



ANZBMS CONFLICT OF INTEREST POLICY TABLE¹

Approved by ANZBMS Council October 2022

This chart summarises the Australian and New Zealand Bone and Mineral Society (ANZBMS) conflict of interest policy. For more detail, please refer to the full ANZBMS Conflict of Interest Policy: <https://www.anzbms.org.au/policy.asp>

A **Conflict of Interest** (COI) occurs when a person's personal interests conflict with their responsibility to act in the best interests of the ANZBMS. A conflict of interest may be actual, potential, or perceived, and may be financial or non-financial. It may also include **conflicts of commitment** (or duality of interest) between a member's duty to ANZBMS and another duty that the member has (for example, to another Society).

- **In every instance** in which ANZBMS Leaders, as defined below, have a conflict or duality of interest, they are required to declare the conflict to the ANZBMS group within which they are working.
- Some circumstances pose a conflict that may only be resolved by the Leader withdrawing completely from the particular activity or situation.
- Other conflicts can be resolved by the Leader declaring the conflict and recusing themselves from the balance of the discussion and from voting on or deciding the matter.

For all situations in which the Leader has concerns about conflicts identified in the chart, the Leader is advised to consult with Council. The President, Hon Secretary and Immediate Past President will act as an advisory sub-committee to consider the conflict. If any one of the ANZBMS Executive is also conflicted, the President-Elect will stand-in for that member.

GLOSSARY

Musculoskeletal (MSK)-Related Corporate Entity = A company with commercial interests that are within the scope of ANZBMS's mission, (e.g., pharmaceutical, medical device, or otherwise related to bone, mineral and musculoskeletal diagnostics and therapeutics)

CPC & TC = Clinical Practice Committee and Therapeutics Committee

POC = Program Organising Committee

1. Adapted with permission from ASBMR Conflict of Interest Chart: <https://www.asbmr.org/About/PoliciesProcedures-Detail/ethics-policy-guidelines-leadership-of-asbmr>



AM I <u>REQUIRED</u> AS AN ANZBMS LEADER?	President	Officers	Councillors	Committee Chairs	Committee Members	Representatives to Other Organisations
A. <u>Conflict Situations</u> To disclose to the group(s) with which I am working (e.g., Council, Committee) every instance in which I have a conflict and, as determined by the group, to recuse myself from the activity, discussion, and/or decision?	YES	YES	YES	YES	YES	YES
B. <u>PERMISSIBLE ACTIVITIES AND RELATIONSHIPS WITH MUSCULOSKELETAL-RELATED CORPORATE ENTITIES</u>						
AM I <u>PERMITTED</u> AS AN ANZBMS LEADER?	President	Officers	Councillors	Committee Chairs	Committee Members	Representatives to Other Organisations
1. To serve as an investigator in corporate-supported clinical trials and/or basic research.	YES	YES	YES	YES	YES	YES
2. To serve on data safety monitoring boards.	YES	YES	YES	YES	YES	YES
3. To serve on corporate advisory boards.	YES	YES	YES	YES	YES	YES
4. To use my ANZBMS status to promote corporate entities.	NO	NO	NO	NO	NO	NO
5. To take ANZBMS-related actions that affect the value of a corporate entity in which I have a financial interest.	NO	NO	NO	NO	NO	NO



B. <u>PERMISSIBLE ACTIVITIES and RELATIONSHIPS MUSCULOSKELETAL-RELATED CORPORATE ENTITIES</u> (Continued)						
AM I <u>PERMITTED</u> AS AN ANZBMS LEADER?	President	Officers	Councillors	Committee Chairs	Committee Members	Representatives to Other Organisations
6. To use, or allow others to use, my name and ANZBMS status, to endorse or support corporate interests.	NO	NO	NO	NO	NO	NO
7. To identify my ANZBMS position when primarily representing my university, laboratory, research group, other affiliation, or self to the media, press, government, corporate entities, NHMRC or other funding agency. If your ANZBMS Leadership position is identified in this type of setting, you are expected to make it clear that you are not representing the views, or speaking on behalf, of ANZBMS ² .	NO	NO	NO	NO	NO	NO
8. To testify before or submit presentations to Federal or other State or international agencies on behalf of <i>MSK-Related Corporate Entities</i> .	NO	NO	NO	YES¹	YES¹	YES
9. To serve as chair of a corporate advisory board for an <i>MSK-Related Corporate Entity</i>	NO	NO	NO	YES¹	YES	YES

