15072)
- 3.17 The training should be completed before certifications, so as to inform disclosures.
- 3.18 Additional training may be required more often under certain circumstances (e.g., failure to disclose significant financial interests, noncompliance with approved management plan, etc.).
- 3.19 Responsibilities

- 3.19.1 Designated Official - The Designated Official is responsible for the solicitation and review of disclosures of significant financial interests from each investigator at the Institution - [42 CFR 50.604\(d\)](#). The provost has delegated the solicitation/review responsibility to the UHD Conflict of Interest Committee (COIC) and the Associate Vice President for Faculty, Research & Sponsored Programs.
- 3.19.2 Conflict of Interest Committee (COIC) - The COIC is appointed by the Provost; and the membership is composed of four tenured faculty members, nominated by the deans of the four colleges with tenured faculty, a representative of Administration and Finance, and a representative of Human Resources. The Associate Vice President for Faculty, Research & Sponsored Programs, as well as a representative of the Office of Research & Sponsored Programs, will attend as non-voting advisory members. Faculty members on this committee ordinarily serve three-year, staggered terms. The COIC provides all guidance for the management of financial conflicts of interest and works with the Provost for input as necessary.

The COIC will determine whether an Investigator's submitted certification and significant financial interest could directly and materially affect the research or is in an entity that could be affected by the research. If it is determined that either of these conditions are in effect, a Financial Conflict of Interest exists. In this case, and prior to the expenditure of any research funds, the COIC will work with the Investigator, appropriate Chair and Dean, and Provost to develop a plan to manage or eliminate the conflict, and to ensure to the extent possible that the research is free of bias - [42 CFR 50.605\(a\)\(1\)](#).

The COIC has responsibility for documenting and retaining information relevant to real and perceived potential conflicts of interest for at least three (3) years after the submission of the final expenditure report on the project.

- 3.19.3 The Office of Research & Sponsored Programs (ORSP) - ORSP is responsible for:
- Maintenance of an up-to-date, written, enforced policy on research FCOI, publicly available on the ORSP website.
 - Notification to Investigators, Administrators, and Research Support Staff of new regulations and revised Institutional policy/Investigator responsibilities.
 - Reporting all required information regarding Financial Conflicts of Interest to federal sponsors.
 - Making information regarding FCOIs of senior/key personnel on PHS funded projects publicly available.
 - Maintenance/retention of all required FCOI records per agency requirements - [42 CFR 50.604\(i\)](#).

- ORSP will review active and new projects to ensure training and certifications are in place for faculty, staff and students involved.
- Periodic monitoring of management plans will be part of post award reviews completed by the Assistant Director of Post Award. These reviews are done at least on an annual basis, or more often if required by the funding sponsor.

3.19.4 Investigators, Administrators, and Research Support Staff

- Being familiar with and abiding by federal regulations and UHD Policy regarding FCOI.
- Ensuring that FCOI training is complete prior to utilizing research funds and at least once every four years.
- Filing an FCOI Certification and disclosure (if appropriate) to the Institution annually and within 30 days of discovering or acquiring a new significant financial interest.
- Confirming agreement to and complying with any management plan issued by the Institution; retaining documentation that demonstrates compliance with the management plan, such as but not limited to notices to journal editors or conference audiences, consent forms from human subjects research, and notices to laboratory personnel.

3.19.5 Colleges and Departments

- Colleges, Departments, and Center Directors are responsible for ensuring that Investigators, Administrators, and Research Support Staff submit annual certifications and disclosures.
- Ensuring that any assigned management plans adhere to the monitor reporting timelines as determined by the COIC.
- As indicated in Section III, signatories are encouraged to provide input with regard to additional factual information, concerns, or any conditions or restrictions that might be imposed by the Institution to manage, reduce, or eliminate such conflict of interest. Acknowledgers will also be actively involved in the final monitoring of plans to manage or eliminate conflicts.
- Departments, Colleges, and Center Directors are responsible for ensuring that required management plans are carried out and monitored until the completion of the research.

