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Please note, the information contained in the Handbook may change from time to time by action of appropriate segments of the University. The Provost's Office is responsible for keeping current information of the Handbook online.

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# FACULTY HANDBOOK

## The University of Oklahoma Health Sciences Center

### September 2017

Approved by the OU Board of Regents, September 14, 2017  
Last updated October 24, 2017

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#### EQUAL OPPORTUNITY STATEMENT

This institution, in compliance with all applicable Federal and State laws and regulations, does not discriminate on the basis of race, color, national origin, sex, sexual orientation, genetic information, gender identity, gender expression, age (40 or older), religion, disability, political beliefs, or status as a veteran in any of its policies, practices, or procedures. This includes, but is not limited to admissions, employment, financial aid, housing, services in educational programs or activities, or health care services, that the University operates or provides.

UNIVERSITY OF OKLAHOMA FACULTY HANDBOOK  
HEALTH SCIENCES CENTER  
September 2017

## **PREFACE**

The Health Sciences Center Faculty Handbook is a compilation of many of the University's major policies regarding faculty, academic, and administrative matters, along with policies and information on the University's facilities and general organization. Several other sources, such as the Administration and Finance Policies at <http://www.ouhsc.edu/policy/Home.aspx>, the Staff Handbook at <https://apps.hr.ou.edu/staffhandbook>, the Regents' Policy Manual at <http://www.ou.edu/regents/CurrentPolicyManual.pdf>, and college and departmental handbooks, also provide useful resources for University policies and procedures.

The Handbook is published as a convenient reference for informational purposes and should not be construed as the independent basis of a contract with the University. While every effort is made to present the information accurately, the actual text of any particular policy, procedure, or law referenced or included should be consulted as the authoritative, current source of information.

Suggested corrections or changes to this Handbook should be submitted to the Office of the Senior Vice President and Provost. Questions regarding any academic policy may also be addressed to this office. Questions regarding other policies may be addressed to the office cited at the end of the pertinent policy section.

Senior Vice President and Provost, September 2017

*The University of Oklahoma Health Sciences Center*

**FACULTY HANDBOOK**

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## 1. HEALTH SCIENCES CENTER: GENERAL INFORMATION

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### 1.1 HISTORY

The University of Oklahoma was founded upon authority of an act of the first legislature of the Territory of Oklahoma seventeen years before Oklahoma became a state. Approved in 1890 and adopted in its main provisions by the first legislature of the state in 1907, the act stated the purpose of the University was "to provide the means of acquiring a thorough knowledge of the various branches of learning connected with scientific, industrial, and professional pursuits." Norman was selected as the site for the University. Students were accepted for the first time in the fall of 1892, and the first two graduates of the University received the pharmaceutical chemist diploma in 1896.

At the turn of the Twentieth Century, the College of Medicine was founded as a two-year pre-clinical school. Ten years later in 1910, it was merged with the Epworth Medical College in Oklahoma City and became a four-year degree-granting school. In 1911, the first degree in medicine was awarded.

Under the direction of the College of Medicine, a two-year School of Nursing was organized in 1911. In 1913, the school graduated its first class and became a three-year diploma program. Future physicians and nurses trained primarily in the old Rolater Home and Hospital in Oklahoma City until 1919, when University Hospital was built. Oklahoma Children's Memorial Hospital was completed in 1928 and became the second state-owned University of Oklahoma hospital. Also, construction had begun on a new College of Medicine building, and by 1928, it was possible to centralize all of the College's pre-clinical and medical operations.

During the ensuing years, enrollment climbed steadily, a Graduate College was formed, and new health facilities were added to help meet the comprehensive health care needs of the State. The Veterans' Administration Hospital and the privately sponsored Oklahoma Medical Research Foundation were constructed. In 1957, the School of Nursing was authorized to confer baccalaureate nursing degrees.

In 1967, a School of Health, which was later renamed the College of Health, was established.

A dean was appointed for the College of Dentistry in 1969, and three years later the first class was accepted and began studies.

Established in 1972 as a branch program, the College of Medicine, Tulsa has enabled the University to use hospital training facilities in Tulsa, to establish additional medical residencies, and to provide for expanded health care capabilities in the State. Under this program, selected third- and fourth-year students receive their clinical training in the major Tulsa community hospitals.

In 1973, the Oklahoma Legislature provided for the creation of a Board of Trustees to operate and govern University Hospital and transferred Children's Memorial Hospital to the Department of Institutions, Social and Rehabilitative Services, now known as Department of Human Services. The name of the hospital was first changed to Oklahoma Children's Memorial Hospital, and later to Children's Hospital of Oklahoma.

In 1976, Medicine, Nursing, Health, Dentistry, and the Graduate Colleges were joined in Oklahoma City by the College of Pharmacy, the oldest academic unit at the University.

In 1980, the state legislature transferred the governance of the University Hospital to the Department of Human Services. The University Hospital was renamed the Oklahoma Memorial Hospital. Significant expansion of the hospital facilities was undertaken during the early 1980s, as it became the major component of the Oklahoma Medical Center complex.

In 1981, the College of Health was divided into two colleges, the College of Allied Health and the College of Public Health.

In 1993, in response to the changing health care environment and other factors, the state legislature transferred the teaching hospitals complex to a new governance structure and state agency, The University Hospitals Authority. In this transfer, the name of the adult hospital was restored to its historic title of University Hospital.

In 1997, the state legislature and the Governor approved the teaching hospitals and the University affiliating with a corporate entity in the health sciences center. The Supreme Court also approved this new arrangement. In February, 1998, the University Hospitals (University Hospital and Children's Hospital of Oklahoma) entered into a groundbreaking joint operating agreement with Columbia/HCA to manage the University Hospitals and Presbyterian Hospital located on the campus. At the same time, the University entered into an Academic Affiliation Agreement with Columbia/HCA to continue the support of the hospitals for the various teaching and patient care programs, primarily affecting the College of Medicine but involving all colleges at the center. The three hospitals are managed under the title of OU Medical Center, formerly University Health Partners, but each retains its own unique identity and special characteristics.

## **1.2 HEALTH SCIENCES CENTER CAMPUSES**

The University of Oklahoma Health Sciences Center is the State's major educational resource for training physicians, dentists, nurses, pharmacists, public health specialists, and a wide range of allied health personnel. The Center has a campus in Oklahoma City and offers programs at the University of Oklahoma, Tulsa campus. It is also instrumental in developing improved methods of health care delivery for Oklahoma.

At the Health Sciences Center, approximately 3,000 students are enrolled in the more than 50 graduate and undergraduate degree programs of the seven colleges: Allied Health, Dentistry, Graduate, Medicine, Nursing, Pharmacy, and Public Health. There are approximately 1,700 faculty and 4,200 staff at work at the Health Sciences Center. These figures do not include over 3,000 volunteer physicians and other health professionals.

Faculty and students at the Health Sciences Center use the clinical, laboratory, and teaching facilities of the OU Medical Center, OUMC Surgery Center, OU Physicians Building, OU Children's Physicians Building, Stephenson Cancer Center, and Hamm Diabetes Center. Also, students use the facilities of the Veteran's Affairs Medical Center, the Dean A. McGee Eye Institute, the Oklahoma Medical Research Foundation, other affiliated institutions and hospitals in Oklahoma City, the major teaching hospitals in Tulsa, the Veterans Affairs hospital in Muskogee, and various affiliated hospitals and clinics in other locations in Oklahoma. The University of Oklahoma Health Sciences Center is one of a group of over 16 lead public and private health care and related institutions which make up the Oklahoma Health Center, including, but not limited to, the American Red Cross Oklahoma County Chapter and Transplantation Services; Board of Medical Legal Investigation; Dean A. McGee Eye Institute; Department of Human Services; Oklahoma Allergy and Asthma Clinic; Sylvan N. Goldman Center Oklahoma Blood Institute; Oklahoma City Clinic; Oklahoma Medical Research Foundation; Oklahoma School of Science and Mathematics; Oklahoma State Department of Mental Health and Substance Abuse Service; Oklahoma State Department of Health; Veterans Affairs Medical Center; Presbyterian Health Foundation; OU Medical Center, including Everett Tower, Children's Hospital, and Presbyterian Tower; and Children's Hospital Foundation. (University Hospitals Trust).

The Oklahoma Health Center operates under the basic philosophy that Oklahoma's growing healthcare needs can be met only through the combined efforts of its citizens, practicing health professionals, government, and the Health Sciences Center. Over 35,000 people representing institutional employees, students, patients, and visitors converge on the Oklahoma Health Center daily, making it one of the Southwest's largest comprehensive academic health centers.

## **1.3 FACILITIES**

The Basic Sciences Education Building, first in a series of construction projects aimed at helping meet the State's need for health care professionals, was completed in 1969 and substantially renovated in 2008. It provides teaching space for undergraduate, graduate, dental, and medical education. It is also used extensively for continuing education of practicing health professionals in Oklahoma.

Companion to the Basic Sciences Education Building, the 10-story Biomedical Sciences Building was completed in 1976. This structure contains 500 rooms, over half of which are used for research by faculty and graduate students. It provides space for the administrative offices of the College of Medicine and the five basic sciences departments of biochemistry and molecular biology, cell biology, microbiology and immunology, physiology, and pathology. The College of Medicine clinical faculty are housed in the Peggy and Charles Stephenson Cancer Center, Harold Hamm

Diabetes Center, OU Physicians' Building, Family Medicine Center, Williams Pavilion, OU College of Medicine Academic Office Tower (Andrews Academic Tower) and other clinical facilities.

The College of Dentistry Building was completed in 1976. The five-story structure provides teaching, research, clinical practice, and office space. Each of the five clover-shaped clinics, which give the building its unique shape, contains 36 operatories where students provide patient treatment under faculty supervision. In 2015 extensive renovations to the building were done to modernize the operatories, clinical laboratories, and specialty clinics. Clinically-oriented research is conducted in special research operatories and laboratories located near faculty offices.

The College of Public Health occupies the Health Sciences Center's original teaching structure. The original medical school facility, completed in 1928, was renamed the College of Health Building and was renovated substantially in 1981. Space is also provided for the Office of Community Partnership and Health Policy.

Construction of a three-story state-of-the-art College of Allied Health Building was completed in 2009. The Allied Health building contains classrooms and class laboratories, distance education and computer facilities, clinical and research space, children's hearing impaired daycare center, faculty, staff, and student offices and building support spaces.

The College of Nursing Building on Stonewall Avenue was dedicated in 1977 and named the Fran and Earl Ziegler College of Nursing in 2015. The four-story building houses student activity space, teaching areas, and administrative and faculty offices. Features of the building include a 184-seat lecture hall, a professional practice area with a nursing station and model patient rooms, a clinical practice space, and a computing area.

The College of Pharmacy, the University's oldest degree-granting college, moved its base of operations from the Norman campus to the Health Sciences Center in the Fall of 1976. The College moved into its newly completed facility, the Henry D. and Ida Mosier Pharmacy Building, in 1983.

The Robert M. Bird Health Sciences Library was dedicated in 1978. In addition to library services, the building houses the Offices of the President, Senior Vice President and Provost, Legal Counsel, Alumni and Development, Graduate College, the University Privacy Official, Institutional Review Board, Vice Provost for Academic Affairs, Academic Technology, Telemedicine, and Academic Media and Digital Services.

The OUHSC Technology Center was acquired from the Oklahoma Medical Research Foundation in 1989. The OUHSC Technology Center provides the University with office support spaces. Information Technology occupies the majority of the building.

The Allied Health Practice Center, previously used as the Health Sciences Center's first Family Medicine Clinic, was renovated in 1997, and a technical facility was completed in the same year. These facilities are used by the Oklahoma Assistive Technology Center.

The offices of Site Support, Operations, and OU Parking and Transportation are located in the Service Center Building. Some of these offices provide administrative support while others have the responsibility for the physical operation and maintenance of the campus.

The Family Medicine Center was completed in 1994 at a total project cost of \$7.6 million. This two-story facility contains roughly 72,000 gross square feet, including primary care out-patient clinics on the first floor and Department of Family and Preventive Medicine offices and educational facilities on the second floor. The building includes 68 treatment rooms in five clinic modules on the first floor and faculty and staff offices and a multi-media classroom on the second floor. A building addition in 2002 provided a new, modern classroom for Physician Associate Students.

The first two floors of the Student Center was completed in 1996 at a total project cost of \$4 million and contained 26,900 gross square feet, including food service, meeting rooms and Student Association offices on the first floor and conference and study rooms, and computer facilities on the second floor. A third floor story addition, containing an additional 12,000 gross square feet, was completed in 2002 at a construction cost of \$2.7 million. The third floor consolidates campus student support services, including offices for Student Services, Financial Aid, and the Bursar.

Also, available on the floor is the David L. Boren Lounge, an area to allow for student study and socialization. In 2004, the Student Center was renamed the David L. Boren Student Union.

The Stanton L. Young Biomedical Research Center (BRC North) was completed in 1997 at a total project cost of \$21.5 million. This four-story structure includes 105,300 gross square feet. On the first floor, there are conference and seminar rooms, a bio-safety level-3 core laboratory, and building support spaces. The second, third, and fourth floors include research laboratory neighborhoods, each with eight research laboratories, principal investigator offices, and lab support spaces. In 2005, the second phase of the Stanton L. Young Biomedical Research Center (BRC West) was completed; adding 122,000 square feet of research space, targeted primarily for strategic research plan priority initiatives. The BRC West houses building management offices and the campus core facilities. The Johnnie Crutchfield Research Laboratory located on the first floor contains two divisions of the OUHSC Laboratory for Molecular Biology and Cytometry Research (LMBCR) core facilities; the division of DNA sequencing/Genomics and the Mass Spectrometry/Proteomics divisions. The Flow and Image Cytometry division of the LMBCR core facility is located on the third floor.

Acquired in 2009, the Harold Hamm Diabetes Center at the University of Oklahoma serves as a catalyst for eradicating the diabetes epidemic through cutting-edge research focused on progress toward a cure for diabetes and its complications, dramatically improved patient care for those suffering from the disease, and programs aimed at preventing people from developing diabetes before it starts. HHDC has facilities in Oklahoma City and Tulsa as well as affiliated sites across the state.

Also acquired in 2009 the University Health Club is a premier health and fitness facilities that occupies 80,000 square feet of space, incorporating the latest technological advancements in fitness and wellness. The University Health Club is open to OUHSC students, faculty, staff and the public. The mission of the University of Oklahoma Health Sciences Center – University Health Club is to provide the best possible experience for the students, faculty, staff, and community members to achieve their optimal health, improve physical and mental performance and enhance their lifestyles. The Health Club is located on the University of Oklahoma Health Sciences Center campus, on the southwest corner of 8<sup>th</sup> Street and Lincoln Blvd. There is also another location at the University Research Park which occupies 6,500 square feet of space.

A new comprehensive ambulatory care facility for the medical faculty practice, the OU Physicians Building, was opened in November 2001. This five-story facility contains 192,000 gross square feet. The building was designed primarily from a patient perspective and offers many modern conveniences for ease of access. This was the culmination of a plan to bring together most of the medical and surgical specialties and subspecialties outpatient practices in one building. Laboratories and complete radiological services occupy the first floor. The second through fifth floors accommodate all patient examination and care services of the various specialties and subspecialties. The building also houses the OU Breast Institute.

The Peggy and Charles Stephenson Cancer Center opened in 2011 and is Oklahoma's only comprehensive academic cancer center. This seven-story facility contains 213,000 gross square feet. Incorporating a design that promotes multidisciplinary and patient-centered care, the \$128 million building provides Oklahomans with a world-class diagnostic and treatment facility with the latest technology available in an environment of research and education.

The University of Oklahoma Health Sciences Center acquired the PHF Research Park in 2013. A valuable asset at the Oklahoma Health Center, the University Research Park (formerly the PHF Research Park) is a growing venture that contains seven biotechnology research buildings that support more than 50 private companies, private-public initiatives, and many University activities. The Research Park will continue to be one of Oklahoma's major engines for economic growth and resources for learning, discovery and innovation in today's knowledge-based, technologically driven, global society.

The OU College of Medicine Academic Office Tower (Andrews Academic Tower) is a nine-story building completed in late 2016 is the new home to several departments and administrative offices of the OU College of Medicine.

The offices of the departments of Medicine, Surgery, Obstetrics and Gynecology, Orthopedic Surgery and Rehabilitation, and Otorhinolaryngology-Head and Neck Surgery are all housed in the new building. The Dean's Office staff also will relocate, as will the College of Medicine's Admissions Office and the Office of Continuing Professional Development. The staff of College of Medicine Student Services also will have a presence in the building.

The University of Oklahoma Health Sciences Center's purchase of the OU Health Partners Building (formerly Oklahoma City Clinic) was completed in 2016. The clinical building contains 147,439 SF to include a 13,700 SF surgery center on 4 acres which are strategically located in the central core of the OUHSC Campus.

The Schusterman Center, University of Oklahoma-Tulsa Campus, was acquired in 1999. The campus is a 60- acre site with 16 buildings and 378,000 gross square feet. The Schusterman Center campus houses academic and research programs based in Tulsa, and some from the Norman and the Oklahoma City campuses. Current OU Health Sciences Center professional and graduate programs offered in Tulsa are the Colleges of Allied Health, Medicine, Nursing and Public Health. The Tandy Education Center containing an additional 16,000 gross square feet was added in 2016 will feature the latest advances in medical simulation, and a training and feedback method in which students practice in lifelike circumstances using models or virtual reality. It includes exam rooms, inpatient intensive care unit/emergency rooms, interview consultation rooms, and one apartment model for in-home situations, debriefing rooms and a multipurpose training room with separate area for training standardized patients.

In 2005, the 62,000 gross square feet Hillcrest Family Medicine Center was constructed. In 2007, the OU Physicians-Tulsa Research and Medical Clinic was completed on the Schusterman Center campus. The 100,000 gross square feet clinical facility houses a variety of clinical services, including the clinics previously located at the Sheridan campus. Additional clinical facilities, including University clinics and private hospitals, are located throughout the City of Tulsa.

OU Wayman Tisdale Specialty Health Clinic opened in 2013. Located at 36<sup>th</sup> Street North and Hartford Ave in Tulsa, the clinic, named in memory of the late OU and NBA basketball star, Olympic gold medalist and musician Wayman Tisdale, was built in response to a study showing a considerable lower life expectancy rate in north Tulsa compared to south Tulsa. Today, 17 health care specialties are offered at the Tisdale Clinic. Specialties include: adult endocrinology, pulmonology, neurology, nephrology, psychiatry, pediatric psychiatry, pediatric cardiology, pediatric nephrology, pediatric gastroenterology, internal medicine/pediatrics, pain addiction, sports medicine, pediatric infectious disease, adolescent medicine, pediatric behavior specialist, pediatric development specialist and pediatric endocrinology. One of the most important benefit of the clinic is it has given access to these specialty health services for the residents residing in north Tulsa and surrounding communities.

## 2. UNIVERSITY GOVERNMENT AND ADMINISTRATION

### 2.1 OKLAHOMA STATE REGENTS FOR HIGHER EDUCATION

The University of Oklahoma is part of the Oklahoma State System of Higher Education, which was established in 1941 when the people of the State adopted an amendment to the *Constitution of Oklahoma*, Article XIII-A. The system is composed of all institutions of higher education supported wholly or in part by direct legislative appropriations.

The amendment provided for establishment of the Oklahoma State Regents for Higher Education as the coordinating board of control of the system. The Board is composed of nine members who are appointed by the Governor and confirmed by the State Senate. They serve nine-year overlapping terms.

Their responsibilities include prescribing standards of higher education (including those concerning the admission of students) at each institution, determining the functions and courses of study at each institution, granting degrees and other forms of academic recognition for completion of the prescribed courses of study, recommending to the Legislature the budget needs of each institution, allocating to institutions funds appropriated by the Legislature, and determining the fees for all institutions of the system. (Article XIII-A, Sections 2 and 3, *Constitution of Oklahoma*)

### 2.2 UNIVERSITY OF OKLAHOMA BOARD OF REGENTS

By constitutional enactment, the governance of the University is vested in the Board of Regents of the University of Oklahoma. The Board is composed of seven members appointed by the Governor with the advice and consent of the Oklahoma Senate. Each member is appointed to serve for seven years, unless appointed to fill an unexpired term. Meetings are held approximately ten times per year and are open to the public. The Vice President for University Governance and Secretary of the University reports to the Board. The powers and duties of the Board are set out in Article XIII, Section 8, *Constitution of Oklahoma*; Title 70, Section 3301, *Oklahoma Statutes*.

### 2.3 ADMINISTRATIVE ORGANIZATION

The administrative organization of the University exists for the purposes of providing leadership and facilitating the academic programs. Fulfillment of these ends can best be achieved in an atmosphere of shared governance, mutual planning and implementation of decisions, and the recognition and encouragement of contributions of members of the University community. An organizational chart for the Health Sciences Center is available at [www.ouhsc.edu/Provost](http://www.ouhsc.edu/Provost).

#### 2.3.1 President

As the chief executive and academic officer of the University, the President is responsible to the Board of Regents of the University of Oklahoma for the administration of the institution. All authority delegated by the University Regents is administered through the Office of the President.

The University officers who report to the President include the Senior Vice President and Provost, Norman Campus; Senior Vice President and Provost, Health Sciences Center; the Vice Presidents for Executive Affairs, Administration and Finance, Research, Development, Technology Development, Student Affairs, and Public Affairs; the General Counsel; the Director of State and Legislative Affairs; the University Equal Opportunity Officer; the Institutional Equity and Title IX Officer; the Vice President for University Governance and Secretary of the University; the Internal Auditor; Director of Athletics, and the President of OU-Tulsa.

(President, 9-28-83, 7-20-95, 8-3-98, 3-29-00, 1-24-12)

#### 2.3.2 Acting President

In the temporary absence of the President, the following officers are authorized to serve as Acting President of the University in the order listed:

Senior Vice President and Provost, Norman Campus  
 Senior Vice President and Provost, Health Sciences Center  
 Vice President and General Counsel

Vice President for Administration and Finance, Norman Campus  
Vice President for Development  
Vice President for Administration and Finance, Health Sciences Center  
Vice President for Student Affairs

In the event any of the above named positions are filled by persons in an acting or interim capacity, the line of succession is automatically directed to the next position.

In the event the President of the University resigns, is incapacitated, is on an extended leave of absence, or otherwise is unable to perform the duties for a period in excess of 30 days, an Acting or Interim President shall be designated by the Board of Regents.

The Acting or Interim President shall have all powers, duties, and responsibilities normally held by the President of the University.

(Regents 2-8-79, 3-21-95, 12-2-03)

### **2.3.3 Senior Vice President and Provost, Health Sciences Center**

The Senior Vice President and Provost of the Health Sciences Center is responsible to the President as the chief executive officer for this campus. As the chief academic and administrative officer, the Senior Vice President and Provost is the ranking officer of the University on this campus. The Senior Vice President and Provost is responsible for the complete administration including the academic programs, policies and procedures, the employment of faculty and staff, and research administration.

The deans of the colleges report directly to the Senior Vice President and Provost. The principal staff of the Senior Vice President and Provost includes the Vice President for Health Affairs, Vice President for Administration and Finance, Vice President for Research, Vice Provost for Health Sciences, and Vice Provost for Academic Affairs.

The Deans' Council is composed of the deans, the principal staff, and the Senior Vice President and Provost, who serves as Chair. The Council meets periodically to discuss common interests and to make recommendations as appropriate.

(President, 7-21-81, 8-1-92, 12-3-02)

### **2.3.4 Vice President for Administration and Finance, Health Sciences Center**

The Vice President for Administration and Finance is the chief administrative and fiscal officer for the Health Sciences Center and is one of the Executive Officers of the University of Oklahoma. Responsibilities include planning and directing the activities of the Controller and Financial Services, Human Resources, Police and Public Safety, Operations, Facilities Management, Budget, Purchasing, Faculty House, and Parking and Transportation.

(Vice President for Administrative Affairs, 8-17-98, 12-3-02)

### **2.3.5 Vice President for Research, Health Sciences Center**

The Vice President for Research is responsible for the development and/or dissemination of official policies in the research and creative activity area. The Vice President for Research works with faculty to identify and obtain funding for research and scholarly and creative endeavors both in and outside the University. The Vice President for Research also works in conjunction with the Vice President for Technology to promote and facilitate the development of commercializable intellectual property relating to health care. The Vice President for Research has responsibility for and oversight of the Office of Research Administration, Laboratory Animal Resources, and the Institutional Biosafety Review Committee.

(Vice President for Research, 8-17-98, 12-3-02)



### 2.3.6 President, The University of Oklahoma - Tulsa

The President of The University of Oklahoma - Tulsa is the chief executive officer of the University of Oklahoma - Tulsa campus. The Tulsa President is responsible to the President of OU and coordinates with the Provosts of the Norman and the Health Sciences Center campuses and their designated staffs in developing and administering academic programs, research initiatives, policies, finances, public affairs, development activities, legislative relations, facilities, and strategic planning for OU programs based in Tulsa. The position is the primary liaison between the University and the Tulsa community, with particular emphasis on building working relationships with Tulsa's high-growth businesses.

(President, The University of Oklahoma - Tulsa, 9-18-00)

### 2.3.7 Interim Appointments of President, Senior Vice President and Provost, Vice Presidents, and Deans

At the time of appointment to the position of Interim President, Interim Senior Vice President and Provost, Interim Vice President, or Interim Academic Dean, it will be stated whether or not the appointee is a candidate for the permanent position.

(Regents, 1-20-86, 3-21-95, 12-3-02, 12-2-03)

## 2.4 FACULTY SENATE, HEALTH SCIENCES CENTER

The Faculty Senate, Health Sciences Center, is composed of members of the Regular Faculty of the Health Sciences Center. Each college on the campus is represented in the Senate according to a formula defined in the Charter of the Regular Faculty and Faculty Senate. Election of members for three-year terms is by vote of the Regular Faculty of each college.

The Senate exercises the powers of the faculty of the Health Sciences Center as delegated by the Regular Faculty. It has the power to initiate any legislation requiring approval of the Board of Regents (see [Appendix A](#)).

(Derived from the *Charter of the Regular Faculty and the Faculty Senate, Health Sciences Center*)

## 2.5 STUDENT GOVERNMENT GROUPS

Each of the seven health professional colleges has one or more student organizations, each of which is governed by a student council. Student organizations vary by college and is delineated in each organization's constitution. Each organization receives a portion of the student activities fees of the students it represents to use for various student activities and benefits.

The OUHSC Student Government Association is comprised of an Executive Board Council and Student Senate. Legislative powers of the OUHSC Student Government Association shall be vested in the Student Senate. Representation to the OUHSC Student Government Association is on a basis of one voting member per 100 students enrolled, with each college's constituency guaranteed at least three voting members. The OUHSC Student Government Association receives 10 percent of the student activity fee for disbursement to student organizations who are recognized by the University through registration and affiliation. The activities of Registered Student Organizations are not sponsored or endorsed by OUHSC.

## 2.6 STAFF SENATES

The Health Sciences Center Staff Senate was organized to serve as a representative body for the staff of the Health Sciences Center. The Tulsa Staff Senate was organized to serve the same purpose for staff on the Tulsa Campus. The Senates shall function for the welfare of the University and for the staff they represent. Each shall function as an advisory body and policy referral body to the President through the Senior Vice President and Provost on policy matters as may directly affect staff.

(*Constitution and By-Laws of the Staff Senate, Health Sciences Center*, approved by the Regents, 1974, 5-8-80; President 12-7-95, 12-05; Tulsa Campus 3-29-07)



## 2.7 COUNCILS AND COMMITTEES

### 2.7.1 Introduction

An effectively organized system of councils and committees is essential to the operation of the University. Councils and committees serve a variety of functions which contribute to the achievement of the goals of the University. Councils and Committees:

- (a) keep the several elements of the University informed of the conditions, policies, and decisions which affect their responsibilities and welfare.
- (b) are a means of marshalling the wide range of knowledge and expertise on all subjects available to the University so that it can contribute to decision-making.
- (c) provide a liaison between officers of the University and other areas of the University, especially the faculty. Through consultation, policy review, and exploration of disagreements, a sound operating relationship can be maintained among all members of the University community.
- (d) bring representatives of the appropriate groups in the University together at an early stage in the process of planning and development of policy and programs.

To achieve full effectiveness, councils and committees must be:

- (a) Representative of the groups appropriate to their particular functions;
- (b) Consulted regularly on a schedule that allows time for participation;
- (c) Afforded full and immediate access to the information relevant to their interest;
- (d) Able to exercise initiative and review actions as well as respond to proposals put before them; and
- (e) Provided benefit of a formal response from the appropriate academic and administrative offices to proposed recommendations or actions.

All councils and committees are given clearly stated charges in writing, and they are asked to make periodic reports to their constituent bodies. All appointments to University councils and committees by the Faculty Senate are direct appointments and are forwarded to the President for official notification.

The committee structure of the University is kept flexible by periodic review and revision, assuring that committee work does not absorb an undue amount of faculty, staff, and student time. A current listing of councils and committees, their charges, and their membership is maintained in the Office of the President.

### 2.7.2 Councils

Councils make recommendations to the President on policy and programs in areas of vital significance to the functioning of the University as an educational institution as well as special extracurricular areas that deserve the attention of the full representation of the University community. Certain councils are created by the Board of Regents, and their membership and charges are set by the Board of Regents. These include:

- Athletics Council (University)
- Council on Faculty Awards and Honors (University)
- Continuing Education Council (University)
- Publications Board (University)

Other councils are established upon recommendation of the Faculty Senate and approval by the President. The President may suggest the establishment of specific new councils to the Senate. Councils may be abolished on recommendation from the Senate and approval of the President. Membership to the following councils is selected

by the Faculty Senate and forwarded to the President for official appointment. Health Sciences Center councils established in this way include:

Academic Programs Council  
Research Council

These councils operate according to the following guidelines:

- (a) **Membership.** Membership of the councils will be drawn from the elements of the University relevant to their areas of interest including, as appropriate, faculty, students, and non-academic personnel. Ordinarily, the council membership consists of nine faculty members appointed to three-year terms with one-third retiring each year. At least one officer of the University administration whose duties are relevant to the work of each council will be designated by the President to be an *ex-officio* member of the council without a vote. The officer is responsible for assuring that the council is informed of administrative activities and plans appropriate to its charge. When necessary, the officer will provide staff support to the council.
- (b) **Chair.** The chair of each council is elected annually from among the faculty members of the council.
- (c) **Charge to a Council.** A charge to a council is recommended to the President by the Faculty Senate. The President gives the charge in writing.

### 2.7.3 Standing Committees

Standing committees provide the President and his or her staff with counsel and assistance regarding areas of University activity which are important to the fulfillment of an educational mission, but are of less fundamental significance than the areas of council concern. Standing committees are established by recommendation from the Faculty Senate and approval of the Senior Vice President and Provost and the President. The President may suggest the establishment of specific committees to the Senate. Committees may be altered in their function or abolished upon recommendation of the Senate and approval of the President.

The membership of a standing committee varies with its function, but faculty participation is desired on all standing committees. The terms of membership are stated when a committee is established. Membership selection and appointment to the following standing committees are made by the President. These standing committees include:

Campus Tenure Committee, HSC  
Commencement Committee  
Committee on Discrimination and Harassment, HSC  
Employment Benefits Committee  
Faculty Appeals Board, HSC  
Honorary Degrees Screening Committee  
Library Advisory Committee, HSC  
Presidential Professorship Selection Committee, HSC  
Retirement Plans Management Committee  
Scholars Selection Committee  
University Copyright Committee  
Patent Advisory Committee

### 2.7.4 Other University Committees

- (a) **Administrative Advisory Committees.** Officers of the University are authorized to establish special advisory committees for subjects not covered by the Council or Standing Committee structure, so long as they do not duplicate the work of the councils and standing committees. These committees are composed of members selected in a way determined by the establishing official. The number and purposes of these committees are regularly reviewed by the President and Faculty Senate.

- (b) **Task Forces.** A task force is an *ad hoc* committee designed to accomplish a specific written charge. Members of the task force are selected by the appointing body or officer. Dissolution occurs when the task is completed or at the discretion of the appointing body or officer.
- (c) **Designated Scholarship Committees.** These committee members are appointed by the President.

For more information refer to *Structure of University Councils, Committees and Boards, and Charters, Appointed by the President of the University* available from the Office of the President.

#### 2.7.5 Attendance Requirements for Faculty Members of a University Council or Committee

Except as otherwise provided by Regents' policy, each faculty, staff, and student member is permitted to miss only three regularly scheduled meetings of a University council, committee, or board during an academic year. Absence at more than three regularly scheduled meetings is grounds for removing faculty, staff, or student member from a University council, committee, or board at the discretion of the chair.

Absences from regularly scheduled meetings may be made up by attendance at specially scheduled meetings at the discretion of the chair.

#### 2.7.6 Resignation of Faculty Members from Council and Committee Membership During Leaves of Absence

Faculty members who shall be absent from the University for a regular semester or longer because of sabbaticals, leaves of absence, or other activities shall resign all positions on councils, standing committees, and administrative advisory committees of the University. They shall be replaced for the unexpired portions of their terms by faculty members appointed by the President from the names submitted in accordance with established election procedures.

#### 2.7.7 Administrative Search Committees

The selection of the President and other administrators is the responsibility of the Board of Regents, and any process leading to that selection is the prerogative of the particular Board in office at the time the selection process is to be initiated. It is suggested that administrative search committees make nominations and recommendations concerning candidates and that the President of the University and the University Regents be guided by them in most instances, but it is understood that the President and the University Regents shall not be bound by nor limited to nominations and recommendations of administrative search committees. (For effect of interim appointments on the searches, see [Section 2.3.7](#)). The spirit and letter of all applicable equal opportunity and affirmative action regulations shall be followed.

Administrative Search Committees include those for:

- (a) **President of the University**

It is recommended that the presidential search committee have representation by the faculty, student(s), and staff. The Board of Regents appoints these members from nominees selected by the official faculty, staff, and student governance organizations on each campus. Faculty members shall constitute a majority of search committee members chosen from the faculty, staff, and students.

There shall be twice as many nominees as there are positions. The Board of Regents may designate other members as deemed appropriate.

- (b) **Senior Vice President and Provosts, Vice Presidents, and Vice Provosts**

The senior executive search committee shall have faculty, student, and staff representation. The President shall appoint these members from nominees selected by the official faculty, staff, and student governance organizations on each campus. There shall be twice as many nominees as there are positions. The President of the University may designate other members as deemed appropriate; provided, designees from outside the University shall be subject to the approval of the Board of Regents.

(c) **Deans**

The Dean committee shall have faculty, student, and staff representation. The procedure for selecting student and staff representation shall be as outlined above. Upon requesting nominations by faculty members, the President shall designate the number of positions to be filled from (1) the general faculty of the particular college or unit involved, and (2) from the University faculty at large. There shall be at least one position filled from the University faculty at large from nominations made by the official faculty governance organization. In all cases, there shall be twice as many nominees as there are positions. The President shall make all appointments.

(Regents, 5-12-83, 3-21-95, 3-29-00, 12-2-03)

**2.8 COLLEGE AND DEPARTMENTAL ORGANIZATION****2.8.1 College Administration**

The dean is the chief administrative officer of a college and is responsible for providing leadership and administrative support to the programs and faculty of the college and for representing the college in relations with other colleges and administrative officers of the University.

The dean of a college is nominated to the University Regents by the President after considering the recommendation of the Senior Vice President and Provost (Section 2.7.7(c)), and serves at the discretion of the Senior Vice President and Provost.

- (a) **Administrative Duties.** The dean is responsible for carrying out the policies of the University and college and is responsible for the preparation and submission of the budget for the college and its implementation when approved. Using guidelines approved for the college, the dean makes recommendations through the Senior Vice President and Provost to the President for the appointment, promotion, tenure, dismissal, retirement, and for other personnel decisions pertaining to faculty members in the college. Units affected should be consulted and their advice considered in developing such recommendations.
- (b) **Leadership Function.** The dean has an obligation to foster the welfare of the entire college faculty and staff and to encourage and facilitate their work and professional development. The dean apprises faculty members of University, college, and departmental policies and requires compliance. The dean is responsible for the review and evaluation of the academic programs within the college and is expected to provide guidance to the faculty in developing appropriate and effective academic programs.
- (c) **Organization.** The dean is responsible for the administrative organization of the college. The faculty of a college usually is organized into distinct academic units, such as departments. The organization of such units is recommended by the dean and approved by the Senior Vice President and Provost, President and, as appropriate, the Board of Regents. The units provide groupings for faculty associated with one or more related academic programs and disciplines and provide for active participation by the faculty in carrying out the work of the college.

At times, it is in the best interest of a college to reorganize among its units in order to respond to new circumstances or to strengthen existing programs. Before such a recommendation, the dean will inform and consult with the faculty of the units affected (see Appendices F and G).

- (d) **Evaluation.** The primary purpose of an evaluation is to provide constructive information toward improved performance of the dean. The information will be made available to the dean and University officers to whom the dean is responsible. Evaluation of the dean's performance is carried out by those University officers to whom the dean is responsible. It includes, but is not limited to, confidential evaluation by the faculty of the college.
- 1) Performance evaluations will be conducted of all deans by the Senior Vice President and Provost at least every three years. The evaluation shall include:

- (a) A self-assessment by the dean.
  - (b) Confidential evaluation by the faculty of the college conducted by the Senior Vice President and Provost.
  - (c) A formal consultation between the dean and the Senior Vice President and Provost.
- 2) **Evaluation Procedures and Criteria.** Evaluation procedures should provide the opportunity for input into the evaluation from the faculty, chairs/directors, and as deemed appropriate by the Senior Vice President and Provost, the staff, students, and appropriate external constituencies of the college.
- (e) **Vacancy.** Whenever a vacancy occurs in the dean's position, the Senior Vice President and Provost shall appoint an interim dean of the college until a permanent dean assumes responsibility for the college. Prior to the appointment, the Senior Vice President and Provost shall seek input from representatives of the faculty, chairs/directors, and staff of the college involved to obtain advice on an appropriate candidate for the interim dean. (For the effect of an interim appointment on the selection procedure for a new dean, see [Section 2.3.7](#)).
  - (f) **Termination.** The Senior Vice President and Provost may decide to remove a dean if it is determined to be in the best interest of the college and the University. The Senior Vice President and Provost shall inform the faculty of such a decision.

(Regents, 1-26-99, 12-3-02, 6-25-08)

## 2.8.2 Departmental Administration

An academic unit of a college, usually called a department, is administered by a chair (or an equivalent title recommended by the college and approved by the Senior Vice President and Provost and the President). The chair provides leadership in matters of policy determined by the faculty of the department, operating within guidelines provided by the University of Oklahoma Board of Regents, University administrative officers, and the college. The departmental faculty is defined as all members who are within the general faculty and includes the chair. In colleges not divided into separate units, the college faculty is the equivalent of the departmental faculty, and the dean performs the duties and functions of the chair.

- (a) **Departmental Chairs.** The department chair serves at the discretion of the Dean. The chair has a leadership function and is accountable both to the department and to the dean for the performance of this function. The chair represents the department in relations with other departments, with the deans, with other administrative officers of the University, and with affiliated institutions. The chair is expected to encourage and facilitate the work, quality, and professional development of the department. The chair is the immediate supervisor of the faculty within the department and is expected to aid the faculty in their professional development; to develop and maintain a high standard of performance from faculty; and to ensure that departmental personnel comply with University, Health Sciences Center, college, and departmental policies.
  - 1) **Functions.** The chair shall take the initiative in reporting the needs and championing the causes of the department to the dean. This includes a basic responsibility for obtaining merited recognition of faculty members with respect to promotions, salary increases, and support for career development. Other leadership functions include implementing the Affirmative Action Plan, summarizing the program review, and recommending tenure considerations. The chair provides leadership in all matters of policy as determined by the faculty, dean, and Senior Vice President and Provost.
  - 2) **Department Responsibilities.** The chair determines procedures for carrying on the work of the department. Such functions shall include, but not be limited to: (1) determining time and frequency of teaching staff meetings (at least monthly); (2) approving class schedules for the department; (3) establishing policy for expenditures from departmental budget; and (4) making recommendations for increases in salary, promotion, new appointments, tenure, and teaching methods, with appropriate faculty input.

- 3) **Appointment.** The faculty of the department shall have a role in the appointment. The chair of a department is nominated to the Regents by the President after receiving recommendations of a duly appointed search committee, the appropriate dean(s), and the Senior Vice President and Provost. The search committee should be appointed by the dean(s). A majority of its membership should be members of the regular faculty.
- 4) **Evaluation.** Evaluation of the chair is determined by his or her overall contribution to the University, including the quality of his or her administrative work. The chair's work will be subject to review by dean(s). This evaluation requires input from departmental faculty. Where appropriate, outside consultants shall be asked to provide performance evaluation.

Performance evaluations will be conducted of all chairs by the dean each year. The annual evaluation shall include:

- (a) A self-assessment by the chair.
  - (b) A confidential evaluation by the faculty of the department conducted by the dean of the college.
  - (c) A formal consultation between the chair and the dean.
  - (d) Direct feedback from the dean in writing to the department chair relative to the chair's performance evaluation each year.
- 5) **Evaluation Procedures and Criteria.** Evaluation procedures should provide the opportunity for input into the evaluation from the faculty and, as deemed appropriate by the dean, from the staff, students, and appropriate external constituencies of the college.
  - 6) **Vacancy.** Whenever a vacancy occurs in the department chair's position, the dean shall appoint an interim chair of the department until a permanent chair assumes responsibility for the college. Prior to the appointment, the dean shall seek input from representatives of the faculty, chairs/directors, and staff of the college involved to obtain advice on an appropriate candidate for the interim chair.
  - 7) **Termination.** A dean may decide to remove a chair if it is determined to be in the best interest of the department, the college, and the University. The dean shall inform the faculty of such a decision.

(Regents, 1-26-99, 12-3-02, 6-25-08)

### 3. FACULTY PERSONNEL POLICIES AND GENERAL INFORMATION

#### FACULTY PERSONNEL POLICY

It is the policy of the University to recognize and implement the functions assigned to it by the Oklahoma State Regents for Higher Education. These functions are teaching, research and creative/scholarly activity, and professional and University service and public outreach. The responsibility for carrying out this policy is shared by the Board of Regents, administrative officers, and General Faculty. The University recognizes the specific involvement of the faculty in the performance of these functions and, to this end, is committed to fostering a superior faculty.

Since 1942, the Regular Faculty has actively participated in the organization, formulation, and implementation of University policies through a democratically elected Faculty Senate. Today, there are two Faculty Senates, one for the Health Sciences Center and one for the Norman Campus. The charters of these two Faculty Senates can be found in the Appendices of the respective campus' Faculty Handbook.

(Regents, 1-26-99, 12-3-02)

#### 3.1 THE GENERAL AND REGULAR FACULTY

The General Faculty of the Health Sciences Center is composed of all full-time (1.0 Full-time Equivalent [FTE], whether 9-, 10-, or 12-month appointment), part-time, and volunteer faculty members.

The Regular Faculty is composed of all full-time faculty who hold tenured, tenure track, or consecutive term appointments with the unmodified academic titles of assistant professor, associate professor, or professor. Regular Faculty may be paid all or in part by an affiliated institution such as the Veterans Affairs Medical Center or the Oklahoma Medical Research Foundation.

Additional policies related to the faculty and the Faculty Senate are contained in [Appendices A and B](#).

(Regents, 1-26-99, 12-3-02, 12-7-12)

#### 3.2 FACULTY APPOINTMENT TYPES

Faculty appointment types may be tenured, tenure track, consecutive term, limited term, or volunteer (see [Section 3.2.1](#)). The type of appointment will be determined by the primary academic unit in consultation with the appointee and with the approval of the dean, the Senior Vice President and Provost, the President, and if required, Board of Regents. The appointment must indicate the primary academic unit to which the faculty member is appointed.

Faculty at the Health Sciences Center are appointed on a 12-, 10-, or 9-month basis. An appointment is not a promise or guarantee to faculty of employment for or through any particular period of time. Continued employment and/or renewal are contingent upon a faculty member's satisfactory performance and/or the academic unit's needs. Termination of employment may become effective at any time, subject to notification requirements in [Section 3.2.7](#).

- (a) **Full-Time Faculty** – Full-time faculty appointments with unmodified academic titles (assistant professor, associate professor, and professor) shall be limited to those Regular Faculty who hold tenured, tenure track, or consecutive term appointments; who devote their full-time professional effort to University activities (see [Section 3.5](#)); and who are compensated by the University or University-approved sources.
- (b) **Limited Term Faculty** may be full-time or part-time and shall have academic titles such as instructor, lecturer, or associate, or titles modified by prefixes such as visiting, adjunct, or clinical. In the instance of limited term research appointments, the suffix "of Research" (see 1 below) shall be used.
  - 1) **Research** – Faculty holding limited term research appointments have titles of assistant professor of research, associate professor of research, or professor of research.

2) **Other –**

- i) Instructor and associate faculty titles are intended to designate a rank below that of assistant professors.
  - ii) The title of lecturer can be used for individuals of academic achievement and standing comparable to any academic rank, including assistant professor, associate professor, and professor, regardless of rank.
- (c) **Volunteer Faculty** – Volunteer faculty serve without remuneration and shall be given the same modified academic titles as limited term faculty. The title of preceptor may also be used for volunteer faculty.

(Regents, 1-26-99, 12-3-02, 6-25-08, 12-7-12, 9-14-17)

- (d) **Emeritus Faculty** - The Emeritus title is granted only by the Board of Regents upon recommendation by the President of the University. The President may recommend that the title "Professor Emeritus" be granted upon the retirement of regular faculty members when so proposed by their chair and dean. The title indicates retirement in good standing and ordinarily will be without the designation of any additional faculty rank (such as "assistant" or "associate") except that distinguished professor titles shall be retained when the emeritus status is recommended. For the Health Sciences Center, the President may recommend that the title Emeritus be added to the limited term or volunteer faculty title upon the retirement of limited term or volunteer faculty when proposed by their chair, dean, and the Senior Vice President and Provost.

The Board of Regents may grant the title "Emeritus" to former executive officers and deans upon retirement or resignation from the position.

(President, 9-10-85, Regents 12-7-12, 9-14-17)

### 3.2.1 Tenured, Tenure Track, Consecutive Term, and Limited Term Appointments

- (a) Full-time tenured, tenure track, or consecutive term appointments are Regular Faculty appointments.
- (b) Tenure track appointments are automatically renewed for the next fiscal year unless notification of non-renewal or termination is given in accordance with [Section 3.2.7](#).
- (c) Consecutive term appointments are not tenure-track. Consecutive term appointments are automatically renewed for the next fiscal year unless notification of non-renewal or termination is given in accordance with [Section 3.2.7](#).
- (d) Limited term appointments are not regular Faculty appointments:
  - (i) Limited term appointments may not be changed to Regular Faculty appointments until all Affirmative Action requirements have been completed (i.e., national search, appropriate advertisements) unless a waiver has been approved by the Senior Vice President and Provost and the Equal Opportunity Office.
  - (ii) Internal candidates applying for open Regular Faculty positions must meet the promotion and advancement criteria stated in [Section 3.9](#).
  - (iii) Individuals serving in limited term appointments serve at the discretion of the chair with concurrence by the dean.
  - (iv) Limited term appointments can be terminated during the academic year with no less than 60 days written notice. An exception to the 60-day written notice requirement may be made by the dean for faculty hired primarily to spend their time in clinical practice or practice-related activities, where termination is recommended due to poor clinical performance, unprofessional behavior, or conduct that jeopardizes patient safety. In such cases, termination may be effective immediately.
  - (v) Limited term faculty are not permitted to appeal termination to the Faculty Appeals Board.

(Regents, 7-15-96, 1-26-99, 12-3-02, 6-25-08, 12-7-12, 9-14-17)



### 3.2.2 Part-Time Appointments

A part-time appointment is one at less than 1.0 Full-Time Equivalent (FTE), and has a modified title. It is considered limited term ([see 3.2.1\(d\)](#)). At the time of any part-time appointment, the faculty member and the academic unit must reach a clear understanding of the terms of the part-time appointment. This understanding shall be in writing and the faculty member shall be given a copy.

(Regents, 7-15-96, 12-3-02, 12-7-12, 9-14-17)

### 3.2.3 Primary, Joint, and Secondary Appointments

- (a) **Primary Appointment** – A faculty member must have a primary appointment in an academic unit of a college, usually called a department. A primary appointment must be in an academic unit only, not in a Center or Institute or similar entity.
- (b) **Joint Appointments** – Appointments in two academic units or colleges (joint appointments) are permissible. Joint appointments consist of a primary appointment in two academic units or colleges and cannot total more than 1.0 Full-Time Equivalent (FTE). Joint appointments must be approved by both academic units and colleges involved, the Senior Vice President and Provost, the President, and the Board of Regents consistent with the criteria below.

Before a faculty member receives a joint appointment, the appropriate academic units must mutually determine, record in writing, and secure administrative approval for the applicable length of the pre-tenure period, criteria for tenure and promotion, and conditions for reappointment or non-reappointment. The academic units must provide a written description of the faculty member's teaching, research, service, and administrative responsibilities, and other special conditions pertaining to the joint appointment. The faculty member shall receive a copy of this written description.

(Regents, 7-15-96, 12-3-02, 6-25-08, 12-7-12, 9-14-17)

- (c) **Secondary Appointments** – In recognition of teaching, research, or service contributions outside their primary academic unit, faculty members may have one or more secondary appointments in other academic units, subject to approval of the chair of the primary department and the chair(s) of the other academic unit(s). Secondary appointments are modified by such prefixes as adjunct or clinical.

(Regents, 9-14-17)

### 3.2.4 Appointment of New Faculty

In the appointment of new faculty, action is initiated by the primary academic unit through the respective dean to the Senior Vice President and Provost and the President, in accord with the prevailing policies of the Board of Regents.

- (a) **Proposed Terms of Faculty Appointment** – The individual may initially receive a written statement provided by the department chair or dean defining the proposed terms of the individual's initial teaching, research, professional/clinical service and administrative responsibilities and other special conditions pertaining to the appointment. The proposal does not represent a contract for employment. Initial responsibilities and/or duties as set forth in the department's proposed terms of faculty appointment do not constitute a guarantee or promise that the responsibilities will remain the same throughout the faculty member's employment. The department chair will also provide, or provide access to, copies of the department and/or college tenure and promotion criteria where applicable to the type of appointment.
- (b) **Official Offer of Faculty Appointment** – The official offer of faculty appointment must come from the Senior Vice President and Provost or the President, or in the case of limited term appointments with a 1.0 FTE salary less than \$60,000, from the dean, and will include, when applicable, the statement that appointment is contingent upon the approval of the Board of Regents. The official offer of faculty appointment will specify academic rank, appointment type (limited term, consecutive term, tenure track, or with tenure, subject to the appropriate University tenure process), beginning date of employment, base salary, full-time equivalent, length of pre-tenure period if tenure track (see [Section 3.8.1\(c\)](#)), and any special conditions

pertaining to employment. The official offer of faculty appointment shall include information to access an on-line copy of the *Faculty Handbook* and faculty benefits.

- (c) **Contract** – If the appointment is approved by the Board of Regents, Regular Faculty (tenured, tenure track, or consecutive term) will be furnished with a Contract of Employment for signature. Included in this contract will be the approved rank and salary. The Contract will contain a statement indicating that the individual has read the *Faculty Handbook* and accepts employment in accord with the policies specified, with the understanding that policies of the University are subject to change by the Board of Regents or the University administration. Any exceptions to these policies that pertain to the appointment must be described in the official offer of faculty appointment.
- (d) **Compensation** – The University recognizes that the professional effort of the faculty member may result in compensation in addition to the base salary provided by the University. The conditions of such compensation are set out in each college's Professional Practice Plan and/or Faculty Compensation Plan.

(Regents, 7-15-96, 12-3-02, 6-25-08, 12-7-12, 9-14-17)

### 3.2.5 Changes in Status - Tenure Track and Consecutive Term Appointments

- (a) **Tenure Track to Consecutive Term** – At the request of the faculty member and with the approval of the chair of the academic unit, dean, and Senior Vice President and Provost, faculty members who are in the tenure track may be changed to a consecutive term appointment at any time during the pre-tenure period, but prior to submission of the faculty member's tenure documentation to the Campus Tenure Committee (see Section 3.8.5 (j)). However, a faculty member may not return to a tenure track appointment after such change to a consecutive term appointment.
- (b) **Consecutive Term to Tenure Track** – At the request of the faculty member and with the approval of the chair of the academic unit, the dean, and the Senior Vice President and Provost, faculty members initially appointed to consecutive term appointments may be changed to the tenure track, in which case all University policies relating to tenure shall apply. Upon written request from the faculty member and with the approval of the chair of the academic unit, dean, and Senior Vice President and Provost, up to three (3) years served in a consecutive term appointment may be credited toward the pre-tenure period, and all University policies relating to tenure shall apply (see Section 3.8.1(c)).
- (c) Upon the recommendation of the chair of the academic unit and dean, the Senior Vice President and Provost may approve a tenure-track faculty member's request for temporary reduction in employment from full-time to part-time, if the reduction is for less than six months. In those cases (e.g., SBIR awards) when it is recommended that a tenure track faculty member be permitted to reduce his or her employment to less than full-time for a period of six months or more and maintain a tenure-track status, specific approval by the Board of Regents is necessary. A written agreement must be reached among the faculty member, the chair of the academic unit, and the dean indicating how the reduction to part-time will affect the length of the faculty member's pre-tenure period.
- (d) Before a tenure track faculty member assumes primarily administrative duties during the pre-tenure period, a written agreement must be reached among the faculty member, the chair of the academic unit, the dean, and Senior Vice President and Provost as to whether the faculty member will remain on the tenure track, at what time they would be reviewed, and under what conditions.

(Regents, 12-7-12, 9-14-17)

### 3.2.6 Changes in Status – Tenured Appointments

- (a) A faculty member granted tenure by the University of Oklahoma who accepts an administrative post within the University retains tenured status as a member of the faculty.
- (b) A faculty member granted tenure who changes from a full-time appointment to a part-time appointment automatically forfeits tenure status (except as noted in (c) and (d) below). A faculty member granted tenure who changes from a full-time appointment to a volunteer appointment automatically forfeits tenure status.

- (c) Upon the recommendation of the chair of the academic unit and dean, the Senior Vice President and Provost may approve a tenured faculty member's request for temporary reduction in employment from full-time to part-time, if the reduction is for less than six months. In those cases, (e.g., SBIR awards) when it is recommended that a tenured faculty member be permitted to reduce his or her employment to less than full-time for a period of six months or more, and maintain a tenured status, specific approval by the Board of Regents is necessary.
- (d) A tenured faculty member retains tenure during University phased retirement.

(Regents, 12-3-02, 12-7-12, 9-14-17)

### 3.2.7 Notifications of Non-Renewal or Termination of Tenure Track or Consecutive Term Appointment

Action on the non-renewal or termination of individuals having a tenure track or consecutive term appointment is initiated by the chair of the academic unit through the respective dean to the Senior Vice President and Provost, President, and Board of Regents.

Tenure track or consecutive term appointments can be terminated effective at any time and for any lawful reason, including but not limited to those in [Section 3.16.1](#) with the required notice as indicated in (a), (b), (c), and (d) below. All notifications of non-renewal or termination shall be given in writing by the Senior Vice President and Provost.

Notification ([\\* See e\) below](#)) to tenure track or consecutive term faculty of non-renewal or termination:

- (a) Non-renewal or termination within first year of employment \*(to be effective on or before the 365<sup>th</sup> calendar day of employment) requires 90 calendar days' notice
- (b) Non-renewal or termination within second year of employment \*(to be effective from calendar day 366 of employment through day 730) requires 180 calendar days' notice
- (c) Non-renewal or termination within third year of employment \*(to be effective from calendar day 731 of employment through day 1,095) requires 270 calendar days' notice.
- (d) Non-renewal or termination within fourth year of employment \*(to be effective from calendar day 1,096 or beyond) requires 365 calendar days' notice.
- (e) \* The notification period for a faculty member who changes from a limited term faculty appointment to a tenure track or consecutive term appointment will be counted from the date of the change in status and not from the date of initial employment as a limited term faculty member.

The faculty member may appeal non-renewal of employment to the Faculty Appeals Board only if notification practices prescribed in the foregoing paragraphs of this section are not followed. The faculty member may appeal termination of employment to the Faculty Appeals Board if notification practices in the foregoing paragraphs of this section are not followed or if the termination is pursuant to [3.16.1\(a\)-\(d\)](#).

(Regents, 7-15-96, 1-26-99, 12-3-02, 6-25-08, 12-7-12, 9-14-17)

### 3.2.8 Resignation

A faculty member who elects to resign is expected to give at least 30 days' written notice to the department chair and to the dean.

(Regents, 7-15-96, 12-3-02, 6-25-08, 12-7-12)

### 3.2.9 Administrative Titles

- (a) **Academic Administrative Titles** – The following administrative titles are in addition to the academic faculty title and are established by the Board of Regents:
  - University and Campus Level: President and Senior Vice President and Provost
  - Center, or Institute Level: Director

- College Level: Dean
- Department: Chair

Academic leaders within departments (e.g. vice chairs) are appointed by the dean on recommendation of the chair and do not require Board of Regents' approval.

The prefixes Executive, Deputy, Vice, Associate, and Assistant are established by the Board of Regents to modify these titles. The name of the college, department, or division is designated in the title as a suffix.

- (b) **Non-Academic Administrative Titles** – The titles Vice President, Associate Vice President, Assistant Vice President, Vice Provost, Associate Vice Provost, Assistant Vice Provost, Senior Associate Dean, Associate Dean, and Assistant Dean may also be used as administrative titles for staff appointed to these positions at the Health Sciences Center, as established by the Senior Vice President and Provost.

Administrative departments and divisions are led by Directors or Chiefs, as appointed by the Board of Regents. The usage of the prefixes Vice, Deputy, Senior, Associate, Assistant, Interim, and Acting is the same as with academic administrative titles.

The OU Physicians Council recommends the appointment of Clinical Practice Division leaders and Clinical Practice Unit leaders [also known as a clinical service chiefs] subject to the reserved powers exercised through the College of Medicine dean and the Senior Vice President and Provost. See OU Physicians By-Laws [Appendix M].

- (c) **Interim and Acting Titles** – The term “interim” may be designated by the Board of Regents when no regularly appointed individual is in office. The term “acting” may be designated by the regularly appointed individual holding the administrative title to the individual who will fulfill that role during the appointed individual's absence from the campus, subject to approval by the appointed individual's supervisor or dean.

(Regents 12-7-12, 9-14-17)

### 3.3 ACADEMIC FREEDOM AND RESPONSIBILITY

#### 3.3.1 Institutional Academic Freedom

The accumulation and exchange of knowledge are among the preeminent purposes of the University, and the acknowledgement of individual academic freedom is one of the cornerstones to ensure such purposes are achieved. Equally important in meeting these goals is the recognition of the right inherent in the responsibility of the Board of Regents to govern the University. “[I]t is the business of a university to provide that atmosphere which is most conducive to speculation, experiment, and creation. It is an atmosphere in which there prevail ‘the four essential freedoms’ of a university—to determine for itself on academic grounds who may teach, what may be taught, how it shall be taught, and who may be admitted to study.” *Sweezy v. New Hampshire*, 354 U.S. 234, 263; 77 S.Ct. 1203; 1 L.Ed.2d 1311 (1957).

#### 3.3.2 Academic Freedom

The 1940 *Statement of Principles on Academic Freedom and Tenure with 1970 Interpretative Comments* of the American Association of University Professors has long been recognized as providing valuable and authoritative guidelines for policy and practice in American colleges and universities. The section on academic freedom below is essentially a restatement of these principles, with some modification and extension consistent with their intent and with later declarations by the Association. In the formulation that follows, these principles have been adopted as University policy by the Regents of the University of Oklahoma.

- (a) Faculty members are entitled to full freedom in research and publication, subject to any restrictions set by law or by applicable codes of professional ethics, and subject to adequate performance of their other academic duties and to stated University policy on outside employment; but, except under conditions of national emergency, a faculty member should not undertake to do research on University time or using University facilities or funds under any agreement which would (except for a definitely and reasonably limited time) prohibit open communication of the results.

- (b) Faculty members are entitled to freedom in the classroom in discussing their subject, but it is inappropriate for a teacher persistently to intrude material which has no relation to the subject of instruction.
- (c) As members of the community, university teachers have the rights and obligations of any citizen. They measure the urgency of these obligations in the light of their responsibilities to their subject, to their students, to their profession, and to their institution. In speaking or acting as private persons, faculty members should avoid creating the impression of speaking or acting for their college or university. As a citizen engaged in a profession that depends upon freedom for its health and integrity, the university teacher has a particular obligation to promote conditions of free inquiry and to further public understanding of academic freedom.
- (d) As citizens, university teachers should be free to engage in political activities consistent with their obligations as teachers and scholars. Subject to University policy ([See Section 3.23](#)) some activities, such as seeking election to an office for which extensive campaigning is not required, or service in a part-time political office, may be consistent with effective service as a member of the faculty.
- (e) Since freedom of access to recorded knowledge is essential to learning and research in a democracy, the university's right and obligation to provide a full range of materials on any subject, even though some views might be currently unpopular or controversial, or appear incorrect, shall not be infringed. The principles of academic freedom shall apply to the presence of materials and also to those who provide and those who use them.
- (f) The University endorses the *1967 Joint Statement on Rights and Freedoms of Students with 1990 Revisions* which "...asserts the right of college and university students to listen to anyone whom they wish to hear...affirms its own belief that it is educationally desirable that students be confronted with diverse opinions of all kinds, (and) therefore holds that any person who is presented by a recognized student or faculty organization should be allowed to speak on a college or university campus." Duly constituted organizations at the University may invite speakers without fear of sanctions. However, in the exercise of these rights, it is clearly recognized that:

"Membership in the academic community imposes on students, faculty members, administrators, and trustees an obligation to respect the dignity of others, to acknowledge their right to express differing opinions, and to foster and defend intellectual honesty, freedom of inquiry and instruction, and free expression on and off the campus. The expression of dissent and the attempt to produce change, therefore, may not be carried out in ways which injure individuals or damage institutional facilities or disrupt the classes of one's teachers or colleagues. Speakers on campus must not only be protected from violence but must be given an opportunity to be heard. Those who seek to call attention to grievances must not do so in ways that significantly impede the functions of the institution." (*1970 Declaration of the AAUP Council with 1990 Revisions*).

### 3.3.3 Academic Responsibility

The concept of academic freedom shall be accompanied by an equally demanding concept of academic responsibility. Nothing in the following statement is intended to abridge in any way the principles and procedures advanced in the *1940 Statement of Principles on Academic Freedom and Tenure with 1970 Interpretive Comments* of the American Association of University Professors. This statement is derived in substantial measure from the June 1987 revisions of AAUP *1966 Statement on Professional Ethics*.

Faculty members have responsibilities to their students. They shall encourage in students the free pursuit of learning and independence of mind, while holding before them the highest scholarly and professional standards. Faculty members shall show respect for the student as an individual and adhere to their proper role as intellectual guides and counselors. They shall endeavor to define the objectives of their courses and to devote their teaching to the realization of those objectives; this requires judicious use of controversial material and an avoidance of material which has no relationship to the objectives of a course.

Faculty members shall make every reasonable effort to foster honest academic conduct and to assure that their evaluations reflect, as nearly as possible, the true merit of the performance of their students, regardless of their race, color, national origin, sex, sexual orientation, genetic information, gender identity, gender expression, age (40 or

older), religion, disability, political beliefs, or status as a veteran. Faculty members shall avoid any exploitation of students for private advantage and shall acknowledge significant assistance in scholarly pursuits from them.

Faculty members have responsibilities to their colleagues, deriving from common membership in a community of scholars. They shall respect and defend the free inquiry of their associates. In the exchange of criticism and ideas, they should show due respect for the opinions of others. They shall acknowledge their academic debts and strive to be objective in the professional judgment of their colleagues. Although service must be voluntary, faculty members should accept a reasonable share of the responsibility for the governance of their institution. If driven by his or her conscience into dissent, the faculty member shall take care that this dissent does not interfere with the rights of colleagues and students to study, research, and teach.

Faculty members have responsibilities to their discipline and to the advancement of knowledge generally. Their primary obligation in this respect is to seek and to state the truth as they see it. To this end, they shall devote their energies to developing and improving their scholarly competence. They shall exercise critical self-discipline and judgment in using, extending, and transmitting knowledge, and they shall practice intellectual honesty.

Faculty members have responsibilities to the educational institution in which they work. While maintaining their right to criticize and to seek revisions, they shall observe the stated regulations of the institution, provided these do not contravene academic freedom. When considering the amount and character of the work they do outside their institution, faculty members must have due regard to their paramount responsibilities within the University and the applicable University policies governing outside employment. All such work at the Health Sciences Center is governed by the Professional Practice Plans of the various colleges.

(Regents, 12-3-02, 6-25-08, 12-7-12, 6-24-15)

### 3.4 FACULTY ACCOUNTABILITY

A faculty member is held accountable for his or her performance in fulfilling faculty duties (Section 3.5) and in meeting the requirements of academic responsibility (Section 3.3) and University policies.

- (a) Persons who accept full-time employment at the University owe their first duty to the University. Any other employment or enterprise related to the profession for which they are employed at the University, must be secondary to their University duties. During the appointment period, all outside work related to the profession for which they are employed at the University must be conducted through a University contract and all funds generated, if any, must be deposited into University accounts, per the respective colleges' Professional Practice Plans. Unless the Professional Practice Plan provides otherwise, agreements to review scholarly publications and grant submissions for which no contract or compensation is provided are not considered to be outside work. Failure to comply with the Professional Practice Plan may result in sanctions and disciplinary actions. See Section 3.16 (e).
- (b) The obligations of a faculty member to the University are not limited to meeting classes. There are obligations which include, but are not limited to, advising students; conducting research or scholarly activity; meeting clinical assignments; providing patient care and supervising students and/or trainees; reading and remaining professionally competent; attending professional meetings; and participating in essential committee work of the department, the college, and the University as a whole.
- (c) The most immediate agent of faculty accountability is the faculty member's chair or direct supervisor, who should maintain close and regular communication with the faculty member. Among the various mechanisms for ensuring faculty accountability, the most important include annual evaluations and such periodic evaluations as those for advancement in rank. These processes should serve to identify and reward meritorious performance as well as to identify areas that need improvement.
- (d) Meritorious, proficient and responsible faculty performance is first and foremost an individual professional obligation. But it is also the product of a cooperative effort by faculty members and administrative officers – assisting one another, informing one another, jointly seeking to assure that each faculty member's capabilities are developed fully and creatively. Both the academic unit and the individual faculty member have responsibility to take the necessary steps to overcome performance that is marginal or needs improvement. Just as faculty members are held accountable for their performance; administrators of

academic units are held accountable for their leadership in the career development of the faculty in their academic units. Career development remains primarily the responsibility of the faculty member.

- (e) Regular and frequent collegial interactions among students, staff, and faculty are essential to maintaining the integrity of the University as a scholarly community, developing a healthy institutional culture, and ensuring the success of the Health Sciences Center. To meet these goals and effectively perform one's duties and obligations to the University, faculty accountability is expected.
- (f) Concerns regarding a faculty member's performance may originate from the students, from faculty colleagues, staff or from administrative personnel. Whenever such a concern is included in the personnel record of the faculty member, or whenever the allegation is the basis for further action or administrative remedies by the department chair, dean, or Senior Vice President and Provost against a faculty member, the faculty member should be notified promptly by the individual initiating the action or administrative remedy.
- (g) Administrative remedies, including counseling, career development support, reprimands and minor sanctions, are available to academic units as a means of attempting to remediate inadequate professional performance or breaches of academic responsibility. If a faculty member's inadequate professional performance or breach of academic responsibility continues, then the dean or Senior Vice President and Provost may consider applying a minor sanction, such as a formal reprimand. For those cases where they are needed, the University has at its disposal the more drastic measures of abrogation of tenure, termination, severe sanctions, or summary suspension. (Section 3.16)

(Regents, 1-26-99, 12-3-02, 6-25-08, 12-7-12, 9-14-17)

### 3.5 PROFESSIONAL ACTIVITIES OF THE FACULTY

Above all else, the University exists for learning and scholarship of a breadth and depth that result in excellence in all of the University's major functions: teaching, research and creative/scholarly activity, and professional and University service and public outreach. As such, learning and scholarship may be discipline-centered or interdisciplinary and inter-professional. Each academic unit has an obligation to contribute to each of the functions of the University. Faculty members play a central role in the realization of these functions and fulfill the obligations of the academic unit by contributing their unique expertise and competence. Decisions regarding tenure, promotions, and salary increases are based upon an assessment of the faculty member's performance and contribution to the total mission of the University (Section 3.2, 3.6, 3.8, and 3.9).

(Regents, 12-7-12)

#### 3.5.1 Teaching

Teaching, which is the transmission of knowledge and cultural values, focuses upon helping students and trainees learn. As a part of its mission, the University is dedicated to undergraduate, graduate, professional, interdisciplinary, inter-professional, and continuing and professional education. The term teaching as used here includes, but is not restricted to, giving regularly scheduled instruction, directing graduate work, directing training grants, counseling, and advising students and trainees. This includes the direction or supervision of students and trainees in reading, research, clinical rotations, internships, residencies, or fellowships. Faculty supervision, advising, mentoring, or guidance of students and trainees in recognized academic pursuits that confer no University credit also should be considered as teaching. Faculty performing non-administrative professional duties for which they are employed shall be regarded as engaged in teaching when the clear and direct purpose and function of these activities is academic instruction. Professional librarians in the discharge of their professional duties shall be regarded as engaged in teaching.

Faculty members should excel in teaching and exhibit their command over the subject matter in classroom discussions, lectures, or clinical supervision. They should present material in an objective, organized way that promotes the learning process. They should be recognized by their students, trainees, and University colleagues as persons who guide and inspire learning. They should strive continuously to broaden and deepen their knowledge and understanding of their discipline, seek to improve the methods of teaching their subject, keep informed about new developments in their field, use appropriate instructional technologies, and prepare educational materials that are up-to-date and well-written.



Their influence and reputation as teachers may be evidenced by student, trainee, and peer evaluation as well as by authoring textbooks and by lectures and publications on teaching, learning, and/or learner assessment. Additionally, reputation may be evidenced by the publication of such instructional materials as laboratory or instructional manuals; teaching cases for classroom; simulation or standardized patients; and video or audio instruction such as podcasting, distance education tools, or development of multimedia instructional materials and computer-assisted learning or assessment techniques. Publication is noted to include peer review and dissemination via traditional or digital means.

(Regents, 7-15-96, 1-26-99, 12-3-02, 12-7-12, 9-14-17)

### 3.5.2 Research and Creative/Scholarly Activity

Research, which is the development, validation, and dissemination of new knowledge focuses upon faculty participation in the extension of knowledge and maintenance of professional development and vitality. The term *research* as used here is understood to mean systematic, original investigation directed toward the expansion of human knowledge or the solution of contemporary problems. *Creative/Scholarly activity* is understood to mean significantly original or imaginative accomplishment within the framework of the academic unit(s). Examples of scholarly activity might also include synthesis of new ideas as gleaned from published data, team science, individual or team-based technology transfer successes, patent awards, health system research, new application of information technology to improve education or health care, community-engaged scholarship, etc. The criteria for judging the original or imaginative nature of research or creative/scholarly activity must be the generally accepted standards prevailing in the applicable discipline or professional area. To qualify as research or creative/scholarly activity, the results of the endeavor must be disseminated either through publication in peer reviewed journals or presentation at national or international symposia, conferences, and professional meetings and must be subject to critical peer evaluation by established authorities outside the University in a manner appropriate to the discipline or professional area. It is expected that the significance of the research or creative/scholarly activity will be evaluated at the national and international levels. One element of such an evaluation would be the ability of the faculty member to successfully compete for, and acquire, peer-reviewed, extramural grant or contract funding.

(Regents, 7-15-96, 12-3-02, 9-14-17)

### 3.5.3 Professional and University Service and Public Outreach

- (a) Professional and University service and public outreach, which require the application of knowledge gained through research or creative/scholarly activity, focus upon resolving contemporary problems, identifying new areas for inquiry and development, and sharing knowledge with the larger community. Except as noted in (b) and (c) below, the term professional service always refers to activities directly related to the faculty member's discipline or profession.

Included in professional service are such activities as continuing education; artistic or humanistic presentations; official service in relevant commissions, advisory boards, or agencies (public or private) related to the faculty member's discipline or profession; service to professional communities outside the University; consultation; and participation in a specialized professional capacity in programs sponsored by student, faculty, or community groups.

Professional service also includes editing professional journals or other publications; writing book reviews in professional journals; and reviewing research papers and manuscripts submitted for publication.

Other examples of professional service include clinical service contributions such as health care delivery; clinical leadership as evidenced by serving as head of a division, department, or specific clinic service; acquisition and introduction or development of new health care techniques, procedures, or clinical approaches; demonstrable improvement (quality, utilization, access) in delivery of health care; dissemination and implementation in community practice; and contribution to clinical service lines.

Examples of public outreach include such activities as development of community health-related outreach programs; participation in approved, non-compensated, community health related public outreach efforts; improvement in clinical management; and management of facility-based functions such as quality improvement, infection control, utilization review.

- (b) The nature of the academic enterprise is such that the faculty properly shares in responsibilities involving the formulation of the University's policies by participation in University governance. The faculty has a



major responsibility in making and carrying out decisions affecting the educational and scholarly life of the University. Faculty members have a responsibility to contribute to the governance of the University through timely participation on committees, councils, or other advisory groups at the department, college, or University level, and through service within the University that reflects an application of specialized knowledge or skill to the University's affairs.

(c) Other areas of activity in which faculty members may have assignments include:

- 1) **Administration.** Many faculty members are called upon to perform administrative tasks. These include service in such positions as department chair, associate or assistant dean, or director of a program, center, or institute.
- 2) **Public Relations.** On occasion, the University's interests are served by requesting faculty members to perform public relations tasks that might not necessarily involve the faculty member's discipline. These may include participation in a professional capacity in programs sponsored by student, faculty, or community groups or appearances as a University representative before government bodies or citizen groups.

(Regents, 12-7-12, 9-14-17)

### 3.5.4 Public Outreach Policy

#### (a) Public Outreach Defined

As part of its overall mission, the OUHSC is committed to improving the health of the citizens of Oklahoma, the nation, and the world. This includes the faculty members' professional service efforts via the colleges' group practice plans, as well as their approved, non-compensated, community health related public outreach efforts ("Public Outreach"). Faculty participation in civic activities such as serving on an art museum board, or school board, or on church related activities is not included in this definition of Public Outreach, and as such is not governed by this policy.

Public Outreach creates opportunities for OUHSC faculty and students to provide better, more culturally competent health care in the community and/or to share their scientific research knowledge with the community toward this end. Public Outreach also helps OUHSC faculty and students learn to be responsive to the needs of our diverse population.

#### (b) Criteria Governing Public Outreach Activities

Faculty members may be permitted to dedicate University time and professional service to Public Outreach if they (a) demonstrate that the proposed Public Outreach effort furthers the mission of the OU Health Sciences Center; b) demonstrate that the proposed Public Outreach effort meets each of the following three criteria; and c) obtain approval from the department chair:

- 1) is not compensated
- 2) if applicable, is covered by the faculty member's malpractice insurance
- 3) does not conflict with a faculty member's primary responsibilities as a University employee or impact that needs or resources of the department

#### (c) PPP Exception for Certain Public Outreach Activities

A faculty member who is subject to his/her college's Professional Practice Plan (PPP) may be permitted to dedicate, for the purpose of Public Outreach, time and professional service, as defined under the PPP, with approval by the department chair, if the proposed Public Outreach effort meets each of the following:

- 1) is not compensated
- 2) if application, is covered by the faculty member's malpractice insurance
- 3) does not conflict with a faculty member's primary responsibilities as a University employee, or impact the needs or resources of the department

The faculty member must be in compliance with all other requirements of the PPP and the faculty member's appointment.

