PROCEDURES FOR THE DISCLOSURE, REVIEW, AND MANAGEMENT OF ACTIVITIES INVOLVING POTENTIAL CONFLICTS OF INTEREST AND COMMITMENT

The University of North Carolina at Greensboro

Established: August 24, 2012

Revised: February, 2016; April 27, 2026

The Vice Chancellor for Research and Engagement shall act as the senior UNCG official assigned with oversight of campus policies and procedures for reviewing and managing Conflicts of Interest and Commitment. The applicable policies, as adopted and as may be amended, are currently the UNCG Conflicts of Interest Policy, the UNCG Conflicts of Commitment Policy, the UNCG External Professional Activities Policy, the UNC Policy Manual 300.2.2, Conflicts of Interest and Commitment, and the UNC Policy Manual 300.2.2.1[R] Regulation on External Professional Activities by Faculty and EHRA Non-Faculty Employees, and its implementing regulations

I. OVERVIEW

A. Mechanisms for Disclosure and Identification of Potential Conflicts of Interest and Commitment

Mechanisms through which potential conflicts are disclosed and otherwise identified, and reviewed include:

1. The Annual COI Disclosure process via the current electronic system
2. Submission of a Notice of Intent for External Professional Activities (NOI) via the electronic system
3. Reported conflicts that arise during the year (i.e., the conflict arises in between annual disclosure cycles) must be updated in the electronic system within 30 days of the conflict
4. External or other sources

B. Conflicts of Interest Officer(s)

The Vice Chancellor for Research and Engagement appoints a designee as the Conflicts of Interest Officer (COI Officer) for UNCG. The role of the COI Officer (or Officers as

assigned) is to provide oversight for the implementation of the Conflicts of Interest Policy and Conflicts of Commitment Policy. This includes monitoring disclosures reported through all sources listed above in Section A, ensuring that conflict of interest management plans are in place and on file when needed, and facilitating coordination among the various stakeholders who are charged with monitoring compliance issues in which conflict of interest plays a role (e.g., Office of Sponsored Programs; the Office of Research Compliance & Integrity IRB and oversight of the protection of human subjects in research).

C. Administrative Resource Team

The Administrative Resource Team is comprised of individuals whose roles and/or expertise may provide helpful information for the analysis of potential conflicts of interest. This team includes representatives from the following offices, but may be narrowed or expanded as needed:

1. Office of Research Compliance and Integrity
2. Office of Sponsored Programs
3. Innovate UNCG
4. Contract and Grant Accounting
5. Deans, Associate Deans
6. Office of Institutional Integrity and General Counsel
7. Office of the Provost
8. Office of the Chancellor
9. Finance and Administration
10. Department Head
11. Center Directors

D. Conflicts of Interest Committee

The Conflicts of Interest Committee provides peer review of potential conflicts of interest and makes recommendations for managing, reducing, and/or eliminating existing or potential conflicts. The Committee acts in an advisory capacity to the COI Officer(s) in their determination of whether a conflict exists, and any necessary actions needed to safeguard the integrity of the situation in question. The Committee may also be asked to provide feedback on process, procedure, or policy, and provide guidance on educational outreach efforts and the general campus climate regarding conflict of interest.

1. Composition and Structure of the Committee
    a. Appointments are made by the Provost and Vice Chancellor of Research and Engagement (or their designee) for three-year terms.

2. Meeting Schedule
    a. If needed, the Committee will meet during both the fall and spring semesters.
    b. Additional meetings may be called as needed to address emerging situations involving potential conflicts of interest.
    c. At least two members of the committee must be present to provide guidance to the COI Officer.
3. Review procedures
    a. The COI Officer will present the situation involving a potential conflict of interest to the committee members prior to the meeting. At this time, the COI Officer will define the questions of interest for the Committee members to consider.
    b. The COI Officer and/or Committee members may request that the employee(s) involved in the situation be present at the meeting so that they can ask additional questions.
    c. Recognizing that situations where there is potential conflict of interest may also evoke questions regarding other policies and procedures (e.g., use of university resources, personnel concerns), Committee members may also request that representatives of the administrative resource team (see D above) join the meeting so that all angles of the situation can be understood and addressed.

