Requirements

1. UVM’s Financial Conflict of Interest (COI) in Sponsored Research Policy requires all Investigators (anyone responsible for the design, conduct, or reporting of sponsored research, not just the Principal Investigator) to disclose whether or not they have Significant Financial Interests related to their Institutional Responsibilities.
2. Investigators cannot create Significant Financial Interest disclosures until they have completed and registered COI Training.
3. Disclosures must be updated annually.
4. If a new Significant Financial Interest has been obtained, an existing disclosure must be reviewed and updated within 30 days of the date it was obtained.
5. COI Training must be completed once every four (4) years.

Getting Started

1. Login to UVM’s Significant Financial Interest in Sponsored Research Disclosure System
   - SPA Home Page Logins Section, or
   - https://spogi.uvm.edu/UVM_COI/
2. Click “Proceed to On-Line Application” link
3. If required, enter your UVM Net ID and Password
4. You can now select one of the following actions:
   a. Complete COI Training
   b. Create a new COI financial interest disclosure
   c. Create a new COI travel disclosure

Complete COI Training

1. Click the “Complete COI Training” link.
2. A web based slide show will open to the “Financial Conflict of Interest in Sponsored Research.”
3. Read each slide and click Next to advance to the next slide.
4. The last page contains a link to a page that will allow you to register the completion of your training. Click the link.
5. On the new page, click the register button.
6. You will receive an email confirmation that your training has been completed and logged.
7. Close the browser window.
8. The next time you login to the UVM COI Application, your main screen will display your training status and the date the training will need to be renewed.
Complete a new COI Financial Interest Disclosure

- The system will not allow any disclosures to be submitted if the COI training has not been completed within the last (4) years.
- Investigator(s) involved in a UVM sponsored project must submit a disclosure, whether or not they have significant related financial interest(s).
- Investigators must submit their disclosure at least once a year.
- Investigators must submit a new disclosure whenever there are new or substantial changes in financial interests.

Click the “Complete a COI Disclosure” button. There are two choices to select from:

No Significant Financial Interest

- The first choice reads: “I do not have a Significant Financial Interest related to my Institutional Responsibilities. If I acquire such an interest I agree to disclose it within 30 days of acquisition.” If true, proceed as follows:
  - Select this choice and click submit button.
  - You will receive a message and an email verifying that your disclosure has been submitted along with information that your disclosure will expire in one year.
  - You will receive an email reminder from Sponsored Project Administration (SPA) 30 days before your disclosure’s expiration.

Significant Financial Interest to Disclose

- The second choice reads: “I do have a Significant Financial Interest related to my Institutional Responsibilities.” If true, proceed as follows:
  - Select this choice and click submit button.
  - The screen will refresh and provide further instructions for obtaining and completing the required form. (see Appendix A for a sample form)
  - You will receive a confirmation email that your selection has been logged. The email also contains a link to the required form.

If You Don’t Know

- If you are unsure which type of disclosure is required, please contact Ruth.Farrell@uvm.edu for clarification.
Completing the Disclosure Form (see Appendix A – Sample Disclosure Form)

1. Download the disclosure form (a Word document)
2. Provide the information requested and answer the questions in the spaces provided in the form.
3. While completing the form, pay particular attention to the following:
   - Indicate the InfoEd # numbers of the proposals to which your potential conflict relates. *You can obtain a list of the proposals upon which you are listed by opening the COI online application and clicking the link: “View a list of the awarded and pending research proposals upon which you are named.”*
   - Describe how any financial interest disclosed may be, or may appear to be, affected by the design, conduct or reporting of research (Question 8).
   - Indicate what plans or actions you think should be considered to manage, reduce, or eliminate the conflict (Question 9).
4. After you have completed the form, save a copy and send it as an email attachment to the UVM designated institutional official at ConflictofInterest@uvm.edu
5. The designated institutional official (Ruth Farrell) will review the information you provide and contact you for follow up.
6. Please see the FAQ's for more information about how your potential conflict might be handled.
Complete a new COI Travel Disclosure

*Important Note*: The system will not allow any Travel Disclosures to be submitted if the COI Training has not been completed within the last four (4) years.

Click “Create a new travel disclosure (For travel not previously disclosed in annual disclosure)”

1. The screen will refresh.
2. Fill in the online form
3. Click *Submit*, or if more travel disclosures are to be submitted, click “*Submit and create new*”.
4. When you are finished, click the *Logout* button or click the “*COI Main*” link to return to the main screen
5. You will receive an email confirmation for each travel disclosure you submit.
Appendix A
Sample Disclosure Form
This form is designed to be completed electronically. Form fields (e.g. _____) will expand to accommodate the text you type in directly or copy and paste from another source. Please remember to save your work.

