# Strategies for Managing Conflict of Interests in the World of Innovation

April 16, 2017 11:00-12:00

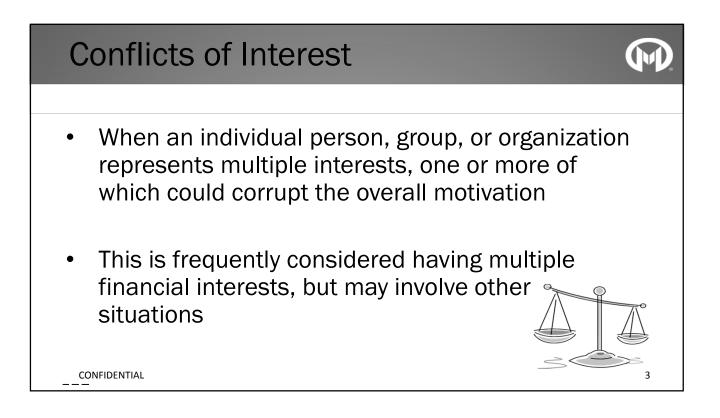
Cheryl L. Byers, MHA, CIP, CHRC HCCA 2018 Compliance Institute

### **Objectives of the Presentation**

### As outlined in the Program

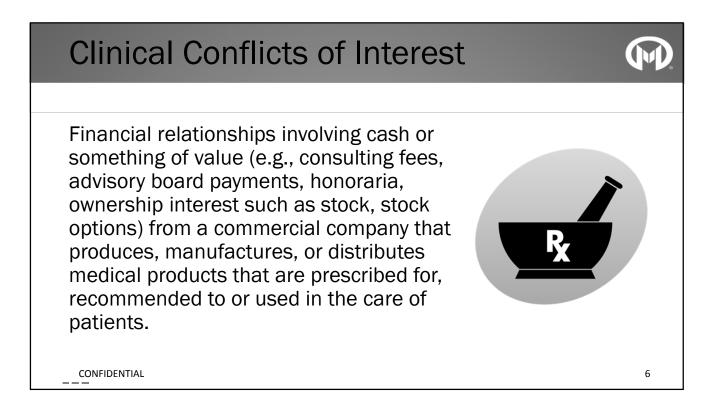
- Managing individual conflict of interests can pose challenges at institutions where innovation is both encouraged and rewarded. Review strategies for balancing entrepreneurial goals of individuals while maintaining compliance with institutional policies
- Organizations are engaging in new and innovative relationships with industry as a means to achieve research and organizational objectives. Learn strategies for managing conflicts to avoid the appearance of bias in research
- Building trust and communication is essential to a conflict of interest program. Discuss ways in which compliance officers can achieve these essential tools

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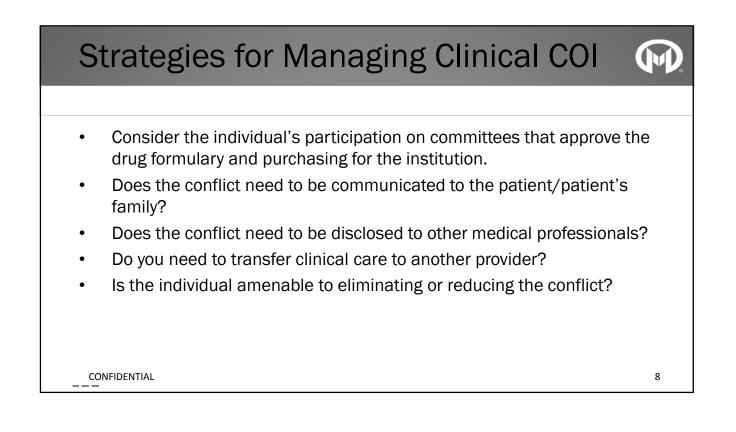




## Issues to Consider with Clinical COIs

- How will clinical conflict(s) be collected?
  - Centrally vs. Departmentally
- How often do you require reporting (e.g., annually)?
  - How will you handle changes in status throughout the year?
- Will you have a threshold (e.g., >\$25,000 should be reported)?
- Who needs to "sign off"? Supervisor? Chief Medical Officer?
- How/Will you disclose to patients?
  - How will you document this?
  - How will you monitor this?
  - What else needs to be considered? Monitoring of prescribing patterns?

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Who Owns the Process	?	
MERCK MERCK MERCK ClaxoSmithKline AstraZeneca Johnson Johnson	de Is ad Do in Do that	o you have a COI epartment? it part of clinical or ministrative operations? o you have a champion leadership? o you have a committee at will review these sues?