II. CONFLICTS OF INTEREST REVIEW GUIDELINES AND PROTOCOL

A. Guidelines

Detailed definitions, thresholds, and standards for the review and classification of situations involving a potential conflict of interest are captured in the UNCG Conflicts of Interest Policy and Federal guidelines, and the UNC System Policy, Regulations, and Guidelines.

B. Initial Review

The COI Officer may determine, upon review, that no conflict of interest exists. In cases where the COI Officer deems a conflict may exist, a management plan will be put into place and multiple courses of action may take place, including:

1. Consultation with members of the Administrative Resource Team;
2. Referral to the Conflicts of Interest Committee.

C. Protocol for Review of Situations with Potential Conflicts of Interest

The following, adapted from the University of California at Berkeley, is a delineated rubric for reviewing situations with potential conflict of interest. These steps apply to review, whether by the COI Officer or COI Committee.

1. Review the details of the situation in light of relevant University, State, and Federal policies, guidelines, and regulations. Note that the National Science Foundation, Public Health Service, and Department of Energy have unique sets of regulations.
2. Consider the nature and extent of the financial interest in question, including its impact on the employee, their financial interests, and the interests of the outside entity.
3. Particular attention should be paid when the situation involves research agreements which involve:
    a. Product or invention testing, including testing of curricula or other teaching materials.
    b. Research taking place off University premises.
    c. Research conducted in collaboration with employees from outside entities.
    d. Research that includes the disclosure of proprietary information from an outside entity.
4. Particular attention should be paid when a University employee has the following relationships with an outside entity:
    a. Ownership interest in the entity.
    b. The possibility of receiving financial benefits from the entity (e.g., stock, bonuses).
    c. A long term or ongoing consulting relationship with the entity.
5. Seek additional information from the employee and/or relevant members of the administration as needed.
6. As appropriate, ask the following questions to help determine whether a conflict exists, and if so, its nature.
    a. Is there reason to believe that the employee's financial relationship with the outside entity could jeopardize the employee's ability to conduct their work following all applicable policies and ethical standards? If research, could the employee's role in the design, conduct, or reporting of the project be subject to bias?
    b. How will the University's interests be protected in light of the employee's interest in the outside entity?
    c. How will the project contribute to the University's teaching, research, and service mission?
    d. Are there potential benefits to the public that outweigh any

potential concerns related to academic freedom, professional relationships, or the public trust?

D. Consistent with UNC System Policy, Regulations, and Guidelines, UNC Greensboro will review and apply the following general categories related to potential conflicts of interest

1. Activities that are allowable and are disclosed
2. Activities requiring disclosure for further administrative review and analysis
3. Activities or relationships that are generally not allowable or permitted unless an approved Conflict of Interest management plan is in place
4. Activities that are not allowable under any circumstances

E. Management or Elimination of Conflict of Interest

If it is determined that the potential for a conflict exists and therefore should be managed or reduced, the COI Officer, in consultation with the COI Committee and/or administrative resource team as appropriate, will determine the appropriate course of action.

1. There are many options available for management of conflict of interest, including but not limited to:
    a. Notice to those involved in the project of the employee's conflicting interests
    b. Appointment of additional, non-conflicted employees to monitor the project in terms of guarding against bias in research findings, providing additional accountability for financial matters, and/or protecting student interests.
    c. Public disclosure of the conflicting interest
    d. Acknowledgement of the conflict of interest in consent forms
    e. Modification of the research or project design
    f. Removal of the employee from specific responsibilities
2. In some circumstances, elimination of the conflict may be deemed necessary, including:
    a. Non-acceptance of the gift or grant
    b. Withdrawal of the proposed project
    c. Employee divestiture of the conflicted interest
3. The course of action decided upon should be documented in the form of a

management plan. The management plan must be approved by the Dean and Department Head (Faculty) or Supervisor (EPS non-faculty).

