

SOP: GRI 04 Version No: 1 Effective Date: 10/22/04	CONFLICT OF COMMITMENT AND INTEREST FOR STAFF	Supercedes Document Dated:
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1. SUMMARY

Applies principles of the Conflict of Interest for Research Professional Staff policy to members of the Staff, while recognizing that consulting privileges are not normally extended to members of the Staff, and Staff are not normally required to complete an annual certification and disclosure.

2. POLICY

This establishes policy for Staff regarding Conflict of Commitment and Interest for Staff. “Staff” is defined as those employees that work for the Research Institute in technical, support and administrative functions. Professional staff, i.e. Principal Investigators, Research Scientists and certain Research Associates are not included in this definition.

3. CONFLICT OF COMMITMENT

Staff, employed on a full-time basis at Research Institute, owe their primary professional allegiance to the Research Institute, and their primary commitment of time and intellectual energies should be to the programs on which they are working. Whenever an individual's outside activities interfere with professional obligations to the Research Institute, a conflict of commitment exists.

In the case of Staff working at Research Institute on a part-time basis, this general principle applies to the extent of the Research Institute appointment. Staff on less than full-time appointments may engage in consulting relationships and other employment, to the degree that those activities do not interfere with their obligations to Research Institute.

The following points of policy relate to conflicts of commitment:

- 3.1. Outside consulting privileges are not normally available to Staff. They may consult only with permission, as noted below. Under no circumstances may any Staff member's outside consulting work exceed the limits imposed by the Outside Consulting Activities by Members of the Medical and Research Professional Staff, RPH 4.3 consulting policy, i.e., 13 days per calendar quarter (that is, one day in seven) on a full-time equivalent basis. (See further discussion in Section IV, below.) Staff may not use Research Institute resources, including facilities, personnel, equipment, or confidential information, except in a purely incidental way, as part of any outside consulting activities nor for any other purposes that are unrelated to the mission of the Research Institute.

NOTE: Permission for members of the Staff to consult, including the reasons for such permission, must be in writing, normally on a prospective basis, by the Division Director (for members of Staff – Medical), or by the principal investigator (for members of the Staff - Research). If such permission is granted, the Division Director or PI is responsible for assuring that the consulting activities of the Staff member do not adversely impact the achievement of program or project goals or subject the Research Institute to financial risk. He or she may require periodic written or oral reports in order to discharge this responsibility. The content of these reports, and the basis for the permission itself, are subject to review by the Division Director , relevant Associate Vice President. (See further discussion in Section IV, below).

3.2. Staff must maintain a significant presence on campus (Portland or Scarborough) throughout each quarter in which they are employed by Research Institute, consistent with the scope of their appointment.

3.3 Staff must not allow other professional activities to detract from their primary allegiance to Research Institute. For example, Staff employed on a full-time basis can not have any outside managerial responsibilities nor act as a principal investigator on sponsored projects that could be conducted at Research Institute but instead are submitted and managed through another institution.

4.0 **CONFLICT OF INTEREST**

A conflict of interest occurs when there is a divergence between an individual's private interests and his or her professional obligations to the Research Institute, such that an independent observer might reasonably question whether the individual's professional actions or decisions are determined by considerations of personal gain, financial or otherwise. A conflict of interest depends on the situation, and not on the character or actions of the individual.

Conflicts of interest are common and practically unavoidable in a modern Research Institute. Staff should conduct their affairs so as to avoid or minimize such conflicts of interest, and must respond appropriately when conflicts of interest arise.

The following points of policy relate to conflicts of interest:

4.1. Staff must foster the open and timely exchange of results of scholarly activities, informing Medical and Research Professional Staff Professionals, students and colleagues about outside obligations that might influence the free exchange of scholarly information.

4.2 .Staff must disclose on a timely basis the creation or discovery of all potentially patentable inventions created or discovered in the course of their Research Institute activities or with more than incidental use of Research Institute resources. Ownership of such inventions must be assigned to the Research Institute regardless of source of funding. The inventor will share in royalties earned.

- 4.3. Staff must disclose in writing to their supervisor, or to the principal investigator on their research, whether they (or members of their immediate family, as defined in the Conflict of Commitment and Interest for Medical and Research Professional Staff Policy) have consulting arrangements, significant financial interests (also defined in that policy), or employment in an outside entity which provides funding (either gift or sponsored), or is otherwise involved in procurement or technology licensing relationships with the Research Institute.
- 4.4 In situations in which the objectivity of a Staff member could reasonably be questioned, the supervisor or principal investigator is expected to raise the question to the Division Director or Associate Vice President of Research for review and determination of appropriate actions. Division Director Heads and Chiefs may consult with the Associate Vice President of Research in this regard.
- 4.5 Staff who are approved for Principal Investigator status are required to file an annual certification of compliance with the Conflict of Commitment and Interest for Medical and Research Professional Staff Policy within their Division Director.

If a situation raising questions of conflict of commitment or interest arises, Staff are urged to discuss the situation with their supervisor, principal investigator, or with the Division Director or Associate Vice President of Research.

5. **FURTHER DISCUSSION OF CONSULTING BY STAFF**

The decision to permit consulting by Staff will depend on the circumstances of each situation, including the needs of the program or project, the Staff member's role and the scope of his or her appointment. Such permission is subject to review as circumstances change. If permission is granted, time spent on consulting must be in addition to, rather than part of, the regular effort expected of the Staff member's Research Institute work. The nature of consulting activities should contribute to both the professional development of the individual and to the stature of the Research Institute.

Under no circumstances may any Staff member's outside consulting work exceed the limits imposed by the Outside Consulting by Members of the Medical and Research Professional Staff policy (RPH 4.3). Moreover, a Staff member's consulting activities may never exceed 13 days per calendar quarter (that is, one day in seven) on a full-time equivalent basis (this maximum applies to all periods of Research Institute employment, including vacations, quarter breaks, or other paid time off from work). Division Directors or PI's may limit a Staff member's outside consulting activities to fewer than 13 days per quarter as necessary to meet Research Institute program or project goals.

This policy applies throughout the Research Institute. In addition, there may be further restrictions placed on Staff consulting activities within individual divisions, departments, independent laboratories, Centers and institutes (including regulations applicable to individuals employed in clinical departments. Please check with your Division Director or Associate Vice

President of Research for information about further policy limits within your division or department.

In the event of conflict between the provisions of any consulting agreement and the terms and conditions of employment of a Staff member by the Research Institute, the latter shall prevail. The following paragraph (or one similar) should be included in Staff members' outside consulting agreements:

The terms and conditions of employment by the Research Institute and the provisions of any agreement between The Research Institute and external sponsors of projects on which the consultant works as part of his/her Research Institute duties, shall prevail in the event of any conflict with the provisions of this Agreement.

It is the responsibility of each Staff member who wishes to engage in outside consulting to be aware of the Research Institute's limits on such activities. For further information, please contact your division or Division Director, office of the President or Associate Vice President of Research.

6. RELATED RESEARCH POLICY DOCUMENT(S)

- GRI 03 Conflict of Commitment and Interest for Research Professional Staff Policy
PHS and NSF Requirements Regarding Financial Disclosures
- IP 04 Outside Consulting Activities by Members of the Medical and Research Professional Staff
- IP 01 Inventions, Patents, and Licensing
- GRI 02 Code of Conduct for Business Activities

7. AUTHORITY

The AVP, for Research is responsible for the interpretation and overall coordination of this Policy.