

**SCHOOL OF PUBLIC HEALTH
POLICY ON STAFF CONFLICTS OF INTEREST AND
CONFLICTS OF COMMITMENT
April 28, 2008**

Introduction

SPG 201.65-1 requires the deans of the schools or colleges and the directors of administrative units to articulate and disseminate implementation policies that apply to faculty and/or staff within those units. The implementation policy and procedures for the School of Public Health are provided below. This policy and its procedures apply to all full-time staff, whether permanent or temporary, and to all permanent part-time staff in the unit. The University expects all staff to be familiar with the contents of SPG 201.65-1 and with the applicable set of unit implementation procedures.

A. Statement of Principles for School/College/Administrative Unit's Policy

The policy section of SPG 201.65-1 outlines a set of key principles relevant to conflicts of interest and conflicts of commitment, including the principles stated below.

All staff members are to act with honesty, integrity, and in the best interest of the University when performing their duties, and to abide by the highest standards of research, educational, professional, and fiscal conduct. Outside activities should not interfere with an individual's University obligations. Staff must not use their official University positions or influence to further gain or advancement for themselves, parents, siblings, spouse or partner, children, dependent relatives, or other personal associates, at the expense of the University. In accordance with its mission, however, the University of Michigan allows and encourages staff members to engage in outside activities and relationships that enhance the mission of the University. As a result, potential conflicts of interest and commitment are inevitable, but these potential conflicts are not necessarily problematic. Rather, the essential point is that faculty and staff must disclose these potential conflicts of interest so that they can be evaluated and, if necessary, managed or eliminated.

* When implementing SPG 201.65-1, academic and administrative units must also consider both particular rules of conduct within the University and rules that govern outside activities applicable to the staff of the School of Public Health. These include:

- Regents' Bylaw 5.13, related to governmental elective/appointed service;
- SPG 201.12, related to misconduct and discipline;
- SPG 201.23, related to hiring of relatives or those with a close personal relationship; and
- SPG 201.85, related to work performed for other University units.

The specific definitions for a *potential conflict of interest* and *potential conflict of commitment* in Section II.A of SPG 201.65-1 also apply to the procedures described below. Broadly defined, a potential conflict of interest encompasses external ties that may or may appear to improperly bias a staff member's judgment in performing his or her University job responsibilities. A potential conflict of commitment, broadly defined, encompasses situations in which a staff member's external relationships or activities may or may appear to interfere or compete with the University's mission, or with the staff member's ability or willingness to perform his or her job responsibilities.

B. 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 the Senior Associate Dean for Administration/SPH Conflict of Interest Committee or via e-mail, provided that the message is sent to the Senior Associate Dean for Administration's University e-mail account. The SPH Conflict of Interest Committee will consider the creation of a standard disclosure form. (Draft appended.) (SPG 201.65-1, Section III.A.3.)

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

- Performing work for other University departments or units for additional pay;
- 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 (Note: As stated in SPG 201.65-1, family members include parents, siblings, a spouse or partner, children, and dependent relatives.);
- 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; and

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 (in excess of \$100, including holiday gifts or gifts of services) from vendors or from students (Regents' Bylaw 2.16).

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

The Senior Associate Dean/SPH Conflict of Interest Committee shall evaluate all disclosed potential conflicts of interest or conflicts of commitment. The Senior Associate

Dean/SPH Conflict of Interest Committee 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.

As needed, the Senior Associate Dean/SPH Conflict of Interest Committee will consult with appropriate central administrative offices (e.g., Office of the Provost and Executive Vice President for Academic Affairs, Office of Human Resources and Affirmative Action, Office of the Vice President for Research, Office of the Vice President and General Counsel). (See also Section B.4, below.) As needed, they will also consult with the Dean and SPH Executive Committee.

3. Developing plans to manage potential conflicts of interest and conflicts of commitment

When the Senior Associate Dean/SPH Conflict of Interest Committee 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 Senior Associate Dean/SPH Conflict of Interest Committee will then provide the plan to the employee's supervisor, who has authority for approving it. The supervisor will provide the employee with a copy of the approved conflict management plan and will discuss any related ambiguities or issues that arise.

