FINANCIAL CONFLICT MANAGEMENT PLAN (Level 2 Plan)

*Professor REPORTER FULL NAME*

Consistent with the principles outlined in Texas Christian University, Office of Sponsored Programs, Policy 1.0, Financial Conflict of Interest Related to Research and sponsored programs, this management plan addresses the external financial interests of Professor REPORTER (FULL NAME) and their intersection with his Texas Christian University research as specified below. It defines requirements that when met will ensure the integrity of Texas Christian University research by eliminating any reasonable expectation that the research results are biased by Professor REPORTER NAME’s financial self-interest, protect academic freedom and the academic best interests of Texas Christian University students, allow for the pursuit of his entrepreneurship interests, and fulfill regulatory and policy requirements.

1. **Background**
* Describes Professor REPORTER NAME’s association with and title at Texas Christian University
* Describes the nature of the external relationships related to Texas Christian University research and the intersection with Texas Christian University responsibilities as applicable: including company funding, licensing activity, consulting or other compensation, management roles, involvement of students or employees, etc. This information is collected from the individual disclosure report, licensing and sponsored activity from OSP.

**Funding:**

* Describes the relationship between the external interest and current sponsored activities that Prof REPORTER NAME is engaged in.
1. **Scope**
* The Conflict Management Plan (CMP) covers research conducted or supervised by Professor REPORTER NAME and Professor REPORTER NAME’s financial interests and commitments with ENTITY NAME.
* Notes if human participants are involved in Professor REPORTER NAME’s research.
1. **Disclosure to students, collaborators and in publications/conferences:**
* Professor REPORTER NAME will disclose his external financial interest in ENTITY to the following:
	+ students, fellows, postdoctoral associates and trainees for whom he has research supervisory responsibilities\*;
	+ to staff under his direct supervision;
	+ to collaborators\*\* in his research that is reasonably related to ENTITY;
	+ to editors of journals when submitting publications from his research that is reasonably related to ENTITY; and
	+ to organizers of conferences where he is presenting research results that are reasonably related to ENTITY. See Appendices for the disclosure statement(s) and attestation process.

\**Students appointed to work on any of your research projects; those for whom you serve as Chair of their Special Committee; and all other students working under your supervision on independent projects that could be reasonably related to your research program.*

\*\* *Collaborators are those whose roles on a research program in which you are involved (as a PI, Co-PI or key personnel), are synonymous with the roles of PI, Co-PI or key personnel on sponsored projects.*

1. **Conduct of research**
* Professor XXXXX, the Dean of Professor REPORTER NAME’s School/College/Department at Texas Christian University, will serve as the Conflict Manager for this Conflict Management Plan. Professor XXXXX does not have any interest in or relationship with ENTITY NAME, does not have any direct interest in the research covered by this plan, and is not connected to Professor REPORTER NAME or her lab members in any way that could influence or appear to influence the outcome of the research.
* The Conflict Manager (CM) has the following responsibilities:
	+ The CM will review and sign-off that appropriate disclosures have been made to students, employees, and collaborators and to publishers and in conferences as required under the CMP, using the disclosures included as Appendices A;
	+ The CM will review and sign-off on any budget expenditures and budget reports related to the ENTITY NAME funded research;
	+ If Professor REPORTER NAME is the Chair or member of the Special Committee of any graduate student that will be working on ENTITY NAME REPORTER NAME funded projects, the CM will meet with the Special Committee at the initiation of the projects or within 30 days of the execution of this CMP, to make sure that all members are made aware of and can review the management plan, and their responsibility to take adequate measures to protect the student’s progress, ability to publish and meet degree requirements;
	+ The CM will meet with Professor REPORTER NAME on a periodic basis, not less than semi-annually, to review the progress of the students and to assess compliance with the terms of the management plan. This assessment will include the items in the checklist provided as Appendix C;
	+ The CM will submit a timely report of the semi-annual assessment, including a copy of the completed checklist to the fCOI Committee\* and serve as a liaison between the Committee and Professor REPORTER NAME to implement any changes to the CMP if required.

