

**DEFINITIONS:**

ROC	Research Oversight Committee
GVO	Grand Valley Oncology
CWHS	Colorado West Healthcare System
MEC	Medical Executive Committee
FCOI	Financial Conflict of Interest
PHS	Public Health Service
Human Subjects Research	Any research that has been designated "human subject's research" by an IRB
Business Entity	A sole proprietorship, partnership, association, joint venture, corporation, firm, trust, foundation, or other organization or entity used in carrying on a trade or business, including parent organizations of such entities or any other arrangement in which an entity operates through a subsidiary. Business Entity does not include Federal, State, or local government agencies, institutions of higher education as defined at 20 U.S.C 1001 (a), academic teaching hospitals, medical centers, or research institute affiliated with an institution of higher education.
Compensation	Anything of economic value, however designated, which is paid, loaned, granted, given, donated, or transferred to any person or Business Entity for or in consideration of personal services, materials, property, or the like.
Disclosure Form	The personal financial information provided to the Research Oversight Committee (ROC) by an investigator or employee which shall include a complete description, including dollar amounts or percentages of ownership, for all Significant Financial Interests related to their professional responsibilities to GVO/CWHS.
Employee	For the limited purpose of this policy, any individual who is employed by GVO/CWHS, whether full or part time, and includes but is not limited to staff, faculty, postdoctoral fellows, medical house staff, educational trainees and students.
Family Member	For the limited purpose of this policy, Spouse/Domestic Partner and/or dependent and / or minor children. (Domestic Partnership is further defined in Institutional Policies).
Gift	Money, non-pecuniary gifts, excessive compensation or non-commercial loans. For the purpose of this Policy a gift does not apply to occasional non-pecuniary gifts that have insignificant monetary value that would not tend to improperly influence an employee in the discharge of his/her duties.
Intellectual Property	Any ideas, inventions, technology, creative expression and embodiments thereof, in which a proprietary interest is claimed, including but not limited to patents, copyrights, trademarks, know-hows, and biological materials.
Investigator	An individual, regardless of whether or not an employee, as defined by this policy, who is the project director or the principal investigator and any other person, regardless of title or position, who is responsible for the design, conduct or reporting of research or scholarly activities conducted in whole or in part under the auspices of GVO/CWHS, which may include, for example, collaborators, consultants and/or sub award or subcontract recipients.
Research	A systemic investigation, study or experiment designed to develop or contribute to generalized knowledge. The term includes, but is not limited to, basic and applied research (e.g., a published article, book or book chapter) and product development (e.g., a diagnostic test or drug).
Transaction	A formal or informal contract or agreement, express or implied, to which GVO/CWHS is a party.

A. Significant Financial Interest: A financial interest consisting of one or more of the following interests of the individual investigator or employee (and those of the investigator's or employee's family member as defined in this policy) that reasonably appear to be related to the investigator's or employee's responsibilities to GVO/CWHS, as defined by an individual's department or job description:

1. With regard to any publicly traded entity, a Significant Financial Interest exists if the value of any remuneration received by the individual from the entity in the twelve months preceding the disclosure and the value of any equity interest in the entity as of the date of disclosure, when aggregated, exceeds \$5,000. For purposes of this definition, remuneration includes salary and any payment for services not otherwise identified as salary (e.g., consulting fees, honoraria, paid authorship); equity interest includes any stock, stock option, or other ownership interest, as determined through reference to public prices or other reasonable measures of fair market value;
2. Non-royalty payments or entitlements to payments in connection with the research that are not directly related to the reasonable costs of the research (e.g. bonus or milestone payments to the investigators in excess of reasonable costs incurred);
3. Service as an officer, director, or in any other Executive Position in an outside business, whether or not remuneration is received for such service;
4. Reimbursed or sponsored travel (applies to investigators involved in PHS funded research only and not their spouse, registered domestic partner or dependent children). Disclosures shall include the purpose of the travel, the identity of the sponsor/organizer, the destination and the duration of the travel, and any other information as requested by the disclosure form or designated official. See exemptions in (B) below.
5. With regard to any non-publicly traded entity, a Significant Financial Interest exists if the value of any remuneration received by the individual from the entity in the twelve months preceding the disclosure, when aggregated, exceeds \$5,000, or when the individual holds any equity interest (e.g., stock, stock option, or other ownership interest); or
6. Intellectual property rights and interests (e.g., patents, copyrights), when the patent application is filed or when the copyright is asserted or upon receipt of income related to such rights and interests, including royalty income from Intellectual Property owned by the GVO/CWHS.