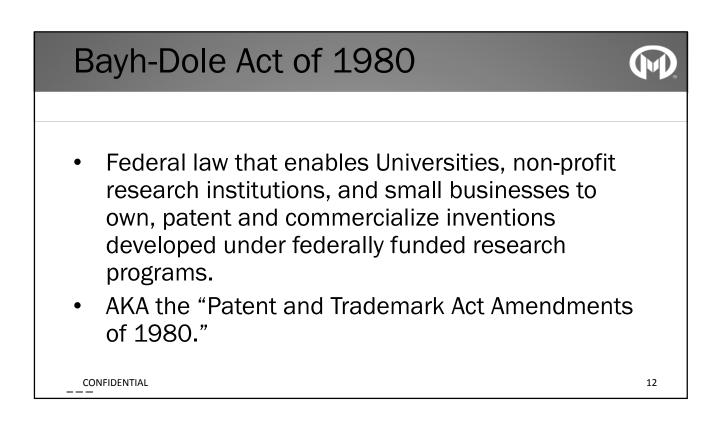
Promoting Objectivity in Research	
PHS Regulations	
Revised regulations on Responsibility of Applicants for Promoting Object Research for which Public Health Service Funding is Sought and Respo Prospective Contractors	
42 CFR Part 50 Subpart F (grants and cooperative agreements) 45 CFR Part 94 (contracts) Initial Regulation effective 10-1-95	
Published in Federal Register August 25, 2011; Implemented August 24	1, 2012
Applies to all PHS funded research	
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### What's the Big Deal?



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The purpose of the regulation is to promote objectivity in research by establishing standards that provide a reasonable expectation that the design, conduct, and reporting of research funded under PHS grants or cooperative agreements will be free from bias resulting from Investigator financial conflicts of interest.



# **Key Provisions of Bayh-Dole**



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- University retained ownership of any inventions created as a result of federal funding.
- Once the innovator disclosed the creation of an invention, disclosure to the appropriate funding agency must occur in 2 months.
- University must patent all inventions it elects to own and commercialize.
- University must attempt to develop and commercialize the invention.
- Excess revenue must support research & education.
- University must share a portion of the royalties with the inventor.

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### Gelsinger Case: COI Issues



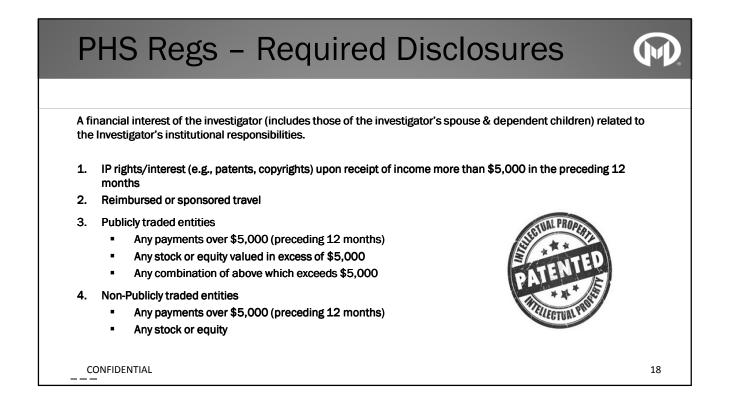
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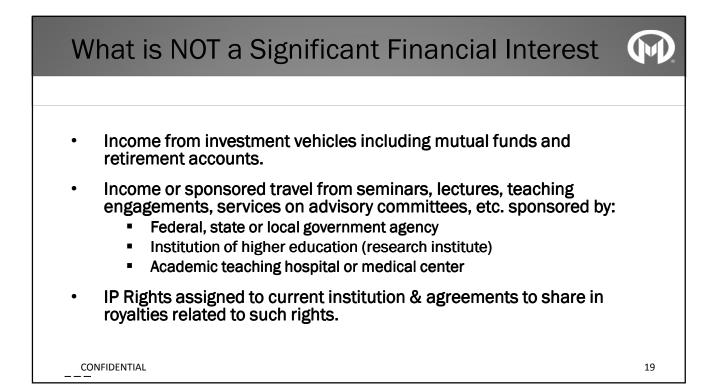
- The PI held patents on several gene therapy delivery techniques.
- The PI founded and held a significant amount of equity in a biotech company.
- The University also held a significant amount of equity in the same biotech company.
- The biotech company invested large amounts of money in The Gene Therapy Institute at the University.
- The PI led The Gene Therapy Institute; all investigators (and the IRB) reported to him.
- None of this information was disclosed in the informed consent document signed by Jesse or the other 17 research participants.

