



Innovation Management and Conflict of Interest Program

Policy I - Conflicts of Commitment

Target Group: Cleveland Clinic United States Locations		Original Date of Issue: September 6, 2006	Version 4
Approved by: Board of Directors	Date Last Approved/Reviewed: 5/25/2021	Prepared by: Cory Anand, J.D., Director, Conflict of Interest	Effective Date 5/25/2021
Avon Hospital: Board approval date: 5/25/2021 Effective Date: 5/25/2021		Euclid Hospital: Board approval date: 5/25/2021 Effective Date: 5/25/2021	
Fairview Hospital: Board approval date: 5/25/2021 Effective Date: 5/25/2021		Hillcrest Hospital: Board approval date: 5/25/2021 Effective Date: 5/25/2021	
Lutheran Hospital: Board approval date: 5/25/2021 Effective Date: 5/25/2021		Marymount Hospital: Board approval date: 5/25/2021 Effective Date: 5/25/2021	
Marymount Hospital: Board approval date: 5/25/2021 Effective Date: 5/25/2021		South Pointe Hospital: Board approval date: 5/25/2021 Effective Date: 5/25/2021	
CCCHR: MEC approval date: 5/25/2021 Board approval date: 5/25/2021 Effective Date: 5/25/2021		Weston Florida: MEC approval date: 5/25/2021 Board approval date: 5/25/2021 Effective Date: 5/25/2021	
Mercy: Board approval date: 11/17/2021 Effective Date: 5/9/2022		Coral Springs, FL ASC/FHC: MEC/CSOC approval date: 5/25/2021 Board approval date :5/25/2021 Effective Date: 5/25/2021	

Printed copies are for reference only. Please refer to the electronic copy for the latest version.

Purpose

To assure professional and commercial integrity in all matters, our Organization maintains a program that identifies and addresses conflicts of commitment for the Target Group members of the Professional [Staff, Residents, Fellows and Employees](#).

Policy Statement

Our Organization recognizes that Target Group members of the Professional [Staff](#) (“Staff”), Residents, Fellows and Employees periodically serve in external roles and in other activities that may or may not require the use of their professional competence*. Service in external activities can be beneficial to Target Group Staff, Residents, Fellows and Employees professionally, our Organization, its patients, and the public. These activities are generally permissible (subject to compliance with institutional policy) provided that the individual’s commitment to professional responsibilities at our Organization remains primary (or as defined in the conditions of employment) at all times. An overabundance of such external activities may conflict with a Target Group Staff member’s, Resident’s, Fellow’s or Employee’s responsibilities at our Organization.

Definitions

Target Group - herein defined as Cleveland Clinic United States locations- Includes the main campus, Avon, Euclid, Fairview, Hillcrest, Lutheran, Marymount, Medina, Mercy, South Pointe, Children’s Hospital for Rehabilitation, Weston Hospital, Coral Springs Ambulatory Surgery Center, Martin North Hospital, Martin South Hospital, Tradition Hospital , and all Family Health Centers, Physician practice sites, Nevada practice sites, Emergency Departments, Express Care Centers, Urgent Care Centers and Ambulatory Surgical Centers reporting to these facilities.

Policy Implementation

Conflicts of commitment that are not appropriate could occur, for example, in the following areas:

- **Disproportionate Compensation** – If [Honoraria or Consulting Compensation](#)* to a Target Group Staff member, Resident, Fellow or Employee from outside entities, in the aggregate, exceeds thresholds established from time to time by the IM&COI Program, a potential for a conflict of commitment exists.
- **Conflict of Time** – When the time commitments for external activities—related to professional competence or not—encroach upon a Target Group Staff member’s, Resident’s, Fellow’s or Employee’s ability to contribute at the level expected of others in similar positions, a potential for a conflict of time commitment exists.

For example, for Target Group Staff who spend the majority of their time performing research, activities involving [Honoraria and Consulting Compensation](#)* may not exceed 20% of that portion of a Target Group Staff member’s time that is allocated to research or development as approved by the Target Group Staff member’s department chair, except that vacation time may be used to exceed the 20% limit.

- **Conflict of Business or Mission** – Target Group Staff members may not engage in consulting or other external activities that compete or conflict with our Organization’s business activities or mission, and Target Group Staff, Residents, Fellows and Employees must not divulge our Organization’s proprietary information.*
- **Conflict of Resources/Intellectual Property** – Target Group Staff members, Residents, Fellows and Employees may not utilize CCE resources or share intellectual property developed or acquired during his/her appointment for the betterment of an external entity unless permitted by the applicable institutional policy.*

The IM&COI Program shall provide disclosed financial interest information to Department and Institute Chairs of Target Group Staff who shall monitor conflicts of commitment. The IM&COI Program, at its discretion, may notify the Chief of Staff or other supervisory personnel of circumstances that may be perceived as a conflict of commitment. For Target Group Employees, certain information may be provided to the Employee’s supervisor(s). Supervisors may be involved in the review and approval of relationships with [Non-Cleveland Clinic \(CC\) Entities](#).

* Target Group Staff members, Residents, Fellows and Employees are subject to the conflict of interest policies. Other policies particularly relevant to this policy are [Policy V, “Consulting”](#) and the [“Intellectual Property and Commercialization Policy,” where adopted](#). Whenever a member of the Target Professional Staff, Resident, Fellow or other Employee is invited to be a member of a board of directors or other governing board of a for-profit corporation or business, the IM&COI Program must grant approval of such an appointment in advance. Service on a Pharma Advisory Committee is not fiduciary service requiring these approvals, but such service, if compensated, does require pre-approval and compliance with [Policy V, “Consulting”](#).

Oversight and Responsibility

The Innovation Management and Conflict of Interest Program is responsible to review, revise, update, and operationalize this policy to maintain compliance with regulatory or other requirements.

It is the responsibility of each hospital, institute, department and discipline to implement the policy and to draft and operationalize related procedures to the policy if applicable.