(d) **Template Agreement**

It is a University requirement that an agreement be in place for professional and Public Outreach services of OUHSC employees with outside entities. A template for Public Outreach activities has been prepared. The template can be found at the respective college's web site. Faculty desiring to participate in Public Outreach activities that meet the criteria listed above must complete the template and obtain the appropriate signatures indicated on the template prior to beginning the activity. A signed copy of the template must be forwarded to the Dean's Office and to the department.

(Administrative policy of the Senior Vice President and Provost – Revised September 2011)

### 3.6 FACULTY EVALUATION

The evaluation of faculty performance is a continuous process. The fundamental purpose of periodic performance reviews is to identify areas of faculty accomplishments and areas of faculty performance deficiencies and provide such faculty opportunities and incentives to correct the deficiencies. An annual review of each faculty member's performance is the responsibility of the chair or director of the specific academic unit with review by the dean. The chair or director must provide direct, balanced, and thorough feedback in writing to the faculty member relative to the faculty performance evaluation each year. The evaluation should contain sufficient specificity to identify areas of strength and those areas where improvement is needed. A systematic procedure for accomplishing such evaluations shall be developed in each academic unit with the participation and approval of the dean and Senior Vice President and Provost.

The criteria for evaluation shall be carefully and clearly stated and must be in accord with Sections 3.4 and 3.5. Specific faculty assignments within an academic unit and the specific mission of a particular academic unit may modify the relative weight given to any specific area of professional activity from time to time depending on University or academic unit needs. Such modifications should be conveyed in writing by the head of the academic unit prior to implementation.

Tenure decisions, non-renewal of tenure track and consecutive term appointments, salary adjustments, and promotions in rank shall be based on systematic evaluations of faculty performance in the areas specified by the department chair and will include teaching, research and creative/scholarly activity, and professional and University service and public outreach, as well as the needs of the department and college. An assessment of the faculty member's overall contribution to the college and the mission of the University, as well as that person's adherence to the standards of faculty accountability as noted in Section 3.4, must be included in any faculty evaluations.

(Regents, 12-3-02, 6-25-08, 12-7-12, 9-14-17)

### 3.7 SALARY ADJUSTMENTS

- (a) The most frequent reflection of a continuing faculty evaluation system is in the annual recommendations for merit salary increases. Deserving faculty should be rewarded, within the limits of the financial resources of the University, for excellent performance as set out in the specific criteria for evaluation of faculty performance (Sections 3.4 and 3.5).
- (b) In certain circumstances salary increases may cause the salary of a faculty member to equal or exceed the salary of faculty in higher ranks.
- (c) Faculty assignment of administrative or managerial responsibilities may require additional salary adjustment commensurate with assigned duties.
- (d) Under no circumstances will increases in salary be based upon race, color, national origin, sex, sexual orientation, genetic information, gender identity, gender expression, age (40 or older), religion, disability, political beliefs, or status as a veteran.

(Regents, 12-7-12, 6-24-15, 9-14-17)

### 3.7.1 Procedures for Salary Adjustments

- (a) The chair of the academic unit will annually collect (1) achievement data from all academic unit faculty and (2) evaluations of each faculty member's performance from those who are in supervisory positions and from other sources.
- (b) For each recommended salary adjustment, the chair will prepare a justification for the recommendation based on the faculty member's performance of their education, research and creative/scholarly activity, professional associations, and university service and public outreach, or administrative responsibilities, as well as on the faculty member's clinical service contributions based on the College's professional practice plan and forward to the dean.
- (c) The dean will review each recommendation and notify the chair of any changes or adjustments made.
- (d) The salary recommendations from the college will be forwarded from the dean to the Senior Vice President and Provost for additional discussion, further recommendations, and administrative action.
- (e) The chair will discuss with each faculty member the reasons for the salary recommendation that was made as soon as feasible following final approval.

(Regents 12-7-12, 9-14-17)

- (f) Upon occasion, adjustments in salary may be needed to correct inequities caused by annual variations in available funds, changing conditions in the academic profession or in the economy, or other elements beyond the University's control. The responsibility for recommending adjustments, where needed, lies primarily with the dean. After consultation with the appropriate academic unit, the dean recommends to the Senior Vice President and Provost specific salary adjustments to correct evident inequities. Such adjustments should be made as funds are available.

(Regents, 12-3-02, 6-25-08, 9-14-17)

## 3.8 FACULTY TENURE

The granting of tenure implies a mutual responsibility on the part of the University and the tenured faculty member. Tenure is designed as a means to protect the academic freedom of faculty members and to assure freedom of scholarship and teaching by professional scholars and teachers. The right to academic freedom does not diminish the faculty member's responsibilities under [Section 3.4](#), Faculty Accountability. In granting tenure to a faculty member, the University makes a commitment to the faculty member's continued employment subject to certain qualifications ([Section 3.16](#)). The University expects that tenured faculty members will maintain the level of performance by which they initially earned tenure. Only the portion of annual base salary (for example, in the College of Medicine, the University base [X1]) paid by the University is committed in the granting of tenure unless otherwise agreed to in writing by the chair of the academic unit, the dean of the college, the Senior Vice President and Provost, the President, and the Board of Regents.

### 3.8.1 Definitions

- (a) The term **academic year** refers to the period July 1 through June 30.
- (b) The term **tenure** means continuous reappointment to an achieved academic rank. Tenure must be granted or denied by specific action of the Board of Regents.
- (c) The term **pre-tenure period** refers to the period of employment at the University in a tenure track appointment prior to the time the faculty member is evaluated for the granting of tenure. Full-time tenure track faculty will generally have a pre-tenure period of six (6) years. Thus, the tenure application will be submitted no later than the fall of the seventh academic year. In certain circumstances, and in consultation with the faculty member, the chair of the academic unit and dean may request an extension of the pre-tenure period not to exceed three (3) years. If a pre-tenure extension is granted, the tenure application must be submitted no later than the fall of the last extension year.

- (d) The term **prior service** means academic employment at an institution of higher education (including the University of Oklahoma).

### 3.8.2 Fiscal Responsibility

In each case where a tenure-track position is proposed, there must be assurance from the chair of the academic unit to the dean that continuing financial support (for the College of Medicine, annually allocated funds) is identified to fund the salary line. The Senior Vice President and Provost, in conjunction with the respective deans, shall determine whether funds are sufficiently secure to support the awarding of tenure.

### 3.8.3 Pre-tenure Period

- (a) Full-time tenure track faculty will generally have a pre-tenure period of six (6) years. Thus, the tenure application will be submitted no later than the fall of the seventh academic year. In certain circumstances, and in consultation with the faculty member, the chair of the academic unit and dean may request an extension of the pre-tenure period not to exceed three (3) years. If a pre-tenure extension is granted, the tenure application must be submitted no later than the fall of the last extension year.
- (b) The first year of the pre-tenure period for a faculty member whose effective date of service is between July 1 and December 31 will be that academic year. If the effective date of service is between January 1 and June 30, the first year of the pre-tenure period will begin with the next academic year.
- (c) For assistant professors, the pre-tenure period may include up to a total of three years in prior full-time service in a consecutive term or tenure track appointment at the University or in comparable professorial ranks at another institution. For associate professors and professors, up to a total of four years of prior service at the University or in professorial rank at another institution may be included. The faculty member must request in writing at the time of the first regular tenure track appointment that prior service be included. Inclusion of prior service requires approval by the chair of the academic unit, the dean, and the Senior Vice President and Provost.
- (d) A new faculty member appointed at the rank of associate professor or professor may be considered for tenure from the date of appointment provided the faculty member prepares and timely submits the appropriate documentation, per [Section 3.8.5](#), no later than the next annual tenure and promotion cycle. The determination of tenure shall be made as specified in [Section 3.8.4](#) and [Section 3.8.5 \(b\) through \(r\)](#).
- (e) Tenure may be recommended by an academic unit for faculty members of high merit prior to the end of the pre-tenure period. An academic unit's recommendation to grant early tenure should be based on exceptional performance for at least two years at the University. If early tenure is not granted the faculty member may, subject to contract continuation or renewal, continue to serve in the pre-tenure period and be considered for tenure at the end of the pre-tenure period without prejudice.
- (f) When a non-tenured part-time faculty member changes from part-time to full-time tenure track status, specific written understanding among the faculty member, chair, and dean must be approved by the Senior Vice President and Provost at the time of the change as to how, if at all, the period of part-time service may be counted toward satisfying the pre-tenure period.
- (g) A maximum of one year of leave of absence without pay may be counted as part of the pre-tenure period, provided the chair of the academic unit records in advance of the leave in writing the agreement with the faculty member as to how the professional activities carried out during the leave will be appropriately evaluated by the chair and secures approval by the dean and Senior Vice President and Provost.
- (h) If a tenure track faculty member takes extended leave, for six or more consecutive months, the pre-tenure period prior to a tenure decision may be extended for one year at the written request of the faculty member with the approval of the chair of the academic unit, dean, and Senior Vice President and Provost.
- (i) A faculty member at any rank who is denied tenure shall be retained until the end of the academic year following that year in which tenure was denied (i.e., the terminal year) unless the faculty member is

dismissed according to [Section 3.16](#). An appeal of denial of tenure shall not have the effect of extending the faculty member's terminal year.

Under certain extraordinary circumstances due to the University's clinical care, service, or teaching obligations, a faculty member who has been denied tenure may be granted a consecutive term or temporary appointment upon recommendation by the chair of the academic unit, dean, and Senior Vice President and Provost and approved by the Board of Regents.

- (j) Faculty members granted tenure will normally commence their tenured appointments in the academic year immediately following the Board of Regents' action.

#### 3.8.4 Criteria for the Tenure Decision

The decision that the University makes in granting tenure is crucial to its endeavors toward academic excellence. A decision to grant tenure must reflect an assessment of high professional competence and academic performance measured against national standards in the discipline or professional area. Tenure should never be regarded as a routine award based upon length of service.

The tenure decision shall be based on a thorough evaluation of the candidate's total contribution to the college and the mission of the University and of the candidate's adherence to the fundamentals of faculty accountability as noted in [Section 3.4](#). While specific responsibilities of faculty members may vary because of special assignments or the particular mission of the academic unit, all evaluations for tenure shall address the manner in which each candidate has performed in:

- (1) Teaching ([Section 3.5.1](#))
- (2) Research and Creative/Scholarly Activity ([Section 3.5.2](#))
- (3) Professional and University Service and Public Outreach ([Section 3.5.3](#))

All candidates for tenure must have demonstrated a record of substantial accomplishment in each of the three areas (teaching, research and creative/scholarly activity, and professional and University service and public outreach) and evidence of excellence in two areas. In order for tenure to be granted, the faculty member has must document a record of scholarly attainment in teaching, research and creative/scholarly activity, and professional and University service and public outreach.

Each college, with the approval of the dean and the Senior Vice President and Provost, shall establish and publish specific criteria for evaluating faculty performance in teaching, research and creative/scholarly activity, and professional and University service and public outreach. The criteria must be made available to the faculty in that college. The criteria which the departments and colleges establish normally reflect more specific standards for both promotion and tenure than those described in general terms in the *Faculty Handbook*, [Section 3.8.4](#). These department and college criteria must be in accord with and may not supersede the criteria described in this section. The criteria for tenure will be in full force unless an exception is specified in writing. Consequently, all faculty should also become familiar with the departmental, college, and University criteria.

Any exception to faculty evaluation on performances in each of the three areas of teaching, research and creative/scholarly activity, and professional and University service and public outreach must be documented in writing at the time the exception is made. The exception must be agreed upon by the faculty member and the department chair, and approved in writing by the dean and Senior Vice President and Provost.

As part of the overall tenure process, the department chair should provide the opportunity for faculty to receive advice on a regular basis as they develop their careers. Annual written evaluations of faculty by department chairs are essential to the faculty development process and are an annual requirement that each department chair must fulfill. ([Section 3.6](#)).

If the criteria for tenure are changed by the Board of Regents during a faculty member's pre-tenure period, the faculty member may elect to be evaluated under the approved criteria in effect at the beginning of the faculty member's pre-tenure period.

The granting of tenure carries with it the expectation that the University will continue to need the services of the faculty member and that the financial resources will be available for continuous employment. It also carries the expectation that the faculty member will maintain or improve upon the level of professional competence and academic performance required for tenure. The performance of all faculty, both prior to and following the granting of tenure, is to be evaluated annually as part of the University's faculty evaluation process (Section 3.6).

### 3.8.5 Procedures for Tenure Decision

- (a) The chair of the academic unit shall notify a faculty member who is eligible for tenure consideration at least six months before the date tenure materials are to be submitted to the department chair.
- (b) The chair of the academic unit will request the candidate for tenure to submit material that will be helpful to provide a thorough representation of the faculty member's performance or professional activities in relation to the tenure criteria. It is the responsibility of the candidate to provide accurate, thorough, and clear evidence of accomplishments for review at the departmental, college, and University levels. The candidate is advised to consult with the chair and any other senior colleagues concerning the materials to include.
- (c) Responsibility for gathering complete documentation of professional activity rests with the individual faculty member. The chair shall assist the faculty member, upon request, in determining what to include in the tenure documentation. The chair also may solicit information to include with the faculty member's tenure documentation. The faculty member is entitled to review the information in his/her tenure file. However, letters of evaluation and/or recommendation that are solicited in confidence or sent with the expectation of confidentiality shall be deemed confidential and unavailable to the faculty member unless otherwise ordered by a court of law.
- (d) Documentation of the faculty member's academic accomplishments should include, but not be limited to the following:
  - 1) Complete and up-to-date curriculum vita, including a summary of college and university degrees earned; all professional employment; all professional honors and awards; and an up-to-date list of professional publications by author in sequence. Manuscripts in press or submitted for publication and abstracts should be listed separately.
  - 2) Letters of evaluation of academic performance in teaching, research and creative/scholarly activity, and professional and University service and public outreach should be solicited by the chair after consulting with the candidate. Where relevant, letters of evaluation should in particular address the candidate's role in interdisciplinary/team-based research. There should be three letters of evaluation from individuals outside the University of Oklahoma who are considered established authorities in the discipline and who are in a position to evaluate the candidate's academic performance and suitability for tenure. These letters may be solicited from individuals who were not suggested by the candidate. There may also be up to three local letters to document an assessment of an individual's contributions to and accomplishments in activities such as teaching, team-based research, interdisciplinary educational or research projects, and University and/or clinical service.
  - 3) Documentation of teaching accomplishments should reflect the candidate's contribution, quality, innovation, and impact of teaching. This might include summary documentation of teaching evaluations by students; notation of teaching awards; and description of teaching responsibilities, materials, and techniques which are unique and demonstrate innovative approaches or outstanding quality in undergraduate, graduate, or professional instruction (e.g., integration of multimedia into courses, development of web-based content and course materials, computer software development, creation of innovative laboratory exercises, simulation techniques, and interdisciplinary education).
  - 4) Documentation of research and creative/scholarly accomplishments should reflect the level and quality of the candidate's research and creative/scholarly activity. Recognition of research and creative/scholarly accomplishments could be demonstrated by chairing or organizing symposia or editing books or journals in the professional or inter-professional discipline; publishing books, book chapters, policy briefs, and articles in peer-reviewed journals; publishing abstracts; participating as a

presenter in national/international symposia, conferences, and professional meetings; the ability to acquire extramural grant or contract funds, as a principal investigator, or as a multiple-principal investigator on interdisciplinary and team-based research extramural grants or contracts funded through peer review mechanisms; and entrepreneurial activity including patents, copyrights, and trademarks.

- 5) Documentation of professional and University service and public outreach, which may include clinical service contributions, should reflect the level and quality of the candidate's professional, inter-professional, and/or clinical service contributions. Documentation might consist of leadership positions in local, state, or national associations; service on advisory boards for granting agencies; outstanding college or University committee work; consultantships; clinical and administrative leadership as evidenced by serving as head of a division, department, specific clinic service, research center, or core facility; evidence of acquisition, introduction, or development of new health care techniques, procedures, or clinical or professional practice approaches; development and evaluation of community health-related outreach programs; improvement in clinical, administrative unit, center or facility management; documentation of increased referrals or professional service contracts; demonstrable improvement (quality, utilization, access) in delivery of health care or other professional services; and related published manuscripts and abstracts, including those of clinical case studies, monographs, reviews, reports to administrative agencies, and book chapters.
- (e) The chair of the academic unit is responsible for providing copies of the candidate's complete tenure file to each of the tenured faculty of the academic unit at least two weeks prior to the vote.
  - (f) All tenured faculty in the academic unit who are available shall meet for a discussion of the candidate's qualifications for tenure. The candidate shall not be present during the discussion of his or her qualifications but shall be available to enter the meeting on invitation to answer questions or clarify qualifications.

Formal consideration for tenure shall originate with the polling by secret ballot of all tenured faculty of the candidate's academic unit, including, when practical, those who are on leave of absence. The chair of the academic unit or other administrative personnel required to submit a separate tenure recommendation shall not participate in this vote.

At times the small number of tenured members of an academic unit (fewer than five) prevents appropriate academic unit tenure review. In such instances, the dean of the college, in consultation with the chair of the academic unit involved, shall establish an *ad hoc* tenure review committee by selecting a sufficient number of tenured University faculty to constitute a total of five members to serve as the candidate's academic unit tenure review committee.

When a tenure proceeding is initiated prior to the last pre-tenure year ([see Section 3.8.3 \(e\)](#)) and the result of the faculty vote is negative, that information shall not be forwarded, and tenure will be considered at the end of the pre-tenure period without prejudice.

- (g) The chair shall submit a separate tenure recommendation with supporting reasons.
- (h) All recommendations concerning tenure shall be in writing and, with exception of the faculty recommendation resulting from the confidential poll within the department, reasons for the recommendation must be stated at the time recommendations are made. At the time recommendations are made at each stage of the review process (chair, dean, Campus Tenure Committee, Senior Vice President and Provost, President), written notification of such recommendation must be provided to the chair and to the candidate by the person or committee making the recommendation.
- (i) Copies of the academic unit's and chair's recommendations and all appropriate documentation upon which recommendations were based will be forwarded to the appropriate dean. Each dean will have an advisory council for tenure review and may also request information and advice from any source.
- (j) Upon receipt of the advisory council recommendation, and after due deliberation, the dean may recommend to grant tenure, to deny tenure, or to defer tenure consideration for a specified period of time. The dean will attach a recommendation with supporting reasons to the tenure materials, including the



recommendation of the advisory council; forward all materials to the Campus Tenure Committee, and notify the candidate and the chair of the academic unit of the recommendation.

- (k) The Campus Tenure Committee will be composed of thirteen tenured faculty members recommended by the Faculty Senate (two from each college, excluding the Graduate College, and one from the Tulsa campus) on staggered three-year terms, and approved by the President. To avoid a conflict of interest, Campus Tenure Committee members shall recuse themselves from the discussion and from the vote on candidates from their own academic unit.
- (l) In determining its recommendation, the Campus Tenure Committee may request information or advice from any source. The tenure file will be returned to the academic unit for remedy or correction if there are deficiencies found in the academic unit's recommendation.
- (m) The Campus Tenure Committee shall provide the Senior Vice President and Provost with input as to whether the academic unit's recommendation is consistent both as to substance and process with the approved tenure criteria [\(Section 3.8.4\)](#).
- (n) The Campus Tenure Committee will attach its recommendation to the tenure materials; forward all materials to the Senior Vice President and Provost with supporting reasons; and notify the candidate, the chair of the academic unit, and the college dean of its recommendations.
- (o) The Senior Vice President and Provost may request information and advice from any source prior to making a recommendation.
- (p) If the Senior Vice President and Provost plans to submit a recommendation contrary to that of the Campus Tenure Committee, the Senior Vice President and Provost shall notify the chair of the Campus Tenure Committee in time to allow a thorough discussion between them before this recommendation is made.
- (q) After due deliberation, the Senior Vice President and Provost may recommend to grant tenure, to deny tenure, or to defer tenure consideration for a specified period of time. The recommendation of the Senior Vice President and Provost will be submitted to the President.
- (r) If the President plans to submit a recommendation contrary to that of the Senior Vice President and Provost and/or the Campus Tenure Committee, the President shall notify the appropriate party(ies) in time to allow a meeting between the President and the party(ies) prior to submitting a recommendation.
- (s) The President will notify the faculty member, chair, dean, and Senior Vice President and Provost by May 31 of the tenure decision, except when an appeal is pending.
- (t) The faculty member under review may appeal in writing to the Faculty Appeals Board at any time during the tenure review process if the faculty member believes that procedural violations have occurred or academic freedom has been violated. Appeals on these bases must be made within 30 calendar days after the faculty member's discovery of the alleged violation.

If the faculty member believes he/she has been discriminated against during the tenure review process, the faculty member may appeal discrimination on the basis of race, color, national origin, sex, sexual orientation, genetic information, gender identity, gender expression, age (40 or older), religion, disability, political beliefs, or status as a veteran to the University Institutional Equity Officer. Appeals on these bases must be made within 180 calendar days after the faculty member's discovery of the alleged violation.

The tenure review process is suspended while an appeal to either the Faculty Appeals Board or University Institutional Equity Officer is pending. When the tenure appeal prevents the tenure process from being completed before the end of the terminal year [\(Section 3.8.3\(j\)\)](#), the appeal shall not extend the faculty member's terminal year, even if the appeals process is not completed at the end of the terminal year. If the appeal is ultimately granted, the tenure review process will resume where it was suspended. If the faculty member is ultimately granted tenure at the completion of the tenure review process and that faculty member had been dismissed at the end of the terminal year, the faculty member will be reinstated with



back pay of base salary and applicable fringe benefits that would have been earned from the date of termination to the date of reinstatement.

(Regents, 7-15-96, 1-26-99, 12-3-02, 6-25-08, 12-7-12, 6-24-15, 9-14-17)

### 3.9 FACULTY PROMOTION

A promotion reflects a positive appraisal of high professional competence and accomplishment as judged and evaluated by individuals in the faculty member's profession at the local, regional, national, or international level as appropriate to the rank being sought, and by individuals within the University (see [Section 3.9.1](#)). Promotion decisions are made independently from tenure decisions.

#### 3.9.1 Criteria for Promotion

Decisions to promote a faculty member must be made in light of a thorough evaluation of the faculty member's performance in all the areas of faculty activity ([Sections 3.5.1, 3.5.2, and 3.5.3](#)) as specified in the department and college promotion and tenure criteria and procedures. Promotion criteria for tenure track faculty must mirror those criteria for tenure contained in [Section 3.8.4](#).

Internal candidates applying for an open position of higher rank must meet the promotion and advancement criteria stated in [Section 3.9](#).

Each department and college must have a document that sets forth the standards and procedures governing promotion of faculty within that department and college. The department and college documents may specify standards that are more specific than those of the University, provided they do not conflict with the standards of the University, and the procedures must be consistent with the procedures described herein. The document must be approved by the faculty of the college, the dean, and the Senior Vice President and Provost. The document must be distributed or made available to the faculty of the academic unit.

The candidate's performance will be measured against the following institutional criteria, in addition to the criteria defined in the department and college promotion documents:

- (a) Promotion to assistant professor is usually based on an advanced degree and/or certifications(s) that are standard prerequisites for an academic appointment in the discipline, appropriate experience, and promise for academic accomplishment.
- (b) While early consideration is possible, promotion to associate professor is usually based on five (5) or more years as an assistant professor; a sustained record of academic accomplishment in teaching, research and creative/scholarly activity, and professional and University service and public outreach; and strong academic performance and promise. This record of accomplishment must document an emerging reputation of local, regional, national, or international scope in the candidate's academic field. Professional publications are an important element in assessing regional or national recognition. Other factors may also be considered, such as presentations at conferences and leadership roles in professional societies.
- (c) While early consideration is possible, promotion to professor is a high honor and is usually based on five (5) or more years as an associate professor and demonstration of superior achievements and continued excellence in academic endeavors. Faculty promoted to this rank should have achieved national or international recognition for work in their respective disciplines, as evidenced by major contributions to teaching, research and creative/scholarly activity, and professional and University service and public outreach.
- (d) Length of time in a given rank is not in itself a sufficient reason for promotion.
- (e) Promotion should indicate that the faculty member has comparable accomplishments to others in the same rank and discipline at peer institutions.

### 3.9.2 Procedures for Promotion

- (a) The process regarding advancement in rank shall originate in the academic units, according to timelines determined by the Senior Vice President and Provost.
- (b) The college dean or the Senior Vice President and Provost may require the chair of an academic unit to initiate consideration of promotion for an individual faculty member. In such a case, the academic unit must forward a recommendation to the dean or Senior Vice President and Provost, whether or not it is favorable.
- (c) Primary responsibility for gathering complete information on professional activity rests with the individual faculty member. In general, documentation of the individual's academic accomplishments should include, but not be limited to the following:
  - 1) Complete and up-to-date curriculum vita, including a summary of college and university degrees earned; all professional employment; all professional honors and awards; and an up-to-date list of professional publications by author in sequence. Manuscripts in press or submitted for publication and abstracts should be listed separately.
  - 2) Letters of evaluation of academic performance in teaching, research and creative/scholarly activity, and professional and University service and public outreach will be solicited by the chair after consulting with the candidate. Where relevant, letters of evaluation should in particular address the candidate's role in interdisciplinary/team-based research. There should be three (3) letters of evaluation from individuals outside the University of Oklahoma who are considered established authorities in the discipline and who are in a position to evaluate the candidate's academic performance and suitability for promotion. These letters may be solicited from individuals who were not suggested by the candidate. There may also be up to three (3) local letters to document an assessment of an individual's contributions to and accomplishments in activities such as teaching, team-based research, interdisciplinary educational or research projects, and University and/or clinical service. Letters of evaluation and/or recommendation that are solicited in confidence or sent with the expectation of confidentiality shall be deemed confidential and unavailable to the employee unless otherwise ordered by a court of law.

Examples of documentation of teaching, research and creative/scholarly activity and professional and University service and public outreach accomplishments are noted in [Section 3.8.5 \(d\) \(3\)\(4\)\(5\)](#).

- (d) All faculty who hold Regular Faculty appointments in the primary department who are of equal or higher rank to that for which the candidate is being considered and who are available shall meet for a discussion and vote on the candidate's qualifications for promotion.

Formal consideration for promotion shall originate with the polling by secret ballot of all faculty of equal or higher rank to which the candidate is being considered in the candidate's academic unit, including when practical, those who are on leave of absence. The chair of the academic unit or other administrative personnel required to submit a separate promotion recommendation shall not participate in this vote.

At times, the small number of members of an academic unit (fewer than five) prevents appropriate academic unit promotion review. In such instances the dean of the college, in consultation with the chair of the academic unit involved, shall establish an *ad hoc* promotion review committee by selecting a sufficient number of University faculty of equal or higher rank to that for which the candidate is being considered to constitute a total of five members to serve as the candidate's academic unit promotion review committee.

- (e) The chair shall submit a separate promotion recommendation with supporting reasons.
- (f) All recommendations concerning promotion shall be in writing and, with exception of the faculty recommendation resulting from the confidential poll within the department, reasons for the recommendation must be stated at the time recommendations are made. At the time recommendations are made at each stage of the review process (chair, dean, Senior Vice President and Provost, President),

written notification of such recommendation must be provided to the chair and to the candidate by the person or committee making the recommendation.

- (g) Copies of the academic unit's and chair's recommendations and all appropriate documentation upon which recommendations were based will be forwarded to the appropriate dean. If the college has a promotion's committee the dean will provide the committee with the promotion materials. If not, the dean will proceed per the procedures noted below.
- (h) Upon receipt of the college promotion committee recommendations, as applicable, the dean will attach a recommendation with supporting reasons to the promotion materials, including the recommendation of the college promotion committee, and forward all materials to the Senior Vice President and Provost.
- (i) The Senior Vice President and Provost may request information and advice from any source prior to making a recommendation.
- (j) After due deliberation, the Senior Vice President and Provost will make a recommendation to the President.
- (k) The President will notify the faculty member, chair, dean, and Senior Vice President and Provost by May 31 of the promotion decision, except when an appeal is pending.

Whenever possible, a promotion should be accompanied by an appropriate increase in salary. Promotions should not be delayed because of budgetary constraints. Promotions should be earned on their own right and not be used as substitutes for salary increases.

- (l) The faculty member under review may appeal in writing to the Faculty Appeals Board at any time during the promotion review process if the faculty member believes that procedural violations have occurred or academic freedom has been violated. Appeals on these bases must be made within 30 calendar days after the faculty member's discovery of the alleged violation.

If the faculty member believes he/she has been discriminated against during the promotion review process, the faculty member may appeal discrimination on the basis of race, color, national origin, sex, sexual orientation, genetic information, gender identity, gender expression, age (40 or older), religion, disability, political beliefs, or status as a veteran to the University Institutional Equity Officer. Appeals on these bases must be made within 180 calendar days after the faculty member's discovery of the alleged violation.

The promotion review process is suspended while an appeal to either the Faculty Appeals Board or University Institutional Equity Officer is pending. If the appeal is ultimately granted, the promotion review process will resume where it was suspended.

(Regents, 7-15-96, 1-26-99, 12-3-02, 6-25-08, 12-7-12, 9-14-17)

### **3.10 SABBATICAL LEAVE POLICY**

**Sabbatical Leave Application Deadlines:** Applications must be submitted to the department chair or director by February 1 for sabbaticals beginning in the following academic year or later and no later than July 15 for sabbaticals beginning the following spring semester. The application must be approved by the dean and the Senior Vice President and Provost.

#### **(a) Purpose**

Sabbatical leaves of absence are among the most important means by which an institution's academic program is strengthened and by which a faculty member's teaching effectiveness and scholarship are enhanced. The major purpose is to provide opportunity for continued professional growth and new or renewed intellectual achievement through study, research, writing, collaboration, and training.

A faculty member does not automatically earn a sabbatical leave. Instead, it is an investment by the University in the expectation that the sabbatical leave will significantly enhance the faculty member's ability to contribute to the mission of the University. There should be a clear indication that the experiences sought during a sabbatical will

benefit the work of the faculty member, department, college, and the University. Only sabbatical leave proposals that meet this criterion will be considered and approved by the University. Sabbatical leaves are supported as an investment in the future of the faculty member, the University, and students of the University.

The purposes for which a sabbatical leave may be granted may include, but are not limited to:

- 1) Research on significant problems and issues.
- 2) Important creative or descriptive work in any means of expression; for example, writing or developing innovative programs.
- 3) Postdoctoral study at another institution to update teaching skills or scientific capabilities.
- 4) Other projects that contribute to the University's mission.

The proposal shall document that such work cannot occur as effectively during the regular work schedule of the faculty member.

Normally, the University will not grant a sabbatical for the purpose of pursuing work on the terminal degree in the faculty member's academic field.

Adherence to the plan submitted by the faculty member is expected. Within two months of returning from leave, the faculty member shall submit to the chair or director a report of activities undertaken, which will be used in evaluating future applications for sabbatical leaves.

A faculty member who is on sabbatical leave shall not be penalized on matters of salary adjustment. The report on the sabbatical will be used in consideration for merit raises in subsequent years.

**(b) Conditions of Award**

Approval of a sabbatical leave of absence with full or partial base salary depends on the ability of the faculty member's college to absorb the financial obligation and on the college's ability to provide teaching without loss of quality.

A faculty member applying for a sabbatical leave and receiving a stipend for the same period from another institution or agency may still receive a sabbatical provided that the Senior Vice President and Provost deems that the additional stipend will be needed to prevent financial loss to the faculty member obtaining the sabbatical.

Normally, faculty on sabbatical leave at full base salary may not receive additional compensation from within the University for teaching in Advanced Programs, Liberal Studies, Intercession, or other University programs, or for participating in the faculty professional practice plans, since such activities would diminish the sabbatical time for study and creative activity. However, the Senior Vice President and Provost may approve exceptions provided that it appears to be in the best interest of the University. Faculty on sabbatical shall resign from all councils, standing committees, and administrative advisory committees of the University, except graduate students' committees, in order to devote their full time to their projects. The obligation to supervise and advance the work of graduate students shall continue during the sabbatical leave.

As a condition of receiving approval of a sabbatical leave, the sabbatical recipient shall sign a statement of commitment to return to the University for one year following the sabbatical or to remit the salary and cost of benefits received from the University during the sabbatical leave, unless this requirement is waived by the President in writing.

**(c) Benefits Payable**

- 1) Employment benefits for faculty members on sabbatical with full base salary will continue at full benefits levels.
- 2) Employment benefits for faculty members on sabbatical leave at less than full base salary will be as follows:

- i) Health, Accidental Death/Dismemberment, and Dental insurance will continue at full benefit level.
- ii) Social Security contributions will be based on the actual salary paid.
- iii) The amount contributed to the Defined Contributions Plan will be computed by reducing the salary that is exempt in the same proportion to the sabbatical FTE. For example, for 1.0 FTE employees the first \$9,000 of salary is exempt from contributions. Thus, for a faculty member on sabbatical leave at half pay (.50 FTE) for a year, the salary that is exempt from contributions will be reduced to \$4,500.
- iv) Faculty should consult the Office of Human Resources for information regarding the Defined Benefits Plan.

(d) **Eligibility**

The semesters that are counted toward eligibility for sabbaticals are the fall and spring semesters only and not the summer term or intersessions.

- 1) After six years of service, faculty with 12-month Regular Faculty appointments may be granted a sabbatical leave at half of base salary for a period not to exceed 12 months or at full base salary for a period not to exceed six months. After six years of service, faculty with nine- or ten-month Regular Faculty appointments may be granted a sabbatical leave at half of base salary for a period not to exceed two semesters or at full base salary not to exceed one semester. The term "six years of service" refers to full-time appointments in a Regular Faculty appointment at the University, but not counting leaves of absence without pay. The term "six years of service" also includes other full-time service at the University that has been included in the probationary period for tenure. Such service at other institutions of higher learning shall not be included.
- 2) A faculty member's eligibility to apply for subsequent sabbatical leaves is established by length of service following return from the previous sabbatical leave in accord with the schedule referred to above. Occasional exceptions to the rule may occur when a faculty member who is otherwise formally approved for a sabbatical leave is obliged to postpone it for the convenience of the University.

(e) **Procedures**

The procedure to be followed in applying for a sabbatical leave shall be as follows:

- 1) The faculty member shall submit the sabbatical leave application to the department chair or director. The department chair or director shall submit the application and his/her recommendation to the college dean by February 1 for sabbaticals beginning in the following academic year or later and no later than July 15 for sabbaticals beginning the following spring semester. The dean will hold all applications for comparative review and recommend, by ranking in order of merit, to the Senior Vice President and Provost. The Senior Vice President and Provost will recommend to the President, who will make recommendations to the Board of Regents for the April and September meetings, respectively.

(Regents, 5-11-78, amended 9-9-82, 4-12-84, 1-17-85, 7-23-87, 1-24-95, 1-27-04, 6-23-04, 6-25-08, 12-7-12, 9-14-17)

*(See Section 6 – Benefits, for additional Leave Policies)*

### **3.11 AWARDS**

The University recognizes outstanding teaching, research and creative/scholarly activity, and professional and University service and public outreach, by its faculty by presenting several annual awards to deserving nominees. Some awards are privately funded, and criteria and method of selection are set forth in joint University-donor contracts. The Senior Vice President and Provost, of the respective campus, will solicit recommendations for awards and announce appropriate schedules for processing the nominations.

### 3.11.1 Regents' Awards

The Regents' Award is an annual University-funded award that may be given for superior accomplishments of full-time Regular faculty in any of the following:

Superior Teaching  
 Superior Research and Creative/Scholarly Activity  
 Superior Professional and University Service and Public Outreach

#### (a) Nomination Procedure

- 1) The Senior Vice President and Provosts will solicit recommendations for the awards during the fall semester and announce appropriate schedules for processing the nominations.
- 2) An academic unit may submit no more than a total of two names for each of the Regents' Awards. The name of each person recommended for nomination by the academic unit should be supported by substantiating statements as described under Criteria for Selection. The suggested nominations and supporting information are to be sent to the dean of the academic unit. The dean will transmit to the appropriate Senior Vice President and Provost names of nominees and all substantiating data and will append, for each nominee, his or her own statement of endorsement. The Vice President for Research from each campus shall share in the evaluation of nominees for the Regents' Award for Superior Research and Creative/Scholarly Activity. The University Council on Faculty Awards and Honors will consider the nominations and make its recommendations through the Senior Vice President and Provosts to the President.

#### (b) Criteria for Selection

Supporting documentation should relate directly to the individual's accomplishments in the award area for which the individual is under consideration (teaching, research and creative/scholarly activity, and professional and University service and public outreach). The documentation should be derived from as many as possible of the following sources of evaluation: faculty colleagues; undergraduate, graduate, and professional students; residents; fellows; alumni; departmental chairs; and personnel committees; as well as from off-campus sources where appropriate.

#### (c) Selection Procedure

- 1) The University Council on Faculty Awards and Honors shall consider only formal nominations. The Council may seek additional data about the nominees from such sources as are appropriate.
- 2) The Council shall recommend to the President, through the Senior Vice President and Provosts, as many as nine faculty members for the awards, with the understanding the majority of the awards will be given for Superior Teaching. The Council also shall transmit all substantiating materials pertaining to all nominees. The Senior Vice President and Provosts will review the nominees and forward their recommendations, along with all substantiating materials, to the President, who will make recommendations to the Board of Regents for consideration.
- 3) The final selection of the recipients will be made by the Board of Regents.

#### (d) Announcement

The recipients of the Regents' Award for Superior Teaching, Regents' Award for Superior Research and Creative/Scholarly Activity, and Regents' Award for Superior Professional and University Service and Public Outreach will be announced by the Board of Regents at the Spring General Faculty Meeting.

#### (e) Perquisites

Each award will consist of affixing the recipient's name to a permanent plaque in a prominent and suitable location and a cash award of \$10,000. A certificate suitable for framing will be presented to the recipient.

(Regents, 5-11-78; amended 9-11-86, 6-27-95, 1-26-99, 1-27-04, 01-26-11, 12-7-12, 9-14-17)

### 3.11.2 Provost's Research Awards

The Provost's Research Award recognizes meritorious research. Two awards may be given each year to full-time, regular faculty members; one each for junior (assistant professors) and senior (associate professors and full professors) faculty. The awards are given for significant personal achievement of original research. The awards are \$2,000 each.

#### (a) Nominations

Nominations will be solicited during the fall semester and can be made by any full professor. They should be made by a letter to the Vice President for Research describing the research achievement, enclosing the relevant research publication(s), three to five reference letters of support, as appropriate; and a curriculum vitae. Nominations will be evaluated by the Health Sciences Center Research Council, and the two judged best for each award will be forwarded to the Senior Vice President and Provost, along with an evaluation which gives the reasons for the recommendations. Nominations are due in January of each year.

#### (b) Selection

The selections are made by an ad hoc committee consisting of the chair of the Health Sciences Center Research Council, the Vice President for Research, and the Senior Vice President and Provost.

#### (c) Recipients

The recipients of the Provost's Research Award will be announced by the Senior Vice President and Provost at the Spring General Faculty Meeting.

(Senior Vice President and Provost, 8-27-98, 9-14-17)

### 3.11.3 Provost's Teaching Awards

The Provost's Teaching Awards recognize meritorious excellence in teaching. The awards are given for significant personal contributions to the quality, scope, and outcomes of teaching learner assessment and learner mentoring in the health professions, public health, or biomedical sciences.

Two awards are given each year to full-time, faculty members.

- One award will be given to an **early career faculty member** who is within the first nine (9) years of the academic appointment and, at the time of nomination, holds the academic rank of instructor in an HSC undergraduate program, or assistant professor, or associate professor. If the nominee is an associate professor, he/she must have achieved that rank no more than 3 years prior to the date of the nomination.
- One award will be given to a **seasoned/senior career faculty member** who holds the rank of associate professor or professor, has served as a faculty member in an HSC academic program for nine (9) or more years, and has established a record of teaching contributions commensurate with the length of the academic appointment and bearing evidence of excellence including long-term outcomes of mentoring learners.

The awards are \$2,000 each.

#### (a) Nominations

Nominations will be solicited during the fall semester and can be made by any full-time faculty member. They should be made by a letter to the Vice Provost for Academic Affairs and Faculty Development describing the nominee's teaching achievements, enclosing three to five reference letters, including at least one from a faculty colleague and one from a former student, as well as a detailed curriculum vitae.

Nominations will be evaluated by the Educators Excellence Advisory Panel, which includes at least two former recipients of University teaching awards. The Panel may also consist of individuals who have received research or professional service awards and/or participated in Educators for Excellence. The two nominations judged best for each award will be forwarded to the Senior Vice President and Provost, along with an evaluation that gives the reasons for the recommendations. Nominations are due in December of each year.

**(b) Selection**

The selections are made by an ad hoc committee consisting of the chair of the Educators for Excellence Advisory Panel, the Vice Provost for Academic Affairs, and the Senior Vice President and Provost.

**(c) Recipients**

The recipients of the Provost's Teaching Award will be announced by the Senior Vice President and Provost at the Spring General Faculty Meeting.

(Senior Vice President and Provost, 9-24-15, 9-14-17)

### **3.12 DISTINGUISHED PROFESSORSHIPS**

Recipients of distinguished professorships are deemed to have achieved distinction in teaching, research and creative/scholarly activity, or professional and University service and public outreach. The University awards the following distinguished professorships to full-time Regular faculty:

David Ross Boyd Professorships  
George Lynn Cross Research Professorships  
Regents' Professorships  
Presidential Professorships  
David L. Boren Professorships

(Regents, 5-12-66; amended 5-11-78, 9-26-95, 1-27-04, 12-7-12, 9-14-17)

#### **3.12.1 David Ross Boyd Professorship**

**(a) Criteria for Selection**

To qualify for a David Ross Boyd Professorship, a faculty member must be at the rank of Professor, have consistently demonstrated outstanding teaching, guidance, and leadership for students in an academic discipline or in an interdisciplinary program within the University. Among more specific criteria that may be considered are the degree to which the candidate:

- 1) establishes, communicates, and fulfills appropriate course and program goals;
- 2) utilizes formats and techniques that are appropriate to the students served;
- 3) measures student performance appropriately and fairly;
- 4) establishes relationships with students that facilitate mutual respect and communication;
- 5) stimulates an intellectual inquisitiveness and communicates methods of pursuing that inquiry;
- 6) brings about change in students' knowledge, motives, and attitudes;
- 7) fosters the professional development of colleagues, serves as a model for colleagues and students, and contributes to the success of students.



**(b) Nomination Procedure**

- 1) **Initiation.** The Senior Vice President and Provost, of each campus will solicit recommendations for the professorship for his or her respective campus and announce appropriate schedules for processing the nominations.
- 2) **Recommendations.** Any Norman campus academic unit may submit to the college dean the name of one tenured faculty member with the rank of professor. Any Health Sciences Center academic unit may submit to the college dean the name of one tenured or one consecutive term faculty member with the rank of professor. The recommending unit will be responsible for assembling the supporting documentation. The dean of the college will review the recommendations and add his or her comments to the recommendation(s) considered to be most worthy. The dean will submit all the recommendations and supporting documentation to the Senior Vice President and Provost of his or her campus. The respective Senior Vice President and Provost will forward the materials to the University Council on Faculty Awards and Honors.
- 3) **Supporting Documentation.** Recommendations are to be accompanied by specific evidence that the nominee meets the criteria for selection. Whenever possible, surveys of representative groups of current and former students should be made and reported.

**(c) Selection Procedure**

- 1) **Review.** The Council on Faculty Awards and Honors shall recommend to the President, through each Senior Vice President and Provost, only those nominated faculty considered by the Council to be most highly qualified and most deserving of being awarded the David Ross Boyd Professorship. The Council also shall transmit all substantiating materials pertaining to all nominees.
- 2) **Selection.** Each Senior Vice President and Provost will review the nominees from the respective campus and forward recommendations, along with all nominations and all substantiating materials pertaining to all nominees, to the President, who will make recommendations to the Board of Regents.

**(d) Perquisites**

In the year of designation as a David Ross Boyd Professor, the faculty receiving the professorship will receive a one-time cash award of \$7,000 and a permanent salary increase of 7% on the University base salary, or \$7,000, whichever is greater, starting in the subsequent fiscal year.

**(e) Term of the Award**

The term of a David Ross Boyd Professor is continuous until retirement or separation from the University.

(Regents, 5-11-78, 3-15-89, 9-26-95, 1-27-04, 6-25-08, 03-25-09, 12-7-12, 9-18-14, 9-14-17)

**3.12.2 George Lynn Cross Research Professorship****(a) Criteria for Selection**

To qualify for a George Lynn Cross Research Professorship, a faculty member must have demonstrated outstanding leadership over a period of years in his or her field of learning or creative activity and have been recognized by peers for distinguished contributions to knowledge or distinguished creative work.

**(b) Nomination Procedure**

- 1) **Initiation.** The Senior Vice President and Provost, of the respective campus, will solicit recommendations for the professorship and announce appropriate schedules for processing the nominations.
- 2) **Recommendations.** Any academic unit may submit to the appropriate campus' Vice President for Research the name of any tenured faculty member with the rank of professor who is deemed to meet

the criteria for selection. The respective Vice President for Research will request that the appropriate academic unit chair/director and college dean review and comment on those recommendations.

- 3) **Supporting Documentation.** Recommendations are to be accompanied by specific indications that the person being recommended meets the criteria for selection. The appropriate Vice President for Research, consulting with knowledgeable persons both within and outside the University, will develop a list of external evaluators to aid in the review process. The specific procedures for evaluating those being recommended will be developed by the Vice President for Research in consultation with the appropriate campus' Research Council.
- 4) **Evaluations.** The Vice President for Research will present to the appropriate Research Council all nominations with the supporting documentation and the comments of the academic unit chair/director and college dean. In addition, the Vice President for Research will present to the Research Council the external evaluations and his or her own evaluation.

(c) **Selection Procedure**

- 1) **Final Nomination.** The Research Council shall recommend to the President, through the appropriate Senior Vice President and Provost, all those nominated faculty deemed by the Research Council to fully meet the criteria for selection as George Lynn Cross Research Professors. The Research Council also shall transmit all substantiating materials pertaining to all nominees. The Council on Faculty Awards and Honors will be informed of those recommended by the Research Council.
- 2) **Selection.** The Senior Vice Presidents and Provosts will review the nominees and forward their recommendations, along with all nominations and all substantiating materials pertaining to all nominees, to the President, who will make recommendations to the Board of Regents.

(d) **Perquisites**

In the year of designation as a George Lynn Cross Research Professor, the faculty receiving the professorship will receive a one-time cash award of \$7,000 and a permanent salary increase of 7% on the University base salary, or \$7,000, whichever is greater, starting in the subsequent fiscal year.

(e) **Term of the Award**

The term of a George Lynn Cross Research Professor is continuous until retirement or separation from the University.

(Regents, 5-11-78, 3-15-89, 6-27-95, 9-26-95, 1-27-04, 6-23-04, 6-25-08, 3-25-09, 12-7-12, 9-14-17)

### 3.12.3 Regents' Professorship

(a) **Criteria for Selection**

To qualify for a Regents' Professorship, a faculty member must have rendered outstanding service to the academic community or to an academic or professional discipline, through extraordinary achievement in academic administration or professional service.

(b) **Nomination and Selection Procedures**

Nominees for Regents' Professorships shall be presented to the Board of Regents by the President after conferring with the Chair of the Board of Regents, the Chair of the appropriate Faculty Senate, and the University Council on Faculty Awards and Honors. Recommendations for the appointment may be made to the President by any academic unit, administrative officer, or faculty member, but such recommendations are not required.

(c) **Perquisites**

In the year of designation as a Regents' Professor the person receiving the award will receive a one-time cash award of up to \$7,000 and a permanent salary increase of 7% on the University base salary, or \$7,000, whichever is greater,

starting in the subsequent fiscal year. Persons named Regents' Professors on or after Spring 1996 are not eligible for consideration as Presidential Professors.

(d) **Term of the Award**

The term of a Regents' Professorship is continuous until retirement or separation from the University.

(Regents, 5-11-78, 3-15-89, 9-26-95, 1-27-04, 3-25-09, 12-7-12, 9-14-17)

### 3.12.4 Presidential Professorship

(a) **Criteria for Selection**

Presidential Professors are those full-time faculty members who excel in all their professional activities and who relate those activities to the students they teach and mentor. These professors inspire their students; mentor their undergraduate, graduate, and/or professional students; and exemplify to their students (both current and former) and to their colleagues (both at the University and within their disciplines nationwide) the ideals of a scholar through their endeavors in teaching, research and creative/scholarly activity, and professional and University service and public outreach.

Nomination materials will include:

- 1) The nominee's faculty evaluations for the previous three years (or since beginning at the University, if the nominee has been at the University less than three years), and the nominee's complete vita.
- 2) A narrative assessment (no more than 5 double-spaced pages) of:
  - (a) The impact of the nominee's research and creative activity on his/her students.
  - (b) The nominee's contribution to the undergraduate instructional enterprise including such examples as:
    - (1) The effectiveness of lower-division and upper-division undergraduate courses developed and taught by the nominee.
    - (2) The extent of the nominee's involvement with undergraduates in advising and mentoring within the academic discipline. This could include the quantity and quality of the independent study enrollments (3990, 4990, 3960, 3980, etc.), Undergraduate Research Opportunities Program (UROP) and Undergraduate Research Day (URD) sponsorships, Research Experience for Undergraduates (REU) sponsorships, placement of undergraduates in quality graduate programs, number of academic advisees, and the sponsorship of academic clubs or academic honor societies.
    - (3) The extent of the nominee's involvement with the planning and review of the undergraduate program within the academic unit. This could include chairing an undergraduate studies or program committee that undertook major changes in the undergraduate program or other leadership roles within the academic unit, college, or University that resulted in an updated and improved undergraduate program.
    - (4) The extent of the nominee's involvement with undergraduates through University-wide programs such as the freshman Gateway course, freshman seminars, the residence hall adopt-a-faculty program, or other programs outside the classroom.
  - (c) The nominee's contribution to the graduate/professional instructional enterprise, including such examples as:
    - (1) The effectiveness of graduate/professional courses developed and taught by nominee.

- (2) The extent of the nominee's advising and mentoring involvement with graduate/professional students within the academic discipline. This could include numbers of theses and dissertations supervised, publications co-authored with graduate/professional students, number of graduate/professional students supported through external grants and contracts, and the job placement of the nominee's graduate/professional students.
- (3) The extent of the nominee's involvement with the planning and review of the graduate/professional degree program within the academic unit. This could include chairing a graduate/professional studies or program committee that undertook major changes in the graduate/professional program or other leadership roles within the academic unit, college, or University that resulted in an updated and improved graduate/professional program.
- (d) Up to five letters from among current undergraduates or alumni, current or former graduate/professional students, University colleagues, or colleagues within the nominee's academic discipline from other campuses. Among all these letters, there should be commentary attesting to the nominee's ability to excel in all professional activities and relating those activities to the students they teach and mentor. However, any one reference is unlikely to be able to attest to all aspects of a nominee's professional activities.

(b) **Selection Committee**

The Health Sciences Center selection committee will be chaired by the Senior Vice President and Provost and the Vice President for Research, who serve as non-voting members. Thirteen members of the selection committee will be chosen as follows:

- 1) The President will select six faculty and three academic administrators from among current members on the Research Council, University Council on Faculty Awards and Honors – Health Sciences Center Campus members, and Deans' Council. The selection committee will be composed of six faculty and three academic administrators serving three-year staggered terms, two faculty-at-large serving two-year staggered terms, and two outside individuals serving two-year staggered terms.
- 2) The President will also select two faculty at-large from the HSC campus tenure track, tenured, and consecutive term faculty to serve. One will be asked to serve a one-year term, and the other a two-year term.
- 3) The President will also select two distinguished outside individuals to serve.
- 4) Faculty members who are nominees must recuse themselves from the selection committee during that particular year; the President will replace them so as to maintain the composition of the selection committee.

(c) **Selection Procedure**

- 1) **Initiation.** The President's Office – in conjunction with the Senior Vice President and Provost of the Norman Campus and the Senior Vice President and Provost of the Health Sciences Center – (a) will review the number of vacant Presidential Professorships, (b) will hold three vacancies each year for recruitment leverage, and (c) will issue a call for nominations by September 30. Separate selection committees will be constituted on the Norman and Health Sciences Center campuses.
- 2) **Nominations.** Nominations should be prepared by chairs, directors, or other faculty groups and forwarded to both the appropriate dean and Senior Vice President and Provost. Self-nominations will not be accepted. Deans will forward the nominations with their own comments to their campus Senior Vice President and Provost. Each Senior Vice President and Provost will convene his or her campus' selection committee.
- 3) The Selection Committees' selections for the Presidential Professors must be forwarded by February 15 to the President's Office along with all nominations and all substantiating materials pertaining to all

nominees. The President will make recommendations to the Board of Regents during the March Board of Regents' meeting.

- 4) The final selections will be announced at the Spring General Faculty Meeting.

(d) **Perquisites**

Assistant and Associate Professors receive \$5,000 per year, and Professors receive \$10,000 per year. To be eligible for continued funding in any given year, a faculty member must be a full-time employee.

Decisions regarding merit increases in University base salary in the academic year will be made independently of faculty status as a Presidential Professor.

Presidential Professors will be given the option each year of receiving the professorship funding as:

- 1) a (taxable) salary supplement plus associated fringe benefits paid in two installments, (one in the fall semester and one in the spring semester), or as a summer salary, or
- 2) a faculty development grant within their departmental account(s) for use in travel, graduate student stipends, instructional enhancement, and research development, or
- 3) a combination of 1 and 2.

(e) **Term of Award**

The Presidential Professorship is granted for a four-year term. The faculty member receives the funding each year based on faculty rank.

(Regents, 9-26-95, 1-27-04, 6-23-04, 6-25-08, 12-7-12, 9-14-17)

### 3.12.5 David L. Boren Professorship

(a) **Criteria for Selection**

To qualify for the David L. Boren Professorship, a faculty member at the rank of professor must have demonstrated consistent outstanding teaching, research and creative/scholarly activity, professional and University service and public outreach, and leadership. The holders of this distinctive honor should represent the best of the OU spirit as it has come to be under the remarkable leadership of President David Boren – caring for students, advancing the frontiers of knowledge, and making a positive difference in the world. Among more specific criteria that may be considered are the degree to which the candidate:

- 1) Inspires inquisitiveness and intellectual curiosity among students;
- 2) brings about change in students' knowledge, motives, and attitudes;
- 3) fosters the professional development of colleagues and serves as a model for colleagues and students;
- 4) contributes to scholarship or creative activity that is viewed as seminal within one or more fields, recognized via awards or other measures of excellence at the national or international levels;
- 5) publishes or exhibits scholarship or creative activity in high quality venues and has their work cited frequently;
- 6) has a strong sense of community and is instrumental in the creation, organization, and mobilization of other individuals, groups, and resources that are involved in projects benefitting the community.

(b) **Nomination Procedure**

- 1) **Initiation.** The Senior Vice President and Provosts of the Norman and HSC campuses will solicit recommendations for the professorship by September each year and announce appropriate schedules for processing the nominations.

- 2) **Recommendations.** Any academic unit may submit to the college dean the name of one Regular Faculty member with the rank of professor. The recommending unit will be responsible for assembling the supporting documentation. The dean of the college will review the recommendation and add his or her comments to the recommendation(s) considered to be the most worthy. The dean will submit the recommendations and supporting documentation to the respective Senior Vice President and Provost. The Senior Vice President and Provost will forward these materials to the University Council on Faculty Awards and Honors.

(c) **Supporting Documentation**

Recommendations are to be accompanied by specific evidence that the nominee meets the criteria for selection. Whenever possible, surveys of representative groups of current and former students should be made and reported.

(d) **Selection Procedure**

- 1) **Review.** The Council on Faculty Awards and Honors shall recommend to the President, through the Senior Vice President and Provost of the respective campus, only those nominated faculty considered by the Council to be most highly qualified and most deserving of being awarded the David L. Boren Professorship. The Council also shall transmit all substantiating materials pertaining to all nominees.
- 2) **Selection.** The Senior Vice President and Provost will review the nominees from his or her campus and forward recommendations, along with all nominations and all substantiating material about nominees, to the President, who will make recommendations to the Board of Regents at its March meeting.

(e) **Perquisites**

In the year of designation as a David L. Boren Professor, the recipient will receive a one-time cash award of \$10,000 and a permanent salary increase of 10% of the University base salary, or \$10,000, whichever is greater, starting in the subsequent fiscal year.

(f) **Term of Award**

The term of a David L. Boren Professor is continuous until retirement or separation from the University.

(Regents, 12-4-14, 9-14-17)

### 3.12.6 Presentation to Board of Regents

All nominations shall be sent to the Board of Regents at least twenty (20) days prior to the time that nominees' names appear on an agenda for action.

(Regents, 5-12-66, amended 5-11-78, 9-26-95, 1-27-04, 9-14-17)

## 3.13 ENDOWED CHAIRS AND ENDOWED PROFESSORSHIPS

An endowed chair or endowed professorship is a faculty position supported by an endowment. An endowed chair requires a minimum \$1 million endowment and an endowed professorship requires an endowment of a minimum of \$500,000. Endowed faculty positions allow the Health Sciences Center to recruit or retain educators, clinicians, scholars, and researchers who are leaders in their fields of study.

Faculty may be appointed to endowed chairs and professorships established at the Health Sciences Center.

(a) **Criteria for Selection**

Specific criteria for the selection of occupants may be established for particular chairs as appropriate. To qualify for an endowed chair or endowed professorship, a faculty member must be distinguished within a particular academic field or an interdisciplinary program unless an exception is approved by the Senior Vice President and Provost. The

term of an endowed chair is governed by the terms of the donor agreement or, in the absence of such specifications, is determined by the dean.

(b) **Appointment Process**

Once a candidate has been identified, the dean will consult with the Senior Vice President and Provost. The Senior Vice President and Provost, after consultation, may make a recommendation to the President. The President may approve and forward the appointment to the Board of Regents or reject it and request further searching.

(c) **Vacancy**

If the endowed position is vacant, the accumulated interest earnings cannot be expended unless the Senior Vice President and Provost requests and receives written approval by the donor(s).

(Regents, 6-15-78; Presidential Clarification, 9-15-92; Regents, 6-27-95, 1-26-99, 1-27-04, 6-23-04, 12-7-12, 9-14-17)

### **3.14 COLLEGE AWARDS FOR FACULTY AND STAFF**

Colleges that wish to use private funds to give faculty or staff merit awards for outstanding performance must secure the Senior Vice President and Provost's approval of the selection procedure and the amount of awards prior to any advertising or announcement.

(Regents, 12-19-90, 3-7-91, 1-27-04, 9-14-17)

### **3.15 FACULTY SCHOLARSHIPS AND FELLOWSHIPS**

The University is often called upon to recommend faculty members for scholarships or fellowships, such as Fulbright Scholarships, American Council of Learned Societies Fellowships, Social Science Research Fellowships, and Guggenheim Fellowships.

(Regents, 5-11-78, 12-7-12, 9-14-17)

### **3.16 ABROGATION OF TENURE, TERMINATION OF EMPLOYMENT, SEVERE SANCTIONS, SUMMARY SUSPENSION, AND OTHER DISCIPLINARY ACTIONS IMPOSED FOR FAILURE TO COMPLY WITH THE UNIVERSITY COMPLIANCE PROGRAM, PROFESSIONAL PRACTICE PLAN POLICIES, BILLING COMPLIANCE POLICIES, OR OTHER FEDERAL OR STATE MANDATES**

(a) **Abrogation of Tenure** - Only the Board of Regents has the power to abrogate tenure.

The University strives to exercise great care in selecting its faculty appointees and in conferring tenure only upon those faculty members who have demonstrated their merit for continuous appointment. For that reason, abrogation of tenure should be an exceptional event. When the President decides to recommend abrogation of tenure to the Board of Regents, the President must so notify the faculty member in writing. (See Section 3.16.1)

While abrogation of tenure generally will be required infrequently, the University must be prepared for such an eventuality so that both the integrity of the University and the rights of faculty members are preserved. The Faculty Appeals Board is the appropriate body to hear appeals regarding abrogation of tenure. The Board of Regents shall give all reasonable consideration to the recommendations of the Faculty Appeals Board Hearing Committee.

(b) **Termination of Employment**

The Senior Vice President and Provost, or the dean with approval from the Senior Vice President and Provost, has the power to terminate employment. The Faculty Appeals Board is the appropriate body to hear permissible appeals related to termination of employment under enumerated circumstances:

Improper conduct described in [Section 3.16.1](#) sub-sections (e), (f), (g), or (h) below may result in immediate termination of employment. The faculty member may request a Faculty Appeals Board hearing following termination under [Section 3.16.1](#) (e), (f), (g), or (h).

For consecutive term or tenure track faculty the notice requirements contained in [Section 3.2.7](#) (a) through (d) are not applicable to terminations under [Section 3.16.1](#) (e) through (h).

(c) **Severe Sanctions**

The Senior Vice President and Provost, or the dean with approval from the Senior Vice President and Provost, has the power to impose severe sanctions. See [Section 3.16.1](#) for grounds for severe sanctions.

Faculty members who engage in improper conduct may be subject to severe sanctions short of termination or abrogation. The imposition of such severe sanctions should be viewed as a serious step usually undertaken only after administrative remedies and/or minor sanctions have failed.

Severe sanctions may include, but are not limited to, loss of prospective University privileges for a stated period (for instance, loss of eligibility for a sabbatical leave of absence, loss of remunerated consultative privileges, loss of remunerated private practice privileges); a fine; or a reduction in salary. The Faculty Appeals Board is the appropriate body to hear appeals regarding severe sanctions.

(d) **Summary Suspension**

Upon consultation with or recommendation by the department chair, the Senior Vice President and Provost, or the dean, with approval from the Senior Vice President and Provost, has the power to impose summary suspension. The period of suspension should be determined based on the circumstances giving rise to the suspension, including but not limited to summarily suspending a faculty member from some or all duties. Assigning the faculty member to other duties in lieu of suspension, is justified if immediate harm to the faculty member, others, or the University is threatened by that faculty member's continued performance of regular duties.

Summary suspension may be with or without pay. A faculty member who has been summarily suspended is not entitled to receive University compensation from consultative privileges or Professional Practice Plan privileges. If suspension is with pay, compensation will consist only of University base salary during the period of summary suspension.

Summary suspension does not remove from the University the obligation to provide due process within a reasonable period of time following the suspension, upon the faculty member's request for a Faculty Appeals Board hearing. The Faculty Appeals Board is the appropriate body to hear appeals regarding summary suspension.

(e) **Disciplinary Actions for Failure to Adhere to University Compliance Program, Professional Practice Plan Policies, Billing Compliance Policies, or Other University, Federal or State Mandates:**

The Senior Vice President and Provost, or the dean with approval from the Senior Vice President and Provost, has the power to impose disciplinary actions under this sub-section.

An employee's failure to adhere to the University Compliance Program, Professional Practice Plan Policies, Billing Compliance Policies, or other federal or state mandates requires that the University take quick and decisive action such as imposing fines upon, suspending the billing privileges of or otherwise sanctioning or terminating University faculty who have been determined to be out of compliance.

Disciplinary actions imposed under this sub-section (e) are not considered severe sanctions for purposes of this policy and are not appealable to the Faculty Appeals Board.

(f) **Minor Sanctions**

The chair of the academic unit with approval from the dean, has the power to impose minor sanctions.



A faculty member against whom the imposition of minor sanctions is sought must be informed in writing of the basis for the action. While it is not possible to specify all grounds for which minor sanctions may be sought, they include, but are not limited to, the following:

- (1) Neglect of duty or failure to carry out normal and expected satisfactory teaching, research, or service responsibilities, including patient care
- (2) Unprofessional conduct adversely affecting the functioning of the area, department, college, or University
- (3) Failure to adhere to University policy

Minor sanctions may include, but are not limited to, suspension of clinic assignments, suspension of travel privileges for not more than 30 days, and/or restitution to the University. A faculty member who believes the sanctions are unfair/unsupported may appeal the sanction(s) imposed to the Senior Vice President and Provost within 15 University business days of notice of the sanction(s). The Senior Vice President and Provost will review the sanction(s) imposed, meet with the faculty member if requested, and decide to affirm, modify, or revoke the minor sanctions. The decision of the Senior Vice President and Provost is final.

(Regents 7-15-96, 1-26-99, 12-3-02, 6-25-08, 12-7-12, 9-14-17)

### **3.16.1 Grounds for Abrogation of Tenure, Termination of Employment, and Severe Sanctions**

A faculty member against whom the imposition of abrogation of tenure, termination of employment, or a severe sanction is sought must be informed in writing of the basis for the action. The Faculty Appeals Board is the appropriate body to hear permissible appeals related to abrogation of tenure, termination of employment, and severe sanctions enumerated above. While it is not possible to specify all grounds for which abrogation of tenure, termination of employment, or severe sanctions may be sought, they include, but are not limited to the following:

- (a) Professional incompetence or dishonesty;
- (b) Substantial, manifest, or repeated failure to, and/or refusal to fulfill professional duties and responsibilities;
- (c) Substantial, manifest, or repeated failure to, and/or refusal to adhere to University policies;
- (d) Personal behavior preventing the faculty member from satisfactory fulfillment of professional duties or responsibilities;
- (e) Being placed on the United States Department of Health and Human Services' list of excluded individuals and entities, in which case the University will take quick and decisive action by terminating the faculty member's employment.\*
- (f) Violations of law to which the faculty member has pleaded guilty or nolo contendere or that have been adjudicated before a court of competent jurisdiction that prevent the faculty member from satisfactorily fulfilling professional duties or responsibilities, or violations of a court order when such violations relates to the faculty member's proper performance of professional responsibilities. In such case the University will take quick and decisive action by terminating the faculty member's employment\*.
- (g) Loss or suspension of a professional license; loss or suspension of prescribing authority; voluntary or involuntary loss of clinical privileges; inability to obtain or maintain enrollment as a provider with an insurer; or inability to obtain or maintain professional liability insurance coverage in which case the University will take quick and decisive action by terminating the faculty member's employment.\*
- (h) For faculty hired primarily to spend their time in clinical practice or practice-related activities, or those who now spend their time primarily in clinical practice or practice-related activities, poor clinical performance, unprofessional behavior, or conduct that jeopardizes patient safety may result in the University's taking quick and decisive action by terminating the faculty member's employment.\*

\* Improper conduct, violations, or loss noted in sub-sections (e), (f), (g), or (h) above may result in immediate termination. The faculty member may request a Faculty Appeals Board hearing following termination under (e), (f), (g), or (h).

For consecutive term or tenure track faculty, the notice requirements contained in [Section 3.2.7 \(a\) through \(d\)](#) are not applicable to terminations under [Section 3.16.1 \(e\) through \(h\)](#).

(Regents, 1-26-99, 12-3-02, 6-25-08, 12-7-12, 9-14-17)

### 3.17 APPEALS AND GRIEVANCES

All faculty, whether tenured or not, are entitled to academic freedom as set forth in [Section 3.3](#) and to academic due process.

The following procedures cover alleged prohibited discrimination, including sexual, racial, or ethnic harassment; alleged violations of academic freedom or academic due process; the alleged failure to follow University policy; or alleged unfairness in the application of University policy unresolved through the administrative process. The procedures also cover permissible appeals related to abrogation of tenure, termination of employment actions (under enumerated circumstances enumerated in [Section 3.16](#)), severe sanctions, and summary suspension. The faculty member may seek redress through the appropriate grievance procedures if such alleged violations occur in the course of performing professional duties or in the process of being considered or evaluated for recommendations regarding reappointment, salary increase, promotion, or tenure. Grounds for appeal may also include other personnel decisions in which a faculty member has reason to believe there has been discrimination; sexual, racial, or ethnic harassment; or violation of due process or academic freedom; or if there are other appealable grievances that have not been resolved administratively.

Faculty members serving as section chiefs, chairs, directors, deans, or in other administrative positions who are relieved of their administrative responsibilities may not appeal their removal from their administrative positions.

There are two appeal processes for the issues described above: the Faculty Appeals Board ([Section 3.16](#)) and the Committee on Discrimination and Harassment ([Appendix H, VII C 1\(b\)](#) and [Appendix J, VII B 2\(b\)](#)).

- (a) **Faculty Appeals Board** – The Faculty Appeals Board is the appropriate body to hear appeals regarding alleged violations of academic freedom, academic due process, alleged failure to follow University policy, or alleged unfairness in the application of University policy, or other appealable grievances (other than alleged prohibited discrimination) that have not been resolved administratively. It is also the appropriate appeal process for abrogation of tenure, termination of employment actions (under circumstances enumerated in [Section 3.16](#)), severe sanctions, and summary suspension. ([Section 3.19](#))
- (b) **Committee on Discrimination and Harassment** – The Committee on Discrimination and Harassment is the appropriate appeals process for complaints involving discrimination and harassment based on race, color, national origin, sex, sexual orientation, genetic information, gender identity, gender expression, age (40 or older), religion, disability, political beliefs, or status as a veteran. Such appeals must be filed with the University Institutional Equity Officer ([Appendices H and J](#)).

(Regents, 1-26-99, 12-3-02, 12-7-12, 6-24-15, 9-14-17)

### 3.18 THE FACULTY APPEALS BOARD

- (a) The Faculty Appeals Board is a standing body appointed by the Faculty Senate that responds to requests for a hearing with regard to alleged violations of academic freedom or academic due process, other appealable grievances concerning the alleged failure to follow University policy, or alleged unfairness in the application of University policy unresolved through administrative procedures, tenure abrogation, termination of employment actions (under enumerated circumstances), severe sanctions, and summary suspension. The Faculty Appeals Board considers all such matters brought before it in a timely manner by individual faculty members. It is the responsibility of the Faculty Appeals Board Chair to ensure that all matters are handled in a timely manner.

- 1) In cases related to alleged violation of academic freedom or academic due process or in cases related to other grievances concerning the alleged failure to follow University policy or alleged unfairness in the application of University policy, the faculty member is considered the complainant and the administration the respondent.
  - 2) In cases related to abrogation of tenure, termination, severe sanctions, or summary suspension, the administration is considered the complainant, and the faculty member is the respondent. The written notice provided to the faculty member outlining the charges will serve as the complaint.
- (b) The Faculty Appeals Board of the Health Sciences Center shall consist of forty tenured faculty members representing fairly the existing colleges on the Health Sciences Center campus. The members shall be appointed from among all full-time faculty whose duties are primarily non-administrative (i.e., not at the level of Assistant/Associate Dean, Dean, Assistant/Associate/Vice Provost, or Senior Vice President and Provost). All terms shall be four years.
  - (c) Each Faculty Appeals Board shall have a chair and vice chair designated by the Faculty Senate. The chair and vice chair must be from separate colleges.
  - (d) All responsibilities of the chair will be relinquished and passed to the vice chair if the appeal at issue is from a faculty member in the same college as the chair.
  - (e) All members of the Board are eligible for re-election. Terms of service shall begin July 1 and end June 30 except that if a hearing is in progress at this time, any retiring member of the Board who is on the Hearing Committee shall be continued on the Committee until the case in progress is closed.
  - (f) If a member of the Board, not serving on a Hearing Committee, ceases to be a full-time member of the faculty or if his or her duties become primarily administrative, the Senate shall elect a replacement to complete the term.
  - (g) Members on the Board who have an appeal pending before the Board shall be suspended from all Board activities until the appeal is resolved.

(Regents, 1-26-99, 12-3-02, 6-25-08, 12-7-12, 9-14-17)

### **3.19 FACULTY APPEALS BOARD PROCESS**

#### **3.19.1 Initiation of Appeal and Request for a Hearing**

- (a) **Request for Hearing - Academic Freedom, Academic Due Process or Other Appealable Grievances Concerning the Alleged Failure to Follow University Policy or Alleged Unfairness in the Application of University Policy:**

**Deadline to Request a Hearing:** Within 45 University business days after he/she became or should have become aware of the alleged violation.

Any faculty member who believes that either academic freedom or academic due process has been violated or alleges other grievances concerning the failure to follow University policy or unfairness in the application of University policy should first seek prompt redress through regular administrative channels, which include the chair, dean, and Senior Vice President and Provost. Seeking redress through regular administrative channels does not extend the 45 day time allowed for filing an appeal.

If the administrative review does not provide a satisfactory result, and if the faculty member wishes to continue the appeal, he/she may submit, as the complainant, a written statement outlining the specific points of appeal and requesting a formal hearing to the Chair of the Faculty Appeals Board no later than 30 University business days after he/she became or should have become aware of the alleged violation.

- (b) **Request for Hearing - Abrogation of Tenure, Appealable Termination of Employment, Severe Sanctions, or Summary Suspension:**

**Deadline to Request a Hearing:** Within 45 University business days of the date of the written notice provided to the faculty member.

Any faculty member who chooses to exercise due process rights for an appealable termination of employment, severe sanctions, summary suspension, or the decision by the President to recommend abrogation of tenure to the Board of Regents must submit, as the respondent, a written request for hearing to the Chair of the Faculty Appeals Board within 45 University business days of the date of the written notice of the action provided to the faculty member.

- (c) The time intervals specified in the preceding and following sections should be maintained unless waived by the Chair of the Faculty Appeals Board for unusual circumstances or in order to allow continuing progress towards informal resolution of the complaint.
- (d) The Faculty Appeals Board process is a lay process that relies on peer review and the common sense, sound judgment, good character, and sense of fairness of each Hearing Committee member. The Faculty Appeals Board procedures should strive to diminish formality and rigidity. The process is not to be considered a trial but is a system of internal review to effect a just and fair disposition of a grievance.
- (e) From time to time, compliance with applicable State and/or Federal law(s) may require modification of the Faculty Appeals Board process, which includes modification of the related hearing procedures.
- (f) **Responsibilities of the Faculty Appeals Board Chair**
  - 1) The Faculty Appeals Board Chair, within 15 University business days of receipt of written request for a hearing, has the responsibility to determine if the complaint is appealable under University policy and whether the deadlines under **sections 3.19.1.(a) and (b)** have been met. If the complaint is timely and appealable, the process will continue. If the complaint is not timely and/or appealable, the Chair shall so notify both the complainant and the respondent and the process will end.
  - 2) Within 10 University business days of determining a complaint is timely and appealable, the Faculty Appeals Board Chair shall, prior to initiating the formal hearing process, hold a pre-hearing conference by meeting with the complainant and respondent, either together or separately, to discuss the points of the complaint. The intent will be to resolve differences where possible and to seek a resolution and/or dismissal of the appeal.
  - 3) Ordinarily the University General Counsel or a member of his/her staff not otherwise involved will serve as the legal advisor to the Faculty Appeals Board. If the Chair of the Faculty Appeals Board reasonably believes that the University General Counsel's office has a conflict of interest that would prevent the office from objectively advising the Faculty Appeals Board, he/she may request a meeting with the President or his designee to discuss the concern and to request other counsel. If the President agrees, he may appoint other counsel to advise the Hearing Committee.

### 3.19.2 Formal Hearing Procedure

To initiate the hearing procedure, the Chair of the Faculty Appeals Board will request statements from both the complainant and the respondent per (a) and (b) below and concurrently begin the process for selection of Hearing Committee members per (c) (1) through (9) below.

All matters brought to the Faculty Appeals Board shall be handled according to the following procedures, which are designed to ensure fairness and due process.