3.20 Awardees and subrecipients

- 3.20.1 When UHD is the primary awardee of a collaborative PHS- or NSF-funded project, it must assure that the financial interests of all subrecipients are reviewed and eliminated or managed properly. During the proposal development/pre-award stage and during the negotiation of a subaward, all subrecipients/potential subrecipients of PHS funding will be required to certify the following in writing via a Letter of Compliance - [42 CFR 50.604 \(g\)](#):
- 3.20.2 The subrecipient Institution has a policy in place to review and manage Significant Financial Conflicts of Interest that meets regulatory requirements.
- 3.20.3 The subrecipient's policy applies to the sub awarded portion of the research project, and
- 3.20.4 The subrecipient must agree that the identification of and management plan of any FCOI identified will be submitted to the awardee Institution for required reporting purposes.
- 3.20.5 If the subawardee Institution does not have a compliant FCOI program in place, the agreement must indicate that the subrecipient will follow UHD FCOI policy, including the pre-award and annual submission of a Certification (and disclosure, if applicable) to the UHD COIC within 30 days of the submission of the proposal.
- 3.20.6 The Federal Demonstration Partnership has a website listing educational and other institutions (with contact names) to document they are following the PHS FCOI rules.
- 3.21 Reporting to funding agencies
- 3.21.1 ORSP is responsible for reporting Financial Conflicts of Interest to funding agencies, as applicable.
- 3.21.2 For PHS Agencies such as NIH, reporting is required at:
- Proposal stage
 - Initial report - before expenditure of funds
 - Interim reports - within 60 days if a FCOI is determined to exist, or a new investigator is added to on the project
 - Annual report - if a FCOI has been previously reported
- 3.21.3 For the NSF reporting is required at:
- Proposal stage - The Authorized Organizational Representative (AOR) is required to complete certifications stating that the organization has implemented and is enforcing a written policy on conflicts of interest (COI), consistent with the provisions of Chapter IX.A: that, to the best of his/her knowledge, all financial disclosures required by the conflict of interest policy

were made; and that conflicts of interest, if any, were, or prior to the organization's expenditure of any funds under the grant, will be, satisfactorily managed, reduced or eliminated in accordance with the organization's conflict of interest policy.

- Financial disclosures must be updated during the award - either annually or when new Significant Financial Interests arise.
- UHD must notify NSF's Office of the General Counsel (OGC) if a Conflict of Interest is unmanageable - it cannot be managed, reduced or eliminated.

3.21.4 Other funding agencies:

- Other funding agencies that have specific protocols and processes in place to report and manage FCOI will be documented during the proposal development/pre-award stage and followed prior to submission of the proposal for external funding to the extent possible and required.
- Increasingly, Federal Agencies are following and sharing best practice on FCOI under the Federal Demonstration Partnership [COI Working Group](#)

3.22 Record Retention

3.22.1 The COIC has responsibility for documenting and retaining information relevant to real and perceived potential conflicts of interest for at least three (3) years after the submission of the final expenditure report on the project.

3.22.2 In terms of reporting on the FCOI linked to the project and the funding agency requirements, ORSP is responsible for the maintenance and retention of all financial disclosure documentation and of all actions taken to resolve conflicts of interest for at least three years beyond the date of submission of the final expenditures report of the grant to which they relate, or until the resolution of any funding agency action involving those records, whichever is longer. Additional retention might be required under [45 CFR 74.53\(b\)](#) and [92.42 \(b\)](#) for different situations - [42 CFR 50.604\(i\)](#).

3.23 Noncompliance

3.23.1 Failure of any investigator to comply with this policy shall constitute grounds for disciplinary action.

3.23.2 The processes outlined in UHD PS 06.A.07- Misconduct in Research, Scholarly, Creative, and Government Sponsored Activities Policy may be invoked in instances of noncompliance. Disciplinary action is based upon a reasonable inquiry and/or investigation of the noncompliance and is consistent with the severity of the violation. The employee will be referred to the relevant Vice President for coaching and corrective action. A range of examples includes, but is not limited to, the requirement for additional training/monitoring for minor violations up to the

imposition of restrictions on an academic staff member's participation in sponsored research for severe or continuing violations - [42 CFR 50.604\(j\)](#).

3.23.3 Additional PHS Requirements:

- If an investigator fails to disclose a SFI in a timely manner or if the institution realizes a potential conflict exists after an initial review, the Institution must, within 60 days, determine whether the SFI is related to the research, and whether it rises to the level of a FCOI. If found to be an FCOI, a management plan, even if interim, must be implemented. A FCOI report must be made to PHS at this time - [42 CFR 50.605\(a\)\(2\)](#).
- In addition, where it is discovered that UHD has failed to manage a FCOI or where a researcher has failed to comply with a management plan, the Institution must, within 120 days, complete a retrospective review of research to determine whether the research conducted during the period of noncompliance was biased in the design, conduct, or reporting of the research. If bias is identified, a mitigation report must be developed that outlines a plan of action to eliminate or mitigate the effect of the bias. The results of that determination and the mitigation report must be submitted to PHS - [42 CFR 50.605\(a\)\(3\)\(iii\)](#).

