

# First Exposure Conflict of Interest Form

## 1. Conflict of Interest (COI) Policy

### 1.1 Introduction

To minimize the influence of conflicts of interest (COI) within First Exposure and all its research activities, it is crucial to uphold standards that are rigorous and transparent with regards to the scientific approaches used, and the reporting and sharing of research findings.

### 1.2 Disclosure of COI

Members may be required to complete any of the COI disclosures listed below based on their activity within the network:

- **Annual declaration:** Mandatory for all query research teams and members of the governance structure. All other members are encouraged to complete an annual declaration, but not required until they become actively involved in a research project, governance or any working groups.
- **Ad-hoc declaration:** Members must update their declarations if their COI changes (i.e., at the onset and during a research project engagement).

### 1.3 Management of COI

All COI forms are completed using the web-based form. Upon submission of the form, the First Exposure Executive Committee may take the following action:

1. Allow participation, but with a COI management plan in place with periodic check-ins, or
2. Withdraw participation from an engagement.

The Executive Committee may launch an investigation into a member suspected of withholding COI information or failing to adhere to a COI management plan. If the member is found to be in contempt, the Executive Committee may: (1) Prohibit future participation in a particular committee (2) Prohibit future participation in First Exposure. Members can exercise their right to appeal the results of an investigation.

## 1.4 Read the full COI Disclosure Policy

### Box 1. Nature of Conflicts

1. A **real COI** arises when a member has a bias, or a personal, occupational, professional or financial relationship(s) or interests that may affect or compromise or appear to affect or compromise their work with First Exposure.
2. A **potential COI** arises when a member does not currently have a real COI but can foresee that their private, personal, or professional relationship(s) or interests may have the potential to influence their work with First Exposure in the future.
3. A **perceived (or apparent) COI** may exist when a well-informed person believes that a First Exposure member has a real or potential COI even though there may or not be a real or a potential conflict.

## 1.5 Contact

If you have any questions about our COI policy, please email First Exposure at [info@firstexposure.ca](mailto:info@firstexposure.ca).

## 2. COI Disclosure Form

### 2.1 Contact Information

Fields marked with \* are required.

**Prefix (e.g., Ms., Mr., Dr.)**

**First Name \***

**Last Name \***

**Email \***

*(So that we may contact you if we need to clarify your form further or follow up.)*

**Confirm Email \***

**Primary Institutional Affiliation \***

*(Please enter Patient or Public if you are a patient or member of the public and are not affiliated with an institution.)*

**Your Role/Position**

### 2.2 COI Declaration

I understand that I am obliged to declare all real, potential or perceived conflict(s) of interest as outlined in the COI Disclosure Policy. I have reviewed the current and past activities (within the last 5 years) of myself, my spouse and immediate family for potential conflict(s) of interest that would compromise my work with First Exposure.

**Please indicate the type of COI declaration you are making. \***

Annual Declaration

Ad-Hoc Declaration

**How to determine COI**

COI can be determined using the reflective questions that are provided by CIHR guidance on the Ethics Guidance for Developing Partnerships with Patients and Researchers found here: <https://cihr-irsc.gc.ca/e/51910.html#4.2.2>

Questions for all First Exposure team members to consider:

- “Do I have personal, business, or other relationships that could conflict [or be perceived to conflict] with my role in the program, and prevent me from acting in its best interests? Have I disclosed these relationships to others involved in the program and, where appropriate, to others in my program? How can I rearrange my involvement in the program to avoid such conflicts?”
- “Does the research team, institution, funding organization, or my community have policies and processes to help me identify and manage actual and potential conflicts?”

For First Exposure subject matter experts, researchers, institutions, and funders:

- “Do we have fair and transparent policies and processes to manage and minimize conflicts of interest and commitments? Do these policies recognize that team members are multi-dimensional and wear many “hats” (as research team members, community advisors, priority setters, etc.) and bring other interests, skills, and affiliations to their role(s)?”
- “If we are considering friends, neighbours, and family members as “patient representatives”, will they be independent? Will their personal relationships present a conflict of interest that cannot be managed effectively or inhibit their participation in research?”
- “Have we consulted with our patient partners on how their commitments and interests are likely to be viewed by other patient partners in the research?”

**Please indicate your conflict(s) of interest status. \***

I have reviewed the current and past activities (within the last 5 years) of myself, my spouse and immediate family for any real, potential, or perceived conflict(s) of interest that would compromise my work with First Exposure and declare the following.

I have no conflict(s) of interest to declare.

I have conflict(s) of interest to declare.

**Conflicts to Declare \***

To report all sources of COI, please fill Table A (Sources of COI) at the end of this document and submit together with the First Exposure Conflict of Interest Form.

**2.3 Final Declaration \*****Please check the following: \***

1. I hereby certify that I have disclosed all relevant information that may place me in a real or perceived conflict of interest. Except as disclosed above, I declare that I have no conflict of interest to report, as defined in the First Exposure COI Disclosure Policy.
2. I also agree to inform First Exposure of any changes in circumstances that may create a conflict of interest, as soon as it is known to me.

**Signature**

*(Please type your name)*

**Date**

*(YYYY-MM-DD)*

**CONFIDENTIALITY**

Information gathered in this Disclosure Form shall be considered part of our institutional record. First Exposure may make a summary of all COI declarations and any applicable management plans publicly available, such as by posting on our public website if deemed necessary for good governance.

Original Conflict of Interest Form from SPOR Evidence Alliance.

<https://sporevidencealliance.ca/about/policies-procedures/conflicts-of-interest-declaration/>

## Table A – Sources of COI

I would like to highlight the following activities and interests:

Type of COI	Activities and Interests	Year	Name all entities with whom you have this relationship or indicate none	Financial Value/Benefit (if applicable)
Financial	<ul style="list-style-type: none"> <li>• Previous, current or potential grants and research funding</li> <li>• Payments/Gifts/Gratuities/ Honoraria</li> <li>• Investments in business, securities or stocks</li> <li>• Payments as an advisor, consultant, guest speaker, teaching webinars/seminars or chairmanship</li> <li>• Travel/meeting/conference expense sponsorship</li> <li>• Personal education funding</li> <li>• Other</li> </ul>			
Intellectual	<ul style="list-style-type: none"> <li>• Public statements</li> <li>• Publications and presentations</li> <li>• Testimonials</li> <li>• Other</li> </ul>			
Personal	<ul style="list-style-type: none"> <li>• Affiliations, membership or association with specific groups or organizations</li> <li>• Access to confidential information</li> </ul>			

	<ul style="list-style-type: none"> <li>• Lobbying activities</li> <li>• Advocacy, volunteering and consulting activities</li> <li>• Pending contract negotiations</li> <li>• Kinships, friendships, or relationships</li> <li>• Financial opportunities</li> <li>• Other</li> </ul>			
Other	Please specify			