I. POLICY STATEMENT AND PURPOSE:

It is the policy of the University of Michigan School of Dentistry ("UMSD") to address potential or actual Conflicts of Interest or Conflicts of Commitment promptly and fairly in order to ensure that they are reduced, managed or eliminated as appropriate. All UMSD staff are required to promptly report any potential or actual Conflicts of Interest or Conflicts of Commitment.

The purpose of this Policy is to enable the UMSD to identify and manage as appropriate Conflicts of Interest or Conflicts of Commitment.

II. POLICY SCOPE:

This policy applies to all UMSD staff. (Also see Policy 300.200: Conflicts of Interest and Conflicts of Commitment: Faculty)

III. DEFINITIONS:

Conflict of Commitment: A "Conflict of Commitment" or "COC" exists when a UMSD staff member’s external relationships or activities have the possibility (either in actuality or in appearance) of interfering or competing with the University's or the UMSD's education, research, or service missions, or the staff member’s ability or willingness to perform the full range of responsibilities associated with his or her position.
Conflict of Interest: A "Conflict of Interest" or "COI" exists whenever personal, professional, commercial, or financial interests or activities outside of the University or the UMSD have the possibility (either in actuality or in appearance) of:

- Compromising a staff member’s judgment,
- Biasing the nature or direction of scholarly research,
- Influencing a staff member’s decision or behavior with respect to teaching and student affairs, appointments and promotions, uses of University or UMSD resources, interactions with patients or human subjects, or other matters of interest to the University or the UMSD, or
- Resulting in a personal gain for a staff member or for their Family Members' gain or advancement at the expense of the University or UMSD.

Conflict of Interest Board: "Conflict of Interest Board" or the "COI Board" means the governing body that reviews and approves Conflicts of Interest related to research or technology transfer as delegated by the Office of the Vice President for Research and other matters designated by the UMSD.

Family Members: "Family Members" are the staff member’s spouse, domestic partner and dependents.

IV. Policy Standards:

A. Disclosing, Evaluating, and Managing Potential Conflicts of Interest and Conflicts of Commitment

1. Disclosing potential conflicts of interest and conflicts of commitment

Whenever a potential conflict of interest or conflict of commitment exists for a staff member, he or she must promptly disclose it, in writing, to his or her supervisor. (SPG 201.65-1, Section III.A.3.)

How to disclose. All conflicts of interest or commitment must be documented and managed. The Conflict of Interest Disclosure form is available on the Compliance website http://www.dent.umich.edu/about-school/compliance-school-dentistry.

When should a disclosure be made? During the annual performance evaluation, Supervisors should ask staff if they have any conflicts of interest or commitment to declare. Staff are required to disclose real or potential conflicts of interest as soon as possible after they become aware of them. All staff members must make disclosures within one week if a previously unreported actual or potential COI/COC occurs or may occur.

Examples of potential conflicts include (but are not limited to):

- Performing work for other University departments or units for additional pay;
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- Participating in decisions or deliberations where your own personal financial interests are or could be affected;
- Participating in decisions or deliberations where a family member is or could be affected, financially or otherwise;
- Performing activities for non-University entities for pay;
- Accepting gifts, entertainment, or other items of value from vendors or other third parties that do or have business with the University (also see below);
- Accepting an incentive or benefit to gain access to a staff member’s supervisor;
- Referrals to a business in which the staff member or a member of his or her immediate family has an interest;
- Interest in a business that competes with the UM;
- Allowing University responsibilities to influence or benefit a company in which the investigator or a member of his or her immediate family has an interest;
- Using University time or resources for outside activities.

2. Gifts  A potential conflict exists when a vendor, current or potential, gives a gift to a staff member. General University policy prohibits employees from accepting any gift of substantial value from vendors or from students (Regents’ Bylaw 2.16). The School of Dentistry considers a gift in excess of $50 to be substantial. However, irrespective of a gift’s value, it is always a conflict of interest to accept a gift where the external person or organization might intend to create a quid pro quo arrangement with the staff member.

3. Evaluating disclosures of potential conflicts of interest or conflicts of commitment

The staff member’s supervisor assisted by the School of Dentistry’s Human Resources Director shall evaluate all disclosed potential conflicts of interest or conflicts of commitment. The supervisor may require the staff member to provide additional information or documentation that may be relevant to evaluating the potential conflict of interest or conflict of commitment.