- (a) The Chair of the Faculty Appeals Board will request the complainant to submit to both the Chair and the respondent, within 10 University business days, a written statement embodying:
  - 1) Relevant policies of the administrative or academic unit, the College, the Senior Vice President and Provost's Office, the President's Office, and the Board of Regents.
  - 2) The written complaint (**Section 3.19.1(a)(b)**).

- 3) A summary of the evidence upon which the complaint is based.
  - 4) A list of witnesses proposed to be called, a brief summary of the testimony of each proposed witness, and a copy of exhibits proposed to be presented.
- (b) The Chair of the Faculty Appeals Board will, upon receipt of the complainant's statement, request the respondent to submit to both the Chair and the complainant, within 10 University business days, a written statement including:
- 1) Relevant policies of the administrative or academic unit, the College, the Senior Vice President and Provost's Office, the President's Office, and the Board of Regents.
  - 2) The written response outlining the specific points of defense.
  - 3) A summary of the evidence to be used in refuting the charges.
  - 4) A list of proposed witnesses to be called, a brief summary of the testimony of each proposed witness, and a copy of exhibits proposed to be presented.
- (c) Selection of Hearing Committee:
- 1) Within five University business days after receipt of the faculty member's request for a hearing, the Chair of the Faculty Appeals Board will proceed with the selection of the Hearing Committee by submitting the list of names of the eligible Board members to both parties. The list shall not include a member or alternate of the same academic unit or one who is related by consanguinity or affinity to the respondent or complainant. Members and alternates currently serving on another hearing shall also be ineligible. A member or alternate of the Hearing Committee may disqualify himself or herself on personal initiative or in response to such challenge for cause as is provided for in this section. The Chair of the Faculty Appeals Board shall also determine, in consultation with the legal counsel to the Faculty Appeals Board, that no one on the list has a bias related to the person(s) or issue at hand.
  - 2) Within five University business days after submitting the list of eligible Board members to both parties, the Chair of the Faculty Appeals Board will select seven members of the Board to constitute the Hearing Committee, three additional members to serve as alternates, and ten members to be available to serve as alternates (alternate pool) should replacements become necessary through personal disqualification, challenge of individuals initially selected, or other cause.
 

The selection of members and alternate members of the Hearing Committee shall be made by lot and shall be made in the presence of the Chair of the Faculty Senate or a designated representative. The complainant and the respondent shall be invited to be present or to send a representative. The Chair of the Faculty Appeals Board shall notify members in writing of their selection to the Hearing Committee and of the parties involved and provide a brief description of the general nature of the issue. Members who cannot serve objectively must so notify the Chair within five University business days.
  - 3) Within five University business days of notice of the initial selection of the Hearing Committee, the complainant or the respondent may submit a written request to the Chair of the Faculty Appeals Board asking that members or alternates of the Hearing Committee be disqualified on grounds of bias or personal interest in the case. If, however, a challenge for cause is disputed by either of the parties, the Faculty Appeals Board Chair shall decide whether cause has been shown and, if so, replace the member or alternate, in accordance with (1) and (2) above.
  - 4) After challenges for cause have been acted on, the complainant and the respondent, each may make a maximum of two peremptory challenges of members or alternates selected for the Hearing Committee within five University business days of the date the parties are notified that such challenges for cause are resolved. Replacements shall be made in accordance with (1) and (2) above.

A finalized list of Hearing Committee members and alternates will be given to all parties within five University business days of resolving any challenges of the membership of the Hearing Committee or alternates by the complainant or the respondent. If no challenges are offered, the finalized list must be completed within 20 University business days of the initial selection of the Hearing Committee and alternates by the Chair of the Faculty Appeals Board.

All decisions regarding initial disqualifications shall be made prior to the first meeting of the Committee. Within 10 University business days after the Hearing Committee and the alternates have been finalized, the Chair of the Faculty Appeals Board shall select from the Hearing Committee the individual to serve as the Chair, who shall then set the date of the hearing. Every reasonable effort should be made by the Hearing Committee and both parties to hold the hearing as soon as possible.

- 5) Members of the Hearing Committee who are subsequently ineligible, ill, or otherwise unable to serve, shall be replaced from among alternate members by the Chair of the Faculty Appeals Board. Alternates who are subsequently ineligible, ill, or otherwise unable to serve, or who become members of the Hearing Committee will be replaced from among the alternate pool (Section 3.19.2(c)(2)) by the Chair of the Faculty Appeals Board.
- 6) If a member of a Hearing Committee ceases to be a tenured, full-time member of the faculty, he or she shall be replaced from among the alternates by the Chair of the Faculty Appeals Board.
- 7) If the duties of a Hearing Committee member become primarily administrative, the member shall inform the Chair of the Faculty Appeals Board. The Chair of the Faculty Appeals Board will inform all parties. The member will continue to serve unless either party objects in writing to the Chair of the Faculty Appeals Board within five University business days of receipt of notice.
- 8) Three alternate members shall be maintained according to selection procedures in Section 3.19.2(c)(2). Alternate members shall attend all meetings of the Hearing Committee.

### 3.19.3 Hearing Regulations

The following regulations shall apply:

- (a) The Chair of the Hearing Committee, after consulting with the legal counsel assigned to the Committee, shall have the final decision on any procedural issues raised that are not addressed by the *Faculty Handbook*.
- (b) The parties shall have the right to attend the hearing and to be accompanied by a colleague or counsel to advise them. The names of such colleague or counsel shall be provided to the Chair of the Hearing Committee at least 15 University business days prior to the hearing. The party appealing is responsible for obtaining and paying for costs for his/her representation. Representatives may not question witnesses or address the Hearing Committee. All hearings will be closed to the public.
- (c) The Chair of the Hearing Committee shall serve as liaison for communication between the complainant or respondent and the Hearing Committee. Communications related to evidence and hearing procedures should be directed to the Chair of the Hearing Committee. Neither party shall communicate orally or in writing with individual Hearing Committee members during the hearing procedure. To ensure that information provided to the Hearing Committee by either party is part of the official documentation of the proceeding, the Chair of the Hearing Committee shall provide each party with a copy.
- (d) The written statements of both parties, as provided in Section 3.19.2 (a) and (b) and evidence taken or considered beyond the written statements shall be heard by the entire Committee at the hearing and not beforehand.
- (e) The principles of confrontation shall apply throughout the hearing. Both parties shall have the right to present, examine, and cross-examine witnesses, and each other.

- (f) The Senior Vice President and Provost's Office shall make available to the parties such authority as it possesses to require the presence of witnesses.
- (g) The report of the Hearing Committee, which shall include findings and recommendations, will be submitted to the Senior Vice President and Provost within 10 University business days of the conclusion of the hearing, regardless of whether the written transcript of the hearing is available. The Senior Vice President and Provost shall forward the Hearing Committee's findings and recommendations, as well as his recommendation, to the President.
- (h) The Chair of the Hearing Committee is responsible for maintaining a full and accurate record of the proceedings. This shall consist of a recording or, at the option of either party, a written transcript taken by a court reporter and shall include copies of all exhibits and other materials distributed at the hearing.
- (i) Either party may request a copy of the recording of the proceedings. The recording will be maintained in the Office of the Legal Counsel for a period of five years. The full cost of recording the proceedings shall be borne by the University.
- (j) The University shall not be liable for any costs whatsoever incurred by the appealing faculty member except as set forth in this section.

#### **3.19.4 Disposition of Charges**

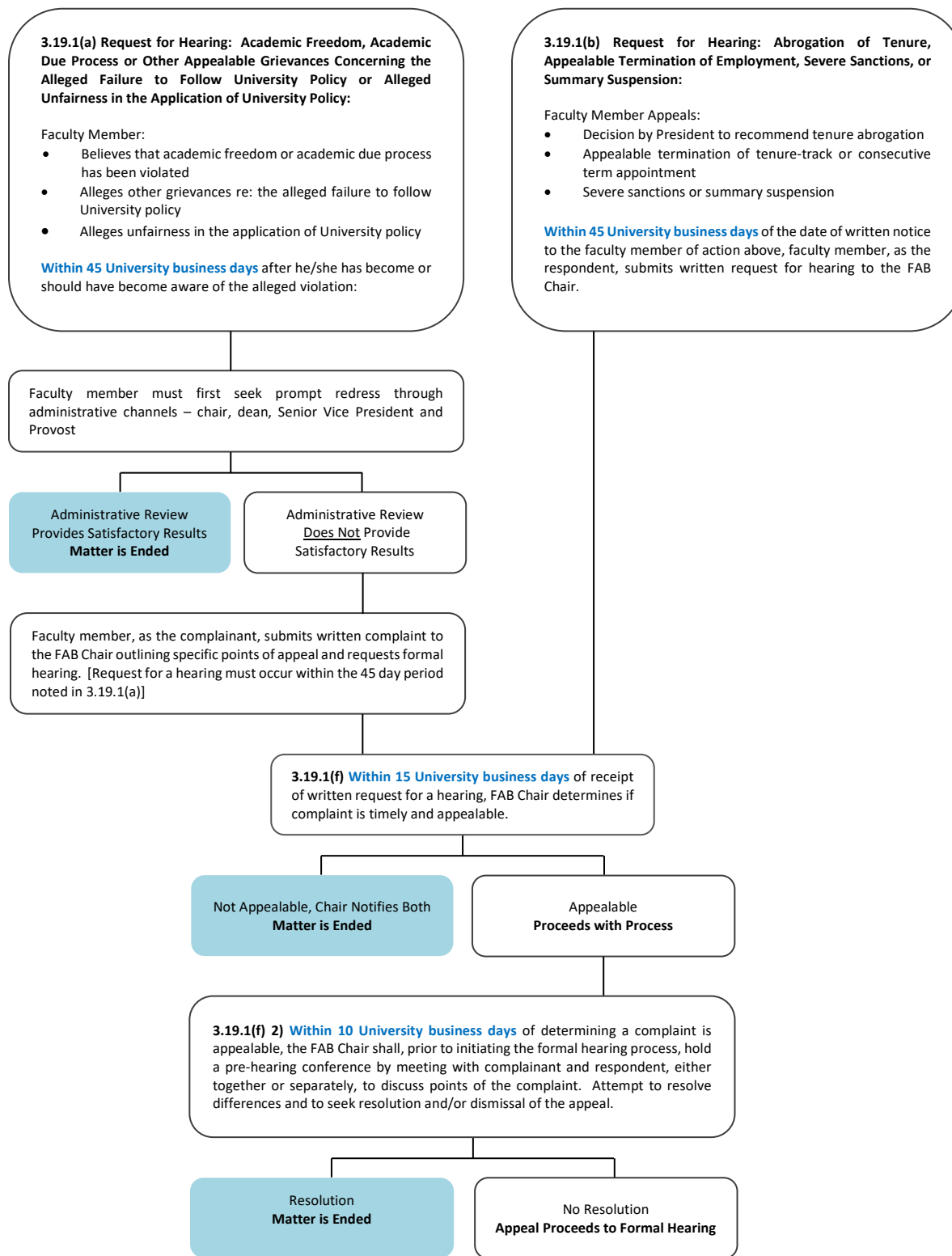
The President shall transmit to the Board of Regents the full record of the hearing and the findings and recommendations of the Hearing Committee, his/her recommendations, and the Senior Vice President and Provost's recommendations. The Board of Regents shall come to a decision in the case based upon the materials submitted plus any additional information which it wishes to consider, or it may return the matter to the Hearing Committee with written directions as to how to proceed.

- (a) When the Board of Regents reviews the matter, the principals shall have the opportunity to present written argument. Oral arguments will be presented only upon request by the Board of Regents.
- (b) If the Board of Regents chooses to return the matter to the Hearing Committee, the Committee shall review the matter in light of the Board of Regents' directions, receive new evidence or information, if necessary, and submit a final report of its findings and recommendations to the President for transmittal to the Board of Regents, as before. The work of the Hearing Committee is finished when the President communicates in writing the final decision of the Board of Regents to the Chair of the Hearing Committee and the principals in the case.
- (c) The full record shall be deposited in the office of the Vice President for University Governance and Secretary of the University. Parties to the case may request copies or excerpts from the full record after the completion of the Committee's work. The costs shall be borne by the requesting party.

(Regents, 1-26-99, 12-3-02, 6-25-08, 12-7-12, 9-14-17)

## FACULTY APPEALS BOARD

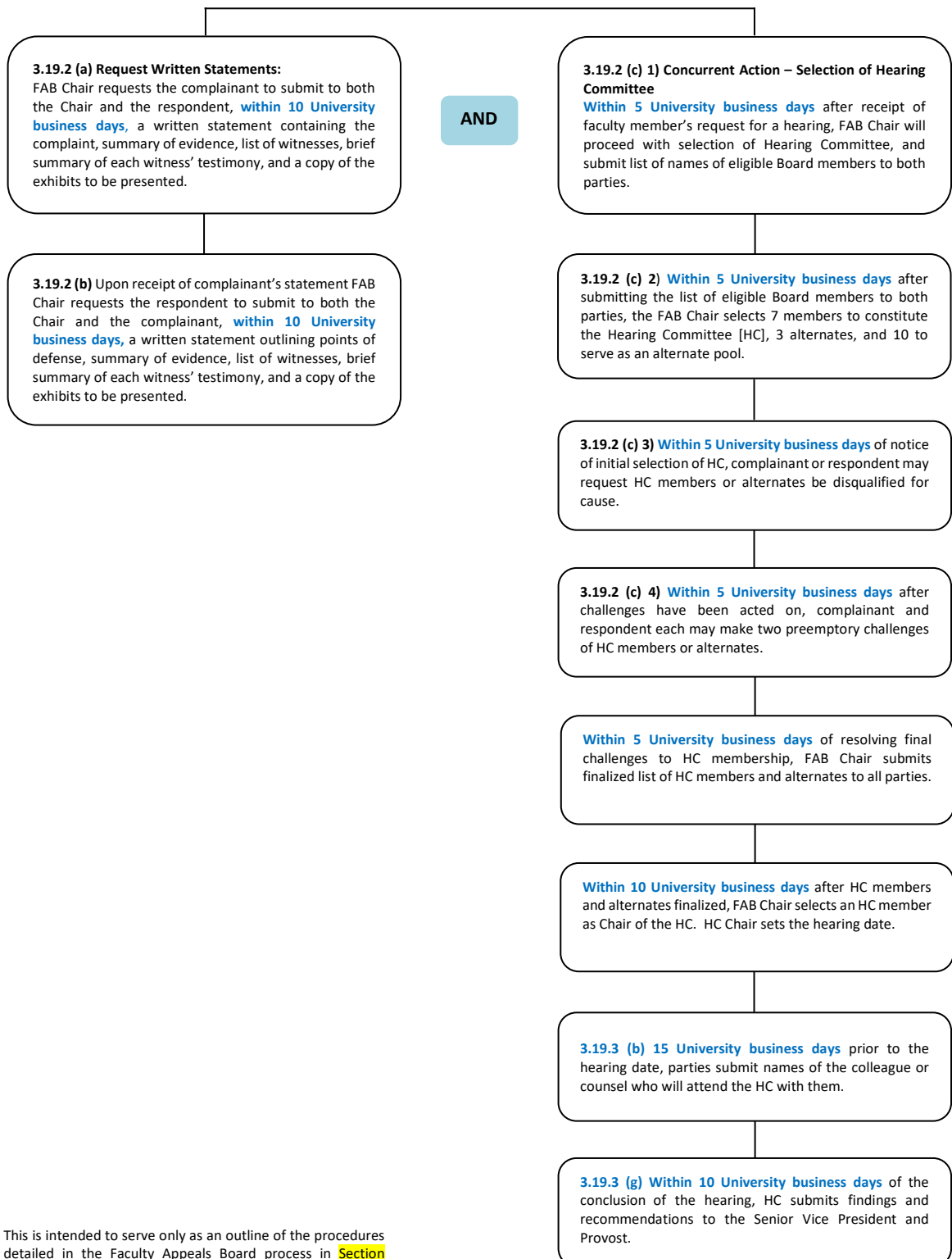
### INITIATION OF APPEAL AND REQUEST FOR HEARING (3.19.1)



**Formal Hearing Procedure (see next page)** →



## FACULTY APPEALS BOARD FORMAL HEARING PROCEDURE (3.19.2)



This is intended to serve only as an outline of the procedures detailed in the Faculty Appeals Board process in **Section 3.17.1.**

### 3.20 NON-DISCRIMINATION POLICY AND SEXUAL MISCONDUCT, DISCRIMINATION AND HARASSMENT POLICY AND GRIEVANCE PROCEDURES

These policies, in their entirety, and the associated complaint and grievance procedures, are contained in [Appendices H and J](#).

The University, in compliance with all applicable federal and state laws and regulations, does not discriminate on the basis of race, color, national origin, sex, sexual orientation, genetic information, gender identity, gender expression, age (40 or older), religion, disability, political beliefs, or status as a veteran in any of its policies, practices, or procedures. This includes but is not limited to admissions, employment, housing, financial aid, and educational services. Please refer to [Appendices H and J](#) for a more detailed explanation of the University's Institutional Equity Office's Equal Opportunity policies and procedures and Institutional Equity and Title IX policies and procedures. Or, contact the Equal Opportunity and Title IX Office on the Health Sciences Center campus directly at: (405) 271-2110.

The investigative process, findings and recommendations, and appeals processes for claims brought under the Non-Discrimination Policy and/or the Sexual Misconduct, Discrimination and Harassment Policy, are handled through the University Offices of Equal Opportunity and Institutional Equity and Title IX. Hard copies of the procedures may be found on the Health Sciences Center campus at (405) 271-2110.

(Regents, 7-22-81, 9-17-81, 9-9-82, 9-27-95, 1-14-97, 1-26-99, 1-27-04, 9-19-11, 12-7-12, 6-24-15)

### 3.21 POST-DOCTORAL FELLOW GRIEVANCE PROCEDURE

Because of the post-doctoral fellows' positions as employees who are also receiving education, any grievance brought by a fellow, other than those clinical trainees in the College of Medicine, ([See College of Medicine Residents' Handbook](#)), regarding his or her rights as a fellow or any allegation of wrongful administrative action resulting in probation, suspension, or dismissal of post-doctoral education shall be brought under this policy. The Post-Doctoral Fellow Grievance Procedure can be found in its entirety in [Appendix N](#).

### 3.22 FACULTY PARTICIPATION IN COMMENCEMENT

It is the responsibility of all full-time faculty members to participate in the commencement involving their programs.

### 3.23 CANDIDACY FOR POLITICAL OFFICE

#### Policy and Protocol of Staff and Faculty Running for Office

The University encourages all employees to vote and otherwise actively participate in the political process. Further, the Board of Regents does not want to discourage faculty members or employees from becoming candidates for public office. As a U.S. citizen, an employee may regard it his or her duty to become a candidate. However, all faculty members and employees of the University have a duty not to use and/or allow for use his/her position with the University or its resources for private gain and have a duty to avoid the appearance of impropriety.

Any employee of the University who makes the determination to run for any county, state or federal elected office, shall resign or, upon approval from the Candidacy Review Committee<sup>1</sup> selected to review the request, and upon final review by the University President and/or the Board of Regents, take an unpaid leave of absence from the University during their candidacy for office. The employee/faculty seeking the leave of absence during their candidacy must comply with the follow protocol:

- A) No later than (i) thirty days before officially filing as a candidate for elected office; or (ii) publicly announcing an intent to seek an elected office; or, (iii) thirty days prior to the start of the semester during which a leave will be requested (for faculty), whichever occurs first, the employee/faculty must advise his/her supervisor, or in the case of faculty his/her Dean, of the intent to seek an unpaid leave of absence.

<sup>1</sup> The "Candidacy Review Committee" shall be comprised of a representative from the Office of Legal Counsel and a representative from each of the following from the employee's respective campus: Human Resources, Faculty Senate, Staff Senate, and either the candidate's supervisor or if the candidate is a faculty member, the Dean of the faculty member's College and the Provost's Office.

- B) Within 14 business days of an employee/faculty advising his/her supervisor or the applicable Dean of the request for leave of absence during his/her campaign, the Committee must meet and determine whether the request will be granted, and if so, the items of the conflict mitigation that must be followed.

This determination will be based on a totality of circumstances including but not limited to: i) how the candidacy will impact the faculty member or staff's ability to interact with students, donors, alumni and/or other employees; ii) the impact the employee/faculty's requested unpaid leave of absence will have on University operations; and iii) other ethical and/or legitimate business concerns.

- C) Once the determination by the Committee has been made relating to the requested leave of absence, the decision and its rationale should be communicated in writing to the requestor within 5 business days of the Committee making the decision.
- D) In the event the leave of absence is approved, if the employee/faculty is elected to such office, the employee/faculty shall resign from the University before taking office.

(Regents, 9-14-43, 1-27-04, 6-19-18)

### 3.24 PROFESSIONAL PRACTICE PLANS

All colleges on the Health Sciences Center campus have Professional Practice Plans in effect. Faculty are obligated to comply with the Plan of their college/primary appointment. Failure to comply with the Professional Practice Plan may result in disciplinary action up to and including abrogation of tenure (See Section 3.16.1).

Copies of Professional Practice Plans are included for each college in Appendix M.

Each college plan stipulates procedures and processes related to time restrictions, deposit and disbursement requirements and restrictions, governance structure, etc.

Exclusion of specific honoraria provided by Federal agencies: Applicable to all colleges, honoraria received for reviewing federal grants and/or serving on federal external advisory/leadership committees/panels are not to be considered Professional Practice Plan income/revenue nor included within the scope of the Professional Practice Plan and, thus, are to be income exclusions.

(Regents, 9-14-17)

### 3.25 ETHICS IN RESEARCH POLICY

#### (a) Introduction

Research and other scholarly activity at the University of Oklahoma must be above reproach. Each member of the University community has the responsibility to ensure the integrity and ethical standards in any activity with which he or she is associated directly, or any activity of which there is sufficient knowledge to determine its appropriateness. Misconduct in the conduct of research undermines the scholarly enterprise and erodes the public trust in the University community to conduct research and communicate results using the highest standards and ethical practices. The University of Oklahoma is responsible both for promoting scholarly practices that prevent misconduct and for developing policies and procedures for dealing with allegations or other evidence of scholarly or research misconduct.

This policy establishes uniform policies and procedures for investigating and reporting instances of alleged or apparent misconduct involving research, including, but not limited to, research or research training, applications for support of research or research training, or related research activities that are supported with funds made available under the Public Health Service Act. The policies and procedures outlined below apply to faculty, staff, and students. They are not intended to address all scholarly issues of an ethical nature. For example, discrimination and affirmative action issues are covered by other University policies.

(b) **Definition of Scholarly Misconduct**

Scholarly misconduct involves any form of behavior that entails an act of deception whereby one's work or the work of others is misrepresented. Other terms, such as research misconduct, are here subsumed within the term "scholarly misconduct" as defined below. The term scholarly misconduct will be used to encompass scientific and other types of misconduct. Scholarly misconduct is distinguished from honest errors and ambiguities of interpretation that are inherent in the scholarly process. Further, scholarly misconduct involves significant and intentional breaches of integrity that may take numerous forms, such as, but not limited to, those outlined below:

- (b)(1) Falsification of data ranging from fabrication to deceptive selected reporting of findings and omission of conflicting data
- (b)(2) Plagiarism and other improper assignment of credit, such as excluding others or claiming the work of others as one's own; presentation of the same material as original in more than one publication; inclusion of individuals as authors who have not made a definite contribution to the work published; and submission of multi-authored publications without the concurrence of all authors
- (b)(3) Improper use of information gained by privileged access, such as through service on peer review panels, editorial boards, or policy boards of research funding organizations
- (b)(4) Serious deviation from the scientific method accepted in proposing or carrying out research, deliberate manipulations, or improper reporting of results
- (b)(5) Material failure to comply with federal, state, or institutional rules governing research including, but not limited to, failure to file conflict of interest reports and/or to undergo prescribed training or serious or substantial violations involving the use of funds, care of animals, protection of human subjects, use of investigational drugs, recombinant products, new devices, or radioactive, biological, and/or chemical materials
- (b)(6) Inappropriate behavior in relation to misconduct including, but not limited to, inappropriate accusations of misconduct, failure to report known or suspected misconduct, withholding or destruction of information relevant to a claim of misconduct, and retaliation against persons involved in the allegation or investigation of misconduct.

(c) **Process for Handling Allegations of Scholarly Misconduct**

- (c)(1) **Initiation of an allegation of misconduct.** Initial allegations or evidence may be reported by anyone to any faculty member or administrator, who must then report the allegations to the OUHSC Research Integrity Officer (RIO). If the person to whom the report would normally be given is involved in some way in the misconduct, the next higher academic officer should be informed. The RIO will immediately notify the Vice President for Research if PHS-supported research is involved, as well as the Office of Research Integrity. The RIO, after consultation with the Vice President for Research, will notify the appropriate individuals to take appropriate interim administrative action to protect against a threat of harm to public health or safety, federal funds and equipment, integrity of the research process, and rights and interests of individuals involved in the research misconduct proceedings. These actions will be taken regardless of the source of research support.

The RIO will counsel the individual(s) making the allegation as to the policies and procedures to be used. If the reporting individual chooses not to make a formal allegation, the RIO, in consultation with the Vice President for Research, may identify another individual to bring forth the allegations, such as the accused's department chair, or may present the allegations him/herself.

The RIO, in consultation with the Vice President for Research, shall informally review any allegations, assess and determine whether the allegations meet the definition of scholarly misconduct as defined in 3.23(b); confer with the dean of the college in which the allegation is alleged to have occurred, as well as with Legal Counsel; and make a recommendation to the Senior Vice President and Provost regarding whether the allegation warrants initiation of the Inquiry process according to the policies and procedures for scholarly misconduct, or whether other University policies or procedures should take precedence.

The University will pursue an allegation of misconduct to its conclusion, even if the person against whom the allegation is made (hereinafter referred to as the "Respondent") leaves or has left the University before the case is resolved.

**(c)(2) Sequestration and Notification**

- (a) The RIO shall take custody of, inventory, and sequester in a secure location the research evidence thought necessary to conduct the proceeding. This will be accomplished with the assistance of other individuals, e.g., the Chair of the respondent's department, Vice President for Research, and Legal Counsel.
- (b) At the time of sequestration of evidence, the RIO will notify the Respondent in writing of the allegation, provide him/her with a copy of the inventory of material secured, and provide him/her with copies of applicable policies and procedures. If there are no data to sequester, the RIO will continue with notice to the Respondent. This will typically occur within fifteen University business days after receipt of an allegation.

**(c)(3) Admission to Allegations**

If the Respondent elects to admit to the allegations against him/her at any time prior to the Committee of Investigation's submission of its report to the RIO, the Respondent shall inform the RIO who will, after consultation with the Vice President for Research, inform the Respondent of the sanctions that will be imposed by the Senior Vice President and Provost. If the Respondent still wishes to formally admit to the charges, the Respondent must send a written statement to the RIO admitting to the allegations, acknowledging understanding of the sanctions that will be imposed by the Senior Vice President and Provost, and stating that the Respondent understands that he/she is waiving his/her rights to an Inquiry and/or Investigation process, as applicable, as well as the right to appeal the sanctions. Upon receipt of this statement, the RIO will proceed as indicated in **Section (c)(7)(b)** below.

**(c)(4) Inquiry**

- (a) The first step of the review process is an Inquiry which has as its purpose fact-finding in an expeditious manner to help determine whether an allegation is deserving of further formal investigation, and, if formal investigation is not warranted, to make recommendations concerning the disposition of the case.
- (b) An Inquiry Committee composed of no fewer than three tenured faculty with no real or apparent conflict of interest, with no appointment in the department of either the individual(s) making the allegation or the Respondent, and with appropriate expertise for evaluating information relevant to the cases, shall be appointed by the RIO in consultation with the Vice President for Research. The Inquiry Committee should generally be constituted within five University business days after notification to Respondent that an Inquiry is being conducted.
- (c) The RIO shall notify the Respondent, in writing, of the proposed membership of the Inquiry Committee. The Respondent shall be given five University business days to notify the RIO in writing of any bias or conflict of interest of any proposed member.
- (d) Where the individual(s) making the allegation seeks anonymity, the Inquiry Committee shall operate in such a way as to maintain the anonymity to the degree compatible with accomplishing the fact-finding purpose of the Inquiry. Such anonymity cannot, however, be assured. Further, this anonymity may be neither desirable nor appropriate where individual testimony is important to the substantiation of the allegations.
- (e) At the first meeting of the Inquiry Committee to address the allegation, the RIO will present the charge. The charge will include the allegations and the purpose and scope of the Inquiry. The Committee will also be informed of its responsibility to prepare a written report that meets the requirements of this policy. The RIO and Legal Counsel will discuss the responsibilities of the Committee, answer procedural

questions, and emphasize the need to maintain confidentiality. The RIO will be responsible for assisting the Inquiry Committee in all of its activities, including setting committee meetings, arranging interviews, assisting with the development of plans to conduct the Inquiry within the time limit, and taking and maintaining notes for all Committee activities. The RIO will provide the Respondent with copies of all documents provided to the Inquiry Committee as soon as reasonably possible.

- (f) Information, expert opinions, records, and other pertinent data may be requested by the Inquiry Committee. All involved individuals are obligated to cooperate with this Committee by supplying such requested documents and information. Uncooperative behavior by any involved individual may result in immediate implementation of a formal investigation or University sanctions.
- (g) All material will be considered confidential and shared only with those with a need to know. A tape recording of proceedings may be made at the discretion of the Inquiry Committee chair. The RIO and the members of the Inquiry Committee are responsible for the security of relevant documents.
- (h) All forms of evidence may be gathered by the Inquiry Committee, which will also conduct interviews of all individuals possessing relevant information, and in particular, the Respondent and the individual(s) making the allegation.
- (i) All individuals may have the assistance of personal legal counsel, at their expense, at both the Inquiry and Investigation stages; however, principals are expected to speak for themselves at the interviews. Personal legal counsel is prohibited from directly addressing the Committee. If an individual brings personal counsel, the Office of Legal Counsel shall assign an attorney to attend, at the request of the Committee chair.
- (j) The review by the Inquiry Committee should be completed and a written report filed with the RIO within sixty University business days of written notification to the Respondent that an Inquiry Committee is being formed. The written report shall contain what evidence was reviewed, summarize relevant interviews, and include the findings and recommendations of the Inquiry Committee. If the Inquiry Committee determines that this deadline cannot be met, the Inquiry Committee shall request an extension from the RIO. The request must include a report of progress to date, an explanation of why an extension is needed, and the anticipated completion date. The RIO will review the report and present his/her recommendation and the request in writing to the Vice President for Research for determination. If the extension is granted, the RIO shall inform, in writing, all individuals with a need to know.
- (k) The Inquiry Committee's draft written report shall contain the following information:
  - Names and positions of the Committee members and any experts
  - Name and position of the Respondent
  - List of the allegations
  - Grant support (in particular, PHS support to include grant numbers, applications, related contracts, and publications listing support)
  - List of the research evidence reviewed
  - List of individuals interviewed and summaries of testimony
  - The Committee's recommendation on conducting an Investigation
  - The evidence supporting the recommendation
  - Other actions that should be taken if an Investigation is not recommended
  - Reasons for extension of the Inquiry beyond 60 days, if applicable

The RIO and Legal Counsel should review the draft report solely to ensure that the report includes all elements required by this policy. The Committee will make modifications if necessary and appropriate. The RIO shall give a copy of the draft report to the Respondent and provide the Respondent with access to all evidence. The Respondent shall be given ten University business days to comment in writing upon the findings and recommendations of the Inquiry Committee. These comments will be made part of the final written report.

- (l) The final written report of the Inquiry Committee will be conveyed to the Senior Vice President and Provost and the Vice President for Research.
- (m) If, after reviewing the outcome of the Inquiry, the Vice President for Research and the Senior Vice President and Provost, determines that there is a need for a formal investigation, the Senior Vice President and Provost or Vice President for Research will notify the RIO, who will initiate that action within fifteen University business days.
- (n) If, after reviewing the outcome of an Inquiry, the Senior Vice President and Provost or and the Vice President for Research determines that a formal Investigation is unwarranted, or if the Inquiry is terminated for any reason, the Senior Vice President and Provost or Vice President for Research shall inform the RIO, who shall:
  - 1) Notify all involved individuals and make diligent efforts to restore the reputations of persons alleged to have engaged in misconduct when allegations are not confirmed,
  - 2) Undertake diligent efforts to protect the positions and reputations of those persons who, in good faith, have made allegations of scientific misconduct
  - 3) If required by applicable federal regulations, send a report to the NIH Office of Research Integrity stating the intent to terminate the procedure without an Investigation and including a description of the reason for such termination.
  - 4) Take all reasonable and practical steps on behalf of the University, as appropriate, to restore the Respondent's reputation, if the Respondent so requests.

If the Inquiry Committee finds the allegations not to have not been brought in good faith, sanctions may be recommended against the individual(s) making the allegation.

- (o) Records of the Inquiry are confidential to the maximum extent possible and are to be passed on to the Committee of Investigation if a formal review is initiated. The records of Inquiry shall contain sufficiently detailed documentation of the Inquiry to permit a later assessment of the reasons for determining that an Investigation was not warranted, if necessary. If a formal Investigation is not initiated, the records shall be kept by the RIO for at least three years after completion of the Inquiry and shall, upon request, be provided to authorized Department of Health and Human Services personnel.

**(c)(5) Investigation**

- (a) Prior to initiating the formal Investigation, the RIO will immediately notify, among others with a need to know, the Director of the National Institutes of Health (NIH) Office of Research Integrity, if appropriate, and the funding source, if any, that an Investigation is being undertaken. A copy of the Inquiry Report should accompany the notification, where appropriate. This notification is expected to occur within twenty-four hours of the determination of the need for a formal Investigation. Under certain circumstances, the University may be expected to notify the sponsoring agency or funding source at a point prior to the initiation of an Investigation. Factors used in the RIO's determining the timing of such notification include the seriousness of the possible misconduct, the presence of an immediate health hazard, and consideration of the interests of the funding agency, the scientific community, the public, and the individual who is the subject of the Inquiry and his/her associates.
- (b) Prior to initiating the formal Investigation, the RIO will take all reasonable and practical steps to take custody of inventory and sequester in a secure location any research evidence that was not previously sequestered during the Inquiry or that becomes known or relevant after the Inquiry, including that thought to be needed to investigate any additional allegations or instances of possible misconduct that have resulted in broadening of the scope of the Investigation.
- (c) At the time of sequestration of evidence, the RIO will notify the Respondent in writing of the decision to begin an Investigation and provide the allegations to be investigated, including any new allegations



not addressed in the Inquiry, a copy of inventory of any additionally sequestered materials, and copies of applicable policies and procedures. If there are no data to sequester, the RIO will continue with notice to the Respondent as described above. Notification of the Respondent will typically occur within fifteen University business days after the decision to begin an Investigation.

- (d) The RIO, in consultation with the Vice President for Research, shall appoint a Committee of Investigation of no fewer than three senior faculty who have no real or apparent conflict of interest, hold no appointment in the department of either the individual(s) making the allegation or the Respondent, and have appropriate expertise for evaluating the information relevant to the case. Preferably, at least one member should not be associated with the University. The purpose of the Committee of Investigation is to further explore the allegation(s), determine whether scholarly misconduct has been committed, and, if so, determine the extent of the misconduct. The Committee of Investigation should be constituted within five University business days after notification of Respondent that an Investigation is being conducted.
- (e) The RIO shall notify the Respondent, in writing, of the proposed membership of the Committee of Investigation. The Respondent should be given five University business days to notify the RIO in writing of any bias or conflict of interest of any proposed member.
- (f) At the first meeting of the Committee of Investigation, the RIO will present the charge. The charge will include the initial allegation(s) as well as any additional allegation(s) and issues identified during the Inquiry, and the purpose and scope of the Investigation. The original and any additional respondents will be identified. The Committee will be informed of its responsibility to conduct the Investigation as described in this policy and to prepare a written report that meets the requirements of this policy. The RIO and Legal Counsel will discuss the responsibilities of the Committee, answer procedural questions, and emphasize the need to maintain confidentiality. The RIO will be responsible for assisting the Investigation Committee in all their activities, including setting committee meetings, arranging interviews, assisting with the development of plans to conduct the Investigation within the time limit, and taking and maintaining notes for all Committee activities.
- (g) The Investigation normally will include examination of all documentation, including, but not necessarily limited to, relevant research data and proposals, publications, correspondence, and memoranda of telephone calls. Interviews should be conducted with all individuals involved. The interviews should include the Respondent and the individual(s) making the allegation, as well as other individuals who might have information regarding key aspects of the allegations.

The respondent shall be given the opportunity to address the allegations and evidence presented at the interviews. Complete summaries of these interviews should be prepared, provided to the interviewed party for comment or revision, and included in the investigatory file. The Committee of Investigation may request the involvement of outside experts. The Investigation must be sufficiently thorough to permit the Committee of Investigation to reach a firm conclusion about the validity of the allegations and the scope of the wrongdoing or to be sure that further investigation will be unlikely to alter an inconclusive result. In the course of an Investigation, additional information may emerge that may justify broadening the scope of the Investigation beyond the initial allegation. Should this occur, the Respondent is to be informed, by the RIO, after consultation with the Vice President for Research, in writing of any significant new directions in the Investigation.

- (h) All individuals involved in the Investigation are obligated to cooperate in a timely fashion by producing any additional data requested for the Investigation.
- (i) The proceedings of the Committee of Investigation are confidential and will be closed. A tape recording of proceedings may be made at the discretion of the chair of the Committee of Investigation.
- (j) The review by the Committee of Investigation should be completed and a written report filed within 120 University business days of written notification to the Respondent that an Investigation was being initiated. If the Committee of Investigation determines that this deadline cannot be met, the Committee shall request an extension from the RIO. The request must include a report of progress to date, an explanation of why an extension is needed, and the anticipated completion date. The RIO will



review the report and present his/her recommendations and the written request to the Vice President for Research for determination. If the extension is granted, the RIO shall inform all individuals with a need to know.

- (k) Any significant developments during the formal Investigation will be reported by the RIO to the Vice President for Research, the research sponsor, the NIH Office of Research Integrity, if appropriate, and others as needed.
- (l) Upon completion of the Investigation, the Committee of Investigation shall deliberate and prepare its findings and recommendations. The Committee of Investigation shall submit to the RIO a full written report which details the Committee of Investigation's findings and recommendations and the documentation to substantiate the findings.

The Committee of Investigation's draft written report must include the following information:

- Nature and specifics of the allegations included in the charge to the Committee
- Grant support (in particular, PHS support to include grant numbers, applications, related contracts and publications listing support), pending grant proposals that may be impacted by scholarly misconduct actions, and manuscripts and submitted manuscripts that may be impacted by scholarly misconduct
- List of research evidence secured along with identification and summary of that which was reviewed
- Statement of finding for each individual allegation that includes the type of misconduct (falsification, fabrication, plagiarism, etc.), and whether it was intentional, knowing, or done in reckless disregard; summarized supportive facts and analyses, including the merits or reasonable Respondent explanations; individual(s) responsible for the misconduct; PHS and non-PHS support including past, current, and pending applications, and whether correction or retraction of any publications, including submitted manuscripts, is needed
- Names and positions of the Committee members and any experts who were interviewed
- Name and position of each Respondent
- Reasons for extension of the Investigation beyond 120 days, if applicable
- Recommended University actions

The RIO and Legal Counsel will review the draft report solely to ensure the report includes all elements required by this policy. The Committee will make modifications if necessary and appropriate. This draft report shall be sent by the RIO to the Respondent and Complainant, if appropriate, along with a copy of or supervised access to the evidence on which the report is based. The Respondent and Complainant, if appropriate, shall be given 20 University business days to comment in writing on the allegations, evidence, findings, and recommendations of the Committee of Investigation. A copy of these comments must be attached to the final report.

- (m) The RIO will transmit the final report, including the Respondent's comments, to the Senior Vice President and Provost and the Vice President for Research. The Senior Vice President and Provost shall then make the decision based on the findings and recommendations, and, if applicable, impose sanctions. The Senior Vice President and Provost will consider the comments by the Respondent and Complainant, if any, before making his/her decision. If the Senior Vice President and Provost's determinations differ from those in the Investigation report, the Senior Vice President and Provost will document in writing the basis of his/her decision and will attach the documentation to the Investigation report. The Senior Vice President and Provost may also return the report to the Investigation Committee with a request for further fact-finding and analysis.
- (n) The Senior Vice President and Provost shall inform the Respondent in writing of the final determination and any sanctions, as well as the appeal process. If the sanctions involve the recommendation for termination of employment or abrogation of tenure, the Senior Vice President and Provost will comply with the University termination or abrogation procedures.
- (o) When appropriate, the RIO will submit the final report of the Investigation to the Director of the NIH Office of Research Integrity and the funding agency. In cases involving a recommendation for severe sanctions, the notification will state, "These sanctions are being recommended and, following University policy, appropriate procedures to appeal the case may be initiated by the Respondent."

(c)(6) **Termination of Inquiry or Investigation**

If PHS support is involved and if the University plans to terminate an Inquiry or Investigation for any reason, other than 1) closure after the Inquiry because an investigation is not warranted or 2) a finding of no misconduct in the Investigation, the RIO must notify the Office of Research Integrity in advance for consultation and advice. Examples of reasons that could result in termination of the Inquiry or Investigation process include, but are not limited to, admission of guilt by the Respondent.

(c)(7) **Resolution**

- (a) **Finding of absence of scholarly misconduct.** The RIO is responsible for the following actions. All research sponsors and others initially informed of the Investigation shall be informed in writing that allegations of misconduct were not supported. If the allegations are deemed to have not been made in good faith, appropriate disciplinary action should be taken against the individuals making the allegation. If the allegations, however incorrect, are deemed to have been made in good faith, no disciplinary measures are indicated and an effort should be made to prevent retaliatory actions. In publicizing the findings of no misconduct, the University should be guided by whether public announcements will be harmful or beneficial in restoring any reputations that may have been affected. Usually, such decisions should rest with the person who was wrongfully accused. Diligent efforts, as appropriate, should be undertaken to restore the reputations of persons alleged to have engaged in misconduct when allegations are not confirmed and to protect the positions and reputations of those persons who, in good faith, made allegations.
- (b) **Findings of scholarly misconduct.** The RIO is responsible for notification of all federal agencies, sponsors, or other entities initially informed of the Investigation of the finding of scholarly misconduct. The University should take action appropriate for the seriousness of the misconduct, including, but not limited to, the following:
  - 1) **Notification:** Consideration should be given to formal notification of the following, among other appropriate entities:
    - Sponsoring agencies, funding sources
    - Co-authors, co-investigators, collaborators
    - Department, School, or University
    - Editors in journals in which fraudulent research was published
    - Editors of other journals or publications, other institutions, other sponsoring agencies, and funding sources with which the individual has been affiliated
    - State professional licensing boards
    - Professional societies
  - 2) **Institutional Disciplinary Action,** including, but not limited to, the following:
    - Removal from particular project
    - Special monitoring of future work
    - Letter of reprimand
    - Probation for a specified period, with conditions specified
    - Suspension of identified duties or privileges for a specified period, with or without salary
    - Termination of employment/Abrogation of Tenure

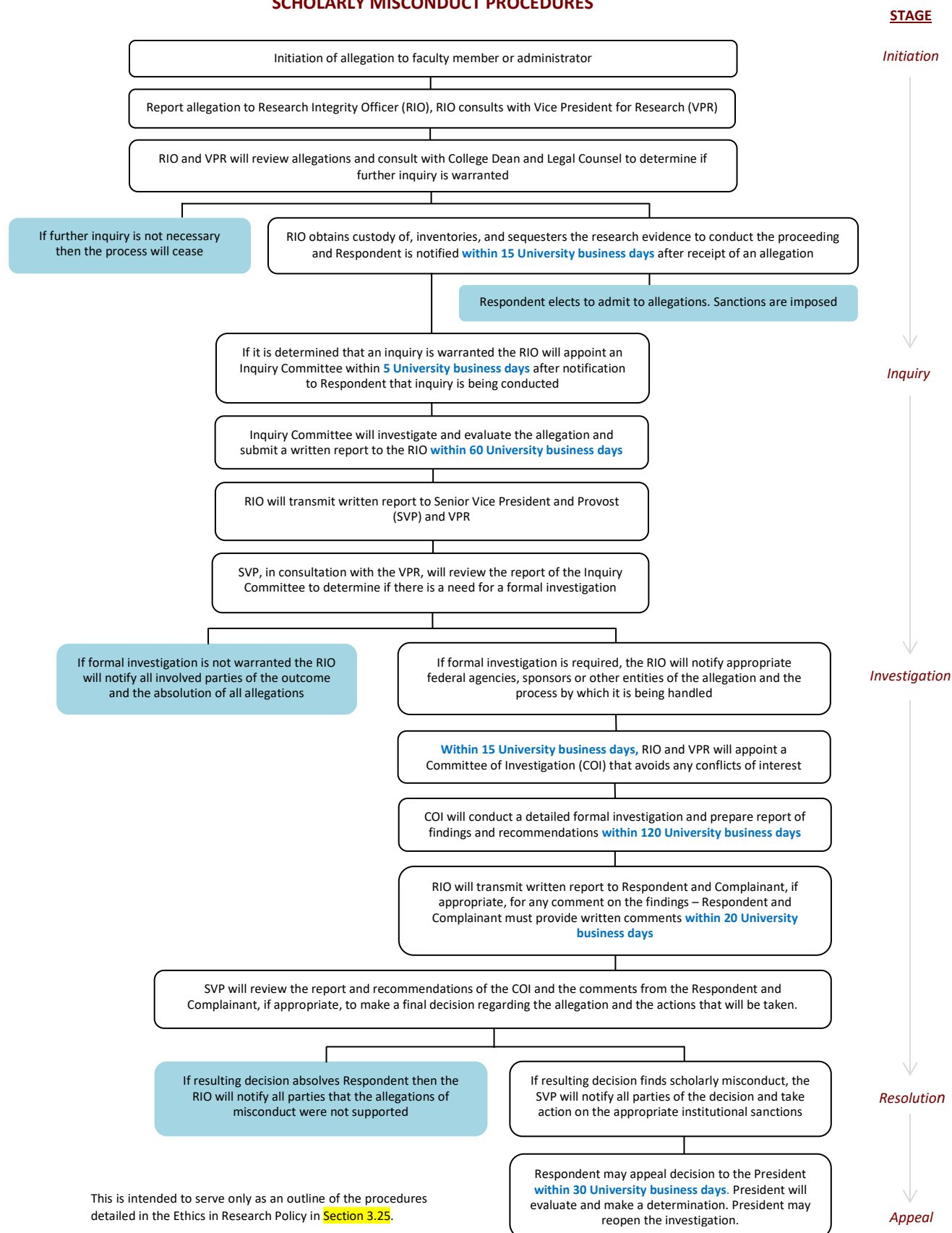
(c)(8) **Appeal**

Individuals may appeal the finding of the Committee of Investigation and/or the sanction. A written statement of the grounds for the appeal must be submitted to the President within thirty University business days of written notification of the results of the Investigation. Grounds for appeal include new previously unconsidered evidence that was not available earlier, sanctions not in keeping with the findings, conflict of interest not previously known among those involved in the Investigation, or lapses in due processes. Upon receipt of a written appeal, the President

will evaluate the evidence and make a determination. At the President's discretion, the Investigation may be reopened. The President's decision will be binding on all parties and will be conveyed to all involved in a timely fashion. In case of termination of employment or abrogation of tenure, the decision may be appealed, according to University policies.

(Regents, 6-25-97, 6-25-08, 12-7-12, 9-14-17)

## SCHOLARLY MISCONDUCT PROCEDURES



## **4. STUDENT POLICIES AND SERVICES**

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### **4.1 STUDENT ADMISSION**

Policies and procedures as they relate to student admission may be obtained from the appropriate college or by contacting the Office of Admissions and Records.

### **4.2 STUDENT ENROLLMENT**

Policies and procedures as they relate to student registration, adding/dropping courses, and student withdrawals may be obtained from the current *Student Handbook* or by contacting the Office of Admissions and Records.

### **4.3 ENROLLMENT TO AUDIT COURSES**

Auditing a class is permitted in all courses, subject to approval of the instructor and the dean of the college in which the course(s) is offered. Enrollment exclusively as an auditor requires one to meet the University's and or program's minimum admission requirements. Enrollment to audit must be completed by the last day of enrollment in any term. Further information may be obtained from the *Student Handbook* or by contacting the Office of Admissions and Records.

### **4.4 ENROLLMENT AS A SPECIAL STUDENT**

Any person who is admissible to the University of Oklahoma and who wishes to take courses without the intention of pursuing a degree may do so under the classification of Special Student. Enrollment as a Special Student requires one to meet the University's and or program's minimum admission requirements.

Enrollment as a Special Student is limited to 12 credit hours or three (3) terms, whichever comes first. Credit earned as a Special Student may be petitioned to be counted toward a degree program provided the criteria for full standing admission is met at the time of admission.

Special students are not eligible for financial aid. International students attending on an F1 visa are not eligible to enroll as a Special Student. For additional information on procedures and policies, contact the Office of Admissions and Records.

(Regents, 9-14-17)

### **4.5 HEALTH SCIENCES CENTER STUDENT ENROLLMENT IN NORMAN CAMPUS COURSES**

OUHSC students desiring to enroll in courses on the Norman campus must receive permission from their HSC college. Norman campus courses will be listed on the HSC student's transcript. For further information, contact the HSC Office of Admissions and Records at 271-2359.

### **4.6 NORMAN CAMPUS STUDENTS ENROLLING IN HEALTH SCIENCES CENTER COURSES**

Norman campus students desiring to enroll in courses on the Health Sciences Center campus must secure special permission from the HSC instructor before beginning the enrollment process and should do so in the Norman campus Office of Admissions and Records at 325-3572.

### **4.7 OTHER ENROLLMENT OPPORTUNITIES**

Information on independent study, courses taught off-campus, and intersession courses may be obtained from a current class schedule or by contacting the Office of Admissions and Records.

### **4.8 FULL-TIME STUDENTS**

To be considered full-time, an undergraduate student must be enrolled in at least six (6) hours in a summer session and at least twelve (12) hours in a fall or spring semester.

Full-time enrollment for graduate students is nine (9) semester hours during each of the fall and spring semesters and four (4) semester hours during the summer sessions. Students may not carry more than sixteen (16) hours per

semester for graduate credit or more than nine (9) semester hours per summer session without the permission of the dean.

A graduate assistant holding a 0.50 FTE appointment will be required to enroll in at least six (6) hours during each of the fall and spring semesters and at least three (3) hours for summer semester.

Many professional programs, i.e., dental, medical, physician assistant or associate, and pharmacy, require students to be enrolled full-time. In the event the students are required to repeat one or more courses, the enrollment status will be determined on a percentage basis. Students should contact their colleges for full-time requirements.

#### 4.9 GRADING SYSTEM AND REPORTING OF GRADES

Grade reports at the end of a semester or a summer term must be filed with the Office of Admissions and Records no later than the date specified on the academic calendar. Final grade reports must be filed 96 hours after the last day of classes. Clinical rotation grades are due 6 weeks after the last date of the clinical rotation.

The University of Oklahoma Health Sciences Center (OUHSC) is excluded from participation in the Oklahoma State Regents for Higher Education (OSRHE) Academic Forgiveness Provision, including repeat, reprieve, and renewal. Therefore, **all grades earned will be included** in grade point calculations when applying for acceptance to an OUHSC program. OUHSC student undergraduate coursework is included in this policy. (OSRHE Approved, 6-21-93)

#### 4.10 ACADEMIC CALENDAR STANDARDS

All classes are expected to meet for sixteen (16) weeks unless specific approval has been received from the OSRHE. With the exception of the College of Medicine that uses clock hour calculation, the semester-credit-hour is the standard unit of credit used to evaluate a student's educational attainment and progress. Courses offered during academic terms shorter than a semester observe the same standards involving instructional hours per semester-credit-hour as those courses offered during a standard academic semester. Organized examination days may be counted as instructional days.

The semester-hour of credit is calculated as follows:

- (a) One semester-hour of credit is normally awarded for completion of a course meeting for 800 instructional minutes, (50 minutes per week for 16 weeks), exclusive of enrollment, orientation and scheduled breaks.
- (b) Laboratory credit is normally awarded at a rate not to exceed one-half the instructional rate. One (1) semester-hour of credit is normally awarded for completion of a laboratory meeting a minimum of 1600 minutes (100 minutes per week for sixteen weeks).
- (c) Clinical credit is normally calculated at three (3) clinical hours equaling one credit hour.

(OSRHE Policy and Procedures Manual)

#### 4.11 FINAL EXAMINATIONS

A final examination schedule is printed each semester and published on the Admissions and Records website. Faculty are not permitted to deviate from the printed final examination schedule without permission from the college dean and the Vice Provost for Academic Affairs.

A student will not be expected to take more than two final examinations in one day. In cases where a student has three or more exams scheduled for the same day, instructors must offer make-up exams. Contact the Office of Admissions and Records for procedural instructions.

#### 4.12 CLASS ATTENDANCE

Only students who are officially enrolled (either for credit or audit) and have paid the required tuition/fees may attend class. The individual instructor is responsible for communicating the specific policy concerning attendance requirements.

#### 4.13 RESIDENT STATUS

Students who are not residents of Oklahoma must pay non-resident tuition in addition to other fees. Members of the armed forces stationed in Oklahoma and their dependents are ordinarily eligible for in-state tuition rates.

It is the responsibility of each applicant to submit any question about resident status to the Office of Admissions and Records for a decision. The Oklahoma State Regents for Higher Education policy governs resident status for all state-supported institutions of higher education in Oklahoma. This policy may be found online at: <http://www.okhighered.org/>. Additional information and the Petition for Oklahoma Residency is found on the Admissions and Records website.

#### 4.14 WAIVER OF FEES

No student fee, resident or-non-resident, may be assessed or waived unless by general policy or by specific authorization of the Oklahoma State Regents for Higher Education. Further information may be obtained from the Vice Provost for Academic Affairs.

#### 4.15 TUITION WAIVER FOR GRADUATE ASSISTANTS

Graduate students with at least a .50 FTE graduate assistantship are eligible for tuition waivers irrespective of Oklahoma residency status. Graduate assistants involved in teaching must be proficient in both oral and written English. The ability to communicate course material effectively in understandable English is required of all graduate teaching assistants awarded these waivers. Scholarships awarded to graduate students meeting the above criteria shall not be subject to the limit of three percent of the Educational and General Budget – Part I.

(State Regents' Policies and Procedures, Adopted 4-29-68, revised 12-17-90, 5-31-96)

#### 4.16 ACADEMIC APPEALS POLICY AND PROCEDURES

The Academic Appeals policy provides students with an appeal mechanism by which they can request a hearing before an Academic Appeals Board for appeals related to: an academic evaluation in a course; a thesis or dissertation defense or a general or comprehensive exam; suspension or dismissal under the Student Professional Behavior in an Academic Program Policy; academic program-related decisions resulting in the student being dismissed from a program or being required to repeat a semester or year. The sole basis for an appeal is an alleged prejudiced or capricious evaluation or decision. The policy and procedures regarding academic appeals are detailed in the Academic Appeals Policy and Procedures (Appendix C). Further information may be obtained from the Vice Provost for Academic Affairs.

#### 4.17 ACADEMIC INTEGRITY

Academic Integrity means honesty and responsibility in scholarship. The basic assumptions regarding student academic work at the University of Oklahoma are:

- (a) Students attend the University of Oklahoma in order to learn and grow intellectually.
- (b) Academic assignments exist for the sake of this goal and grades exist to show how fully the goal is attained.
- (c) A student's academic work and grades should result from the student's own effort to learn and grow. Academic work completed any other way is pointless, and grades obtained any other way are fraudulent.

Academic integrity means understanding and respecting these basic truths, without which no University can exist. Academic misconduct violates the assumptions at the heart of all learning. It destroys the mutual trust and respect that should exist between student and professor. Academic misconduct is unfair to students who earn their grades honestly.

(Regents, 12-3-02)

#### **4.18 ACADEMIC MISCONDUCT CODE**

The Academic Misconduct Code describes academic misconduct as including cheating, plagiarism, fabrication, fraud, destruction, bribery or intimidation, assisting others in any act proscribed by this Code, or attempting to engage in such acts. The policy and procedures regarding dishonest work and definitions of each types of academic misconduct are detailed in the Academic Misconduct Code ([Appendix C](#)).

It is the responsibility of each faculty member and each student to be familiar with the definitions, policies, and procedures concerning academic misconduct as cited in [Appendix C](#). Further information may be obtained from the Vice Provost for Academic Affairs.

(Regents, 1-26-99, 12-3-02, 6-25-08)

#### **4.19 COMPLETION OF ACADEMIC WORK FOR OTHERS**

- 1) A staff or faculty member who writes, compiles, or otherwise completes academic work for use by or sale to students of the University shall be discharged from employment.
- 2) Any student who writes, compiles, or otherwise completes academic work for sale to or use by students of the University or and (3) any student who sells academic work or uses a commercial term paper to complete academic assignments is subject to the Academic Misconduct Code.

(Regents, 12-3-02)

#### **4.20 STUDENT PROFESSIONAL BEHAVIOR IN AN ACADEMIC PROGRAM POLICY**

As a distinct learning community within the University, the OUHSC has established the Student Professional Behavior in an Academic Program Policy and adopted procedures for addressing standards of ethical and professional behavior for OUHSC students. The policy and procedures identify student responsibilities and rights in conjunction with standards of fairness, privacy, and due process. The policy and procedures are detailed in the Student Professional Behavior in an Academic Program Policy ([Appendix C](#)). Further information may be obtained from the Vice Provost for Academic Affairs.

#### **4.21 STUDENT RIGHTS AND RESPONSIBILITIES CODE**

The purpose of the Student Rights and Responsibilities Code is to establish specific student rights and responsibilities while maintaining an environment conducive to the University of Oklahoma's mission. The processes and procedures of this Code establish and enforce standards of conduct through educational experiences, fostering student learning and development while maintaining student retention. The Code and the Procedures are detailed in [Appendix C](#).

#### **4.22 ETHICS IN RESEARCH**

Students are governed by the Policy on Ethics in Research ([Section 3.25](#)).

#### **4.23 INTELLECTUAL PROPERTY POLICY**

The terms of the Intellectual Property Policy are a part of any relationship of the University with any member of the faculty, staff, or student body. The policy, as amended from time to time, shall be deemed to be a part of the conditions of enrollment and attendance at the University by all students engaged in research using University resources and facilities ([Appendix D](#)).



#### 4.24 NON-DISCRIMINATION POLICY AND GRIEVANCE PROCEDURE

This policy, in its entirety, is contained in [Appendix J](#).

The University in compliance with all applicable federal and state laws and regulations does not discriminate on the basis of race, color, national origin, sex, sexual orientation, genetic information, gender identity, gender expression, age (40 or older), religion, disability, political beliefs, or status as a veteran in any of its policies, practices, or procedures. This includes, but is not limited, to admissions, employment, financial aid, housing, services in educational programs or activities, or health care services that the University operates or provides. Please refer to the University's Equal Opportunity Office's policies and procedures for a more detailed explanation and complaint procedure ([Appendix J](#)). Or, contact the Equal Opportunity Office on the Health Sciences Center campus directly at: (405) 271-2110, Room 164H, Robert M. Bird Library Building.

(Regents, 7-22-81, 9-17-81, 9-9-82, 9-27-95, 1-14-97, 1-27-04, 9-19-11, 6-24-15, 3-8-17)

#### 4.25 OFFICE OF EQUAL OPPORTUNITY

The University of Oklahoma in compliance with all applicable federal and state laws and regulations does not discriminate on the basis of race, color, national origin, sex, sexual orientation, genetic information, gender identity, gender expression, age (40 or older), religion, disability, political beliefs, or status as a veteran in any of its policies, practices, or procedures. This includes, but is not limited to, admissions, employment, financial aid, housing, services in educational programs or activities, or health care services that the University operates or provides.

#### 4.26 RELEASE OF STUDENT INFORMATION AND ACCESS TO STUDENT RECORDS

Information maintained by the University of Oklahoma about students and in some instances former students is covered under the Family Educational Rights and Privacy Act (FERPA). FERPA information is defined as either directory or confidential. Any office gathering such information and/or having custody of it shall release it only in accordance with this policy or as otherwise required by law. When a student enrolls at the university and furnishes data required for academic and personal records, there is an implicit and justifiable assumption of trust placed in the University as custodian of such information. This relationship continues with regard to any data subsequently generated during the student's enrollment.

While the University fully acknowledges the student's rights of privacy concerning this information, it also recognizes that certain information is part of the public record and may be released for legitimate purposes in accordance with applicable law. With these considerations in mind, the University adopts the following policy concerning the release of information contained in student records:

##### 4.26.1 Directory Information

This is information which routinely appears in student directories and alumni publications and may be freely released. Upon written request by the student, directory information will be treated as confidential and released only with the student's consent except where disclosure is required or permitted by law. Students may at any time request that directory information be treated as confidential. Students should contact the Registrar at their specific campus location for the appropriate forms. Students should be advised that by withholding directory information, University officials are prohibited from releasing any form of information without their consent, or as permitted or required by law. This means the status of students who apply for an auto loan, good student discount, or apartment lease, or who need employment verification, enrollment verification, or loan deferments, for example, will only be verified by University officials when accompanied by a release from the student.

**Directory information includes the following:**

The University of Oklahoma, in compliance with the Family Educational Rights and Privacy Act (FERPA), has designated specific information as Directory Information:

- Name
- Home & Permanent Address
- Email Address
- Telephone numbers

- Major field of study
- Class year
- Enrollment status
- Anticipated degree date
- Participation in officially recognized University activities
- Degrees and awards received (including outstanding or recognized academic achievement)
- Most recent previous educational institution attended

Although not specifically included within the definition of directory information, the University permits faculty to post individual student grades and interim class evaluations provided the information is identified by code numbers and does not identify the student. Students who do not want this information released or posted must notify their instructor or the Registrar's office.

#### 4.26.2 Confidential Information

This is all other information contained in the student's educational record that can be released only upon the written consent of the student, with the following exceptions defined in the Family Educational Rights and Privacy Act of 1974, as amended, which waive the requirement for prior student consent.

#### 4.26.3 Disclosure of Education Records is Permitted

- (a) To school officials who have a legitimate educational interest in the records. School officials are defined as follows:
- A person employed by the University in an administrative, supervisory, academic or research, or support staff position, including law enforcement personnel and health or medical staff.
  - A person serving on the Board of Regents.
  - A person or company under contract to the University to perform a service or function (such as attorney, auditor, or collection agent), instead of using University employees or officials.
  - A person who is employed by the University law enforcement unit.
  - A person who is assisting another school official in performing his/her tasks including but not limited to a student serving on an official committee, such as a disciplinary or grievance committee.

A school official has a legitimate educational interest if the official is:

- Performing a task that is necessary to fulfill his or her professional responsibilities for the University.
  - Performing a task related to a student's education
  - Performing a task related to the discipline of a student
  - Providing a service or benefit relating to the student or student's family, such as health care, counseling, job placement, scholarship, or financial aid
  - Maintaining the safety and security of the campus
- (b) To officials of other institutions in which a student seeks or intends to enroll on the condition that the institution makes a reasonable attempt to inform the student of the disclosure, unless the student initiates the transfer, or this type of disclosure is covered under the University's annual notification.
- (c) To certain officials of the Department of Education, the Comptroller General, Attorney General of the United States, and state and local educational authorities, in connection with audit or evaluation of certain state or federally supported education programs, or for enforcement of, or compliance with, federal legal requirements that relate to these programs.
- (d) In connection with a student's request for or receipt of financial aid to determine the eligibility, amount, or conditions of the financial aid, or to enforce the terms and conditions of the aid.
- (e) To state and local officials or authorities if specifically required by a state law that was adopted before November 19, 1974.

- (f) To organizations conducting certain studies, as further detailed under FERPA, for or on behalf of the University.
- (g) To accrediting organizations to carry out their functions.
- (h) To parents of an eligible student who is claimed as a dependent for income tax purposes (proof of dependency is required). Parents of international students are excluded. International students sign a I-20 granting specific agencies access to educational records.
- (i) To comply with a judicial order or a lawfully issued subpoena, provided that the institution makes a reasonable effort to notify the student of such prior to compliance in accordance with FERPA.
- (j) The Attorney General of the United States. or his designee.
- (k) To appropriate parties in a health or safety emergency.
- (l) To individuals requesting directory information so designated by the University.
- (m) To notify the alleged victim or general public of the final results of any disciplinary proceeding conducted by the University against an alleged perpetrator of a crime of violence or non-forcible sex offense and the student has committed a violation of the University's rules or policies with respect to the allegation.
- (n) To parents regarding the student's violation of any federal, state, or local law, or of any rule or policy of the institution governing the use or possession of alcohol or controlled substance if the institution determines that the student has committed a disciplinary violation with respect to the use or possession and the student is under the age of 21 at the time of the disclosure to the parent.
- (o) The disclosure concerns sex offenders and other individuals required to register under section 170101 of the Violent Crime Control and Law Enforcement Act of 1994, 34 U.S.C. 14071 and the information was provided to the University under 42 U.S.C. 14071 and applicable federal guidelines.

Confidential information shall be transferred to a third party, however, only on the condition that such party will not permit any other party to have access to the information without the written consent of the student.

#### **4.26.4 Record of Requests for Disclosure**

The Registrar maintains a record of all requests for and/or disclosures of information from a student's education records. The record indicates the name of the party making the request, any additional party to whom it may be disclosed, and the legitimate interest the party has in requesting or obtaining the information. The record may be reviewed by the eligible student.

When a student signs a release authorizing another party access to his or her educational record, that signed release, including identification of the individual and organization to which access has been authorized and the use of the data gathered, is maintained by the Registrar. Student requests for copies of their own educational records (such as transcripts) are also retained by the Registrar simply as a record of the request having been completed.

#### **4.26.5 Procedures to Inspect Education Records**

Students may inspect and review their education records upon request to the appropriate records custodian or appropriate University staff person. Refer to the section within this policy that defines the type of records along with the location and name of the custodian.

Students should submit to the records custodian or an appropriate University staff person a written request which identifies as precisely as possible the record or records he or she wishes to inspect.

The records custodian or an appropriate University staff person will make the needed arrangements for access as promptly as possible and notify the student of the time and place where the records may be inspected. Access must be given in 45 calendar days or less from the date of receipt of the request.

When a record contains information about more than one student, the student may inspect and review only the records which relate to him or her. Information that identifies the other student must be redacted.

#### **4.26.6 Correction of Education Records**

Students have the right to challenge and request amendment of the contents of records that they believe are inaccurate, misleading or in violation of their privacy rights.

- 1) A student must ask the appropriate University official to amend a record. In so doing, the student should identify the part of the record to be amended and specify why the student believes it is inaccurate, misleading, or in violation of his or her privacy rights.
- 2) Within a reasonable period of time, the University will either comply with the request or not comply. If it decides not to comply, the University will notify the student of the decision and advise the student of his or her right to a hearing to challenge the information believed to be inaccurate, misleading, or in violation of the student's privacy rights.
- 3) Upon request, the University will arrange for a hearing and notify the student reasonably in advance of the date, place, and time of the hearing.
- 4) The hearing will be conducted by the Registrar or Vice Provost for Academic Affairs. The student shall be afforded a full and fair opportunity to present evidence relevant to the issues raised in the original request to amend the student's education records. The student may be assisted by one or more individuals, including an attorney retained at his or her expense. The University may be represented by University Legal Counsel.
- 5) The University will prepare a written decision based solely on the evidence presented at the hearing. The decision will include a summary of the evidence presented and the reasons for the decision and shall be delivered to all parties concerned who have a legitimate education interest.
  - (a) If the University decides that the information in the student's record is inaccurate, misleading, or in violation of the student's right of privacy, it will amend the record and notify the student, in writing, that the record has been amended.
  - (b) If the University decides that the challenged information is not inaccurate, misleading, or in violation of the student's right of privacy, it will notify the student that he or she has a right to place in the record a statement commenting on the challenged information and/or a statement setting forth reasons for disagreeing with the decision.
  - (c) The statement from the student will be maintained as a part of the student's education records as long as the contested portion is maintained. If the University discloses the contested portion of the record, it must also disclose the student's statement.

#### **4.26.7 Limitations on Right of Access**

The University reserves the right to refuse to permit a student to inspect the following records:

- 1) The financial statement of the student's parents.
- 2) Letters and statements of recommendation for which the student has waived his or her rights of access, or which were maintained before January 1, 1975.
- 3) Records related to an application to attend the University of Oklahoma or a component unit or campus of the University if that application was denied.

- 4) Those records that are excluded from the FERPA definition of education records.

#### **4.26.8 Refusal to Provide Copies**

The University has a policy that denies students copies of their educational records, including transcripts, under certain conditions. While the University cannot deny students access to their education records, students will be denied copies of those records in the following situations.

- 1) The student has an unpaid financial obligation to the University
- 2) There is an unresolved disciplinary action against the student
- 3) The education record requested is an exam or set of standardized test questions

#### **4.26.9 Parental Access to Student Academic Records**

Parents of a dependent student may have access to grades and other confidential academic information under guidelines provided in the Family Educational Rights and Privacy Act of 1974. Access to this information is limited to parents who claim the student as a dependent for income tax purposes. Each request for parental access must include a copy of the top portion of the parent's most recent tax return, showing the student's identifying information.

Requests from parents for specific grade or other academic information are addressed to the Office of Admissions and Records.

#### **4.27 OKLAHOMA OPEN RECORDS ACT**

The University of Oklahoma follows the Oklahoma Records Act. The University of Oklahoma Board of Regents has approved a policy concerning the implementation of that act at the University. For information concerning that policy, contact the University's Open Record Officer.

#### **4.28 E-MAIL**

E-mail is an electronic form of memos, letters, or voice mail and should be used in the same manner as these three modes of communication. E-mail messages should not contain information that one would not want made public. (See Acceptable Use Policy in [Section 7.3.1](#))

#### **4.29 HSC STUDENT AFFAIRS**

HSC Student Affairs is dedicated to the support and enhancement of the academic mission of the University. The office provides student life programming and services to both current and prospective students. Programming is structured to complement the student's academic experience, celebrate the rich diversity of the campus, provide opportunities to develop leadership skills and participate in community service, and offer an entertaining and safe social atmosphere. Services are offered to ensure the physical, emotional, and mental health of all students and provide guidance toward a career as a health care professional.

Service areas include:

- Campus Life
- David L. Boren Student Union
- Multicultural Student Services
- Professional Services (e.g. HSC Writing Center)
- Recreational Services (e.g. IM Sports)
- Recruitment Services
- Student Counseling Services
- Student Health Services
- Student Organization (e.g. Student Government)
- University Village Apartments

HSC Student Affairs is located in Suite 300 of the David L. Boren Student Union. To contact HSC Student Affairs please

call (405) 271-2416 or email [students@ouhsc.edu](mailto:students@ouhsc.edu). For more information regarding HSC Student Affairs, please visit <http://students.ouhsc.edu/>.

### 4.30 STUDENT COUNSELING SERVICES

Student Counseling Services at the Health Sciences Center provides confidential individual, couples, group, and crisis counseling to HSC students. Costs for services are included in student fees. Testing and assessment services are also available for an additional fee. Outreach presentations and workshops on a variety of topics such as Study Skills, Stress Management, Test Anxiety, and Relationship Workshops are also available to students. In addition, presentations can also be given to faculty and staff on topics such as Recognizing and Assisting Distressed Students and Suicide Prevention/QPR training.

Counseling services are available to students in the David L. Boren Student Union. To schedule an appointment for counseling, testing, or an outreach presentation, please call (405) 271-7336, Monday through Friday, 8 a.m. to 5 p.m. Appointments hours are 8 a.m. to 5 p.m., Monday through Friday with extended hours on various days of the week.

For more information on Student Counseling Services, visit <http://students.ouhsc.edu/SCS.aspx>

### 4.31 OFFICE OF FINANCIAL AID

Information on scholarships and financial aid may be obtained from the Office of Student Financial Services at (405) 271-2118 or by visiting the David L. Boren Student Union, Suite 301. For more information, please visit <http://www.ouhsc.edu/financialservices/SFA/>.

### 4.32 STUDENT ORGANIZATION ADVISORS

Students are represented at the college level by their respective college student councils. Faculty or staff advisors for these student councils are recommended by the council and approved by the dean of the respective college. Students are represented at the campus level by the University of Oklahoma Health Sciences Center (OUHSC) Student Association, whose membership is composed of representatives of the college student councils. The faculty or staff advisor for this organization is the Vice President for Student Affairs or his/her designee.

The advisor should attend the meetings of the organization; be active with the group in formulating and executing its policies and program activities, including social functions, in keeping with the purpose of the organization and the functions of the University; be aware of University policies and regulations concerning student organizations; and supervise the funds of the organization in accordance with the following regulations established by the Board of Regents. Advisors should also be aware of the University of Oklahoma's Travel Policy when arranging travel plans for a Registered Student Organization. Undergraduate, graduate and professional students traveling in connection with events and activities of a Registered Student Organization or Registered Sports Club must follow the procedures of this policy if the travel is 1) out-of-state and/or 2) requires an overnight stay. Further information for OU Travel Policies can be found at <http://students.ouhsc.edu/FormsandPolicies.aspx>.

Regulations of the Board of Regents make it mandatory for all student organizations to keep their accounts in the University. All state funds received by the organization must be deposited in its University account. All expenditures must be supported by written voucher and made by University check after approval of the faculty or staff advisor.

For more information regarding the process of student organization registration or for a complete listing of registered student organizations on campus, please visit <http://students.ouhsc.edu/StudentOrganizations.aspx>.

### 4.33 SERVICES FOR STUDENTS WITH A DISABILITY

The University of Oklahoma is committed to the goal of achieving equal educational opportunity and full participation for students with disabilities. Consistent with the Rehabilitation Act of 1973, as amended, and the Americans with Disabilities Act of 1990, as amended, The University of Oklahoma ensures that no "qualified individual with a disability" will be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination solely on the basis of disability under any program or activity offered by The University of Oklahoma.

Accommodations on the basis of disability are available by contacting the Disability Resource Center (DRC) by email, [drc@ou.edu](mailto:drc@ou.edu), or by calling (405) 325-3852 Voice or (405) 217-3494 (VP).

Students requesting disability-related services or accommodations are required to submit appropriate documentation to substantiate the disability. DRC staff will review the documentation and send an e-mail to the student's university e-mail account that explains the eligibility determination. Students can expect to receive an initial response within 15 University business days of the Center's receipt of the documentation. Students with disabilities will then schedule an appointment for an initial intake procedure with the Disability Resource Center staff. During this appointment DRC staff and the student will engage in an interactive process and discuss any history of accommodation, strengths and limitations, and review policies/procedures.

Information on policies and registration with DRC may be found on the DRC website at [www.ou.edu/drc](http://www.ou.edu/drc). Also, see **Section 5.3** for the Reasonable Accommodation Policy.

#### **4.34 VETERANS SERVICES**

The Office of Admissions and Records provides certification of enrollment for students at the OUHSC who receive financial assistance through the Veterans Administration. Veterans enrolling at the Health Sciences Center for the first time are expected to complete the necessary paperwork at the Office of Admissions and Records.

#### **4.35 INTERNATIONAL STUDENT SERVICES**

The Office of Academic Affairs at the Health Sciences Center complies with immigration and federal laws governing the international students by providing necessary documents for admission, departure, and reentry to the United States; extension to stay; transfer to other colleges and universities; change of visa status; employment on and off campus; post-graduate applications for practical training; letters of certification for foreign exchange; etc.

International students are required to maintain health, hospitalization, and repatriation insurance while enrolled at the Health Sciences Center.

Further information may be found in the *Student Handbook* or by contacting the Office of Admissions and Records at (405) 271-2359.

