

**University of Hawaii  
Office of Research Services (ORS)  
Conflicts of Interest (COI) Management Plan**

Senior Administrators, ORS and/or the Conflicts of Interest Committee (COIC) reviews COI situations and recommends appropriate action for conflict resolution. Based on the recommendations this Management Plan will be implemented to assist you in managing any actual or potential COI. This plan is structured by the principles of the University of Hawaii (UH) Executive Policy EP12.214, and Administrative Procedures AP 5.504 and AP 8.956, and should be referred to when additional guidance is required.

**Individual’s name:**

**Detailed conflict description (e.g., significant financial interest; board member; role in the relationship; how it involves UH and/or UH activity):**

**Extramural Award that this plan applies to (if applicable):**

**Background:**

Entity or Company Name (with which outside interest/relationship is established):

Type of Business, Industry, or Service:

Primary contact person of the entity and contact information:

Starting date of individual’s affiliation with the entity:

Individual’s role with entity:

An appropriate COI Management Plan must be in place when an actual or potential conflict of interest has been identified. Minimally, the restrictions listed below and in subsequent sections apply to all COI Management Plans, but the Senior Administrators/ORS/COIC retain the right to change or add restrictions.

1. All UH-related activity affiliated with the entity must be conducted under formal UH agreements, such as a UH research agreement.
2. Management Plan(s) may involve:
  - a. Establishing a financial and/or scientific (or project) oversight mechanism to monitor the conduct and integrity of the project;
  - b. Transitioning the individual out of the conflicting relationship or role as soon as possible (e.g., resigning from the entity’s board or executive position, divesting of equity in the entity that is sponsoring the research/project).
3. The individual may not serve as Principal Investigator (PI) of the research/project and also serve in a direct senior management role in the entity (e.g., CEO, CFO, President, etc.).
4. The individual will not participate in any of the entity’s financial decisions/deliberations that involve or may affect his/her UH activities or responsibilities.
5. If the individual serves on any of the entity's advisory board(s) (e.g., scientific, technical), the participation should not create other perceived conflicts, and the individual will not participate in any decisions/deliberations that involve or may affect his/her UH activities or responsibilities.
6. All intellectual property ownership matters shall be determined in accordance with UH Executive Policy and Administrative Procedures pertaining to patent and copyright matters (E5.500, A5.500, A5.501 and A5.502), and as executed in any signed research agreements or other agreements with UH’s Office of Technology Transfer and Economic Development (OTTED).
7. The priority of the individual is to fulfill his/her UH obligations. Time commitments to the entity or for outside activities (e.g., lecture, consult, etc.) shall not interfere or disrupt UH duties. Submission of detailed time allocation may be required.

### **Safeguards for Personnel**

All UH personnel (herein, personnel) under the supervision of the individual may potentially be affected by the individual’s COI. Personnel include, but are not limited to, students, postdoctoral fellows, technicians, visiting scientists/scholars, and other UH staff, conducting research or other work-related activities under the individual’s supervision. Protections in place shall include:

1. The individual will notify all personnel working on the research or project of his/her COI, the initiation of this Management Plan, and the names of UH Senior Administrators or COIC members for whom personnel can contact with any concerns. This shall occur within 30 days of approval of this Management Plan, and immediately upon the hiring of new personnel. *The individual shall notify the party who has oversight of the plan, in writing, that this disclosure requirement has been fulfilled.*
2. Personnel must be informed that they can notify the appropriate UH Senior Administrators, COIC members, or ORS Compliance, if they feel that the individual's relationship with the entity has adversely affected their academic/scholarly progress or employment status.
3. The individual's COI shall not restrict any scholarly or research activity of the personnel, including receiving, analyzing, or interpreting data, and regarding the right to publish completed work.
4. The individual's COI shall not interfere with a student's academic progress or prevent meeting degree requirements.
5. The individual may not serve as the Chair or primary advisor of a student working on the research/project sponsored by the entity, however, the individual may be a part of their advisory committee.
6. Personnel with a significant financial interest or who participate in outside activities with the entity must disclose those relationships. The disclosure shall be reviewed to determine if an additional COI Management Plan may be required.

### **Protection of Research Subjects and other Institutional Requirements**

Research involving human subjects have specific requirements and must be approved by an Institutional Review Board (IRB). The individual must disclose any significant financial interest and/or other COI to the appropriate IRB, and IRB approval is required before any project involving human subjects is initiated. The IRB has the authority to establish other restrictions, in addition to those listed in the Management Plan, if necessary to address/manage a potential or actual COI. For example, the IRB may require disclosure of the conflict in the informed consent documents, or the conflicted investigator(s) may be prohibited from participating in certain study activities.

