

Conflict of Interest and Conflict of Commitment Policy for Staff

Applies to the following people/groups: All full-time staff, whether permanent or temporary, and to all non-temporary part-time staff.

I. Overview/Rationale

University of Michigan (U-M) [Standard Practice Guide \(SPG\) 201.65-1 Conflicts of Interests and Conflicts of Commitment](#) requires U-M deans and directors to articulate and disseminate implementation policies that apply to faculty and staff in their departments. This document serves as the implementation policy for faculty in the College of Pharmacy (COP).

II. Definitions

COI/COC Manager:

The COP associate dean assigned to serve as the college's "unit conflict of interest/conflict of commitment manager."

Conflict of Interest:

A potential conflict of interest exists whenever personal, professional, commercial, or financial interests or activities outside the university have the possibility (or an appearance) of:

- compromising one's judgment;
- biasing the nature or direction of scholarly research;
- influencing one's decision or behavior with respect to teaching and student affairs, appointments and promotions, uses of university resources, interactions with human subjects, or other matters of interest to the university; or
- resulting in a personal or family member's gain or advancement at the expense of the university.

Conflict of Commitment:

A potential conflict of commitment exists when an employee's external relationships or activities have the possibility (or an appearance) of interfering or competing with the university's educational, research, or service missions, or with that individual's ability or willingness to perform the full range of responsibilities associated with their position.

III. Policy/Regulations

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 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, U-M allows and encourages staff 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 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](#), rules that govern outside activities applicable to the staff must also be considered, including:

- [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.

IV. Procedures

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 arises for a staff member, they must promptly disclose it using the online COI/COC reporting form, as well as provide a copy of the disclosure to their supervisor.

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 (see below); and
- Accepting an incentive or benefit to gain access to a staff member's supervisor.

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 or subordinates ([Regents' Bylaw 2.16](#)).

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

The COI/COC manager shall evaluate all disclosed potential conflicts of interest or conflicts of commitment for staff appointed to the COP's central administration, and department chairs shall evaluate disclosures for staff appointed in their departments. Employees may be required to provide additional information or documentation that may be relevant to evaluating the potential conflict.

As needed, department chairs will consult with the COI/COC manager, and the COI/COC manager will consult with the dean and/or appropriate central administrative offices (e.g., Office of the Provost and Executive Vice President for Academic Affairs, Office of Human Resources, Office of the Vice President for Research, Office of the Vice President and General Counsel). (See also Section B.4, below.)

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

When a department chair determines that a potential conflict exists that must be managed, they must consult with the COI/COC manager. When the COI/COC manager determines that a potential conflict exists that must be managed or eliminated, they must develop, in consultation with the employee, their supervisor, the department chair (if applicable), and the dean, a recommended plan for managing it. The COI/COC manager will then provide the plan to the dean for approval. The COI/COC manager will provide the supervisor, department chair (if applicable), and the employee with copies of the approved conflict management plan and will meet with them to discuss it and 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 COI/COC manager must disclose the conflict to the appropriate staff person at U-M Procurement Services and also to the COP business administrator who oversees COP purchasing. If the COI/COC manager determines that a conflict exists that must be managed or eliminated, they 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 COI/COC manager must inform the head of the research project, the department chair, and the dean of record for research. If the COI/COC manager determines that a conflict exists that must be managed or eliminated, they will 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.

B. Administering the Policy

1. Record-Keeping and Issues of Confidentiality and Privacy

When personal financial or associational documents are provided to the COI/COC manager, the documents shall be placed in a secure file accessible only to them and the dean. Where any other staff member has a legitimate business reason to access the documentation, then either the COI/COC manager or the dean may authorize access to the file and provide either copies and/or information, as may be required for the stated business purpose. If the COI/COC manager, the dean, or their designate provides copies of information in the files to a staff member, they 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.

The COI/COC manager will keep a secure and confidential record of action on disclosures and management plans. They should ensure that the unit purges the documentation from the file three years after the potential conflict no longer exists, except where university record retention policies require the unit to retain the records for a longer period (e.g., as specified in [SPG 201.46](#)).

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, 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 COI/COC manager or the dean 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 COI/COC manager or the dean 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 COI/COC manager, dean, 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 person's superior for appropriate action as follows, file a COP Concern Note, or report it to the U-M Compliance Hotline.

- COI/COC manager for potential violations by staff or faculty
- Dean for potential violations by the COI/COC manager
- Provost and Executive Vice President for potential violations by the dean

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 their supervisor and the COI/COC manager.

If, following the above review, the staff member remains unsatisfied with the action or decision, the staff member may appeal to the dean. Following exhaustion of these COP procedures, the employee may initiate existing university policies and procedures for handling disputes, including, where applicable, collective bargaining agreement grievance procedures.

3. Conducting Education and Training

This policy will be provided to new staff when they begin work at the College, and they will be required to complete the training tutorials provided by the University at that time, as well as on an annual basis in conjunction with the annual disclosure process. Staff will be reminded about this during the annual performance review process.

4. Violations

Any violation of [SPG 201.65-1](#) or this 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 the COI/COC manager. 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 COI/COC manager shall regularly review all potential conflict disclosures and actions taken with the dean to ensure a consistent approach to potential conflicts within the COP. The dean shall similarly regularly consult and review potential conflict management issues with the provost and executive vice president for academic affairs. If the dean determines that any of the changes they would like to adopt will materially change the policy, they will follow the COP procedures for policy changes

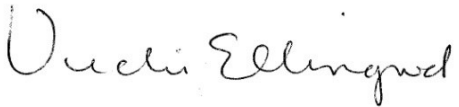
<https://pharmacy.umich.edu/mycop/policy-and-procedures-establishment-and-maintenance-college-pharmacy-policies>). In addition, the dean will submit any materially revised policy to the provost and vice president for academic affairs for further review and approval and then to the president for formal adoption. A current version of the College of Pharmacy's policy should be on file with the provost and vice president for academic affairs at all times.

V. Other Relevant Policies/Procedures (references/links to other related COP or U-M policies or procedures)

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 College of Pharmacy 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 5.12](#), regarding outside employment;
- [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](#) and [601.11](#), in particular to the extent that they address 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 https://research-compliance.umich.edu/sites/default/files/resource-download/icoi_policy.pdf;

- Michigan Compiled Laws § 15.321 et seq., regarding contracts of public employees with their employers;
- Where applicable, the current collective bargaining agreement for the staff member.

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