HSC Student Affairs is dedicated to the support and success of international and all multicultural students. For more information regarding programming geared for International students, please visit <http://students.ouhsc.edu/Services/MSS.asp>.

#### **4.36 STUDENT HEALTH INSURANCE**

All OUHSC students are required to have health insurance upon entering and during enrollment. At the beginning of each academic year, and periodically throughout the year, students may be asked to show proof of health insurance. Student will have 10 University business days to provide proof after the request is made. If non-compliant within 10 days, students may be suspended from classes and/or rotations until proof of coverage is provided. Additional information may be obtained by contacting the student services office within the individual's college of HSC Student Affairs.

Students may participate in the student sponsored health insurance policy, Academic HealthPlans, or show proof of acceptable insurance coverage by a recognized health insurance provider to the college Student Services Office.

Enrollment forms and the Summary of Benefits for the Academic HealthPlans Student Health Insurance Policy are available online at <http://ouhsc.myahpcare.com/> or at HSC Student Affairs in the David L. Boren Student Union, Suite 300.

Further details are available on the [Student Affairs](#) website.

#### **4.37 STUDENT HEALTH SERVICES**

Health services for all Health Sciences Center students are offered in the Student Health Clinic housed in the OU Physicians Building, located at 825 NE 10<sup>th</sup> Street, Suite 4A, Oklahoma City, OK 73104. A variety of medical services is provided. The Student Health Clinic serves as the repository for all mandatory health history forms.

Each student, at the time of registration for each semester, is charged a fee to defray the costs of these services, without regard to the number of hours for which he or she is enrolled. Students should contact their respective college student services office to obtain health history and immunization requirements.

For more information, please visit <http://students.ouhsc.edu/SHWC.aspx>.

#### **4.38 UNIVERSITY HEALTH CLUB**

The University Health Club (UHC) is available to all HSC students, residents, faculty, and staff, and is housed in the Harold Hamm Diabetes Center located at 1000 N. Lincoln Blvd.

The University Research Park Health Club (URPHC) is available to all HSC students, residents, faculty, and staff, and is housed in the University Research Park located at 865 Research Parkway.

Health Club memberships are available for faculty, staff, students and residents. For information on memberships, fees, and hours of operation, please visit <http://www.ouhsc.edu/uhc/> or contact the University Health Club at (405) 271-1650.

#### **4.39 ENGLISH LANGUAGE PROFICIENCY**

The Oklahoma State Legislature requires that all instructors now employed or being considered for employment at institutions within the Oklahoma State System of Higher Education shall be proficient in speaking the English language. Students having concerns with regard to an instructor's English proficiency are to report their concerns to the Vice Provost for Academic Affairs.

#### **4.40 HONORS PROGRAM**

The OUHSC Honors Program offers academically superior students the opportunity to do undergraduate work in specially-designed courses that lead to a degree with Honors, High Honors, or Highest Honors. The educational opportunities include special sections, independent study and research, and interdisciplinary study. The aim of this program is to challenge academically superior students and to enable them to attain deeper understanding of and greater degree of commitment to their intellectual goals. In order to graduate with a degree with honors, students must satisfy requirements both of the college and of the department in which they are majoring.

Students who successfully complete all requirements of the Honors Program and who attain an overall grade average of at least 3.75 will be graduated with Highest Honors; those with overall grade averages of at least 3.50, but less than 3.75, will be graduated with High Honors; and those with overall grade averages of at least 3.25, but less than 3.50, will be graduated with Honors.

The Robert M. Bird Health Sciences Library is responsible for the informational materials and services that are needed to support the research and educational programs on the Health Sciences Center campus and serves as the major resource for health information in Oklahoma. The Library supports graduate, professional, and undergraduate levels in medicine, nursing, pharmacy, dentistry, public health, communication sciences, radiologic technology, nutritional sciences, occupational therapy, and physical therapy.



## 5. GENERAL POLICIES AND SERVICES

### 5.1 EQUAL OPPORTUNITY

This University, in compliance with all applicable Federal and State laws and regulations, does not discriminate on the basis of race, color, national origin, sex, sexual orientation, genetic information, gender identity, gender expression, age (40 or older), religion, disability, political beliefs, or status as a veteran in any of its policies, practices, or procedures. This includes but is not limited to admissions, employment, housing, financial aid, housing, services in educational programs or activities, or health care services that the University operates or provides.

(Regents, 3-24-70, amended 4-8-76, revised 7-12-77, amended 12-10-81, 1-27-93, 1-27-04, 9-19-11, 6-24-15, 3-8-17)

### 5.2 SEXUAL MISCONDUCT, DISCRIMINATION AND HARASSMENT POLICY, AND CONSENSUAL SEXUAL RELATIONSHIPS POLICIES

These policies, in their entirety, and the associated complaint and grievance procedures are contained in **Appendices H, I, and J**.

### 5.3 REASONABLE ACCOMMODATION POLICY

The University of Oklahoma will reasonably accommodate otherwise qualified individuals with a disability unless such accommodation would pose an undue hardship; would result in a fundamental alteration in the nature of the service, program, or activity, or would result in undue financial or administrative burdens. The term “reasonable accommodation” is used in its general sense in this policy to apply to employees, students, and visitors.

Reasonable accommodation may include, but is not limited to:

- 1) Making existing facilities readily accessible and usable by individuals with disabilities.
- 2) Job restructuring.
- 3) Part-time or modified work schedules.
- 4) Reassignment to a vacant position if qualified.
- 5) Acquisition or modification of equipment or devices.
- 6) Adjustment or modification of examinations, training materials, or policies.
- 7) Providing qualified readers or interpreters.
- 8) Modifying policies, practices, and procedures.

The Disability Resource Center ([www.ou.edu/drc/home.html](http://www.ou.edu/drc/home.html)), unless otherwise provided, is the central point-of-contact to receive all requests for reasonable accommodation and to receive all documentation required to determine disability status under law. This center will then make a recommendation on accommodation to the appropriate administrative unit.

The student must self-identify as an individual with a disability and provide appropriate diagnostic information to the Disability Resource Center that substantiates the disability. All diagnostic information is confidential; therefore, memos can be sent only at the student's request.

Reasonable accommodation with respect to employment matters should be coordinated with the Office of Human Resources. Reasonable accommodation with respect to academic matters, including but not limited to faculty employment, should be referred to the Office of the Senior Vice President and Provost while all other issues of reasonable accommodation should be referred to the Office of the Vice President for Administration and Finance.

Individuals who have complaints alleging discrimination based upon a disability may file them with the University's Equal Opportunity Officer in accordance with prevailing University discrimination grievance procedures.

(President, 2-16-93, Regents, 6-1-12)

### 5.4 LOYALTY OATH

Oklahoma State Statute 51 O.S., Section 36.1, 36.4, requires that each new employee must sign a Loyalty Oath and have it notarized as part of her or his personnel file. This requirement extends to all employees and officials of the

State of Oklahoma and must be satisfied before an individual can be placed on the state payroll. The Loyalty Oath remains valid as long as the employee is working for the University.

(President, 7-1-86, Regents, 6-1-12)

## 5.5 NEPOTISM

Except as prohibited by the laws of the State of Oklahoma, relationship by consanguinity (blood) or affinity (marriage) shall not, in itself, be a bar to appointment, employment, or advancement at The University or, in the case of faculty members, to eligibility for tenure. The University recognizes, however, that there is an inherent conflict of interest when an employee makes hiring, promotion, or salary decisions about a family member, although there may be extremely rare circumstances when the potential benefit to the University in having an employee supervise a family member outweighs the potential harm.

Therefore, no two persons who are related by consanguinity or affinity within the third degree shall be given positions in which either one is directly responsible for making recommendations regarding employment, promotion, salary, or tenure for the other; nor shall either of two persons so related who hold positions in the same budgetary unit be appointed to an executive or administrative position in that unit or to a position involving administrative responsibility over it, as long as the other person remains in the unit, without first receiving a waiver that has been recommended by the Senior Vice President and Provost or the appropriate vice president and approved by the Board of Regents.

In recommending the waiver, the Senior Vice President and Provost or the appropriate vice president must make a written statement of the facts that have led him/her to conclude that the benefit to the University in granting the waiver outweighs the potential harm. In addition, the Senior Vice President and Provost or the appropriate vice president must propose in writing a means by which a qualified, objective person, unrelated to the employee at issue, shall make performance evaluations and recommendations for compensation, promotion, and awards for that employee and state in writing how that means will avoid the conflict of interest. The statement and proposal for supervision shall be made part of the Board of Regents agenda item.

Further, a salary increase above the average increase granted to all University employees in similar positions will not be granted to an employee who has been granted a waiver under this policy unless it has been approved by the applicable Senior Vice President and Provost or appropriate vice president and the President. In the case where this policy is made applicable by a related party being elected to Committee A of an academic unit, approval of the Board of Regents is not required; however, all other provisions of this policy will continue to apply.

It is the responsibility of the head of the budget unit to seek a waiver before offering employment to any person whose employment without a waiver would violate this policy, and the willful failure to follow this policy may result in disciplinary action against the head of the budget unit. Notwithstanding any other provision of this policy, a conditional hire, prior to approval of the Board of Regents, may be made pursuant to this policy if deemed necessary for legitimate academic or business reasons and if justified in writing by the appropriate vice president. At the next regular meeting of the Board of Regents, the written justification and the conditional hire will be considered by the Board of Regents.

Relatives within the third degree of relationship to an employee by consanguinity or affinity include the following: spouse, parent, parent of spouse, grandparent; grandparent of spouse, great-grandparent, great grandparent of spouse, uncle or aunt, uncle or aunt of spouse, brother or sister, brother or sister of spouse, son or daughter, son-in-law or daughter-in-law, grandson or granddaughter, grandson's or granddaughter's spouse, great grandson or great granddaughter; and great grandson's or great granddaughter's spouse, niece or nephew; niece's or nephew's spouses; first or second cousin; first or second cousin's spouse. For purposes of this policy, step and half relatives are considered to be related by affinity.

(Regents, 4-8-71, 10-17-90, 2-20-92, 12-3-02, 1-27-04)

## 5.6 ACCESS TO PERSONNEL FILE POLICY

### (a) Introduction

For the purpose of making employment decisions, the University maintains individually identifiable personnel files on persons who have been or who are its employees. This policy is intended to provide guidelines for access to those

records in order to promote an informed public while maintaining the security of personnel records necessary to protect the privacy of University employees and the interests of the University in fulfilling its constitutional functions.

Access to appropriate records shall be in accordance with the provisions of this policy and the University's Open Records Policy (see **Appendix K**).

**(b) Contents**

Those responsible for the custody of personnel files shall determine information to be placed in the files. Only such information as is germane to the person's employment with the institution shall be retained in these files. Examples of this type of information are:

- 1) Information pertaining to bona fide occupational qualifications
- 2) Service on University committees, councils, and task forces
- 3) Summaries of pre-employment recommendations and merit, tenure, and promotion recommendations
- 4) Performance and discipline matters
- 5) Personnel actions, such as appointments, change of status, tenure, and promotion
- 6) Awards, elected offices, service to outside organizations, and professional associations

Individuals may ask that materials relevant to their employment be included in their personnel file by written request to Human Resources, to the Vice President for University Governance and Secretary of the University, or to the Senior Vice President and Provost, as appropriate.

**(c) Confidentiality**

The following personnel records shall be deemed confidential and may be withheld from public access:

- 1) Those which relate to internal personnel investigations including, examination and selection material for employment, hiring, appointment, promotion, demotion, discipline, or resignation;
- 2) Those where disclosure would constitute a clearly unwarranted invasion of personal privacy, such as employee evaluations, medical documentation, payroll deductions, and employment applications submitted by persons not hired by the University;
- 3) Those which are specifically required by law or University policy to be kept confidential

**(d) Access**

Personnel files shall be made available to individuals to review in accordance with the following guidelines, provided that the files may be inspected by persons so entitled only under the supervision of the custodian or his/her designee in the administrative office where they are maintained.

- 1) With the exception of information/records excepted or excluded elsewhere in this policy, personnel files shall be made available for public inspection, copying, and/or mechanical reproduction in accordance with procedures established under this policy, the University's Open Records Policy (see **Appendix K**), or as otherwise provided by law such as by court order or subpoena. Requests for personnel files must be made through the University's Open Records Officer. Examples of available information include, without limitation:
  - (a) An employment application of a person who becomes a public official;
  - (b) The gross receipts of public funds;

- (c) The dates of employment, title, or position;
  - (d) Any final disciplinary action resulting in loss of pay, suspension, demotion of position, or termination.
- 2) Supervisors or administrators shall have access to the personnel files of persons employed or being considered for employment in their areas of responsibility, on a need-to-know basis, and shall have authority to share the information with others responsible for personnel recommendations and/or decisions; further, other institutional officers or employees showing a legitimate need for the information shall be permitted such access.
  - 3) Except as may otherwise be made confidential by statute, an employee (or his/her designee as authorized in writing and signed by the consenting employee) shall have a right of access to his/her own personnel file, provided:
    - (a) The individual wishing to inspect his/her personnel file should submit a written request for inspection to the custodian of the file; and,
    - (b) The individual does not remove or add any records to his/her personnel file at the time of inspection.
- (e) **Correction of Records**

An employee may dispute the accuracy of any material included in his/her personnel file. Such questions should be directed to the custodian of the file in writing. If the questions are not resolved by mutual agreement, the employee may initiate a formal challenge through the employment dispute resolution or discrimination complaint procedures as outlined elsewhere in University policy.

(President, 3-17-86; Revised 9-4-92, 6-1-12)

## 5.7 EMPLOYEE ASSISTANCE PROGRAM

The University recognizes that it is in the best interests of both the University and its employees to provide assistance for employees in dealing with personal problems that may adversely affect their job performance. For this reason, the University has established an Employee Assistance Program.

The purpose of the Employee Assistance Program is to provide: (1) immediate assistance to employees with personal problems, including alcohol and drug abuse, which affect their work or job performance; (2) job security and advancement opportunities for those who take advantage of this program; will in no way be jeopardized due solely to their participation in the program; (3) complete confidentiality—all records involving services provided by the Employee Assistance Program shall be treated as confidential medical records and shall be maintained separately from personnel records; (4) employees who exhibit job performance problems the opportunity to seek assistance voluntarily through the Employee Assistance Program; (5) the supervisor's discretion in referring an employee when there is evidence of work deterioration that has been documented by the supervisor.

In addition while the employee has the right to decide whether or not to use the Employee Assistance Program or to follow any of its recommendations, if personal problems continue to adversely affect work performance, established University employment policies will be followed in handling the situation. There will be no cost to the employee for the evaluation and assessment services of the Employee Assistance Program. Employees will be responsible for cost incurred in undertaking recommended treatment.

Information about the Employee Assistance Program is available through the Human Resources website at: <http://healthysooners.ouhsc.edu/programs/eap.aspx>.

## 5.8 HEALTH AND SAFETY POLICY – UNIVERSITY OF OKLAHOMA

The University is committed to providing a safe and healthy environment for the entire University community and to complying with all applicable federal and state laws and regulations pertaining to occupational and environmental

safety. Academic and administrative personnel with supervisory and teaching roles must ensure that procedures are developed and followed which are designed to prevent injury, protect the assets of the University, and protect the environment. It is the responsibility of all University faculty, staff, and students to follow safe working practices, obey health and safety rules and regulations, and work in a way that protects their health and that of others and does no harm to the environment.

The OUHSC/OU-Tulsa Comprehensive Safety and Health Policy states, "The University of Oklahoma Health Sciences Center (OUHSC) and the University of Oklahoma-Tulsa (OU-Tulsa) recognize their responsibilities to provide their employees with a safe and healthful working environment. In order to achieve this goal, OUHSC/OU-Tulsa shall endeavor to provide adequate and appropriate training and resources to prevent occupational injuries and illnesses, and to encourage all OUHSC/OU-Tulsa employees to make health and safety an integral part of their daily activities. Implementation of this policy shall be accomplished through the OUHSC/OU-Tulsa *Comprehensive Safety and Health Program*, which may be found at [www.ouhsc.edu/ehso](http://www.ouhsc.edu/ehso).

(Senior Vice President and Provost, 12-21-95, 3-19-96, 11-99)

## 5.9 COMMUNICABLE DISEASE POLICY

The purpose of this policy is to inform faculty, staff, and students about how the University of Oklahoma will respond to faculty, staff, and students with a communicable disease. The University wishes to provide an environment free of hazards and will take reasonable precautions to protect faculty, staff, and students from individuals who are known to have communicable diseases.

Information on the communicable disease policy can be obtained from Human Resources on the Norman campus and in the *OUHSC/OU-Tulsa Infectious Diseases Policy* on the Environmental Health and Safety Office policy and programs website (<http://www.ouhsc.edu/ehso/>).

(President, 1-21-91, edited 12-3-02)

## 5.10 TOBACCO-FREE POLICY

The Board of Regents has established a Tobacco Free Policy consistent with Governor Fallin's Executive Orders 2012-01 and 2013-43. All properties and facilities of the University of Oklahoma, regardless of campus or location, are tobacco, electronic cigarette and vaping device-free.

### Purpose

The purpose of this policy is to foster a healthier environment for students, faculty, staff, patients and visitors on the University of Oklahoma campuses by minimizing tobacco use, which is the leading cause of death in Oklahoma and the United States. The policy is designed to prevent or reduce exposure of individuals to secondhand smoke, and to help reduce tobacco use among OU students and employees. The policy is not intended to be judgmental of individual lifestyle choice or to be punitive towards any individual or group.

This policy is subject to all applicable laws, regulations and recognized exceptions contained therein, including without restriction, an exception allowing tobacco use for religious or ceremonial purposes.

### Policy

The use of all tobacco products including but not limited to cigarettes, cigars, pipes, and smokeless tobacco, electronic cigarettes and vaping devices is strictly prohibited anywhere on University grounds or campuses.

- 1) The use of tobacco products, electronic cigarettes and vaping devices is prohibited in any buildings or portion thereof owned, leased, or operated by the University, including, without restriction, University housing/apartments, athletic facilities, within any University parking structure, in any vehicle owned or leased by the University, or on University grounds or campuses, including but not limited to public and non-public areas, offices, restrooms, stairwells, driveways, sidewalks, etc.
- 2) This policy applies to all persons on University grounds or campuses, including but not limited to students, faculty, staff, contracted personnel, vendors, patients and all visitors to a University campus.

The policy applies to all University events, including without restriction, football games at the Gaylord Family Oklahoma Memorial Stadium.

- 3) The sale of tobacco products, electronic cigarettes and vaping devices on University property is prohibited.

#### **Communication of Policy**

- 1) Appropriate Signage shall be posted strategically throughout the campus and in University facilities and vehicles as a reminder of the policy.
- 2) The respective Office of the Senior Vice President and Provost will ensure that University faculty employment announcements and information provided to new faculty recruits and employees contain information about the tobacco, electronic cigarette and vaping device-free environment.
- 3) Human Resources will ensure that University staff employment applications, both hard copy and online versions, contain information about the tobacco, electronic cigarette and vaping device-free environment, and that new employees receive information about the tobacco, electronic cigarette and vaping device-free policy during the new employee orientation.
- 4) The Office of the Vice President for Student Affairs will ensure that University communications and information provided to prospective students and to new students includes information about the tobacco, electronic cigarette and vaping device-free environment.

The full text of this policy shall be available in the Norman, Health Sciences Center and Tulsa campuses' faculty and staff handbooks, and on their respective campus websites.

#### **Compliance and Enforcement**

Compliance with this policy by all students, employees and visitors to the campuses is expected based upon our commitment to a healthy environment on the campuses and our responsibility to protect individuals from the adverse health effects of exposure to second-hand smoke. This depends on the consideration and cooperation of both users and non-users of tobacco, electronic cigarettes and/or vaping devices. All members of the University community share the responsibility of adhering to and enforcing the policy and have the responsibility for communicating the policy to visitors in a courteous and considerate manner. Any complaints should be brought to the attention of the appropriate University administrative personnel.

Non-compliance with this policy will be handled in the same manner as any other policy violation and is subject to the disciplinary process.

After receiving an initial warning and reminder of the policy, repeated violations of the policy will be subject to fines of Ten Dollars (\$10.00) for the second violation of the policy, and Fifty Dollars (\$50.00) for the third and subsequent violations. An appeals process will be used similar to that used for appeals of parking fines.

(President, 6-1-93; Revised 12-6-04, Regents 6-23-05, Amended 10-25-12, 1-28-14)

#### **Employee and Student Assistance for Smoking Cessation**

The OUHSC administration is committed to encouraging and providing helpful support to any student or employee who wishes to quit smoking by facilitating access to recommended smoking cessation programs and materials. Information about smoking cessation opportunities at the Oklahoma Health Center can be found at <http://healthysooners.ouhsc.edu/>.

The Oklahoma Tobacco Helpline can be accessed, toll free, at 1-800-748-8669 or, <http://www.ok.gov/tset/Programs/Helpline.html>

### 5.11 POLICY ON PREVENTION OF ALCOHOL ABUSE AND DRUG USE ON CAMPUS AND IN THE WORKPLACE

The University of Oklahoma recognizes its responsibility as an educational and public service institution to promote a healthy and productive environment. This responsibility demands implementation of programs and services facilitating that effort. The University is committed to a program to prevent the abuse of alcohol and the illegal use of drugs and alcohol by its employees who may also as students be subject to applicable disciplinary policies and procedures for their respective campuses. This policy is based on the Oklahoma Standards for Workplace Drug and Alcohol Testing Act, 40, Okla. Statutes §§551 et seq., the Drug Free Workplace Act of 1988 (P.L.100-690, Title V, Subtitle D), the Drug Free Schools and Communities Act Amendments of 1989 (P.L.101-226), Prevention of Alcohol Misuse and Prohibited Drug Use in Transit Operations 49 CFR Part 655, the Federal Omnibus Transportation Employee Testing Act of 1991, and Department of Transportation rules (49 CFR part 40). The University program includes this policy, which prohibits illegal use of drugs and alcohol in the workplace, on University property, or as part of any University-sponsored activities. In order to meet these responsibilities, University policy requires all employees to abide by the terms of this policy as a condition of initial and continued employment. The University:

- 1) Recognizes that the illegal use of drugs and alcohol is in direct violation of local, state, and federal laws as well as University policies included in this policy, the staff and faculty handbooks, and applicable disciplinary policies and procedures for each respective campus. University policy strictly prohibits the illegal use, possession, manufacture, dispensing, or distribution of alcohol, drugs, or controlled substances in the workplace, on its premises, or as a part of any University-sponsored activities.
- 2) Considers a violation of this policy to be a major offense, which can result in a requirement for satisfactory participation in a drug or alcohol rehabilitation program, referral for criminal prosecution, and/or immediate disciplinary action up to and including termination of employment and suspension or expulsion from the University. A criminal conviction is not required for sanctions to be imposed upon an employee for violations of this policy.
- 3) Recognizes that violations of applicable local, state, and federal laws may subject an employee to a variety of legal sanctions including but not limited to fines, incarceration, imprisonment, and/or community service requirements. Convictions become a part of an individual's criminal record and may prohibit certain career and professional opportunities. A current listing of applicable local, state, and federal sanctions can be obtained through Human Resources.
- 4) Requires an employee to notify his or her supervisor in writing of a criminal conviction for drug- or alcohol-related offenses occurring in the workplace no later than five calendar days following the conviction.
- 5) Provides access to the University's Employee Assistance Programs for counseling and training programs that inform employees about the dangers of drug and alcohol abuse. Voluntary participation in or referral to these services is strictly confidential. More information is available on the Human Resources website at [www.hr.ou.edu](http://www.hr.ou.edu).
- 6) Forbids an employee from performing safety-sensitive (as defined by applicable federal and/or state laws, including the Code of Federal Regulations Title 49 Vol.6, Part 655) functions while a prohibited drug is in his or her system.
- 7) Mandates pre-employment drug testing of employees who will be performing safety-sensitive functions, and drug testing of such employees when there is reasonable cause, after an accident, on a random basis and before returning to duty after refusing to take a drug test or after not passing a drug test. (Safety-sensitive functions are defined pursuant to applicable federal and state law. Further information regarding safety-sensitive functions and related positions is available for review in Human Resources.) Specific policies and procedures are available from departments with safety-sensitive positions.
- 8) Provides for annual distribution of this policy to all staff and faculty.



Health risks generally associated with alcohol and drug abuse can result in but are not limited to a lowered immune system, damage to critical nerve cells, physical dependency, lung damage, heart problems, liver disease, physical and mental depression, increased infection, irreversible memory loss, personality changes, and thought disorders.

The University's Employee Assistance Programs are responsible for informing employees about the dangers of drug and alcohol abuse and the availability of counseling and rehabilitation programs. The appropriate provost or executive officer is responsible for notifying federal funding agencies within ten calendar days when an employee is convicted of a drug-related crime that occurred in the workplace. This policy is subject to the dispute resolution procedure as stated in the staff and faculty handbooks and applicable disciplinary policies and procedures for each campus.

(Regents, 4-6-89, 9-5-90, 12-6-04, 6-23-04, 6-1-12)

## 5.12 POLICY FOR WORKPLACE THREATS AND VIOLENCE

The University of Oklahoma is committed to providing a safe and healthy workplace for all employees and a safe and prosperous educational experience for its students in accordance with applicable federal, state, and local laws. The University is also committed to providing a professional work environment that promotes dignified and respectful treatment of all. This policy applies to the conduct of any person on University premises or at University-sponsored events, including faculty members, students, staff members, visitors, or contractors while on University-owned or controlled property or while engaged in University business. The University has a zero-tolerance policy for workplace threats and/or violence in any form as described below. The University prohibits acts of workplace violence that include threats, intimidation, physical attacks, stalking, or property damage and violent behavior.

### Definitions

**Threats** – A threat is the expression of intent to cause physical or mental harm. Such an expression constitutes a threat without regard to whether the person communicating the threat has the ability to carry it out, and without regard to whether the threat is made on a present, conditional, or future basis. In determining whether the conduct constitutes a threat, including whether the action caused a reasonable apprehension of harm, the University will consider the totality of the circumstances from the perspective of a reasonable person in the situation. Threats come in many forms, including, but not limited to, oral and written threats, or threats communicated through conventional mail, electronic messaging, digital imaging, photography, fax, or telephone, and may be direct or implied.

**Physical Attack** – A physical attack is, without limitation, unwanted or hostile physical contact such as hitting, pushing, kicking, shoving, tripping, poking, biting, spitting, throwing of objects, or fighting.

**Intimidation** – Intimidation includes but is not limited to stalking, bullying, or engaging in verbal, written, expressive, or physical actions that intentionally or recklessly frighten or coerce an individual, or that would be viewed by a reasonable person as such. Stalking includes, without limitation: willfully, maliciously, and repeatedly following or harassing another person in a manner that would cause a reasonable person or a member of the immediate family of that person to feel frightened, intimidated, threatened, harassed, or molested; and actually causing the person being followed or harassed to feel terrorized, frightened, intimidated, threatened, harassed, or molested. In the context of stalking, harassment may occur when an individual demonstrates a pattern or course of conduct directed towards another individual that includes repeated or continuing uninvited contact, e.g., contact after the individual has clearly communicated that contact is unwanted. Unwanted contact includes: (1) following or appearing within the sight of that individual in a manner that would lead a reasonable person to believe he or she were being followed or watched by that individual; (2) approaching or confronting that individual in a public place for a non-business-related purpose or on private property; (3) appearing at that individual's workplace and/or work space for a non-business-related purpose; (4) appearing at the residence of that individual; (5) contacting that individual by telephone for a non-business-related purpose; (6) sending mail or electronic communications to that individual for a non-business-related purpose; (7) placing a non-business-related object on, or delivering an object to, that individual's workplace and/or workspace; (8) placing an object on or delivering an object to the individual's residence.

**Property Damage** – Property damage is intentional damage to or destruction to or destruction of property owned by the University or its students, employees, contractors, vendors, or visitors.

**Violent Behavior** – Violent behavior includes any behavior, whether intentional or reckless, which results in bodily injury to another person and/or damage to property, and can include, but is not limited to: (1) injuring another person



physically, including slapping, hitting, punching, pushing, poking or kicking; or physical gestures or actions which would be viewed by a reasonable person as threats to inflict physical harm; (2) engaging in behavior that creates a reasonable fear of injury in another person; (3) brandishing or using a weapon or other destructive devices or an object that reasonably appears to be a weapon, and where not otherwise allowed by law, possessing a weapon while on University premises or engaged in University business; (4) damaging property intentionally or recklessly; (5) threatening to injure an individual or damage property verbally, in the form of digital photography, or in written or electronic form; (6) committing acts motivated by or related to domestic violence or sexual harassment; (7) stalking, as defined above.

### **Guidelines for Reporting Violent Situations**

The University encourages all employees to be alert to the possibility of violence on the part of current and former employees, current and former students, vendors, and visitors to the University. Supervisors are responsible to respond promptly, effectively, and in a manner consistent with University procedures when notified of an alleged incident of workplace violence, or when they observe workplace violence.

A person who believes that he or she has been the target of workplace violence or observes workplace violence must immediately report the alleged incident to his or her supervisor or manager, Human Resources, the University Police Department, and/or the city-of- residence police department. In emergency situations, the Police Department should be called immediately by dialing 911. The University also provides an Emergency Communication System for reporting activity that appears to be an immediate threat to an individual by calling any of the following numbers: on the Norman campus (405) 325-1911; on the Health Sciences campus (405) 271-4911; or on the Tulsa campus (918) 660-3333. The University prohibits retaliation against or harassment of individuals who act in good faith by reporting real or perceived violent behavior or violations of this policy.

All employees who commit violent acts or who otherwise violate this policy are subject to disciplinary action, up to and including termination of employment, for unacceptable personal conduct, and may also be subject to criminal prosecution. The University prohibits employees from making deliberately false or misleading reports of violence or threats of violence under this policy, and employees who make such reports will be subject to disciplinary action, up to and including termination of employment.

Other individuals who engage in acts of workplace violence as described above may be subject to different disciplinary action applicable to them through the Faculty Handbook, applicable disciplinary policies and procedures for each respective campus, University policy, and state or federal law.

(Regents, 6-1-12)

### **5.13 REMOVAL OF INDIVIDUALS NOT AFFILIATED WITH THE UNIVERSITY FROM UNIVERSITY PREMISES**

There are times when a university must ask individuals not associated with it to leave its premises for a variety of reasons. This does not include individuals lawfully on the university's premises, nor will the removal of individuals violate their constitutional or statutory rights. The statute allowing a university to seek the removal of such individuals was recently amended. Oklahoma Statute Title 21, Section 1376. The statute indicates that any individual who is not a faculty member, staff member, or student of a university may be required to leave the university's premises if the individual: (a) interferes with the peaceful conduct of university activities; (b) commits an act which interferes with the peaceful conduct of the university's activities; or (c) enters the university for the purpose of committing an act that may interfere with the peaceful conduct of university activities. Written notification to the individual of the available appeals and hearing procedures must be provided.

The Notice of Vacate citation complies with the recently amended statute by providing the individual with notice of the University's hearing and appeal procedures. The citation is designed to be issued by individuals unaffiliated with the respective campus by the Board of Regents through the University of Oklahoma Police Department, campus security or other law enforcement entities if the individual has "interfered with the peaceful conduct" of university activities. The appeals process permits the individual receiving a citation from the University to leave the premises with the right to appeal such order to the President or his designated officer within ten days of its receipt. The President or his officer then has 15 days within which to overturn the citation. If it is decided that the citation stands, there is no further avenue of appeal for the cited individual. The citation may be periodically amended to reflect the appropriate designated officer to which the individual must direct his or her appeal.

Neither the amended appeals procedures for use by the University nor the citation alter, modify, or decrease any rights or appeals processes for faculty, staff, or students who are removed from the University's premises.

#### **5.14 UNIVERSITY OF OKLAHOMA FIREARMS POLICY**

Firearms and munitions of all types are prohibited on all property owned, leased, or occupied by the Board of Regents at all times except as specifically authorized. Please refer to the Board of Regents *Policy Manual* for additional details.

(Regents, 4-25-96, 3-29-00, 1-27-04, 6-23-04, 3-9-16)

#### **5.15 PRIVATE FUND RAISING**

The President is responsible to the Board of Regents for all private fund raising for the University. The President may delegate responsibility for the function, but such delegation does not diminish his responsibility. This policy applies to all elements of the University and is designed to assist the President in coordinating and directing this very important function in the operation of the University.

(Regents 9-2-76, 12-2-03)

All cash gifts received by University departments and designated for the University of Oklahoma Foundation, Inc., or the University of Oklahoma Regents Funds, should be immediately forwarded to the Office of Alumni and Development for appropriate deposit into the OU Foundation or the OU Regents Fund approved account(s). All non-cash gifts (bonds, stocks, titles to property, etc.) or inquiries of such, should be forwarded to the Office of Alumni and Development for appropriate facilitation.

##### **5.15.1 Health Sciences Center Office of Alumni and Development**

The HSC Office of Alumni and Development is responsible for the cultivation, solicitation, and stewardship of major gifts by individuals, corporations, and foundations. Additionally, the office is responsible for the implementation of all special fund raising activities, including annual campaign solicitations and President's Associates solicitations. The office also assists in the facilitation of the annual Campus Campaign. The Office of Alumni and Development is the responsibility of the Vice President for Development and the Health Sciences Center Executive Director of the Office of Alumni and Development. All HSC faculty and/or other designated staff must have authorization from the HSC Office of Alumni and Development in conjunction with the Vice President for Development and the Executive Director to raise private funds.

##### **5.15.2 University of Oklahoma Foundation, Inc.**

The University of Oklahoma Foundation, Inc., was organized in 1944 as a trust and incorporated in 1955. The Foundation has an office on the Health Sciences Center campus.

Gifts to the Foundation may be in the form of cash, securities, leases, royalties, literary and artistic collections, and real or personal property. Gifts may be made for a specific purpose or may be unrestricted. The Foundation is governed by its Board of Trustees.

#### **5.16 UNIVERSITY OF OKLAHOMA PRESS**

The University of Oklahoma Press, which was established in 1928 on the Norman campus, has won an international reputation through its publication of scholarly books. Of the books published by the Press, many have been written by faculty members of the University.

#### **5.17 UNIVERSITY NAME, LOGOS, OTHER IDENTIFYING MARKS, AND SEAL**

- (a) **Trademark Administrative Committee** – Responsibility for management of the University's name, logos, other identifying marks, and seal (collectively "marks") shall rest with a Trademark Administrative Committee ("TAC"). The Vice President for Public Affairs, the General Counsel, and the Athletic Director shall each appoint a representative to the three-member TAC.

- (b) **Trademark Policies and Procedures** – The TAC shall adopt, publish and implement policies and procedures to ensure that the marks are utilized in a manner that best serves the interests of the University of Oklahoma. In no event should such use be disparaging, misleading as to sponsorship/affiliation, contradict public morals or decency, or reflect unfavorably upon the University.

Such policies and procedures should address mechanisms for non-commercial and commercial uses of the marks, both internal and external to the University. Additionally, the TAC should implement a style guide or other instrument for implementation University-wide that establishes uniform and consistent usage of the University's marks.

- (c) **Trademark Office** – The TAC shall establish and oversee a University Trademark Office, which shall be responsible for implementation of policies and procedures regarding the University's marks, including but not limited to the protection, licensing, management and enforcement of the University's marks. If desired and consistent with other applicable policies, the Trademark Office may contract with an official licensing agent to assist in one or more of these responsibilities.

(Regents 6-25-70, edited 1-23-91, 6-27-95, 3-5-97, 3-29-00, 1-27-04, 6-23-04, 6-23/25-08))

## 5.18 CERTIFICATES

In issuing certificates for whatever purpose, the University and all its divisions shall conform to the following specifications stipulated by the Oklahoma State Regents for Higher Education and endorsed by the Board of Regents.

Certificates bearing the name and the Seal or Coat of Arms of the University may be issued only by the University, pursuant to the applicable legislation in each instance, as created by the President and Board of Regents and/or the State as represented by the Oklahoma State Regents for Higher Education or the Governor or Legislature of the State of Oklahoma. Academic colleges, schools, departments, and other subdivisions of the University do not have such authority. (Oklahoma State Regents for Higher Education policy, II-2-41,6)

The Office of Admissions and Records is charged with the responsibility of administering the regulations governing the issuance of certificates. A complete statement of detailed regulations regarding certificates may be secured from the Office of Admissions and Records.

(Regents, 10-8-64, 11-9-67, 5-14-70, 6-14-79, 10-16-85, 11-14-91, 1-27-98)

## 5.19 TELEVISED INSTRUCTION SYSTEM

The Oklahoma State Regents for Higher Education maintains a statewide digital network named "Onenet." Onenet provides educational institutions access to the Internet. Onenet provides coordination and bridging services for televised classes using H.323 video protocol.

Most state colleges and universities and many hospitals are on the network. This system is particularly valuable for continuing education, seminars, and conferences. Both credit and non-credit programs may be transmitted. For further information, contact the Health Sciences Center Television Services.

## 5.20 OFFICIAL COMMUNICATIONS

The proper channels through which recommendations concerning the policies and/or administration of its governed entities, as a whole or in any of its parts, should be communicated to the Legislature or other State officials are the President and the Board of Regents. Further, any official statement made on behalf of the Board of Regents to the public through the press or otherwise, shall be made only by the Chair of the Board of Regents; provided, the President or his designee may publicly explain prior Board of Regents' action as deemed necessary and proper.

Nothing in the preceding subsection is intended to or should be construed to abridge the rights and privileges of individual Regents to publicly express their personal opinions on any matter or to abridge constitutional rights of employees to comment on matters of public concern or to prohibit any other rights of communication established by law.

(Regents, 12-7-36, 12-17-45, 3-9-49, 10-13-88, 3-21-95, 3-29-00, 12-2-03)

### 5.21 NEWS RELEASES

The University Regents have requested that news releases for print media, radio, and television that affect the welfare or reputation of the University be released only through the President's Office. This policy is not intended to restrict or censor any release of factual information, but to ensure that news releases are issued from a fully informed source.

The Vice President for Public Affairs is responsible to the President for all University news releases that interpret the policies of the University. Questions concerning this news release policy may be answered by the Public Affairs Office, and requests for approval of releases may be initiated with that office.

(Vice President for Public Affairs, 8-1-80, 10-1-93)

### 5.22 CONTACTS WITH REPORTERS

On occasion, reporters for print, broadcast, and emerging or social media, contact University faculty or staff members directly instead of working through the University's Public Affairs Office. There is no objection to this procedure. However, any faculty or staff member who is contacted and either gives a statement to the press or arranges for a subsequent interview is requested to inform the Vice President for Public Affairs. This is an informational procedure only, and the cooperation of the faculty and staff is requested.

(Vice President for Public Affairs, 8-1-80, 10-1-93, 6-1-12)

### 5.23 PUBLICATIONS AND PROMOTIONAL MATERIALS POLICY

In order for all publications and promotional materials representing the University to convey a consistent and accurate message and image, externally disseminated publications must be reviewed by the Division of Public Affairs or the designated publications office. The full text of this policy is maintained by the Division of Public Affairs.

(Regents 4-4-91, edited 3-29-00, 1-27-04, 6-23-04)

### 5.24 ADVERTISING AND PROMOTION POLICY

The University will never knowingly accept or allow advertising that does not conform to industry standards and University guidelines. The University also adheres to specific guidelines in regard to alcoholic beverage advertising. This policy applies to all advertising and promotion in whatever format. Examples are books, brochures, posters, programs, directories, newspapers, signs, radio and television, videotape and audiotape, and electronically generated programming. Signs include those at the athletic facilities, on CART vehicles, and in other locations. This policy also applies to all events and activities organized by or sponsored by University departments or registered student organizations.

(Regents 1-13-83, 11-8-84, 12-8-88, 4-6-89, 3-29-00, 1-27-04, 6-23-04)

#### 5.24.1 Endorsement Prohibited

The University does not endorse any commercial product, program, enterprise, or idea.

(Regents, 1-27-04)

#### 5.24.2 Purchasing Advertising

The University from time to time may wish to reach a certain public by purchasing advertising in the media. The material contained in this advertising may include, among other things, matters related to increasing enrollments in regular or extension courses; promotional advertising, or informational material related to specific policies, projects, events, institutes, departments, and curricula. With the exception of employment advertising, no contracts for advertising should be entered into and no oral or written commitments may be made by any University employee without the prior written approval of the Vice President for Public Affairs or his/her authorized designee. Advance written approval of all layouts or copy must be obtained.

(Regents, 1-27-04, 6-23-04)

## 5.25 GENERAL ADMINISTRATIVE POLICIES AND PROCEDURES

### 5.25.1 Purchasing Procedures

The acquisition of goods and services is governed by State statute, State Regents policies, and OU Regents policies. The Purchasing Office assists departments in complying with these governing rules while at the same time acquiring goods and services timely. The main principles underlying the acquisition process are competition and fairness. Competition maximizes the opportunity for best value, and fairness ensures that all eligible vendors get a chance to do business with a State-supported institution.

For most small purchases (\$1 through \$5,000), departments may order directly from the vendor. There are exceptions which departments must understand and observe. All other acquisitions must be placed by the Purchasing Office.

Any agreement you make with a vendor may be an enforceable contract. If you enter into one that is later found to be against governing laws, policies, and procedures, you may be held personally liable. The OUHSC on-line [Policies and Procedures](#) are the best place to start learning about University acquisition rules. Additionally, the Purchasing Office has a web page that contains very useful information. Purchasing personnel are always ready to assist, in person or over the phone.

### 5.25.2 Authority to Sign Contractual Documents

The authority for any individual to sign contractual documents on behalf of the University originates with the Board of Regents. The Board of Regents grants to the President the power to delegate such signature authority to appropriate University executives, officers, and directors. Unless the President specifically delegates this authority to an individual by formal written communication, the individual may not sign any document whatsoever that binds or has the appearance of binding the Board of Regents, the University, and/or any element thereof.

Such documents include, but are not limited to, purchase orders, grants, contracts, sub-contracts, licenses, leases, funding documents, applications, extensions and renewals, letters and/or memoranda of understanding, sales orders, assurances, work orders, and the like. The common feature of such documents is the obligation they impose on the University, the breach of which may impose legal liability on the University. Such documents may involve products and services that the University provides to other parties for compensation (revenue) and products and services that the University acquires from other parties in exchange for payment. They may also involve agreements by which duties and responsibilities of the parties involved are formally delineated, even though monetary or other valuable consideration may not be involved.

The delegated authority to sign contractual documents does not carry with it any exemption from other policies and procedures that otherwise govern. For example, the authority to sign a purchase order in the amount of \$100,000 does not exempt that transaction from competition and/or being processed by the Purchasing Department if such requirement would otherwise apply.

The Vice Presidents for Administration and Finance shall recommend to the President the positions and names of the individuals who should be authorized to sign contractual documents. Each recommendation shall include the nature of the authority delegated, the areas of activity to which it is limited, and the upper limit of the authority in terms of dollars. Upon Presidential approval:

- The original letter of authorization shall be forwarded to the individual to whom the authority is delegated;
- One copy shall be retained in the Office of the Executive Secretary of the Board of Regents, and
- One copy shall be retained in the respective Vice President for Administration and Finance and Legal Counsel Offices.
- All such authorizations, regardless of commencement date, shall expire upon termination from the position or upon revocation of authorization.

- Except as may be authorized in writing by the University's Office of Legal Counsel, all contractual documents shall be processed through the University's Office of Legal Counsel to ensure that certain legal limitations are not waived, ignored, or otherwise abridged.
- The Vice Presidents for Administration and Finance may recommend revocation of the signature authority of any individual at any time to the President. Upon the President's acceptance of the recommendation, the Vice President for Administration and Finance shall notify the pertinent officers of such revocation and the reason therefore.

(Regents 3-29-00, 1-27-04, 6-23.04)

**5.25.3 Property Control Procedures**

Oklahoma Statute Title 74, Section 110.1, C. requires each state institution to maintain a current inventory of its physical property. Each item of capital equipment worth \$5,000 or more must be marked as state property and carried on the central records maintained by the Equipment Inventory Section of Financial Services. A complete physical count and inspection of all items classified as equipment will be made by each department or budget unit of the Health Sciences Center on an annual basis.

**5.25.4 Use of University Property in Off-Campus Locations, Health Sciences Center Campus****(a) Introduction**

The purpose of this policy is to provide clarification as to the proper use of property owned by the University or other property for which the University is responsible, particularly as that use may involve removing such property from authorized University locations.

The University seeks to do everything possible to help faculty and staff carry out their work while meeting the University's responsibility for the proper use, care, and preservation of such property. It is in this context that the following policy clarification has been prepared for the Health Sciences Center.

**(b) Policy/Departmental Responsibility**

All property that is owned by the University or for which the University is responsible is to be used only for University purposes.

Responsibility for University property rests with department chairs, directors, and budget unit heads of the various departments. Property is charged to the Budget Sponsor's account upon acquisition and is accounted for by an University-wide physical inventory annually. As a general policy, University property will not be removed from authorized locations. However, there are instances in which it would be advantageous to allow faculty, staff, or students to remove the property for off-campus usage. When it is determined by the appropriate departmental authority that such is the case, the following policies and procedures shall be observed:

**(c) Policies and Procedures**

- 1) Approval to remove University property from authorized locations in University buildings must be secured from the department chairs, directors, and/or budget unit head who has responsibility for control of the item of University equipment involved.
- 2) A written record is to be maintained in the office of the approving authority of the authorization to remove such property from University premises. Such record shall include:
  - (a) Description of property to be removed;
  - (b) Make, model, and serial number of property;
  - (c) University inventory number;

- (d) Name, position classification, residence address, and telephone number of the person authorized to remove the item of University property from its University location, and
  - (e) Location (street address, apartment number [if any] city, and state) to which property is to be relocated;
  - (f) Date on which University property is being removed from University location and the date it is to be returned to University location.
- 3) Any person removing University property from University location is to assume the responsibility for providing appropriate care and security in its transportation to the authorized off-campus location and for returning such property in satisfactory working condition. The person authorized to remove the University's property to an off campus location may be made liable for the costs of repair or replacement of any such University property not so returned.
    - (a) The person removing the University's property will acknowledge this responsibility by that person's signature on a University form containing such a statement of responsibility.
    - (b) In the event of damage or destruction of the University's property due to fire, flood, windstorm or other natural causes, or in the event of the loss of such property through theft, the person having removed the University's property to an off-campus location shall file a report of loss or damage with the appropriate authority (fire department, police department, or sheriff's office) and furnish a copy of that report to the equipment inventory section of OUHSC.
  - 4) Copies of the Authorization Form will be furnished to the person authorized to remove the University property to an off-campus location and to the Equipment Inventory division of Financial Services.
  - 5) As a general policy, University property which has been authorized for removal from its normal University location will be returned to that location as soon as possible. To that end;
    - (a) Approvals for removal will be limited to the current fiscal year;
    - (b) If the authorizing authority deems it necessary, an extension of time for return of the University property can be given by memorandum from that office with copies to the individual authorized to use the property off campus and to the Equipment Inventory division of Financial Services;
    - (c) At inventory time, all property which has been removed from University locations shall be physically accounted for by the person who has authorized the removal of the property.
  - 6) In the event of an extended absence of the person who has been authorized to remove the University's property to an off-campus location, the authorizing official shall be responsible for the return of the property to its University location prior to the departure of the individual. Extended absences include Sabbatical Leave or similar authorized absence of six months duration or longer.
  - 7) All University property removed from University locations shall be subject to the immediate recall by the University at any time deemed necessary by appropriate University authorities.
  - 8) Upon request, each department chair, director, and/or budget unit head will identify all items of University property which have been authorized by those individuals for removal from their University location, will verify their current locations, and will either approve the continued use of that property away from the University's location or have that property returned to the University.
    - (a) If authorization is given for continued use away from the University's location, then the authorizing person will furnish the Equipment Inventory Section the information specified in Item 2, above.



#### 5.25.5 Travel

University policy provides for reimbursement for travel-related expenses incurred by faculty, staff, and other non-employees in the conduct of University business. For the current travel-related policies, please refer to <http://www.ouhsc.edu/policy/#540>.

#### 5.25.6 Use of State Vehicles for Private Purposes

Oklahoma statutes prohibit the use of state-owned vehicles for private purposes. It is the policy of the University that passengers shall not be transported in state vehicles unless they are on state business. According to Oklahoma law, the use of state-owned vehicles to ride to and from an employee's place of residence, except in the performance of official duty, is expressly prohibited.

Employees of the University cannot be assigned a University-owned vehicle for use on a permanent 24-hour basis unless an exception under the statute has been granted. Requests for an exception must be submitted in writing to the President of the University. Further information is available through the Office of Enterprise Risk Management. More information about Enterprise Risk Management can be found at <https://risk.ouhsc.edu/>.

(President, 5-1-88)

#### 5.25.7 Liability Insurance

The State of Oklahoma provides professional and automobile liability insurance under the State Tort Claims Act for all employees who are acting within the proper scope of their duties. The liability coverage also extends to authorized volunteers for their operation of University-owned vehicles while acting within the scope of their authority if the authorized volunteer has completed and filed the Volunteer Acknowledgment and Release Form with the authorizing department. Copies of the State of Oklahoma Certificate of Self-Insurance are located in the glove compartment of all University vehicles.

Further information is available from the Office of Risk Management. Employees are prohibited by state law from texting or utilizing electronic devices while driving University vehicles or while driving private vehicles on University business. Failure to abide by this policy results in the loss of insurance coverage for any accident, and the employee will be held personally liable for any and all damages and injuries caused as a result of such accidents, regardless of actual fault. Further, smoking in University-owned, rented, or leased vehicles is prohibited by state law.

Effective November 1, 2015, texting while driving anytime is a violation of Oklahoma law. Specifically, the new law states that it shall be unlawful for any person to operate a motor vehicle on any street or highway within this state while using a hand-held electronic communication device to manually compose, send or read an electronic text message while the motor vehicle is in motion. "Text message" includes a text-based, instant message, electronic message, photo, video or electronic mail.

#### 5.25.8 Personal Vehicle Use

If a university employee or authorized volunteer is requested or permitted to use his or her personal vehicle for university business, the liability coverage outlined above extends to that employee while operating their personal vehicle just as if it were a university-owned vehicle, except as otherwise specified herein. The State of Oklahoma also requires such persons to have personal automobile liability insurance in force at the time of use. No physical damage (comprehensive and collision) insurance is provided by the university or the state for an employee's or volunteer's personal vehicle while that vehicle is being used on university business. Circumstances may require an employee to use his or her personal vehicle in emergent situations and/or when it has been confirmed that no University fleet vehicles are available. When private vehicles are used for state business purposes and reimbursement is expected pursuant to applicable state law, the transporting of private passengers should be held to a minimum. For additional information on this policy or questions, please contact the Office of Risk Management on your campus.

#### 5.25.9 Leased/Rented Vehicles

The University's liability coverage extends to vehicles leased or rented by individuals or departments of the University while the vehicles are being used on University business. No physical damage insurance is provided by the University or state; physical damage coverage for the leased/rental vehicle must be purchased by the individual or department.



For example, if using a rented vehicle while traveling on University business, employees/departments must purchase the Collision Damage Waiver unless a personal automobile insurance policy will extend physical damage insurance to the rented vehicle, or the University contract with the auto rental company exempts liability for collision damage. Further information is available from the Office of Risk Management.

#### **5.25.10 Parking Regulations**

The University of Oklahoma is empowered to regulate and enforce parking in the Oklahoma Health Center and Research Park. All employees wanting to park a vehicle on the OHC campus, including the University of Oklahoma Health Sciences Center must register to park and pay the appropriate fee. Questions concerning parking should be directed to the Health Sciences Center Parking and Transportation Office (<http://oupts.ouhsc.edu/>), Service Center Building, Suite 100, 1100 N. Lindsay; or (405) 271-2020.

The University of Oklahoma Health Sciences Center does not pay for parking for employees or students.

#### **5.25.11 Police Department**

The OU Health Sciences Center Police Department provides a number of services designed to assure safety and security for the Health Sciences Center Campus.

The OUHSC Police Department is open twenty-four hours a day, seven days a week to provide services expected of a police agency. The department shares a joint jurisdictional agreement with Oklahoma City Police Department, which extends the OUHSC Police Department boundaries. The area includes that property west of Lincoln Boulevard to Centennial Expressway and South from N.E. 13<sup>th</sup> street to N.E. 4<sup>th</sup> street and on the east side of Lincoln Boulevard from N.E. 15<sup>th</sup> street south to N.E. 8<sup>th</sup> street and from Lincoln Boulevard east to Lottie Avenue.

#### **5.25.12 Lost and Found Service**

The OUHSC Police Department is responsible for providing a centralized lost and found service. According to state law, articles remaining unclaimed after six months will be disposed of in accordance to court order.

#### **5.25.13 Hazardous Weather Conditions Policy**

It may become necessary to close the campus during inclement weather. When snow and ice has accumulated over the campus, the OUHSC Police Department will conduct an observation of the campus streets and major arteries into the Oklahoma Health Center area for road conditions. That evaluation will be passed on to the Vice President for Administration and Finance. The determination of closing will be decided by the Senior Vice President and Provost and the Vice President for Administration and Finance. This will be done as early as possible. Notification to close the campus will be given by 6 AM, if at all possible. This information will be placed on the Campus Weather Line (271-6499) and the Health Sciences Center Web Page. In addition, this information will be distributed to the media via the Office of Public Affairs.

#### **5.25.14 Emergency Maintenance**

Emergency maintenance after the normal work-day or on weekends or holidays should be reported to the OUHSC Police Department, who will immediately relay the information to the Department of Site Support.

#### **5.25.15 Telephone Service**

The Oklahoma Health Center telephone system is supervised by Information Technology. Requests for installation of office telephones and related equipment should be submitted by the administrative head of a budget unit, and the cost is charged to the unit.

No employee may use a University telephone for a personal long-distance call unless the call is charged to a home number or a personal calling card.

### 5.25.16 Mail Service

The Central Mail Processing Services office is located in the Williams Pavilion. Building and room number should be used on correspondence. Mail processing delivers and collects United States mail as well as intra-building and intra-University mail.

Only official University mail may be metered for postage, insured, certified, or registered by Mail Processing Services. Postage is charged to the unit's budget account. Additional information is available by contacting Mail Processing Services.

An Interagency mailing service is operated by the State of Oklahoma for all state agencies located in the Oklahoma City area. Such mail should be placed in a campus mail envelope and clearly marked with the recipient agency and marked as inter-agency. Inter-agency mail will be picked up and delivered with all other campus mail. A list of the state agencies participating in the inter-agency mail service is available through the Department of Central Services web site.

### 5.25.17 Central Addressing

Human Resources provides a Central Addressing function available for use by all OUHSC departments. It is located in Room 122 of the Service Center Building, 271-2186. It has two functions:

- 1) Human Resources works in conjunction with University Printing to provide mailing labels for the Health Sciences Center and Tulsa campuses.
- 2) Human Resources maintains a listing of all OUHSC employees, which is used to publish the campus telephone directory.

### 5.25.18 Architectural and Engineering Services

Architectural and Engineering (A&E) Services provides professional design and project management services, engineering evaluations, and cost estimates for new construction and renovation projects to departments at the Health Sciences Center. Consultant architects and engineers are used when necessary. All projects for the Oklahoma City and Tulsa campuses must be approved and have oversight by A&E Services.

## 5.26 FACILITIES

The University of Oklahoma Health Sciences Center Procedures Governing Use of University Facilities for Non-University Sponsored Activities was adopted July 1, 1997. This procedure gives priority to the use of facilities for University functions. It is administered by the respective building coordinator. Facility repairs, maintenance, and renovation are managed by the Department of Operations.

### 5.26.1 Facilities Management and Capital Planning

Facilities Management and Capital Planning is responsible for space planning and allocation processes, space surveys and facility studies, facilities inventory, campus master planning, and planning for the development of new facilities for campuses in Tulsa and Oklahoma City.

## 5.27 PILOT PROGRAM FOR ENHANCEMENT OF EMPLOYEE WHISTLEBLOWER PROTECTION

Employees working on a federal, grant, or contract issued beginning July 1, 2013, through January 1, 2017, are subject to the rights and remedies of the Pilot Program for Enhancement of Employee Whistleblower Protection. An employee of a contractor, subcontractor, grantee, or sub-grantee may not be discharged, demoted, or otherwise discriminated against as a reprisal for "whistleblowing".

Whistleblowing is defined as making a disclosure that the employee reasonably believes is evidence of:

- Gross mismanagement of a federal contract or grant
- A gross waste of federal funds;

- An abuse of authority relating to a federal contract or grant;
- A substantial and specific danger to public health or safety; or
- A violation of law, rule, or regulation related to a federal contract or grant (including the competition for, or negotiation of, a contract or grant)

To qualify, the employee's disclosure must be made to:

- The employee's manager, an administrative or executive officer of the University, or to the Office of Compliance;
- A court or grand jury;
- An official from the Department of Justice, or other law enforcement agency;
- A federal employee responsible for contract or grant oversight or management at the granting agency
- The Government Accountability Office;
- An Inspector General; or
- A member of Congress, or a representative of a Congressional committee.

An employee who believes that he or she has been subjected to prohibited reprisal may submit a complaint regarding the reprisal to the Inspector General of the agency that awarded the grant or contract.

Whistleblower protections cannot be waived by any agreement, policy, form, or condition of employment.

## **5.28 FRAUD PREVENTION, REPORTING, AND WHISTLEBLOWER PROTECTION POLICY**

The University prohibits fraudulent and dishonest behavior in the conduct of University business. It is the policy of the University to prevent, deter, and detect dishonest and fraudulent activities and consistently investigate suspected fraud. For the purposes of this policy, fraud is defined as the intentional, false representation or concealment of a material fact for the purpose of inducing another to act upon it. Fraudulent activities may include, but are not limited to:

- Misappropriation of University property or other fiscal irregularities;
- Intentional misrepresentation in, or forgery or inappropriate alteration of, any document used for University business, including, but not limited to: checks, promissory notes, or securities; purchasing and procurement materials; employee benefit or salary-related items such as time sheets, billings, claims, assignments, or changes in beneficiary; records relating to health; student-related items, such as grades, transcripts, loans, or fee/tuition documents; and
- Willful and unauthorized destruction of records, property, or equipment with the intent to conceal evidence of fraud, dishonest behavior, or irregularities in the conduct of University business

Fraud detected or suspected by a University employee must be reported immediately to the University's Internal Audit or the University Fraud Reporting Hotline. University employees are prohibited from taking any retaliatory action against an individual for good faith reporting, or causing to be reported, suspected fraud. Any person who has been subjected to retaliation in violation of this policy should notify any of the following responsible offices: Internal Audit, Legal Counsel, the University President, or the Board of Regents. If confirmed, retaliation in violation of this policy shall result in appropriate disciplinary action, up to and including termination.

The Chief Audit Executive shall be responsible for managing investigations in response to reports of fraud, except when a real or reasonably perceived conflict of interest could compromise the validity of an investigation, as determined by the President of the University or the Board of Regents, in consultation with the General Counsel. In cases where a report of fraud implicates specialized subject matter or an area in which the University has established investigatory or review procedures (e.g., Academic Integrity, Compliance, Ethics in Research, Institutional Equity), the matter should be referred accordingly unless, as determined by the Chief Audit Executive in consultation with the General Counsel, such a referral is not in the best interest of the University.

Investigations of suspected fraud shall, to the extent reasonably practicable and to the extent permitted by law, be conducted in a manner that protects both the participants in an investigation and the reputation of the person(s) who are the subject of an investigation. If an investigation reveals evidence that supports a finding of fraud, the

investigative report shall be referred to the executive officer over the area, the President, and/or the Board of Regents for corrective action. Corrective action may include, but is not limited to, disciplinary action against the perpetrator and/or adjustments to policies, procedures, or controls, or referral to law enforcement.

The Chief Audit Executive is empowered to 1) make recommendations to academic and administrative units to promote fraud prevention and deterrence, 2) adopt procedures consistent with generally accepted standards of fraud investigation to govern its conduct of fraud investigations, 3) manage the appropriate referral of reports.

(Regents, 6-21-16)

## **6. BENEFITS**

### **6.1 BENEFITS PROGRAMS**

The University offers a comprehensive and competitive package of employee benefits. University sponsored benefit programs include: medical insurance, dental insurance, vision coverage, short and long-term disability coverage, life and accidental death and dismemberment insurance, retirement insurance, flexible spending accounts for healthcare and dependent care expenses, long-term care insurance.

The employee must be in a continuous appointment of at least a .5 FTE. Benefits begin on the first of the month after date of hire. If the employee has a 1.0 FTE and does not enroll within the initial 31-day enrollment period, he or she will automatically be enrolled in medical, life insurance, and AD&D coverage, but will be ineligible to enroll in other insurance programs until the next annual open enrollment period. Under certain circumstances, an employee may be eligible to enroll or modify elections if experiencing a qualified life event change during the plan year.

The University pays in full for employee life, and accidental death insurance. The University and employee share in the cost of employee and dependent medical insurance, depending on the employee's salary. The employee pays a nominal fee for dental insurance and in full for all other insurance benefits. Most employee payments can be made on a pretax basis through the 125 Cafeteria Plan. Employees employed at less than 1.0 FTE pay for benefits on a prorated basis within defined bands.

Workers compensation insurance is provided for all employees irrespective of employment status. Unemployment compensation is provided for all employees except students. Additional information on all of these benefits can be found the Human Resource website at [www.hr.ou.edu](http://www.hr.ou.edu).

#### **6.1.1 Faculty Appointments – Benefits**

Most continuous faculty at the Health Sciences Center are appointed on a twelve- month basis, for the period July 1 through June 30. Some faculty members are appointed on a nine or ten- month basis, which generally covers the period August 1 through May 31. Faculty who are appointed on a nine or ten- month basis must be paid over twelve months.

Departments which have faculty appointed on a nine or ten- month basis will be responsible for the premiums normally paid by the University for the entire twelve- month period.

#### **6.1.2 Benefits Continuation**

The Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA) provides for continuation of medical, dental, and vision coverage for covered participating employees should they or their covered dependents become ineligible for coverage as a result of one of the following events: (1) the employee's termination of employment, reduction in hours, or death; (2) the employee's divorce or legal separation from a spouse; (3) the ineligibility of the employee's dependent child for continued plan participation at the end of the calendar month in which the child turns 26.

Employees with currently active coverage may continue participation up to one year in group insurance benefits, except Long Term Disability, during an approved leave of absence period. The cost of coverage during the leave period is the employee's responsibility.

### **6.2 TAX-DEFERRED ANNUITIES**

Procedures are available for employees to authorize the University to purchase tax-deferred retirement annuities for them with qualifying companies. This procedure allows employees the opportunity to couple financial retirement planning with the deferment of taxes on a portion of their current income; it is assumed that taxes will be less after retirement, since gross income subject to taxes will normally be lower.

### **6.3 RETIREMENT PLANS**

This section contains a general summary of the University's retirement plans. Eligibility to participate in the University of Oklahoma's retirement plans depends on the employee's FLSA status (exempt or nonexempt), age, and years of

benefits-eligible service. Two retirement tracks are available at the University of Oklahoma. Retirement Track A includes a defined contribution plan and the Oklahoma Teachers' Retirement System (OTRS). Retirement Track B includes only a defined contribution plan.

In both retirement tracks, the University provides contributions for the employee to an employer-funded, tax-qualified defined contribution plan under Section 401(a) of the Internal Revenue Code. In Track A, employees choose to participate in OTRS. Both the University and the employee contribute to OTRS. FLSA-exempt employees hired after July 1, 2004, must make a one-time irrevocable choice to participate in OTRS within their first 30 days of employment. Depending on the retirement track elected by the employee, the amount the University contributes to the defined contribution plan differs. Electing OTRS in Retirement Track A requires a contribution from the employee and may yield an overall higher retirement benefit depending on certain variables.

The University also offers two voluntary retirement savings plans to which employees may contribute on a pretax basis. These programs are offered under sections 403(b) and 457(b) of the IRS Code (regardless of FTE status). The accumulated value in these savings plans is tax deferred until money is withdrawn, but will be subject to applicable employment taxes when contributions are made. More details can be found on the Human Resources website at [WWW.HR.OU.EDU](http://WWW.HR.OU.EDU). The University of Oklahoma is a participating member in Social Security. For additional information about Social Security go to [www.ssa.gov](http://www.ssa.gov).

#### **6.4 OTHER RETIREMENT BENEFITS**

This section provides a general overview of eligibility for retirement from the University of Oklahoma and the benefits (other than retirement plan benefits) available upon retirement.

##### **6.4.1 Eligibility for Retirement**

To be eligible for University of Oklahoma retirement benefits, an employee must meet one of these requirements: (1) has attained age 62 with at least ten years of benefits-eligible OU service; (2) has attained age plus (at least ten) years of benefits-eligible OU service equal to 80 or more (Rule of 80); (3) has attained any age with 25 years of benefits-eligible OU service. An employee is eligible to apply for disability retirement at any age with at least ten years of benefits-eligible OU service. Eligibility requirements to retire with benefits from OTRS are different from the requirements listed above. More details can be found on the Human Resources website at [www.hr.ou.edu](http://www.hr.ou.edu).

##### **6.4.2 Benefits Upon Retirement**

Employees who meet the eligibility requirements for University retirement receive the following benefits package: (1) continued participation in health and dental insurance; (2) a parking permit, discount athletic tickets, use of designated University recreational facilities, and other miscellaneous benefits; (3) lifetime passes to the University golf course for their personal use issued for weekday play to professors emeriti and other faculty and staff retirees who retired prior to January 1, 1994, will be honored. Benefits from the OTRS and the DCP and ORP are determined on an individual basis. More details can be found on the Human Resources website at [www.hr.ou.edu](http://www.hr.ou.edu).

Eligible employees of the University are entitled to certain benefits following the completion of a designated number of years of employment, the attainment of specified ages, or satisfaction of other requirements as set forth in this Policy. For more complete details, please read the University of Oklahoma Retirement Policy. Human Resources for the respective campus will provide complete copies of the retirement policy upon request.

##### **6.4.3 Phased Retirement**

Individuals who are at least 55 years of age and have ten or more years of service may request permission to reduce their workloads and phase into another career or full retirement. The phased retirement program offers an attractive level of benefits during the phasing (The University of Oklahoma Retirement Plan of May 18, 1998).

##### **6.4.4 Retirees Returning to Work**

State law prohibits rehire of retirees as consultants for two years following retirement. OTRS retirees may return to work as temporary employees in accordance with OTRS rules. OTRS regulations require a minimum of 60 calendar days between a retiree's last day of preretirement public education employment and any such postretirement

employment. OTRS retirees should consult with OTRS before returning to work at any OTRS-participating institution to determine what, if any, impact on their retirement benefits a return to work might have. OU retirees not eligible for OTRS retirement benefits may return to work as temporary employees without a minimum waiting period. More details can be found on the Human Resources website at [www.hr.ou.edu](http://www.hr.ou.edu).

## **6.5 LEAVES POLICY**

### **6.5.1 Leave of Absence Without Pay**

Leaves of absence without pay may be granted for a period usually not exceeding one year to members of the faculty and other employees for purposes deemed to be in the interests of the University. Leaves without pay should be infrequent and should be approved only after careful consideration by department heads and college deans. Recurring requests for leaves of absence without pay should not be approved without strong justification, particularly when they are in consecutive years.

Application for a leave of absence should be submitted to the department chair or director, who will forward it with recommendation to the college dean by February 1 for leaves beginning in the following academic year or later and no later than July 15 for leaves beginning the following spring semester. After recommending approval or disapproval, the dean will forward the application to the Senior Vice President and Provost. The Senior Vice President and Provost will recommend to the President, who will make recommendations to the Board of Regents for final action for the April and September meetings, respectively. The President may approve exceptions to these deadlines, provided that it appears to be in the best interest of the University.

The application will be in the form of a letter of request with specific justification for the absence from the University and will include, for example, the following information:

- 1) Sabbatical or other leaves the faculty has taken in the past six years, their dates and purposes.
- 2) The purposes of the proposed leave.
- 3) The contribution of the leave to the realization of the faculty member's goals and those of the University in research, teaching, or service.
- 4) The arrangements to be made by the department to handle the courses that normally would be taught by the faculty member or to handle the faculty member's grants and/or contracts while on leave. The application should be specific and list the affected courses or other work and the arrangements that have been made for these courses and work.

Requests for extension must contain updated information about the above items and will be subject to the same approval procedure as an initial leave.

Time spent on leave of absence without pay will not count toward a probationary period for tenure or for eligibility for sabbatical leave.

University contributions to the Defined Contributions Plan, AD&D, group life, and medical and dental insurance, will not be made during a leave of absence without pay. Persons on such leave without pay may pay for their own contributions to the plans, except to the Defined Contribution Plan.

(Regents, 11-12-43, 1-24-95, 1-27-04, 6-23-04)

### **6.5.2 Paid Time-Off (PTO)**

Paid time off (PTO) is available to employees who hold benefits eligible appointments. Temporary employees and student employees are not eligible for paid time off. PTO may be used for vacation, personal illness, funeral attendance, illness of a family member, or other personal business. Unpaid leaves of absences cannot be taken if the employee has an accrued paid leave balance. Non-exempt employees may accrue compensatory leave which should be used first before any other paid leave is taken. Exempt employees working at least .50 FTE and up to .75 FTE will accrue paid leave in proportion to their FTE appointment. Non-exempt employees on the hourly payroll accrue paid leave on a pro-rata basis depending on the number of hours paid. The 40-hour work week will be the basis for the

pro-rata computations. Paid leave time is accrued each pay period. Paid leave can be accrued up to a maximum of 336 hours. Paid leave is accrual as follows:

Category	Years of Service	Monthly Hours	Annual Accrual	Maximum Accrual
Executive and Administrative Offices, 12-Month Faculty	Each Year	22	33 days(264 hours)	42 days (336 hours)
All other Staff	1 - 5 years	18	27 days(216 hours)	42 days (336 hours)
All other Staff	6 - 10 years	20	30 days(240 hours)	42 days (336 hours)
All other Staff	11 years or more	22	33 days(264 hours)	42 days (336 hours)

Authorized holidays falling within an employee's PTO period will be counted as holiday pay. Use of paid time off for other than personal illness or emergency must be scheduled in advance with supervisory approval. Employees must comply with departmental guidelines for reporting absences and approving time off work. Whenever possible, the University will grant earned paid time off at the convenience of the employee. However, departmental needs must be met. Cash payment to an employee in lieu of paid time off will not be permitted. No cash payment will be made for time accrued in the extended sick leave account.

### 6.5.3 Extended Sick Leave (ESL)

Time accrued beyond the maximum allowance of paid time off will be deposited in an extended sick leave (ESL) account. There is no maximum extended sick leave amount one can accrue. An employee may transfer accrued paid time off to the extended sick leave (ESL) account. Time deposited in the extended sick leave (ESL) account may not be transferred back to the accrued time-off account. Time away from work because of vacation, illness of a family member, funeral attendance, or other personal business is to be reported as paid time off. Absence due to personal illness is to be reported as paid time off for the first five consecutive working days per incident.

When there is no accrued time in the paid leave account, the first five days per incident of illness must be leave without pay. Absence due to personal illness beyond five consecutive working days will be deducted from the extended sick leave account as long as accrued time is available. When there is no accrued time in the extended sick leave account, absence due to personal illness will be deducted from paid leave time. Scheduled paid leave time taken will be considered as time worked for the purpose of compliance with the University's overtime policy. Unscheduled paid leave time taken and extended sick leave time taken will not be considered as time worked for overtime purposes. An employee returning to work part time following an extended sick leave may continue to draw from the extended sick leave account for the time not worked until a full release is given by the physician. Recurrence of the same illness within 30 calendar days of returning to work from an extended sick leave may be considered a continuation of the incident and charged to extended sick leave.

Absences due to personal illness should be reported on the monthly payroll certification or hourly time records. A Personnel Action Form changing the employee's status to a paid leave of absence must be processed before any absence may be deducted from the extended sick leave account. The University will require acceptable medical documentation of illness or disability before allowing any charges to extended sick leave benefits. Leave for personal illness should be taken in the following order: five days of paid leave time, extended sick leave, remaining paid leave time, leave without pay. Non-exempt employees may accrue compensatory leave, which should be used first before any other paid leave is taken. Duration of the disability is to be medically determined. No supervisor should compel an employee to return to work without a medical release. Pregnancy is to be treated as any other extended sick leave. An employee may continue normal duties through pregnancy or use available leave while unable to perform regular duties. Employees who utilize leave for pregnancy shall suffer no penalty, retaliation, or other discrimination.

(Regents, 4-4-91, 6-19-96, 3-29-00, 1-27-04, 6-23-04, 10-22-08, 6-1-12)

### 6.5.4 Extended Sick Leave Policy for Nine- and Ten- Month Faculty

The following extended sick leave benefits are available to full-time faculty members with the rank of instructor or above who hold nine-month or ten-month continuous appointments on the Norman and Health Sciences Center campuses. Benefits for 12-month faculty are addressed in the University's Paid Time-Off and Extended Sick Leave Policy.

Full-time and nine- and ten-month faculty with the rank of instructor or above will accrue 12 days of extended sick leave per year. Such faculty members working at least half-time (.50 FTE) but less than full-time (1.0 FTE) will receive



leave accrual based on their FTE appointment. There is no maximum on the accrual of extended sick leave. No cash payment will be made for any time accrued.

(Regents, 4-4-91, 6-19-96, 1-27-04)

#### **6.5.5 Administrative Leave**

Administrative leave with pay is sometimes granted when it is determined to be in the University's best interest that an employee not return to work for a specified period of time or for designated emergency closings of the University due to inclement weather, natural disaster, pandemic situations, or other events as determined by the President. Time approved as administrative leave will not be charged to an employee's paid time off. Benefits-eligible employees, except those assigned to certain federal grants and contracts, are eligible to receive administrative leave with pay. Employees who are not benefits eligible are paid only for time worked and are not eligible for administrative leave. Authority to grant administrative leave requires prior approval by the President, appropriate provost, or vice president.

(Regents, 7-23-87, 1-27-04, 6-22-11)

#### **6.5.6 Military Leave of Absence**

Employees who are members of the Oklahoma National Guard or any branch of the United States military or its reserve components are entitled to a leave of absence with pay for the first 30 regularly scheduled calendar days of active military duty during any federal fiscal year (October 1 through September 30) when ordered by proper authority to active or inactive duty. The leave with pay will not be charged against paid leave or other accrued benefits. During the remainder of the leave of absence in any federal fiscal year, the University may elect to pay employees an amount equal to the difference between the employee's full regular pay from the University and their Oklahoma National Guard or United States military reserve component pay. Employees who are employed by the University for brief, non-recurring employment that is not expected to last indefinitely or for a significant period of time are not entitled to military leave except under limited conditions. Human Resources can be contacted for assistance regarding such determinations. Reference(s): 44 OS §209, Leave of absence to public officers and employees; 72 OS §48, Leave of absence during active or inactive duty or service – Public employees.

(Regents 3-9-72, 1-27-04, 6-22-11)

#### **6.5.7 Re-Employment Rights After Military Leave**

Reemployment rights and benefits following a military leave of absence are in conformance with applicable federal and state laws. Subject to certain exceptions, the person is entitled to reemployment in the job he or she would have attained but for the military leave, and with the same seniority, status, and pay, as well as other rights and benefits determined by seniority, if: (1.) the University received advance written or verbal notice of the service; (2.) the cumulative length of the absence and all previous service absences with the University does not exceed five years, except in certain circumstances; (3) the person reports to, or applies for reemployment to, the University within the time provided in 38 USC § 4312, Reemployment rights of people who serve in the uniformed services, subsection (e).