3.24 Public Accessibility

3.24.1 The Institution is required to make its policy on Financial Conflict of Interest publicly accessible via its website - 42 CFR 50.604(a). In addition, responses to public information requests for information concerning Significant Financial Interests must be disclosed within five business days in writing. Disclosures must meet the following criteria:

- The significant financial interest was disclosed and is still held by the senior/key personnel as related to the PHS-funded project,
- The Institution determines that the Significant Financial Interest is related to the PHS-funded research, and
- The Institution determines that the Significant Financial Interest is a Financial Conflict of Interest.
- The information that must be disclosed includes the following:
 - Investigator's name;
 - Investigator's title and role with respect to the research project;
 - Name of the entity in which the Significant Financial Interest is held;
 - Nature of the Significant Financial Interest; and
- Approximate dollar value of the Significant Financial Interest (dollar ranges are permissible: \$0-\$4,999; \$5,000-\$9,999; \$10,000-\$19,999; amounts between \$20,000-\$100,000 by increments of \$20,000; amounts above \$100,000 in increments of \$50,000) or a statement that the interest is one for which the value cannot be readily determined through reference to public prices or other reasonable measures of fair market value.

- Written Requests for information may be made through:
 - UHD's public-facing [ORSP website](#)
 - Via email at orsp@uhd.edu

4. PROCEDURES

- 4.1 This section outlines procedures for addressing Financial Conflicts of Interest in Research.
- 4.2 Certification/ Disclosure Procedures
- 4.2.1 All individuals who meet the definition of Investigator as defined above must provide certification of their knowledge of and compliance with this policy on an annual basis. The certification process involves either a certification that no significant financial interests exist, or the disclosure of existing significant financial interests to the Institution.
- 4.2.2 In addition to the annual requirement, the acquisition or discovery of new financial interests requires disclosure within thirty (30) days. It is the responsibility of investigators to notify ORSP if real or potential conflicts of interest arise.
- 4.2.3 As part of regular post-award monitoring and reporting, investigators will be reminded of these obligations.
- 4.2.4 Forms for annual and new disclosures are available at the ORSP website.
- 4.2.5 Disclosure is required when an Investigator who is new to participating in the research project or when an existing Investigator discloses a new Significant Financial Interest (SFI), the institution's designated official(s) shall within sixty (60) days review disclosures of SFIs - [42 CFR 50.605\(a\)\(2\)](#).
- 4.2.6 Certifications must also be actively updated:
- At the time of submission for new funding;
 - If unrelated to funding proposals, at the time of submission of human or animal protocols if financial relationships related to the research exist;
 - At least annually during the period of any funding award.
- 4.2.7 All certifications with disclosures meeting any of the thresholds described in the form will be acknowledged by the appropriate department chair/unit head, appropriate dean, ORSP, and then processed for UHD Conflict of Interest Committee (COIC) review.

- 4.2.8 Those acknowledging the disclosure are encouraged to add relevant information in terms of any factual content, concerns, or any insight into potential plans to manage, reduce and/or eliminate the potential conflict of interest, which the COIC will consider.
- 4.2.9 The COIC will determine whether an Investigator's submitted certification and significant financial interest could directly and materially affect the research or is in an entity that could be affected by the research. If it is determined that either of these conditions are in effect, a FCOI exists.
- 4.2.10 In the case of an identified FCOI, and prior to the expenditure of any research funds, the COIC will work with the Investigator, appropriate Chair and Dean, and Provost to develop a plan to manage or eliminate the conflict, and to ensure to the extent possible that the research is free of bias - 42 CFR 50.605(a)(1).
- 4.2.11 Should an investigator wish to appeal a decision made by the COIC, he or she may present the appeal in writing to the Provost. If the Provost has a potential conflict of interest in the decision, the appeal will go to the President. The Provost/President decision on the appeal is final.
- 4.2.12 The appropriate Department Chair/Unit Manager and Dean will be tasked to monitor adherence to this plan and report to the COIC on an annual basis until the conflict no longer exists.
- 4.2.13 ORSP will report all required information regarding the FCOI to the sponsor of the research.
- 4.2.14 Periodic monitoring will be carried out by ORSP as part of annual post-award reviews per funded project, or more often as required by the funding sponsor
- 4.2.15 The COIC has responsibility for documenting and retaining information relevant to real and perceived potential conflicts of interest for at least 3 years after the submission of the final expenditure report on the project.

5. REVIEW PROCESS

Responsible Party (Reviewer): Associate Vice President for Faculty, Research and Sponsored Programs

Review: Every three years on or before May 1st.

Signed original on file in the Office of Human Resources.

6. POLICY HISTORY

Issue #1: 9/17/21

7. REFERENCES

[42 CFR part 50.604](#) - The 2011 revised Code of Federal Regulation on Management and Reporting of Financial Conflicts of Interest.

[Financial Conflict of Interest | grants.nih.gov](https://grants.nih.gov)

[National Science Foundation Award and Administration Guide. Chapter IV](#)

[PAPPG Chapter IX \(nsf.gov\)](#) – NSF Conflict of Interest Policies

[SAM 02.A.08 – Consulting and Paid Professional Service](#)

[SAM 02.A.29 – Conflicts of Interest](#)

[PS 02.A.04 – Consulting and Paid Professional Service](#)

[PS 06.A.07- Misconduct in Research, Scholarly, Creative, and Government Sponsored Activities](#)