B. However, Significant Financial Interest does NOT include:

1. Payments to GVO/CWHS, or via the institution to the individual, that are directly related to reasonable costs incurred in the conduct of research as specified in the research agreement(s) between the sponsor and the institution.
2. Compensation, Salary or other non-royalty remuneration from GVO/CWHS if the Investigator is currently employed or otherwise appointed by GVO/CWHS;
3. Reimbursed or sponsored travel that is reimbursed or sponsored by a federal, state or local government agency, an Institution of higher education, an academic teaching hospital, or a research institute that is affiliated with an Institution of higher education.
4. Income from seminars, lectures, or teaching engagements sponsored by a Federal, State, or local government agency, an institution of higher education as defined at 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education;
5. Income from service on advisory committees or review panels for a Federal, State, or local government agency, an Institution of higher education as defined at 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education;
6. Income from investment vehicles, such as mutual funds and retirement accounts, as long as the Investigator does not directly control the investment decisions made in these vehicles.

PURPOSE / POLICY / SCOPE:

The central mission of GVO/CWHS is to educate the individual through the dissemination, discovery, and refinement of knowledge. In its pursuit of excellence in teaching, research and service, GVO/CWHS is an institution based on the shared values of learning, diversity and inclusiveness, entrepreneurship, independent inquiry, respect for resources, collegiality, and community. Even when individual members of GVO/CWHS community work to accomplish this mission with these shared values, FCOIs may naturally arise that have the potential to impair the judgment of the individuals in that work.

This Policy describes the process(es) by which GVO/CWHS uses to abide by PHS policies regarding FCOI.

GVO/CWHS identifies, evaluates and manages FCOIs of individuals without violating its central missions. It uses disclosure as the key mechanism to bring potential FCOI to light for evaluation and possible oversight. This Policy also identifies types of FCOI in which individuals are not allowed to engage because they would be in violation of law or are judged by GVO/CWHS to be in violation of its central missions. This Policy establishes the Research Oversight Committee (ROC) to administer implementation of the Policy. This Policy is not intended to directly govern FCOI of GVO/CWHS as an institution, a subject governed by other regulations.

RESPONSIBILITY:

1. Research Oversight Committee (ROC)

1. The ROC is hereby established as a GVO/CWHS standing committee. A majority of the voting members shall be GVO/CWHS faculty but could include others. Refer to current charter for more information.
2. The Committee is charged with overseeing and/or carrying out the following tasks:
 - a. providing education and training to members of the GVO/CWHS community about FCOIs and how they can be effectively managed, reduced or eliminated;
 - b. reviewing Disclosure Forms submitted by Investigators and Employees;
 - c. determining whether a disclosed Significant Financial Interest is a FCOI; and, if so,
 - d. determining how a FCOI can be managed, reduced, or eliminated to protect the Investigator or Employee, the interests of the GVO/CWHS, research participants and the public.
3. A Compliance Officer, or designee, and other staff as needed shall be employed by GVO/CWHS and adequate resources allocated to support the duties of the ROC.
4. The Committee and its members shall act without bias in administering this Policy.

2. Investigator (and Key Personnel) Responsibilities

1. Be informed of the institution's FCOI policy, the responsibility of the investigator / key personnel to complete disclosure and of Federal regulations related to FCOI by completing any FCOI training assigned by the ROC, or a designee.
 - I. Training must be completed prior to engaging in any PHS funded research, then at least every 4 years thereafter. It must be completed immediately if:
 - A. Institution revised its FCOI policy that affects requirements of Investigators
 - B. Investigator is new to an Institution
 - C. Investigator is not in compliance with the policy or the management plan
2. Disclose all Significant Financial Interests (SFI) and those of the Investigator's spouse and dependent children related to the the Investigator's institutional responsibilities that meet or exceed the regulatory definition of SFI:
 - I. No later than at the time of application for PHS funded research
 - II. At least annually during the period of the award
 - III. Within 30 days of discovering or acquiring a new SFI