#### **6.5.8 Family and Medical Leave**

This policy, in its entirety, is contained in [Appendix L](#).

#### **6.5.9 Shared Leave Policy**

This policy, in its entirety, is contained in [Appendix L](#).

#### **6.5.10 Leave to Donate Bone Marrow or Organs**

An employee of the University may be granted leave to donate bone marrow or organs. An employee who is granted a leave of absence pursuant to this Section shall receive his or her base pay without interruption during the leave of absence. An employee of the University who serves as a donor shall be granted a paid leave of absence of:

- 1) Up to five working days to serve as a bone marrow donor; and
- 2) Up to working days to serve as a human organ donor

An employee's request for leave pursuant to this Section must be submitted through the departmental budget head to the Chief Human Resources (CHRO) or, in his or her absence, the campus Human Resources Director (HRD) and accompanied by written verification from the health care provider that the employee will serve as a donor.

#### **6.5.11 Breastfeeding Support**

The University supports breastfeeding mothers in the workplace by providing flexibility to allow sufficient time to express milk or to breastfeed a baby brought in by a care provider. Time spent beyond the normal break time will be considered to be unpaid. The employee and the supervisor can make arrangements to make up time lost or use available paid leave in accordance with existing University policies.

(Regents, 6-21-11)

### **6.6 HOLIDAYS**

Each academic year, the University recognizes 11 holidays, including New Year's Day, Martin Luther King Jr. Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, and Christmas Day, plus four other holidays as listed in the annual holiday schedule. Employees eligible for benefits will be excused from work with pay on those days recognized by the University as holidays. A holiday falling on a Saturday will be recognized by the University on the preceding Friday. A holiday falling on a Sunday will be recognized by the University on the following Monday. When operations of the University require that employees be regularly scheduled to work on days otherwise recognized as holidays, such employees will be granted an equal amount of time off with pay on a date mutually agreed upon by the employee and the budget unit head.

### **6.7 ATTENDANCE AT SUMMER INSTITUTES**

Academic administrative officers on twelve-month appointments and in direct charge of academic programs, upon proper prior application and recommendation, may be allowed to attend summer institutes designed to improve or maintain their scholarly qualifications for their University work, at no expense to the University other than the continuation of the regular salary during the period of the institute, subject to the following conditions:

- (a) The applicant will be expected to count the time spent in the institute as vacation time.
- (b) A maximum of two weeks beyond the applicant's entitlement of vacation time may be spent in the institute without loss of salary.
- (c) The frequency of such an arrangement may not be greater than once in three summers.

Approval of such an arrangement in each individual case may be given by the President upon recommendation of the appropriate dean, and Senior Vice President and Provost, based upon the work load in the academic unit involved, the appropriateness of the institute to the applicant's work, and the ability to handle the applicant's work during absence at no extra cost to the University.

(Regents, 5-13-65, 1-27-04, 6-23-04)

### **6.8 ATHLETIC TICKETS**

Faculty and staff members may apply to purchase season tickets to varsity athletic events at reduced rates. For initial application for season football tickets, eligible faculty and staff members should file their applications during the first week in April. Delaying such action may result in tickets not being available when requested. Application cards are generally available in Human Resources in early April, or they may be obtained from the Athletic Ticket Office, Owen Stadium, in Norman. Once a faculty or staff member has received season football tickets, the Athletic Ticket Office will mail renewal applications (for next season) directly to the faculty or staff member. Further information may be obtained from the Athletic Ticket Office, Norman campus, at 325-2424.

## **6.9 CREDIT UNIONS**

Faculty and staff who are members of FOCUS Federal Credit Union and Tulsa Teachers Federal Credit Union can authorize payroll deductions for loan repayments and/or savings.

## **6.10 ENROLLMENT OF FACULTY AND STAFF IN UNIVERSITY COURSES**

The University places no limitations on the number of hours of coursework in which employees may enroll outside the individual's normal working hours. However, such coursework cannot interfere with the individual's duties as determined by the individual's supervisor and budget unit head. Full-time employees may enroll in a maximum course load not to exceed five contact hours per week each semester and summer session during their regular working hours. Permission to enroll in a course during the employee's normal working hours must be obtained from the chair of the faculty member's department or the staff member's supervisor and the budget unit head. Under very rare circumstances, exceptions to the one-course limitation may be made by the appropriate provost/vice president through proper administrative channels.

Staff personnel will be required to make up time spent in class through arrangements approved by their supervisor unless course enrollment does not increase staff requirements or does not place extra demands on other employees. A decision should be reached by the budget unit head, the supervisor, and the employee at the time of enrollment as to whether the time spent in class must be made up. Any time spent in class, even though occurring during the employee's regular schedule of working hours, shall not be considered as time worked for the purpose of calculating overtime pay unless attendance is required by the supervisor. Time spent in class during working hours must be indicated as such on an hourly employee's time record and noted on a monthly employee's payroll certification.

As authorized by the Oklahoma State Regents for Higher Education, a full-time employee not designated as "temporary" who enrolls in regular coursework will be charged one-half the general fee for such work up to six hours per semester or three hours per summer session, except as noted below. Employees enrolling under the reduced fee will not be required to pay the student facilities fee and the student health fee, nor will they be eligible for the services covered by those fees. Student ID cards of persons not paying fees will be coded to show they are not entitled to the services for which the fees are charged. The reduced fee does not apply to special fees or to special academic programs, such as those in Continuing Education and Public Service or Liberal Studies, which have special regulations regarding fee waivers. Persons who are employed less than full time are not eligible for the fee reductions; all enrollment fees will be charged.

For those on a part-time appointment during the summer, a three-hour limitation will apply on the fee waiver. Under no circumstances will the reduced enrollment fee apply to more than six semester hours of coursework in a single semester or summer session. Enrollment fees for hours taken over this maximum will be charged at the full rate. At the time of fee payment, the employee must present a Faculty/Staff Fee Waiver Application signed by the head of the budget unit. This form may be secured from the office of the budget unit head.

## **6.11 FACULTY HOUSE**

Faculty House, a University owned dining club, is located at 601 N.E. 14th Street. There are no dues for faculty, staff, or students. WiFi, video conferencing, private rooms, and catering services are available. Faculty House provides delivery services for the HSC campus. A portion of the Faculty House may be reserved at a discounted rate for special activities.

Further information may be obtained from the General Manager at 235-8212 or by visiting [www.ouhsc.edu/facultyhouse/](http://www.ouhsc.edu/facultyhouse/)

## **6.12 IDENTIFICATION CARD**

The University provides an identification card to each employee appointed on a continuous basis at .50 FTE or greater and to each retiree. It is to be presented for securing the privilege of using various facilities and activities available to University employees. The card is good only during the period of employment or retirement and does not

authorize the holder to obligate the University in any manner. Department heads are responsible for the return of an employee's staff identification card upon the employee's termination from University employment.

Volunteer faculty are also eligible to receive an identification card upon completion of the "Volunteer Faculty-OneCard Photo ID" form and the approval of the appropriate department. The card is to be presented on request when using University facilities. The initial card is provided free of charge; replacement cards cost \$15.00.

Cards may be obtained from the OneCard Office, SCB 115, from 8:00 a.m. to 5:00 p.m., Monday through Friday.

#### **6.13 UNIVERSITY HEALTH CLUB**

The University Health Club is a premier health and fitness facility. With 65,000 square feet of space, the University Health Club incorporates the latest technological advancements in fitness and wellness. The facility is located inside the Harold Hamm Oklahoma Diabetes Center, 1000 North Lincoln Boulevard, on the OUHSC campus.

For a list of services, hours of operation, and membership rates, call 271-1650.

## 7. LIBRARY FACILITIES AND INFORMATION TECHNOLOGY

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### 7.1 ROBERT M. BIRD HEALTH SCIENCES LIBRARY

The Robert M. Bird Health Sciences Library is responsible for the informational materials and services that are needed to support the research and educational programs on the Health Sciences Center campus and serves as the major resource for health information in Oklahoma. The Library supports graduate, professional, and undergraduate levels in medicine, nursing, pharmacy, dentistry, public health, communication sciences and disorders, medical imaging and radiation sciences, nutritional sciences, and rehabilitation sciences (occupational therapy and physical therapy).

#### 7.1.1 Collections

The Library collection contains more than 300,000 physical books, journals, audiovisuals, and electronic resources. The Library provides print and electronic access to over 9,000 journal subscriptions, 230,000 book titles, and 150 databases.

The Library has several special collections. The Native American Health Collection contains resources of a historical nature, as well as reports of current research and clinical care related to the health and well-being of American Indians. The Archive Collection contains books, journals, and manuscripts that are of historical value. Included in this collection are archives related to the Health Sciences Center and the history of health care in Oklahoma. The Historical/Digital Collections is available on the Library's Homepage and reflects some of the individual collections in the Archive Collection, located in the History of Medicine. The History of Nursing Collection contains materials distributed throughout the main collection that reflects the development of the nursing profession with an emphasis on Oklahoma nursing. The Library circulates most books; the archives and journals are non-circulating.

#### 7.1.2 Services

The Library serves the Health Sciences Center community as well as health professionals, institutions, and consumers in the State. Access to the Library's resources and policies can be located at the Library's Home page, <http://library.ouhsc.edu>.

Library faculty provide tours, orientation, reference assistance, course-related bibliographic instruction, and seminars on using research tools. These activities are accomplished through one-on-one consultations, small group appointments, and class instruction. Library faculty seek opportunities to collaborate with other campus faculty in community outreach; activities around information access, storage, organization or retrieval; and systematic reviews and other pertinent research.

The online catalog is available for searching print and electronic titles owned by the Library. The online catalog and electronic resources are available over the campus network and remotely to students, faculty, and staff affiliated with the University of Oklahoma Health Sciences Center. For assistance in using any of the resources contact the Reference and Instructional Services Department. The Library provides informational workstations for accessing the catalog, bibliographic databases, electronic books, journals, and information on the Internet, as well as access to word processing, spread sheet, database, and Internet software.

When materials are unavailable they can be borrowed through interlibrary loan. The Library is a member of several networks designed to expedite the transfer of information between libraries in an efficient manner.

A computer lab is available for teaching and training. Other spaces are available for meetings, group collaboration, videoconferencing, and campus social functions. Self-service photocopying, faxing, and scanning is available on the third floor, inquire at the Service Desk. Additional technologies such as 3D printing are available. See the Library web site for additional information concerning rooms, reservations, technologies, and services.

Facilities and services of the University of Oklahoma Libraries, Norman campus, as well as the Library facilities at the OU-Tulsa campus are available to Oklahoma City Health Sciences Center personnel.

## 7.2 UNIVERSITY OF OKLAHOMA - TULSA LIBRARY

The University of Oklahoma - Tulsa Library provides library services to those faculty and students in Tulsa. The library contains 30,000 volumes and subscribes to 500 journals. Database searching, reference service, and interlibrary loan service are available. The Library has a writing center, group study rooms, and a conference room with videoconference capabilities, all of which are available for faculty, staff, students, and residents.

## 7.3 INFORMATION TECHNOLOGY

HSC Information Technology (IT) is a strategic partner with the OU Health Sciences Center and seeks to deliver the world-class technology services our university community needs to teach, heal and discover. Our IT professionals strive to be trusted advisors on all technology issues, helping to identify and implement strategies that serve the OUHSC. IT utilizes proven technologies, recognized service management practices, and shared services in the design, development and delivery of solutions that provide value to the increasingly critical and complex needs of the campus community.

### 7.3.1 Policies, Standards, and Procedures

In support of efforts to protect key University information assets, manage risk, and ensure regulatory compliance, Information Technology oversees development of information system security policies, standards, and procedures.

Please refer to the IT Policy Web Site at <http://IT.ouhsc.edu/policies> to view the following policies and related processes and standards:

- Acceptable Use of Information Systems Policy
- Access to University Data Policy
- Active Directory Policy
- Activity (Log) Review Policy
- Antivirus Policy
- Business Unit Security Roles and Responsibilities Policy
- Compliance Sanctions Policy
- Computer Logoff/Lock Policy
- Digital Copyright Policy
- Electronic Data Disposal Policy
- Facility Security Policy
- Information System and Data Classification Policy
- Login Banner Policy
- Monitoring Computer Use Policy
- Password Management Policy
- Peer-to-Peer (P2P) File Sharing Policy
- Policy for Mass Campus Communications
- Portable Computing Device (PCD) Security Policy
- Product Review Policy
- Resource and Data Recovery Policy
- Server Consolidation Policy
- Security Awareness and Training Policy
- Security Incident Reporting Policy
- Security Incident Response Policy
- Telework Policy
- Third Party E-mail Policy
- Transmission of Sensitive Data Policy
- Transportation of Media Policy
- Vulnerability Assessment Policy

### 7.3.2 Campus Notices

The Campus Notices website is the primary medium of electronic communication for announcements to the OUHSC campus. Members of the OUHSC community are encouraged to review Campus Notices regularly to stay informed of activities and events on the campus. Campus Notices is available through the InsideHSC link on the OUHSC web site or at: <http://www.ouhsc.edu/campusnotices>.

Campus Notices uses several categories for organizing and viewing announcements:

- Campus Events: OUHSC-related announcements
- Staff Senate Announcements
- Faculty Senate Announcement
- Healthy Sooner Announcements
- Electronic Bulletin Board: Faculty, staff, or student “bulletin board” type communications – any announcements that are not University sponsored.
- Lost and Found

Any individual with an HSC computer account is able to post items to Campus Notices. Complete instructions for posting items are available at Campus Notices through the “Help” link.

Items submitted to Campus Notices:

- Should be concise and provide links to additional information or forms, as necessary.
- Will be displayed up to a maximum of two weeks.
- Will be governed by the “Acceptable Use of Information Systems at the University of Oklahoma Health Sciences Center” (<http://it.ouhsc.edu/policies/AcceptableUse.asp>) policy with the recognition that the Electronic Bulletin Board messages are not necessarily University business.

### **7.3.3 Rounds and Seminars**

The Rounds and Seminars website posts announcements of Grand Rounds and Seminars that are scheduled for the OUHSC community. Rounds and Seminars can be accessed through the InsideHSC link on the HSC web site or at <http://www.ouhsc.edu/rounds.aspx>. These events may also be posted under Campus Events | Campus Notices.

## **8. RESEARCH**

### **8.1 OFFICE OF RESEARCH ADMINISTRATION**

The Office of Research Administration (ORA) serves as a central resource to faculty and staff for all aspects of research, training, and public service activities and for the execution of professional service, affiliation, and certain provider contracts. The office provides information regarding funding sources and opportunities; reviews and approves completed proposals and grant applications for compliance with University, federal, state, and sponsor requirements prior to submission to external sponsors; and negotiates, and executes all basic research, clinical research, public service, professional service, provider, and affiliation agreements. ORA serves as the University's liaison with external agencies and organizations for all administrative and contractual matters. ORA has Institutional signature authority for submission of grants and execution of research and service related contracts. The ORA is under the leadership and direction of the Vice President for Research.

#### **8.1.1 Proposals and Contracts**

The Office of Research Administration supports faculty and staff participation in research, training, and service activities by (1) assisting in the identification of sources of external funding support via electronic announcements; (2) assisting in the preparation of completed proposal applications by reviewing all required budget and form pages for compliance with applicable federal and state laws and regulations, and sponsor and/or University policies and requirements; (3) assisting investigators with collaborative projects with other institutions, including assisting with the preparation of program project grants, federal contract applications and negotiations, and subcontracts; (4) reviewing, negotiating, and executing clinical and basic research agreements, including but not limited to: clinical trial, material transfer, confidentiality, and subcontract agreements; and (5) reviewing, negotiating, and executing professional service, affiliation, and provider agreements, including but not limited to: consulting and speaking agreements; student and resident affiliation agreements; and medical provider agreements for certain Colleges.

#### **8.1.2 Routing Proposals**

All completed grants applications and proposals must be routed through and reviewed by the ORA at least three (3) full business days prior to the sponsor's deadline. This includes all proposals to state, federal, non-profit, foundation, and industrial/pharmaceutical sponsors, regardless of the type of submission (hard copy or electronic). All solicited and unsolicited (investigator-initiated) proposals are required to be routed to ORA for approval prior to submission to the sponsor, including submissions proposing that University investigators participate as subcontractors with other institutions. In certain cases, the ORA will execute a confidentiality agreement prior to the submission of investigator-initiated proposals to sponsors to protect the interests of the University and investigator. An authorized agent of the Board of Regents of the University of Oklahoma in the ORA must sign all proposals prior to submission to the sponsor. Faculty do not have the authority to sign any proposal or grant application, nor to submit any electronic applications without the prior written approval of the ORA.

#### **8.1.3 Routing Contracts**

All research training, professional, provider, public service, and clinical trial contracts must be routed through the ORA for legal, fiscal, and administrative review prior to signature approval by an authorized agent of the Board of Regents of the University of Oklahoma in ORA. Contracts include agreements; letter agreements; memoranda of understanding; affiliation, material transfer, confidentiality, license, consulting, speaking, provider, and Professional Practice Plan (PPP) agreements; proposals that will be binding if accepted; amendments; contract modifications; and any other arrangement that obligates the University, its resources and/or its employees. Faculty may not legally bind the University by signing such contracts; therefore, all contracts must be signed by an authorized agent of the Board of Regents of the University of Oklahoma.

#### **8.1.4 Funding Opportunities**

The ORA disseminates sponsored program and funding information through weekly electronic newsletters and e-mail notices to announce: (1) special funding opportunities; (2) program deadlines; and (3) new directions or changes in programs, policies and procedures within University and at granting agencies.



The ORA maintains a web page (<http://w3.ouhsc.edu/ORA/>) featuring: (1) ORA and University forms; (2) web site links to relevant University offices and sponsors; (3) current information regarding University and sponsor policies, including indirect cost rates (facilities and administrative costs), fringe benefit rates, and other important University and sponsor information necessary for the proper completion of proposals and processing of contracts; (4) links to a variety of internal and external funding announcements; (5) links to funding agency web sites; and (6) access to publicly available University award information.

#### **8.1.5 Institutional Committee Reviews**

All protocols for human subjects research, animal research, and research involving the use of recombinant DNA, gene therapy, microorganisms, biological toxins, and human gene transfer must be approved prior to the initiation of such research. In most cases, sponsors require certification of institutional approvals on a “just-in-time” basis, that is, after a grant or contract is awarded. Investigators are responsible for obtaining all required approvals in accordance with University and sponsor policies and for assuring required approvals are maintained for the duration of an award. Investigators must coordinate obtaining required approvals with the following offices prior to the initiation of research or service projects requiring approvals: Institutional Review Board (IRB), Institutional Animal Care and Utilization Committee (IACUC), Institutional Biosafety Committee (IBC), Radiation Safety Committee, and Environmental Health and Safety Office. Depending on where the activity is performed, investigators may also need to obtain additional approvals from the Veterans Affairs Medical Center, the Oklahoma Medical Research Foundation, OU Medical Center, Dean McGee Eye Institute, and/or other committees, centers, or entities.

### **8.2 DIVISION OF COMPARATIVE MEDICINE**

The Division of Comparative Medicine has three primary functions at the Health Sciences Center. It is a service unit that provides housing, daily care, administrative direction, veterinary medical care, and veterinary diagnostic support of laboratory animals used for medical research and education for the University. It provides consultative services to investigators concerning animal research. Faculty members of the Division present training sessions to research technicians, laboratory animal technicians, and faculty on the use of laboratory animals in research. The Division also operates a Baboon Research Resource funded by the National Institutes of Health that serves as a research resource for OUHSC faculty investigators as well as biomedical research centers across the United States. In conjunction with the Institutional Animal Care and Use Committee, the Division of Comparative Medicine veterinarians review research protocols that involve laboratory animals. The Division of Comparative Medicine is accredited by the American Association for Accreditation of Laboratory Animal Care. The Health Sciences Center has an approved Assurance on file with the National Institutes of Health, Office of Laboratory Animal Welfare, for the use of animals in research, testing, and training programs.

### **8.3 RESEARCH COUNCIL**

The Research Council is charged with the promotion and development of research and creative activity throughout the University community. The Council serves as adviser to the President, Senior Vice President and Provost, Vice President for Research, and Faculty Senate, in matters regarding research.

### **8.4 POLICY FOR CONSULTING ON GRANTS AND RESEARCH CONTRACTS AWARDED TO THE HEALTH SCIENCES CENTER**

#### **General Principles**

Members of the University faculty and staff are heirs to extraordinary privileges and responsibilities. To these is added a commitment to the University as the central vehicle for the faculty and staff member's intellectual capabilities and energies. Faculty and staff also have a loyalty to the University's interests as a community of shared scholarship.

Additional extramural efforts of faculty and staff can be intellectually and financially rewarding. External service and consulting at moderate levels are honorable extensions of research experience and academic skills. They serve the scientific profession, promote productive collaborations, stimulate the practical applications of research, and foster transfer of information. The University encourages such efforts.

The University recognizes, however, that consulting services are susceptible to actual or perceived conflicts of interest, misuse, and abuse. Awarding agencies, particularly federal government agencies, scrutinize consulting arrangements and may determine the services to be unnecessary or unauthorized. Such disallowed costs must be reimbursed with unrestricted funds.

In an effort to protect the interests of the University and its faculty and staff and to comply with federal and state law and external granting agency requirements, the following policy regarding the use of consultants in grants and research contracts is adopted. (Consultant agreements not involving grants or research must be approved through the University's normal approval process.)

## **POLICY**

### **Section I. Definitions and Requirements (for purposes of this policy):**

- A. External Consultants – Individuals who are not employees of the University but who are engaged personally to give professional advice or service for a fee. These individuals have knowledge and special abilities that are essential to meet the project needs that cannot be provided by University personnel.
- B. Internal Consultants – Under unusual circumstances, a person may be at the same time a consultant to and an employee of the University, only if the following conditions exist:
  - 1) the consultation is across departmental lines; and
  - 2) the work performed is in addition to the employee's regular department load.
- C. Selection – The PI must be able to justify the selection upon request.
- D. Payment – The consultant's fee (stipend, payment, etc.) must be in compliance with any grant terms or state or federal rules and must be reasonable (i.e., based on the consultant's qualifications, in line with market rates). The PI must be able to justify the fee upon request.

### **Section II. Consulting Arrangements**

All consulting services at the Health Sciences Center must be supported by documentation per each of the following categories. Documentation is to be provided to the Office of Research Administration (ORA).

#### **A. External Consultants to OUHSC**

There must be justification for the external consultant. \*NOTE – Because of changes in the federal cost accounting standards, external consultants may need to be bid. Please refer to OUHSC Purchasing policies or contact the Director of Purchasing for clarification.

#### **At the Time of and Included Within the Proposal:**

- 1) Approval – The consulting services are approved by the sponsor or contracting agency. Any relationship to the University and PI must be disclosed in the proposal;
- 2) The consultant has signed a letter of commitment to perform specified services at a stated rate under the grant or contract. This letter must be submitted as part of the proposal.

#### **After the Award:**

If a consultant line was not included in the proposal, the following steps must be taken:

- 1) An IPA (re-budget) form must be obtained from ORA and completed to re-budget funds into the consulting budget category. Justification for the need for consulting services must be included.

- 2) If required by the sponsoring or contracting agency, a letter requesting permission to use a consultant must be sent to the sponsor or agency. The letter must include justification for the consultant and be cosigned by the ORA and the PI.
- 3) The consultant must have signed a letter of commitment to perform the specified services at a stated rate under the grant or contract.

#### B. Internal Consultants

There must be justification for a faculty/staff member to serve as an internal consultant and the requirements of Section I.B have been met.

##### At the time of the Proposal:

The inclusion of the consultant is required in the proposal budget. The budget justification shall identify the consultant's position at OUHSC and include a statement that payment will be in addition to normal University pay. The internal consultant must complete an Internal Consultant Form (available from ORA). It includes:

- (a) a statement from the faculty/staff member describing the scope of work to be completed and explaining how the hours worked on the project will be in addition to his/her regular University duties;
- (b) a description of the payment terms;
- (c) the faculty/staff member's signature; and
- (d) approval by the chair of the faculty/staff member's department and the dean of his/her college of the work to be performed on the project, as indicated by their signatures.

##### After the Award:

If a consultant line was not included in the proposal, the following steps must be met:

- 1) An IPA form must be obtained from ORA and completed to re-budget funds into the consulting budget category. Justification for the need for consulting services must be included.
- 2) The faculty/staff member, the chair of his/her department, and the dean of his/her college must sign the completed Internal Consultant form. This form should then be forwarded to the ORA.
- 3) Upon receipt of the completed form, ORA will send a letter to the sponsor or agency requesting approval of the internal consultant. If necessary, the letter will include a request to re-budget funds. The letter must be co-signed by the ORA and PI.
- 4) Upon approval by sponsor, ORA will acknowledge the Internal Consultant form and return it to the faculty/staff member, with a copy to the department chair and dean.

(Senior Vice President and Provost, 5-13-98)

## 8.5 SPONSORED PROGRAMS INCENTIVE PLAN POLICY

The intent of this policy is to recognize faculty performance in research and scholarly activity, to increase externally sponsored funding to the University of Oklahoma Health Sciences Center (OUHSC), and to provide additional incentives and resources to supplement educational programs at the OUHSC. This policy allows faculty members to receive salary supplementation incentives when their salary is re-budgeted and charged to sponsored programs for which the OUHSC is the grantee, contractor, or sub-contractor.

#### Eligibility

Performance incentive payments are available for full- and part-time faculty with regular appointments.

## Policy

Faculty salaries will be budgeted on sponsored research and grants and contracts commensurate with actual time and effort. Corresponding salary released from institutional accounts (PPP, state revolving, and other unrestricted funds) is available for performance incentive payments. Performance incentive payments will not be charged directly or indirectly to federally-funded programs. Released institutional faculty salary will be made available for expenditure on a quarterly, after-the-fact basis as follows:

INDIVIDUAL FACULTY MEMBER (30%) – 30% of released salary will be made available to the individual faculty member. Such funds can be paid as a performance incentive payment to the faculty member or be used by the faculty member for non-recurring expenditures; i.e., travel, supplies, equipment, temporary positions, etc.

DEPARTMENT CHAIR (50%) – At the discretion of the departmental chair, salary/benefit release funds may be reallocated within the department for non-recurring expenditures.

DEAN (20%) – At the discretion of the college dean, 20% of released salary/benefit funds may be reallocated within the college for non-recurring expenditures.

The sponsored programs incentive plan is separate from faculty compensation paid through college practice plans. Incentive payments will not be considered part of base salary for tenure purposes, merit based salary increases, or termination pay. A faculty member may continue to participate in the performance incentive plan as long as release funds are available. Performance incentive payments cannot be made prospectively. Exceptions to this policy must be approved by the Senior Vice President and Provost.

(Senior Vice President and Provost, 7-1-98)

### **8.6 POLICY REGARDING PRINCIPAL INVESTIGATOR ELIGIBILITY AT THE UNIVERSITY OF OKLAHOMA HEALTH SCIENCES CENTER**

Principal Investigators on sponsored projects shall hold faculty (regular or temporary appointments) or staff paid appointments, full-time or part-time, at the University of Oklahoma Health Sciences Center. However, if a funding agency has more restrictive requirements regarding who can serve as a principal investigator on a project, the funding agency's requirements supersede this policy.

If allowable by the sponsor, graduate students, postdoctoral fellows, and residents may apply for external funding provided that a University faculty member agrees to serve as the Principal Investigator and account sponsor on the project, and to be responsible for the completion of all deliverables, including required project reports. Graduate students, postdoctoral fellows, and residents may submit individual training or fellowship applications with the written support of their mentor.

This is a University of Oklahoma Health Sciences Center policy. The Vice President for Research must approve any exception to this policy in advance of submission of a grant or contract proposal to a funding agency.

### **8.7 UNIVERSITY OF OKLAHOMA HEALTH SCIENCES CENTER POLICY ON LEVEL OF EFFORT COMMITTED ON SPONSORED PROGRAMS**

The University of Oklahoma Health Sciences Center treats all aspects of sponsored programs administration consistently, regardless of funding source. Therefore, pursuant to federal regulations, the OUHSC faculty and staff may not have total effort commitments (sponsored and non-sponsored) in excess of 100 percent (see definition of Commitment overlap below). Faculty or staff who have University responsibilities in addition to those committed on sponsored programs, including but not limited to teaching, administration or clinical activities, must reserve the appropriate amount of effort as agreed upon with the Department Chair and/or Dean for those commitments and, therefore, may not commit 100% paid or unpaid effort to sponsored grants and/or contracts.

Excerpt from NIH Notice: "Commitment overlap occurs when a person's time commitment exceeds 100 percent, whether or not salary support is requested in the application. While information on other support is only requested for key personnel (excluding consultants), no individuals on the project may have commitments in excess of 100 percent."

NIH Reference: <http://grants2.nih.gov/grants/guide/notice-files/NOT-OD-03-029.html>

## **8.8 ALLOWABLE SALARY ON OUHSC GRANTS AND CONTRACTS FOR OUHSC EMPLOYEES WITH VA APPOINTMENTS**

OUHSC “Institutional Base Salary” (IBS) is the salary that is guaranteed annually by the employee’s department, approved by the Board of Regents of the University of Oklahoma, and documented in the OUHSC Annual Budget Book. For the purpose of receiving compensation on grants or contracts, the IBS is derived solely from the OUHSC portion of the employee’s total compensation. Institutional Base Salary does not include Professional Practice Plan compensation or other clinical compensation that is not guaranteed and approved by the University Regents.

University of Oklahoma Health Sciences Center (OUHSC) employees with VA appointments will be compensated for time and effort on OUHSC grants and contracts in accordance with the NIH Grants Policy Statement regarding compensation of Federal employees for all grants and contracts received at OUHSC, regardless of funding source

[https://grants.nih.gov/grants/policy/nihgps/HTML5/section\\_17/17.3\\_va-university\\_affiliations.htm](https://grants.nih.gov/grants/policy/nihgps/HTML5/section_17/17.3_va-university_affiliations.htm)

OUHSC and the Veterans Administration Medical Center (VAMC) are required by federal granting agencies to establish an agreement (Memorandum of Understanding) to determine the total effort and set of responsibilities between the two entities. An OUHSC employee with a paid OUHSC appointment can be paid for their time spent on OUHSC grants and contracts as part of their OUHSC appointment.

Federal salary cannot be included in the OUHSC Institutional Base Salary on grants and contracts. Only the OUHSC portion of salary may be used to determine the amount of allowable compensation on grants and contracts. The allowable salary is based on the percentage of the OUHSC appointment that is applicable to the effort devoted to the project. If the OUHSC employee does not receive salary from OUHSC, then salary cannot be requested or charged to a grant or contract.

An individual with an 8/8<sup>th</sup> appointment at the VA with a paid appointment at OUHSC can be compensated on an OUHSC grant or contract as part of their OUHSC appointment based on their OUHSC Institutional Base Salary alone. The total effort and set of responsibilities between the two entities and the percentage of effort at each institution must meet the test of reasonableness for such individuals.

## **8.9 UNIVERSITY OF OKLAHOMA HEALTH SCIENCES CENTER FACILITIES AND ADMINISTRATIVE COSTS POLICY FOR EXTERNALLY FUNDED PROJECTS**

See the Office of Research Administration web site for current rates and applicable forms

### **1.0 POLICY**

- 1.1 It is the policy of the University of Oklahoma Health Sciences Center to collect the full applicable rate of facilities and administrative costs reimbursement on all externally funded projects, including research, public service, training and instruction grants and contracts.
- 1.2 For all projects funded by federal agencies, or funded with federal dollars (including federal dollars passed through other agencies), the applicable rate is based upon the University’s current federally negotiated facilities and administrative costs rate agreement. The only exception to the negotiated rate is for those federal programs where a lower rate is specified and published in the sponsored program announcement.
- 1.3 For all projects funded by state and local agencies, private industry and foundations, the applicable facilities and administrative costs rate is based upon the type of program (research, training, instruction, public service, fee-for-service) and the current negotiated indirect cost rate for research or the University’s published facilities and administrative costs rate for training, instruction, public service, or fee for service programs.
- 1.4 Any requests for an exception of the applicable indirect cost rate must follow the exception process described in Section 4.0. Exception requests must be submitted to the appropriate Dean’s office for review and the signed Exception Form must then be approved by the Vice President for Research.

## 2.0 BACKGROUND AND DEFINITIONS

- 2.1 This policy provides guidelines for the University of Oklahoma Health Sciences Center regarding the reimbursement of facilities and administrative costs for all externally funded projects.
- 2.2 The total cost of all externally funded projects consists of both direct and indirect expenses. The University must pay for all associated facilities and administrative costs of every program, regardless of whether it is reimbursed by the sponsor or not.
- 2.3 Federal regulations (2 CFR 200 and the Federal Cost Accounting Standards) require that the same type of costs be treated consistently as direct or facilities and administrative costs on sponsored programs. This policy provides guidance to assure compliance with all applicable federal regulations.

### 2.4 Definitions

Direct costs are those that are readily identifiable with a specific project and which can be charged directly to that project. Direct costs include such items as salaries, fringe benefits, equipment, consumable materials and supplies, travel, subject/participant costs, and subcontracts.

Facilities and administrative (F&A) costs, formerly known as indirect costs, are actual costs incurred by the University to support externally funded projects. These costs are to be reimbursed by the sponsor for common University expenses that cannot be directly charged to a single project and include: 1) infrastructure costs (rent, heating, air, janitorial services) and 2) support services (IT, library, purchasing, accounting, research administration, animal resources, and federally mandated assurance boards and offices [Institutional Review Board, Institutional Animal Care and Use Committee, Institutional Biosafety Committee]).

On-campus/off-campus facilities and administrative costs rates - On-campus and off-campus facilities and administrative costs rates for research are determined by the DHHS negotiated cost rate agreement and are to be utilized for all federally funded research. The applicable on- and off-campus indirect cost rate(s) for research, public service, training and instruction are published annually by Administration and Finance and can be found at: [http://www.ouhsc.edu/financialservices/documents/Grants\\_Contracts\\_forms/FA\\_IDC\\_Rates.pdf](http://www.ouhsc.edu/financialservices/documents/Grants_Contracts_forms/FA_IDC_Rates.pdf).

The off-campus rate applies only to activities performed in facilities not owned by the Health Sciences Center and to which rent is charged directly to the project.

## 3.0 APPLICABLE FACILITIES AND ADMINISTRATIVE COSTS RATES BY FUNDING SOURCE AND TYPE OF PROGRAM

- 3.1 **FEDERAL** - The University's current federal negotiated facilities and administrative costs rates apply to all federally funded programs, with the exception of Federal Training Grants. This includes funds received directly from federal agencies and funds received indirectly from federal agencies as "flow-through" or "pass-through" funds from other institutions, i.e. subawards and subcontracts.
- 3.2 **STATE** - The current applicable facilities and administrative costs rate applies to all programs funded by State of Oklahoma agencies (including OSDH, ODHS, OHCA and others). The State agency must also provide written certification to the Office of Research Administration regarding the source of their funding, federal versus non-federal, in order to determine the applicable facilities and administrative costs rate. All research grants or contracts funded by federal flow-through funds are required to include the University's current negotiated facilities and administrative costs rate.
- 3.3 **NON-PROFIT/FOUNDATION** - The applicable facilities and administrative costs rate applies to all programs sponsored by Non-Profit agencies and Foundations.
- 3.4 **INDUSTRY: CLINICAL TRIALS** - The facilities and administrative costs rate for Clinical Trials funded by Industry/Pharmaceutical companies may vary, but must include 20% for core Institutional overhead costs. Departmental or College Administrative cost rates may be included in addition to the Institutional 20%. There will be no exceptions to the core Institutional rate of 20% for Clinical Trials sponsored by Industry/Pharmaceutical companies.

- 3.5 INDUSTRY: BASIC RESEARCH – The University’s current federal negotiated facilities and administrative costs rate applies to all basic research programs sponsored by for-profit Industry/Pharmaceutical companies.
- 3.6 See the Office of Research Administration web site for all applicable facilities and administrative costs rates based upon funding source and type of program.

#### 4.0 REQUESTS FOR EXCEPTIONS

- 4.1 Exceptions to this policy will only be granted in rare circumstances. Facilities and administrative costs must be included using the University’s federally-negotiated rates, with the exception of Federal Training Grants. All other deviations are subject to administrative approval by the Vice President for Research. Sponsor guidelines limiting facilities and administration costs must be provided with each proposal requesting an exception. Projects funded by the for-profit sector must accrue F&A at the appropriate negotiated rate.
- 4.2 All requests for exceptions to the University’s Facilities and Administrative Costs Policy must use the “Indirect Cost Rate Exception Request Form”.
- 4.3 The Exception Form must be submitted to the appropriate Dean’s office for review, which in consultation with the department chair may elect to support or deny the request. If supported by the Dean’s Office, the signed Exception Form must be routed to the Office of Research Administration at least five (5) business days prior to obtaining institutional signature on the proposal, grant application or contract.
- 4.4 The Vice President for Research will make the final decision.
- 4.5 The Senior Vice President and Provost, the Vice President for Administration and Finance, and the Vice President for Research, will monitor the cost to the University of approved facilities and administrative costs exceptions on a continuing basis. Exception approvals will be reviewed with the applicable Dean on a quarterly basis.

(Effective July 1, 2009)

#### 8.10 POLICY REGARDING FACILITIES AND ADMINISTRATIVE COSTS ON CLINICAL TRIALS

In September 1992 and August 1994 the Provost and Vice President for Research, respectively, issued memoranda regarding the University’s policy for recovery of facilities and administrative (F&A) costs (formerly known as indirect costs) on clinical trials involving human subjects. The purpose of this memorandum is to restate the policy to more precisely define the basis for determining which clinical studies are subject to the ten percent (20%) F&A assessment by the Provost’s Office.

Twenty percent (20%) of all revenue received from clinical trial studies is recovered by the Provost’s Office if the clinical study meets all of the following requirements:

- 1) The study is sponsored by an industrial company, i.e. pharmaceutical, device companies, etc.;
- 2) The study is clinical, i.e., involves living human subjects;
- 3) The study involves a drug or device;
- 4) Payment by the sponsor may be based upon number of patients enrolled, delivery of patient case report forms, a fixed fee lump sum, etc.;
- 5) The sponsor imposes no fiscal audit requirements on the University.

Any required college, department or section F&A charges are in addition to the 20% F&A costs recovered by the Provost’s Office. All appropriate F&A costs (the Provost’s 20% plus college, department or section charges) must be negotiated with the company by the investigator and included in the budget either 1) as a separate line item (administrative fees, F&A costs, etc.), or 2) added to the cost of each direct cost line item.

Basic, pre-clinical (nonclinical) research projects and other human studies not involving living human subjects are subject to the University’s current negotiated F&A costs. As with all sponsored studies, investigators and staff are required to allocate and charge their actual percent effort to all clinical study accounts, as well as all other costs directly benefiting the clinical study.

(Restated February 21, 2006)

### 8.11 SERVICE AS PROMOTIONAL SPEAKER FOR PRIVATE INDUSTRY

University employees may serve as educational speakers – speakers who discuss products or services generally – but not as promotional speakers – speakers who promote a particular product or service.

University Regents' policy prohibits the use of University resources, including employee time, and the University name for the promotion of goods or services. In addition, any use of the University's name or symbols in advertising or promotional materials may be made only with special permission of the Vice President for Public Affairs. Employees who agree to or do promote goods or services in their professional capacity are in violation of University policy.

In addition, University employees are state employees and, as such, are governed by the State's conflict of interest rules. Those rules do not permit the use of state funds to promote private industry, nor do they allow state employees to use their positions for private gain. Violations of state conflicts of interest rules can result in fines, payable by the individual, and/or jail time.

Given the University's status as a public institution and the importance of presenting an image that is unbiased, professional, and respectful of its role as a steward of the resources entrusted to it, it is important that University employees not agree to provide any professional services that compromise, appear to compromise, or have the potential to compromise or appear to compromise their professional judgment, research results, or the like. Any action otherwise is a violation of University policy and state conflicts of interest rules.

Employees serving in educational speaking roles provide an important service to the community and their professions, and we encourage them to continue this service. University policy requires that contracts for employees to serve as educational speakers be routed through ORA for negotiation and authorized signature. Please contact ORA if you have questions regarding that process.

(Effective November 11, 2004)

#### Additional Research Related Policies:

- |   |                |
|---|----------------|
| ▪ ACADEMIC MISCONDUCT POLICY                | (Appendix C)   |
| ▪ CONFLICTS OF INTEREST POLICY              | (Appendix E)   |
| ▪ INSTITUTIONAL CONFLICT OF INTEREST POLICY | (Appendix E)   |
| ▪ ETHICS IN RESEARCH POLICY                 | (Section 3.25) |
| ▪ INTELLECTUAL PROPERTY POLICY              | (Appendix D)   |
| ▪ OPEN RECORDS POLICY                       | (Appendix K)   |



## 9. COMPLIANCE

### 9.1 OFFICE OF COMPLIANCE

The mission of the Office of Compliance is to enhance through a Compliance program a compliance consciousness for OU's workforce by promoting the highest standards of ethics and integrity through awareness, training, education, monitoring, oversight, review, and appropriate responses to confirmed violations. Through this enhanced consciousness, compliance with all applicable laws, regulations, and University policies is promoted. Additionally, the Compliance Office establishes OU's Standard of Conduct ("Standards"), which is a non-exclusive compilation of guidelines and responsibilities regarding ethical and legal standards that all University employees are expected to follow when performing services for or on behalf of OU. Both the complete Compliance Program and the Standards of Conduct are located on the Office of Compliance website, <http://compliance.ouhsc.edu>.

The Office of Compliance also effectively and efficiently operates and/or provides direction, guidance and/or oversight for the following compliance-focused departments and programs:

- Healthcare Billing Compliance
- Compliance Outreach
- Radiation Safety
- Human Research Protection Program / Institutional Review Board
- Environmental Health and Safety
- Institutional Biosafety
- Institutional Animal Care and Use Committee ("IACUC")
- Disability Resource Center
- HIPAA Compliance Program

#### 9.1.1 Healthcare Billing Compliance

The mission of the Healthcare Billing Compliance Office is to maintain high ethical standards and regulatory compliance in all activities of documentation and coding for billing professional services.

The Healthcare Billing Compliance Office is a central resource in promoting education and monitoring regulatory compliance for medical and dental documentation, coding, and billing. The Office assists in identifying and eliminating potential risks by conducting activities such as providing education and training on regulations from federal, state and regulatory agencies affecting professional billing; conducting compliance validation reviews; recommending any needed changes or additions to billing policies and procedures; researching inquiries concerning proper billing practices; reviewing, investigating and responding to reports of potential non-compliance; and recommending remedial actions for non-compliance.

The Healthcare Billing Compliance office maintains a web page that includes federal and state regulations affecting professional billing, along with forms and other helpful information relating to professional billing activities: <http://compliance.ouhsc.edu/hcbo/Home.aspx>.

#### 9.1.2 Compliance Outreach

The mission of Compliance Outreach are 1) to communicate the goals and purpose of the University of Oklahoma's Office of Compliance to the University community and 2) to facilitate the exchange of essential information between that community and the Office of Compliance.

Compliance Outreach develops and maintains Office of Compliance departmental websites that support and inform the University Community about ongoing compliance activities. Additionally, Compliance Outreach coordinates, develops, and monitors essential Compliance Program training initiatives designed to provide information regarding compliance activities to the University community.

#### 9.1.3 Environmental Health and Safety Office (EHSO)

The mission of the Environmental Health and Safety Office (EHSO) is to "develop and coordinate appropriate policies and programs to promote occupational health: reduce accidents and injuries, protect our the University environment;

and provide technical assistance to administration, faculty, staff, and students of OU regarding environmental and occupational health and safety regulatory compliance".

The EHSO provides health, safety, and environmental services for the University including off-campus facilities, to facilitate compliance with all environmental and occupational health and safety regulations. These regulations include, but are not limited to, those promulgated by OSHA, EPA, the Oklahoma Department of Environmental Quality, the Oklahoma Department of Labor, and the Department of Transportation.

All University employees must perform their jobs in compliance with all applicable University policies and state and federal laws and regulations relating to the protection of workers' safety. Employees must become familiar with and complete required training on the worker safety laws, regulations, and University policies and programs that apply to their jobs. It is the responsibility of all University faculty, staff, and students to follow safe working practices, obey health and safety rules and regulations and work in a way that protects their health and that of others, and does no harm to the environment.

All University employees must manage and dispose of hazardous chemical, biological and other wastes in a manner that maximizes protection of human health and the environment and is in accordance with all applicable local, state and federal laws and regulations. Additional information about the Environmental Health and Safety Office is available at <http://compliance.ouhsc.edu/ehso/Home.aspx>.

#### **9.1.4 Human Research Participant Protection (HRPP)**

The mission of the Office of Human Research Participant Protection (HRPP) is to protect the rights, privacy, and welfare of all human participants in research projects conducted by OU faculty, staff, and students, as well as that conducted under its oversight.

The HRPP is accredited by the Association for the Accreditation of Human Research Protection Programs (AAHRPP) and has an approved Assurance on file with the Office of Human Research Protection.

The HRPP is established to support the University's commitment to the protection of human participants in research. The goals of the HRPP are to provide safety for human participants in research, to educate the University's researchers on applicable regulations governing human subject research and to provide continuous quality improvement of the University's research activities.

The University has established an HRPP on each of the Norman and Oklahoma City campuses. The Institutional Review Boards (IRBs) of each HRPP function autonomously in the application of federal regulations and ethical principles to OU research involving humans, regardless of sponsorship or performance site location.

The IRBs are University Committees. As such, the IRBs serve OU as a whole, rather than a particular college or department, and any institution for which the University of Oklahoma is designated as the IRB of record in the Assurance filed with OHRP.

All research activities involving human participants must be reviewed and approved by the appropriate IRB. All investigators conducting research involving human participants at OU are required to complete the designated training related to the ethical conduct of research. Intervention or interaction with human participants in research, including recruitment, may begin only after the IRB has reviewed and approved the research project.

Additional information about the Human Research Protection Program is available at:  
<http://compliance.ouhsc.edu/hrpp/Home.aspx>.

#### **9.1.5 Institutional Animal Care and Use Committee (IACUC)**

The mission of the Institutional Animal Care and Use Program (IACUC) is to provide for safe and humane animal research through the review applications for the use of animals in research, testing, or educational/training activities submitted by Health Sciences Center faculty; to inspect on a semi-annual basis all facilities where animals are housed; to inspect on a semi-annual basis all laboratories that use animals and to ensure that all individuals involved with the use of animals in research are properly trained for these activities.

The Institutional Animal Care and Use Program is accredited by the Association for Assessment and Accreditation of Laboratory Animal Care International (AAALAC), and has an approved Assurance on file with the National Institutes of Health Office of Laboratory Animal Welfare as a facility that uses animals in research, testing, and training programs.

The responsibilities of the IACUC are carried out by a Program Director and a committee composed of Health Sciences Center faculty and graduate students with expertise in the areas of research or training under consideration. The IACUC is ultimately responsible for reviewing, requiring modification(s) if necessary, and approving all research protocols that involve the use of animals. IACUC approval is required before any research studies or educational programs can be initiated. Additional information about the Institutional Animal Care and Use Program is available at <http://compliance.ouhsc.edu/iacuc/Home.aspx>.

#### **9.1.6 Radiation Safety Office (RSO)**

The mission of the Radiation Safety Office (RSO) is to facilitate the safe use of radioactive materials and radiation producing equipment in education, research, and medical care; to keep personnel and public exposure As Low As Reasonably Achievable (ALARA); and to ensure that radioactive materials/devices are used in accordance with the standards of regulatory compliance.

In the State of Oklahoma, the use of radioactive materials, radiation therapy devices, and analytical x-ray devices is regulated by the Oklahoma Department of Environmental Quality (DEQ). The Norman and HSC campuses hold DEQ licenses that permit the use of radioactive materials. The use of diagnostic x-ray devices is regulated by the Oklahoma State Department of Health. University radiation producing devices are permitted and registered by the applicable agency.

Radiation Safety Committees oversee the use of radiation and radioactive materials on their respective campuses/facilities. The use of all radioactive materials and ionizing radiation for patient care, teaching, and research purposes must be reviewed and approved by the appropriate Radiation Safety Committee. The Radiation Safety Officer for each Committee is responsible for implementing the policies and procedures for the safe use of radioactive materials, ensuring regulatory compliance of such policies, and providing radiation safety training and consulting to the staff and management of that campus.

The responsibility for radiation safety is on the individual authorized to use radiation or radioactive materials. Therefore, all authorized users of radioactive materials and users of radiation producing devices must be familiar with the Radiation Safety Manual and ensure that those working under their supervision are properly trained. The University's licenses and the pertinent regulations are available for review in the respective Radiation Safety Offices. Additional information about the Radiation Safety Office is available at <http://compliance.ouhsc.edu/rso/Home.aspx>.

#### **9.1.7 Institutional Biological Safety Committee (IBC)**

The OUHSC Institutional Biosafety Committee (IBC) is charged with reviewing and approving the biological safety of all OUHSC and OU-Tulsa basic and clinical research activities involving recombinant DNA and gene transfer including transfer to humans, microorganisms, viruses, and biological toxins.

All basic and clinical research activities involving recombinant DNA or gene transfer including transfer to humans, microorganisms, viruses, and biologic toxins, must be performed in compliance with federal, state, and local regulations governing such research. For any research project involving the use of these potentially biohazardous materials, the Principal Investigator and any Co-Investigator must: 1) review the applicable requirements and determine the biological safety issues related to the project; 2) develop appropriate standard operating procedures that are consistent with all applicable requirements and are designed to control potential biohazards associated with the project; 3) receive approval from the responsible IBC at the respective OU campus; 4) train all employees on the appropriate biological safety procedures applicable to the research; and 5) notify the responsible IBC at the respective OU campus of any changes in protocol, procedures, biosafety level, or research site during the implementation of the research.

The IBC will perform periodic site visits to laboratories to verify that laboratory facilities and work practices are consistent with the biological risk and associated biosafety requirements. Additional information about the Institutional Biosafety Committee is available at <http://compliance.ouhsc.edu/ibc/Home.aspx>.

### 9.1.8 Disability Resource Center (DRC)

The University of Oklahoma is committed to providing equal employment and educational opportunities for qualified individuals with disabilities in all programs, services, and activities. The Disability Resource Center (DRC), unless otherwise provided, is the central point-of-contact for all requests for reasonable accommodation. The DRC will make accommodation determinations in accordance with Section 504 of the Rehabilitation Act of 1973, as amended, and the Americans with Disabilities Act (ADA) of 1990, as amended. Accommodations on the basis of disability are available by contacting the Disability Resource (405) 325-3852 Voice or at (405) 325-4173/TDD or by emailing [drc@ou.edu](mailto:drc@ou.edu). Information regarding accommodations is also available at [www.ou.edu/drc](http://www.ou.edu/drc).

Please refer to **Section 5.3** of the Faculty Handbook for the University's Reasonable Accommodation Policy and to **Section 4** for Student Policies and Services.

Individuals who have complaints alleging discrimination based upon a disability may file them with the University Equal Opportunity Office in accordance with prevailing University discrimination grievance procedures.

### 9.1.9 HIPAA Compliance Program

The University of Oklahoma is committed to protecting and safeguarding the Protected Health Information (PHI) created, acquired, and maintained by its Health Care Components and Health Plans in accordance with the Privacy and Security Regulations of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), and as amended, and with applicable state and federal laws. The HIPAA Compliance Program includes Privacy, Security, and Audit divisions.

The University Privacy Official is responsible for the HIPAA Compliance Program, including the development and implementation of the University's HIPAA policies, and for receiving, coordinating, and managing the investigation of HIPAA complaints and violations. The HIPAA Security Officer is responsible for activities related to the development, implementation, maintenance, and adherence to the University's HIPAA Security policies and procedures. The HIPAA Compliance Auditor is responsible for ensuring that the Health Care Components of the University are in compliance with certain aspects of the HIPAA Compliance Program.

The University requires all workforce members (employees, students, and volunteers) in its designated Health Care Components to take HIPAA Privacy and Security training upon hire/enrollment/appointment and at least annually.

For a list of designated Health Care Components, see the HIPAA Privacy Definitions policy, "Health Care Components"; for more information regarding HIPAA Privacy and Security, please visit the HIPAA website at: <http://compliance.ouhsc.edu/Home/HIPAA.aspx> or <https://apps.ouhsc.edu/hipaa/>.

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## 10. APPENDIX A

### CHARTER OF THE GENERAL FACULTY AND THE FACULTY SENATE – HEALTH SCIENCES CENTER

#### PREAMBLE

The Regular Faculty of the University of Oklahoma Health Sciences Center has adopted the following Charter, within the structure of the University, to assist with the orderly conduct and governance of its affairs, protecting however the rights and jurisdictions of individual colleges and their respective faculties; to ensure due process; and to facilitate faculty-administration division of labor and reciprocally supportive collaboration in achieving the goals and purposes of the Health Sciences Center.

This Charter is not intended to abridge the rights and privileges of any member or sub-group of the Regular Faculty (i.e. department or college faculty group) to determine matters of their rightful jurisdiction, academic freedom, and responsibility.

#### ARTICLE I

##### 10.1 NAME

The name of this organization shall be: "The Regular Faculty of the University of Oklahoma Health Sciences Center."

#### ARTICLE II

##### 10.2 PURPOSE

The purpose of this organization shall be:

- A. To help define and protect the rights of faculty members;
- B. To support the faculty in implementing the University functions of teaching, research and scholarly activity, and service; and
- C. To develop, recommend, and implement policies for the Health Sciences Center and the University in matters relating to the instruction of students, and the conduct of research and scholarly activity, and the provision of services in any matters affecting the welfare of the Health Sciences Center;
- D. To promote collaborative effort within and among faculty, professions, and colleges; and
- E. To respect the rights and jurisdictions of the individual Colleges in the Health Sciences Center.

#### ARTICLE III

##### 10.3 MEMBERS

###### 10.3.1 Section I. Members

The membership of the Regular Faculty of the Health Sciences Center shall be composed of all full-time faculty members with the unmodified rank of assistant professor or above who hold tenure track, tenured, or consecutive term appointments. The Regular Faculty does not include individuals holding temporary appointments such as instructor, lecturer or associate; or with modified ranks such as "visiting, adjunct, special, acting, and/or clinical," or holding temporary research appointments such as assistant professor of research or higher.

###### 10.3.2 Section 2. Voting Rights

All members with the unmodified rank of assistant professor or above and who hold tenure track, tenured, or consecutive term appointments, shall have full voting rights.

**10.3.3 Section 3. Proxy**

No votes shall be cast by proxy.

**ARTICLE IV**

**10.4 POWERS**

**10.4.1 Section 1. Governance Powers**

The governance of the Faculty of the Health Sciences Center is vested in the Regular Faculty of the Health Sciences Center, subject to the provisions of Article III, Section 1 above.

**10.4.2 Section 2. Exercise of Powers**

These governance powers shall be exercised either by the Regular Faculty or by the Faculty Senate (see Article VII, Section 5).

**10.4.3 Section 3. Accountability of Senate**

The Faculty Senate shall be subject to the orders of the Regular Faculty and none of the Senate's acts shall conflict with actions taken by the Regular Faculty.

**ARTICLE V**

**10.5 OFFICERS**

**10.5.1 Section 1. Officers**

The Officers of the Regular Faculty shall be the Officers of the Faculty Senate: Chair, Chair-Elect, Secretary, and Secretary-Elect.

These officers shall perform the duties prescribed by this Charter, by the parliamentary authority adopted by the Regular Faculty, and any other activities necessary to achieve the purposes of the Regular Faculty of the Health Sciences Center.

**10.5.2 Section 2. Election of Officers**

The officers shall be elected yearly by and from among the representatives who compose the Faculty Senate.

**10.5.3 Section 3. Eligibility**

No member shall hold more than one office at a time. No member shall serve more than two consecutive terms in the same office.

**ARTICLE VI**

**10.6 MEETINGS**

**10.6.1 Section 1. Meetings**

The Regular Faculty shall meet at least twice yearly, usually in October and April.

**10.6.2 Section 2. Annual Meeting**

The meeting in April shall be known as the Annual Meeting and shall be for the purpose of receiving reports of Officers and Committees, for communicating a report of significant yearly Senate activities, and for any other business that may arise.

**10.6.3 Section 3. Special Meetings**

- (a) Special meetings of the Regular Faculty may be called by the Chair of the Senate, by the Senior Vice President and Provost of the Health Sciences Center, or by written petition of a total of thirty (30) Regular Faculty of whom no more than fifteen (15) belong to any one college.
- (b) The purpose of the meeting shall be stated in the call.
- (c) Every Regular Faculty member shall be notified.
- (d) Except in cases of emergency, at least seven (7) days notice shall be given, and the meeting shall be called within thirty (30) days of the presentation of a petition.

**10.6.4 Section 4. Quorum**

Sixty (60) members of the Regular Faculty of the Health Sciences Center, representing three or more Colleges, provided no more than thirty (30) of the quorum number are from any one college, constitute a quorum.

**ARTICLE VII****10.7 THE FACULTY SENATE****10.7.1 Section 1. Members**

- (a) The Faculty Senate shall be composed of at least three (3) members of the Regular Faculty from each OUHSC College except the Graduate College, which shall have one representative. Each college with program(s) in Tulsa will be responsible for formulating the distribution of representation between Oklahoma City and Tulsa campus. One additional representative shall be elected by each College for each additional one hundred (100) Regular Faculty over the first 100 whose primary appointment is in that College. No College, however, shall have more than forty (40) percent of the total number of Senate representatives. The Senior Vice President and Provost of the Health Sciences Center or his designate shall be an *ex-officio* member of the Senate and shall serve without vote.
- (b) Terms of office of members of the Faculty Senate shall be staggered. Specific methods of accomplishing this shall be determined by each College. No member shall serve more than two consecutive elected terms as a member of the Faculty Senate.

**10.7.2 Section 2. Election**

- (a) Representatives of the Faculty Senate shall be elected by and from each College of the Health Sciences Center. They shall be elected by written ballot for a three (3) year term.
- (b) Prior to April 1, each College shall elect its new representatives to fill out-going Senate positions and inform the Chair of the Faculty Senate.
- (c) Except for the Graduate College, Senators shall represent that College in which they hold their primary appointment. Members with joint or multiple appointments shall declare, at the beginning of each academic year, the College in which they will vote during that year.
- (d) The Senate representatives shall assume their office on July 1.
- (e) Each College shall elect one or more alternates to serve in case of the absence or disability of a Senator. The number of alternates elected from each college shall be one-half of the number of Senators to which that College is entitled rounded to the next highest whole number. They shall be elected by written ballot for a one-year term. If more than one alternate is elected, the alternates shall be numerically listed according to votes. The alternate for the Graduate College shall be



elected to a one-year term from the membership of the Graduate Council.

#### **10.7.3 Section 3. Replacement of Senate Members**

- (a) The Faculty of each College may establish procedures for the recall of any Senator of that College. However, in no case can a Senator be recalled without a majority vote of the Regular Faculty members of that College.
- (b) Should a Senator be unable to fulfill the duties of that office for any reason, that name may be removed from the rolls upon written request to the Senate Secretary from that Senator or from the Faculty of the represented College.
- (c) In the event of the removal of a Senator from the rolls for any reason, the First Alternate will fill that position for the remainder of the academic year. At the next annual College election, a Senator will be elected to fill the unexpired term.
- (d) In the event there is no alternate to complete the unexpired term, the Faculty of the College will be asked to fill the vacancy. The procedure by which the vacancy is filled is determined by each College.

#### **10.7.4 Section 4. Officers**

The Officers shall be: Chair, Chair-Elect, Secretary, and Secretary-Elect, and such other officers as are provided for in the Charter.

#### **10.7.5 Section 5. Powers**

- (a) The Faculty Senate shall exercise the governance of powers of the Regular Faculty of the Health Sciences Center as delegated by the Regular Faculty.
- (b) The Faculty Senate shall conduct the affairs of the Regular Faculty between the latter's meetings, make recommendations to the Regular Faculty, and perform such other duties as are specified in the Charter and Operating Procedures or Bylaws, and/or are necessary to achieve the objectives of the Regular Faculty.
- (c) Any member of the Regular Faculty may bring matters relating to the governance before the Regular Faculty or the Faculty Senate by written request.
- (d) The Faculty Senate shall determine its own rules, procedures, times and place of meetings, and regulations governing its internal affairs.
- (e) The Faculty Senate shall publish a Charter as well as Operating Procedures.

#### **10.7.6 Section 6. Meetings**

- (a) The Faculty Senate shall meet at least nine (9) times a year and at other times as necessary.
- (b) The Faculty Senate shall report significant Senate activities to the Regular Faculty in the spring Annual Meeting of the Regular Faculty.

### **ARTICLE VIII**

#### **10.8 COMMITTEES**

##### **10.8.1 Section 1. Standing and Special Committees**

Standing or special committees of the Regular Faculty and/or Faculty Senate shall be established as deemed necessary to facilitate faculty governance.

**10.8.2 Section 2. Committee Membership**

- (a) The Chair of the Regular Faculty shall be an *ex-officio* member of any and all standing and special committees without voting privileges.
- (b) All members of the Regular Faculty are eligible to serve on special or standing committees, provided that the membership is proportional among the colleges in roughly the same ratio as are seats in the Senate.
- (c) The Health Sciences Center Student Association may be invited to nominate a student to serve on selected Senate Committees.

**ARTICLE IX****10.9 LIAISON WITH THE HEALTH SCIENCES CENTER SENIOR VICE PRESIDENT AND PROVOST****10.9.1 Section 1. Function**

The Faculty Senate shall serve as an advisory body to the Senior Vice President and Provost of the Health Sciences Center and other administrative officers of the University in relation to matters of interest and importance to the Faculty.

**10.9.2 Section 2. Faculty Assistance to Administration**

At the beginning of each academic year, the Faculty Senate shall provide to the Senior Vice President and Provost of the Health Sciences Center a list of nominees who are willing and able to serve during the ensuing year on the Health Sciences Center committees or councils. The Senior Vice President and Provost shall recommend the nominations to the President of the University who shall make the appointments.

**10.9.3 Section 3. State of the Health Sciences Center Message**

At the first meeting of the Regular Faculty each academic year, the President of the University and the Senior Vice President and Provost of the Health Sciences Center, shall be invited to orally present to the Regular Faculty of the Health Sciences Center a statement on the State of the Health Sciences Center and his (their) recommendations for furthering the progress of the Center.

**10.9.4 Section 4. Disposition of Requests for Action**

Requests from the Faculty Senate for action by the Administration or by the University Regents shall be directed to the Senior Vice President and Provost of the Health Sciences Center who will then forward these requests to the President of the University. The Senior Vice President and Provost of the Health Sciences Center shall, within thirty (30) calendar days, report in writing to the Faculty Senate the disposition of any request for action or information received. The reports shall include the rationale for actions taken or not taken.

**ARTICLE X****10.10 INTER-SENATE LIAISON COMMITTEE****10.10.1 Section 1. Purpose**

The purpose of the Senate Liaison Committee shall be to routinely facilitate the exchange of information between the OUHSC Senate, the University President, and the Norman Campus Senate.

**10.10.2 Section 2. Composition**

The Senate Liaison Committee shall be composed of the Chair, Chair-Elect, and the Secretary of the Senate.

**10.10.3 Section 3. Meetings**

- (a) The Committee will meet as often as necessary with the University President and representatives of the Norman Campus Senate to achieve the Committee purpose as set out in Article X, Section 1 above.
- (b) The Committee will report activities and progress routinely to the Senate.

**ARTICLE XI**

**10.11 PARLIAMENTARY AUTHORITY**

The rules contained in the current edition of Robert's Rules of Order Newly Revised, shall govern the Regular Faculty and the Faculty Senate in all cases to which they are applicable and in which they are not inconsistent with this Charter and any special rules of order which the General Faculty may adopt.

**ARTICLE XII**

**10.12 AMENDMENT OF THE CHARTER**

**10.12.1 Section 1. Amending**

The Charter may be amended from time to time in any particular as follows:

- (a) Amendments of this Charter and ensuing Rules and Operating Procedures may be proposed at any regular or special meeting of the Faculty Senate.
- (b) Amendments must be approved by a two-thirds (2/3) vote of the Faculty Senate voting by mail ballot.
- (c) Amendments shall be submitted to each Faculty Senate member for vote at least fifteen (15) days prior to tabulation of ballots.

**10.12.2 Section 2. Effective Date**

Amendments shall be effective immediately upon approval by the University of Oklahoma Board of Regents.

**ARTICLE XIII**

**10.13 ADOPTION**

This Charter shall be effective once approved by a majority of the Regular Faculty in each of the Colleges of the Health Sciences Center and approved by the Board of Regents, signed by the President of the Board and sealed by the Executive Secretary of the Board of Regents.

(This Charter was approved by the Faculty Senate 7/12/74, the General Faculty 7/25/74, and the University Regents 7/26/74. Updated 6/25/84. Approved by the Faculty Senate 9/5/02 and the University Regents 12/3/02. Revised 11/30/05.

**11. APPENDIX B****CHARTER OF THE GRADUATE FACULTY AND THE GRADUATE COUNCIL**

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**ARTICLE I****11.1 NAME**

The name of this organization shall be: "The Graduate Faculty of the University of Oklahoma Health Sciences Center."

**ARTICLE II****11.2 PURPOSE**

The purpose of this organization shall be:

- A. To develop, recommend, and implement policies relating to graduate education on the Health Sciences Center campus;
- B. To assist the graduate faculty in its functions of teaching, research, and public service;
- C. To promote excellence in graduate teaching and research; and
- D. To promote collaborative effort, exchange of information, and mutual understanding among graduate faculty.

**ARTICLE III****11.3 MEMBERS****11.3.1 Section 1: Membership****(a) Members**

The Members of the Graduate Faculty of the Health Sciences Center are the faculty members of the rank of instructor or above who 1) have been appointed to the Graduate College by action of their respective departments and with the approval of the Graduate Dean, and 2) hold a non-temporary appointment in the Graduate College. The appointment of Members shall be reviewed at intervals of five years.

**(b) Associate Members**

The Associate Members of the Graduate Faculty of the University of Oklahoma Health Sciences Center are all other faculty who hold appointments in the Graduate College. The appointment of Associate Members shall be reviewed every three years.

**11.3.2 Section 2: Voting Rights**

Members of the Graduate Faculty shall have full voting rights. Each Member must declare the college in which his or her vote may be cast, usually the college of his or her major appointment. Associate Members shall not vote.

**11.3.3 Section 3: Proxy**

No votes shall be cast by proxy.

#### **ARTICLE IV**

##### **11.4 POWERS**

###### **11.4.1 Section 1: Governance Powers**

The governance of graduate affairs on the Health Sciences Center campus is vested in the Graduate Faculty of the Health Sciences Center.

###### **11.4.2 Section 2: Limits of Powers**

The governance powers of the Graduate Faculty shall not abridge those of the University Administration, of the General Faculty of the Health Sciences Center, nor of the individual colleges on the Health Sciences Center campus.

###### **11.4.3 Section 3: Exercise of Powers**

The governance powers of the Graduate Faculty shall be exercised either by the Graduate Faculty or by the Graduate Council (see Article VII) acting on behalf of the Graduate Faculty.

###### **11.4.4 Section 4: Accountability of the Council**

The Graduate Council shall be subject to the orders of the Graduate Faculty. None of the Council's acts shall conflict with actions taken by the Graduate Faculty.

###### **11.4.5 Section 5: Review of Dean's Performance**

The Graduate Council shall review regularly, at intervals not exceeding five years, the performance of the Dean of the Health Sciences Center Graduate College and shall report the findings to the Senior Vice President and Provost of the Health Sciences Center.

#### **ARTICLE V**

##### **11.5 OFFICERS**

###### **11.5.1 Section 1: Officers**

The Officers of the Graduate Council shall be the Officers of the Graduate Faculty: President, Vice President, and Secretary. These officers shall perform the duties prescribed by this charter, by the parliamentary authority adopted, and by the Graduate Faculty.

###### **11.5.2 Section 2: Selection of Officers**

The Dean of the Health Sciences Center Graduate College shall serve as President of the Graduate Council. The Vice President and the Secretary shall be elected yearly by and from the representatives who compose the Graduate Council.

###### **11.5.3 Section 3: Eligibility**

No member shall hold more than one office at a time. No member, except the Secretary, shall serve more than two consecutive terms in the same office.

**ARTICLE VI****11.6 MEETINGS****11.6.1 Section 1: Meetings**

- (a) Meetings may be called by the Graduate Council, Health Sciences Center, by the Dean of the Graduate College, or upon written petition of a total of fifteen (15) Members of the Graduate Faculty.
- (b) The purpose of the meeting shall be stated in the call.
- (c) All Graduate Faculty shall be notified.
- (d) Except in cases of emergency, at least seven (7) days notice shall be given and the meeting shall be called within thirty (30) days of presentation of a petition.

**11.6.2 Section 2: Quorum**

Twenty (20) Members of the Graduate Faculty of the Health Sciences Center, representing two or more Colleges, constitute a quorum, provided that no more than ten of the quorum number are from any one college.

**ARTICLE VII****11.7 THE GRADUATE COUNCIL****11.7.1 Section 1: Members**

- (a) The Dean of the Health Sciences Center Graduate College, who shall serve as President, with vote except in matters related to his or her review as stated in Article IV, Section 5.
- (b) One student representative, elected by the Graduate Student Association.
- (c) Graduate Faculty Members:
  - (1) Representatives from each college depending on the number of Members of the Graduate Faculty in each college:

<b>Graduate Faculty Members</b>	<b>Number of Representatives</b>
1-30	1
31-90	2
91-150	3
151-210	4

- (2) Additional representatives from colleges depending on the number of graduate students enrolled in graduate programs of departments of such college:

<b>Students</b>	<b>Additional Representatives</b>
0- 74	0
75-149	1
150-224	2
225-299	3
300-374	4

**11.7.2 Section 2: Terms**

- (a) Faculty representatives from a college shall be elected by Members of the Graduate Faculty of that college, for terms of three years.

- (b) Terms of office of members of the Graduate Council shall be staggered. Specific methods of accomplishing this shall be determined by each college.
- (c) No Member of the Graduate Faculty shall serve more than two consecutive terms as a member of the Graduate Council.
- (d) Elections shall be held annually in April. Terms shall start on July 1.
- (e) Faculty vacancies shall be filled by appointment by the Graduate Council upon recommendation from the college being represented. Student vacancies shall be filled by action of the Graduate Student Association.

**11.7.3 Section 3: Eligibility**

All Members of the Graduate Faculty as defined in Article III, Section 1, are eligible to serve as Members of the Graduate Council.

**11.7.4 Section 4: Meetings**

- (a) The Graduate Council shall meet at least six times each year and at other such times as necessary.
- (b) A quorum for meetings of the Graduate Council will be a majority of the Members defined in Section 1 of this Article.

**11.7.5 Section 5: Disposition of Requests for Action**

Requests from the Graduate Council for action shall be directed to the Dean of the Health Sciences Center Graduate College. The Dean as well as the Graduate Council shall within thirty (30) calendar days report in writing their disposition of any request for action or information received from the other party(ies). The reports will include rationale for actions taken or not taken.

**ARTICLE VIII**

**11.8 COMMITTEES**

**11.8.1 Section 1: Standing Committees**

There shall be the following standing committees of the Graduate Council: a) Curriculum Review, b) Graduate Student Appeals, c) Graduate Faculty Appointments, d) Research, and e) Program Evaluation.

**11.8.2 Section 2: Other Committees**

There shall be other standing or special committees as the Graduate Faculty and/or the Graduate Council shall, from time to time, deem necessary to carry on the work of the Graduate Faculty.

**11.8.3 Section 3: Committee Membership**

- (a) Each committee shall have a Councilor as a member, with vote.
- (b) Each committee shall have a graduate student as a member, with vote. Such student shall be selected by the Graduate Student Association.
- (c) All Members of the Graduate Faculty are eligible to serve on special or standing committees.

**11.8.4 Section 4: Appointment of Committees**

At the beginning of the academic year, the Graduate Council, with the advice of the Dean of the Health Sciences Center Graduate College and of the Senior Vice President and Provost of the Health Sciences Center, shall appoint

the committees of the Graduate Council. The Dean shall not participate in the appointment of his or her own review committee.

#### **ARTICLE IX**

##### **11.9 INTER-COUNCIL LIAISON COMMITTEE**

###### **11.9.1 Section 1: Purpose**

The purpose of the Inter-Council Liaison Committee shall be to exchange information between the Graduate Councils on the Health Sciences Center and Norman campuses.

###### **11.9.2 Section 2: Composition**

The representatives from the Health Sciences Center shall be the Health Sciences Center Graduate Dean and two members of the Graduate Council of the Health Sciences Center, who are selected by that Council.

###### **11.9.3 Section 3: Meetings**

The Deans of the two Graduate Colleges shall arrange for meetings of the Inter-Council Liaison Committee.

#### **ARTICLE X**

##### **11.10 PARLIAMENTARY AUTHORITY**

The rules contained in the current edition of Robert's Rules of Order, Newly Revised, shall govern the Graduate Faculty and the Graduate Council in all cases to which they are applicable and in which they are not inconsistent with this Charter nor any special rules of order which the Graduate Faculty may adopt.

#### **ARTICLE XI**

##### **11.11 AMENDMENT OF THE CHARTER**

###### **11.11.1 Section 1: Amending**

- (a) Amendments to this Charter and ensuing by-laws may be proposed for debate at any regular or special meeting of the Graduate Faculty; at any meeting of the membership by majority vote of the members present and voting; at any meeting of the Graduate Council by majority vote of the Council members present; or by petition bearing the signature of at least fifteen (15) Members of the Graduate Faculty.

A meeting of the Graduate Faculty to discuss the proposed amendment(s) will be called by the Graduate Dean in accordance with Article VI, Section 1b, 1c, and 1d prior to any vote.

- (b) Voting on proposed amendments shall be by mail ballot. To be approved, a proposed amendment requires affirmation both by two-thirds (2/3) of the Graduate Faculty voting, and, in each college, by a majority of the Graduate Faculty there voting.
- (c) Amendments shall be submitted to each Graduate Faculty member for vote at least fifteen (15) days prior to tabulation of ballots.
- (d) All amendments shall be forwarded through the Senior Vice President and Provost, for consideration by the President.

###### **11.11.2 Section 2: Effective Date**

Amendments shall be effective after approval by the President of the University of Oklahoma.



**ARTICLE XII**

**11.12 ADOPTION**

This Charter shall become effective when it has been approved by a majority of the Graduate Faculty voting in each of the Colleges of the Health Sciences Center and by the President of the University of Oklahoma.

(3-2017)

## **12. APPENDIX C**

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### **STUDENT ACADEMIC POLICIES**

- C.1 - Academic Appeals Policy and Procedures 3-10**
- C.2 - Academic Misconduct Code 11-18**
- C.3 - Student Professional Behavior in an Academic Program Policy 19-23  
Health Sciences Center**
- C.4 - Criminal Background Checks Policy for Current Students and Conditionally  
Accepted Students Health Sciences Center 25-29**
- C.5 - Student Rights and Responsibilities Code 31-35**
- C.6 - Student Rights and Responsibilities Procedures 37-43**

## C.1 ACADEMIC APPEALS POLICY AND PROCEDURES

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The Academic Appeals policy is established to provide students with an appeal mechanism by which they can request a hearing before an Academic Appeals Board. An Academic Appeals Board shall be established in each college of the University consisting of an equal number of students and faculty. Faculty members of the Board will be chosen by the faculty of the college for a three-year term. Student members of the Board will be appointed for a term of one year by the dean of the college, upon recommendations from the college student association president.

