

Arthritis Society Reviewer Agreement: Confidentiality/Conflicts of Interest

As a reviewer on behalf of the Arthritis Society, I fully understand that in the performance of my responsibilities, certain types of Confidential Information shall be disclosed to me. In consideration of my appointment as a reviewer, I hereby agree as follows:

1. All applicant-supplied materials and information, whether supplied directly by the applicant(s), or by the Arthritis Society on behalf of the applicant(s), and whether disclosed in written, graphic, photographic, recorded, projected or verbal form, shall be regarded as "Confidential Information". This includes information submitted as part of a grant or award application, and information exchanged as part of a site review.
2. I shall not disclose such Confidential Information, nor any part thereof, to any third party, nor shall I use such Confidential Information for my own personal gain or benefit. In cases where I feel it necessary to solicit another reviewer's opinion to effect a thorough review, I will first seek authorization from the Arthritis Society where possible, but in any case, I will ensure that any and all such parties first agree to be signatories to this Agreement before any Confidential Information shall be disclosed.
3. Confidential Information shall not be reproduced in any form.
4. The foregoing provisions of confidentiality shall not apply to Confidential Information which:
 - a) is now, or which hereafter, through no act or failure to act on my part, becomes generally known or available to the public without breach of this Agreement,
 - b) is known to me at the time of disclosure of such Confidential Information, provided that I can satisfactorily demonstrate such prior knowledge and that such knowledge was not gained from any third parties through a breach of secrecy,
 - c) is hereafter furnished to me in good faith by a third party without breach by that third party either directly or indirectly of an obligation of confidentiality to either the Arthritis Society or to individual applicant(s),
 - d) is disclosed to a third party with the express written approval of the applicant(s).
5. Unless otherwise specifically authorized by the Arthritis Society, all information pertaining to the deliberations, discussions and outcomes of grant, award or site reviews shall also be deemed to be Confidential Information. This includes any knowledge of scores, ranks, categorization of applications/applicants and specific recommendations as may be made from time to time by grant, award or site review panels.
6. Following the review process, all Confidential Information in my possession will be returned to the Arthritis Society or disposed of in a secure manner.
7. All enquiries received by peer reviewers or observers about an application or its review must be referred to the Arthritis Society. Peer reviewers or observers must not contact the applicants for additional information or disclose matters arising from the review process to the applicants.

Conflicts of Interest:

I understand that the Arthritis Society considers that a conflict of interest exists when my personal or financial interests affect, or may be perceived to affect, my objectivity. Possible conflicts of interest include, but are not limited to the following, where:

- a) the applicant(s) and I are members in the same academic department or research institution;
- b) the applicant(s) and I have had a research collaboration or co-authorship within the past three years, or proposed in the immediate future;
- c) the applicant(s) and I have had a professional association as a student, postdoctoral fellow or supervisor in the past three years;
- d) the applicant(s) and I are known to be direct competitors, or known to have strongly conflicting professional or scientific views;
- e) I have or have had a close personal or business relationship with the applicant(s), or
- f) Feel for any reason unable to provide an impartial review of the application.

As a reviewer on behalf of the Arthritis Society, I will avoid all real or apparent conflicts by absenting myself from evaluations of such applications. I will consider potential conflicts with not only the principal applicant, but with all named co-applicants as well. In the event that a conflict of interest is discovered or recognized, I will make immediate full disclosure of the nature and scope of this conflict to the Arthritis Society.

(If after receiving the application(s) for review you have any questions about whether a particular application poses a conflict of interest, please contact the Arthritis Society office immediately.)

I, the undersigned, have read and understood the provisions regarding Confidentiality and Conflicts of Interest as described herein and take personal responsibility for complying with these requirements.

Name (Print)	Signature	Panel	Date
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Please return by email to: research@arthritis.ca