*\* fCOI Contact: Dr. Bonnie E. Melhart, b.melhart@tcu.edu 817.257.7104)*

1. **Interaction with students and other personnel involved in Texas Christian University research**

Professor REPORTER NAME should make every effort to avoid situations in which there may be a real or apparent conflict between her personal interests in ENTITY NAME and the academic interests of Texas Christian University students and postdoctoral associates under her direct supervision. If, after consultation with and approval by the CM, the involvement of such individuals in the research funded by ENTITY NAME is deemed essential, the following scenarios will govern such involvement:

* + Professor REPORTER NAME will provide the Conflict Manager with an updated list of any students identified in Section 3 of this document.
	+ The students, fellows, post- doctoral associates and trainees and staff identified in Section 3 of this document will be provided, within 15 days upon the execution of the CMP or within 15 days upon appointment and annually thereafter, the disclosure in Appendix A.
	+ The following individuals may not have a part-time or full-time position as a ENTITY NAME employee or contractor:
		- Texas Christian University staff or students, including postdoctoral associates, under the direct supervision of Professor REPORTER NAME, and
		- Texas Christian University students working on ENTITY NAME funded Texas Christian University research projects.

 *(Note: This prohibition does not apply to students on academic leave or during summer break.)*

* + Texas Christian University graduate students will only be engaged in ENTITY NAME funded research projects under a Texas Christian University appointment as either a graduate research assistant (GRA) or as a part-time student.
	+ For any Texas Christian University enrolled graduate student working on research on the ENTITY NAME funded project, Professor REPORTER NAME may serve as the Chair of a graduate student’s Special Committee under the following conditions:
		- Professor REPORTER NAME will establish a research plan with milestones for each such student, agreed to by the student and the Committee;
		- At the initiation of the project or within 30 days of the execution of this CMP, the CM will meet with members of the Special Committee to review Professor REPORTER NAME’s Conflict Management Plan, and on at least a semi-annual basis, hold independent meetings with the student(s) to discuss the activities in the lab and assess the effectiveness of the management plan in ensuring students’ progress against the research milestones agreed upon and towards Texas Christian University degree requirements. If at any time during the course of the research, the CM becomes aware of situations or concerns that may require some remedial action, s/she will inform the fCOIC Chair within 3 business days and in consultation with the fCOIC Chair, take appropriate remedial action;
		- Within 15 days of first becoming aware of the concern, the CM will provide a complete written report to the fCOI Committee Chair and any other University authorities per University policy of any such concerns and the remedial action taken.

If further conflicts arise that prevent, or appear to the CM or to the fCOIC to prevent Professor REPORTER NAME from being able to serve appropriately as the Chair or member of the student’s Special Committee, the fCOIC will review this Conflict Management Plan and make appropriate modifications.

Where appropriate and as applicable, the considerations above shall be made for any student or post-doctoral associate or fellow participating in the research, for which Professor REPORTER NAME may have supervisory or oversight responsibilities.

1. **Reporting**
* Professor REPORTER will comply with requests for information regarding his external interests related to his Texas Christian University research from the Office of Graduate Studies and Research (OGSR) and will work with OGSR and the CM to support compliance with regulatory requirements related to the management plan.
* In the event Professor REPORTER has independent written or oral communications regarding this management plan with any government agency, he will advise OGSR of the communication within 15 days.

*\* OGSR Contact: Dr. Bonnie E. Melhart,* *b.melhart@tcu.edu**, 817.257.7104)*

1. **Change in circumstances**

Professor REPORTER will report any of the following to OGSR within 15 days of occurrence:

* significant changes to his financial relationships with or compensation from ENTITY;
* changes in his management, supervisory, or advisory responsibilities at ENTITY;
* awareness of any new management, employment or consulting engagement between ENTITY and individuals identified in section 3 of this document or their families (spouse, same sex partner and dependent children); or compensation from ENTITY to these individuals or their families;
* involvement of human participants in his research.
1. **Purchases of products and services/subawards**

**Procurement**

* All purchases must be made in accordance with Texas Christian University for Procurement of Goods and Services.
* Professor REPORTER, his staff or students may not use Texas Christian University resources to purchase products or services for use by ENTITY.
* Any recommendations by Professor REPORTER or his staff and students for purchases from ENTITY must be submitted and approved in writing by the Conflict Manager.

**Sub-awards**:

* Prior to the issuance of any sub-award from Texas Christian University to ENTITY NAME for a project on which Professor REPORTER NAME is named as a PI or key personnel, Professor NAME’s financial interest in ENTITY NAME must be disclosed to the sponsor, along with suitable justification for the sub-award. The proposed sub-award must be approved in writing by the funding agency, either as part of the award, or in a separate document prior to execution of a sub-contract from Texas Christian University to ENTITY. (Sample disclosure to sponsor included in Appendix D)
1. **Inventions**

Please note that Texas Christian University Policy, <http://www.provost.tcu.edu/AcademicAffairsAdministrativeHandbook/Intellectual%20Property%20Policy%20and%20Procedures.htm> As stated in the handbook “**Intellectual Property Developed Under Sponsored Research Agreements:** Ownership of copyrightable and patentable intellectual property developed pursuant to an agreement with any sponsor will be governed by the provisions of the agreement.  Sponsored research programs funded by private sponsors will generally provide for TCU to retain all intellectual property that arises in the course of the research program with the sponsor retaining an option to acquire commercialization rights through a separate license agreement.  Government and nonprofit sponsors generally allow rights to intellectual property that arises from the research program to vest with TCU.  The federal government has a non-exclusive, non-transferable, irrevocable paid-up license to practice for or on behalf of the U.S. government.