4. Management of potential conflicts of interest and conflicts of commitment

When the staff member’s supervisor has determined that a potential conflict of interest or conflict of commitment exists that must be managed or eliminated, he or she must develop, in consultation with the employee, a recommended plan for managing the potential conflict. The staff member’s supervisor will then provide the plan to the School of Dentistry’s Human Resources Director who has authority for approving it. The supervisor will provide the employee with copies of the approved conflict management plan and will discuss any related ambiguities or issues that arise. Once signed by both the employee, one copy will be returned to School of Dentistry’s Human Resources Director.
5. **Involving other University individuals or offices**

**Purchasing:** When a potential conflict involves a purchase of goods or services, the School of Dentistry’s Human Resources Director must also disclose the conflict to the appropriate staff person in the University’s Office of Purchasing Services, and also to the unit staff member responsible for handling unit purchases. If the School of Dentistry’s Human Resources Director determines that a conflict exists that must be managed or eliminated, he or she will consult with these individuals in developing a plan to manage the conflict.

**Research:** When a potential conflict involves work performed for a research project, the School of Dentistry’s Human Resources Director must inform the head of the research project. If the School of Dentistry’s Human Resources Director determines that a conflict exists that must be managed or eliminated, it is his/her responsibility to ensure, in consultation with the head of the research project and the School of Dentistry Research Office, that the conflict management plan does not conflict with requirements related to the research or to research funding.

C. **Administering the Policy**

1. **Record-Keeping and Issues of Confidentiality and Privacy**

When personal financial or associational documents are provided to the School of Dentistry’s Human Resources Director, the documents shall be placed in a secure file accessible only to the School of Dentistry’s Human Resources Director, the Compliance Officer, and the unit supervisor. Where any other staff member has a legitimate business reason to access the documentation, then either the School of Dentistry’s Human Resources Director, the Senior Associate Dean or the unit supervisor may authorize access to the file and provide either copies and/or information, as may be required for the stated business purpose. If the Human Resources Director or supervisor or his or her designate provides copies of information in the files to a staff member, he or she must also ask that staff member to maintain the same level of confidentiality for the copied information as applies to the original information or documents.

Documentation of the staff member’s disclosure and action taken shall be included within the secure file. The documentation may be as simple as identifying the disclosure. When no further action is required, a notation to that effect should be entered on the disclosure description.

In some circumstances, the University is required to disclose potential conflicts to people within or outside the University. For example, if a conflict exists within the context of a federally sponsored project, the University is required both to disclose the existence of that conflict (without providing identifying information) to the federal government and to indicate whether it has managed the conflict. The University may be legally required to disclose information in response to requests made under the Michigan Freedom of Information Act (FOIA). In addition to the people listed above, should any other individual have a legitimate educational or business reason to access the confidential records, whether in the context of a federally sponsored project, a FOIA request, or otherwise, the School of Dentistry Human Resources Manager or the unit supervisor may authorize access to the file, provide copies, or provide oral or written summaries of the information in the file. Where possible, the individual to whom the School of Dentistry
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COI/COC manager or unit supervisor authorizes disclosure shall be required to maintain at least the same level of confidentiality as applies to the original information.

Administrators of this policy will make every reasonable effort to preserve confidentiality and protect the privacy of all parties in the course of investigating a potential conflict of interest or commitment, and as applicable, in developing a plan to manage the conflict. (See Regents’ Bylaw 14.07 Privacy and Access to Information and SPG 201.46 Personnel Records – Collection, Retention and Release.)

Any faculty or staff member who becomes aware that unwarranted access to conflict documentation or information has been allowed, as defined in this policy, should inform the Dean’s Office. To follow up, the Dean will investigate the allegation, and where appropriate, take personnel action.

Retention of records: Records documenting disclosures and plans for the management of conflicts will be maintained during the period in which the conflict exists and for an additional three years subsequent to elimination of the conflict.

2. Resolving Disputes

When a staff member disputes any action or decision related to a potential conflict of interest or conflict of commitment, the staff member should first request that the action or decision be re-reviewed by his or her supervisor and the Human Resources Director. A staff member may dispute any decision made in response to the disclosure or non-disclosure of a potential conflict of interest or commitment by appeal, first to the Compliance Officer, then to the Executive Committee and then to the Dean. Following exhaustion of these unit-specific procedures, the staff member may dispute any action or decision under this policy in accordance with applicable University procedures. Disputes regarding sponsored research/tech transfer must be handled in accordance with processes adopted by OVPR Conflict of Interest Review Committee http://www.research.umich.edu/policies/um/coi/. Other disputes between a staff member and the unit should be resolved through the normal grievance procedures, including, where applicable, collective bargaining agreement grievance procedures.

If, following the above review, the staff member remains unsatisfied with the action or decision, the staff member may initiate existing University policies and procedures for handling disputes, when available.

Note: Staff who are members of collective bargaining units are exempt from this resolution process and will follow the dispute resolution process outlined in their collective bargaining agreement.

