

# NYU LANGONE MEDICAL CENTER

## POLICY ON FACULTY CONSULTING

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### I. Applicability

This Policy applies to all faculty members of the Medical Center (“Faculty Members”).

### II. General Policy

A Faculty Member may use his or her professional competence to engage in consulting and other external activities as long as the consulting activities comply with this Policy. Consulting and other external activities must not undermine the Faculty Member’s primary professional commitment of time and intellectual energies to the Medical Center’s teaching, research and clinical programs. Certain consulting and other external activities need to be disclosed and approved by the Medical Center.

### III. Disclosure

A. General. As required under the Medical Center’s *Policy on Conflicts of Interest in Business Affairs*, a Faculty Member shall disclose in the annual disclosure form all outside activities involving his or her professional competence and shall certify compliance with the Medical Center’s *Policies on Conflicts of Interest, Commitment and Consulting*. Such disclosure shall include all consulting activities, including the entity(ies) for which consulting activities are to be performed and the nature, scope, duration and compensation for such activities. Disclosure submissions are required upon appointment, upon request of the Office of Compliance, and annually thereafter. A Faculty Member must also disclose specific situations giving rise to a potential conflict between their personal interests and their Medical Center responsibilities. The Medical Center’s procedures for the review and evaluation of such disclosures are set forth in the *Policy on Conflicts of Interest in Business Affairs*.

B. Research and Sponsored Programs. In the event a Faculty Member participates in research or sponsored programs, the Faculty Member must submit an investigator financial interest disclosure form as provided in the Medical Center's *Policy on Conflicts of Interest in Research and Sponsored Programs*. The Medical Center's procedures for the review and evaluation of such disclosures are set forth therein.

C. Confidentiality. All disclosures will be kept confidential and disclosed only on a need-to-know basis as required to perform the reviews and evaluations required by this Policy and the *Policies on Conflicts of Interest, Commitment and Consulting*.

#### IV. Review and Evaluation

A. Under the Medical Center's *Policy on Faculty Conflicts of Commitment*, the Office of Compliance is responsible for collecting each disclosure received from Faculty Members.

B. In cases where the Office of Compliance believes that a potential conflict of commitment exists, the Office of Compliance will submit the matter to the Faculty Member's Department Chair and to the Senior Vice President and Vice Dean for Faculty, Education and Academic Affairs of the Medical Center.

C. A conflict of commitment may exist whenever a Faculty Member discloses an outside position such as a director, trustee, partner, senior executive, officer or employee or discloses receipt in the last year or expectations to receipts in the next year consulting compensation (i.e., consulting fees, honoraria, lecture fees, other emoluments, stock, stock options, royalties or "in-kind" compensation directly or indirectly) in excess of \$50,000 from any individual entity or in excess of an aggregate of \$100,000 from all outside entities. Prior to such submission, the Office of Compliance will request the Faculty Member to certify that the external activity(ies) or interest(s) are consistent with this Policy, including specifically that the activities do not exceed an average of one day per seven-day week (or the equivalent of an eight-hour work day) as contemplated below.

D. The Vice Dean for Faculty, Education and Academic Affairs, in conference with the Faculty Member's Department Chair, is responsible for reviewing and evaluating each potential conflict of commitment involving a Faculty Member submitted by the Office of Compliance. The Vice Dean for Faculty, Education and Academic Affairs may refer matters under this Policy to the Business Conflict of Interest Committee (BCOIC) or to individual members of the BCOIC for an advisory opinion.

E. Except where the Policy explicitly provides for review by the Provost of NYU or the Senior Vice President for Health of NYU, decisions of the Vice Dean for Faculty, Education and Academic Affairs are final.

#### V. Conflicts of Interest and Commitment

A Faculty Member's participation in outside consulting must be consistent with the Faculty Member's obligations under the *Policy on Conflicts of Interest in Business Affairs* and the *Policy on Faculty Conflicts of Commitment*. Accordingly, all full-time Faculty Members who engage in outside consulting activities have subject to the following:

A. Faculty Members have a primary obligation to serve the purposes to which the Medical Center is dedicated. As part of this obligation, each Faculty Member has a duty to organize his or her personal interests or activities to avoid the appearance that such personal interests or activities are influencing his or her ability to promote objectively the best interests of the Medical Center.

