Texas Tech University Health Sciences Center El Paso (TTUHSC EP) adopted a Conflict of Interest and Commitment Policy (HSCEP OP 10.05) that provides guidance related to conflict of interest and commitment matters.

All employees are expected to:

(i) abide by TTUHSC EP’s conflict of interest and commitment policies and standards,
(ii) fully and continually disclose professional and relevant personal activities and relationships that create a conflict of interest or commitment or have the appearance of creating a conflict of interest or commitment,
(iii) remedy conflicts of interest or commitment and/or comply with any management or monitoring plan prescribed by TTUHSC EP,
(iv) remain aware of the potential for conflicts of interest and commitment, and
(v) take initiative to manage, disclose, or resolve conflicts of interest or commitment as appropriate.

Employees of TTUHSC EP are entrusted with protecting the safety and welfare of the public’s trust. Potential conflicts of interest and commitment may occur throughout TTUHSC EP. It is the goal of TTUHSC EP to assist employees in identifying activities that present the potential for conflicts and assist in reducing or managing those conflicts.

A potential conflict of interest and commitment occurs when there is the possibility that an individual’s private or personal interests conflict with the individual’s official responsibilities and may influence the individual’s professional actions or judgments. While the existence of a conflict does not necessarily prohibit a proposed activity, it is important to identify and attempt to manage the conflict. However, some conflicts may be such that appropriate management is not possible.

**Authority**

Conflicts are reviewed by the Conflict of Interest and Commitment Committee (COICC) established by the TTUHSC EP President under HSCEP OP 10.05.

- The President appoints the Chair of the COICC.
- The President appoints the committee members.
- The COICC does not review research conflicts of interest (see HSCEP OP 73.09) or scientific misconduct allegations (see HSCEP OP 73.07).
Committee Membership

In accordance with HSCEP OP 10.05, committee members shall be appointed from relevant areas across TTUHSC EP, such as faculty, legal, finance, administration, or institutional compliance.

All members will be invited to serve for overlapping terms of up to three years, which may be renewable. A member may serve after the expiration of his or her term until a successor has been appointed.

Quorum

A quorum for the conduct of business by the Committee shall consist of a majority of the appointed members.

Purpose, Duties and Responsibilities of the COICC

Duties and responsibilities of the COICC are set forth in HSCEP OP 10.05, Article V, part B. In addition, the COICC:

- will make available training to each Committee member upon appointment to the COICC;
- receive disclosures and reported conflict information;
- may advise, consult with, and make management plan recommendations to the TTUHSC EP’s leadership team whose faculty or staff disclose potential activities that may present a conflict of interest or commitment to be reviewed;
- as necessary, utilize sub-committees, ad hoc working groups to advise effectively;
- may identify and appoint at least one member with specialized knowledge in any area under review by the Committee, and
- member shall recuse him or herself from voting if he/she has a conflict (e.g., departmental oversight, direct involvement in a matter) with the matter being reviewed by the COICC. However, the Committee member with a conflict may provide objective information upon request from the COICC.

Duties and Responsibilities of Committee Chair

The Chair shall:

- send notice of all meetings to all committee members and others as appropriate;
- maintain all Committee minutes, reports and other documents,
• communicate with TTUHSC EP administrators regarding conflicts reviewed and determinations.

Meetings:

The Committee shall meet at least once per quarter to establish conflict of interest and commitment disclosures and management processes.

The Committee shall then meet at least twice a year or as needed based on a reported or known conflict.

Minutes and Reports

After each meeting, minutes shall be prepared which shall contain, at a minimum, a list of members who attended and their affiliations and a summary of the Committee's deliberations, activities and recommendations.

The Committee may prepare additional reports as it may determine appropriate.

Minutes of meetings and all other Committee documents shall be maintained and labeled as "Confidential Medical Committee" documents.

Effective: 03/21/2016
Reviewed/Revised: 04/19/2022