1. **Use of Texas Christian University facilities**

The following are allowable only when covered by a sponsored agreement executed by the Office of Sponsored Programs:

- Use of Texas Christian University facilities and services including any laboratory resources or equipment for the benefit of ENTITY by Professor REPORTER or his students or staff ; and,

- Use of Professor REPORTER’s laboratory and equipment by an ENTITY employee or affiliated individual.

* This requirement does not apply to library resources or the routine use of Professor REPORTER’s office, telephone, computer, or routine software.
* This requirement also does not apply to the use of those Texas Christian University facilities and services that are openly available to outside commercial entities, provided that the fees for such use are paid directly by ENTITY or some other outside commercial entity.
1. **Use of Texas Christian University’s name, logo and artwork**

According to Texas Christian University Policy, Use of Texas Christian University's Name, Logos, Trademarks, and Insignias, please refer to the “Visual Identity Guide” located as file: TCUBranding2010final1-1.pdf

Professor REPORTER will include the information provided in Appendix E to ENTITY at the time of entering into an agreement with Entity or within 30 days of the execution of this management plan.

**Agreement:**

I understand and agree to the terms and conditions laid out in the Conflict Management Plan.

I understand that failure to adhere to the plan may require Texas Christian University to report such non-compliance to external agencies or sponsors funding my research, may result in the loss of external funding, may require repayment of funds to the external agency or sponsor, and may subject me to disciplinary action in accordance with [Texas Christian University Policy 1.0, Financial Conflict of Interest Related to Research](http://www.dfa.cornell.edu/cms/treasurer/policyoffice/policies/volumes/academic/upload/vol1_7.pdf) and policies referenced therein.

I understand this plan is effective immediately on the date that I sign below and until such time as expressly revoked in writing by the fCOI Committee.

**Researcher:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Professor REPORTER FULL NAME Date

**Conflict Manager**:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Professor CM NAME Date

**fCOI Committee Chair**:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Dr. Bonnie E. Melhart Date

**Appendix A:**

**Disclosure regarding external financial interest related to Texas Christian University research to students**

Dear

I have an equity interest in ENTITY FULL NAME, (ENTITY) the sponsor of research project XYZ. ENTITY NAME has been granted a Phase I STTR grant from the National Institutes of Health (NIH) and has flowed a portion of the NIH funding to Texas Christian University to support research project XYZ.

In accordance with Texas Christian University policy, I have a Conflict Management Plan, which requires disclosure of the existence of my external interests to my students, fellows, trainees, employees under my supervision, to collaborators in the research funded by ENTITY NAME, and publishers of my/our research that is related to my external financial interest in ENTITY NAME. Professor XXXXX, who does not have any financial interest in, or relationship with ENTITY NAME, has been appointed as the Conflict Manager, which means that s/he will work with me to assure that my relationship with ENTITY NAME does not influence or appear to influence the integrity of our research and that the interests and academic freedoms of my students, employees and collaborators are adequately safeguarded.

My relationship with ENTITY NAME cannot inhibit your ability to receive, analyze or interpret data, or restrict publications or presentations resulting from our research, although publications may be delayed for the purpose of pre-publication review for a period consistent with Texas Christian University policies.

Should you have any concerns regarding the conduct of this research, the reporting or publication of research results, or your academic progress, I invite you to discuss them with me. You are also welcome to discuss these concerns with the Conflict Manager, Professor XXXXX, who will meet with you on a semi-annual basis, or the Chair of your Special Committee. Your discussions will be kept confidential at all times, and there will be no retaliation or adverse impact on your research or progress towards your degree for raising any questions related to my relationship with ENTITY NAME.

Please sign and date this disclosure form below, return the original to me and keep a copy for your own files.

Sincerely,

REPORTER FULL NAME

Acknowledged and understood:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

Student Signature Student name Date

**Appendix A-1:**

**Disclosure regarding external financial interest related to Texas Christian University research to postdoctoral associates**

Dear

I have an equity interest in ENTITY FULL NAME, (ENTITY) the sponsor of research project XYZ. ENTITY NAME has been granted a Phase I STTR grant from the National Institutes of Health (NIH) and has flowed a portion of the NIH funding to Texas Christian University to support research project XYZ.

