



Research Ethics Board

Standard Operating Procedure

SOP File #	REB.SOP.105C
Title	Conflict of Interest – Organization
Effective Date	July 1, 2021
Next Review	2026
Next Administrative Review	2023

1. Purpose

This standard operating procedure (SOP) describes potential Conflicts of Interest (COI) in the relationship between the Organization (Mount Saint Vincent University) establishing the Research Ethics Board (REB) and the REB itself, and the requirements and procedures for disclosure and for managing potential COI within this relationship.

2. Definitions

See the MSVU **REB Glossary of Terms (REB.INFO.001)**

3. Scope

All REB members, REB Office Personnel and Organizational Officials are responsible for ensuring that the requirements of this SOP are met.

4. Responsibilities

All REB members, REB Office Personnel and Researchers are responsible for ensuring that the requirements of this SOP are met.

5. Procedures and/or Specific Policies

Organizational policies should address the roles, responsibilities, and process for identifying, eliminating, minimizing, or otherwise managing COI relevant to research, including disclosure to REBs. Management of COI includes, but is not limited to, prevention, evaluation, disclosure, and the application of appropriate remedies as defined by the organization.

The REB must be fair and impartial, immune from pressure by sponsors and funders, the Organization and Researchers whose research is submitted for review. In the interest of public trust and the integrity of the ethics review, the REB must act independently from the Organization under whose authority they were established and given their mandate, and avoid or manage real, potential, or perceived COI. The Organization must respect the autonomy of the REB and ensure that the REB has the appropriate financial and administrative independence to fulfill its primary duties.

The standard that should guide decisions about determining conflicting interests is whether an independent observer could reasonably question whether the Organization's actions or decisions could be influenced by factors other than the rights, welfare, and safety of research participants.

5.1. Disclosure of Conflict of Interest

- 5.1.1. All Organizational employees must be familiar with their respective Conflict of Interest Policy (if applicable) and must complete a Disclosure of Conflict-of-Interest Form(s) (if applicable) at the time of hire and annually thereafter, or as per organizational policy;
- 5.1.2. Prior to engaging in any of the professional activities listed in the Conflict-of-Interest Policy, employees must seek the approval of the appropriate Organizational Official to ensure that no conflict exists in doing so;
- 5.1.3. REB members shall be apprised of the organizational structure with emphasis placed on the independent nature of the relationship between the REB and the Organization. The actions of the REB members relating to their responsibilities to protect human research participants shall not be measured or evaluated in terms of organizational or financial goals;
- 5.1.4. REB meetings are closed to employees of the organization unless they are REB members, REB Office Personnel, permitted as observers, or invited by the REB to provide information, and only after signed confidentiality agreements are in place;
- 5.1.5. Organizational senior administrators shall not serve as REB members nor observe REB meetings when their presence may influence REB deliberations.

5.2. Management of Conflict of Interest

- 5.2.1. The REB Chair or designee must be notified if an organizational COI relating to the REB is declared or discovered;
- 5.2.2. The REB Chair or designee must be notified immediately if any organizational employee attempts to, or appears to attempt to, influence the ethics review process or to obtain preferential treatment;
- 5.2.3. The REB Chair or designee will review the available information to determine if a conflict exists, and to determine those aspects of the COI that might reasonably affect human research participant protection;
- 5.2.4. The REB Chair or designee may require a management plan, which may include actions to eliminate or to mitigate the conflict. Required actions may include, but are not limited to:
 - Divestiture or termination of relevant interest,
 - Recusal of REB Office Personnel whose job status or compensation is impacted by research that is reviewed by the REB,
 - If Organizational staff members are involved, inform the appropriate responsible organizational management personnel to develop and implement a management plan for remediation;
- 5.2.5. If the REB Chair or designee is unable to satisfactorily manage the COI, or if there are unresolved concerns about any undue influence on the REB, the REB Chair or designee will bring this to the appropriate Organizational Officials for determination of the appropriate course of action;
- 5.2.6. If the REB Chair or designee cannot bring the matter to the appropriate Organizational Officials because of an emergent situation or competing COI with

the organization, the REB Chair or designee may escalate the issue to the appropriate Organizational Officials as per the board's authority.

6. References

See References listed (if applicable)

7. Acknowledgements

The development of this document has benefited directly from similar documents made public by the Tri-Council, as well as several Canadian universities. In some instances, specific formulations drawn from these sources have been incorporated into this document. Specific iterations were drawn from the following:

- Standard Operating Procedures for Observational Health and Non-Clinical Trial Research Ethics Boards - [N2/CAREB-ACCER REB SOPs – Canadian Association of Research Ethics Boards](#) (retrieved June 2021)
- N2/CAREB-ACCER REB SOPs - N2 Network of Networks - [Resources - N2 Canada](#) (retrieved May 2021)

8. SOP History

SOP Number	Key Changes	Effective Date
REB.SOP.105A	New - Implementation of new SOP outlining Conflict of Interest for Organization/MSVU	July 1, 2021

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