1. Except for Chairs of CPC, TC and POC
2. Refer to the Policy Guideline below for example disclaimer statements (pp 7)

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<u>C. RELATIONSHIPS WITH OTHER ORGANISATIONS</u>						
AM I <u>PERMITTED</u> AS AN ANZBMS LEADER?	President	Officers	Councillors	Committee Chairs	Committee Members	Representatives to Other
10. To have a conflicting duty to another organisation and not resolve it.	NO	NO	NO	NO	NO	NO
11. To be an officer or director in another organization that: (a) has a mission that overlaps with ANZBMS; and (b) may be in competition with ANZBMS for financial resources (n.b. Excludes IFMRS as a Federation of Societies).	YES³	YES³	YES³	YES³	YES	YES
<u>D. SPEAKING ENGAGEMENTS FINANCIALLY SUPPORTED BY MSK-RELATED CORPORATE ENTITIES</u>						
12. To receive speaker fees, honoraria or expense reimbursement directly from an <i>MSK-Related Corporate Entity</i> to give internal presentations to companies.	YES	YES	YES	YES	YES	YES
13. To speak at symposia or programs sponsored by Corporate Entities at the ANZBMS Annual Meeting. The Leader must state explicitly that they are not acting as a representative of ANZBMS, and that their statements are not being made on behalf of ANZBMS. (see example disclaimer statements pp 7)	YES³	YES³	YES³	YES¹	YES³	YES

1. Except for Chairs of CPC, TC and POC

3. To be declared according to the guideline in Section A and Section B.7

<u>D. SPEAKING ENGAGEMENTS FINANCIALLY SUPPORTED BY MSK-RELATED CORPORATE ENTITIES (Cont)</u>						
AM I <u>PERMITTED</u> AS AN ANZBMS LEADER?	President	Officers	Councillors	Committee Chairs	Committee Members	Representatives to Other Organisations
14. To receive speaker fees, honoraria or expense reimbursement directly from a <i>MSK-Related Corporate Entity</i> to speak at commercially supported meetings. ANZBMS Leaders may also receive indirect payment that goes to the Leader’s institution or the organisation hosting the event (e.g., hospital, university, society, CME company), and then to the Leader for such speaking engagements.	YES^{3,4}	YES^{3,4}	YES^{3,4}	YES^{3,4}	YES^{3,4}	YES
15. To receive speaker fees, honoraria or expense reimbursement directly from a <i>MSK-Related Corporate Entity</i> for speaking to clinicians or patients on issues within the scope of the ANZBMS Mission. ANZBMS Leaders may also receive indirect payment that goes to the Leader’s institution or the organisation hosting the event (e.g., hospital, university, society, CME company), and then to the Leader for such speaking engagements.	YES^{3,4}	YES^{3,4}	YES^{3,4}	YES^{3,4}	YES^{3,4}	YES

3. To be declared according to the guideline in Section A and Section B.7

4. The Leader must state explicitly that they are not acting as a representative of ANZBMS, and that their statements are not being made on behalf of ANZBMS (see examples pp 7).