3. ROC Responsibilities

1. The ROC will review all FCOI Disclosures prior to the expenditure of funds to determine, for each individual's Disclosure Form, whether a Significant Financial Interest exists. The ROC will refer to 42 CFR Part 50 SubPart F regulations.
2. The ROC will consult with the individual Investigator or Employee as appropriate and determine whether a Significant Financial Interest creates a FCOI. If it is determined that a FCOI exists, then the ROC will determine (and implement) how it can be managed, reduced, or eliminated.
3. The ROC will transmit the decision of the ROC to the Investigator or Employee, his/her GVO/CWHS superiors, and the appropriate offices within the GVO/CWHS as appropriate.
4. The Committee is primarily responsible for monitoring and ensuring compliance with approved plans to manage, reduce or eliminate FCOIs. In most circumstances, this will include requiring the Investigator or Employee to submit compliance reports at intervals specified by the Committee in the management plans. When plans require specific expertise, the Committee may enlist peers to assist with monitoring compliance as needed.
5. The GVO/CWHS will adhere to research sponsor requirements and State and Federal law for reporting of disclosure and management, reduction or elimination of FCOIs.
6. ROC will ensure that if there are any subrecipients involved in the project that a written agreement is in place that identifies whether the subrecipient will follow this policy or their own. The written agreement shall include a requirement for the subrecipient to report identified FCOIs in a time frame that allows for the awardee institution to report identified FCOIs to the NIH as required by the regulation or, alternatively, a requirement to solicit and review subrecipient Investigator disclosures that enable the awardee institution to identify, manage and report identified FCOIs to the NIH. If they will follow their own, the ROC will be responsible for obtaining certification that their FCOI policy complies with the regulation.
7. ROC will ensure that a copy of this policy is available on the Institution's public website.
8. ROC will ensure that identified FCOIs held by senior / key personnel (as identified by the regulation) are available on the Institution's public website prior to the expenditure of any funds.
9. ROC will review disclosure, make determinations and implement management plans within 60 days (or as required by regulation) of the following:
 - i. New Investigator on the research Project
 - ii. Existing Investigator discloses a new FCOI
 - iii. Institution identifies a FCOI that was not disclosed timely by an Investigator
 - iv. Institution identifies a FCOI that was not previously reviewed by the Institution

4. Confidentiality

1. FCOIs disclosures and Committee determinations concerning conflicts and violations shall be available to:
 - a. the Investigator or Employee's GVO/CWHS superiors;
 - b. the appropriate GVO/CWHS offices, including, but not limited to, MEC, Board of Directors; and
 - c. other Employees whose responsibilities to the GVO/CWHS are directly affected by the FCOI.
2. In certain circumstances, Federal and State law may require public disclosure of information relating to identified FCOIs.
3. In other circumstances, including but not limited to conflicts regarding human subjects research, GVO/CWHS may require public disclosure as part of a conflict management plan.
4. Except for the foregoing disclosures contemplated in this Policy, the ROC and those within GVO/CWHS who have direct responsibility for reviewing potential conflicts or investigating potential violations of this Policy shall treat the information received and considered during these processes as confidential information.