Section 1: Investigator Information

Name of Investigator: _____
Date: _____
Department: _____
College/School: _____
Email address: _____

This is a(n) [ ] Annual Disclosure [ ] Revision of existing disclosure

Section 2: Significant Financial Interest(*) Information

Instructions: Please provide the following information about each entity in which you have a Significant Financial Interest related to your Institutional Responsibilities(*). If you have a Significant Financial Interest in more than one entity, please copy this form and complete this section for each. PHS-funded investigators, to disclose reimbursed travel, go to Section 3.

1) Name of entity: _____
   Principal business or specialty: _____

2) Is the entity a publicly traded company, that is, is it a company which has issued stock traded on the open market. (Also called publicly held or public company)

   [ ] Yes [ ] No [ ] Don't know

3) Income: Did you, your spouse or your dependent children receive $5,000 or more in income during the last twelve months from the entity listed above? (“Income” refers to any payment such as salary, consulting fees, authorship fees, payment for teaching, dividends, and investment income, etc.). Please note that income from blind trusts, investment vehicles, such as mutual funds and retirement accounts, as long as you do not directly control the investment decisions made in these vehicles, is excluded. For income related to your research, you may be asked to provide additional information, including the dollar value of the income received, in order to assess potential conflicts.

   a) [ ] Yes [ ] No

   b) If yes, please indicate who received the remuneration or income (you, your spouse, or dependent children), why it was given and describe any services provided.

(*) See page 7 - Section 5: Definitions
Appendix A

4) OWNERSHIP:

Did you, your spouse or any dependent children have an interest or hold equity (ownership interest, stock, or stock options, bonds, deferred benefits or other ownership interests) in the entity listed above. Please note that ownership managed by blind trusts, investment vehicles, such as mutual funds and retirement accounts, as long as you do not directly control the investment decisions made in these vehicles, are excluded. For ownership interests related to your research, you may be asked to provide additional information, including the financial value of the ownership interest, in order to assess potential conflicts.

   a) □ Yes       □ No

   b) If yes, please indicate type:  □ Stock  □ Deferred benefits  □ Other ownership interests ______

   c) Please indicate what percent of the total value of the company your interest represents ______%

   d) Please indicate who has the ownership interest (You, your spouse or dependent child). ______

5) INTELLECTUAL PROPERTY:

   a) Does the entity listed above, hold rights to a pending patent applications, issued patent, or license to an invention, copyright of software, or other intellectual property which you, your spouse, or your dependent children have developed?
      □ No
      □ Yes, but the license is from the University of Vermont
      □ Yes, and the application, patent, or license is not from the University

   b) Did the dollar value of any income you, your spouse, or dependent children received over the past twelve months related to the intellectual property equal or exceed $5,000? For intellectual property income related to your research, you may be asked to provide additional information, including the dollar value received, in order to assess potential conflicts.
      □ Yes       □ No

6) Please check all that describe the relationship of the financial interest to any funded or pending projects on which you are listed. To see a list of the research proposals on which you area listed as an investigator, please log into the Sponsored Project Administration Online Disclosure System. If none, please check “none of the above.”

(*) See page 7 - Section 5: Definitions
Appendix A

☐ Intellectual property you have developed is being used, tested or further developed in the research.
☐ UVM-owned intellectual property optioned or licensed to the entity in which you have a financial interest is being used, tested or further developed in the research.
☐ Products/services are being provided by or purchased from the entity in which you have the financial interest.
☐ The interest is in a company which manufactures or sells a concomitant or comparator drug or device, or procedure.
☐ The interest is in an entity to which research space will be leased or from which research space will be rented.
☐ The entity in which you have the interest is a sub-recipient under the proposed research.
☐ The project is a sub-award for research from the entity in which you have the interest.
☐ The entity in which you have the interest is part of a consortium or will otherwise participate in the research.
☐ There are other relationships between the interest and the research (please describe).

☐ None of the above.

7) Please indicate the InfoEd ID number(s) for each pending or awarded research proposal for which the relationships checked in #6 apply:

   Proposal #s  _____  _____  _____  _____  _____
   _____  _____  _____  _____  _____

8) Describe how the financial interests indicated above may be, or appear to, affect the design, conduct, or reporting of the research.

   _____

9) What plans or actions would you propose to undertake to manage, reduce, or eliminate the potential financial conflict of interest?

   _____

10) Please provide any additional information or comments that you would like about the nature of the relationship and potential conflict.

   _____

(*) See page 7 - Section 5: Definitions

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Appendix A

Section 3: PHS-funded Investigator Reimbursed Travel(*)

Instructions: Please complete the following questions, if applicable. Answer Question 1) for your initial Significant Financial Interest Disclosure. Answer Question 2) to disclose any anticipated travel over the next 12 months. Reimbursed travel not disclosed during the annual disclosure process must be reported within 30 days using the Sponsored Project Administration On-line Disclosure System.