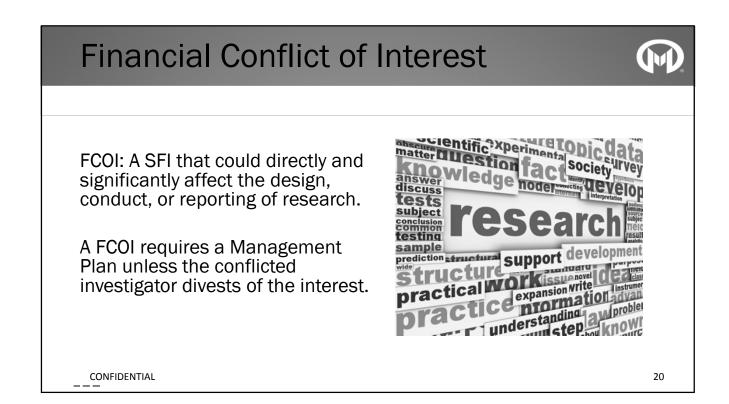
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Paving the Way for Change	
lowa Senator Charles Grassley led the charge to chang the way the NIH evaluates researchers who accept mo from industry:	U 1
<ul> <li>Decreased the threshold for reporting</li> </ul>	
<ul> <li>Greater detail in reporting to NIH</li> </ul>	
<ul> <li>Institutions are responsible for determining whi conflicts are problematic &amp; managing them</li> </ul>	ich
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### **Developing Management Plans**

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### Questions to Ask

- What is the conflicted investigator's role in the research?
- Are other investigators involved in the research at the site?
- How many sites are participating in the study?
- Are there enrollment expectations for the site?
- Will the conflicted investigator be included in publications?
- Will he/she conduct data analysis?
- Will he/she make important decisions about the data?

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### Questions to Ask Continued... Will the sponsor or Clinical Research Organization (CRO) be • responsible for monitoring data? If so, how often? Will a data coordinator or other individual collect/input data? Is the conflicted investigator amenable to: • Abstaining from consenting subjects? • Limiting the number of subjects recruited? • Having a co-signer on adverse events/serious adverse ٠ events? Routine monitoring by compliance? CONFIDENTIAL 22

### **Research Management Controls**

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- Disclosure to research subjects in the informed consent document
- Disqualification of the conflicted Investigator/Key Personnel from participating
- · Additional requirements/restrictions for data analysis
- Monitoring of the Investigator/Research by impartial observers capable of taking measures to protect the design, conduct or reporting of the Research against bias
- Modification of the Research or project
- Divestiture or minimization of the SFI
- Severance of the relationship that created the actual or potential FCOI

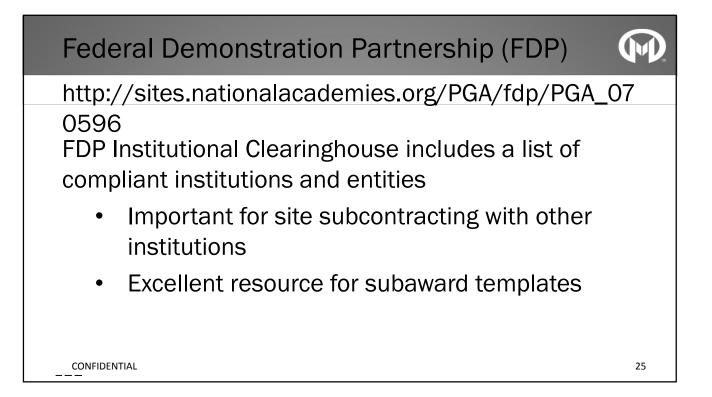
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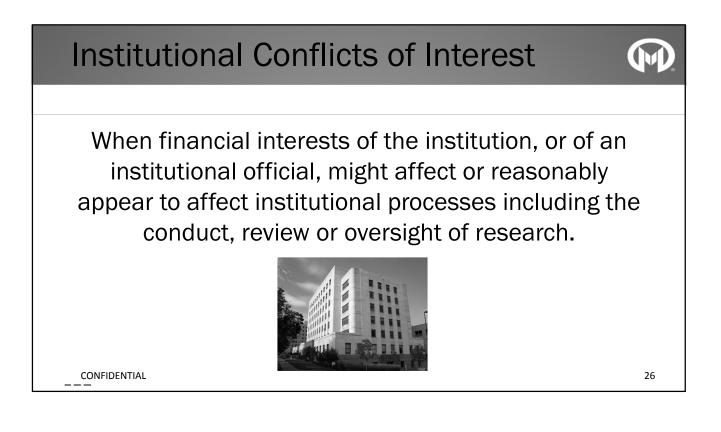
# Who Adopted the PHS Regulations?