5. Any information disclosed by an Investigator or Employee as required by this Policy shall be used solely for the purpose of administering this Policy and shall not be used for any other purpose unless required by law.
 6. Unauthorized disclosure of any such information by an Employee shall be deemed to be unethical behavior and shall be punishable under pertinent GVO/CWHS Policies.
5. Appeals
1. Any decision of the ROC concerning the existence of a FCOI or the appropriateness of a plan to manage, reduce, or eliminate a conflict may be appealed within thirty (30) days to a panel which shall include external entity with expertise in this area and the CWHS MEC. The decision of the panel shall be final.
6. Non-Compliance
1. **Reports of Non-Compliance:** Potential violations of this Policy or any FCOI management plans must be reported to the GVO/CWHS Compliance Officer.
 2. **Investigation of Non-Compliance:** The ROC shall investigate all potential non-compliance with this Policy, including potential non-compliance with prescribed management plans. The Research Director, or designee, will promptly notify NIH if an Investigator fails to comply with this policy or a FCOI management plan appears to have biased the design, conduct or reporting of the NIH funded research.
 3. **Retrospective Review:** (Refer to 42 CFR Part 50 Subpart 50 for current requirements). If an Investigator fails to disclose a FCOI, or fails to comply with a Management Plan for a FCOI previously identified, or the ROC otherwise becomes aware of a conflict that was not identified or managed in a timely manner, a **retrospective review of the Investigator's activities and the research project will be completed within 120 days of the Institution's determination of non-compliance.**
 - i. The retrospective review will be completed to determine whether the research conducted during the period of non-compliance was biased in design, conduct or reporting.
 - ii. Documentation of the retrospective review will include: Project number, Project title, PI, Name of Investigator with the FCOI, name of entity with which the Investigator has the conflict, reason(s) for the retrospective review, detailed methodology used for the review and the findings / conclusions of the review.
 - iii. Upon completion of the review, all previously submitted reports will be updated (by Research Director, or designee), including the actions that will be taken to manage the FCOI going forward.
 - iv. If bias is found, the Research Director, or designee, will promptly notify the NIH and the report will include a mitigation report in accordance with the regulations, including a description of the impact of the bias and the plan of action to eliminate or mitigate the effect of the bias.
 - v. The applicable agency will consider the report and may take additional actions with respect to the funded activity, such as: imposition of special award conditions, suspension of funding or other enforcement actions.
 - vi. In the case of an Investigator's failure to disclose the conflict (or comply with a management plan) they will be required to: Disclose the FCOI in each public presentation of the results of the research AND request an addendum to previously published presentations.
 4. **Protection of Affected Parties:** To the extent permitted by law and GVO/CWHS policies, the GVO/CWHS will protect the identity and privacy of those individuals who, in good faith, report apparent non-compliance with this Policy or furnish information regarding such non-compliance. Retaliation of any kind against any individual, who, in good faith, alleges non-compliance or cooperates with the investigation, is prohibited and the retaliator may be subject to discipline under pertinent GVO / CWHS policies.
 5. **Restrictions That May Be Imposed by the ROC**
 - a. For violations of this Policy, the Committee may impose one or more of the following restrictions on an individual:
 1. Freeze research funds, or otherwise suspend, a project or projects related to the policy violation;
 2. Remove the individual found to be in violation from a role as Principal Investigator or Investigator on a project or projects related to the policy violation;
 3. Prohibit submission of new applications to the Institutional Review Board until resolution of the relevant FCOI issues or for a specified period of time;
 4. Other restrictions as may be deemed appropriate by the Committee.
 - b. The individual Investigator or Employee may appeal the restrictions imposed by the Committee to a panel which shall include CWHS MEC and an external entity with expertise in this area. The decision of the panel shall be final.
 - c. In situations involving the health or safety of any person or the potential loss of significant GVO/CWHS resources, the Committee may implement any restrictions listed in paragraph 4(a) that are necessary to protect these persons and resources pending the outcome of the investigation. Otherwise, no restrictions, disciplinary or administrative action shall occur until the conclusion of the violation evaluation process set forth in this Policy.
 6. **Disciplinary and Other Administrative Actions**
 - a. For violations of this Policy, the Committee may recommend that disciplinary action be taken against the individual (including but not restricted to: reprimands, fines, probation, suspension, or dismissal). The Committee may proceed with a complaint against the Investigator or Employee before the appropriate GVO/CWHS hearing body.
 - b. **Other Administrative Actions**
 1. For violations of this Policy, the Committee may recommend that one or more of the following administrative actions be taken:
 1. Withholding payment owed under a procurement contract relating to the conflict;
 2. Legal action to rescind or revise GVO/CWHS contracts entered into or found to be in violation of this Financial Conflict of Interest Policy or of Federal or State law;
 3. Legal action to recover the amount of financial benefit received by an Investigator or Employee as a result of his or her violation of this policy;
 4. Other similar and appropriate actions.
 7. The remedies provided or referenced above are cumulative and may include any other remedies required or provided by applicable State or Federal law.
 8. The ROC shall report incidents of non-compliance with this Policy to external agencies and sponsors as required by State and Federal law.
7. Reporting
1. The Director or Research, or a designee, will be responsible for sending initial, annual, ongoing and revised FCOI reports to the NIH, as required by the regulation, including:
 - I. Prior to expenditure of funds
 - II. Within 60 days of identification of a new Investigator that is participating on the project
 - III. Within 60 days for new (or newly identified) FCOIs for existing investigators
 - IV. At least annually (at the same time as the annual progress report or time of extension) until completion of the project
 - V. Following a retrospective review to update a previously submitted report, if appropriate.
8. Public Accessibility
1. The Research director, or designee, will post the FCOI policy on the Institution's website.
 2. The Research director, or designee, will make any identified FCOIs held by senior / key personnel (as defined by the regulation - see 42 CFR 50.605 (a) (5) (i)-(iv)) publicly available.
 - I. Must include minimum elements, as defined by the regulation.
 - II. Be posted on public website or be made available within 5 calendar days of written request
 - III. Be updated at least annually (Web site only but any response to a written request should include up to date information)
 - IV. Be updated, within 60 days of newly identified FCOI (Web site only but any response to a written request should include up to date information)
 - V. Remain available for three years from the date the information was most recently updated
9. Other Conflict of Interest Policies and Procedures
1. In situations where both an individual and an institutional conflict of interest may exist, Investigators and Employees will be required to comply with the requirements of this Policy and also with the requirements of the Institutional Conflict of Interest policy.
 2. The ROC and the CWHS Corporate Compliance Committee shall consult on cases of overlapping oversight to determine the appropriate plan to manage, reduce, or eliminate both the individual conflicts and the institutional conflicts.