It shall be the primary function of a Board, through an appointed Hearing Panel, to adjudicate appeals described below:

- 1) Appeals of an academic evaluation in a course or course component, appeals related to a thesis or dissertation defense, or appeals related to a general or comprehensive exam\* in which the student alleges there was a prejudiced or capricious evaluation by the instructor(s) or evaluator(s). For purposes of this policy, prejudice is defined as resulting from or having a bias against. Capricious is defined as not logical or reasonable, impulsive or unpredictable.

\* Any thesis, dissertation, or general or comprehensive exam appeals by a Graduate College student must be submitted to the Graduate College Dean and shall be heard by the Graduate College Appeals Board. [\[See 4.16.2 1\)\(d\)\]](#)

- 2) Appeals of suspension or dismissal under the Student Professional Behavior in an Academic Program Policy, the basis of which the student alleges is prejudiced or capricious.
- 3) Appeals of academic program-related decisions resulting in the student being dismissed from a program or being required to repeat a semester or year, the basis of which the student alleges is prejudice or capricious.

All students may obtain assistance in interpretation of appeals policies and procedures in their respective college student affairs office or in the Office of the Vice Provost for Academic Affairs.

Both parties shall have the right to be accompanied by a personal advisor or legal counsel throughout the hearing. Provided, however, that the faculty member may have legal counsel at the hearing only if the student does. The Hearing Panel may have its counsel present throughout the hearing, regardless of whether the parties are represented. These individuals may not question witnesses or address the panel.

### 4.16.1 Academic Appeals Hearing Panel

Each Academic Appeals Hearing Panel shall generally consist of 3 faculty and 3 student members from the college's Academic Appeals Board. However, to allow flexibility for unforeseen scheduling conflicts, a minimum of 2 faculty and 2 student members shall be sufficient for a hearing to convene. If that minimum number cannot attend, the hearing date will be re-scheduled. In all instances, the membership of the Hearing Panel must remain equally balanced between faculty and students. The dean or his/her designee will appoint one of the faculty members to serve as Chair of the Hearing Panel.

### 4.16.2 Academic Appeals Process

All appeals under this policy must be handled according to the following processes.

- 1) **Appeals of an Academic Evaluation Related to a Course or Course Component, a Thesis or Dissertation Defense, or a General or Comprehensive Exam:**

The responsibility for academic evaluations of students rests with the instructors or evaluators.

The sole basis for an appeal of an academic evaluation in a course or course component, or appeal related to a thesis or dissertation defense, or appeal related to a general or comprehensive exam, under the Academic Appeals Policy is an alleged prejudiced or capricious evaluation by the instructor(s) or evaluator(s). The burden of proof shall be upon

the student, who must establish by a preponderance of the evidence (i.e., more likely than not) that the evaluation was prejudiced or capricious. The Academic Appeals Board is not the forum for other grievances related to a course or academic assignment (e.g., disappointment in a grade or dissatisfaction with the instructor or the course). Such matters should be discussed with the department chair or college dean.

The appeal process includes an informal resolution procedure as well as a procedure for formal appeal to the Academic Appeals Board. If a student feels he or she has received a prejudiced or capricious evaluation by an instructor or evaluator, the student must first seek an informal resolution through the process noted in (a) and (b) below. **Note: Graduate student appeals related to a thesis or dissertation defense or general or comprehensive exam skip to the process noted in (d) below.**

- (a) **Conference with the Instructor or Evaluator:** The student shall set forth his or her allegation of a prejudiced or capricious evaluation in a written statement that details the circumstances giving rise to the allegation and provide the statement to the instructor or evaluator. A conference between the student and instructor or evaluator shall be held in an attempt to discuss and resolve the matter per the following timeline.

- (1) **Timeline:** In cases of an evaluation made known to a student during the term, the student must provide the detailed written statement above, notifying the instructor or the evaluator of the dispute over the academic evaluation, and must attempt to resolve differences no later than 10 University business days after the results of the evaluation are made known to the student. In cases of end-of-term evaluations, the student must provide the detailed written statement above, notifying the instructor or evaluator of the dispute over the academic evaluation and must attempt to resolve differences no later than February 15 for the previous fall semester or winter intersession and no later than September 15 in cases of end-of-term evaluations for the previous spring semester, spring intersession, or summer term.

- (b) **Conference with the Department Chair:** If the dispute is not resolved to the satisfaction of the student after the conference with the instructor or evaluator, the student must attempt to resolve the matter with the department chair (In those instances in which the complaint is against the department chair as the instructor or evaluator, references to the “department chair” shall refer to the dean.) The student must request a meeting with the department chair within 10 University business days of the student’s meeting with the instructor or evaluator. The department chair must be given a copy of the detailed written statement provided to the instructor or evaluator pursuant to subsection (a) above.

As part of this informal resolution process, the department chair will: 1) meet with the student and consider the information contained in the detailed written statement provided by the student; 2) remind the student that the responsibility for academic evaluation rests with the instructor or evaluator; 3) explain that the appeal must be based on an articulated prejudiced or capricious action of the instructor or evaluator; 4) confer with the instructor or evaluator, if deemed necessary; 5) attempt to resolve the matter; and 6) advise the student about the academic appeals process and procedures if there is no resolution and the student decides to request a hearing on the matter. The chair should make no statement about whether the matter should go to a hearing or whether a hearing will be granted.

- (c) **Request for a Hearing:** If the dispute is not resolved to the satisfaction of the student after the conference with the department chair, then the student may request a hearing on such matter, through the dean (In those instances in which complaint is against the dean as the instructor, references to the “dean” shall refer to the Vice Provost for Academic Affairs) of the college offering the course. Any thesis, dissertation, or comprehensive exam appeal by a Graduate College student shall be heard by the Graduate College Appeals Board. [See 4.16.2 1)(d)]

If a student failed to notify an instructor or evaluator or department chair or failed to attempt resolution within the timelines above, the dean shall deny any request for a hearing unless, in the view of the dean, the student has been prevented from complying with the appropriate time limit (as, for example, in the case of a student being called into military service).

- (d) The student shall make a written request to the dean for a hearing within 10 University business days following the day when the attempts at resolution in paragraph (b) above is completed. The Dean must be provided a copy of the detailed written statement provided to the instructor pursuant to subsection (a) above.

The filing of a written request for a hearing related to graduate student appeals of a thesis or dissertation defense or a general or comprehensive exam shall be made to the Graduate College Dean within 10 University business days following the day the graduate student was notified of the evaluation.

- (e) The dean (or Vice Provost for Academic Affairs) shall deny any request for a hearing that does not meet the deadline in subsection (a) above unless, in the view of the dean the student has been prevented from complying with the appropriate time limit (as, for example, in the case of a student being called into military service). Furthermore, if in the judgment of the dean the case does not meet the criteria for appeal the dean may refuse the student a hearing.
- (f) Upon receiving notice of a student's request for a hearing, if the dean determines that the timelines have been met and that the student's allegation meets the criteria for appeal, the dean or his/her designee shall schedule a Hearing Panel selected randomly from the college's Academic Appeals Board. The dean or his/her designee will appoint one of the faculty members to serve as Chair of the Hearing Panel.
- (g) **Prior to the Hearing:** The Chair of the Hearing Panel will notify the student and the instructor or evaluator in writing and request, by a date determined by the Chair, the following documentation:

- (1) A list of proposed witnesses to be called and a brief summary of the testimony of each proposed witness
- (2) Two copies of the exhibits proposed to be presented

Once the documentation has been received by the Chair, each party will be provided with the other party's documentation and given an opportunity to make objections, per the Chair's instructions.

(h) **Hearing Procedures**

- (1) The Chair of the Hearing Panel shall obtain a copy of the Hearing Guide for the Academic Appeals Hearing Panel from the Office of the Vice Provost for Academic Affairs.
- (2) The Chair of the Hearing Panel shall preside at the hearing, keep order throughout the hearing process, exercise control over the hearing for efficiency and relevancy, and determine all relevant timelines including the extension of any such timelines.
- (3) The Chair of the Hearing Panel will notify the student and the instructor or evaluator in writing of the applicable hearing procedure, the date and location of the hearing, and all relevant timelines.
- (4) The student and then the instructor or evaluator will be allowed to give a five-minute opening statement and a five-minute closing statement. After the opening statements, the Hearing Panel shall provide the parties an opportunity to present their respective positions, including the presentation of documentary evidence and witness testimony. Each party shall be given the opportunity to cross-examine witnesses presented by the other. The Hearing Panel may also directly question any witnesses and will consider any relevant documents presented.
- (5) The Hearing Panel will make determinations about the facts and the credibility of witnesses and determine by majority vote whether the student has proven by a preponderance of the evidence that the academic evaluation was prejudiced or capricious.
- (6) In the event of a tie vote, the finding will be that the student did not meet the burden to prove by majority vote that there was a prejudiced or capricious evaluation.

- (i) The instructor's or evaluator's grade, or assessment, will not become final until the appeal is concluded or is withdrawn by the student. In cases where the student proves there was a prejudiced or capricious evaluation, the instructor(s) or evaluator(s) will re-evaluate the student's performance in the course, or in the thesis or dissertation defense or general or comprehensive exam, whichever was appealed, according to the applied criteria. The student's dean has the responsibility to confirm that the appropriate evaluation is recorded on official student records, or that re-evaluation has occurred in the case of thesis or dissertation defense or general or comprehensive exam appeals
- (j) Meetings of the Hearing Panel, including the hearing, are closed to the public.
- (k) In cases involving an evaluation related to a course or course component, the decision of the Hearing Panel (i.e., the evaluation was or was not proven to be prejudiced or capricious) shall be communicated in writing to the dean of the college, who shall notify the student's dean (if different), the student, the instructor or evaluator, and the Vice Provost for Academic Affairs.
- (l) The findings and recommendations of the Hearing Panel shall be final and not appealable within the University unless the student submits written evidence to the Senior Vice President and Provost of (1) manifest procedural irregularities that effectively denied the student a fair hearing; (2) new and significant evidence that could not have been discovered by a reasonably diligent student before or during the original hearing; or (3) probable inequity in the disposition of the matter.

Harmless deviations from prescribed procedures may not be used to invalidate the finding or proceeding. Technical departures from these procedures and errors in their application shall not be grounds to overturn the Hearing Panel's finding unless, in the opinion of the Senior Vice President and Provost, the technical departure or errors prevented a fair determination of the issues.

(m) **Appeals of the Hearing Panel's Findings**

Appeals, on the basis of (l) (1), (2), or (3) above, shall be made in writing to the Senior Vice President and Provost within 10 University business days of the time such grounds for appeal are discovered or should have been discovered. Consideration of appeals may be made by the Senior Vice President and Provost upon the basis of written statements and such other evidence as the Senior Vice President and Provost may require according to procedures the Senior Vice President and Provost deems appropriate.

In all cases, the President and the Board of Regents reserve the right to review, at their discretion, the decision of the Senior Vice President and Provost for manifest error or inequity.

2) **Appeals Under the Student Professional Behavior in an Academic Program Policy**

- (a) Students who are suspended or dismissed due to violations of the Student Professional Behavior in an Academic Program Policy may request a hearing under the Academic Appeals Policy according to the procedures noted herein. The sole basis for an appeal under the Student Professional Behavior in an Academic Program Policy is alleged prejudice or capriciousness in the suspension or dismissal decision or action. The burden of proof shall be upon the student, who must establish by a preponderance of the evidence (i.e., more likely than not) that the suspension or dismissal was prejudiced or capricious. A student may not appeal an action taken simply because he/she does not agree with it.
- (b) Appeals related to violations of the Student Professional Behavior in an Academic Program Policy are handled according to the procedures noted below.
- (c) The student shall make a written request for a hearing to the Senior Vice President and Provost within 10 University business days following the day when the student was notified of the suspension or dismissal.
- (d) The Senior Vice President and Provost shall deny any request for a hearing that does not meet this deadline unless, in the view of the Senior Vice President and Provost, the student has been prevented

from complying with the appropriate time limit (as, for example, in the case of a student being called into military service). Furthermore, if in the judgment of the Senior Vice President and Provost, the case does not meet the criteria for appeal the Senior Vice President and Provost may refuse the student a hearing.

- (e) Upon receiving notice of a student's request for a hearing, if the Senior Vice President and Provost determines that the deadline has been met and the request meets the criteria for appeal, the Senior Vice President and Provost or his/her designee shall schedule a Hearing Panel selected randomly from the college's Academic Appeals Board. The Senior Vice President and Provost or his/her designee will appoint one of the faculty members to serve as Chair of the Hearing Panel.
- (f) **Prior to the Hearing:** The Chair of the Hearing Panel will notify the student and the Dean in writing and request, by a date determined by the Chair, the following documentation:
  - (1) A list of proposed witnesses to be called and a brief summary of the testimony of each proposed witness
  - (2) Two copies of the exhibits proposed to be presented
  - (3) Once the documentation has been received by the Chair, each party will be provided with the other party's documentation and given an opportunity to make objections, per the Chair's instructions.
- (g) **Hearing Procedures**
  - (1) The Chair of the Hearing Panel shall obtain a copy of the Hearing Guide for the Academic Appeals Hearing Panel from the Office of the Vice Provost for Academic Affairs.
  - (2) The Chair of the Hearing Panel shall preside at the hearings, to keep order throughout the hearing process, to exercise control over the hearing for efficiency and relevancy, and to determine all relevant timelines including the extension of any such timelines.
  - (3) The Chair of the Hearing Panel will notify the student and the dean, who shall act as the respondent in appeals under the Student Professional Behavior in an Academic Program Policy, of the applicable hearing procedure, the date and location of the hearing, and all relevant timelines.
  - (4) The student and then the respondent will be allowed to give a five-minute opening statement and a five-minute closing statement. After the opening statements, the Hearing Panel shall provide the parties an opportunity to present their respective positions, including the presentation of documentary evidence and witness testimony. Each party shall also be given the opportunity to cross-examine witnesses presented by the other. The Hearing Panel may also directly question any witnesses and will consider any relevant documents presented.
  - (5) The Hearing Panel will make determinations about the facts and the credibility of witnesses and determine by majority vote whether the student has proven by a preponderance of the evidence that the suspension or dismissal was prejudiced or capricious.
  - (6) In the event of a tie vote, the finding will be that the student did not meet the burden to prove by majority vote his or her claims that there was a prejudiced or capricious decision to dismiss or suspend the student.
- (h) The decision to suspend or dismiss will not become final until the appeal is concluded or is withdrawn by the student. In cases where the student proves there was prejudice or capriciousness in the suspension or dismissal decision or action, the student shall be reinstated to the program under such terms and conditions as in effect at the time of the decision or action.
- (i) Meetings of the Hearing Panel, including the hearing, are closed to the public.

- (j) In cases involving Student Professional Behavior in an Academic Program, the Hearing Panel will transmit in writing its finding to the Senior Vice President and Provost, who shall notify the dean of the college, the student's dean (if different), the student, and the Vice Provost for Academic Affairs.
- (k) The findings of the Hearing Panel shall be final and not appealable within the University unless the student submits written evidence to the Senior Vice President and Provost of (1) manifest procedural irregularities that effectively denied the student a fair hearing; (2) new and significant evidence that could not have been discovered by a reasonably diligent student before or during the original hearing, or (3) probable inequity in the disposition of the matter. Harmless deviations from prescribed procedures may not be used to invalidate the finding or proceeding. Technical departures from these procedures and errors in their application shall not be grounds to overturn the Hearing Panel's finding unless, in the opinion of the Senior Vice President and Provost, the technical departure or errors were such as to have prevented a fair determination of the issues.

**(l) Appeals of the Hearing Panel's Findings**

Appeals, on the basis of (k) (1), (2), or (3) above, shall be made in writing to the Senior Vice President and Provost within 10 University business days of the time such grounds for appeal are discovered or should have been discovered. Consideration of appeals may be made by the Senior Vice President and Provost upon the basis of written statements and such other evidence as the Senior Vice President and Provost may require according to procedures the Senior Vice President and Provost deems appropriate.

In all cases, the President and the Board of Regents reserve the right to review, at their discretion, the decision of the Senior Vice President and Provost for manifest error or inequity.

**3) Appeals of Academic Program-Related Decisions**

- (a) Students who are dismissed from a program or required to repeat a semester or year may request a hearing under the Academic Appeals Policy according to the procedures noted herein. The sole basis for an appeal of an academic program-related decision is alleged prejudice or capriciousness in the dismissal or requirement to repeat. The burden of proof shall be upon the student, who must establish by a preponderance of the evidence (i.e., more likely than not) that the dismissal or requirement to repeat a semester or year was prejudiced or capricious. A student may not appeal an action taken simply because he/she does not agree with it.
- (b) Appeals related to academic program-related decisions are handled according to the procedures noted below.
- (c) The student shall make a written request for a hearing to the Senior Vice President and Provost within 10 University business days following the day when the student was notified of the academic program-related decision.
- (d) The Senior Vice President and Provost shall deny any request for a hearing that does not meet this deadline unless, in the view of the Senior Vice President and Provost, the student has been prevented from complying with the appropriate time limit (as, for example, in the case of a student being called into military service). Furthermore, if in the judgment of the Senior Vice President and Provost, the case does not meet the criteria for appeal, the Senior Vice President and Provost may refuse the student a hearing.
- (e) Upon receiving notice of a student's request for a hearing, if the Senior Vice President and Provost determines that the deadline and criteria for appeal have been met, the Senior Vice President and Provost or his/her designee shall schedule a Hearing Panel selected randomly from the college's Academic Appeals Board. The Senior Vice President and Provost or his/her designee will appoint one of the faculty members to serve as Chair of the Hearing Panel.



- (f) **Prior to the Hearing:** The Chair of the Hearing Panel will notify the student and the Dean in writing and request, by a date determined by the Chair, the following documentation:

- (1) A list of proposed witnesses to be called and a brief summary of the testimony of each proposed witness
- (2) Two copies of the exhibits proposed to be presented

Once the documentation has been received by the Chair, each party will be provided with the other party's documentation and given an opportunity to make objections, per the Chair's instructions.

(g) **Hearing Procedures**

- (1) The Chair of the Hearing Panel shall obtain a copy of the Hearing Guide for the Academic Appeals Hearing Panel from the Office of the Vice Provost for Academic Affairs.
  - (2) The Chair of the Hearing Panel shall preside at the hearings, to keep order throughout the hearing process, to exercise control over the hearing for efficiency and relevancy, and to determine all relevant timelines including the extension of any such timelines.
  - (3) The Chair of the Hearing Panel will notify the student and the dean, who shall act as the respondent in appeals related to academic program-related decisions of the applicable hearing procedure, the date and location of the hearing, and all relevant timelines.
  - (4) The student and then the respondent will be allowed to give a five-minute opening statement and a five-minute closing statement. After the opening statements, the Hearing Panel shall provide the parties an opportunity to present their respective positions, including the presentation of documentary evidence and witness testimony. Each party shall also be given the opportunity to cross-examine witnesses presented by the other. The Hearing Panel may also directly question any witnesses and will consider any relevant documents presented.
  - (5) The Hearing Panel will make determinations about the facts and the credibility of witnesses and determine by majority vote whether the student has proven by a preponderance of the evidence that the academic-program related decision was prejudiced or capricious.
  - (6) In the event of a tie vote, the finding will be that the student did not meet the burden to prove by majority vote his or her claims that there was a prejudiced or capricious decision.
- (h) In cases where the student proves there was prejudice or capriciousness in the academic program-related decision, the student shall be reinstated (if dismissed) or the requirement to repeat a semester or a year will be withdrawn. The student shall be reinstated under such terms and conditions as were in effect at the time of the decision.
- (i) Meetings of the Hearing Panel, including the hearing, are closed to the public.
- (j) The Hearing Panel will transmit in writing its finding to the Senior Vice President and Provost, who shall notify the dean of the college, the student's dean (if different), the student, and the Vice Provost for Academic Affairs.
- (k) The findings of the Hearing Panel shall be final and not appealable within the University unless the student submits written evidence to the Senior Vice President and Provost of (1) manifest procedural irregularities that effectively denied the student a fair hearing; (2) new and significant evidence that could not have been discovered by a reasonably diligent student before or during the original hearing, or (3) probable inequity in the disposition of the matter.

Harmless deviations from prescribed procedures may not be used to invalidate the finding or proceeding. Technical departures from these procedures and errors in their application shall not be

grounds to overturn the Hearing Panel's finding unless, in the opinion of the Senior Vice President and Provost, the technical departure or errors prevented a fair determination of the issues.

**(l) Appeals of the Hearing Panel's Findings**

Appeals, on the basis of (k) (1), (2), or (3) above, shall be made in writing to the Senior Vice President and Provost within 10 University business days of the time such grounds for appeal are discovered or should have been discovered. Consideration of such appeals may be made by the Senior Vice President and Provost upon the basis of written statements and such other evidence as the Senior Vice President and Provost may require according to procedures the Senior Vice President and Provost deems appropriate.

In all cases, the President and the Board of Regents reserve the right to review, at their discretion, the decision of the Senior Vice President and Provost for manifest error or inequity.

(Regents, 6-19-16, 1-26-99, 12-3-02, 6-25-08, 12-11-11, 12-7-12, 1-24-13, 9-14-17)

## C.2 ACADEMIC MISCONDUCT CODE

**This Code applies to students, former students, and graduates**

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### 12.1 ACADEMIC MISCONDUCT

Academic Misconduct includes any act which improperly affects the evaluation of a student's academic performance or achievement, including but not limited to the following:

- (a) Cheating: the use of unauthorized materials, methods, or information in any academic exercise, including improper collaboration;
- (b) Plagiarism: the representation of the words or ideas of another as one's own, including:
  - 1) direct quotation without both attribution and indication that the material is being directly quoted; e.g., quotation marks;
  - 2) paraphrase without attribution;
  - 3) paraphrase with or without attribution where wording of the original remains substantially intact and is represented as the author's own;
  - 4) expression in one's own words, but without attribution, of ideas, arguments, lines of reasoning, facts, processes, or other products of the intellect where such material is learned from the work of another and is not part of the general fund of common academic knowledge;
- (c) Fabrication: the falsification or invention of any information or citation in an academic exercise;
- (d) Fraud: the falsification, forgery, or misrepresentation of academic or clinic work, including the resubmission of work performed for one class for credit in another class without the informed permission of the second instructor; or the falsification, forgery, or misrepresentation of other academic or medical records or documents, including admissions materials, transcripts, and patient records; or the communication of false or misleading statements to obtain academic advantage or to avoid academic penalty;
- (e) Destruction, misappropriation, or unauthorized possession of University property or the property of another;
- (f) Bribery or intimidation;
- (g) Assisting others in any act proscribed by this Code; or
- (h) Attempting to engage in such acts.

It is the responsibility of each faculty member and each student to be familiar with the definitions, policies, and procedures concerning academic misconduct.

### 12.2 REPORTING ACADEMIC MISCONDUCT

#### 12.2.1 WHO MAY FILE

Any University administrative, faculty, or staff member may bring a complaint of academic misconduct by submitting a written report as provided hereafter. Students who identify an act of academic misconduct should report that act to an administrative, faculty, or staff member so that a complaint may be forwarded to and filed by the instructor of the course involved.

#### 12.2.2 INVESTIGATION OF MISCONDUCT

Before imposing a grade penalty or filing a complaint of academic misconduct, the faculty or staff member may initiate a preliminary inquiry to determine whether the incident meets the definition of misconduct under [Section](#)

**12.1.** During the course of this inquiry the faculty or staff member may discuss the matter with the student suspected of misconduct.

### **12.2.3 FACULTY MEMBER ELECTS TO RECOMMEND ADMONITION**

12.2.3.1 A faculty member may conclude that an incident that meets the definition of misconduct under **Section 12.1** nevertheless merits an admonition rather than a disciplinary sanction as defined in **Section 12.5**. In particular, a faculty member might conclude (but is not required to conclude) that the incident is more appropriately treated as an instructional rather than a disciplinary matter. When the faculty member concludes that an admonition is the more appropriate action, the faculty member may elect to reduce a student's grade and/or require additional, remedial academic work without first filing a charge of academic misconduct, subject to the following limitations and conditions:

- (a) **NOTE:** The admonition option is intended for assignments and examinations that do not involve a semester-long activity and when the incident in question is not of an egregious nature. The faculty member may not use the admonition option for an incident of misconduct on a final examination, a term paper or project, an examination that determines the status of graduate students (e.g. qualifying, candidacy, general, comprehensive and certification examinations and defenses of theses and dissertations), a master's thesis, or a doctoral dissertation;
- (b) A faculty member who elects to use the admonition option may impose no grade reduction greater than loss of all credit for the assignment at issue. Unless otherwise specified in the course syllabus. Provided, however, in no event shall a student receiving an admonition receive a grade penalty of F or U for the course; and,
- (c) A faculty member who elects to use the admonition option must do the following within 10 University business days after discovery of the incident, and before imposing the grade reduction or other requirement:
  - 1) inform the student of the nature of and basis for the misconduct;
  - 2) give the student an opportunity to explain;
  - 3) inform the student of the intent to recommend admonition to the Vice Provost for Academic Affairs, admonish the student and explain the grade reduction or other requirement to be imposed;
  - 4) where appropriate, instruct the student to resolve any confusion the student may have had regarding what constitutes proper academic conduct; and
  - 5) inform the student how to appeal the decision. Notice of procedures for appeal shall be provided in writing; such notice shall be presumed adequate if provided in the course syllabus with a reference to this policy on the consequences of accepting the admonition and the procedures for appeal.
  - 6) The student may contest the admonition by contacting the Vice Provost for Academic Affairs within ten (10) University business days from the date of the instructor's notice to the student and scheduling a meeting as provided below in **Section 12.3**.

12.2.3.2 The faculty member shall notify their dean in writing of the incident and the recommendation for admonition, ordinarily within 10 University business days of discovery of the incident. The dean shall forward notice of the incident to the student's dean, if different, and to the Vice Provost for Academic Affairs, ordinarily within 10 University business days of receipt of notice from the faculty member. Following consultation with the faculty member's dean and the student's dean, the Vice Provost for Academic Affairs shall

notify the faculty member and the student whether the recommendation for admonition is accepted.

- 12.2.3.3 Unless the Vice Provost for Academic Affairs imposes a disciplinary sanction as described in [Section 12.5](#), a student who accepts an admonition and resulting grade reduction under this subsection shall not be deemed to have admitted guilt for an act of academic misconduct; provided, the record of the admonition may be used in any subsequent academic misconduct proceeding, as appropriate, to establish the student's prior familiarity with the fundamental rules of academic integrity.
- 12.2.3.4 In cases of repeated offenses or otherwise as appropriate, the Vice Provost for Academic Affairs may announce a disciplinary sanction as provided in [Section 12.5](#). Prior to imposing such a sanction, the Vice Provost for Academic Affairs shall send notice to the student, ordinarily within 10 University business days of receipt of notice of repeated offense(s) from the student's dean but in no case more than 45 University business days after discovery of the incident. Notice of the Vice Provost for Academic Affairs intent to impose a sanction shall be treated as a "complaint" for purposes of notice and hearing as provided in [Sections 12.3 and 12.4](#) of this Code. The disciplinary sanction shall not be imposed until the student is permitted the opportunity to respond as provided in [Sections 12.3 and 12.4](#) of this Code.

## **12.2.4 FACULTY MEMBER ELECTS TO FILE A CHARGE OF ACADEMIC MISCONDUCT**

### **12.2.4.1 Notification of Dean**

The individual bringing the complaint of academic misconduct must notify the dean in writing with a brief description of the evidence within ten University business days after discovery of the incident, exclusive of University breaks or academic intercessions.

- (a) If the incident is discovered by a faculty member in a particular course, he or she must notify his or her dean with a brief description of the evidence as well as the student's dean, if different, and impose a grade penalty as noted below. A faculty member who concludes that a student has engaged in, or is engaging in, academic misconduct must fail the student on the examination or paper and may set additional penalties to the extent of denying credit in the course. The faculty member's grade sanctions will not become final until the student is found guilty by the Academic Misconduct Board, defaults, or admits the charges. The student's dean has the responsibility to confirm that the appropriate grade is recorded on official student records.
- (b) If the incident is discovered by someone other than a faculty member in a course, or is reported by a student or other person, the dean of the accused student shall be notified. If no particular class is involved (e.g., submission of a falsified application), the Vice Provost for Academic Affairs shall be notified.

### **12.2.4.2 Notification of the Student**

The student's dean shall initiate academic misconduct procedures against the student. The dean shall notify the student in writing of the charge of academic misconduct, describing the alleged act and the grade penalty determined by the instructor, if a course is involved, and of the student's right to request a hearing by serving the student in person or by mail to the last address provided to the University. The dean shall simultaneously send notification to the Vice Provost for Academic Affairs.

A student may continue his or her regular enrollment in the University pending administrative resolution of misconduct allegations. However, until such resolution, a student may not graduate or receive a transcript without approval of the Senior Vice President and Provost, and any official transcript released during such period shall bear a notation that student code proceedings are ongoing.

### 12.3 CONFERENCE WITH VICE PROVOST FOR ACADEMIC AFFAIRS

Within five University business days of the date of the Dean's notification letter, the student shall contact the Vice Provost for Academic Affairs and schedule a conference to discuss the matter.

If the student fails to respond within the prescribed time or fails to meet as directed, the student shall be in default and thereby waives the right to all University hearings, appeals, and challenges. In the event of a default at this point, the Vice Provost shall notify the student's dean who shall confirm imposition of grade penalties and implement disciplinary sanctions.

At the conference between the student and the Vice Provost for Academic Affairs, the Vice Provost shall describe the academic misconduct process, possible sanctions, and the student's right (a) to a hearing with adequate notice; (b) to be represented by an attorney at the student's expense in which case the University reserves the right to be represented by University Legal Counsel; and (c) to refrain from discussing the matter or from making any statement regarding the matter. At the conclusion of the conference, the student may:

- (a) **Deny the charges** – If the student denies the charges and wishes a hearing to contest them, the student must submit a written request for such a hearing to the Vice Provost within five University business days of the conference. Failure to submit a written request within the prescribed time shall waive the student's right to any University hearings, appeals, or challenges of the charges or of any sanctions imposed as a result of the academic misconduct. The student may also use this written request to respond in writing to the allegation.
- (b) **Admit the charges** – If the student admits to the charges at this time or denies the charges but fails to submit a request for a hearing, the Vice Provost will inform the student's dean and the dean of the college offering the course. The grade penalty shall be confirmed, and the student's dean shall make his or her decision regarding disciplinary sanctions, if any. Provided, however, that if the student admits to the charges but wants to confer with the dean or to submit a written statement concerning extenuating circumstances affecting disciplinary sanctions, the student may do so only if done within five University business days of the date of the admission to the charge. Failure to do so within the five days will result in the dean making his or her decision without such information.

Nothing in this policy is intended to preclude the student from discussing the incident with the person initiating the charge, if that person agrees. Such a meeting should be scheduled after the conference between the student and the Vice Provost for Academic Affairs. Any such meeting shall not extend the period of time for requesting a hearing.

The person initiating the charge of academic misconduct may withdraw the charge at any time prior to the commencement of a hearing by the AMB or, if no hearing is held, prior to the imposition of a final sanction by sending written notice to the student's dean. The dean shall inform, in writing, the Vice Provost and others involved that the charge has been withdrawn and, at his or her discretion, may terminate the case.

### 12.4 HEARING

#### 12.4.1 Academic Misconduct Boards

Each college shall establish an Academic Misconduct Board (AMB) consisting of two students and three members of that college's faculty to hear each case.

Membership of the AMB shall be determined by the dean on an ad hoc basis from a pool of ten faculty and ten students. The faculty members for the pool shall be determined by the faculty of the college. Student members shall be appointed or selected from nominations submitted by appropriate student organizations. Terms of service shall begin September 1 and end August 31 except that, if a hearing is in progress at this time, any retiring member shall be continued on the board until the case in progress is closed.

The dean of the college shall appoint an additional faculty member who shall be nonvoting to chair the AMB and to be responsible for the board's administrative matters, including scheduling of cases, notification of hearings and decisions, and maintenance of records.

#### 12.4.2 Selection of AMB to Hear the Appeal

In a case in which a hearing has been requested, the facts of the case shall be determined by the AMB of the student's college.

#### 12.4.3 Scope of Hearing

The Board will consider the information and arguments presented, make findings of facts of matters in dispute, and determine whether the student did engage in the alleged act.

The Board will also hear any evidence and argument by the parties concerning extenuating circumstances that may affect decisions about what disciplinary actions might be imposed and may make recommendations to the dean concerning disciplinary sanctions. (Section 12.5)

#### 12.4.4 Hearing Procedures

- (a) Each AMB shall establish the procedures to be followed for the hearing.
- (b) Prior to the hearing each party shall furnish to the other party a list of witnesses to be called and exhibits to be used at the hearing, as requested by the AMB chair.
- (c) Students who elect to have legal counsel representation at the hearing shall furnish the name of such counsel, when identified, but no later than ten University business days before the hearing to the dean and the chair of the AMB.
- (d) Written notification of a hearing must be distributed to the parties involved at least ten University business days in advance of the hearing date, and shall include:
  - (1) The authority for the hearing and the hearing body;
  - (2) Reference to the specific rule or rules involved;
  - (3) Date, time, nature, and place of the hearing;
  - (4) A brief faculty statement of the charges and issues involved;
  - (5) Names of AMB members and a statement that parties have a right to challenge any member no later than 5 days prior to the hearing.
- (e) Students who fail to appear after proper notice will be deemed to have admitted to the charges against them.
- (f) Hearings shall be closed to the public and shall be confidential.
- (g) Hearings shall be tape recorded or transcribed.
- (h) Witnesses shall be asked to affirm that their testimony is truthful.
- (i) The burden of proof shall be upon the complainant, who must establish the guilt of the student by a preponderance of the evidence.
- (j) Prospective witnesses other than the complainant and the student are excluded from the hearing during the testimony of other witnesses. All parties, witnesses, and the public shall be excluded during AMB deliberations.
- (k) Formal rules of evidence shall not be applicable in these proceedings. The chair of each AMB shall give effect to the privileges recognized by law.
- (l) The AMB shall not receive or consider arguments about the legality of any provision under which a charge has been brought or the legality of the procedures under which the hearing is proceeding. Such questions should be presented in writing to the Senior Vice President and Provost.

- (m) Principals in the case shall have reasonable opportunity to question witnesses and present information and argument deemed relevant by the AMB.
- (n) Final decisions of all AMBs concerning guilt or innocence and recommendations to the student's dean regarding disciplinary sanctions shall be by majority vote of the members present and voting. The final report shall contain a written statement setting forth findings of fact and the decision on each of the charges, and may contain recommendations for disciplinary sanctions with the reasoning behind these recommendations. A minority report may be filed.

#### 12.4.5 Findings of AMB

- (a) If the AMB finds that the facts do not support the allegations, the charges will be dismissed. The chair of the AMB shall transmit the finding in writing to the student's dean, the dean of the college offering the course, if different, and the Vice Provost for Academic Affairs within five University business days of the conclusion of the hearing. The student's dean shall notify the student and the Vice Provost for Academic Affairs in writing of the decision of the AMB and the dismissal of the charges within ten university business days after receiving the AMB decision. The matter is then ended, and the grade is recorded appropriately. The AMB record of the case shall be destroyed by the chair of the AMB 20 days after transmittal of the decision.
- (b) If the AMB finds that the facts support the allegations against the student, the student shall be found guilty, and the AMB may recommend disciplinary sanctions (See 12.5). The AMB's finding and recommendations must be transmitted to the student's dean, along with the recording of the hearing, and to the Vice Provost for Academic Affairs in writing within five University business days of the conclusion of the hearing. The student's dean shall notify the student and the Vice Provost for Academic Affairs in writing of the finding and recommendations of the AMB and of the dean's decision. A letter to the student at the address last provided the University by the student shall be sufficient to meet this requirement. Copies of the letter may also be provided to other parties who have a legitimate need to know of the action. Implementation of the appropriate action or disciplinary sanction by the student's dean shall end the process.

### 12.5 DISCIPLINARY SANCTIONS

#### 12.5.1 Additional Recommendation of Disciplinary Sanctions

The AMB may recommend to the student's dean disciplinary sanctions including, but not limited to, those noted below:

- (a) **Censure** – A written reprimand for violation of acceptable standards of academic conduct. This action takes formal notice of the student's act of academic misconduct and provides a formal warning that a further act of academic misconduct will result in far more severe action.

Censure shall not be noted on a student's transcript, but it will be noted in the Office of the Vice Provost for Academic Affairs. Copies of the letter of censure shall be provided to the student, the Vice Provost for Academic Affairs, the appropriate deans, and the instructor.

- (b) **Limited Notation Suspension** – Suspension from classes and other privileges for a period of not less than one semester or more than one calendar year. During this period, the student will not be allowed to earn credits for transfer to the University of Oklahoma at any other institution. Any credits earned at another institution during a period of suspension shall not be recorded on the student's University of Oklahoma transcript and shall not be acceptable transfer credit at the University of Oklahoma. A notation of suspension for academic misconduct shall be made on the student's transcript. Such transcript notation shall be removed upon the student's graduation from the University or four years from the date of suspension, whichever comes first. The student's college is responsible for notifying the Registrar to remove the notation.
- (c) **Permanent Notation Suspension** – Suspension from classes and other privileges for a period of not less than one semester or more than one calendar year. During this period, the student will not be allowed to earn credits for transfer to the University of Oklahoma at any other institution. Any credits earned at



another institution during a period of suspension shall not be recorded in the student's University of Oklahoma transcript and shall not be accepted as transfer credit at the University of Oklahoma. A permanent notation of suspension for academic misconduct shall be made on the student's transcript.

- (d) **Expulsion** – Termination of student status for an indefinite period, intended to be permanent. A permanent notation of expulsion for academic misconduct shall be made on the student's transcript. Such notation shall be permanent. If a student is reinstated after an expulsion, it is only after a complete reconsideration of his or her case by the Senior Vice President and Provost.

#### 12.5.2 Determination of Disciplinary Sanction

The student's dean shall determine the appropriate disciplinary sanction. The dean may consider the evidence in the record regarding extenuating circumstances and may request additional information prior to making his/her decision.

### 12.6 APPEALS

Decisions regarding the facts and the disciplinary sanction shall be final and not appealable within the University, unless (1) manifest procedural irregularities effectively denied the student a fair hearing, (2) new and significant evidence becomes available which could not have been discovered by a reasonably diligent student before or during the original hearing; or (3) probable inequity exists in the disposition of the matter. Such appeals must be made within ten days of the time such grounds for the appeal are discovered or should have been discovered.

Appeals shall be made in writing to the Senior Vice President and Provost. Consideration of such appeals may be made by the Senior Vice President and Provost upon the basis of written statements and such other evidence as the Senior Vice President and Provost may require according to procedures he deems appropriate.

Harmless deviations from prescribed procedures may not be used to invalidate the decision or proceeding. Technical departures from these procedures and errors in their application shall not be grounds to withhold disciplinary sanctions unless, in the opinion of the Senior Vice President and Provost, the technical departure or errors were such as to have prevented a fair determination of the issues.

In all cases, the President and the Board of Regents reserve the right to review, at their discretion, any decision of a hearing body for manifest error or inequity.

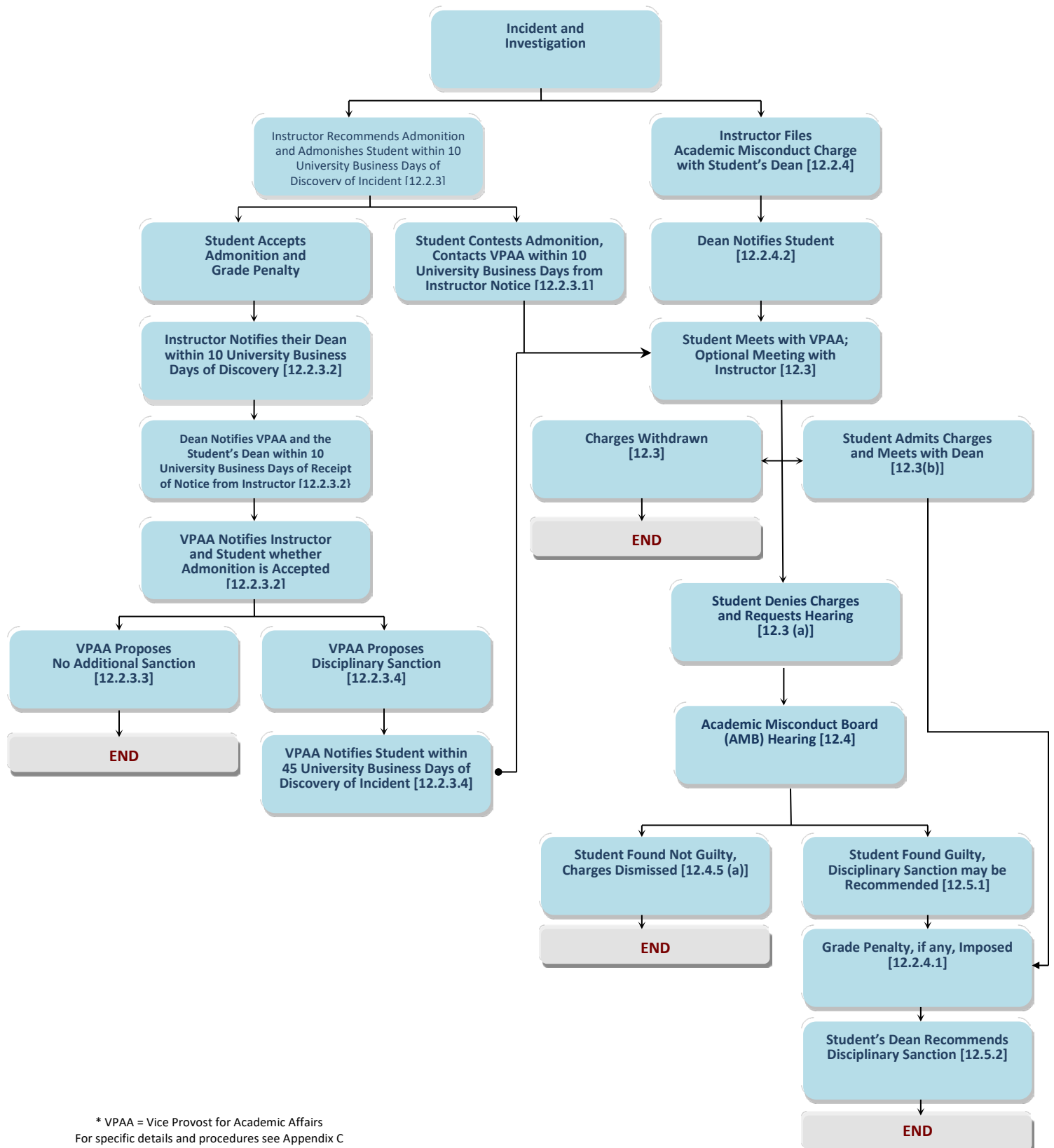
(Regents, 6-9-98, 1-26-99, 12-3-02, 6-25-08)

### 12.7 ACADEMIC MISCONDUCT IN OFF-CAMPUS COURSES

The principles of academic integrity, due process, and confidentiality apply fully in all courses offered by any Health Sciences Center academic unit. When an allegation of academic misconduct arises in a course in which instruction is primarily given or received in a place other than the Health Sciences Center campus, procedures shall be employed which are consistent with those in [Section 12](#) to protect the rights of all parties as provided by law and University policy. The definition of academic misconduct in such classes and the procedure for filing a charge, notification, hearing, appeal, and sanction shall be the same as those for the Health Sciences Center campus, as cited in [Section 12](#). All travel and related costs shall be borne by the student.

(Regents, 6-25-08)

## OUTLINE OF ACADEMIC MISCONDUCT PROCEDURES HEALTH SCIENCES CENTER



\* VPAA = Vice Provost for Academic Affairs  
For specific details and procedures see Appendix C

### **C.3 STUDENT PROFESSIONAL BEHAVIOR IN AN ACADEMIC PROGRAM POLICY HEALTH SCIENCES CENTER**

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The University of Oklahoma Health Sciences Center (OUHSC) strives to attract, matriculate, and train health professions and public health, biomedical, and pharmaceutical sciences graduate students (hereinafter referred to as OUHSC students) who not only possess the intellectual capacity for health professions and graduate study but also have a high capacity for ethical and professional behavior. Since training in ethical and professional behavior is an integral part of training in the health professions, conduct during training is an academic issue. Professionalism is one critical cornerstone of a successful academic program, just as it is a cornerstone of the responsible conduct of research, maintaining integrity and compassion in the delivery of health care, and building a collegial and conscientious health professions team.

Circumstances may arise during a student's course of study that call into question the capacity or commitment of the student to maintain this academic standard. As such, the colleges and training programs retain the responsibility and authority to determine a student's fitness to continue in the program of study.

The process of transitioning from a student to a health care professional requires study, self-reflection and self-management on the part of learners. Ethical and professional behaviors are critical to the effective education of OUHSC students, and are considered a core competency in the academic program, and, thus, are a key factor in academic good standing. When a student accepts an offer of admission into OUHSC programs, he or she commits to comply with all regulations, including those regarding ethical and professional conduct, established by the University, the OUHSC, the respective College, and the Program.

As a distinct learning community within the University, the OUHSC has established the Student Professional Behavior in an Academic Program Policy (referred to as "the Policy" or "this Policy") and adopted procedures for addressing standards of ethical and professional behavior for OUHSC students. The policy and procedures identify student responsibilities and rights in conjunction with standards of fairness, privacy, and due process. They are derived, in part, from the standards of conduct adopted by national organizations that accredit OUHSC programs (e.g., ASAHP, CODA, NLNAC, LCME, ACPE) or license or certify OUHSC learners (e.g., NCCPA, state licensing boards) and the standards of ethical and professional behavior adopted by national and local professional organizations.

Since training in ethical and professional behavior is integral to the education of OUHSC students, violations of this Policy will be considered as academic issues. Failure to meet ethical and professional behavior standards will result in action up to, and possibly including, dismissal and may jeopardize advancement and graduation.

In addition to the academic and clinical-related requirements of each college and program, this Policy and its related procedures shall govern academic and professional behavior at the OUHSC. In the event any OUHSC college and/or health professions program develops a statement of principles and responsibilities related to standards of ethical and professional behavior specific to its respective profession, such statements must conform to the Policy and its procedures.

This Policy is not intended to address the types of student conduct violations described in the University of Oklahoma Student Rights and Responsibilities Code, Section VI 1-22; academic misconduct, as described in [Section 4.18](#) and [Appendix C](#) of the OUHSC Faculty Handbook. For cases in which both the Student Rights and Responsibilities Code and the Student Professional Behavior in an Academic Program Policy may apply, this Student Professional Behavior in an Academic Program Policy shall take precedence.

#### **A. Objectives**

1. To document the priority placed by the Health Sciences Center on the academic standards related to student ethical and professional behavior.
2. To provide students, faculty, and staff with clear articulation of the expectations regarding student ethical and professional behavior.
3. To provide the OUHSC colleges with clearly articulated authority to act when dealing with student ethical and professional behavior issues.

4. To identify procedures for managing and addressing student ethical and professional behavior issues.
5. To ensure standards of fairness, privacy, and certain processes are applied, as applicable.

## **B. Scope**

All OUHSC students are expected to demonstrate high standards of ethical and professional behavior in all educational and clinical settings, including but not limited to:

1. classroom-based milieu (e.g., classrooms, lecture halls, laboratories, on-line and technology-based classes);
2. professional and clinical sites that are part of the learning program (e.g., hospitals, clinics, community health centers, ambulatory settings);
3. other settings not part of the formal learning program but which contribute to the learning process (e.g., student-run special interest group meetings and activities, clubs and governance structures, interactions with University or OUHSC administrators and other members of the campus community); and,
4. Other settings as described below:

This Policy is intended to guide the ethical and professional behavior of students studying in the OUHSC programs. It is not intended to directly guide or address behavior that is a part of a student's private life, but such behavior may come to the attention of the OUHSC in several ways and become the focus of a Policy investigation or charge:

- a) Conduct may be reported to a member of the faculty or administration by a variety of sources (e.g., police, friends, parents, other agencies) that raises a concern about the student's capacity to continue his or her studies. If such reported conduct raises a concern about the safety of the student or the safety of others that the student may have contact with at the institution or includes behavior that could indicate an issue with moral, ethical, or personal values that would preclude satisfactory functioning in the discipline, an investigation may be conducted and action taken on the basis of the investigation.
- b) If a student is charged with an offense in the civil justice system and the University becomes aware of and verifies this circumstance through self-report of the student or a reliable, verified source, the University may elect to not pursue an investigation until the outcome of the civil court proceeding is known, unless the alleged offense is such that allowing the student to continue his or her studies could be detrimental to the safety of patients or others, as determined by the OUHSC Vice Provost for Academic Affairs.
- c) If a student is charged with a criminal offense, he or she is obligated to report this to the college Dean immediately. If a matriculating student has been charged with a criminal offense between the time he/she wrote an application and the time he/she arrives at school, or at any time while a student, he/she must inform the Dean of the charges before the first day of classes. If the University later discovers that a student withheld disclosure of a criminal charge, he/she may be subject to immediate dismissal by the Dean. Depending upon the nature of the criminal charge, the student may not be allowed to continue the course of study until there is final disposition of the criminal charge either by verdict, plea, or dismissal. This is consistent with the obligation of the University to ensure the safety of patients and others.

OUHSC students are expected to hold themselves to the highest standards of ethical and professional conduct. As part of their education and training, these students must begin to practice professional behaviors that they will uphold for the rest of their professional lives. Fundamental attributes of professionalism and ethical and professional behavior include, but are not limited to, honesty and integrity, dedicated desire to learn and respect for the academic process, concern for the welfare of patients and their families, a commitment to patient confidentiality, respect for the rights of others, emotional maturity, and self-discipline.

While not all inclusive, examples of unacceptable ethical and professional behavior include but are not limited to the following:

- Lack of integrity and honesty (e.g., lying about, misrepresenting, or not reporting information about care given, clinic errors, or any action related to clinic functions; acting outside the scope of his/her role in a clinical, academic, professional or administrative setting). **NOTE:** Allegations of academic misconduct, including but not limited to cheating, plagiarism, fabrication, fraud, destruction, bribery or intimidation, assisting others in any act proscribed by the Academic Misconduct Code, or attempting to engage in such acts, as defined under the Academic Misconduct Code are addressed in the Academic Misconduct Code.
- Failure to demonstrate professional demeanor or concern for patient safety (e.g., use of offensive language and gestures, being under the influence of alcohol or drugs in the educational or clinic setting)
- Unmet professional responsibility (e.g., not contributing to an atmosphere conducive to learning due to poor attendance, punctuality issues, and/or distracting, or insensitive behavior in class, lab, or clinic; poor personal hygiene; needing continual reminders to complete responsibilities in a timely manner; not responding to requests [written, verbal, e-mail, telephone] in a timely manner; breaching patient confidentiality)
- Exhibiting disruptive behavior (e.g., pushing, punching, throwing things, making inappropriate gestures, threats, verbal intimidation, language that belittles or demeans, negative comments with racial, ethnic, religious, age, gender or sexual overtones, making impertinent or inappropriate written entries in the medical record or making statements attacking students, faculty or staff)
- Lack of effort toward self-improvement and adaptability (e.g., resistant or defensive in accepting constructive criticism; remaining unaware of own inadequacies; resisting considering or making suggested changes to improve learning, behavior, or performance; not accepting responsibility for errors or failure; abusive or inappropriately critical, arrogant)
- Lack of respect for cultural diversity (e.g., inappropriate interpersonal interaction with respect to age, culture, race, religion, ethnic origin, gender, sexual orientation)
- Exhibiting diminished relationships with members of the health care team (e.g., not functioning appropriately within the health care team or not demonstrating the ability to collaborate with fellow students, staff)
- Exhibiting diminished relationships with patients and families (e.g., insensitive to the patient's or family's needs, inappropriate personal relationships with patients or members of their families, lack of empathy)
- Failure to maintain and safeguard the confidentiality of patient and research participant information, including paper and electronic records, verbal communications, and social networking and electronic media sites
- Failure to comply with college and program academic and clinical-related requirements (e.g., training, immunization, HIPAA)

### **C. Procedures for Handling Breaches of Ethical and Professional Behavior Standards**

Violations of this Policy will be handled as follows:

#### **1. Who May File**

Complaints about possible breaches of ethical and professional behavior may be initiated by individuals within the College or Department/Section (students, faculty, staff, and administration) or

by external sources (patients, families, visitors, extramural rotation sites, other agencies with which a student has had contact). If reported elsewhere, the initial complaint should be promptly forwarded to the student's program director or assistant/associate dean of student affairs or directly to the Dean of the College. The formal complaint must be in writing, with a brief description of the evidence, and submitted within 10 University business days after discovery of the incident, exclusive of University breaks and academic intercessions.

## 2. **Complaints Review and Investigation; Sanctions**

Any egregious unethical or unprofessional behavior must be reported to the Dean and could result in the student's being immediately suspended or dismissed from the program. Examples of egregious or unprofessional behavior would include but are not limited to patient endangerment, unacceptable patient management, inappropriate alteration of patient records, or behavior that poses a danger to persons or property or an ongoing threat of or disruption of the academic process. The Dean must consult with the Vice Provost for Academic Affairs, Legal Counsel and other officials as appropriate to determine if the matter should proceed under other applicable University policies. Should the Dean take the immediate action of suspending or dismissing a student from the program, the student may request a hearing under the Academic Appeals Board process, as described in Section 3 below.

For less egregious unethical and unprofessional behavior, rather than filing a formal complaint about professional behavior, the faculty member or program director may conclude (but is not required to conclude) that the incident is more appropriately treated as an instructional rather than a disciplinary matter. In such cases, the faculty member or program director will contact the student directly to discuss the issue, provide feedback, and make suggestions for how the behavior at issue can be improved. If the faculty member or program director believes that an effective resolution resulted from meeting with the student, no further action is required. The incident shall be documented in the student's file and may be used in the future, where applicable, to indicate a pattern, practice, failure to benefit from redirection.

In the event that the faculty member or program director determines that giving the student feedback about issues of concern was not successful in resolving the issue or if the behavior is of a significant or serious nature (but not warranting immediate suspension or dismissal), a Professionalism Concerns Report (PCR) will be completed by the faculty member or program director. The focus of this PCR process is educational, with the goal of helping the health professions student move forward successfully in coursework, clinical practice experience, and interactions within the Health Sciences Center community.

A PCR must be filed with the college's assistant/associate dean of student affairs within 10 University business days from the time the behavior was observed or reported, exclusive of University breaks and academic intercessions.

Following receipt of the PCR, the college's assistant/associate dean of student affairs will meet with the student to discuss ways in which the unprofessional behavior can be improved, thus allowing the student adequate opportunity to make appropriate behavioral changes. The student will be asked to sign the PCR to acknowledge that the PCR has been reviewed and may respond to the PCR by providing additional written information. The college's assistant/associate dean of student affairs may require remedial action, such as a corrective action plan, mandated counseling or probationary status, which shall be noted on the PCR. The PCR is then forwarded to the college Dean and to the Graduate College Dean, if applicable.

In the event that a student fails on three occasions to meet the expected standards of ethical and professional conduct as documented by PCRs and/or documentation in the student's file, the assistant/associate dean of student affairs or if appropriate, the Graduate College Dean, has the option to place the student on probation, suspend the student, or dismiss the student, depending on the nature of the student's behavior. Prior to any such action, the student affairs dean, Graduate College Dean, or other appropriate administrator will meet with the student, identify the concerns, identify the anticipated action, and provide the student an opportunity to present his/her version of events leading to the situation. Within 3 days of such meeting, the student will be provided notice of the

action taken. If dissatisfied with the action taken, the student may request a hearing in accordance with Section 3 below.

**3. Appeal Process**

Students who are dismissed or suspended from their program may request a hearing under the OUHSC Academic Appeals Policy (Section 4.16 and Appendix C of the OUHSC Faculty Handbook).

A student may not appeal an action taken simply because he/she does not agree with it.

(Regents 12-1-11)

## C.4 CRIMINAL BACKGROUND CHECKS POLICY FOR CURRENT STUDENTS AND CONDITIONALLY ACCEPTED APPLICANTS – HEALTH SCIENCES CENTER

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### I. SCOPE/DESIGNATED PROGRAM

This policy is intended for all University of Oklahoma Health Sciences Center (“University or “OUHSC”) conditionally accepted applicants and enrolled HSC students. A national Criminal Background Check (“CBC”) is required of each conditionally accepted applicant prior to full admission and at least annually thereafter by national CBC or written attestation, as specified pursuant to the provisions of this policy for every continuing student. Applicants waiting for confirmation of conditional acceptance should check with the college/program to which they are applying for specific CBC requirements and timelines. Enrolled students should check with their college/program for specific CBC requirements.

### II. POLICY

Conditionally accepted applicants and enrolled students must undergo a national Criminal Background Check (“CBC”) prior to the first day of class and at least annually thereafter. Conditionally accepted applicants who have an adverse finding on a CBC report may be denied full admission/matriculation, and current students may be disciplined in accordance with established University policy.

### III. DEFINITIONS

Adverse Finding. A term describing a Criminal Background Check (“CBC”) report of anything other than “clear” or “no findings” or other similar language used by the approved vendor that issued the CBC report.

Break in Enrollment. A term describing non-attendance of one full semester (Fall, Spring, Summer) or more.

Conditional Acceptance. A term describing an applicant’s status when basic review criteria have been met at the time an admission offer is extended but prior to full admission to an academic program.

Full Admission. A term indicating that a student has met all program admission requirements and has been cleared of any Adverse Findings that would prevent eligibility for enrollment.

Full Standing. A term describing a student’s eligibility to enroll in and to attend classes for at least one academic semester and indicating the student meets academic standards to remain enrolled and attend classes during that semester.

Matriculated. A term describing students enrolled in a University program as degree candidates.

### IV. RATIONALE

The University is committed to accepting and educating students who meet established standards for professionalism, are of high moral character, and are suitable candidates for professional certification or licensure. The purposes of conducting a Criminal Background Check (“CBC”) are multiple:

1. Health care providers and health research scientists are entrusted with the health, safety, and welfare of patients, research participants, and health services and scientific resources; have access to confidential and sensitive information; and operate in settings that require the exercise of good judgment and ethical behavior. Thus, an assessment of a student’s or conditionally accepted applicant’s suitability to function in clinical and research settings is imperative to ensure the highest level of integrity in students in the college/program.
2. Clinical facilities are increasingly required by their accreditation agencies to obtain a CBC for security purposes on individuals who supervise care, render treatment, and provide services within the facility.
3. Clinical rotations are an essential element in certain degree program curricula. Students who cannot participate in clinical rotations because of criminal or other adverse activities reported in CBCs are unable



to fulfill the requirements of a degree program. Therefore, these issues must be resolved prior to a commitment of resources by the University, student, or conditionally accepted applicant.

4. Scientists are entrusted with the oversight and the safety of laboratory materials, research animals and human research participants, and the welfare of laboratory and other research personnel. They have access to chemicals, devices, and other materials in settings that require the exercise of good judgment and ethical behavior. Thus, an assessment of suitability to function in a research setting, whether laboratory, clinical, or community based, is imperative to ensure the highest level of integrity in biomedical and population health sciences academic programs.
5. Health professionals and biomedical and population health scientists are increasingly invited to engage in inter-professional and translational work through team science projects. Thus, it is imperative to promote and underscore a shared expectation for demonstration of the highest level of integrity, good judgment, and ethical behavior.

## **V. TIMING AND PROCEDURES FOR THE CRIMINAL BACKGROUND CHECK (“CBC”)**

### **A. Conditionally Accepted Applicants: (as defined in Scope/Designated Programs)**

1. The CBC may not be used as a component of the application, interview, or decision-making process regarding conditional acceptance to a designated program. It is a mandatory component of the post-conditional acceptance matriculation process.
2. Conditionally accepted applicants will be provided with the necessary procedures for completing the CBC by the college/program designee.
3. Conditionally accepted applicants must do the following prior to the first day of classes (or sooner if so specified by the college/program) to be eligible for full admission
  - a) Complete and authorize the release of the CBC Consent and Release Form; and
  - b) Complete the CBC with sufficient time for the documentation to be evaluated by the respective college/program designee prior to the first day of classes.
4. Any conditionally accepted applicant who fails to complete the above will not be allowed to begin classes and may jeopardize full admission status to his/her respective college/program.
5. Procedures for reviewing CBC results are outlined in Section XI.

### **B. Enrolled Students: (as defined in Scope/ Designated Programs)**

1. Enrolled students will, at minimum, complete CBCs each year at a time designated by their respective college/program or more frequently if required by clinical rotation sites or by the University.
2. The respective college/program will provide students with the necessary procedures and consent forms to complete a CBC.
3. Any student who fails to adhere to the CBC deadline set by his/her college/program will be suspended from all classes, rotations, or practicums until clearance documentation is provided in accordance with the respective college/program procedures. Due to the pace and rigor of these programs, to remove the suspension, an enrolled student must complete the CBC and provide clearance documentation within five (5) University business days of the date of suspension or his/her enrollment may be terminated.

## **VI. IDENTIFICATION OF VENDORS**

The University will designate approved vendors to perform the Criminal Background Checks (“CBCs”) and will recognize CBCs from vendors that are approved by the centralized application services with which it participates. Results from any entity other than those designated by the University or a participating centralized application service will not be accepted. The list of approved vendors will be maintained by the Office of Academic Affairs/Admissions and Records.

## **VII. ALLOCATION OF COST**

Conditionally accepted applicants and enrolled students must pay the costs associated with procuring a Criminal Background Check (“CBC”).

## **VIII. PERIOD OF VALIDITY**

The University will generally honor criminal background checks for a period of one year, but a CBC may be necessary more frequently, depending on class, rotation, or practicum site requirements. Any student who has a break in enrollment may be required to complete a CBC before he/she is permitted to re-enroll in any courses. The University considers a student on Leave of Absence to be in continuous enrollment.

## **IX. SCOPE OF CRIMINAL BACKGROUND CHECKS (“CBC”)**

A. The CBC may include but is not limited to the following:

- Social Security Number Verification
- County Criminal Records Searches
- Statewide Criminal Records Search
- Federal Criminal Records Search
- National Criminal Database Search
- National Sexual Offender Database Search
- U.S. Department of Health and Human Services/Office of Inspector General List of Excluded Individuals/Entities Search
- Search for Dishonorable Discharge from the Armed Forces
- General Services Administration List of Parties Excluded from Federal Programs
- US Treasury, Office of Foreign Assets Control (OFAC), List of Specially Designated Nations (SDN)
- State Exclusion List

B. The CBC for students who are licensed or certified caregivers may include the above and may also include the following:

- Education Verification (highest level)
- Professional License Verification
- Certifications & Designations Check
- Professional Disciplinary Action Search

## **X. REPORTING FINDINGS AND ENROLLED STUDENT/CONDITIONALLY ACCEPTED APPLICANT ACCESS TO CRIMINAL BACKGROUND CHECK (“CBC”)**

The vendor will provide the conditionally accepted applicant or enrolled student with the CBC results. The vendor will also provide the respective college/program with the CBC results for conditionally accepted applicants and enrolled students.

## **XI. WRITTEN ATTESTATION IN LIEU OF AN ANNUAL CRIMINAL BACKGROUND CHECK (“CBC”)**

A college dean may request approval from the Vice Provost for Academic Affairs (VPAA) for an enrolled student or group of students to be permitted to complete and sign an individual, written attestation to affirm that there has been no change in a student’s CBC status during the period between the date of a CBC conducted following conditional admission and the attestation date, in lieu of completing an annual CBC. Such request must be submitted

at least 45 days prior to the enrollment deadline for the next academic year. Attestation documents will be maintained and reported to the VPAA by the college in the same manner as specified for CBC reports and review procedures. The VPAA reserves the right to require completion of a CBC subsequent to approving a written attestation in lieu of a CBC.

## **XII. PROCEDURES FOR REVIEWING CRIMINAL BACKGROUND CHECK ("CBC")**

### **A. Conditionally Accepted Applicants: (as defined in Scope/ Designated Programs)**

1. Each college/program shall establish a Criminal Background Review Committee (CBRC)\*. The respective college/program will review those CBC reports that identify an adverse finding and refer those to its CBRC. \*The Graduate College will not establish its own CBRC, however, in any CBC matter that involves a conditionally accepted Graduate College applicant, the Graduate College Dean shall designate a faculty member, such as the Graduate Liaison, to serve on that specific CBRC.
2. The CBRC must consist of at least the following University employees:
  - a) Assistant/Associate Academic Dean
  - b) Assistant/Associate Student Dean
  - c) One member from the College/Program Admissions Committee
3. The CBRC will review each referred CBC to determine the potential impact that any adverse findings might have on the conditionally accepted applicant's ability to be fully admitted into the college/program or to complete the program, if admitted.
4. If the CBRC determines a CBC includes an adverse finding that:
  - a) was previously undisclosed,
  - b) is more egregious than was disclosed,
  - c) may preclude the acceptance or participation in educational, practicum or rotation activities, or
  - d) conflicts with what was reported by the applicant on application materials,

then the CBRC may, by majority vote, recommend that the respective college/program rescind the conditional offer of admission. Such recommendation must be made in writing to the University designee with authority to rescind admission on behalf of the respective college/program.
5. If the conditional offer of admission is rescinded, the University designee making that decision must notify the applicant in writing. The notice must include the reason for rescission and inform the applicant that he/she has five (5) University business days to submit a written response to the University designee describing any mitigating factors he/she would like the respective college/program to consider.
6. The University designee will consider timely submitted responses and notify the applicant in writing whether the rescission decision stands or is reversed. If the rescission stands, that decision is not appealable. If the rescission is reversed, the University designee must inform the applicant in writing of his/her current admission status.

### **B. Enrolled Students: (as defined in Scope/Designated Programs)**

1. Each College shall establish a Criminal Background Review Committee (CBRC)\*. The CBRC will consist of at least three members designated by the Dean of the College, one of whom will be the Assistant/Associate Dean to serve as chair, plus two other full-time faculty from the College. \*The Graduate College will not establish its own CBRC, however, in any CBC matter that involves a

currently enrolled Graduate College student, the Graduate College Dean shall designate a faculty member, such as the Graduate Liaison, to serve on that specific CBRC.

2. The respective college's CBRC will receive all CBC reports that are referred for review.
3. The CBRC will determine the potential impact that any adverse findings might have on an enrolled student's ability to complete or remain in the program.
4. If the CBRC determines a CBC includes an adverse finding that:
  - a) violates University policy,
  - b) was not self-disclosed as required by University policy,
  - c) may preclude acceptance or participation in classes, rotations or practicum activities, or
  - d) will impede the student's ability to become licensed or certified in his/her profession,

Then the CBRC Chair will present the CBRC findings to the Dean of the College who will confer with the Vice Provost for Academic Affairs (VPAA) and Legal Counsel on the appropriate action and applicable University policy.

5. The Dean will notify the student of any proposed disciplinary action in accordance with procedures under the applicable University policy. Actions may include probation, suspension, dismissal or expulsion.
6. A student's right to appeal the decision is governed by the applicable University policy.

### **XIII. FALSIFICATION OF INFORMATION**

Falsification of information submitted as part of the application process or a Criminal Background Check or written attestation can result in immediate removal of the applicant from the conditionally accepted applicant list or dismissal of an enrolled student from the degree program.

### **XIV. CONFIDENTIALITY OF RECORDS**

The University maintains Criminal Background Check ("CBC") reports and all records pertaining to the results in confidence, unless release is otherwise required by law. Information about the Family Educational Rights and Privacy Act (FERPA) is available at: <http://www.ed.gov/policy/gen/guide/fpcr/ferpa/index.html>.

### **XV. RECORDKEEPING**

Criminal Background Check reports and all records pertaining to the results will be maintained in the conditionally accepted applicant's file or enrolled student's academic file and are retained in the respective college/program for the minimum timeframe listed below, unless otherwise required by law:

- Enrolled Students – Five (5) years after graduation
- Conditionally Accepted Applicants – Two (2) years from date of application (provided no anticipated legal action).

### **XVI. PERIODIC REVIEW**

The CBRC review process, procedures, and outcomes are subject to periodic review. Each college/program will submit an annual report to the Vice Provost for Academic Affairs (VPAA) describing the adjudication of conditionally accepted applicants and enrolled students who were subject to a CBRC review. The VPAA will review the report and notify the college/program of suggested or required procedural improvements. Required procedural improvements must be addressed in writing to the VPAA within ten (10) University business days.

(Regents, 6-25-14, 5-7-15, 9-14-17)

## **C.5 STUDENT RIGHTS AND RESPONSIBILITIES CODE 2017-18**

### **The University of Oklahoma**

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The purpose of the Student Rights and Responsibilities Code (referred to as the “Code” or “this Code”) is to establish specific student rights and responsibilities while maintaining an environment conducive to the University of Oklahoma’s mission.

#### **I. Student Rights**

Students of the University of Oklahoma are guaranteed certain rights by the constitutions of the United States and the State of Oklahoma and the University of Oklahoma Student Government Association. In recognition of those rights and in keeping with the values underlying them, the University of Oklahoma respects the following student rights:

1. To pursue an education as long as the University’s applicable academic standards, policies, regulations and applicable laws are followed;
2. To certain procedural due process, including notice and an opportunity to be heard;
3. To a prompt, fair, and impartial process during University investigations and proceedings, from an initial investigation to the final result;
4. In cases involving sexual misconduct, the complainant/reporting party and the respondent have the right to have the investigation and proceedings conducted by officials with annual training on issues related to dating violence, domestic violence, sexual violence, and stalking, and on how to conduct an investigation and hearing process that protects the safety of victims and promotes accountability;
5. To request appropriate action from the administration for any violation of a right guaranteed by this Code;
6. To establish or disseminate publications free from any censorship or other official action controlling editorial policy or content, in accordance with applicable regulations and University policy;
7. To invite and hear any speaker of choice on any subject, in accordance with applicable regulations and University policy;
8. To use campus facilities, in accordance with applicable regulations and University policy;  
[http://www.ou.edu/content/studentaffairs/services/policies\\_and\\_forms.Html](http://www.ou.edu/content/studentaffairs/services/policies_and_forms.Html)  
<http://www.ouhsc.edu/policy/>
9. To peaceably assemble, to demonstrate, inform, or protest, in accordance with applicable regulations and University policy;
10. To be secure in his/her possessions, against invasion of privacy, and unreasonable search and seizure;
11. To form, join and participate in any student organization or group without regard to race, color, national origin, sex, sexual orientation, gender identity, gender expression, genetic information, age (40 or older), religion, disability, political beliefs or status as a veteran.  
[<http://www.ou.edu/home/eoo.html> and <http://www.ou.edu/home/misc.html>] Provided, in accordance with Oklahoma state law, a religious student association may choose to limit its membership or leadership based on the sincerely held religious beliefs, observances, or practices of the group; and
12. Not to be charged more than once for one incident by the Office of Student Conduct.

#### **II. Student Responsibilities**

Students of the University of Oklahoma are responsible for complying with all local, state, and federal laws. As members of the University community, students are also responsible for familiarizing themselves with University policies and regulations when applicable.

In addition, students involved in disciplinary proceedings initiated under this Code, whether as parties, witnesses, or panelists, have a duty to cooperate and discuss the incident with appropriate University officials, adhere to stated deadlines, attend scheduled meetings, provide documentation as requested and participate in all University proceedings. Failure to fulfill these responsibilities may result in a decision being made without the benefit of the

student's participation, or may result in a student being charged with failing to comply with the direction of a University official.

Students are responsible for meeting the University's minimal standards of appropriate conduct and may be disciplined for engaging in the following types of prohibited conduct:

1. **Abusive conduct**: Unwelcome conduct that is sufficiently severe and pervasive that it alters the conditions of education or employment and creates an environment that a reasonable person would find intimidating, harassing, or humiliating. The frequency of the conduct, its severity, and whether it is threatening or humiliating are factors that will be considered in determining whether conduct is abusive. Abusive conduct includes verbal abuse, physical abuse, or holding a person against his or her will. Simple teasing, offhanded comments and isolated incidents (unless extremely serious) will not amount to abusive conduct.
2. **Alcohol violations**: Possessing, using, providing, manufacturing, distributing, or selling alcoholic beverages on or off campus in violation of law or University policies.
3. **Arson**: The willful setting fire to or burning of a structure or its contents or the property of another.
4. **Dishonesty**: Manufacturing, possessing, providing, making, or using false information or omitting relevant information to University officials or on University applications, forging, altering or misusing a University record or document, initiating a false report, and knowingly using or possessing forged, altered or false documents or records.
5. **Disruption or obstruction of a University activity**: Interference with, obstruction or disruption of University activities such as teaching, research, recreation, meetings, public events and disciplinary proceedings.
6. **Drug violations**: Possessing, using, providing, manufacturing, distributing, or selling drugs or drug paraphernalia in violation of law or University policies. This includes the use or possession of prescription drugs other than by the person prescribed or for a purpose other than what was prescribed.
7. **Ethical or professional code violations, violation of licensure board rules and regulations, state and federal laws, and/or other applicable regulatory or privileges issues**: as defined by the student's College or professional association or licensure board, as may be applicable to the student(s), or applicable laws or regulations.
8. **Failing to abide by or complete a University sanction in a satisfactory manner**: Failure to adhere to sanctions or engaging in other prohibited conduct while on disciplinary probation or suspension.
9. **Failure to comply with the direction of a University official who is performing his or her duties**. This responsibility includes complying with faculty/staff requirements and directions of study abroad programs, including off-limits designations and other restrictions or instructions.
10. **Failure to keep records up to date**: Failing to keep Admissions and Records notified of current school and/or permanent directory information, including email information.
11. **Hazing**: Any action or situation that recklessly or intentionally endangers the mental or physical health, safety, or welfare of an individual for the purpose of initiation, participation, admission into or affiliation with any organization at the University, as defined by Oklahoma or federal law.
12. **Interfering with, obstructing or disrupting police or fire responses**: Tampering with, impairing, disabling, or misusing fire protection systems such as smoke detectors, fire extinguishers, sprinklers, or alarms; failing to evacuate during a fire alarm; resisting arrest; failing to abide by the directions of police or fire personnel.
13. **Mental harassment**: Intentional conduct that is so extreme and outrageous that a reasonable person would not tolerate it.
14. **Misuse of computing facilities**: Misusing computer labs and equipment as well as technology resources including the Internet, University networks, computer software, data files belonging to others, email addresses and accounts belonging to others, University databases and violating University Information Technology computing policies.
15. **Misuse or defacement of University property**: Damage to or misuse of equipment, property, furniture, facilities and buildings belonging to the University.
16. **Misuse or defacement of property belonging to another.**

17. **Retaliation**: Taking any adverse action against a person because of, or in retaliation for, the person's reporting of a crime or violation of University policy, or in assisting in such a claim.
18. **Discrimination/Harassment (not gender-based)**: Violating the University of Oklahoma Non-Discrimination Policy, which prohibits discrimination and harassment on the basis of race, color, religion, political beliefs, national origin, age (40 or older), genetic information, disability, or veteran status.  
Possible violations occurring under this section are investigated by the University's Equal Opportunity Office. The University of Oklahoma Non-Discrimination Policy may be found at: <http://www.ou.edu/eoo/policies-procedures/non-discrimination>.
19. **Sexual Harassment/Misconduct**: Violating the University of Oklahoma Sexual Misconduct, Discrimination, and Harassment Policy. The following types of conduct, as defined in the Sexual Misconduct, Discrimination, and Harassment policy are all prohibited by this Code: (A) Sex Discrimination, (B) Sexual Harassment, (C) Retaliation, (D) Sexual Violence, (E) Sexual Exploitation, (F) Dating Violence, (G) Domestic Violence, and (H) Stalking (gender based).  
Possible violations occurring under this section are investigated by the University's Sexual Misconduct Office. The University of Oklahoma Sexual Misconduct, Discrimination, and Harassment Policy may be found at: <http://www.ou.edu/home/misc.html>
20. **Stalking (not gender based)**: Engaging in a course of conduct directed at a specific person that would cause a reasonable person to fear for the person's safety or the safety of others, or suffer substantial emotional distress.
21. **Theft**: Possessing property that is known or should have been known to be stolen, taking property without the consent of the owner, even with intent to return the property, or obtaining property by false pretenses.
22. **Unauthorized entry or exit or attempted entry or exit**: Entering or exiting or attempting to do the same without authority or consent with respect to University facilities, property belonging to another, and fraternity and sorority houses.
23. **Violation of local, state, federal law or University regulation or policy**.
24. **Weapons violations, possession of weapons, firearms, explosives, fireworks, ammunition or incendiary devices on campus**: Actual or constructive possession or control of any weapon, including but not limited to air pistols, air rifles, lock blades, fixed blades, knives with a blade longer than four inches, blackjacks, metal knuckles, chemical substances, bombs, or any other device found to be a violation of this Code by Student Conduct. Instruments designed to look like any of the above are included in this prohibition.

