Statement of Policy

Conflicts of interest arise when a staff member can personally benefit financially from a decision he or she could make on behalf of the Institute, including benefits to family members or businesses with which the person is closely associated. Such conflicts are to be avoided if practicable. In the case of the Institute it is recognized its commitment to supporting the evaluation, development and commercialization of technologies from its own scientific discoveries may often expose its research and clinical staff to perceived or potential conflicts of interest and this policy provides for proactive management of such conflicts. To the extent that a staff member may constitute a “key person” as defined in the Conflict of Interest Policy for Board Members, Officers and Key Persons, such individual also shall be subject to such Policy.

DISCLOSURE

(a) Staff members of the Ludwig Institute for Cancer Research Ltd (Institute) disclose on a Confidential Disclosure Form (CDF) extramural activities and reimbursed or sponsored travel for outside entities, and outside appointments and significant financial interests (SFI) of their own and of members of their immediate family (spouse and dependent children) in accordance with the Confidential Disclosure Policy.

CONFLICTS OF INTEREST

(a) Conflicts of interest can stem from the activities listed above and may include, but are not limited to:

i. The conduct of research or sponsored research by an Institute staff member for an entity with whom the staff member or their spouse or dependent children holds an outside appointment or SFI.

ii. Transactions involving Institute resources or personnel with an entity with whom the staff member or a member of their extended family holds an outside appointment or a SFI.

(b) Process

i. Prior to involvement in activities that could be potential or perceived conflicts of interest, a written description of these activities and related
details shall be provided by staff members of the Institute to a Committee of Officers (the Committee) comprised of the Scientific Director, the President, and the Executive Directors for review.

ii. Members of the Committee must excuse themselves from the discussion and review of their own submissions to the Committee or from any transactions in which they may have direct or indirect interest.

iii. Review outcomes

- Activities determined not to be a conflict of interest may be undertaken by the staff member.

- Activities determined to be a conflict of interest that is not manageable may not be undertaken by the staff member.

- Activities determined to be a conflict of interest that is manageable will be submitted to the Audit Committee of the Institute for approval. The submission will include a description of the activities and of the steps involved in the management of the conflict. Once approved by the Audit Committee, the staff member may commence the activities.

iv. The staff member shall be advised in writing of the outcome of the review.

v. All determinations on conflicts of interest shall remain confidential.

vi. However, in compliance with United States Public Health Service policy, the Institute will disclose as required, financial conflicts of interest (FCOI). FCOI are defined as SFI that could directly and significantly affect the design, conduct or reporting of NIH funded research.

TRAINING

(a) Each staff member shall complete training on compliance with the policy requirements prior to engaging in research and at least every four years in accordance with local requirements.

(b) It is the responsibility of each staff member to review the Conflict of Interest Policy when changes in the Policy occur.

(c) A staff member must complete additional training if it is determined they are not in compliance with the Institute’s Conflict of Interest Policy.

(d) Training of staff shall be managed, organized, and administered by the Branch Administrator or their designated delegate.