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<u>E. FINANCIAL, INVESTMENT, AND BUSINESS INTERESTS</u>						
AM I <u>REQUIRED</u> AS AN ANZBMS LEADER?	President	Officers	Councillors	Committee Chairs	Committee Members	Representatives to Other Organisations
16. To register on the ANZBMS Register of Interests any financial, investment or business interests in any <i>MSK-Related Corporate Entity</i> by ANZBMS Leaders or their immediate family. Officers with this conflict should seek guidance from Council to manage the conflict.	YES	YES	YES	YES	YES	YES
17. To register any gifts, benefits or other hospitality (including goods, property, money, travel, entertainment or services) > \$100.00 in value on the ANZBMS Register of Gifts? Relates to benefits received because of ANZBMS service (including from <i>MSK-Related Corporate Entities</i>) in the prior 12 months.	YES	YES	YES	YES	YES	YES
18. To declare to Council or committees any service as an expert witness or consultant on a legal case within the scope of the ANZBMS mission, particularly product liability cases. ANZBMS Leaders with this conflict can seek guidance from Council to manage the conflict.	YES⁵	YES⁵	YES⁵	YES⁵	YES⁵	YES
19. To register ownership by me, or my <i>immediate family</i> (spouse and dependent children) of a corporate entity providing direct service (e.g., consulting, IT) to ANZBMS (Register of Interests).	YES	YES	YES	YES	YES	YES

5. To be declared according to the guideline in Section A and Section B.7

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POLICY GUIDELINES AND RATIONALE **(Refer to Conflicts 1-19 above)**

CONFLICT 7: IDENTIFYING MY ANZBMS POSITION:

ANZBMS leaders should not identify their ANZBMS leadership status when PRIMARILY representing other groups or organisations. This includes identification as part of their email signature footers or in their regular communications, such as on letterhead, except where Leaders are specifically communicating in their leadership capacity on behalf of ANZBMS. The concern is that allowing the use of the ANZBMS name in regular communications links ANZBMS to the content within, even if unintended. That is, it may conflict with an actual position of ANZBMS or concern a matter on which ANZBMS had not taken a position.

Example disclaimer statements:

1. The opinions expressed in this presentation are those of the presenter and do not reflect the view of the Australian and New Zealand Bone and Mineral Society.
2. This presentation was prepared by [insert name] in his/her personal capacity and the opinions expressed are their own. The presenter does not represent the views, or speak on behalf, of the Australian and New Zealand Bone and Mineral Society.

CONFLICT 8: TESTIFYING:

ANZBMS Officers and Councillors should avoid showing direct alignment with a MSK-Related Corporate Entity. Other than Chairs of the Clinical Practice, Therapeutics Committee and Program Organising Committee and their members, Committee Chairs and Members are permitted to testify, but should advise Council and register the conflict-of-interest.

CONFLICT 11: OFFICER FOR ANOTHER ENTITY:

Leaders who attend Council (including Officers, Councillors and Committee Chairs) are privy to, and participate in, ANZBMS strategic planning. It is therefore important to declare a conflict-of-interest where ANZBMS Officers and Councillors and Committee Chairs serve as officers or directors in organisations that pursue missions that overlap with, and compete for resources against, ANZBMS. The application of this guideline is not with regard to regional/local organisations or small focused meetings, but to larger international organisations (e.g. ECTS, IOF, ASBMR).

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CONFLICT 12: CORPORATE-SPONSORED SPEAKING ENGAGEMENTS AT THE ANNUAL MEETING:

When speakers are selected by a Corporate Entity, it portrays the speaker as having an actual or perceived alignment with the Corporate Entity. This would not be the case when the Corporate Entity does not select the speaker.

GUIDANCE FOR CONFLICTS 16 AND 17: OWNERSHIP OF, OR RECEIPT OF PAYMENTS FROM, MSK-RELATED ENTITY/ STOCK

If ANZBMS Leaders have concerns regarding Conflict 16 or 17, they should register the conflict and seek advice from Council. The Council sub-Committee will determine how the conflict will be managed. For those in more senior ANZBMS Leadership positions and those who have a specific role or more opportunity to develop positions that relate to patient care, the conflict is regarded more strictly.

Conflicts 16 and 17 raise four related concerns: (1) how much influence or ability does the conflicted ANZBMS leader have over the decision being made; (2) what amount or value does the ANZBMS Leader have in the company; (3) to what extent does the conflict present an opportunity for a benefit that would influence the conduct of the ANZBMS Leader; and, (4) is the conflict more acute when one receives value directly (e.g., in cash) versus indirectly (e.g., owning stock in the entity).