EQUIPMENT / MATERIALS:

1. FCOI Disclosure Forms
2. Access to Lucidoc
3. IRB website

PROCEDURE:

1. General requirements (disclosure, prohibited activities)

1. It is the duty of every individual member of the CWHS that will be considered Key Study Personnel (those directly involved in the conduct or reporting of research and/or those who complete CITI training) to disclose in a timely manner his or her personal or Family Member's involvement in activities listed as Activities Requiring Disclosure (see Section 2). Approval of the ROC must be obtained before engaging in these activities. It is forbidden for individual GVO/CWHS Employees or Investigators to engage in any Activities That Are Not Allowed (see Section 3).
2. Activities Requiring Disclosure
 1. Research and Scholarly Activity
 1. **Investigators.** Disclosure is required when an Investigator is responsible for the approval, design, conduct, or reporting of sponsored research conducted in whole or in part under the auspices of the GVO/CWHS.
 2. **Employees.** Disclosure is required when an Employee or his/her Family Member has a Significant Financial Interest related to research or scholarly activities involving GVO/CWHS subordinates or students and the Employee has responsibility for the subordinates' or students' employment and/or academic evaluations.
 3. **Other individuals.** Disclosure is required when a student or postdoctoral scholar or his/her Family Member has a Significant Financial Interest and submits an individual application for fellowship or other research support under the auspices of the GVO/CWHS.
 2. Human Subjects Research
 1. Disclosure is required when an Investigator is responsible for the design, conduct, or reporting of human subjects research conducted in whole or in part under the auspices of the GVO/CWHS.
 2. Research with human subjects must receive the highest level of protection from bias or appearance of bias created by an individual's FCOI . Consequently, GVO/CWHS shall apply a presumption against the conduct of research with human subjects in any circumstance where the individual has a FCOI relating to the research. The ROC may approve conduct of the research by the individual only upon a finding of compelling circumstances and only when the Committee can craft an effective management plan to mitigate the conflict. Otherwise, the conflict must be eliminated or the research project shall not be conducted by the individual.
 3. Intellectual Property
 - A. Disclosure is required prior to the negotiation of any licensing agreements when an Employee is a named inventor on an invention disclosure and the Employee or his/her Family Member has a Significant Financial Interest in a Business Entity related to the Intellectual Property.
 4. Procurement
 - A. Disclosure is required when an Employee or his/her Family Member has a Significant Financial Interest in a Business Entity proposing to enter into a transaction with GVO/CWHS, and that Employee or Family Member is in a position to influence the outcome of GVO/CWHS's decision on that transaction.
 - B. Disclosure is required when an Employee or his/her Family Member has a Significant Financial Interest in a Business Entity that provides goods or services, the GVO/CWHS provides the same or similar goods and services, and the Employee is in a position to direct potential purchasers of the goods and services away from GVO/CWHS and to the Business Entity. This provision does not otherwise limit consulting by faculty or staff.
3. Activities That Are Not Allowed (Prohibited Activities)
 1. The following activities present FCOIs in which individuals are not allowed to engage because they would be in violation of law or judged by GVO/CWHS to be in violation of its central missions.
 - A. Academic Freedom Restrictions
 1. Secrecy or confidentiality requirements are not allowed if they impact evaluation of a student, faculty member, or other Employee, or if they delay fulfillment of degree requirements by more than the time contractually allowed for publication and/or protection of intellectual property rights (up to 6 months).
 2. Investigators shall not permit a sponsor to compromise the integrity of the scientific analysis or the publication of research results or its conclusions.
 3. Evaluation of faculty, staff, postdoctoral fellows, medical house staff, educational trainees or students is not allowed to be based, in whole or in part, on participation in (or refusal to participate in) non-GVO/CWHS activities involving Business Entities in which the evaluating Employee or Investigator has a Significant Financial Interest. The participation of faculty, staff, medical house staff, educational trainees or students in non-GVO / CWHS activities involving such Business Entities shall not be required or expected.
 - B. Human Subjects Research
 1. Individual Investigators or Employees participating in the design, conduct or reporting of a human subjects research study, or their Family Members, shall not, directly or indirectly, accept any incentives or gifts from a Business Entity that is sponsoring or providing support for the study. Payments to GVO/CWHS from Business Entities that are sponsoring or providing support for the study shall only be deposited into the investigators' restricted project account established for the study, unless otherwise approved by the Chief Financial Officer.
 - C. Intellectual Property
 1. Involvement by an Employee in the process of negotiating a license on behalf of GVO/CWHS with a Business Entity in which the Employee or his/her Family Member has a Significant Financial Interest is not allowed.
 - D. Solicitation or Receipt of Gifts
 1. Solicitation or receipt of a gift by a GVO/CWHS Employee, whether directly or indirectly through the institution, is not allowed, when (a) the purpose or effect of the gift is likely to improperly influence the Employee in the discharge of his/her GVO/CWHS responsibilities; (b) the gift is given to reward the Employee for official action taken; or (c) the gift is given in close proximity to recent past, present or future transactions between the GVO/CWHS and the giver of the gift.
 4. Investigator and Employee Disclosure Responsibilities
 1. This Policy uses disclosures as the key mechanism to bring potential FCOI to light for evaluation and possible oversight.
 - A. Each Investigator or Employee engaged in any activities specified in Section 2 is required to complete FCOI training offered by the GVO/CWHS.
 - B. Each Investigator or Employee must personally complete and submit a Disclosure Form prior to engaging in any activities specified in Section 3(B).
 1. The Investigator or Employee must provide complete and accurate information about all Significant Financial Interests that reasonably appear related to his/her professional responsibilities to GVO/CWHS.
 2. The Investigator or Employee will not engage in any activities specified in Section 3(B) until the ROC determines whether a Significant Financial Interest creates a FCOI for the Investigator or Employee and approves a plan to manage, reduce or eliminate any such conflicts.
 - C. Once a Disclosure Form has been required by GVO/CWHS, each Investigator or Employee must update his/her Disclosure Form at least annually and within thirty (30) days of discovering or acquiring (e.g., through purchase, marriage, or inheritance) a new Significant Financial Interest that is related to his/her professional responsibilities to GVO/CWHS.
 - D. Investigators participating in research funded by the Public Health Service (PHS) must also disclose the occurrence of any reimbursed or sponsored travel (i.e., that which is paid on behalf of the Investigator and not reimbursed to the Investigator so that the exact monetary value may not be readily available), related to their responsibilities to GVO/CWHS; provided, however, that this disclosure requirement does not apply to travel that is reimbursed or sponsored by a Federal, State, or local government agency, an Institution of higher education as defined at 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an Institution of higher education.