### III. Disciplinary Sanctions

Students of the University of Oklahoma who engage in prohibited conduct are subject to the following disciplinary sanctions:

1. **Verbal Warning**: A verbal notice that the behavior was inappropriate.\*
2. **Written Warning**: A written statement that the behavior was inappropriate, which will remain on the student's University disciplinary record for a specified period of time or until the student meets certain conditions.\*
3. **Disciplinary Probation**: A written statement that the behavior was inappropriate and should subsequent violations occur, the University will take more serious conduct action up to and including suspension or expulsion. This can include exclusion from University affiliated entities, including student organization activities, for a period of time or until the student meets certain conditions. Disciplinary probation will remain on the student's disciplinary record for a specified period of time or until the student meets specified conditions.\*
4. **Educational Sanctions**: A specific number of hours of community service, completion of a reflection or research paper, attending a class, program or lecture, attending counseling, or other actions.\*
5. **Restitution**: Repayment for damages or misappropriation of property. This may include monetary compensation or other related service(s), such as cleaning or restoration.\*
6. **Administrative Fee**: Administrative fees for educational programs and presentations as well as policy related administrative costs, which are assessed directly to the student's Bursar account. A financial



stop may be placed on the student's record if the student fails to pay the administrative fee by the due date. This stop may prevent the student from registering for future terms or adding or dropping courses.\*

7. **University-Owned Housing Reassignment or Termination:** Reassignment to another University-owned housing unit, exclusion from certain University-owned properties or termination of the student's housing agreement.
8. **Administrative Trespass:** Denial of access to all or a portion of campus, except for limited periods and specific activities with the permission of the appropriate University official, as designated by the University Vice President for Student Affairs or other appropriate administrative official vested with such authority. Should the student enter campus without written permission, the appropriate University official or the campus police may take action.
9. **Suspension:** Exclusion from the University and all campuses governed by the Board of Regents of the University of Oklahoma for a specific period of time or until the student meets certain conditions, following which the student may be permitted to re-enroll or apply for readmission to the University, as applicable.
10. **Expulsion:** Exclusion from the University and all campuses governed by the Board of Regents of the University of Oklahoma for an indefinite period of time, a record of which remains on file permanently.
11. **Restriction or Denial of University Services:** Restricted from use or denial of specified University services, including participation in University activities.
12. **Delayed Conferral of Degree:** Delay of issuance of a student's diploma for a specified period of time or until the student meets certain conditions.
13. **Strike:** The University's official recognition of a student's or organization's violation of the University of Oklahoma's Norman Campus Alcohol Policy.\*

\* Except in conjunction with other disciplinary measures, these sanctions are not appropriate if a student is found responsible for the following violations of the Sexual Misconduct, Discrimination, and Harassment Policy: Sexual Violence, Dating Violence, and Domestic Violence.

#### **IV. Student Conduct Proceedings**

Student Conduct Proceedings are the University's means of affording procedural due process to students who may be sanctioned for engaging in prohibited conduct. The Student Rights and Responsibilities Code Procedures, attached hereto as Appendix A, provide a step-by-step explanation of those proceedings.

#### **V. Direct Administrative Action**

A Direct Administrative Action (DAA) is an action that places immediate restrictions upon a student's rights within the University community, up to and including a removal from the University community. A DAA is not a final disciplinary sanction; it is a temporary measure that may be undertaken during the pendency of appropriate due process. A DAA may be imposed only by the UVPSA or other appropriate official vested with such authority when necessary for the welfare or safety of the University community; to maintain order on the campus and preserve the orderly functioning of the University; to stop or prevent interference with the public or private rights of others on University premises; to stop or prevent actions that threaten the health or safety of any person; or to stop or prevent actions that destroy or damage property of the University, its students, faculty, staff, or guests.

When a DAA is imposed, the Office of Student Conduct shall review the facts and circumstances to determine whether Student Conduct Proceedings should be initiated, whether to recommend to the UVPSA or designee that the DAA should be lifted, or whether some other University action is appropriate.

#### **VI. Disciplinary Holds: Student Records, Student Transcripts, and Student Registration**

The University may place a disciplinary hold on a student's records during the pendency of Student Conduct Proceedings. A disciplinary hold prohibits a student from registering for classes until the Student Conduct Proceedings, including any review procedure, are complete. Upon conclusion of Student Conduct Proceedings, the University may continue a disciplinary hold on a student's records until the student satisfactorily completes all sanctions.



The University may place a disciplinary hold on a student's record if a student is suspended as part of the sanctions, prohibiting a student from being admitted to or registering for classes at any campus governed by the Board of Regents of the University of Oklahoma. A disciplinary hold shall remain in effect until the suspension period is over, the student has complied with all conditions and/or sanctions, and has reapplied and been readmitted.

Records relating to non-academic student conduct matters are a part of the student's overall education record; however, disciplinary charges and sanctions are not noted on official student transcripts, except where academics are incidentally affected (i.e., the transcript for a student suspended during a semester after the add/drop deadline will reflect withdrawal from any courses in which the student is enrolled).

## **VII. Authority**

The Board of Regents of the University of Oklahoma is charged in the Constitution of the State of Oklahoma with governing the University, and nothing in this Code prevents the Board of Regents from establishing or amending rules or procedures in order to fulfill its responsibility. The UVPSA shall be vested with the authority to establish and operate a Student Conduct Office. The UVPSA or designee has day-to-day responsibility for disciplinary matters and maintenance of records of all actions taken.

The University will initiate Student Conduct Proceedings under this Code within one year from the date that the conduct becomes known to the Student Conduct Office. Provided, however, Student Conduct Proceedings shall be initiated immediately upon receipt of findings from the Office of Institutional Equity. Student Conduct Proceedings may be carried out prior to, simultaneously with, or following civil, criminal or licensure proceedings, at the discretion of the University.

## **VIII. Review of the Student Conduct Code**

The UVPSA, in collaboration with each campus Provost, will appoint at least five (5) persons, including campus Student Conduct representatives and presidents of each campus student government association to review and make recommendations for the revision of this Code every three (3) years, or sooner, if needed. The Committee will solicit input from representatives of the legislative bodies of each campus, and campus student associations as needed. The Committee shall share this input, together with any other observations or findings of the Committee, with the UVPSA. The UVPSA shall consider all input and recommend changes, if any, to the Board of Regents.

The UVPSA, in consultation with the Office of Legal Counsel, is authorized to amend this Code as may be required for compliance with applicable federal, state, local law, applicable regulations, or University policy.

This Code and the Procedures shall be effective beginning July 1, 2017.

(Regents, 6-20-17, 6-19-18)

## **C.6 STUDENT RIGHTS AND RESPONSIBILITIES PROCEDURES 2017-18**

### **The University of Oklahoma**

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#### **I. Procedural Flexibility**

For the purposes of these procedures, a “day” shall mean a University business day unless otherwise stated. The Chair of the Hearing Panel may extend or accelerate existing timelines, as well as establish and enforce additional deadlines not stated in these procedures as necessary for prompt and effective case resolution. The University Vice President for Student Affairs or authorized designee (“UVPSA”), in consultation with legal counsel, may modify these procedures at any time, as a whole or on a case-by-case basis, where necessary to comply with applicable law, regulation, guidance, or as deemed appropriate. Technical departures from these procedures will not invalidate a decision, recommendation, or proceeding unless they have prevented a fair determination of the issues.

#### **II. Commencement of a Conduct Process**

Allegations that a student has engaged in conduct that, if true, would constitute Prohibited Conduct under the Student Code of Rights and Responsibilities (“the Code”) should be referred to the Office of Student Conduct. The Director of Student Conduct or designee (“Student Conduct Officer”) shall review the allegations and determine whether to initiate disciplinary proceedings (“Student Conduct Proceedings”). If the Student Conduct Officer determines that, even if true, the alleged conduct would not constitute Prohibited Conduct under the Code, the matter shall be concluded. If the Student Conduct Officer determines that the alleged conduct, if true, could constitute Prohibited Conduct under the Code, he or she shall notify the student of the allegations and afford the student an opportunity to be heard, as set forth more fully below.

##### **A. Student Conduct Notice**

A Student Conduct Notice shall be delivered to the student who is the subject of the allegations via the student's University email address. Notice to the student will be considered furnished once a Student Conduct Notice is delivered to the student's University email account. The Student Conduct Notice shall include:

1. A description of the alleged misconduct;
2. A citation to the Code provisions that are alleged to have been violated;
3. A brief explanation of the Student Conduct process; and
4. An explanation that the student must set up an administrative review meeting (“Mandatory Meeting”) with the Student Conduct Officer within five (5) days, or such shorter time as may be specified.

A “no contact” order may be issued in the Student Conduct Notice. A “no contact” order is a non-disciplinary directive to avoid contact with one or more members of the University Community during an investigation and any attendant Student Conduct Proceedings. If a “no contact” order is issued, it is the responsibility of the student not to have any contact with the individual(s) named, directly or through third parties, as specified in the order. Failure to comply with this order may result in disciplinary action.

##### **B. Mandatory Meeting**

The Student Conduct Officer will meet with the student to explain the Student Conduct process, allow the student an opportunity to respond to the allegations contained in the Student Conduct Notice, and answer any questions the student may have. The student may be accompanied by an advisor or attorney of his or her choosing.

When the Student Conduct Officer determines that prompt action is essential (e.g., during University orientation, toward the end of the semester, the student is nearing graduation, or there is substantial concern for the health, safety, or welfare of a member of the University community as with a Direct Administrative Action), the Student Conduct Officer may require that the charged student meet within one (1) day of receipt of the Student Conduct Notice if the student resides on campus, or two (2) days

if the charged student resides off campus. The University may give notice in these cases by the telephone number provided in official University records or by the student's University email address.

During the Mandatory Meeting, the Student Conduct Officer shall consider the student's response to the allegations and any additional information the student has presented. The Student Conduct Officer shall then determine whether to charge the student with engaging in Prohibited Conduct under the Code. During the Mandatory Meeting, or as soon afterward as is reasonably possible, the Student Conduct Officer may:

- determine not to proceed with charges against the student on the basis that the student did not engage in Prohibited Conduct under the Code;
- negotiate a resolution with the student, whereupon the matter shall be concluded, subject to the student's timely completion of the agreed terms of the negotiation;
- determine to proceed with charges against the student as set forth in the Student Conduct Notice; or
- prepare a modified Notice of Student Conduct, based upon the student's response or other information obtained, and proceed with charges against the student.

Upon determining to proceed with charges, the Student Conduct Officer will recommend disciplinary sanctions. If the charged student denies having engaged in Prohibited Conduct under the Code, or believes that the recommended disciplinary sanction is excessive, the student may request a hearing in writing within two (2) days of the Mandatory Meeting.

#### **1. Acceptance of Responsibility**

If, during the Mandatory Meeting, the student agrees that he or she engaged in Prohibited Conduct under the Code, the Student Conduct Officer will discuss the conduct and any relevant circumstances with the student. After considering the student's response and any additional information the student has presented, the Student Conduct Officer shall determine recommended disciplinary sanctions. If the student accepts responsibility and agrees to the imposition of recommended disciplinary sanctions, the Student Conduct Officer shall make a finding that the student has violated the Code, and that the student has accepted responsibility for engaging in Prohibited Conduct. The matter shall be concluded, subject to the student's timely completion of designated sanctions.

Before recommending a disciplinary sanction or negotiating a resolution for Prohibited Conduct in violation of the Sexual Misconduct, Discrimination, and Harassment Policy, the Student Conduct Officer shall notify the University's Title IX Coordinator of the recommended discipline, who shall determine whether the recommended disciplinary sanction is within an acceptable range for the type of violation described. If the recommended disciplinary sanction is not considered reasonable, the Title IX Coordinator shall respond with an explanation of the appropriate range and the basis for that range.

#### **2. Failure to Respond / Default**

If the student does not schedule or attend a Mandatory Meeting by the date specified in the notice, or fails to follow instructions or submit requested documentation or information within a reasonable specified amount of time, the Student Conduct Officer may decide the outcome of the case in the student's absence. In such cases, the student, by failing to respond or participate, shall be in default and will have waived any right to further process.

### **C. Investigations**

The Student Conduct Officer shall review the facts and circumstances associated with the alleged conduct. This review may frequently consist of a mere informal inquiry into the source of the

complaint, together with the student's response. In other cases, particularly where there is potential for sanctions of suspension or expulsion, where there are multiple accounts of the facts from witnesses, or where the facts may not be readily discerned, the Student Conduct Officer may determine that further investigation is required. Such investigation may take place before or after the Mandatory Meeting, or in some combination of the two. Where appropriate in light of the unique facts and circumstances of the case, the Student Conduct Officer shall modify the Student Conduct Notice or recommended disciplinary sanction based on the evidence discovered in the investigation.

Allegations that a student has engaged in conduct that, if true, would constitute a violation of the University's Sexual Misconduct, Discrimination, and Harassment Policy shall be promptly referred to University's Sexual Misconduct Officer.

### III. Hearing Process

The Hearing Process offers charged students the opportunity to present their cases before an impartial hearing panel comprised of other members of the University community. The proceeding is designed to be administrative and educational in nature, capable of being navigated by University students. While many of these procedures draw from traditional legal principles of fairness and due process, the proceedings themselves are not intended to simulate a court of law. The Hearing Process is not a forum for challenging the legality or justification of any provision of the Code or these Procedures.

#### A. Impartial Hearing Panel

**Hearing Pool:** A Pool for each campus shall be established annually upon the recommendations of the faculty senate Chair, staff senate Chair, and student body president. The Pool may consist of a mixture of faculty, staff, and students for a pool of at least ten (10) representatives for Norman campus and at least five (5) for the OU Health Sciences Center campus. Each member of the Pool shall serve a three-year term and may be reappointed or removed at any time.

**Hearing Panel Training:** All members of the Pool will receive general hearing training; all members except student members also receive specialized training regarding sexual misconduct, stalking, domestic violence, and dating violence.

**Hearing Panel Selection:** Within five (5) days of receipt of a student's request, the UVPSA shall schedule and select a Hearing Panel randomly from the Hearing Pool. Specific representatives may also be appointed from professional schools where a violation of an ethical or professional code is alleged. Each Hearing Panel shall consist of three (3) members; one (1) of whom must be a student, except in cases where a student is charged with violating the Sexual Misconduct, Discrimination, and Harassment Policy, in which case, no student may sit on the Hearing Panel. If an appointed member cannot serve on a particular panel in a timely fashion, the UVPSA may fill the vacant position with another member of the hearing Pool.

**Impartiality:** Any Hearing Panel member who believes he or she is unable to be an objective participant for a given hearing is expected to remove herself/himself for that particular hearing. The Student Conduct Officer, the charged student, and the reporting party (in sexual misconduct cases) may object to the composition of the Hearing Panel based upon any panel member's inability to be an objective participant for the matter. The UVPSA shall make a final determination in any case where there is timely objection to and disagreement as to whether a panel member should be removed.

#### B. Role of the Hearing Panel Chair

**Election of the Chair:** Once appointed, the Hearing Panel shall immediately elect a Hearing Panel Chair ("the Chair") for the hearing. Faculty and staff members are eligible to serve in this role. The Chair shall be responsible for management of the Hearing Panel.

**Powers and Duties of the Chair:** The Chair shall preside at all hearings, keep order throughout the hearing process, exercise control over the hearing for efficiency and relevancy, establish all relevant timelines, rule on requests for extensions, and rule on admissibility of evidence, in advance of the

hearing and at the hearing. The Chair may exclude from the proceedings any person who disrupts the hearing process or who fails to adhere to the Chair's rulings.

### C. Before the Hearing

**Chair Issues Deadlines:** Within ten (10) calendar days of formation of the Hearing Panel, the Chair will notify the Student Conduct Officer and the charged student ("the parties") the date and location of the hearing, the deadlines for exchanging information, and shall provide a copy of these procedures. The Chair may modify these deadlines as necessary for the just and efficient handling of a hearing, but in general:

- The hearing should typically be scheduled to occur within thirty (30) calendar days of formation of the Panel;
- If a charged student chooses to be accompanied by a legal advisor, he or she shall notify the Chair as soon as practicable but at least seven (7) days before the hearing;
- The parties shall exchange the names of witnesses at least seven (7) days before the hearing;
- The parties shall exchange copies of all documents or physical evidence at least seven (7) days before the hearing;
- If either of the parties believes that the witnesses, documents, or other evidence should not be considered by the Panel, because they are not relevant or for some other reason, the Chair must be notified at least five (5) days before the hearing;
- Any other matter relating to the presentation of witnesses or evidence must be raised to the Chair at least five (5) days before the hearing;
- The Chair shall notify the parties of rulings on the admissibility of witness testimony, documents, and other physical evidence not less than two (2) days before the hearing;
- Any party who fails to submit information or exchange information as required by the deadline(s) may be barred from presenting that information in the hearing.

### D. The Elements of the Hearing

**Panel Chair Opening:** The Panel Chair shall open the hearing with the following announcements and procedures:

1. The Chair will notify the parties that the hearing is closed to the public and shall then ask any non-party witnesses to leave the room. A party's advisor may remain in the room;
2. The Chair shall request all persons present to identify themselves to the parties;
3. The Chair shall announce whether the University is recording the proceeding, and if so, shall announce that the recording will be the official record of the proceedings, and will be kept pursuant to the University's Records Retention policy;
4. The Chair may also provide general instructions regarding the proceedings and address any procedural matters that require clarification.

**Student Conduct Officer Opening Statement:** In an opening statement, which should generally not exceed five (5) minutes, the Student Conduct Officer is expected to generally inform the Hearing Panel of the facts and circumstances surrounding the conduct at issue, the provision(s) of the Code that are alleged to have been violated, and asking the Hearing Panel to issue the recommended disciplinary sanction.

**Charged Student Opening Statement:** In an opening statement, which should generally not exceed five (5) minutes, the charged student is expected to generally explain his or her position to the Hearing Panel, which may include, but is not limited to, any of the following:

- whether the charged student denies engaging in the alleged conduct;
- whether the charged student disagrees that the conduct is Prohibited Conduct under the Code; and/or
- that the recommended disciplinary sanction is not appropriate for the violation.

**Presentations:** After the opening statements, the Hearing Panel shall provide the Student Conduct Officer and the charged student an opportunity to present their respective positions, including the presentation of documents and calling of witnesses. Each party is responsible for ensuring that any witnesses who will testify in support of that party's position are notified of the time and place of the hearing. As a responsibility of membership in the University community, all students are expected to participate in Conduct Proceedings upon request; however, the Hearing Panel cannot compel the attendance of witnesses.

**Cross Examination:** Each party shall also be given the opportunity to cross-examine witnesses presented by the other. The Hearing Panel may also directly question any individuals, including the charged student, at any time during the hearing.

**Closing Statement:** Generally, each party may be allowed to give a five (5) minute closing statement summarizing the evidence and restating why the Hearing Panel should be persuaded by the party's case.

**Dismissal and Deliberations:** Upon conclusion of the closing statements, the Chair shall dismiss the parties and the Hearing Panel shall deliberate privately. The Hearing Panel will consider the facts presented and assess the credibility of those providing information to determine by a majority vote whether, by a preponderance of the evidence (i.e., whether it is more likely true than not true), the charged student has engaged in Prohibited Conduct under the Code. If the Hearing Panel finds that the charged student is responsible for engaging in Prohibited Conduct, the Hearing Panel will consider aggravating and mitigating circumstances in assigning sanctions.

**Notice of Decision:** The Chair of the Hearing Panel will notify the charged student and appropriate University officials of the decision in writing within five (5) days of the hearing.

#### IV. Rules Governing Hearings

**Closed Proceedings:** All student conduct hearings are closed to the public.

**Recordings:** The University may audiotape any conduct proceeding, which will be the official record of the proceedings, and will be kept pursuant to the University's Records Retention policy, found at: <http://www.ou.edu/content/dam/AdminFinance/documents/Records%20Retention%20Policy%20intro%20Dec%202010.pdf>

**Counsel to the Hearing Panel:** The Chair and the Hearing Panel may consult with designated counsel in University's Office of Legal Counsel at any time during Student Conduct Proceedings.

**Counsel/Advisor to the Parties:** A charged student may be accompanied by an advisor or attorney during the hearing; provided, in the case of an attorney, the charged student must notify the Chair within the time restrictions imposed by the Chair. If the charged student elects to be accompanied by an attorney, the Student Conduct Officer may elect to be accompanied by a designated member of University's Office of Legal Counsel, who shall not be the same attorney serving as counsel to the Hearing Panel. Attorneys may not directly participate in the hearing unless the recommended sanction is suspension or expulsion, and/or if the charge is for a violation of the Sexual Misconduct, Discrimination and Harassment Policy.

## V. Special Procedures for Sexual Misconduct Hearings

The following procedures are applicable in cases where a student is charged with violating the Sexual Misconduct, Discrimination, and Harassment policy.

**Interim Measures:** Any remedial measures imposed by the Title IX Coordinator, Sexual Misconduct Officer or Director of Student Conduct, in consultation with the appropriate executive officer shall be in effect during the investigation, hearing or any appeal.

**Role of the Parties:** A person who alleges that he or she has been subjected to conduct that amounts to sexual assault, discrimination, or harassment under University's policy ("the reporting party"), is deemed to be a party to Student Conduct Proceedings and shall have any rights afforded to the charged student, should the reporting party wish to actively participate in the process.

**Advisors and Attorneys:** Any party may be advised by an advisor or attorney of his or her choosing. If a party is afforded the right to have a nonlegal advisor and a legal advisor present during the hearing, the same right shall be afforded the other party.

**Sanctioning:** Before entering a disciplinary sanction for a violation of the Sexual Misconduct, Discrimination, and Harassment Policy, the Chair shall notify the University's Title IX Coordinator, who shall determine whether the recommended disciplinary sanction is within an acceptable range for the type of violation described. If the recommended disciplinary sanction is not considered reasonable, the Title IX Coordinator shall respond with an explanation of the appropriate range and the basis for that range.

**Expedited Timeline:** Generally, within two (2) days of the formation of the Hearing Panel, the Chair shall notify the charged student, the reporting party, and the Student Conduct Officer of the date of the hearing, which generally shall be set no later than ten (10) days from the date of the notice to the parties. The notice shall also include the location of the hearing, the panel composition and any additional Hearing Panel procedures and deadlines for objecting to the panel's composition and for providing additional information such as the names of any persons or documents to be presented (typically two (2) days prior to the hearing). Notice of the findings shall be determined and followed by a written decision within three (3) days of the hearing via email to the parties' University email address. This expedited timeline may be adjusted where fairness so requires.

**Cross Examination:** Hearing Panel members and the Student Conduct Officers shall be the only persons permitted to question the reporting party and the charged student. The Chair may pose any questions he/she deems relevant as requested by the reporting party or charged student for cross-examination of one another. At no time shall the reporting party or charged student address one another directly. Further, alternate testimony methods may be offered to the parties, e.g. videoconferencing, testifying behind a screen, etc., where deemed appropriate by the Chair.

**Sanctioning Guidelines:** Any student found responsible for Sexual Misconduct involving non-consensual or forced sexual contact (where no intercourse has occurred) will likely receive a sanction ranging from probation to expulsion, depending on the severity of the incident and taking into account any previous campus code violations.

Any student found responsible for Sexual Misconduct involving sexual exploitation or sexual harassment will likely receive a recommended sanction ranging from warning to expulsion depending on the severity of the incident, taking into account any previous campus conduct code violations.

Any student found responsible for Sexual Misconduct involving non-consensual or forced sexual intercourse will likely face a recommended sanction of suspension or expulsion, taking into account any previous campus code violations.

Except in conjunction with other discipline, the sanctions of verbal warning, written warning, disciplinary probation, educational sanctions, restitution, administrative fee and alcohol strike are not appropriate if a

student is found responsible for violations of the Sexual Misconduct, Discrimination, and Harassment Policy that comprise Sexual Violence, Dating Violence, and Domestic Violence.

The Hearing Panel may enter a sanction that is inconsistent with these sanctioning guidelines only if there are serious mitigating factors or particularly egregious behavior, and only after consultation with the University's Title IX Coordinator.

**Simultaneous Notification:** The reporting party and the charged student shall be notified simultaneously, in writing, of the result of any disciplinary proceeding, and shall be provided with the University's procedures to appeal the result of the disciplinary proceeding. Furthermore, the reporting party and the charged student shall be simultaneously notified of any change to the results of the disciplinary proceeding and shall be notified when the results are final.

**Appeal:** A reporting party, charged student, or Student Conduct may request an appeal of the decision as provided in Section VI below.

**VI. Appellate Review.** Student Conduct, the charged student, and the reporting party in sexual misconduct cases may appeal the findings or sanction of the Hearing Panel within five (5) days of notice of the decision. The appeal shall be in writing and submitted to Student Conduct and the opposing party. Upon request for an appeal from a hearing, Student Conduct shall immediately request that the UVPSA review the appeal.

The UVPSA shall have the authority to:

1. Affirm the initial decision.
2. Find that improper procedures were used that significantly prejudiced the University or student. In this case, the UVPSA can refer the case back to the Hearing Panel with a recommendation on how to correct the procedures. In any new hearing, the Hearing Panel may make a new decision on the case. Student Conduct or the parties may then submit another request for review to the UVPSA
3. Reduce or increase the sanction, if the UVPSA determines that the sanction imposed was too severe or too lenient, given the nature of the violation and/or the circumstances. A sanction should not be increased or decreased unless there is compelling justification to do so. Merely disagreeing with the decision of the Hearing Panel board is not a compelling justification.
4. Find that (i) Student Conduct or the parties (including the reporting party in sexual misconduct cases) has presented information that would have been material to the outcome of the case, had the information been presented at the hearing, and (ii) the information was not known and could not reasonably have been known to the person appealing at the time of the original hearing. In this event, the UVPSA will refer the case back to the Hearing Panel for reconsideration in light of the new information.

The UVPSA shall in collaboration with the appropriate University official, base a decision on the record and shall notify the parties, including the reporting party in sexual misconduct cases, where appropriate, of the decision within five (5) days of receipt of the request for appeal and receipt of the record. In some cases, the UVPSA may require more time to reach a decision, and in such cases the parties will be notified that a decision will be reached as soon as reasonably practicable. The UVPSA's decision is final. If the UVPSA does not act or otherwise notify the parties of the need for more time to reach a decision, within five (5) days of the request for appeal and receipt of the record, the decision of the Hearing Panel is final.



## 13. APPENDIX D

### INTELLECTUAL PROPERTY POLICY

#### PREAMBLE

The people of the State of Oklahoma may reasonably expect that their investments in the University will create new industry and enhance existing industry within the State and Nation. Such new industry creates greater employment opportunities for citizens of the State and the Nation and an improvement in their standard of living.

The creation and development of intellectual property at the University encourages new business and is key to creating strong University and industry partnerships. It is the responsibility of University employees to disclose intellectual property and to foster an entrepreneurial attitude within the work force by involving students in the creation of intellectual property. Intellectual property development shall be pursued in concert with, but subject to, the University's principal responsibilities of education and knowledge creation.

Therefore, it is in the best interest of the University to adopt a policy that encourages disclosure of discoveries and inventions and rewards such creative activity. To do so, the University policy must insure that creators of copyrightable works or trademarks and inventors share in any financial success enjoyed by the University through the creation and commercialization of intellectual property. The basic objectives of the University's policy concerning creative works, trademarks, discoveries, and inventions (i.e., intellectual property) include the following:

- (a) To maintain the University's academic policy of encouraging research, publication, and scholarship independent of potential gain from royalties or other income.
- (b) To make patented materials created pursuant to University objectives available in the public interest under conditions that will promote their effective utilization and commercialization.
- (c) To provide adequate incentive and recognition to faculty and staff through proceeds derived from their creative works, trademarks, discoveries, and inventions.

#### 13.1A PATENTS

##### 1) OWNERSHIP

- 1.1 All discoveries and inventions, whether patentable or un-patentable, and including any and all patents (domestic and foreign) based thereon and applications for such patents, which are made or conceived by any member of the faculty, staff, or student body of the University of Oklahoma, either in the course and/or scope of employment for the University of Oklahoma or substantially through the use of facilities or funds provided by or through the University shall be owned by and be the property of the Board of Regents of the University of Oklahoma and the member will assign and does hereby assign all of member's rights in and to the discoveries and inventions to the Board of Regents of the University of Oklahoma except as described below.
- 1.2 Faculty having rights to discoveries/inventions prior to employment at the University of Oklahoma should notify the Office of Technology Development of such intellectual property so that ownership to any further development of that same intellectual property at the University of Oklahoma may be established, by written agreement, with the University Vice President for Technology Development. The Vice President for Technology Development shall consult with the Senior Vice President and Provost of the Health Sciences Center or his designee before entering a contract with faculty at the Health Sciences Center.
- 1.3 In the event faculty or staff make discoveries or inventions outside the course of and/or scope of employment and using no University facilities, equipment, or supplies, or if using such reimburses the University for this use in accordance with a prior written agreement with the University and in accordance with University policy, title to such discoveries or inventions shall remain in the inventor, provided the University Vice President for Technology Development determines that the discovery or invention was made under these conditions. The inventor shall nonetheless

submit a disclosure form to the Office of Technology Development. This disclosure shall contain sufficient information to enable the University Vice President for Technology Development to make a determination. If confidential information is required, the University will sign a nondisclosure agreement for purposes of this review. Should the University Vice President for Technology Development determine that the University does have a proprietary interest, a more complete disclosure may be required before making a decision in regard to title, the University Vice President for Technology Development shall consult with the Provost of the Health Sciences Center when the faculty member is based at the Health Sciences Center. If it is determined that the University has an interest, the provisions of this policy shall then be applicable. Appeals of such determinations may be made to the Faculty Appeals Board and then to the President.

- 1.4 All rights in and to discoveries and inventions described in this policy shall be disclosed to and inventor will assign and hereby does assign all rights in and to said discoveries and inventions to the Board of Regents of the University of Oklahoma as a specific condition of employment with the University and admission to and/or attendance at the University. Faculty, staff, and students shall execute any and all documents the University deems reasonably necessary to evidence such ownership, meet its legal obligations and effect patent protection, domestic and foreign, for the University or its nominee. All costs involved in obtaining and maintaining patent protection shall be borne by the University or its nominee.

- 1.5 The University agrees to act in good faith with respect to the determination of ownership.

## 2) REVENUE

- 2.1 The Revenues (e.g., royalties and other revenue fees of cash and equity) received by the University directly attributable to the licensing, sale, or commercialization of a University discovery or invention as described in Section 1 will be distributed among the discoverer(s)/inventor(s), his/her/their primary department(s) and the University, in accordance with the following formula:

- 35% of Revenues to the discoverer(s)/inventor(s) (as submitted on the Invention Disclosure Form);
- The remaining 65% to be used to reimburse the University for any remaining expenses not previously recouped that it has or shall incur directly in connection with the discovery or invention at issue;

After such expenses have been recouped, the remaining 65% will be distributed as follows:

- 20% to originating college(s), half of which to go to the originating department
- 5% to President's discretionary fund
- 5% to the campus Vice President for Research
- 15% to OTD to apply to operational expenses with a pro rata share to go to the originating campus (at least 80%) Office of Technology Development
- 20% to the Growth Fund maintained for each originating campus

Stock certificates issued to the University shall be held by the Controller's Office of the Norman Campus.

The right to receive such royalty Revenue shall be extended to the inventor(s) in the event that the inventor is no longer an employee or student of the University. Such right shall also accrue to the estate of the inventor(s). Inventor(s) and/or their successors or assigns shall have the responsibility to provide the Office of Technology Development of the respective campuses with

all the necessary information to make payments to the appropriate parties, including without limitation, current addresses; provided, failure to keep the University so informed shall permit the University to hold all such Revenue for such parties for a reasonable time or until the lawful beneficiaries make claim thereto.

The Office of Technology Development shall establish and maintain a "Growth Fund" for each originating campus to be used to stimulate general faculty intellectual property disclosures as well as technology development and transfer. The fund will be used to further stimulate researchers on each campus to make proposals when there is a need for additional funding to provide prototypes, additional research results, and/or "gap" funding to keep a program in place during transition. Those accessing the Fund will be expected to repay the fund at a rate and in a manner appropriate to the use(s) of the funds provided. The Executive Director of the Office of Technology Development will chair a university-wide committee consisting of the Vice President for Research of each campus (or his/her designee), a member of the faculty of Entrepreneurship and Economic Development Division of the Price College of Business and at least one outside advisor to establish criteria and review applications from each campus for funding. The University Growth Fund committee will solicit applications not less than annually and recommend fund allocations to the President.

- 2.2 When there are two or more discoverers/inventors, each shall share equally in the inventor's share unless all discoverers/inventors agree in writing to a different distribution of such share. Such originally-signed agreement shall be filed with the Office of Technology Development of the respective campuses of the discoverer(s)/inventor(s). No distribution of cash Revenues will be made until this issue is resolved by the discoverer(s)/inventor(s) or their successors in interest.
- 2.3 The discoverer(s)/inventor(s) and his or her college shall be paid their share of the cash Revenues upon receipt of the University and will be furnished with a statement of Revenue derived from the commercialization of the invention at the time of payment. In the event of any litigation, actual or imminent, regarding patent rights, the University may withhold distribution until resolution of the particular matter.
- 2.4 The University does not act as a fiduciary for any person relating to consideration received under the terms of this policy.

### **3) EQUITY MANAGEMENT COMMITTEE AND POLICY**

- 3.1 For any acquisition or disposition of equity assets exceeding \$1,000,000.00, the Equity Management Committee shall consider the University's actions by reviewing a written description of the proposed acquisition or disposition, which proposal shall be provided to members of the Equity Management Committee by the University Vice President for Technology Development. Any Committee member may seek additional clarification on the proposed transaction by requesting a Special Meeting of the Committee within five (5) calendar days of the receipt of the written proposal. Otherwise, review of the proposal shall be concluded. For disposition of assets valued \$1,000,000.00 and above, the committee's recommendation, upon the approval of the President, shall be presented for formal action to the Board of Regents at their next regularly scheduled meeting. Following the end of each fiscal year, the University Vice President shall provide to the Equity Management Committee a written summary of the operations and status of the University equity holdings.
- 3.2 The Committee shall consist of two current members of the Board of Regents (to be appointed by the Board), the University Vice President for Technology Development, University General Counsel, a knowledgeable University employee who shall be appointed by the President, and two extra-mural members familiar with such matters by education, training, and/or experience. From recommendations by the President, the Board of Regents shall appoint the two-non-employee

members of the committee, who shall serve at the convenience of the Regents. Appointments shall be made on an annual basis, at the time of the Board of Regents' officer elections (March).

#### 4) ADMINISTRATION

- 4.1 The President of the University, after consultation with the University Vice President for Technology Development and appropriate campus officials, shall determine the disposition of University discoveries and inventions described in this policy as deemed prudent and consistent with the University's mission to ultimately convey the benefits of its research to the public for the general welfare of the State and Nation. In determining the proper disposition of University discoveries and inventions, the University President shall consult as necessary with scientific and/or technical and/or business subject matter experts in fields appropriate to the discovery or invention under consideration. Among other choices, the University President may:
- (A) License the discovery and/or invention to third parties to provide for the further development and/or commercialization of the property;
  - (B) Transfer the discovery and/or invention for commercialization by entering into commission agreements with third parties to identify potential licensees to further develop and commercialize the property;
  - (C) Transfer rights to the property to a patent service organization to further develop and commercialize the property;
  - (D) Allow rights (U. S. and foreign) to the discovery or invention to revert back to the Federal agency that funded the development of the discovery;
  - (E) Transfer rights (U. S. and foreign) to the discoverer(s)/inventor(s) if requested by the discoverer(s)/inventor(s), and the University President determines that the discovery/invention will not be pursued further by the Office of Technology Development.
    - 1) If Federal funds were used in the development of the discovery/invention, such transfer of rights are subject to a reversionary right in the Federal government as described in 37 CFR sec 401.
    - 2) Such transfer also shall be subject to an irrevocable, non-exclusive, royalty-free, and world-wide right and license in the University to make, use, and/or practice the discovery or invention for University education, research, and/or service purposes. The University also reserves the right to publish and or present information and data obtained in the research project resulting in the discovery or invention being transferred, assuming such rights do not jeopardize the discoverer's/inventor's patent rights. Faculty, staff, and students shall execute any and all documents, as the University deems reasonably necessary to confirm or enforce such reserved right and license.
    - 3) Such transfer shall be limited to the discovery or invention duly disclosed to the University, in writing, as of the time the transfer is requested by the discoverer/inventor;
  - (F) Transfer rights to the discovery and/or invention to the person(s) or entity sponsoring the research in the course of which the discovery or invention was made if such action is required under the terms of the research agreement or is required by law; or
  - (G) Transfer the discovery and/or invention into the public domain through publication of the invention by the discoverer/inventor. All transfers of University discoveries or inventions shall be subject to and contingent upon any rights in third parties as may be governed and/or

required by, among other things, sponsored research agreements, other third-party contracts, or law.

- 4.2 The University Vice President for Technology Development shall be responsible for administering the patent affairs of the University in a manner consistent with this Policy. The University Vice President for Technology Development shall cooperate with the appropriate campus officers to establish written policies to be approved by the President and distributed to the faculty, staff, and students of the University, governing procedures to be followed in processing discoveries and inventions generated within the University. The Office of Technology Development shall provide information regarding disposition of specific discoveries/inventions to the inventor(s) no later than six (6) months from the date the discovery/invention is marketed by the Office. If the Office of Technology Development is not going to pursue marketing and/or protecting the invention, rights in and to the discovery/invention shall revert to the inventor(s) upon his/her request.
- 4.3 When it is in the best interest of the University to get its technology into the marketplace, when the longer term opportunity for returns to the University and the State exceed the short-term value of not taking equity, then the University President will approve taking equity. As a matter of principle, some equity is desirable in all transactions to create the best opportunity for the University and the State of Oklahoma to get a fair return on the technologies transferred from the University to the marketplace.

## **5) DISCLOSURE**

- 5.1 It is the responsibility of faculty, staff, or students of the University of Oklahoma to report all inventions they may develop during their term of employment or registration as a student.
- 5.2 Any discovery/invention, whether or not patentable, must be reported to the University by filing an Invention Disclosure Form with the appropriate technology development office. Such Invention Disclosure shall provide sufficient information so that the Office of Technology Development, in conjunction with others, can determine its commercial potential and patentability. Although the maintenance of the laboratory notebooks that describe the discovery/invention is the responsibility of the discoverer/inventor, the Office of Technology Development may require access to such notebooks at any time throughout the prosecution and maintenance stage of patenting the discovery/invention.

## **6) APPLICATION**

The terms of this Patent Policy are a part of any contractual relationship of the University of Oklahoma with any member of the faculty, staff, or student body. This Policy, as amended from time to time, shall be deemed to be part of the conditions of employment of every University employee or a part of the conditions of enrollment and attendance of every student at the University. Any licensing Revenues received throughout the duration of such license shall be distributed in accordance with the distribution policy in effect at the time of the signing of such license and can only be changed through mutual agreement of the parties receiving portions of such Revenue.

## **7) UNIVERSITY PATENT COMMITTEES**

The University shall have a Patent Committee (for each campus) that shall consider and investigate disputes among administrators, faculty, or staff and shall recommend appropriate solutions to the President. This committee shall be convened as needed and will consist of one student member appointed by the Graduate Student Senate for one year, two staff members, one appointed by the President and one appointed by the Staff Senate, and five faculty members, three appointed by Faculty Senate and one each by the President and the Vice President for Technology Development. All staff and faculty appointments are for three-year terms. This Committee will assist the University Vice President for Technology Development in setting policy and procedures that will be implemented on a daily basis by the Office of Technology Development staff. The Committee will provide a forum for faculty, staff, and students to present any issues such as, but not limited to, Revenue sharing, ownership, etc. The Committee will make recommendations to the University Vice President for

Technology Development for the handling of these issues. The Director of the respective campus' Office of Technology Development, the respective campus' Vice Presidents for Research, and University Counsel shall serve as ex-officio members of the Committee.

## 8) USE OF FACILITIES

- 8.1 As outlined in the Oklahoma Technology Transfer Act of 1998, use of the facilities of the University by a business enterprise or private business entity is allowed when that project involves the research or development of a University technology, whether or not the technology is protected pursuant to federal or state law governing intellectual property, the results of which have potential economic and academic value for the University. Such use of University facilities must be on a "space-available" arrangement in which normal University activities are not displaced. The use of such facilities by a business enterprise or private business will be done on a fee-for-service contract and in conjunction with projects where the University has a vested interest in the outcome of the transfer of University technology, through research and development of a discovery/invention for commercialization purposes, scholarly rewards, or furthers the University's educational, research, or public service missions.
- 8.2 The University may take an equity stake in such business enterprises or private businesses in consideration for the use of such facilities and/or the development of University discoveries/inventions which shall be managed in accordance with the University's policies on stock acquisition and management. Any cash Revenues received from the sale or trade of such equity stocks shall be distributed as if received as royalty income. If the equity interest is acquired through an exchange of value other than money and the exchange of value is made in connection with the development of technology by the private business enterprise through the use of the facilities or resources or both of an institution within the Oklahoma State System of Higher Education, acquisition of an equity interest shall be permissible through the use of the facilities, premises, or assets of an institution within the Oklahoma State System of Higher Education through the use of faculty expertise or student expertise, including the value of time expended by faculty or students upon developing a technology in connection with a private business enterprise or private business entity. No state appropriated monies shall be used or obligated to acquire an ownership interest in a private business enterprise except as authorized by the provisions of this section.

## 9) BACKGROUND

- 9.1 A patent is a grant issued by the U. S. Patent and Trademark Office (PTO) that provides the assignee of the patent the right to keep others from practicing or using its patented invention. Patents are issued for inventions that are novel (not published, sold, or utilized for more than one year), useful, and non-obvious to others equally skilled in the art. (In almost all foreign countries, to be patentable, an invention requires complete novelty. In others words, it cannot have been published, used, sold, or bartered publicly prior to the filing of a patent application either in the country itself or in the United States PTO).
- 9.2 U. S. Patent Law has maintained the first-to-invent rule. What this means is that the first person to conceive and reduce to practice the invention shall be entitled to the patent. Foreign countries rely on the first-to-file concept in issuing patent rights. In the case of U. S. law, the laboratory notebooks of the discoverer(s)/inventor(s) may be crucial to the overall outcome as to whom the patent is issued. Laboratory notebooks should be bound notebooks where corrections are readily identifiable. The pages of the notebooks should be signed, dated, and witnessed on a daily basis and stored in a secure location. The term of patent applications filed in recent years is twenty years from the date of application. The laboratory notebooks should be maintained at least for that period of time. (Regents, 12-9-99, 12-02-01)

## 13.1B TRADEMARKS

A trademark identifies an item of intellectual property or an educational or training service. The University owns all rights and titles to any trademarks related to any item of intellectual property owned by the

University. Any cash Revenues received in exchange for the commercial use or sale of such trademark shall be distributed as those cash Revenues received for discoveries/inventions. (Regents, 12-9-99)

### **13.1C COPYRIGHT**

#### **1. PREFACE**

Copyrights are created by the Constitution and the laws of the United States to promote the progress of science and the useful arts by securing for limited times to authors the exclusive rights to their works and writings. The basic objectives of the University's policy concerning copyright include the following:

- (A) To maintain the University's academic policy of encouraging research and scholarship as such without regard to potential gain from royalties or other income.
- (B) To make copyrightable materials created pursuant to University objectives available in the public interest under conditions that will promote their effective utilization.
- (C) To provide adequate incentive and recognition to faculty and staff through proceeds derived from their works.
- (D) To stimulate creativity across all media.

#### **2. POLICY**

It is the policy of the Board of Regents of the University of Oklahoma that all rights in copyright shall remain with the creator of the work unless the work is created with substantial use of University resources, is specifically assigned or commissioned by the University, is subject to non-University contractual or legal obligations, or is a "work made for hire" as that term is defined by U.S. Copyright Law.

#### **3. OWNERSHIP**

##### **3.1 Scholarly/Aesthetic Works**

In keeping with traditional academic practice and policy, ownership of copyrights to works of artistry or scholarship in the creator's professional field such as textbooks, course materials, scholarly papers and articles, software and other computer materials when they are works of artistry or scholarship, novels, poems, paintings, musical compositions, or other such works of artistic imagination produced by University employees who have a general obligation to produce such works where the specific choice, content, course, and direction of the effort is determined by the employee without direct assignment or supervision by the University shall reside in the creators and the works shall not be deemed "works made for hire" under this policy unless they are also sponsored/contracted works or specifically assigned by the University. Copyrighted courseware and/or software that are not associated with traditional works as described above shall fall under and are subject to the Patent Policy. The general obligation of faculty to produce scholarly works does not constitute specific assignment. Upon request by the University, the creator(s) will grant the University a nonexclusive, free of cost, world-wide right and license to exercise all copyright rights in and to the work, except the right to commercially display, use, perform, or distribute copies of the work, unless to do so would impair the ability of the creator to have the work published or distributed. If a use of the work by University is reasonably determined by the creator to impair the exercise of such rights, the University shall discontinue the impeding use but otherwise shall remain free to use the work as provided in this Paragraph 3.1. Subject to the approval of the Vice President for Technology Development, the University will assist any University employee wishing to commercially exploit a scholarly/aesthetic work falling under this paragraph, through the Office of Technology Development and its respective campus



officers. In such cases, the University will normally own the work and the provisions of the Patent Policy shall apply.

### 3.2 Personal Works

Ownership of copyrights to works prepared outside the course and scope of University employment and without the substantial use of University resources (equipment, facilities, services, or funds (regardless of source) administered by and/or under the control of the University) shall reside with the creators; provided, the provision of office facilities, limited secretarial assistance, library facilities for which special charges are not normally made, or other resources which are made available to the public without charge, shall not be considered substantial use of University resources.

### 3.3 Sponsored Works

Ownership of copyrights to works produced by or through the University in the performance of a written agreement between the University and a third-party/sponsor shall be governed in accordance with the agreement. If the agreement is silent in that regard, ownership shall be governed by the other provisions of this policy.

### 3.4 Commissioned Works

Ownership of copyrights to works produced for University purposes by persons not employed by the University or by University employees outside their regular University employment (commissioned works) normally shall reside with the University. In all cases, copyright ownership shall be specified in a written agreement approved by University legal counsel signed by the parties. Any commissioned work agreement which provides for ownership by other than the University shall also provide, to the fullest extent possible, that the University will have an irrevocable, free-of-cost, non-exclusive, world-wide license to exercise all copyright rights in and to the work, except the right to commercially display, use, perform or distribute copies of the work unless to do so would impair the ability of the University employee creator to commercially or professionally exploit the work. If a use of the work by University is reasonably determined by the University employee creator to impair the exercise of such rights, the University shall discontinue the impeding use but otherwise shall remain free to use the work as provided in this paragraph 3.4.

### 3.5 University Works

Except as otherwise provided in this policy, the University shall own all copyrights to works made by University employees in the course and scope of their employment and shall own all copyrights to works made with the substantial use of University resources. Provided, the University shall give due regard to the creator's interests in the quality and integrity of the work and where appropriate grant recognition for creation of the work. To the extent consistent with University rights under the U.S. copyright law, nothing herein shall be construed to prevent the creator from using his/her knowledge, expertise, research, and creative achievement in other employment.

### 3.6 Student Works

Ownership of copyrights to works produced by enrolled students without the use of University funds (other than Student Financial Aid) that are produced outside any University employment and are not sponsored or commissioned works, shall reside with the student creator(s). Provided, however, in all cases a student's graduate thesis or dissertation shall be deemed a student work under this policy but as a condition of enrollment and awarding a degree, the University reserves an irrevocable, non-exclusive, free-of-cost and world-wide right to reproduce in any media and distribute to the public, on a non-commercial basis, copies of said theses and dissertations, unless to do so would impair the ability of the creator to commercially or professionally exploit the work. If a use of the work by University is reasonably determined by the creator to impair the exercise



of such rights, the University shall discontinue the impeding use but otherwise shall remain free to use the work as provided in this paragraph 3.6.

### 3.7 Jointly Originated Works

Ownership of copyrights to jointly originated works shall be determined by separately assessing the category of work of each creator under this Section 3. Rights between joint owners of a copyright shall be determined pursuant to copyright law or by agreement between the owners of the work.

## 4. REVENUE SHARING

- 4.1 The University may assign or license its copyrights to others. The University shall share royalty Revenue derived from such assignment or license which it receives through copyrights with the creators, as provided for in the Patents Policy above.
- 4.2 Notwithstanding the above or anything else to the contrary herein, staff employees are not eligible to share Revenues received from University owned copyrights where such employees create copyrightable works as a part of their normal responsibilities of University employment. Provided, a staff employee may apply to the appropriate Senior Vice President and Provost to be treated as a faculty member for purposes of revenue sharing for a work resulting from a specific project upon a showing that his/her duties and responsibilities in that project are, in practical effect, substantially the same as those of a faculty member.

## 5. ADMINISTRATION

- 5.1 **Release to the Creator.** An individual creator of a University owned work may seek transfer of the University owned copyright to him/herself by making a written request to the appropriate Provost. If the University decides not to exploit such work, then it may transfer the copyright, by written agreement, to the individual creator to the extent consistent with any applicable third-party agreement or law. Provided, such transfer shall be subject to an irrevocable, non-exclusive, free-of-cost and world-wide license in the University to exercise all rights under the copyright in the work except the right to publicly distribute copies for commercial purposes or such other conditions as may be agreed upon in writing between the individual creator(s) and the Senior Vice President and Provost, unless to do so would impair the ability of the creator to have the work published or distributed. If a use of the work by the University is reasonably determined by the creator to impair the exercise of such rights as transferred in the agreement, the University shall discontinue the impeding use but otherwise shall remain free to use the work as provided in this paragraph 5.1.
- 5.2 **Disclosure and Protection.** An individual creator of a University-owned copyrightable work shall protect the work by placing the following statutory copyright notice on all copies thereof ("Copyright [insert year produced, e.g., 2000], the Board of Regents of the University of Oklahoma."). If the creator believes the work may have commercial value, he/she shall promptly provide written disclosure of the work to the appropriate Senior Vice President and Provost.
- 5.3 **Legal Compliance.** Any work created by a University employee or student, to the best of his/her knowledge and informed belief, shall not infringe on any existing copyright.

Creators of copyrightable works subject to this policy and the University shall cooperate as reasonably necessary to effect the terms of this policy. For example, if copyright to a work of scholarship vests in the University by law, the University will, upon request and to the extent consistent with its legal obligations to third parties, promptly execute such documents as will transfer copyright to the faculty creator(s).

The Senior Vice President and Provosts, Norman Campus and the Health Sciences Center, shall be responsible for administering the copyright affairs of the University in a manner consistent with this policy. The Senior Vice President and Provosts shall cooperate in consultation with the

Copyright Committee on each campus to establish written directives to be approved by the President of the University and distributed to the employees and students of the University, which shall govern the procedures to be followed in processing copyrighted works created within the University.

The University does not act as a fiduciary for any person concerning consideration received under the terms of this policy.

The University Vice President for Technology Development may negotiate ownership of copyrighted works with research sponsors when it is in the best interest of the University to do so. Otherwise, all rights are as described above.

Faculty having rights to copyrighted works prior to employment at the University of Oklahoma should notify the Office of Technology Development of such intellectual property so that ownership to any further development of that same intellectual property at the University of Oklahoma may be established, in a written agreement with the University.

## **6. CONTRACTUAL TERM**

The terms of this copyright policy are a part of any contractual relationship of the University with any member of the faculty, staff or student body. This policy, as amended from time to time, shall be deemed to be a part of the conditions of employment of every University employee and a part of the conditions of enrollment and attendance of every student at the University.

## **7. RESOLUTION OF CONFLICT**

Should disputes arise relative to the ownership of copyright between the creator and the University, the matter will be referred to the Copyright Committee, which will make recommendations to the President for proper resolution of the disputes. Either the University or creator may contact the Provost to arrange to have the Copyright Committee meet to consider such disputes.

## **8. UNIVERSITY COPYRIGHT COMMITTEE**

- (A) The University shall have a Copyright Committee for each Campus that shall consider and investigate disputes among administrators, faculty, or staff and shall recommend appropriate solutions to the President. The committee's responsibilities shall include, but not be limited to, disputes concerning:
  - 1) Ownership of copyright; and
  - 2) Terms of commissions.
- (B) The Copyright Committee of each campus shall have as its members:
  - (a) One member appointed by the President for a four-year term;
  - (b) One student member appointed by the Graduate Student Senate for one year;
  - (c) Two staff members, one appointed by the President, one appointed by the Staff Senate, all appointments are for three years; and
  - (d) Three faculty members, with two appointed by the Faculty Senate and one by the President. All appointments are for three-year terms. Tie votes will be settled by chair of Faculty Senate, who shall be an ex-officio member of the committee. Each member of the committee shall have one vote. The committee shall keep its own records, determine its own procedures, and elect its own chair, who shall report to the President. The committee also may review this policy from time to time and may recommend changes to the President.

(Regents, 11-13-80, 10-14-82, 1-15-87, 1-16-89, 6-13-91, 12-9-99, 12-7-01, 1-27-04, 6-23-11, 1-14-12)

**14. APPENDIX E**

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**CONFLICTS OF INTEREST**

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## 14. APPENDIX E

### E.1 POLICY REGARDING CONFLICTS OF INTEREST - HEALTH SCIENCES CENTER

#### I. STATEMENT OF GENERAL POLICY

The University of Oklahoma Health Sciences Center is a public institution committed to the mission of teaching; research and creative/scholarly activity; professional and University service; and public outreach. To these ends, the University strives to maintain an atmosphere that promotes free, open, and objective scholarly inquiry and compatible professional interactions while recognizing its obligations and limitations as an arm of the public.

Conflicts of interest are not uncommon in a modern university. The University actively recruits and recognizes individuals with creative abilities who can contribute to interactions not only in the classroom and laboratory but also in the business community. There are many opportunities to develop relationships with outside companies that enhance one's professional competency, render valuable service to the community, and benefit the individual and University. Such interactions and relationships can create conflicts of commitment or interest that must be governed in a manner consistent with institutional and public values. The existence of a conflict is often not clear-cut; however, an undisclosed or unmanaged conflict can irreparably damage reputations that may have taken a lifetime to establish and impair the University's standing. Accordingly, University Employees must be watchful that their relationships and activities do not create, or appear to create, such conflicts.

A Conflict of Interest refers to situations in which financial or other personal considerations may compromise an Employee's professional judgment in carrying out his/her University responsibilities such as teaching, research, contract administration, or purchasing. When used in this policy, the term Conflict of Interest ("Conflict") means (1) an actual conflict of interest exists, or (2) the potential exists for a conflict of interest to occur, or (3) there appears to be a conflict of interest; i.e., if made public, it could discredit the Employee or the University. The term also includes a Conflict of Commitment. Employees are expected to know and comply with the applicable laws and policies related to their appointment as University/State Employees.

The purpose of this policy is to provide procedures and guidance for identifying, disclosing, and managing Conflicts of Interest to assure that such Conflicts do not improperly affect the activities or professional conduct of the University or its Employees. Appropriate disclosure, review, and management provide protection from legal liability and ethical criticism for Employees and the University.

**See Appendix E.1(a) for Definitions (capitalized terms) used throughout this policy.**

#### II. GOVERNING AUTHORITY

Governing authority for this policy is derived from state and federal laws, rules, and regulations. This policy overlaps with, but does not replace, University Employee responsibilities, under such governing authority which, in some instances, will include additional prohibitions, penalties, and reporting duties. Compliance with state and federal laws, rules, and regulations does not necessarily eliminate a Conflict, which still must be addressed in accordance with this policy.

Unless otherwise permitted by law or University policy, University Employees may not:

- A. Disclose confidential and/or proprietary information acquired through their University employment to anyone not entitled to receive it, nor use such information for personal gain or benefit; e.g., providing a Company with early or exclusive access to Research results, except in compliance with a sponsored research agreement or grant;
- B. Use their University position to obtain special privileges or compensation;
- C. Knowingly seek or accept anything of value intended to or that may be perceived to affect their judgment in the performance of their University responsibilities;
- D. Have any interests, engage in any business or professional activities, or incur any obligations that conflict, appear to conflict, or have the potential to conflict with the performance of their University duties;

- E. Influence or appear to influence University financial, Research, or other decisions for procuring materials or services from Companies in ways that lead or may lead to personal gain for themselves or their Families;
- F. Use their University position to market or endorse the goods or services of a Company; or
- G. Participate in Research or technology transfer activities that compromise or appear to compromise objectivity and judgment in the design, conduct, or reporting of the Research.

Nothing in this policy prohibits any academic or administrative unit from establishing supplementary Conflicts of Interest policies and/or procedures that are more restrictive than those included in this policy.

See Appendices E.1 (a), (b), (c), (d), and (g) for select references to governing authority and policies.

### III. IDENTIFYING CONFLICTS OF INTEREST

Identification and disclosure of Conflicts of Interest can protect the Employee and the University from damage to reputations and professional activities. Employees may contact their supervisor, Appropriate Vice President, or the Office of Legal Counsel with questions regarding Conflicts.

The conditions, circumstances, and relationships described in this section could result in Conflicts. Each Employee is required to identify and disclose all Conflicts relating to, but not limited to, each of the categories below.

#### A. FINANCIAL CONFLICTS OF INTEREST

While most disclosures of Financial Interests will probably be deemed *de minimus* Conflicts, Financial Interests above certain thresholds will automatically be deemed by law or regulation to be Significant Financial Interests and will require closer scrutiny, and possible elimination, mitigation, and/or management. The thresholds are as follows:

1. Interests that when aggregated over the next twelve months for the Employee and the Employee's spouse/domestic partner and children, meet both of the following tests:
  - (a) Exceeds \$10,000 in value as determined through reference to public prices or other reasonable measures of fair market value, unless the sponsoring agency has more stringent/restrictive financial requirements or thresholds, in which case those will prevail, or
  - (b) Represents more than a five percent ownership interest in any single entity.
2. Interests that exceed \$1,000 in dividends or similar interests derived during the preceding calendar year.
3. Interests that involve the ownership or promise of stock or stock options or similar interests of any amount in a privately-held or Spin-Off Company.
4. Annual income for professional or consulting activity from a Company in excess of 25% of the Employee's Institutional Base Salary.
5. Certain reimbursed or sponsored travel disclosures required by sponsoring agency(ies).

#### B. USE OF UNIVERSITY RESOURCES

University Resources are acquired and maintained to carry out the education, research, and public service missions of the University. Except for insignificant and incidental use, an Employee may not use University Resources for non-University purposes.

1. **Facilities, Equipment, Real and Personal Property.** Employees using University facilities are required to comply with the University's Facility Use policy (<http://admin-scb.ouhsc.edu/policy/#124>) See also **Section III. F. 7** of this policy.
2. **Intellectual Property.** Except as otherwise provided by the University's Intellectual Property Policy, all intellectual property (i.e., creative works, trademarks, discoveries, technology, and inventions) made or conceived either in the course and/or scope of employment for the University or substantially through the use of facilities or funds provided by or through the University is owned by the University and managed by the University's Office of Technology Development.
3. **Human Resources.** Human resources must not be exploited in the course of an Employee's activities. Human resources include students, postdoctoral fellows, residents, faculty, and staff. It is especially important to be alert for the misuse of human resources since it often results from innocent or unconscious action.

#### C. USE OF OFFICIAL POSITION

State law prohibits any state officers or state Employees from using their official positions to obtain private benefits or to solicit or secure special privileges, exemptions, or compensation for themselves or others, except as allowed by law. For example, University Employees may not:

1. Consult, serve on advisory boards, or participate in speaking engagements except under written agreement between the Company and University. Employees must ensure that time and effort spent on such activities is approved by their Unit Head and/or Dean and do not conflict with or affect the performance of their University responsibilities. See Conflict of Commitment (**Section III.D.**).
2. Use their official University position or the University's name for personal gain or private purposes for themselves or their Families.
3. Use their official position to market, promote, or endorse the goods or services of any Company.
4. Market, promote, or endorse goods or services in a manner that could be perceived by the public as the University's marketing, promoting, or endorsing those goods or services.
5. Contract for services or purchases with their Families or with companies owned in whole or in part by themselves or their Families. Provided, however, exceptions may be granted in unusual circumstances if approved in advance by the Appropriate Vice President and are subject to University Purchasing rules. Requests for an exception must contain a detailed description of the proposed activity and a compelling justification for the provision of services or products by the Employee's Family or related Company. The relationship between the Employee and Family or Company must clearly be disclosed.

#### D. CONFLICT OF COMMITMENT

University Employees owe their primary commitment of time and intellectual energies to the University.

University faculty and staff may not have combined commitments (sponsored and non-sponsored) in excess of 100% professional effort. Faculty or staff who have University responsibilities in addition to those committed on sponsored programs, including but not limited to teaching, administration, or clinical activities, must reserve the appropriate amount of effort as agreed upon with the Unit Head and/or Dean for those commitments and, therefore, may not commit 100% paid or unpaid effort to sponsored grants and/or contracts. See: <http://grants2.nih.gov/grants/guide/notice-files/NOT-OD-03-029.html>.

Employees must not allow professional activities to detract from their primary allegiance to the University. Employees must maintain a significant presence on campus consistent with the scope of their appointment. Full-time employees must not have significant non-University responsibilities and may not act as the principal investigator on sponsored projects outside the University, except as provided in this policy.

Employees with less than full-time appointments may engage in individual consulting relationships and other employment, to the degree that those activities do not interfere or conflict with their obligations to the University and occur outside their University appointment.

Each employee must disclose any Conflict of Commitment as each new activity arises and on an annual basis in accordance with this policy. An employee intending to engage in an activity that may present a Conflict of Commitment must submit a written request to the Unit Head, Dean, and/or the Appropriate Vice President, as appropriate, for review of the activity, approval, and implementation of a Management Plan as appropriate.

#### **E. INSTITUTIONAL CONFLICTS OF INTEREST**

Institutional Conflicts of Interest are managed under the University's Institutional Conflicts of Interest Policy. See [www.ou.edu](http://www.ou.edu).

#### **F. RELATIONSHIPS WITH COMPANIES**

Generally, while employees may accept positions and hold Financial Interests in privately held, for-profit Companies, relationships with (a) Companies that are doing business with the University or (b) Companies in which Employees have a direct financial stake create Conflicts that require disclosure, assessment, and management. Employees may also be prohibited from involvement in particular business arrangements by governing law.

Employees with an ownership interest in Companies should be aware of the following state ethics rule: No Employee shall sell, offer to sell, or cause to be sold; rent; or lease (either as an individual or through any Company in which the Employee holds a Financial Interest) goods, services, buildings or property to the University. Exceptions to this rule are: 1) contracts for goods or services valued at less than five thousand dollars (\$5,000), and 2) contracts entered into after public notice and in response to a University bid or request for proposal (RFP).

##### **1. Equity and Other Financial Interests**

Employees who propose to become involved with a Company in which they have a Financial Interest, including but not limited to Equity, must promptly disclose the interest to the University. Employees having income from or Equity in such Companies should recognize that their ability to conduct Research sponsored by that Company may be restricted because of a Conflicts created by their income from or Equity in the Company.

When intellectual property is produced by an Employee in the performance of his/her official University duties or through the use of University Resources, the Employee may receive income or Equity under contract through the University from a Company commercializing the intellectual property.

##### **2. Membership on Boards**

Service on a Company's Board of Directors or Advisory Board is normally acceptable; however, when the Company proposes to do or is doing business with the University, Conflicts arise because fiduciary obligations to the Company may conflict with primary obligations to the University to act in its best interests. Notice to and approval of Board membership by the Appropriate Vice President and recusal from Board matters involving University interests or resignation from the Board are required.

Employees may be permitted to serve on the Board of a Company that has licensed University technology if the service is disclosed in advance to and with approval of the Appropriate Vice President. An employee who is allowed to assume a Board position should recognize that his or her ability to conduct Research that is sponsored by the Company may be restricted because of the Conflict created by the Board position. Employees who assume Board positions must recuse themselves from all Board decisions that involve the University.

### 3. **Service as an Operating Officer**

An Employee cannot serve as an Operating Officer of any Company in which the University owns a Financial Interest or with which there is a Conflict with the Employee's University position. If an Employee wishes to serve as an Operating Officer, under such circumstances, he/she may request a leave of absence from the University for a specified period of time, in accordance with policies in the [Faculty Handbook](#).

### 4. **Service as a Scientific Officer**

An Employee may serve as a Scientific Officer for a Company with the prior written permission of the Unit Head, Dean, and Appropriate Vice President. Such service must be through a written agreement between the University and the Company. The term of service as a Scientific Officer should ordinarily be for one year, renewable with written approval of the Employee's Unit Head, Dean, and the Appropriate Vice President.

### 5. **Consulting Relationships and Multiple Activities**

All consulting activities of Employees must be conducted through written agreements between the University and the Company. Where such activities are performed for a Company in which the Employee holds Equity; receives compensation; serves as a Scientific Officer; has a Board seat; has multiple professional relationships with the Company (e.g., consulting and research agreements); or, as permitted under this policy, serves as an Operating Officer; any consulting relationship with the Company must be disclosed and receive prior review and written approval from the Employee's Unit Head, Dean, and the Appropriate Vice President.

### 6. **Support of Students and Trainees by Companies**

The progress and academic standing of students and trainees must never be compromised. Employees supervising students and trainees must inform them in writing of the source(s) of their funding support, disposition of intellectual property, management of proprietary information, and handling of publication rights prior to assigning the students or trainees to a Research or training project supported by a Company.

A student's academic program cannot be supported by a Company in which the supervising Employee has Equity, serves on a Board, or serves as an Operating Officer or Scientific Officer, unless specifically approved in writing by the Dean of the Graduate College and the Senior Vice President and Provost. If approved, support (e.g., stipends, tuition, salary, scholarships) for students and trainees provided by Companies must comply with all of the following provisions:

- (a) The College department, program, or unit approves the recipient;
- (b) The funds are provided to the University;
- (c) The recipient is not subject to any implicit or explicit expectation of providing or foregoing something in return for the support; i.e., a "quid pro quo"; and
- (d) The Company does not withhold or unreasonably limit publication of the student's research.

University trainees and students may not be employed by any Company to conduct Research that overlaps with their University training or academic program. In addition, Graduate College policy does not allow a faculty member with supervisory responsibility for an Employee to serve as mentor for the same individual as a student; therefore, any proposed employment of a trainee or student by a Company to work on Company Research that does not overlap with their training or academic program in which the mentor has Equity, serves on a Board, or serves as an Operating Officer or Scientific Officer of the Company must be approved in advance by the Dean of the Graduate College and the Senior Vice President and Provost.



## 7. **Company Use of University Equipment and Space**

An Employee may not use or allocate University equipment or space for personal or non-University purposes, except as provided by University policy.

Limited use of University space and designated equipment by a Company may be permitted in accordance with governing law following review and approval by the Appropriate Vice President. The terms and conditions of such use shall be reduced to writing and signed by the Appropriate Vice President and the Company in accordance with University policy.

## 8. **Funding for Sponsored Research and Service Activities**

Employees may not act as a principal investigator on sponsored projects outside the University, except as allowed by Board of Regents' policy.

There is a presumption against accepting funding from a Company in which (i) the University or the Employee has a Financial Interest, (ii) the Employee serves on the Board of the Company, or (iii) the Employee serves as an Operating Officer or Scientific Officer

The presumption is applied as follows:

When a Company proposes to contract for Research or services to be conducted by such an Employee or anyone under the direction of that Employee and the Research or services involve neither human research participants nor validation testing, the presumption against accepting funding may be rebutted if, in the judgment of the Appropriate Vice President, one of the following is met and a Management Plan is in place:

- (a) The Employee's influence over the Company's decisions and the possible commercial or private benefit from the Research or services are negligible.
- (b) The Research or service is essential to maintain the continuity of an effort related to University licensed intellectual property during a short interval of time, normally not greater than one year.
- (c) The Employee's relationship with the Company does not involve additional relationships with the Company such as consulting or service agreements or Board membership, so that the likelihood of any distortion of the Research or service outcome is minimal.

Employees supervising students and trainees shall inform them in writing of the source(s) of funds, disposition of intellectual property, management of proprietary information, and handling of publication rights prior to assigning the students or trainees to a Research or training project.

The University may not conduct testing to validate to the public an invention created at or by the University.

## 9. **SBIR / STTR Programs**

Under Small Business Innovation Research (SBIR) and Small Business Technology Transfer (STTR) programs, small businesses are encouraged to partner with a research university to perform innovative research and/or to assist in technology transfer from the university. A University Employee may participate in the SBIR/STTR project only through a contract between the University and the Company that outlines the Employee's responsibilities and/or University benefits or with written authorization by the Dean and Vice President for Research.

SBIR/STTR programs can produce a variety of complex situations with regard to Conflicts issues. Therefore, Employees are required to comply with the following:

- 1. A University Employee with any role on an SBIR/STTR project must submit the entire grant application (University's portion and small business's portion) to the Office of Research

Administration (ORA) to enable the appropriate reviews to take place before submission of the application to the funding agency.

2. The principal investigator for the small business SBIR/STTR application and the principal investigator for the subcontract to the University must be different individuals.
3. If a University Employee or his/her Family has a Financial Interest in a Company, that individual may not bring Research into his/her University laboratory through an SBIR or STTR contract involving that Company, except through a contract between the Company and the University.
4. The Company must provide evidence of availability of functioning space in which Research activities can and will take place prior to submission of the grant application.
5. The Employee must notify the Vice President for Research and/or ORA in writing upon receipt of an SBIR/STTR award. If the Employee is serving as the principal investigator of the small business concern on an SBIR grant he/she must also provide documentation of approval from the appropriate Dean to reduce his/her University appointment to commit the required minimum 51% effort as the SBIR principal investigator of the small business concern.
6. Prior to start of the project, a contract between the University and the Company must be executed outlining the Employee's responsibilities and/or University benefits or the Employee must obtain written authorization by the Dean and the Vice President for Research to proceed. There must be a clear distinction between the work done by or on behalf of the Company and the work performed by or on behalf of the University.
7. The Employee must work through his/her college/department to reduce his/her appointment if serving as the principal investigator on an SBIR award.

#### **G. FINANCIAL INTERESTS INVOLVING HUMAN RESEARCH PARTICIPANTS**

All Financial Interests of an Employee serving as an investigator in Research involving human research participants must be disclosed and managed under this policy and the University's Human Research Participant Protection (HRPP) policy (see <http://www.ouhsc.edu/irb>).

An investigator with a Conflict in Research involving human research participants may conduct that Research only with an HRPP-approved Management Plan. However, the Vice President for Research has final authority to disallow Research determined to be contrary to the best interests of the University.

### **IV. DISCLOSING CONFLICTS OF INTEREST**

Employees must disclose a Conflict whenever a new activity or relationship arises and also on an annual basis in accordance with this policy. To ensure all required disclosures are made under this policy Employees should contact the Unit Head, Dean, or Appropriate Vice President if there is any question whether an activity or relationship requires disclosure. All disclosures will be forwarded to Internal Audit by ORA or the Employee's supervisor. Failure to disclose Conflicts can result in administrative sanctions, severe sanctions, and/or civil and criminal penalties.

#### **A. WHAT TO DISCLOSE**

When used in this policy, the term Conflict of Interest ("Conflict") means (1) an actual conflict of interest exists, or (2) the potential exists for a conflict of interest to occur, or (3) there appears to be a conflict of interest; i.e., if made public, it could discredit the Employee or the University. Disclosure of Conflicts is required for the following in accordance with this policy.

1. Financial Conflicts of Interest above the specified thresholds
2. Conflicts of Commitment
3. Relationships with Companies

- (a) Equity and other Financial Interests
- (b) Board membership
- (c) Service as an Operating Officer
- (d) Service as a Scientific Officer
- (e) Consulting relationships with Companies
- (f) Multiple professional relationships with Companies
- (g) Company support of students and trainees
- (h) Company use of University equipment and/or space
- (i) Sponsored research support from Companies in which the Employee or University has a Significant Financial Interest
- (j) Compensation for professional services to a Company
- (k) Financial Interests involving human subjects research

Although all possible required scenarios cannot be itemized here, the following are examples of circumstances that do require disclosure under this policy:

1. Participating in University Research on a technology owned, licensed, or contractually obligated to a Company with which the Employee or his/her Family has a Financial Interest.
2. Receipt of University Research support (whether in dollars or in kind) from a Company with which the Employee or his/her Family has a Financial Interest.
3. Receipt of royalties on products undergoing Research or testing under the supervision or control of the Employee.
4. Service on a board of directors or scientific advisory board of, or executive position with, a Company from which the Employee, Employee's Family, or a Company associated with the Employee or his/her Family receives sponsored research support.
5. Receiving funds, gifts, or any compensation from a Company that is sponsoring an Employee's Research, for activities or purposes unrelated to the actual costs of performing that Research.
6. Assigning to fellows and/or students, tasks related to an Employee's involvement with a Company.
7. Purchasing equipment, services, or supplies for Research from a Company with which the Employee, the Employee's Family, or a Company associated with the Employee or his/her Family has a Financial Interest.
8. Receipt of any non-royalty payments or entitlements to payments in connection with the Research that are not directly related to the reasonable costs of the Research (as specified in a research agreement between the sponsor and the University).

In addition, in all publications and presentations Employees must always disclose Financial Interests in any Company that supports Research being reported.

#### **B. WHEN TO DISCLOSE**

Disclosure is required with:

1. Each new and renewal proposal, grant application, and contract submitted to the Office of Research Administration (ORA).
2. Each new or modified activity or relationship with a Company (i.e., license agreement with Spin-Off Company).
3. Each new circumstance, situation, or activity that is not associated with an ORA submission and is a Conflict of Interest.

The Employee's Unit Head and Dean shall review and discuss the disclosure with the Employee as necessary. In those instances in which the Expanded Disclosure Form is required, the Unit Head and Dean will forward the Expanded Disclosure Form and written recommendations regarding the elimination, mitigation, and/or management of any identified Conflict(s) to the Appropriate Vice President for review and final decision on how to proceed. The Appropriate Vice President may consult with others, such as a committee appointed for that purpose.

The Employee shall be notified in writing of the decision, including any requirements for immediate action and plans for continued monitoring of the Conflict.

#### **C. HOW TO DISCLOSE**

All disclosures are to be made on the "Conflicts of Interest Disclosure Form" and if required per the disclosure form instruction on the "Expanded Conflicts of Interest Disclosure Form". The Conflicts of Interest Disclosure Form is incorporated into the Office of Research Administration Routing Forms for all submissions to ORA. Non-ORA related disclosures are made on these forms and submitted to the Appropriate Vice President.