Similarly, all research involving vertebrate animals, recombinant-DNA or human infectious agents must be approved by the Institutional Animal Care and Use Committee (IACUC) and the Institutional Biosafety Committee (IBC), respectively, prior to commencing the research. The IACUC and IBC maintain the authority to establish restrictions to manage COI in addition to those specified in this document.

N/A

Proposed research/work involves institutional approval and I have disclosed my SFI/COI to the appropriate IRB/IACUC/IBC. The approved protocol/permit no. \_\_\_\_\_.

Awaiting protocol/permit approval and I have disclosed my SFI/COI to the appropriate IRB/IACUC/IBC.

### **Intellectual Property**

As stated by UH policy, all intellectual property produced using UH funds (e.g., extramural awards) or physical property belongs to UH, except as otherwise specified in the terms and conditions of a

research agreement. Individuals shall disclose intellectual property produced using UH funds to OTTED. The disclosures must be made in a timely manner to allow for the establishment of patent or copyright protections, should such protections be warranted.

### **Public Dissemination**

Publications should not be delayed, except for pre-publication review or so that intellectual property protection may take place. The individual's affiliation with the entity should not restrict, prohibit, or overly delay publications and/or public presentations.

Individuals must disclose the relationship with the entity in publications and presentations where disclosure is required and/or appropriate, such as when the outcome of the research could be perceived as benefiting the entity or individual personal financial gain.

Sample of disclosure language to be used (optional):

### **University Assets**

UH resources including facilities, services, and personnel shall not be directed for use by the entity, or for the individual's private business matters. There must be clear distinction between the work performed by the entity at the entity's facilities and the work performed by the individual at UH within the confines of an approved subcontract/ subaward, or a memorandum of agreement or understanding. Resources include, but not limited to, UH-owned computers, laboratory equipment and supplies located in the individual's UH laboratory and office.

UH does not endorse the entity or any of its products or services, thus the individual shall not use UH mailing addresses, email addresses, phones, web sites, stationary, trademarks, faxes or other university property or services for his/her own benefit.

### **Commitments**

Individuals must meet all UH work commitments and must receive permission from his/her supervisor (e.g., Dean, Director, Vice Chancellor, etc.) if regular working hours are used to work for the entity.

Individuals supporting themselves with other funding sources secured through UH (i.e., grant or contract) may not use this paid time for activities other than those specified in the grant/contract.

### **Senior Administrator/COI Committee Review Procedures**

The ORS Compliance Section, and UH Senior Administrator/COIC will retain signed copies of each COI Management Plan and will monitor compliance with the plan. The individual is required to, at the minimum, have an annual meeting with the Senior Administrator/COIC to review compliance with the conditions of the COI Management Plan. In addition, the individual will submit an annual report to ORS Compliance updating the current relationship status with the entity (reporting changes, if any) and actions that have been taken to comply with the plan.

When fiscal and scientific oversight is required, the individual and the Senior Administrator/COIC (or designee) shall review the research activity, which may include the research plan, progress reports, laboratory notebooks, data analyses, results, and any other pertinent information that will ensure that the research was conducted objectively.

**Senior Administrator(s)/COIC Members (responsible for oversight of this plan):**

Senior Administrator(s):

COIC members:

**Management Plan duration:**

**Annual review of this plan shall occur on:**

**Research activity (data, reports, notebooks, etc.) shall be reviewed by:**

**And occur:**

**Summary of Management Plan activities (reviews) shall be sent to ORS Compliance by:**

**Additional concerns or actions specific to this management plan:**

**Agreement of Individual(s):**

By signing this COI Management Plan I understand that 1) I must update this plan if **any** changes in my affiliation with the entity occur, and 2) failure to disclose relevant information and/or failure to abide by the terms of the plan constitutes a violation of UH Executive Policy 12.214, and could result in the revocation of any extramural funding, and may warrant further disciplinary action.

\_\_\_\_\_  
Name Date

\_\_\_\_\_  
Name Date

**Signature(s) of Senior Administrator(s)/COIC members:**

\_\_\_\_\_  
Senior Administrator/ COIC Member Date

\_\_\_\_\_  
Senior Administrator/ COIC Member Date

**Approval of this management plan by the Deciding Official:**

\_\_\_\_\_  
Vice President for Research and Innovation Date

Send completed plan to ORS Compliance ([coi@ors.hawaii.edu](mailto:coi@ors.hawaii.edu)) for review and transmittal to VPRI

c: Yaa-Yin Fong, ORS Director