Agency for Healthcare Research and Quality (AHRQ) Agency for Toxic Substances and Disease Registry (ATSDR) Centers for Disease Control and Prevention (CDC) Food and Drug Administration (FDA) Health Resources and Services Administration (HRSA) Indian Health Service (IHS) National Institutes of Health (NIH) Office of Global Affairs (OG) Office of the Assistant Secretary for Health (OASH) Office of the Assistant Secretary for Planning and Evaluation Office of the Assistant Secretary for Preparedness and Response (ASPR) Office of Public Health and Science Substance Abuse and Mental Health Services Administration (SAMHSA)

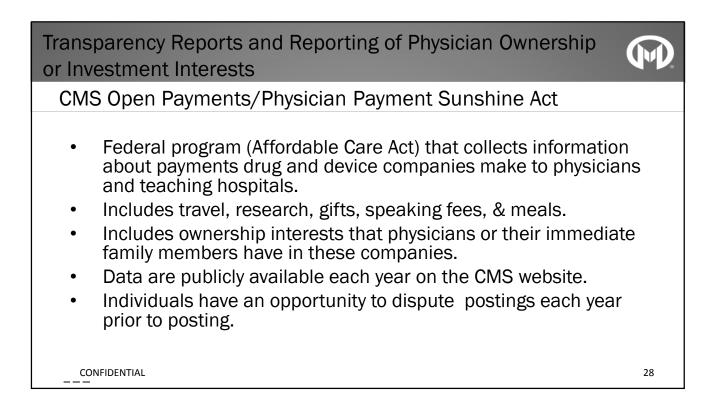
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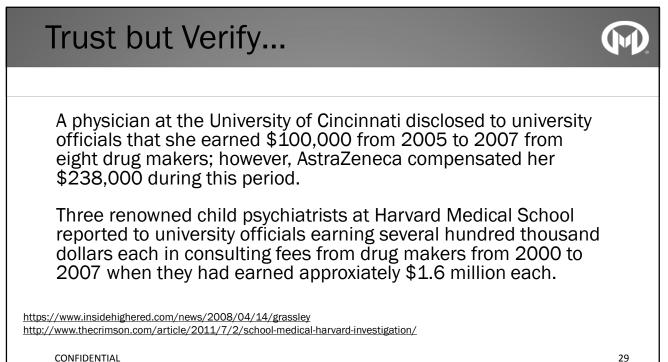
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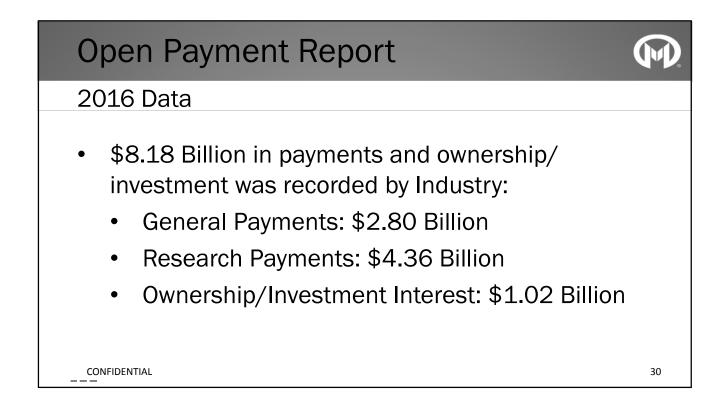