1) Over the past 12 months has any travel reimbursement not previously disclosed been paid directly to you or paid directly on your behalf, regardless of amount or value, related to your UVM or Fletcher Allen responsibilities? [Exclude travel reimbursed or paid by a federal, state, or local government agency, a U.S. institution of higher education (including the University of Vermont), an academic teaching hospital (including Fletcher Allen Health Care), or a medical center.]

   a) ☐ Yes ☐ No

   a) If yes, please describe the destination, purpose of the trip(s), the sponsor or organization that funded it and the duration. Please feel free to describe as many trips as you anticipate in this box.

      Sponsor: ___
      Purpose: ___
      Duration: ___
      Destination: ___

      Sponsor: ___
      Purpose: ___
      Duration: ___
      Destination: ___

      Sponsor: ___
      Purpose: ___
      Duration: ___
      Destination: ___

      Sponsor: ___
      Purpose: ___
      Duration: ___
      Destination: ___

(*) See page 7 - Section 5: Definitions
2) **For PHS funded investigators only**, do you anticipate in the coming year that any travel expenses will be reimbursed directly to you or paid directly on your behalf, regardless of amount or value, related to your UVM or Fletcher Allen responsibilities? [Exclude travel reimbursed or paid by a federal, state, or local government agency, a U.S. institution of higher education (including the University of Vermont), an academic teaching hospital (including Fletcher Allen Health Care), or a medical center.]

b) ☐ Yes ☐ No

c) If yes, please describe the destination, purpose of the trip(s), the sponsor or organization that will fund it and the duration. Please feel free to describe as many trips as you anticipate in this box.

    Sponsor:  
    Purpose:  
    Duration:  
    Destination:  

    Sponsor:  
    Purpose:  
    Duration:  
    Destination:  

    Sponsor:  
    Purpose:  
    Duration:  
    Destination:  

    Sponsor:  
    Purpose:  
    Duration:  
    Destination:  

**Section 4: For Investigators with Financial Conflicts of Interest under a Management Plan**

If this is an annual update for an existing Financial Conflict of Interest that is being managed by the University, please describe the actions that you have taken in the last year to execute the Management Plan in place.
Appendix A

VERIFICATION

This Investigator’s Disclosure should be sent as an email attachment to ConflictOfInterest@uvm.edu.

When you send the completed disclosure form, you are declaring that you have read the University of Vermont Policy on Financial Conflict of Interest in Sponsored Research, used all reasonable diligence in preparing this disclosure statement, and to the best of your knowledge, it is true and complete.

You further agree to update the disclosure at least annually, or whenever any new significant financial interests(*) are acquired within 30 days of the change or acquisition.

Thank you for your careful attention to this important compliance requirement.

Questions? Contact Ruth.Farrell@uvm.edu, 802-656-3360

(*) See page 7 - Section 5. Definitions
Appendix A

Section 5. Definitions

Significant Financial Interest

Significant Financial Interest (SFI) means a financial interest consisting of one or more of the following interests of the Investigator (and those of the Investigator’s spouse and dependent children) related to the Investigator’s institutional responsibilities:

- With regard to any publicly traded entity, any remuneration or holdings exceeding $5,000 in value (including equity) over the twelve months preceding disclosure.
- With regard to any non-publicly traded entity, any equity interest, regardless of value, or any remuneration exceeding $5,000 in value over the twelve months preceding disclosure.
- Intellectual property rights exceeding $5,000 over the twelve months preceding disclosure.

Institutional Responsibilities

Institutional Responsibilities means an Investigator’s professional responsibilities for which he or she is compensated by the University, or by the University and Fletcher Allen Healthcare for Investigators with dual appointments, which may include for example: activities such as research, research consultation, teaching, professional practice, institutional committee memberships, and service on panels such as Institutional Review Boards or Data and Safety Monitoring Boards.

PHS-funded Investigator Reimbursed Travel

For PHS-funded investigators only, the term Significant Financial Interest also means any travel expenses reimbursed directly to an Investigator or paid directly on the investigator’s behalf, regardless of amount or value, related to his/her institutional responsibilities, excluding travel that is reimbursed or paid by a federal, state, or local government agency, an institution of higher education (including the University of Vermont), an academic teaching hospital (including Fletcher Allen Health Care), a medical center, or a research institute that is affiliated with an institution of higher education.

New Significant Financial Interests

A New Significant Financial Interest (SFI) is a different type or nature of SFI (e.g., royalty payment versus consulting fees) than what had previously been disclosed from the same source that meets or exceeds the threshold. In addition, a “new” SFI is also considered to be the same type or nature of SFI (e.g., royalty payment) from a different source (e.g., company A versus company B).