4. Management plans should be reviewed. Management plans should be reviewed and approved annually or any time that changes occur with the project that could impact the nature of the conflict.
5. Approved management plans are stored with the initial disclosure via UNCG's electronic research administration system and shared with individuals responsible for oversight of research compliance (e.g., The Office of Research Integrity).

F. Small Business/STTR Grants

Of special note are Small Business Innovation Research (SBIR) grants and Small Business Technology Transfer (STTR) grants. Employees may not serve as the Principal Investigator of an SBIR/STTR grant for both the outside small business and the University, as this would render it impossible for the interests of the business and the University to be kept distinct. In general, employees who have a financial interest in an outside entity may not serve as the Principal Investigator of an agreement between that entity and the University. Additionally, there must be a very clear distinction between activities that are conducted at the University using University resources and activities performed at the small business site, and all work done using University resources must be consistent with University and State policy. Generally, this means that the University's involvement in the project should be focused on long-range exploratory work without immediate commercial value.

III. CONFLICTS OF COMMITMENT REVIEW GUIDELINES AND PROTOCOL

A. Guidelines

Detailed definitions, thresholds, and standards for the review and classification of situations involving a potential conflict of commitment are captured in the UNCG Conflicts of Commitment Policy and Federal guidelines, and the UNC System Policy, Regulations, and Guidelines

B. Initial Review

The Conflict of Interest (COI) Officer(s) provide(s) initial review of NOI submissions confirming they are completed and supporting documents attached. Records will be stored with the Office of Research Integrity.

C. Department Head or Supervisor (EPS non-faculty) Responsibilities

1. The Department Head (Faculty) or Supervisor (EPS) are responsible for

reviewing and approving all faculty or staff requests for external professional activities.

2. The Department Head (Faculty) or Supervisor (EPS) must ensure that their new employees are aware of this process and in conjunction with the COI Officer that current employees are reminded on an annual basis.

3. The Department Head (Faculty) or Supervisor (EPS) must provide oversight to ensure the employee's university responsibilities are fulfilled and that University resources are used in accordance with UNC system and University Policies, Regulations, Rules and Procedures.

4. The Department Head (Faculty) or Supervisor (EPS) must ensure that External Professional Activities that are for pay are limited to no more than the equivalent of twenty percent (20%) of the Covered Employee's contracted time during the appointment. Tracking of time spent by your employees on outside External Professional Activities is the responsibility of the supervising department.

D. Management or Elimination of Conflicts of Commitment

If it is determined that the potential for a conflict exists and therefore should be managed or reduced, the Department Head (Faculty) or Supervisor (EPS), in consultation with the COI Officer(s) and/or administrative resource team as appropriate, will determine the appropriate course of action. This may include the elimination, reduction, or suspension of the Outside Activity.

IV. CONFIDENTIALITY AND RECORD KEEPING

Completed disclosure forms are confidential personnel records as defined by applicable state statute, the provisions of which, including those governing access to and confidentiality of records, shall be strictly observed. The Conflicts of Interest Committee will be notified and reminded regularly regarding the confidential nature of their work, and will maintain records in keeping with University records retention policy.

V. APPEALS

If an employee feels that decisions regarding a potential conflict of interest or commitment are unreasonable, they may appeal.

- In the event that a proposed activity is disallowed by the Covered Individual's Direct Supervisor and/or the Conflicts of Interest Officer, the Covered Individual shall not proceed with the proposed activity but may appeal the decision to the administrative

officer to whom the direct supervisor reports, and then to the Chancellor or the Chancellor's designee. Appeals shall be made in writing within ten (10) calendar days of receiving notice of disapproval.

- Appeals shall be reviewed and the Covered Individual shall be notified of the results within ten (10) calendar days of the date on which the appeal is received.
- The decision of the Chancellor or Chancellor's designee shall be final.