B. Full-time Faculty Members are permitted to spend no more than an average of one day per seven-day week (or the equivalent of an eight-hour work day) on outside consulting activities during any semester, or summer month, in which they are receiving full-time compensation from the Medical Center.

C. Faculty Members are ordinarily not permitted to hold an executive or managerial position in a public or private organization. Any exceptions require prior written permission from the Department Chair, Vice Dean for Faculty, Education and Academic Affairs and from the Provost of NYU or the Senior Vice President for Health of NYU.

## VI. Use of NYU and Medical Center Resources

Faculty Members may not use any NYU or Medical Center resources, including facilities, personnel, or equipment, except in a purely incidental way, as part of or in connection with their outside consulting activities. In particular, Faculty Members may not use NYU and Medical Center students, staff or postdoctoral scholars in any tasks that relate to the Faculty Member's consulting activities or for potential or real financial gain, without full disclosure and approval.

Inappropriate uses of NYU and Medical Center resources by Faculty Members also include, but are not limited to, the following:

- (a) Any use of NYU or Medical Center funding as part of or in connection with their consulting activities;
- (b) Any use of NYU or Medical Center confidential information (including all information acquired through conduct of NYU or Medical Center business or research activities) as part of or in connection with their consulting activities;
- (c) Any use of the NYU or Medical Center name, or any NYU or Medical Center mark, symbol or logo as part of or in connection with their consulting activities;
- (d) Granting an outside entity access to other NYU or Medical Center resources including research results, materials or products generated from NYU or Medical Center teaching, research or clinical activities; and
- (e) Offering inappropriate inducements to outside entities in an attempt to unduly influence them in their dealings with NYU or the Medical Center.

## VII. Intellectual Property Obligations

Prior to beginning any outside consulting activity, a Faculty Member shall inform the party for whom the consulting activities are to be performed of the *NYU Statement of Policy on Intellectual Property*, this Policy and the *Policies on Conflicts of Interest, Commitment and Consulting*, and the Faculty Member's obligations under such policies. It is strongly encouraged that consulting agreements between the Faculty Member and the party for whom consulting activities are to be performed recognize NYU's rights and priority under such policies to the extent they apply. In the event a Faculty Member has questions regarding the intellectual property provisions of a consulting agreement, the Faculty Member should address the question to the Office of Industrial Liaison.

VIII. **Conflicts of Interest in Research and Sponsored Programs**

Faculty Members may not either (a) receive funds for Medical Center research from a party for whom the consulting activities are being performed or (b) engage in consulting activities for a party from whom funds are to be received for the Faculty Member's research, without prior disclosure, review and approval as required by the *Policy on Conflicts of Interest in Research and Sponsored Programs*.

IX. **No Liability Protection Afforded by NYU or the Medical Center**

Faculty Members must understand that risk and liability for injuries arising out of the Faculty Member's outside consulting is personal to the Faculty Member and does not accrue to NYU or the Medical Center. When entering into arrangements to engage in activities outside the scope of his or her employment, Faculty Members are encouraged to use personal legal counsel to ensure their own protection and compliance with applicable laws.

X. **Enforcement**

Violations of this Policy are subject to disciplinary action, up to and including termination of employment or association with the Medical Center, in accordance with the Medical Center disciplinary policies and procedures applicable to the respective Faculty Member.

XI. **Questions**

Any questions relating to this Policy should be directed to the Office of Legal Counsel or the Office of Compliance.

XII. **Additional Policies**

This Policy is intended to supplement, but not replace, other policies and guidelines applicable to the Faculty Member, including the conflict policies set forth in the NYU Faculty Handbook and elsewhere in the *Policies on Conflicts of Interest, Commitment and Consulting*.