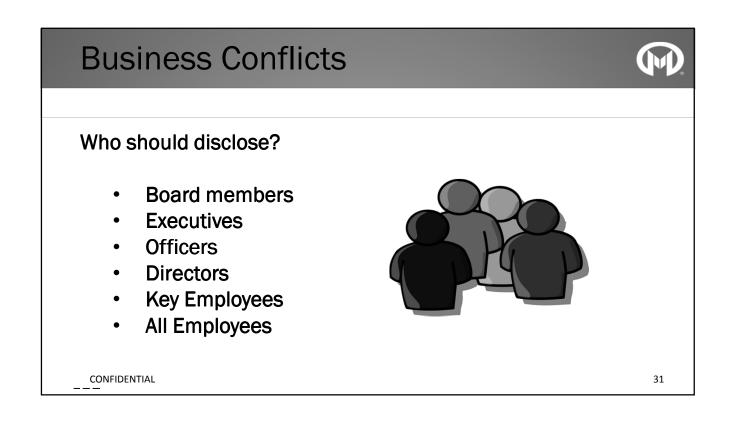


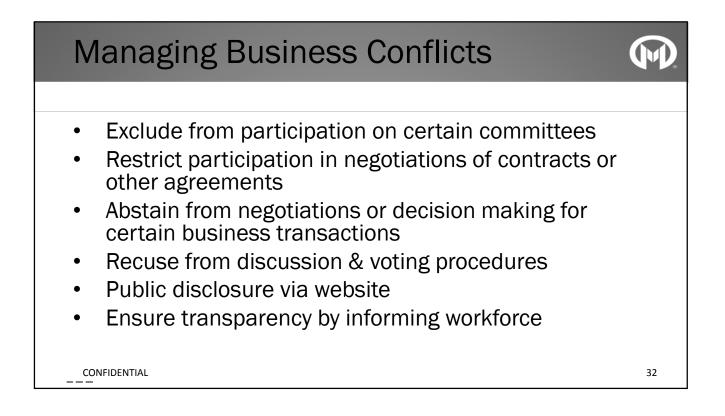


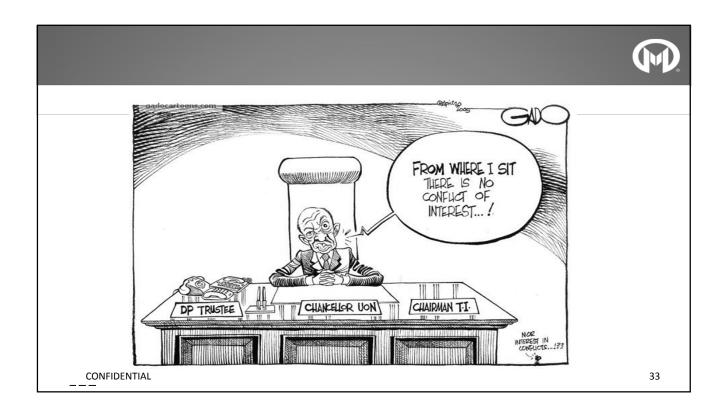


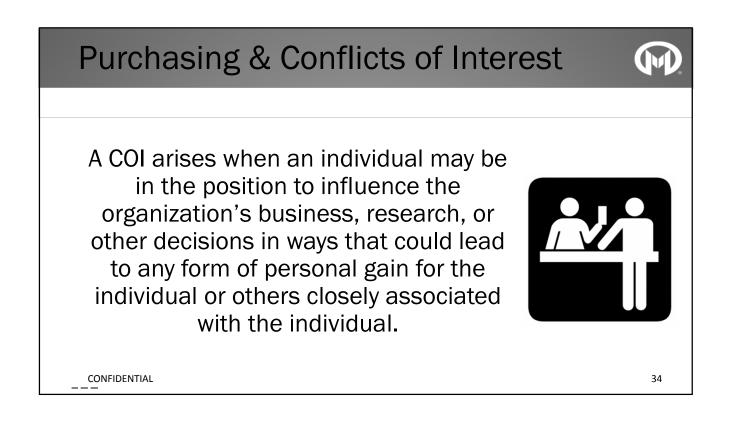










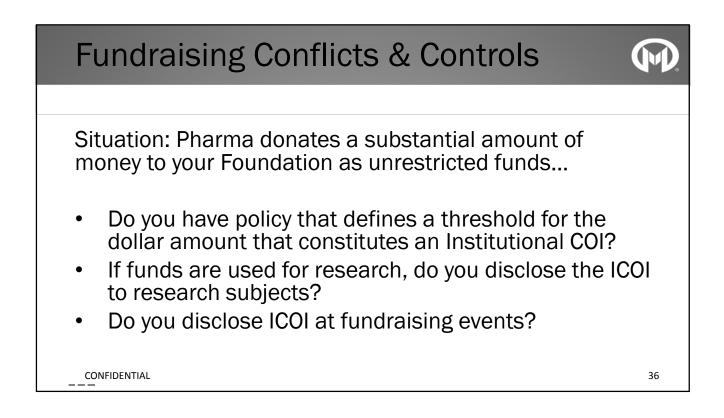


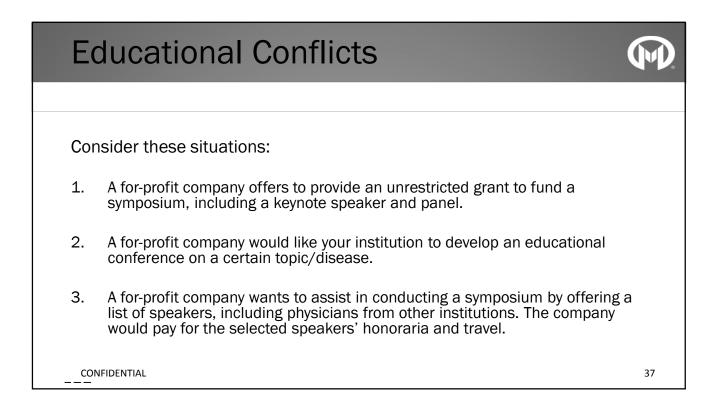
### **Purchasing Controls**

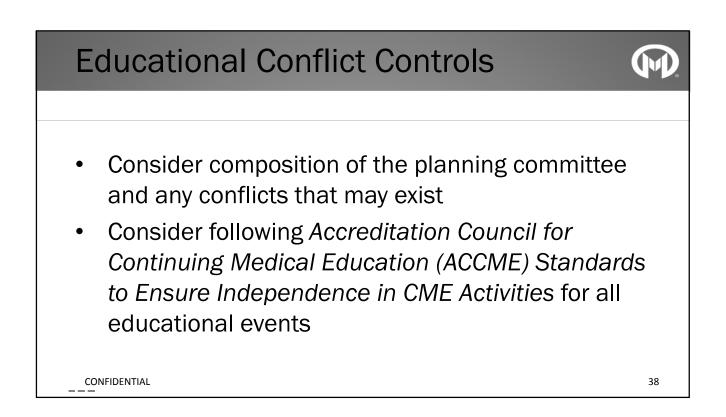


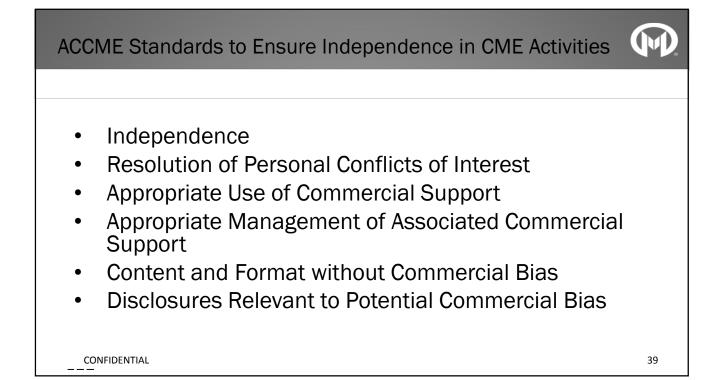
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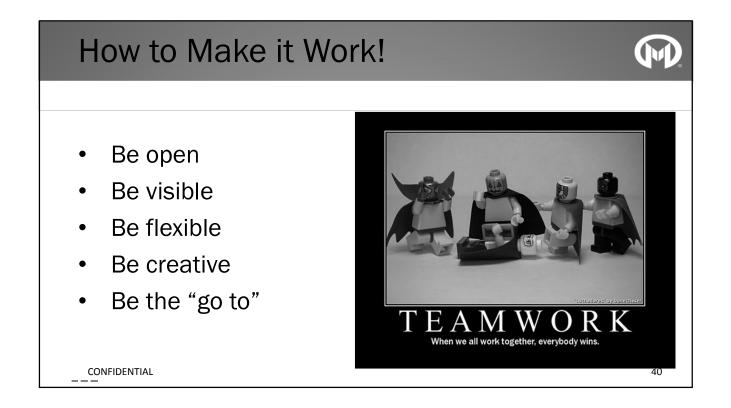
- Do you have policy that addresses COI for purchasing?
- Do you have state law that addresses this issue?
- Consider a disclosure process for all purchasing employees.
- Purchasing by employees from vendors with which they have a conflict should be avoided. If unavoidable, they should be managed:
  - Bid/RFP process
  - Secondary/Tertiary approval
  - Annual review of all purchases











### **Questions?**

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