4. Involving other University individuals or offices, as required

Purchasing

When a potential conflict involves a purchase of goods or services, the Senior Associate Dean/SPH Conflict of Interest Committee 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 Senior Associate Dean/SPH Conflict of Interest Committee 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 Senior Associate Dean/SPH Conflict of Interest Committee must inform the head of the research project. If the Senior Associate Dean/SPH Conflict of Interest Committee determines that a conflict exists that must be managed or eliminated, it is his or her responsibility to ensure, in consultation with the head of the research project, 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 Senior Associate Dean/SPH Conflict of Interest Committee, the documents shall be placed in a secure file accessible only to the Senior Associate Dean/SPH Conflict of Interest Committee and the unit supervisor. Where any other staff member has a legitimate business reason to access the documentation, then either the Senior Associate Dean/SPH Conflict of Interest Committee 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 Senior Associate Dean/SPH Conflict of Interest Committee or unit 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 and, when no further action was required, including a notation to that effect 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. Also, 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 Senior Associate Dean/SPH Conflict of Interest Committee 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 Senior Associate Dean/SPH Conflict of Interest Committee 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 of a Senior Associate Dean, SPH Conflict of Interest Committee member or unit supervisor who has provided or may have provided unwarranted access to conflict documentation or information, as defined in this policy, should inform the Dean or a University Executive Officer. To follow up, the Dean or University Executive Officer will investigate the allegation and, where appropriate, take personnel action.

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 ask that the action or decision be reviewed by his or her supervisor.

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.

3. Conducting Education and Training

Upon hiring into or transfer into the unit, every staff member shall be provided the School of Public Health implementation procedures related to the conflict of interest policy.

Units may also wish to add additional options such as:

1. Annual paper certification of having reviewed the policy
2. Certification of having reviewed the policy at performance evaluation time
3. Record fact of giving unit policy to employee
4. Every employee shall complete the on-line educational tutorial for overall University policy. A record of successful completion of the tutorial shall be provided to Senior Associate Dean/SPH Conflict of Interest Committee.

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 employee's Human Resources representative may be appropriate. The outcome of the supervisor's review and any actions taken shall be documented and included within the secure file maintained by Senior Associate Dean/SPH Conflict of Interest Committee. 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 Senior Associate Dean/SPH Conflict of Interest Committee shall regularly review all potential conflict disclosures and actions taken with the Dean to ensure a consistent approach to potential conflicts within the unit. The Dean shall similarly regularly consult and review potential conflict management issues with the Provost. 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 Dean will submit any materially revised policy to the Provost for further review and

approval and then to the President for formal adoption. A current version of the School of Public Health's policy should be on file with the Provost 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 Public Health 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;
- Regents' Bylaw [5.13](#), regarding governmental elected or appointed service;
- Regents' Bylaw [5.14](#), regarding leaves of absence;
- SPG [201.12](#), regarding misconduct and discipline;
- SPG [201.23](#), regarding appointment of individuals with close personal or external business relationships;
- 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](#); and
- Michigan Compiled Laws [§ 15.321](#) et seq., regarding contracts of public employees with their employers.

CONFIDENTIAL

**School of Public Health
Staff Disclosure Form for Potential
Conflicts of Interest/Conflicts of Commitment**

Name: _____
Office/Department: _____
Email address: _____

I have read the School of Public Health Staff Policy on Conflicts of Interest/Conflicts of Commitment (version April 28, 2008), and I am filing this form in accordance with the Policy to disclose a possible conflict of interest or conflict of commitment.

(Please describe the potential conflict below).

Signature of Staff Member: _____ Date: _____

Once completed this form should be submitted to your supervisor for transmittal to the Senior Associate Dean for Administration.

Name and Signature of Supervisor: _____ Date: _____

Review of Disclosure by Senior Associate Dean for Administration:

1. Does a conflict exist? ___ No ___ Yes (*if yes, proceed to question 2*)
2. If conflict exists, is it manageable? ___ No ___ Yes (*if yes, proceed to question 3*)
3. If conflict is manageable describe the management plan in the space provided below.

Name and Signature of Senior Associate Dean for

Administration _____ Date: _____

After review of the disclosure a copy of this form should be returned to staff member for signature (below) to confirm acknowledgement of the decision that was reached.

Signature of Staff Member: _____ Date: _____