In accordance with Texas Christian University policy, I have a Conflict Management Plan, which requires disclosure of the existence of my external interests to my students, fellows, trainees, employees under my supervision, to collaborators in the research funded by ENTITY NAME, and publishers of my/our research that is related to my external financial interest with ENTITY NAME. Professor XXXXX, who does not have any financial interest in, or relationship with ENTITY, has been appointed as the Conflict Manager, which means that s/he will work with me to assure that my relationship with ENTITY NAME does not influence or appear to influence the integrity of our research and that the interests and academic freedoms of my students, employees and collaborators are adequately safeguarded.

My relationship with ENTITY NAME cannot inhibit your ability to receive, analyze or interpret data or restrict publications or presentations resulting from our research, although publications may be delayed for the purpose of pre-publication review for a period consistent with Texas Christian University policies.

Should you have any concerns regarding the conduct of this research, the reporting or publication of research results, or your academic progress, I invite you to discuss them with me. You are also welcome to discuss these concerns with the Conflict Manager, Professor XXXXX, who will meet with you on a semi-annual basis. Your discussions will be kept confidential at all times, and there will be no retaliation or adverse impact on your postdoctoral research or career development for raising any questions related to my relationship with ENTITY.

Please sign and date this disclosure form below, return the original to me and keep a copy for your own files.

Sincerely,

REPORTER FULL NAME

Acknowledged and understood:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

Postdoctoral Associate Signature Postdoctoral Associate Name Date

**Appendix A-2:**

**Disclosure regarding external financial interest related to Texas Christian University research to staff**

Dear

I have an equity interest in ENTITY FULL NAME, (ENTITY) the sponsor of research project XYZ. ENTITY NAME has been granted a Phase I STTR grant from the National Institutes of Health (NIH) and has flowed a portion of the NIH funding to Texas Christian University to support research project XYZ.

In accordance with Texas Christian University policy, I have a Conflict Management Plan, which requires disclosure of the existence of my external interests to my students, fellows, trainees, employees under my supervision, to collaborators in the research funded by ENTITY NAME, and publishers of my/our research that is related to my external financial interest. Professor XXXXX, who does not have any financial interest in, or relationship with ENTITY NAME, has been appointed as the Conflict Manager, which means that s/she will work with me to assure that my relationship with ENTITY NAME does not influence or appear to influence the integrity of our research and that the interests and academic freedoms of my students, employees and collaborators are adequately safeguarded.

My relationship with ENTITY NAME cannot inhibit any collaborator’s or student’s ability to receive, analyze or interpret data or restrict publications or presentations resulting from our research, although publications may be delayed for the purpose of pre-publication review for a period consistent with Texas Christian University policies.

Should you have any concerns regarding the conduct of this research, the reporting or publication of research results, or your academic progress, I invite you to discuss them with me. You are also welcome to discuss these concerns with the Conflict Manager, Professor XXXXX. Your discussions will be kept confidential at all times, and there will be no retaliation or adverse impact on your Texas Christian University position for raising any questions related to my relationship with ENTITY NAME.

Please sign and date this disclosure form below, return the original to me and keep a copy for your own files.

Sincerely,

REPORTER FULL NAME

Acknowledged and understood:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

Staff Member Signature Staff Member Name Date

**Appendix A-3:**

**Disclosure regarding external financial interest related to Texas Christian University collaborators**

Dear

I have an equity interest in ENTITY FULL NAME, (ENTITY) the sponsor of research project XYZ. ENTITY NAME has been granted a Phase I STTR grant from the National Institutes of Health (NIH) and has flowed a portion of the NIH funding to Texas Christian University to support research project XYZ.

In accordance with Texas Christian University policy, I have a Conflict Management, which requires disclosure of the existence of my external interests to my students, fellows, trainees, employees under my supervision, to collaborators in the research funded by ENTITY NAME, and publishers of my/our research that is related to my external financial interest. Professor XXXXX, who does not have any financial interest in, or relationship with ENTITY NAME, has been appointed as the Conflict Manager, which means that s/he will work with me to assure that my relationship with ENTITY NAME does not influence or appear to influence the integrity of our research and that the interests and academic freedoms of my students, employees and collaborators are adequately safeguarded.

My relationship with ENTITY NAME cannot inhibit any collaborator’s or student’s ability to receive, analyze or interpret data or restrict publications or presentations resulting from our research, although publications may be delayed for the purpose of pre-publication review for a period consistent with Texas Christian University policies.