These two Conflict situations apply to Officers and Councillors, and Chairs and Members of the Clinical Practice, Therapeutics and Program Organising Committees because those Leaders are in positions to individually determine ANZBMS actions, or to significantly influence ANZBMS decisions. This could give the appearance that corporate entities influence ANZBMS decision making. They do not apply to the other non-clinical Chairs and Committee Members.

The factors to apply when assessing Conflict 16 and 17 situations are as follows:

(1) Ability to Influence an ANZBMS Decision. Conflicts 16 and 17 originate from COI guidelines published by NHMRC¹. Those rules focus on the extent to which the person with a pecuniary (Financial) interest is responsible for the conduct of, or in a position to determine or influence, funded research. Applied here, these restrictions are intended to focus on the extent to which an ANZBMS Leader is responsible for the conduct of, or in a position to determine or influence, a particular activity or decision.

¹ NHMRC. *Australian Code for the Responsible Conduct of Research*, Australian Govt. 2018



Individuals who serve as a non-clinical Committee Chair, or member are not able to significantly influence the conduct or outcome of a decision where they are serving. In accordance with the COI Policy, they would still declare a conflict where it exists (e.g. “my daughter is employed by a particular MSK-related company,” or “I have \$5,000 in stock on a MSK-related company”) but their receipt or holding of such value would be considered a low-level conflict.

In contrast, the ANZBMS President, Officers, Councillors, Program Organising Committee members, Clinical Practice and Therapeutic Committee members, have considerable responsibility and influence over the decisions in which they participate. Accordingly, any financial, investment or business interests in any *MSK-Related Corporate Entity* on the ANZBMS represents a high-level conflict of interest. The conflict must be registered in the Register of Interests, and the Officer must seek advice from Council to manage the conflict.

(2) Ownership Value Versus Receipt of Direct Payments. The direct receipt of value (cash payments) is viewed as a greater concern than the indirect value (stock ownership). ANZBMS Leaders and Council should view such conflicts more strictly when funds are received directly. Such receipt of funds must be registered in the Register of Gifts and Benefits, and the Officer must seek advice from Council to manage the conflict.

(3) Financial Extent of the Conflict. The value owned or received (\$5,000 vs. \$500,000) is a relevant factor when assessing a conflict-of-interest. Greater value creates a greater benefit and potentially more influence over an action or a decision. Moreover, it can create an unwanted and unacceptable appearance that a senior ANZBMS leader in a position of influence is inclined to favour (or disfavour) a certain MSK-related company.

(4) Potential Benefit to the ANZBMS Leader. The potential benefit to the Leader is relevant. The value of the situation to the ANZBMS Leader could be so minimal or attenuated that it reduces its potential impact on decision-making.

For example, a financial interest pertaining to a small MSK-related company that has no anticipated or potential role in ANZBMS activities (and whose competitors also do not), represents a minimal risk of impact on the Leader’s decision-making.

Similarly, an ANZBMS Leader with a dependent child who is a paid employee of a MSK-related Pharma warehouse would fall within Conflict 16. Council could consider that situation a low-level conflict-of-interest because nothing that Leader can do will have any real influence in benefitting the Leader’s dependant. In such a situation, Council could require the ANZBMS Leader to register the conflict and seek advice from Council to manage the conflict.



CONFLICT 18: EXPERT WITNESSES:

Consulting or testifying on product liability cases that relate to products within the scope of the ANZBMS mission or patent cases involving drugs used to treat common diseases in the ANZBMS mission are considered high-level conflicts that must be managed. ANZBMS Leaders serving as expert consultants or witnesses in patent or medical malpractice cases unrelated to the ANZBMS mission would be considered low-level conflicts. For example, testifying about non-clinical patents, such as tests or machines, or basic science applications, or concerning medical malpractice cases unrelated to diseases in the ANZBMS mission represents low-level conflict. Similarly consulting or testifying about the approach to rare bone diseases, even though they are related to the ANZBMS mission, is a low-level conflict because there are relatively few scientists with this expertise and rare bone diseases affect relatively few people, compared to more common diseases within the ANZBMS mission, such as osteoporosis and hyperparathyroidism.