<i>Required Record</i>	<i>Custodian</i>	Record Retention Requirement
Completed FCOI Disclosure Forms	CTO	At least 3 years from the date the final expenditure report is submitted to NIH. Refer to 42 CFR 50.604(i) and 45 CFR 74.53 (b) and 92.42 (b), where applicable.
Documentation of FCOI Training	CTO / CWHS Education Dept	At least 3 years from the date the final expenditure report is submitted to NIH. Refer to 42 CFR 50.604(i) and 45 CFR 74.53 (b) and 92.42 (b), where applicable.
Other FCOI related records generated	CTO	At least 3 years from the date the final expenditure report is submitted to NIH. Refer to 42 CFR 50.604(i) and 45 CFR 74.53 (b) and 92.42 (b), where applicable.

REFERENCES:

- <https://grants.nih.gov/grants/policy/coi/index.htm>
- https://grants.nih.gov/grants/policy/coi/coi_faqs.htm
- <http://www.ohsu.edu/xd/research/about/integrity/coi/index.cfm>
- 20 U.S.C. 1001
- 42 CFR Part 50
- "Checklist for Policy Development related to the 2011 Revised Financial Conflict of Interest (FCOI) Regulation, Promoting Objectivity in Research (42 CFR Part 50 Subpart F)"

References

Reference Type	Title	Notes
Documents referenced by this document		
Referenced Documents	http://www.ohsu.edu/xd/research/about/integrity/coi/index.cfm	
Referenced Documents	https://grants.nih.gov/grants/policy/coi/coi_faqs.htm	
Signed by	<u>Scot Houska</u> Scot Houska, Chief Compliance Officer/Privacy Officer (02/28/2018 09:03AM PST)	
	<u>John Skillicorn</u> John Skillicorn, Physician Practice Administrator (02/28/2018 01:28PM PST)	
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