Should you have any concerns regarding the conduct of this research, the reporting or publication of research results, or your academic progress, I invite you to discuss them with me. You are also welcome to discuss these concerns with the Conflict Manager, Professor XXXXX. Your discussions will be kept confidential at all times, and there will be no retaliation or adverse impact for raising any questions related to my relationship with ENTITY NAME.

Please sign and date this disclosure form below, return the original to me and keep a copy for your own files.

Sincerely,

REPORTER FULL NAME

Acknowledged and understood:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

Collaborator Signature Collaborator Name Date

**Appendix B:**

**Sample Disclosure to editors of publications, to conference organizers or at conference presentations**

This research project was funded by ENTITY NAME, in which I have an equity interest and which holds the exclusive license to the technology that I invented and is patented by Texas Christian University. ENTITY NAME was awarded a Phase I STTR grant from the National Institutes of Health (NIH) and subcontracted a portion of the research to Texas Christian University.

**Required elements of disclosure:**

Relationship with entity: including equity interest, licensing arrangement, consulting, management role, or any other relationship.

Funding: whether or not the entity with which the researcher has a financial interest funds the research, directly or indirectly

Where applicable: that the relationship has been disclosed to Texas Christian University and is being managed in accordance with the TCU policy 1.0 on financial conflicts of interest related to research.

**Appendix C: Checklist for Semi Annual CMP review**

Attendees (must include at a minimum Professor REPORTER FULL NAME and Conflict Manager Professor XXXXX):

testtest

**Please use this checklist to review and report the progress of the project and the compliance with the CMP over the time period \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |
| --- | --- | --- |
|  | **Review item** |  |
| 1 | Have all individuals specified in Section 3 of the plan received and signed a disclosure notification? *(Ensure signed disclosures match with the list of students, staff, and others provided by Professor REPORTER NAME)* Comments | Yes/No/NA |
| 2 | Have any new students, employees or collaborators hired into the project signed a disclosure notification?Comments:  | Yes/No/NA |
| 3 | Have proper disclosures been made to the editor of the publication(s) and to conference organizers?*(Review submitted manuscripts for disclosure language)* Comments*:*  | Yes/No/NA |
| 4 | Are the budget expenditures submitted to sponsors accurate and reasonable? Comments:  | Yes/No/NA |
| **5** | Have any concerns been raised by students, employees or collaborators related to the research conducted under the ENTITY NAME funded project?Comments:  | Yes/No/NA |
| **6** | If concerns have been raised, have you reported them to the fCOI Committee and overseen their resolutions? Comments:  | Yes/No/NA |
|  |  |  |

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Professor XXXXX, Conflict Manager Date:\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Professor REPORTER FULL NAME Date:\_\_\_\_\_\_\_\_\_\_

*Please sign and send a copy of this document to Dr. Bonnie E. Melhart (**b.melhart@tcu.edu* *) within 5 days of the meeting. Retain original for your records.*

**Appendix D:**

**Sample Disclosure to Sponsors prior to the issuance of a Sub-Award to ENTITY NAME**

I am writing to inform you that I have *DEFINE INTEREST (such as equity, management role, consulting, licensing activity, etc.)* in ENTITY NAME.

ENTITY NAME is listed as a sub-awardee of funds under the proposal *(title and Number)* currently under review by *Sponsor name*. The outcomes of the research performed in my lab may be of interest to or may be beneficial to ENTITY NAME. I have disclosed this external relationship to Texas Christian University and it is being managed in accordance with University policy of financial Conflicts of Interest related to research.

*Provide a justification for the selection of ENTITY NAME as the sub-awardee and any other information you deem important to convey to the sponsor that the selection of ENTITY NAME is not biased by your financial interests.*

**Appendix E:**

**Sample Notice to ENTITY NAME REGARDING Texas Christian University Policy on use of Texas Christian University name**

**Use of Texas Christian University Name**: **External Constituents**: Any organization using the TCU campus for its activities (i.e., summer camps) may not use any TCU logo or image to imply TCU co-sponsorship, unless that is the case. The approved arched TCU logos, Frogs and **Learning to change the world** word mark may be used in association with directions to campus or in providing information about the University. Requests for exceptions should be made through the Director of Conference Services.

The name of Texas Christian University or any variant may not be used in any advertising, publicity, securities offering, or other public statement by, on behalf of, or regarding ENTITY NAME, including any website controlled by ENTITY NAME or by any other company without express written approval of Texas Christian University as set forth in the Texas Christian University Branding Policy.