3. Conducting Education and Training

Information about this policy’s requirements is included in the Compliance Agreement, which is provided to all faculty and staff upon hire and annually, thereafter. This Policy is also available on the School’s website, and will be referenced in annual messages regarding Conflict of Interest, Conflict of Commitment, and employee disclosure requirements.
4. Violations

Any violation of SPG 201.65-1 or this implementing policy may be a cause for disciplinary action. In the first instance, the employee’s supervisor shall evaluate the violation and take appropriate action, if needed, all in accordance with existing University policies and procedures. Consultation with the School of Dentistry’s Human Resources Director may be appropriate. The outcome of the supervisor’s review and any actions taken shall be documented and included within a secure file maintained by the Human Resources Director. If appropriate, all relevant documentation may also be included within the employee’s personnel file maintained as provided under SPG 201.46.

5. Policy Review and Revision

The School of Dentistry Human Resources Director shall regularly review all potential conflict disclosures and actions taken with the Senior Associate Dean to ensure a consistent approach to potential conflicts within the unit. Similarly, the Senior Associate Dean shall regularly consult and review potential conflict management issues with the Dean of the School of Dentistry. If the Dean determines that any of the changes he or she would like to adopt will materially change the policy, the Dean will follow the procedures used to adopt the original policy. In particular, the School will submit any materially revised policy to the President for formal adoption. A current version of the School of Dentistry’s policy should be on file with the Provost Office at all times.

D. Other Governing Policies

This policy implements SPG 201.65-1, Conflicts of Interest and Conflicts of Commitment, incorporates SPG 201.65-1 in its entirety, and includes all elements required under that SPG. Implementation of SPG 201.65-1 within the School of Dentistry requires compliance with other University policies and procedures, including all Regents’ Bylaws and SPGs, as well as with any relevant external rules of professional conduct and applicable law. Relevant policies, procedures, rules, and law include (but are not limited to) the following:

- Regents’ Bylaw 2.16, regarding gifts to University employees [http://www.umich.edu/~regents/bylaws/bylaws02.html#16];
- Regents’ Bylaw 5.12, regarding outside employment of University faculty [http://www.umich.edu/~regents/bylaws/bylaws05b.html#3];
- Regents’ Bylaw 5.13, regarding governmental elected or appointed service [http://www.umich.edu/~regents/bylaws/bylaws05b.html#4];
- Regents’ Bylaw 5.14, regarding leaves of absence [http://www.umich.edu/~regents/bylaws/bylaws05b.html#5];
- SPG 201.23, regarding appointment of individuals with close personal or external business relationships;
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- SPG 201.65, regarding employment outside the University;
- SPG 201.85, regarding special stipends for work performed for other University units, the payment of honoraria, and the payment of travel expenses;
- SPG 500.01, 601.03-2, and 601.11, in particular to the extent that they address copyright and other appropriate use of University resources, such as the libraries, office space, computers, secretarial and administrative support staff, and supplies;
- Office of Vice President for Research (OVPR) Policy on Conflict of Interest in Sponsored Research and Technology Transfer Agreements http://www.research.umich.edu/policies/um/conflict_ovpr_drda_tmo.html; and
- Michigan Compiled Laws § 15.321 et seq., regarding contracts of public employees with their employers.

Where applicable, the current collective bargaining agreement for the graduate student employee or faculty member.

In the event of any inconsistency between this policy and other University or external requirements, those other requirements will prevail. Policy administrators will make every reasonable effort to preserve confidentiality and protect the privacy of all parties in the course of investigating and managing a potential conflict of interest or commitment.

V. REFERENCES/RESOURCES

EXHIBIT A Frequently Asked Questions Regarding COI/COC
Exhibit A

Frequently Asked Questions Regarding COI/COC

1. *Can the outside interest be practically conducted without the use of University resources (including office staff, patients, facilities, University computers and systems, telephone, conference rooms)?*

University resources may not be used to fulfill your duties for outside interests. Incidental use of computers, email, and phones is generally considered permissible provided this use does not interfere with University activities. Questions regarding appropriate use of University resources should be discussed with your Department. Use of University resources for outside interests could violate state and federal laws (*e.g.*, licensure, medical records).

2. *Does the outside interest create or appear to create a situation that may influence the staff member’s opinions or actions while performing University duties?*

In some instances, the appearance of a conflict of interest is as much a potential hazard for the individual and the institution as an actual conflict of interest. Therefore, individuals engaging in outside interests must follow the guidelines on disclosing and managing conflicts of interest. Determinations about the appropriateness of outside interests include anticipating how patients, research subjects, trainees, and the general public may view how the outside interest influences the individual’s decisions at the University.

You can email us at Dental.Disclosure@umich.edu or call (734) 764-6986 if you have disclosure questions or comments.