See the Office of Research Administration website (<http://research.ouhsc.edu>) for both disclosure forms which contain specific instructions.

#### **V. ELIMINATING, MITIGATING, OR MANAGING CONFLICTS OF INTEREST**

After a Conflict has been identified and disclosed, the Appropriate Vice President shall develop a written Management Plan for eliminating, mitigating, or managing the Conflict, which may include, but is not limited to:

- A. Full internal disclosure and annual updates on University disclosure forms;
- B. Public disclosure;
- C. Disclosure to individuals or entities with relevant interests such as institutional committees, research participants, journals, and data safety monitoring boards;
- D. Modification of the activity;
- E. Divestiture of financial interests of the Employee and/or his/her Family;
- F. Reduction of involvement or severance of relationships that create the Conflict;
- G. Alteration of participation in all or a portion of the activity;
- H. Transferring securities to an independent financial manager or blind trust or limiting the timing of sales or distributions;
- I. Oversight of activity by an appropriate supervisor or independent reviewer;
- J. Termination of student or post-doctoral fellow involvement in the activity;
- K. Independent clinical review of the appropriateness of clinical care given to research participants, if applicable;
- L. Monitoring the informed consent process.

After implementation of a Management Plan and commencement of the activity or relationship, the Appropriate Vice President will review the effectiveness of the Plan as often as deemed necessary, but not less frequently than every twelve months. If, during the conduct of the activity, the Appropriate Vice President determines that the Conflict has not been properly managed or has become unmanageable under the Plan, he/she will then, among other options, review the activity and, as necessary, refine the Plan accordingly and/or require a new disclosure. If an outside

funding agency requires notification of the Conflict, the Appropriate Vice President will notify the agency in accordance with agency requirements.

For activities with Companies in which the Employee has Equity or serves as an Officer or on the Board, the Management Plan must comply with **Section III. F.**, Relationships with Companies, of this policy.

## **VI. SANCTIONS**

University sanctions may include, without restriction, reprimand, restitution, loss of pay, suspension, or dismissal. Persons who violate this policy also may be subject to civil and criminal penalties for violations of state or federal law; e.g., civil penalties for willful violations of state laws may reach \$50,000 or more per violation.

Allegations against an Employee for breach of this policy should be reported to the Appropriate Vice President for review and action. In the event a violation of this policy also constitutes a breach of any other University policy, the Senior Vice President and Provost, in consultation with the Appropriate Vice President, shall determine which policy shall govern.

(Regents, 9-26-95, 3-25-10, 6-26-12)

## **VII. APPENDICES**

- E.1 (a) Definitions
- E.1 (b) Federal Regulations and Guidance Regarding Financial Conflicts of Interest
- E.1 (c) State Government Ethics Commission Rules Governing the Ethics and Conflicts of Interest for the Conduct of State Officers and Employees
- E.1 (d) Provost's Memo Regarding Promotional Agreements for Private Industry (6-27-16)
- E.1 (e) Tips for Avoiding Conflicts of Interest
- E.1 (f) Questions and Answers
- E.1 (g) Other University Policies Which May Relate to Conflicts of Interests

## APPENDIX E.1 (a)

## DEFINITIONS

**Appropriate Vice President:** The vice president with authority over the unit or activity in which the Conflict of Interest has been identified or his/her designee. For example, if the disclosure regards a research activity, the Vice President for Research will provide oversight, regardless of where the individual is employed within the University. If the activity is not research-related, the vice president with authority over the unit or activity will provide oversight.

**Board:** Board of Directors or Advisory Board.

**Company:** Any entity, including a Spin-Off Company, other than the Board of Regents of the University of Oklahoma.

**Compensation:** All remuneration or other things of value received in payment for services rendered, such as salary, gifts, stocks, favors, or other items of value.

**Conflict of Commitment:** Time or effort devoted to professional activities that may adversely affect or interfere with an Employee's primary University responsibilities and obligations.

**Conflict(s) of Interest (Conflict):** Refers to situations in which financial or other personal considerations may compromise an Employee's professional judgment in carrying out his/her University responsibilities such as teaching, research, contract administration, or purchasing. When used in this policy, the term Conflict of Interest means (1) an actual conflict of interest exists, or (2) the potential exists for a conflict of interest to occur, or (3) there appears to be a conflict of interest; i.e., if made public, it could discredit the Employee or the University. The term also includes a Conflict of Commitment.

**Employee:** Any person possessing a full- or part-time faculty or staff appointment at the University. For the purposes of this policy, Employee also includes adjunct faculty, postdoctoral fellows, residents, and volunteers. In addition, graduate and undergraduate students, whether or not paid, who work on grants or contracts are considered Employees for the purposes of this policy.

**Equity:** Ownership interest in a Company, such as stock and stock options.

**Family:** Includes any individual who is a spouse/domestic partner, parent, child, stepparent, stepchild, mother-in-law, father-in-law, son-in-law, daughter-in-law, grandparent, or grandchild of an Employee or a member of the Employee's household.

**Financial Interest:** Anything of monetary value including, but not limited to, Equity.

**Gift:** Anything of value to the extent that consideration of equal or greater value is not received in exchange, as set forth in the State Ethics Commission Rules Governing the Ethical Conduct of State Officers and Employees.

**Institutional Base Salary:** The annual guaranteed compensation paid by the University for an Employee's appointment, whether that individual's time is spent on research, teaching, patient care, and/or other University activities.

**Investigator:** For the purposes of this policy, means *the Principal Investigator and any person listed by the Principal Investigator as responsible for the design, conduct, or reporting of their sponsored program(s)*. These individuals are listed at the time of proposal submission. Normally, all senior research personnel should be listed as "Investigators." All of the following should be considered, to the extent they are responsible for the design, conduct, or reporting of the sponsored program: professorial faculty, research associates, emeritus faculty, research collaborators, visiting scientists, individuals with courtesy appointments. The term "Investigator" does not commonly apply to OUHSC departmental grant administrators or to the financial reporting staff of sponsored programs.

**Management Plan:** Written plan to manage, mitigate, or eliminate a disclosed Conflict of Interest.

**Operating Officer:** An executive of a Company (with or without salary); e.g., Chief Executive Officer, Chief Operating Officer, Chief Financial Officer, President, Vice-President.

**Public Health Service (PHS):** An operating division of the U.S. Department of Health and Human Services, and any components of the PHS to which the authority involved may be delegated.

**Research:** A systematic, intensive study intended to increase knowledge or understanding of the subject studied, a systematic study specifically directed toward applying new knowledge to meet a recognized need, or a systematic application of knowledge to the production of useful materials, devices, and systems or methods, including design, development, and improvement of prototypes and new processes to meet specific requirements. Also termed “research and development.”

**Scientific Officer:** The person responsible for conceiving, evaluating, and/or executing Research for a Company (with or without salary).

**Senior Vice President and Provost:** The chief executive academic and administrative officer of the University or his/her designee.

**Significant Financial Interest:** Financial interests above a certain threshold:

- A. Interests that when aggregated over the next twelve months for the Employee and the Employee’s spouse/domestic partner and children, meet either of the following tests:
  - (i) Exceeds \$10,000 in value as determined through reference to public prices or other reasonable measures of fair market value, or
  - (ii) Represents more than a five percent ownership interest in any single entity.
- B. Interests that exceed \$1,000 in dividends derived during the preceding calendar year.
- C. Interests that involve the ownership or promise of stock or stock options of any amount in a privately-held or Spin-Off Company.
- D. Annual income for professional or consulting service from a Company in excess of 25% of the Employee’s Institutional Base Salary.

**Spin-Off Company:** A Company that is organized to develop and/or commercialize specific University intellectual property. Spin-Off Companies are typically privately held, for-profit Companies with licenses to develop and/or commercialize University intellectual property created by University Employees and in which those Employees often own some or all of the Company.

**Unit Head:** An Employee’s supervisor, such as his/her Department Chair, Center Director, or Dean. Section Chief is not considered Unit Head.

**University:** The University of Oklahoma Health Sciences Center.

**University Resources:** All University facilities, equipment, real and personal property, intellectual property, and human resources.

## APPENDIX E.1 (b)

FEDERAL REGULATIONS AND GUIDANCE REGARDING  
FINANCIAL CONFLICTS OF INTEREST

42 CFR Part 50.601-607, Subpart F - Responsibility of Applicants for Promoting Objectivity in Research for which PHS Funding is Sought

45CFR Part 94.1 - Responsible Prospective Contractors

21 CFR Part 54 – Financial Disclosure by Clinical Investigators

NIH Guide – Objectivity in Research

<http://grants2.nih.gov/grants/guide/notice-files/not95-179.html>

FDA "Guidance: Financial Disclosure by Clinical Investigators" (March 20, 2001)

<http://www.fda.gov/oc/guidance/financialdis.html>

NIH Guide - Financial Conflicts of Interest and Research Objectivity: Issues for Investigators and Institutional Review Boards, June 5, 2000

<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-00-040.html>

OHRP Draft Interim Guidance - Financial Relationships in Clinical Research: Issues for Institutions, Clinical Investigators, and IRBs to Consider When Dealing with Issues of Financial Interests and Human Subject Protection

<http://www.hhs.gov/ohrp/nhrpac/mtg12-00/finguid.htm>

NIH Guide Notice (12/06/2004) - Reminder of Financial Conflict of Interest Requirements for All NIH-Supported Institutions.

<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-05-013.html>

Protecting Subjects, Preserving Trust, Promoting Progress: Policy and Guidelines for the Oversight of Individual Financial Interests in Human Subjects Research.

<http://www.aamc.org/research/coi/firstreport.pdf>

This first report of the AAMC Task Force on Financial Conflicts of Interest in Clinical Research provides guidance related to individual financial interests in human subjects research.

Protecting Subjects, Preserving Trust, Promoting Progress II: Principles and Recommendations for Oversight of an Institution's Financial Interests in Human Subjects Research. <http://www.aamc.org/research/coi/2002coireport.pdf>.

This second report of the AAMC Task Force offers a conceptual framework for assessing institutional conflicts of interest and a set of specific recommendations for the oversight of certain financial interest in human subjects research. The guidelines highlight areas that, in the view of the AAMC's Task Force, are especially problematic and must therefore receive close scrutiny.







## APPENDIX E.1 (c)

**STATE GOVERNMENT ETHICS COMMISSION RULES GOVERNING THE ETHICS AND CONFLICTS OF INTEREST  
FOR THE CONDUCT OF STATE OFFICERS AND EMPLOYEES**

Reference: Article XXIX of the Oklahoma Constitution, Chapter 64, Appendix: Title 257. Ethics Commission (Section 257:20-1-13 of the Rules of the Ethics Commission, 74 O.S. Supp. 2007, Ch. 62, App.)

The following rules and standards may be amended by the Legislature from time to time so to find the latest version you should either consult the latest copy of the Oklahoma State Statutes or contact the University Office of Legal Counsel.

-  Oklahoma Statutes Citationized
  -  Title 74. State Government
    -  Chapter 62 Appendix - Title 257. Ethics Commission
      -  Article Chapter 20

**Standard 257:20-1-1****General Purpose and Authority**

- (a) The rules of this chapter have been adopted for the purpose of complying with the provisions of the Oklahoma Constitution, Article XXIX, Section 3 (B). The Ethics Commission finds that the proper operation of state government requires:
  - (1) that a state officer or state employee be independent and impartial;
  - (2) that government policy and decisions be made through the established processes of state government;
  - (3) that a state officer or state employee not use state office to obtain private benefits;
  - (4) that a state officer or state employee avoid action which creates the appearance of using state office to obtain a private or inappropriate benefit; and
  - (5) that the public have confidence in the integrity of its government and state officers and state employees.
- (b) It is the intent of the Ethics Commission:
  - (1) to protect against conflicts of interest and establish standards of conduct of elective officers and state employees in situations where conflicts may exist;
  - (2) to attract those citizens best qualified to serve. Thus the rules against conflicts of interest must be so designed as not to impede unreasonably or unnecessarily the recruitment and retention by government of those best qualified to serve. State officers should not be denied the opportunity, available to all other citizens, to acquire and retain private economic interests except when such interests conflict with the responsibility of such officers to the public;
  - (3) to discourage state officers and state employees from acting upon a private or business interest in the performance of a public duty;
  - (4) to develop public confidence in persons seeking or holding state office or employment, to enhance the dignity of state government, and to make it attractive to citizens who are motivated to public service;
  - (5) that state officers and state employees shall exercise their powers and prerogatives without prejudice or favoritism.

**Standard 257:20-1-2****Buying or Selling State Employment or Appointments to State Office**

- (a) Candidates for state office, state officers, and state employees shall not, directly or indirectly, solicit, receive or agree to receive anything of value, or campaign contributions, for agreeing to appoint, appointing or procuring the appointment of another person to any state office or agreeing to employ, employing or procuring the employment of another person in any position as a state employee.
- (b) Nothing in Subsection (a) of this section shall be construed to include matters within the purview of the Oklahoma Personnel Act, Sections 840 et seq. and 841 et seq. of Title 74 of the Oklahoma Statutes.

**Standard 257:20-1-3****Accountability**

- (a) All state officers and all state employees:
  - (1) shall support, obey, and defend the Constitution and laws of the State of Oklahoma; and
  - (2) shall not knowingly receive, directly or indirectly, any money or other valuable thing, for the performance or nonperformance of any act or duty pertaining to his or her office, other than the compensation allowed by law.
- (b) Nothing in Subsection (a) of this section shall be construed to include matters within the purview of the Oklahoma Personnel Act, Sections 840 et seq. and 841 et seq. of Title 74 of the Oklahoma Statutes.

**Standard 257:20-1-4****Misuse of Office**

- (a) No state officer or state employee shall use his or her official position to solicit or secure special privileges, exemptions or compensation for himself, herself or others, except in the performance of his or her duties or as may be allowed by law. Such prohibited activity, except as provided by statute, shall not include:
  - (1) writing letters or orally communicating recommendations for hiring, reclassifying, terminating or promoting a state employee; or
  - (2) an employee of an institution within The Oklahoma State System of Higher Education receiving income from ownership interest in a technology or other intellectual property or in a business enterprise commercializing the technology or other intellectual property, or receiving income as a consultant, adviser, or employee of such business enterprise, when such technology or other intellectual property is the result of research conducted by the employee in the performance of his or her duties on behalf of the institution or involving the authorized use of the facilities, equipment, or services of the institution.
- (b) No state officer or state employee, except in the performance of his or her duties, shall disclose or offer to disclose confidential information acquired by reason of his or her official position to any person, group or others not entitled to receive such confidential information, nor shall he or she use such information for his or her personal gain or benefit.
- (c) No state officer or state employee shall:
  - (1) receive or solicit any compensation that would impair his or her independence of judgment for his or her services as an officer or employee of any state agency, from any source other than the state, unless otherwise provided by law; or
  - (2) accept or solicit other employment which would impair his or her independence of judgment in the performance of his or her public duties.

Provided, the activities prohibited by this subsection shall not include an employee of an institution within The Oklahoma State System of Higher Education receiving income from ownership interest in a technology or other intellectual property or in a business enterprise commercializing the technology or other intellectual property, or receiving income as a consultant, adviser, or employee of such business enterprise, when such technology or other intellectual property is the result of research conducted by the employee in the performance of his or her duties on behalf of the institution or the authorized use of the facilities or services of the institution.

- (d) No legislator or statewide elective officer shall be employed by or receive any commission, fee, or other compensation from the state, except:
  - (1) the compensation and allowance for expenses provided by law to such legislator or statewide elective officer;
  - (2) compensation from serving in the Oklahoma National Guard or the Oklahoma State Guard; or
  - (3) income from government pension or retirement plans.

**Standard 257:20-1-5**

**Ownership Prohibited by Certain State Officers in Certain Government Securities**

No state officer of a governmental entity shall own any interest in any bond, obligation or security issued by or in the name of such governmental entity, unless such interest is a part of a mutual fund or similar security.

**Standard 257:20-1-6**

**Representation by State Officers and State Employees**

- (a) A statewide elective officer shall not receive or agree to receive compensation for representing or assisting any person or business in any transaction involving the state; or represent another person for a fee before any state department, agency, board or commission. The provisions of this subsection shall not:
  - 1. apply to the practice of law before any court; or
  - 2. preclude a statewide elective officer from acting on behalf of a constituent to determine the status of a matter before a state department, agency, board, commission, institution or instrumentality without accepting compensation therefor.
- (b) A legislator shall not receive or agree to receive compensation for representing or assisting any person or business in any transaction involving the state; or represent another person, firm, corporation or entity for a fee before any state department, agency, board or commission. The provisions of this subsection shall not:
  - 1. apply to the practice of law before any court; or
  - 2. preclude a member of the Legislature from acting on behalf of a constituent to determine the status of a matter before a state department, agency, board, commission, institution or instrumentality without accepting compensation therefor.
- (c) A state officer or state employee shall not represent another person as an attorney in any matter before the Commission.
- (d) A state officer or state employee shall not represent another person before the governmental entity the state officer or state employee serves.

- (e) These restrictions shall not apply to the following:
1. purely ministerial matters which do not require discretion on the part of the entity;
  2. representation by a state officer or state employee in the course of the officer's or employee's official duties;
  3. self-representation by the state officer or state employee;
  4. representation by the state officer or state employee in matters arising out of or rules promulgated pursuant to the Oklahoma Personnel Act; or
  5. representation by the state officer or state employee in a grievance before an institution of the Oklahoma State System of Higher Education so long as such representation is consistent with the rules relating to such grievances.
- (f) The restrictions set forth in this section do not apply if the state officer or state employee is testifying under oath to facts that are within the individual's knowledge, or as an expert witness who does not accept compensation other than regularly provided for by law or rule for subpoenaed witnesses.

**Standard 257:20-1-7****Votes, Deliberations, and Discussions by Legislators or Statewide Elective Officers**

- (a) A legislator or statewide elective officer shall not introduce or cause to have introduced, request the introduction of, promote, or vote on any legislation if the statewide elective officer or legislator or a child, adopted child, step-child or spouse of the officer or legislator or a business or entity with which the legislator or officer or a member of the immediate family of the legislator or officer is associated has:
- (1) a pecuniary interest in; or
  - (2) a reasonably foreseeable benefit from;
- the legislation. A reasonably foreseeable benefit includes detriment to a business competitor to the legislator or statewide elective officer, to a business competitor of a member of the immediate family of the legislator or officer, or to a business competitor of a business or entity with which the legislator or officer or child, adopted child, step-child or spouse of the legislator or officer is associated.
- (b) A legislator or statewide elective officer may introduce or cause to have introduced, request the introduction of, promote, or vote on legislation if the only pecuniary interest or reasonably foreseeable benefit that may accrue to the legislator or officer, child, adopted child, step-child or spouse of the legislator or officer, or business or entity with which a legislator or officer or a child, adopted child, step-child or spouse of a legislator or officer is associated is incidental to the legislator's or officer's, child's, adopted child's, step-child's, or spouse's or business or entity's position, or which accrues to the legislator or officer, child, adopted child, step-child or spouse, of the legislator or officer, or business or entity as a member of a profession, occupation, or large class, whichever is applicable, to no significantly greater extent than the pecuniary interest or potential benefit could reasonably be foreseen to accrue to all other members of the profession, occupation, or large class.
- (c) Nothing in this subsection shall allow a legislator or a member of the immediate family of a legislator, a statewide elective officer, or a business or entity with which the legislator or statewide elective officer is associated to contract with a governmental entity except as provided in Subsection (b) of Section 10 of this chapter.

**Standard 257:20-1-8****Votes, Deliberations, and Discussions by Public Members**

- (a) A public member shall not participate in the discussion on, vote on, influence, or attempt to influence an official action of the governmental entity the public member serves on if the public member or a member

of the immediate family of the public member or a business or entity with which the public member or a member of the immediate family of the public member is associated, has:

- (1) a pecuniary interest in; or
- (2) a reasonably foreseeable benefit from;

the matter under consideration by the governmental entity of which the public member is a member. A reasonably foreseeable benefit includes detriment to a business competitor of the public member, to a business competitor of a member of the immediate family of a public member or to a business competitor of a business or entity with which the public member or a member of the immediate family of the public member is associated. The public member's abstention must be recorded in the governmental entity's minutes.

- (b) A public member may participate in the discussion on, vote on, or influence or attempt to influence an official action if the only pecuniary interest or reasonably foreseeable benefit that may accrue to the public member or a member of the immediate family of a public member or business or entity with which the public member or member of the immediate family of the public member is associated is incidental to the public member's, immediate family member's or business or entity's position, or which accrues to the public member, immediate family member or business or entity as a member of a profession, occupation, or large class, whichever is applicable, to no significantly greater extent than the pecuniary interest or potential benefit could reasonably be foreseen to accrue to all other members of the profession, occupation, or large class.
- (c) Nothing in this section shall allow a public member or a member of the immediate family of the public member or a business or entity with which the public member or a member of the immediate family of the public member is associated to contract with the governmental entity over which the public member has jurisdiction.

#### **Standard 257:20-1-9**

##### **Restraints on Solicitation or Acceptance of Anything of Value – Disclosure**

- (a) Influence of official act, fraud or official duty. No state officer and no state employee shall, directly or indirectly, ask, demand, exact, solicit, seek, accept, assign, receive, or agree to receive anything of value for the state officer or employee or for any other person or entity, in return for being:
  - (1) influenced in the performance of an official act;
  - (2) influenced to commit, aid in committing, collude in, or allow fraud, or make an opportunity for the commission of fraud on a governmental entity; or
  - (3) induced to perform or fail to perform an act in violation of the state officer's or state employee's official duty.
- (b) Soliciting individually or on behalf of a regulatory governmental entity prohibited. No state officer and no state employee shall, directly or indirectly, ask, demand, exact, solicit, seek, accept, assign, receive or agree to receive anything of value individually or for or on behalf of a governmental entity from a business entity, its employees, officers or board members, or a person who has greater than a ten percent (10%) interest in such entity if the rates, charges, prices or fees charged by the business entity are subject to regulation by the governmental entity which the officer or employee serves. This provision does not apply to a campaign contribution properly received and reported, which is exempt from the definition of anything of value in Section 2 of Chapter 1 of this title, or to anything of value accepted on behalf of the state of Oklahoma pursuant to Subsection (e) of this section.
- (c) Calendar year limits on things of value.
  - (1) Elective officers. No elective officer, or an immediate family member of an elective officer shall, directly or indirectly, ask, demand, exact, solicit, seek, accept, assign, receive, or agree to receive

things of value in a calendar year which, in the aggregate, are valued at more than three hundred dollars (\$300); and

- (2) Other state officers and state employees. Except for an elective officer, no state officer, state employee or an immediate family member of such state officer or state employee shall, directly or indirectly, ask, demand, exact, solicit, seek, accept, assign, receive or agree to receive things of value in a calendar year which, in the aggregate, are valued at more than one hundred dollars (\$100):

from a person who the state officer or state employee knows or should know:

- (A) is a lobbyist or lobbyist principal, provided that the following shall not be subject to this subsection:
- (i) things of value received as a result of or arising out of employment by, or doing business with, a lobbyist or lobbyist principal; and
  - (ii) things of value received from any director, stockholder, partner, agent, affiliate, member, employee or officer of a lobbyist principal if the donor is excepted in subparagraph (D) of Paragraph (2) from the definition of "anything of value" in Section 2 of Chapter 1 of this title, or if there exists between the recipient and the donor a close personal relationship of long standing in which the mutual exchange of gifts on special occasions, such as holidays or anniversaries, has become customary;
- (B) is seeking to do business or doing business with the governmental entity of which the state officer's or state employee's office or employment is a part; or
- (C) has an economic interest in actions or matters before or affecting the governmental entity of which the state officer's or state employee's office or employment is a part.

A thing or things of value given by a lobbyist; the lobbyist principal or lobbyist principals by whom the lobbyist is employed or retained; or a stockholder, partner, agent, affiliate, member, employee or officer of the lobbyist principal or lobbyist principals by whom the lobbyist is employed or retained are aggregated for purposes of the disclosure threshold and calendar year limits, regardless of how the thing or things of value are funded. If more than one lobbyist is retained or employed by a lobbyist principal, the disclosure and calendar year limits of the first lobbyist to register on behalf of the lobbyist principal for a calendar year are aggregated with each additional lobbyist employed or retained by the same lobbyist principal.

- (d) Prohibition versus limit--Exception. Nothing in Subsection (c) shall allow a state officer or state employee to accept anything of value in violation of Subsection (a) of this section. Subsection (c) shall not apply to public members when things of value are received but are not given as a result of the public member's status as a public member.
- (e) Exceptions for state officers and employees of judicial branch and corporations. Nothing in this section shall allow:
- (1) a judicial officer, juror, referee, arbitrator or umpire to accept anything of value from a corporation or any other person, knowing that person to be a party in interest or the attorney or counsel of a party in interest to any action or proceeding then pending or about to be brought before him or her pursuant to Section 386 of Title 21 of the Oklahoma Statutes; or
  - (2) a corporation to influence elections or official duty by contributions of money or anything of value pursuant to Section 40 of Article IX of the Oklahoma Constitution.
- (f) Exceptions for forms of compensation, gifts to state, and officers/directors of organizations. Nothing in this section shall prohibit the acceptance or require the disclosure of:
- (1) compensation, bonuses, dividends, interest payments, employee benefits, expense reimbursements or other forms of compensation or earnings on investments;

- (2) anything of value which is accepted by the Governor on behalf of the state of Oklahoma or a governmental entity pursuant to Section 381 et seq. of Title 60 of the Oklahoma Statutes. Section 381 et seq. of Title 60 of the Oklahoma Statutes. In order to be deemed accepted, the Governor must be notified in writing of any gift received by a governmental entity, or person on behalf of a governmental entity, within ten (10) days of receipt of the gift. Notice of acceptance must be received from the Governor within the next thirty (30) days. Upon lack of a response from the Governor within thirty (30) days of receipt of notice, the gift is deemed rejected and must be returned to the donor; or
- (3) the solicitation or acceptance of anything of value for or from either:
  - (A) a charitable organization or an organization described in Section 501 (c) of Title 26 of the United States Code, 26 U.S.C., Section 501 (c), as it currently exists or as it may be amended; or
  - (B) a tax-exempt professional organization established by state statute or rules passed by the Oklahoma Supreme Court,

by a member, state officer or state employee, who is a member, officer or director of the organization, when receipt of anything of value results from the member, state officer or state employee attending a function, meeting or seminar on behalf of, or as a representative of, the organization.
- (g) No state officer or state employee shall directly or indirectly borrow money from a lobbyist, or an immediate family member of a lobbyist, or an entity controlled by or employing a lobbyist. This subsection shall not apply to:
  - (1) a loan of money made by a commercial lending institution, in the regular course of business, on the same terms ordinarily available to members of the public, and which is not secured or guaranteed by a lobbyist or lobbyist principal or any other person on behalf of a lobbyist or lobbyist principal; or
  - (2) a loan from a father, stepfather, father-in-law, mother, stepmother, mother-in-law, sister, step sister, brother, step brother, child, step child, adopted child or their spouses.
- (h) Except for the compensation an elective officer is entitled to by law for the performance of official duties, no elective officer shall solicit or accept cash, check or cash equivalent compensation for an article, appearance or speech, or for participation at an event, unless the article, appearance or participation is made as part of the normal course of business in the member's private occupation.

**Standard 257:20-1-10****State Officers' and State Employees' Private Interests in Public Contracts**

- (a) Prohibition on contracting with state - Exceptions.
  - (1) State officers and state employees. No state officer or state employee, except a public member, shall sell, offer to sell or cause to be sold, rent or lease either as an individual or through any business enterprise in which he holds a substantial financial interest, goods, services, buildings or property to the governmental entity with which the officer or employee is associated or to any business entity licensed or regulated by the governmental entity which the officer or employee serves. This section shall not apply to students who are engaged in bona fide work-study programs at institutions of higher education within the Oklahoma State System of Higher Education.

- (2) Limited exceptions. Paragraph (1) of this subsection shall not apply to
  - (A) a state officer if real property is acquired from the state officer by condemnation proceedings; or
  - (B) a state employee if real property is acquired from the state employee either by condemnation proceedings or the price to be paid for such property is approved in writing by the appointing authority of the agency acquiring such property and by the Governor.
- (b) Contracting with current or former legislators and statewide elective officers-Exceptions. No legislator or statewide elective officer shall sell or cause to be sold, rent or lease either as an individual or through any business enterprise in which he holds a substantial financial interest, goods, services, buildings or property to any governmental entity. No state officer or state employee, acting in his or her official capacity, shall enter into any contract in which the state officer or state employee knows that a person who is then or has been a legislator within the previous year, or a member of such person's immediate family, has a substantial financial interest. The provisions of this subsection shall not apply to a contract of employment with an immediate family member of a legislator, together with any renewal, promotion or lateral transfer of such employment contract to another governmental entity, which is:
  - (1) in existence on July 1, 1994;
  - (2) in existence prior to the legislator's term of office;
  - (3) in existence prior to marriage to the legislator; or
  - (4) with a student employed on a part-time basis, which shall be seventy-five percent (75%) of a normal forty-hour work week or thirty (30) hours per week, or less, and who is regularly enrolled, as defined in Paragraph 11 of Section 840.8 of Title 74 of the Oklahoma Statutes, in an institution of higher education comprising the Oklahoma State System of Higher Education

No legislator or statewide elective officer shall attempt to influence or perform an official function requiring the exercise of discretion relating to a contract with any governmental entity if a member of the legislator's or statewide elective officer's immediate family has a substantial financial interest in such contract.
- (c) Exceptions. Subsections (a) and (b), except as prohibited by law, shall not apply to:
  - (1) contracts with state employees for goods or services valued at less than five thousand dollars (\$5,000);
  - (2) contracts with state employees entered into after public notice by the governmental entity and compliance with competitive bidding procedures; and
  - (3) employment contracts entered into with former legislators.
- (d) Exceptions for care of DHS clients only.
  - (1) Care of children in need of treatment. Employees of the Department of Human Services are authorized to contract with qualified former state employees, or the spouses of state employees, or other relatives of state employees, for the purpose of providing direct care or treatment services to clients of the Department who are mentally retarded or have other developmental disabilities or are delinquent, children in need of supervision, or in need of treatment, or deprived. Provided, however, that rates of payment and other terms and conditions of contracts entered into pursuant to this section shall be established by the Commission for Human Services and shall be no more favorable than contracts for such services with persons who were not employed by the Department of Human Services nor related to an individual employed by the Department of Human Services.
  - (2) Limitations on return to state employment. A state employee terminating state employment to provide direct care or treatment services to clients of the Department of Human Services who are



mentally retarded or have developmental disabilities, are delinquent, children in need of supervision, or in need of treatment, or deprived may not return to state employment for a period of one hundred eighty (180) days after date of termination from contracts with the Department of Human Services for direct care or treatment services to clients of the Department of Human Services who are mentally retarded or have developmental disabilities or are delinquent, children in need of supervision, or in need of treatment, or deprived.

- (3) Exceptions for contracting with employees of OU Health Sciences Center. Notwithstanding Subsection (a) of this section, employees of the Department of Human Services are authorized to employ or contract with personnel of the University of Oklahoma Health Sciences Center, directly or indirectly, to obtain professional services for the Oklahoma Medical Center or clients of other programs administered by the Department of Human Services.
- (4) Exceptions for Foster care, respite care, or services to children. Notwithstanding Subsection (a) of this section, employees of the Department of Human Services are authorized to contract with qualified state employees, or the spouses of state employees, or other relatives of state employees, for the purpose of providing foster care, respite care, and attendant services to children in the custody of the Department.

**Standard 257:20-1-11**

**Actions Taken while Negotiating for Employment**

A state officer or a state employee shall promptly disqualify prior to recommending or taking any official action in a matter affecting a person with whom the state officer or state employee is negotiating for employment.

## APPENDIX E.1 (d)

**PROVOST'S MEMO REGARDING PROMOTIONAL AGREEMENTS  
FOR PRIVATE INDUSTRY (6-27-16)**

TO: All Health Sciences Center Faculty and Staff, OKC and Tulsa

FROM: Jason R. Sanders, MD, MBA  
Senior Vice President and Provost

DATE: June 27, 2016

SUBJECT: Serving as Promotional Speaker for Private Industry – REVISED POLICY

**Purpose:** The purpose of this policy is to ensure that all OUHSC faculty and staff maintain ethical working relationships with industry in accordance with state ethics laws, federal regulations, guidelines of professional and industry organizations, and the ethical standards of the health care professions.

- **Faculty and staff may not serve as promotional speakers for a company's particular products or services.**
- University employees may serve as educational speakers and discuss products or services generally.
- OUHSC policy requires that contracts for employees to serve as educational speakers for private industry, when payment exceeds \$5,000, must be routed through ORA for negotiation and authorized signature.
- Educational speaker agreements with payments below \$5,000 can be signed by the College Dean.

During the past year, the Deans' Council convened a work group and has approved the following policy:

**Policy – Service as a Promotional Speaker for Private Industry**

**[Note:** In this policy, the term “industry” means biomedical, pharmaceutical and medical device companies and companies that make other products used in the treatment of patients or the provision of health care.]

Faculty members may speak at an industry-sponsored program only if the faculty member retains full control and authority over professional material the faculty member presents and does not allow such communications or presentations to be subject to prior approval by any commercial interest other than approval for the use of proprietary information. Activities with any of the following characteristics **may not be undertaken** at any location, whether on-site or off-site:

- a) A company has the contractual right to dictate what the faculty member says
- b) A company (not the faculty member) creates the slide set (or other presentation materials) and has the final approval of all content and edits. Slides prepared by a company that depict generic anatomical or biological structures or functions may be used in a presentation by a faculty member if 1) the content is accurate and of high quality and 2) no company logo or name appears on the slide.
- c) The faculty member receives compensation from the company and acts as the company's employee or spokesperson for the purposes of dissemination of company-generated presentation materials or promotion of company products
- d) A company controls the publicity related to the event.

Some of the prohibited activities can occur in the context of “speakers' bureaus”, and the conditions of the speaking engagement must govern the decision as to whether or not the activity is acceptable under this policy. For questions or clarification, please contact your department chair or dean.

## APPENDIX E.1 (e)

## TIPS FOR AVOIDING CONFLICTS OF INTEREST

Employees should conduct their activities so as to avoid Conflicts of Interest and must respond appropriately when Conflicts arise. You are required to keep your Financial Interests separate from your Research and University obligations in order to protect your students, trainees, and others for whom you are responsible; preserve the integrity of your Research; and cause no harm to human research participants. In addition, relationships with Companies must not compromise academic freedom or delay or prohibit publication arising from your University activities.

These tips are meant to serve as a guide to Employees about issues that need to be considered when engaging in activities that may involve a Conflict.

## HOW IS A CONFLICT OF INTEREST ASSESSED?

One way to assess the potential for a Conflict of Interest is to ask, “How would this look on the 6:00 news?” You should note that perceived bias can be just as damaging as actual bias. So, you should ask the following questions about the proposed activity:

- A. Are basic academic values upheld? For example,
  - 1. Is an open academic environment maintained?
  - 2. Are there prohibitions on publications or dissemination of Research?
  - 3. Are University licensing practices addressed?
  - 4. Is the use of University resources and facilities appropriate?
  - 5. Are students used for private gain of the Company or their mentors, and are they free to choose and publish their Research?
- B. What is the nature of the activity?
  - 1. Does it overlap with the University’s interests?
  - 2. Is the activity appropriate to the mission of the University?
- C. Could personal Financial Interests have a direct and significant effect on the activity? For example,
  - 1. How much income or Equity is involved and what are the sources?
  - 2. Could the Financial Interests be a significant incentive for the individual with the Conflict?
  - 3. Could the Financial Interest pose a direct Conflict with the activity?
  - 4. Could the Financial Interest compromise the objectivity of the activity including its evaluation and presentation?
- D. Could human research participants involved in the Research be harmed by the Conflict?

## If you CONSULT for a Company

- A. Your primary commitment is to the University and your consulting arrangement may not conflict with that obligation or conflict with any other University rules or regulations.
- B. The scope of your consulting responsibilities needs to be very specific so that it does not interfere with University responsibilities or publications resulting from your academic work.
- C. You must not provide the Company with early or exclusive access to results of your University Research, except in compliance with a separate sponsored research agreement with the Company and the University.
- D. You must disclose this relationship with the Company in publications and public discussions of any of your Research that is sponsored by the Company or related to the Company.

**If you serve on a BOARD OF DIRECTORS OR ADVISORY BOARD**

- A. You are normally permitted to sit on scientific or medical advisory boards, subject to prior approval; however, your primary commitment is to the University and your service must not conflict with that obligation or with any University rules or regulations.
- B. You may serve on a Board, only through a formal agreement between the University and the Company.
- C. The Company may not pay the University for your service on a Board with stock or stock options.
- D. You must recuse yourself from Board decisions affecting University interests or resign your Board position.
- E. You must not provide the Company with early or exclusive access to results of your Research, except in compliance with a separate sponsored research agreement between the Company and the University.
- F. You must keep your Financial Interests arising from service on Boards separate from your Research and University obligations.
- G. You must disclose this relationship in publications and public discussions of any of your Research that is sponsored by the Company or related to the Company.

**If you perform a PROFESSIONAL ACTIVITY for a Company in which you have a FINANCIAL INTEREST**

- A. You must report the value of the interest on the Expanded Conflicts of Interests Disclosure Form.
- B. The more significant the interest is financially, or the more likely the Research may benefit the Company (and thus your interest—particularly in the case of stock options), the greater the risk of the appearance of biased Research or Research results.
- C. You must disclose this Financial Interest in publications and public discussions of any of your Research that is sponsored by the Company or related to the Company.
- D. Financial Interests can raise the issue of such incentives compromising objectivity, particularly where human research participants are involved.

**If the University has a LICENSING AGREEMENT with a Company for technology you developed**

- A. All discoveries and inventions, whether patentable or unpatentable, and including any and all patents (domestic and foreign) based thereon and applications for such patents, which are made or conceived by any member of the faculty, staff, or student body of the University, either in the course and/or scope of employment for the University or substantially through the use of facilities or funds provided by or through the University shall be owned by and be the property of the Board of Regents except as otherwise provided in the University Intellectual Property Policy.
- B. You may have a sponsored research agreement through the University with the Company in which you have a Financial Interest upon approval of the Appropriate Vice President.
- C. You may have a consulting agreement through the University with the Company in which you have a Financial Interest upon approval of the Appropriate Vice President.
- D. Be aware that if you have federal funding for Research related to the licensed technology, the federal government retains rights to the results of the Research and inventions or discoveries arising from such Research.

**If you give TALKS for a Company**

- A. You cannot be a spokesperson for a Company or its product(s)

- B. You cannot promote, endorse, or market any Company or its product(s).
- C. You must ensure there is an agreement between the University and Company, signed by a University official, prior to the talk or speaking engagement.

**If you receive GIFTS from a Company**

- A. Gifts are often used as incentives to engender loyalty or support to a Company or its products and as a means of securing some commercial advantage. They may include such things as clinical trial enrollment incentives, equipment or reagents and supplies, travel, or unrestricted Research support.
- B. Corporate gifts for educational activities should not create a venue for access to Research results, an opportunity for promoting a Company's product or products, or provide the Company with preferential treatment.
- C. Unrestricted gifts for Research support are donations and, as such, the Company receives no intellectual property rights or access to Research results. Such gifts should not be accepted when specific Research activities are targeted for the gift money by the donor.
- D. Employees should be aware of limits on accepting gifts imposed by the State Ethics Rules.

## APPENDIX E.1 (f)

## QUESTIONS AND ANSWERS

- F.1 What is the purpose of the disclosure requirements under this policy?

Disclosure is required whenever there is a Conflict of Interest so that a management strategy can be developed to assure that the Conflict does not interfere with the Employee's performance of his/her University responsibilities. Disclosure can be beneficial to both the University and the Employee in order to protect them against unfounded claims of impropriety. Disclosure does not necessarily mean that the Employee may not engage in the disclosed activity.

- F.2 I am a faculty member who has received a grant to support my research. A member of my household recently completed his Ph.D. and I would like to hire him as a post-doctoral fellow on my grant. Can I do this?

Because of the personal relationship and inasmuch as the person is a member of your household it would not be appropriate for you to hire, supervise or evaluate this person. See the University's Nepotism Policy for additional guidance.

- F.3 I am a faculty member with a Spin-Off Company and want to hire a graduate student I am advising to do some Research for this Company. Is this ok?

This represents a Conflict of Interest which probably may be managed if the Research does not overlap with the student's academic program. It is important that both you and the student understand that engaging (or even a decision to not engage) in this activity can in no way influence the student's academic relationship with the advisor and the University. In order to insure this, any arrangement should be disclosed and reviewed periodically for a continuing relationship.

- F.4 I am a faculty member and wish to test some samples for a Company for which I am also consulting. How can I do this?

Since you wish to have two professional relationships with the Company, this represents a Conflict of Interest which may be manageable through contracts with the University (fee-for service and consulting). You may submit a proposal for the testing services through the Office of Research Administration (ORA) and use the appropriate forms to disclose your relationship to the Company. If there are no intellectual property issues, the primary issue is deciding on a fair value for the services to be performed.

- F.5 I am a faculty member and the technology that I developed was licensed to a Spin-Off Company. Can I be the Principal Investigator for an SBIR NIH grant application the Company is submitting?

This represents a Conflict of Interest that may be managed and must be disclosed prior to submission of the grant application. The PI of an SBIR grant must be employed by the "small business concern" for a minimum of 51% FTE. Therefore, the PI must obtain the approval of his/her Unit Head to commit this level of effort to the Company.

- F.6 I am a faculty member working with a Company that will submit a "Small Business Innovative Research" (SBIR) project to the federal government for which the Company would subcontract the experimental work to the University. How can this be done?

If you will serve as the University's Principal Investigator on the subcontract, the University will work with the Company on the subcontract after the SBIR is awarded to the Company. Additionally, an intellectual property agreement will likely need to be executed between the Company and the University, unless there is already one in place.

- F.7 I am a faculty member with a Spin-Off Company that is submitting an STTR NIH grant application. Can I be the Principal Investigator of the grant?

This represents a Conflict of Interest that may be managed and must be disclosed prior to the submission of the grant application. The PI of an STTR grant must commit a minimum of 10% effort to the grant. Therefore, the PI must obtain the approval of his/her Unit Head to commit this level of effort to the grant.

- F.8 I am a faculty member who, with my spouse and children, owns ten percent interest in a small biotechnology Company. The combined value of the stock we hold in this Company is \$25,000. I am writing a research proposal which I plan to submit to the National Institutes of Health to support a project that is related to the business interests of the Company. Can I do this?

You may be able to do so. To comply with University policy and National Institutes of Health rules, you will need to disclose your involvement in the Company by disclosing your involvement in the Company in the completing the appropriate Conflicts of Interest Disclosure forms at the time you are submitting your proposal. Your involvement in the Company and project will be reviewed at that time. If you receive funding from NIH, agency rules and University policy may require further review and restrictions or conditions may be imposed to manage, reduce, or eliminate the possibility that your research project could be influenced by your business interests. The NIH rule requires that the University certify that such issues have been resolved before you start spending any funds for your research project.

- F.7 I have a consulting arrangement with Pharmaceutical Company X which markets drugs related to my medical specialty. I do not have an active research program and do not receive any research funding from Company X or any of its competitors. Is this a Conflict of Interest?

It could be, especially if you prescribe Company X's products to your patients, evaluate the results and report those results to Company X.

- F.8 I am a participant in a national protocol developed by Pharmaceutical Company Q. They provide the medication in a blinded protocol and patients are selected at random for the medication. I collect the designated patient data and forward it to the Company and they reimburse me for each completed patient. This includes a physician's fee which I receive through my PPP. Do I have a Conflict of Interest?

If you administer the medication blinded and to random patients and forward the patient data to the Company, there is no Conflict. However if the study is not blinded and you select the patients, gather the patient data and forward the information to the Company, there could be a Conflict in that a bias could be used in selecting the patients, especially if you provide any evaluation of the patient data.

- F.9 I have a business arrangement (e.g., a consulting or executive position) with a biotech Company and they pay me to review research data and provide them with my evaluation. They do not support any of my research. I do have support from other sources for my research which is related to the area of the biotech. Is this a Conflict?

Yes, this is a potential Conflict of Interest as it may bias your research evaluations or otherwise affect your research results.

- F.10 My spouse is a member of the Board of Directors of a Company which competes with a Company for which I do research. Is there a Conflict in this situation?

Yes, this situation represents a potential Conflict of Interest. Due to relationships within Families, there could exist the potential of a bias in the research you conduct.

- F.11 I am doing research funded by a pharmaceutical Company in which I have not purchased stock. My father-in-law recently died and left in his estate to my wife stock in this Company. Am I in violation of the Conflict of Interest policy?

If the value of the stock is at least \$10,000 there is a Conflict of Interest which must be reported. It is for circumstances such as these that an annual evaluation is required by NSF and NIH as Conflicts may not be present at the beginning of funded research but may surface sometime during the research period.

- F.12 I am currently employed as an accountant in one of the college offices. A vendor from whom the college frequently orders supplies has asked whether I would be interested in working for him either in the evening or on weekends. I have no responsibility for placing orders. Can I do this?

You probably will be able to do this so long as it does not interfere with your University responsibilities and you do not use University Resources. Discuss this with your immediate supervisor.

- F.13 I am a member of the University's professional staff. One of my hobbies is photography, and I have started a part-time business taking wedding pictures on weekends. Do I need to disclose this activity to my supervisor?

Since your outside business is neither related to nor does it interfere with your University responsibilities, it is not necessary for you to disclose this activity.

- F.14 I am the manager of an office on campus. We are getting ready to replace our office copy machine. My brother-in-law owns a business machine store in town, and he has offered to sell us a new copy machine at his cost. Can I buy the machine from him?

The purchase of a new copier for your office would come under University purchasing policy and the Purchasing Department will obtain competitive bids before a purchase can be made. You would have to remove yourself from the bidding process. If your brother-in-law's store submits the low bid, they could be awarded the contract. Since you would not be involved in review and acceptance of the bids, this process would not present a Conflict of Interest for you.

- F.15 I am a faculty member who receives a royalty payment for a diagnostic test. May I test a competitive technology?

This represents a Conflict which probably can be managed. You must disclose this relationship pursuant to this policy.



## APPENDIX E.1 (g)

**OTHER UNIVERSITY POLICIES  
WHICH MAY RELATE TO CONFLICTS OF INTERESTS**

Conflicts of Interest may take various forms but exist when there is contradiction between the private interests and professional obligations of a University employee. In addition to being addressed directly in this policy, such Conflicts are addressed in other University policies which govern conduct of employees' professional activities. A listing of such policies follows. This list is not presented as comprehensive of all references to Conflicts that may occur in the University environment. A University employee should consult specific University policies as presented in the *Faculty Handbook*, *Staff Handbook*, and *Administrative Policies* for guidance and information regarding specific situations which may relate to Conflicts of Interest.

- (1) General Purchasing Policies
- (2) Academic Freedom and Responsibility
- (3) Sabbatical Leave
- (4) Ethics in Research
- (5) Intellectual Property Policy
- (6) Professional Practice Plan
- (7) Nepotism
- (8) Use of State Vehicles for Private Purposes
- (9) Off-Campus Use of University Property
- (10) Conducting Private Business from State-Owned Facility

**UNIVERSITY OF OKLAHOMA**  
**E.2 INSTITUTIONAL CONFLICT OF INTEREST IN RESEARCH ACTIVITIES**

**I. STATEMENT OF GENERAL POLICY**

The University of Oklahoma is responsible for handling public funds in a manner that ensures that all University activities reflect its mission of providing the best possible educational experience through excellence in teaching, research, creative activity and service to the state and society. As the University's collaboration and interaction with the private sector increases, so does the potential for institutional conflicts of interest. These conflicts involve situations in which the integrity of research, the University's educational mission, and/or the University's reputation may be compromised, or may appear to be compromised, by the University's financial interests.

*Institutional conflicts of interest can occur whenever the external financial interests or business relationships of the University or of one of its officials are such that their actions could affect, or could reasonably appear to affect, the conduct, review or oversight of the University's research.*

It is the policy of the University of Oklahoma that all institutional conflicts of interest, whether real or perceived, must be fully disclosed. The reported conflict must be properly identified and either managed or eliminated prior to initiating any contract, sponsored project, dedicated gift or transaction that might appear to be influenced by the conflict. This policy can be implemented by using a three-step approach:

1. Disclose always
2. Assess the potential for institutional conflicts of interest
3. Manage the conflict in most cases, and prohibit the activity when necessary to preserve the University's mission or protect the public's interests

This policy has been developed to protect the integrity of the research and development process at the University of Oklahoma. It is not intended to supersede or modify other Conflict of Interest policies, including those found in the Norman Campus Faculty Handbook (Sections 3.6, 3.83, 4.20.2, and 5.10) and those found in OU Health Sciences Center's Faculty Handbook Appendix E.

**II. DISCLOSING AND IDENTIFYING INSTITUTIONAL CONFLICTS OF INTEREST**

**What to disclose**

All institutional conflicts of interest, whether perceived, potential, or actual must be disclosed. Institutional conflicts of interest may occur when the institution, any of its senior management or regents, or a college, department, school, or other sub-unit, has an external relationship with, or financial interest in, a company that itself has an interest in a University research project.

**Information to disclose**

- Financial interests of all Board of Regents members and executive officers
- Single corporate or private donations exceeding \$1 million or cumulative gifts of \$5 million
- Changes in University equity or royalty holdings
- New University-held licenses

**Who must disclose**

- Individual disclosures of financial interests should be filed by:
  - o Executive officers
  - o Members of the Board of Regents
- Other disclosures are event-based, and include:
  - o New licenses and royalty or equity holdings, which should be disclosed by the Office of Technology Development
  - o Business contracts for goods or services in which the University generates revenue in excess of \$1 million, which should be disclosed by the college or department generating such revenue

All single donations to the University exceeding \$1 million or cumulative donations exceeding \$5 million in value, which should be disclosed by the Office of University Development

#### **How to disclose**

Annual disclosures of Significant Financial Interests (as defined in the University's Individual Conflict of Interest policies) must be filed by executive officers, vice presidents and members of the Board of Regents. Disclosure forms required of those individuals by the state ethics commission should also be submitted to the respective campus Provost by June 18th of each year. The Provost for each campus is responsible for collecting and maintaining records of such disclosures.

Event-based disclosures such as corporate donations exceeding \$1 million in value, contracts by which the University generates in excess of \$1 million in revenue and new licenses or equity holdings should be reported by the appropriate Dean or Vice President in sufficient detail to the appropriate Provost. Such disclosures should be made within a reasonable time after their occurrence, but in no event later than sixty (60) days following the acceptance of funds or change in equity or royalty status. The Provost for each campus is responsible for maintaining records of such disclosures.

#### **Identifying Institutional Conflicts of Interest**

Institutional conflicts of interest may be identified by cross referencing potential research engagements against the conflict of interest information disclosed. The Vice Presidents for Research on each University campus are responsible for cross referencing University research opportunities against the institutional conflict of interest information maintained by their respective Provost. If a potential institutional conflict of interest is identified, the Vice President(s) for Research shall notify the appropriate Provost, who shall evaluate and act upon the potential conflict in accordance with this policy.

All other employees shall promptly disclose any perceived, potential, or actual institutional conflict of interest of which he or she becomes aware to his/her unit head(s) (chair, center director and/or dean) or supervisor in writing. The unit head(s) will notify the Provost, who will evaluate and act upon the potential conflict in accordance with this policy.

### **III. MANAGING INSTITUTIONAL CONFLICTS OF INTEREST**

While there should be a presumption against allowing research to proceed when an institutional conflict of interest exists, such a presumption can be overcome if a management plan is developed that can appropriately address the conflict. The following steps are recommended for developing a management plan, and are described in greater detail below:

- Factual inquiry performed by Provost
- Factual report and recommendation to either eliminate or manage the conflict made by Provost to an ad hoc committee
- Ad hoc committee review of Provost's report and recommendation
- Ad hoc committee's adoption of a management plan that allows for complete elimination of the conflict, or acceptable management of it
- Implementation of the management plan

Upon receipt of a notice of a potential institutional conflict of interest, the Provost shall oversee an initial inquiry as to the facts of the situation. The inquiry shall include information regarding related individual conflicts of interest, if any. A report containing these facts as well as a recommendation to either eliminate or manage the institutional conflict of interest shall then be made to an ad hoc committee.

The ad hoc committee should be comprised of two executive officers of the University of Oklahoma appointed to serve by the President, a representative from the Office of Legal Counsel, from each campus office of the University Senior Vice President and Provost, and two members from outside organizations appointed to serve by the Chair of the Board of Regents. The ad hoc committee shall be called to meet by either the Norman Campus or Health Sciences Center Provost as needed.

Upon receipt of the factual report and recommendation from a Provost, the committee shall consider the recommended plan to either eliminate or manage the institutional conflict of interest with the following considerations in mind:

- The welfare of any human participants involved in the research
- The integrity of any research process involved
- The effect of the institutional conflict of interest on the University's reputation
- The effect of the institutional conflict of interest on the individual researcher's reputation

Additional considerations may be provided for the ad hoc committee's perusal, such as those articulated in Appendix B for management plans involving intellectual property. The ad hoc committee shall review all considerations when developing the management plan.

The committee's adopted plan should provide sufficient detail to allow for complete elimination of the conflict, or acceptable management of it. Such a management plan may include, but is not limited to, potential actions set forth in the University's Individual Conflicts of Interest Policies.

Plans for elimination of the conflict should be provided to the Provost for implementation. If the Provost disagrees with the ad hoc committee's recommendations, the Provost may, after consultation with the President, appeal the committee decision to a subcommittee of the Board of Regents for the University, which shall be specifically formed for this purpose.

The subcommittee of the Board of Regents may review the written materials associated with the potential institutional conflict of interest and make any investigation that it deems necessary. After considering all the facts and circumstances presented, the subcommittee may take any action that it believes necessary to preserve the integrity of the University, including an outright prohibition of the proposed research.

Plans for management of the conflict should be implemented in the following manner:

After development of a final, acceptable management plan and commencement of the activity, the appropriate individuals with oversight responsibility will regularly report, in writing, to the appropriate Provost on the effectiveness of the plan. The frequency of such reports shall be determined by the ad hoc committee, but generally shall be made at least annually.

If, during the conduct of the activity, the appropriate Provost determines that the conflict has not been properly managed or has become unmanageable, he/she will then determine if the activity should cease, require further modification, or require employee divestment of the conflict. If outside agencies require notification of conflict resolution and management, they will be notified in accordance with their requirements.

#### **IV. ADDITIONAL CONSIDERATIONS**

##### **Representing the University as a whole**

Any individual representing the University as a whole in any activity shall make reasonable efforts to avoid institutional conflicts of interest. This includes identifying, acknowledging, and mitigating any institutional conflicts of interest that may arise when representing the University's interests.

##### **Institutional conflict of interest database**

The respective Office of the Provost should compile all event-based disclosures into a searchable database. This database should be made available to the respective campus office(s) of research administration, the College of Continuing Education and other offices at the discretion of the respective Senior Vice President and Provost. The database should be referenced and used when considering any new sponsored research agreement.

#### **V. SANCTIONS**

Disclosure of institutional conflicts of interest-apparent, potential, and actual, is required for all persons who engage in activities that may involve such conflicts. Among other acts or omissions, failure to fully disclose conflicting

relationships and/or interests or to follow a prescribed management plan may be a serious breach of this policy and may be itself considered research or ethical misconduct.

Persons who violate this policy shall be subject to applicable University policies relating to research or professional misconduct by faculty and staff. With due regard to inadvertent violations, University sanctions may include, without restriction: reprimand, restitution, loss of pay, suspension or dismissal.

Furthermore, persons who violate this policy also may be subject to civil and criminal penalties for violations of state or federal law, e.g., civil penalties for willful violations of state laws may reach \$50,000.00 or more per violation. Allegations against an employee for breach of this policy should be reported in a confidential writing to the appropriate Provost and, if against a staff employee, the appropriate executive officer.

## **VI. APPENDIX A**

For all management plans involving intellectual property developed at the University, the following considerations, if applicable to the situation, should be addressed by the ad hoc committee:

- Any research agreement with a company may not contain any restrictions on publication, including student theses or dissertations, other than those sanctioned by the Faculty Handbook;
- All individuals working on a research project should be provided prior written notice that the research is being sponsored by a company in which a faculty member has an ownership interest, fiduciary relationship, and/or serves as a scientific officer or is on the board;
- Faculty members should provide the Provost and any other appropriate committee or University office a written description of the proposed research and a written assurance of his/her compliance with the restrictions set forth above;
- Faculty members should provide the Provost and any other appropriate committee or University office written reports on the progress of the research, listing related peer-reviewed publications and grants at least annually;
- Faculty members shall follow all management measures required under the management plan and as deemed appropriate by the Provost.

## **15. APPENDIX F**

### **FINANCIAL EMERGENCY POLICY**

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While it is assumed that the administration of the University has a continuing responsibility for maintaining a sound budget and it is assumed that through responsible financial management and appropriate retrenchment policies, all approaches for averting a financial crisis will be utilized. It is possible that a financial emergency might become inevitable. The following statement outlines the administrative policies and the procedures for such an eventuality.

The Board of Regents has ultimate responsibility for financial integrity of the University. Decisions resulting from these policies and procedures are subject to the approval of the Board of Regents which may take into consideration such factors as it deems appropriate.

#### **15.1 DEFINITION**

The University includes four budgetary agencies; Norman Campus; Law Center; the Health Sciences Center, including the College of Medicine, Tulsa; and the Professional Practice Plan. A financial emergency is an imminent fiscal crisis that threatens any one of these agencies. A state of financial emergency will be declared whenever the Educational and General Part I budget allocation to the agency necessitates reductions in faculty or staff or reductions in operational budgets that would seriously erode program quality.

The President will decide and declare when any agency of the University is in a state of financial emergency. Based upon information received, the President will submit a plan of action to the Board of Regents for approval.

#### **15.2 PROCEDURE**

When the possibility of a financial emergency exists, the Senior Vice President and Provost will confer immediately with the deans of the affected colleges. The Senior Vice President and Provost will make a preliminary determination, based on all available information, regarding the possible financial emergency. If the preliminary determination is that such emergency does exist, the Senior Vice President and Provost shall so recommend to the President. The President shall decide and declare when any program of the University is in a state of financial emergency. In response to the declaration, the Senior Vice President and Provost shall prepare a general plan to relieve the emergency condition. This general plan shall not identify specific faculty or personnel for termination of employment but shall review the financial status of the Health Sciences Center and identify general areas in which reductions are proposed. The plan shall be submitted for advisory review to the Health Sciences Center deans and to a Review Committee.

##### **15.2.1 Review Committee**

The Review Committee will be formed to evaluate the general plan. The Senior Vice President and Provost will convene the Review Committee and charge it to review the general plan with regard to the principle that every reduction must have an effect substantially less detrimental to the institution's ability to fulfill its mission than would other forms of budgetary curtailment available to the Health Sciences Center. The Review Committee will elect a chair from among its voting members and determine its rules of procedure.

The dean(s) of college(s) which might be directly affected will be given the opportunity to appear before the Review Committee and to present written statements and documents. This opportunity also may be extended to other faculty and administrators. The Review Committee may call any University personnel who might have pertinent information or advice.

The Review Committee, within six weeks of the time it receives its charge, will submit a final report to the Senior Vice President and Provost which summarizes all pertinent information and all written documents will be attached. In addition, the report will include findings of fact and recommendations and the rationale underlying the recommendations. Items of disagreement between the Review Committee and the Senior Vice President and Provost shall be resolved by the President. Final approval of the general plan will be by the President and the Board of Regents.

## (a) Committee Composition

## 1) Oklahoma City Campus

The committee that shall review the general plan for the Oklahoma City Campus of the Health Sciences Center shall be composed of:

- (a) Six faculty members, one representing each of the six colleges on the campus, appointed by the Senior Vice President and Provost from a list of twelve nominees submitted by the Health Sciences Center Faculty Senate.
- (b) The Chair of the Health Sciences Center Staff Senate.
- (c) The University Equal Opportunity Officer who shall serve *ex officio* without vote.
- (d) The Senior Vice President and Provost or his/her designee who shall serve *ex officio* without vote.
- (e) One or two students, depending on whether or not both undergraduate and graduate programs are involved, will be appointed. The student(s) will be appointed by the Senior Vice President and Provost from a list of four nominees submitted by the appropriate student organization(s) in the affected college(s).

## 2) Tulsa Campus

The University of Oklahoma Health Sciences Center constitutes a single budgetary agency which includes the College of Medicine, Tulsa. While the financial emergency policy developed for the Health Sciences Center will apply with equal force to the College of Medicine, Tulsa, certain unique budgetary and programmatic differences require some differences in procedure.

The Committee that shall review the general plan for the College of Medicine, Tulsa shall be composed of:

- (a) Six faculty member appointed by the Senior Vice President and Provost from a list of twelve nominees elected by the faculty of the College of Medicine, Tulsa acting as a committee of the whole. No more than three members selected will hold administrative appointments.
- (b) The Chair of the OU-Tulsa Staff Senate.
- (c) The University Equal Opportunity Officer who shall serve *ex officio* without vote.
- (d) The Senior Vice President and Provost or his/her designee who shall serve *ex officio* without vote.

**15.2.2 Program Discontinuance**

In the event that program discontinuance is proposed, the Review Committee will be convened by its chair to review and evaluate all matters relating to the proposed discontinuance and to make recommendations.

The dean of the affected college and all faculty members of the affected department will be given the opportunity to appear before the Review Committee and to present written statements and documents. This opportunity also may be extended to the faculty and administration of programs that might be indirectly affected. The Review Committee may call upon any University personnel who might have pertinent information or advice.

Prior to completing its deliberations, the Review Committee will conduct an open hearing. At the hearing, oral and written comments from all interested persons will be accepted.

The Review Committee will submit a final report to the Senior Vice President and Provost within one month of the time it is charged by the Senior Vice President and Provost to review discontinuance of a program. This report will

summarize all pertinent information and all written documents will be attached. In addition, the report will contain the Committee's findings of fact and recommendations and the rationale underlying its findings and recommendations.

The Senior Vice President and Provost will distribute copies of the report to the dean of the affected college and to all directly affected faculty members. Copies of the report also will be made available to other faculty, staff members and students upon request.

Any person may submit a written response to the Review Committee's report within ten days following its distribution. The Committee may modify its report after considering this material. Any modifications must be forwarded to the Senior Vice President and Provost within ten days following the distribution of the report.

After reviewing all relevant information, the Senior Vice President and Provost will forward his or her recommendation to the President. The report of the Review Committee, together with all attachments, also will be forwarded to the President. Copies of the Senior Vice President and Provost's recommendation will be distributed to the dean of the affected college and all directly affected faculty members. Items of disagreement between the Review Committee and the Senior Vice President and Provost will be resolved by the President. Final approval of the report will be by the President and the Board of Regents.

### 15.2.3 Terminations

#### (a) Faculty

If, after consideration of all possible ways of reducing expenditures, the general plan approved by the President necessitates the termination of faculty or staff, either selectively or as a result of program discontinuance, the dean of each college in consultation with the faculty of that college shall develop a specific plan for terminating employment of faculty in that college which shall be transmitted to the Senior Vice President and Provost. The Senior Vice President and Provost, in consultation with the deans, shall review the individual college plans and develop the overall plan for termination of faculty employment for the Health Sciences Center. Every termination of faculty employment must be justified on the basis that it will have an effect substantially less detrimental to the institution's ability to fulfill its mission than would other terminations.

The plan for the termination of faculty employment shall be submitted to the Review Committee except that the representative of the Staff Senate shall no longer serve. The members of the committee will elect a chair.

The Review Committee shall make recommendations to the Senior Vice President and Provost and the Health Sciences Center deans. When there are unresolved differences, all recommendations shall be submitted to the President.

The plan for terminating faculty employment shall be in accordance with the following guidelines:

- 1) To the extent possible, alternatives other than termination of employment should be explored. Examples of such alternatives are early retirement, fractional appointments and reduction of salaries, including annual base salary.
- 2) Unless a substantial and serious imbalance in the quality within a given program would result:
  - (a) Employment of untenured faculty should be terminated before that of tenured faculty.
  - (b) Performance, promise, seniority and affirmative action guidelines should be considered in decisions concerning termination of untenured faculty.
  - (c) Equitable reinstatement procedures should be established if the program is reinstated.
- 3) Where termination of employment is required:
  - (a) Where termination of employment of faculty with tenure track or consecutive term appointments is required, procedures in regard to non-reappointment stated in the *Faculty Handbook* (see



**Section 3.2.7**) should be observed, if possible. All notifications of non-reappointment shall be given in writing by the Senior Vice President and Provost.

- (b) Tenured faculty must be notified by the President of termination by May 31 of the year preceding the final year of appointment and at least 12 months before the end of the appointment period. The dismissal of tenured faculty must be approved by the Board of Regents (see *Faculty Handbook Section 3.16*).
  - 4) Where employment of a tenured faculty member has been terminated or where he/she has accepted alternative employment with the University, the faculty member has a three-year priority to return to his/her original position or be employed in another position for which he/she is qualified. Qualification for employment in another position within the University shall be determined by the head of the academic unit with a position vacancy. Within the three-year period someone else shall not be employed to fill the faculty member's position or any other position for which the faculty member is qualified until the faculty member has been offered reinstatement or re-employment and has been given a reasonable time (not to exceed 45 days) within which to accept. It is the responsibility of the faculty member to keep the University informed of his/her address and availability for re-employment. The right of a faculty member to be employed in another position is subject, in accordance with paragraph 2. a-c, to the rights of other faculty members who have also been terminated or transferred.
- A faculty member whose salary or FTE has been reduced shall have the same priority for restoration of his/her former status as the faculty member, described above, whose employment has been terminated.
- 5) Each faculty member whose employment has been terminated has the right to have his/her termination of employment reviewed by the Faculty Appeals Board to determine if these guidelines have been followed, but the circumstances of the financial emergency shall not be reviewed.

(b) Student

If a program is discontinued, students in the program shall be notified and every effort shall be made to allow them to finish their program. If it is not possible for students to complete their respective programs, the University may be obliged to make special allowances for such students. Special allowances might include, but not be limited to, the following: permitting the student to complete his/her program by taking work in related departments; accepting more than the usual number of transfer hours; and accepting major work taken by correspondence from the University or other schools.

(c) Staff

If the general plan approved by the President entails the termination of employment of staff, the Provost, in consultation with the Health Sciences Center deans and the Directors of Health Sciences Center service areas, and representative(s) of the Staff Senate, shall suggest a more specific plan for termination of staff employment. Staff terminations will be handled in a manner which is consistent with the current Policy and Procedures for Reduction of Work Force at The University of Oklahoma.

(Regents, 9-6-78, 11-10-83, 1-26-99, 1-27-04)

## **16. APPENDIX G**

### **PROGRAM DISCONTINUANCE POLICY**

The success of any university in a free society rests in a large measure on the degree to which it is responsive to the needs of its students and the citizens who provide the financial support to sustain it. Responsiveness is an essential element of the fabric of a successful university. It does not assure excellence, but its absence assures failure.

Because of changes in the needs of society and the rapidity with which new knowledge is accumulated and disseminated, the relevance and cost effectiveness, of academic programs must be constantly reviewed. This does not suggest, however, that there are no other meaningful dimensions to the purposes of a university. A university also serves as a repository of knowledge, societal traditions, and cultural heritage and some programs may have a more direct relevance than others.

Viewed in this light, the evaluation of programs on the Health Sciences Center campus is a positive approach to help ensure that University programs are responsive to the needs of society, the students, and the goals of the University.

The discontinuance of a program is the legitimate concern of the students, faculty and administration of the University. The purpose of this policy is to establish procedure which provides an opportunity for input from all interested groups prior to a final decision by the Board of Regents.

While these procedures are established by action of the University Board of Regents and will be implemented as University policy, extraordinary circumstances might arise in which the Board of Regents feels compelled to suspend these procedures after obtaining reasonable faculty input.

#### **16.1 PROGRAM**

The term "program" as used in this document ordinarily refers to a college, department or degree program established by the Regents. The discontinuance of a program need not entail the elimination of a degree program or the dismissal of faculty members.

#### **16.2 CRITERIA FOR DISCONTINUANCE**

Criteria for determining whether a program should be discontinued ought to place the greatest emphasis on meeting the goals and objectives of the University. This requires a judicious assessment of the program. A formula which addresses all contingencies cannot be established.

Many factors are pertinent when evaluating a program's contribution to the overall mission of the University. Among these factors are quality, cost effectiveness, current and projected demands for the program and societal needs. When program discontinuance is based on financial emergency, the Financial Emergency Policy shall apply.

#### **16.3 PROCEDURE**

##### **16.3.1 Initial Steps**

When the possibility of program discontinuance is raised, the Senior Vice President and Provost will confer immediately with the dean of the affected college and the chairperson of the affected department. The Senior Vice President and Provost will make a preliminary determination, based on all available information, regarding the discontinuance. In the event the Senior Vice President and Provost decides not to proceed, the matter will be reported to the President and the Board of Regents prior to any announcement. If the Senior Vice President and Provost decides to proceed, he/she will do so in accordance with the following procedure.

##### **16.3.2 Ad Hoc Committee for Evaluation and Recommendations**

If the Senior Vice President and Provost decides to proceed with the program discontinuance, an ad hoc committee will be formed to evaluate all information and to make recommendations. The ad hoc committee will be composed of seven or eight members as follows:

- (a) Four committee members, including two from the affected college will be appointed by the Senior Vice President and Provost as follows: The Senior Vice President and Provost will request the governing body of the affected college to submit eight nominees to the Faculty Senate. The Faculty Senate will select four of these nominees, add four more nominees from outside the affected college, and submit the list of eight nominees to the Senior Vice President and Provost. Nominees will hold non-administrative appointments except for the dean of the affected college, who may be nominated.
- (b) Two faculty members, appointed by the Senior Vice President and Provost, who may hold administrative or non-administrative appointments.
- (c) One or two students, depending on whether or not both undergraduate and graduate programs are involved, will be appointed. The student(s) will be appointed by the Senior Vice President and Provost from a list of four nominees submitted by the appropriate student organization(s) in the affected college.

### **16.3.3 Proceedings of the Ad Hoc Committee**

The Senior Vice President and Provost will convene the ad hoc Committee and charge it to review and evaluate all matters relating to the proposed discontinuance and to make recommendations. The ad hoc Committee will elect a chair from among its members and determine its rules of procedure. The dean of the affected college and all faculty members of the affected department will be given the opportunity to appear before the ad hoc Committee and to present written statements and documents. This opportunity also will be extended to the faculty and administration of programs that might be indirectly affected by the discontinuance. The Committee will have access to all University personnel who might have pertinent information or advice.

### **16.3.4 Open Hearing**

The Senior Vice President and Provost will conduct an open hearing before the ad hoc Committee completes its deliberations. At the hearing, the ad hoc Committee and the Senior Vice President and Provost will accept both oral and written comments from all interested persons.

### **16.3.5 Report of the Ad Hoc Committee**

The ad hoc Committee will submit a final report to the Senior Vice President and Provost within two months of its initial meeting. This report will summarize all pertinent information and all written documents will be attached. In addition, the report will contain the ad hoc Committee's findings of fact and recommendations and the rationale underlying its findings and recommendations.

The Senior Vice President and Provost will distribute copies of the report to the dean of the affected college and to all directly affected faculty members. Copies of the report also will be made available to other faculty, staff members and students upon request.

Any person may submit a written response to the ad hoc Committee report within two weeks following its distribution. The Committee may modify its report after considering this material. Any modification must be forwarded to the Senior Vice President and Provost within one month following the distribution of the report.

### **16.3.6 Decision of the Senior Vice President and Provost**

After reviewing all available information, the Senior Vice President and Provost will forward his/her recommendation to the President. The report of the ad hoc Committee together with all attachments, also will be forwarded to the President. Copies of the Senior Vice President and Provost's recommendation will be distributed to the dean of the affected college and all directly affected faculty members.

### **16.3.7 Decision of the President**

After reviewing all available information, the President will forward his/her recommendation to the Board of Regents for final action. The Senior Vice President and Provost's recommendation and the report of the ad hoc Committee also will be forwarded to the Regents. Copies of the President's recommendation will be distributed to the Senior Vice President and Provost, dean of the affected college and all directly affected faculty members.

## 16.4 TERMINATIONS AND ALTERNATIVES

### 16.4.1 Faculty

If a decision is made to discontinue a program, the Senior Vice President and Provost will notify each directly affected faculty member, in writing, of the probable effect of the discontinuance on his/her employment.

Where termination of employment of faculty with tenure track or consecutive term appointments is required, notification provisions in the *Faculty Handbook* (see [Section 3.2.7](#)) shall apply. All notifications of non-reappointments shall be given in writing by the Senior Vice President and Provost.

Tenured faculty must be notified by the President of termination by May 31 of the year preceding the final year of appointment and at least 12 months before the end of their appointment period. The dismissal of tenured faculty must be approved by the Board of Regents (see *Faculty Handbook* [Section 3.16](#)).

If notification practices are not fulfilled, the faculty member may appeal to the Faculty Appeals Board.

Plans will be developed in accordance with the following guidelines:

- (a) The University will make every reasonable effort to eliminate the need for terminating faculty, including transfers to other programs when there are vacancies for which they are qualified. Eligibility for employment in other University programs shall be determined by the head of the academic unit with a position vacancy.
- (b) Tenure and seniority will be respected as priority conditions if alternative employment opportunities exist for which the individual is the best qualified candidate.
- (c) Employment of untenured faculty should be terminated before that of tenured faculty.
- (d) Performance, potential, seniority and affirmative action guidelines should be considered in decisions concerning termination of untenured faculty.
- (e) Equitable reinstatement procedures should be established if the program is reinstated.

### 16.4.2 Students

If a decision is made to discontinue a program, the students in the program shall be notified by the Senior Vice President and Provost and every effort shall be made to allow them to finish their programs within a reasonable length of time. If it is not possible for students to complete their program, the University will make every reasonable effort to facilitate their transfers to other programs or institutions.

### 16.4.3 Staff

The current Policies and Procedures for Reduction of Workforce at The University of Oklahoma will be followed in case of a reduction of staff.

(Regents, 12-14-78, 5-14-81, 11-10-83, 1-26-99)

## 17. APPENDIX H

### H.1 SEXUAL MISCONDUCT, DISCRIMINATION AND HARASSMENT POLICY

### H.2 INVESTIGATIVE PROCESS FOR INTERNAL COMPLAINTS INVOLVING SEXUAL MISCONDUCT, DISCRIMINATION AND HARASSMENT

The University is committed to creating and maintaining a community where all persons who participate in University programs and activities can work and learn together in an atmosphere free from all forms of harassment, exploitation, or intimidation. The University condemns discrimination based on sex or gender, sexual harassment, sexual assault, sexual orientation discrimination, discrimination based on gender identity or expression, and sexual misconduct, including but not limited to dating violence, domestic violence, and stalking. Any such activity committed by a member of the University community may subject the individual to University sanctions as well as civil and criminal penalties.

Persons who have complaints alleging discrimination based upon sex or gender, which may include sexual harassment, sexual assault, sexual orientation discrimination, discrimination based on gender identity or gender expression, and sexual misconduct may file their complaints with the University's Equal Opportunity Officer / Institutional Equity and Title IX Coordinator or the University's Sexual Misconduct Officer identified below. The University reserves the right to independently address known concerns falling under this policy, regardless of whether a complaint has been filed, in order to end the discrimination, prevent its recurrence, and remedy its effects.

This policy covers unwelcome conduct of a sexual or gender-based nature, whether committed on-campus, or off-campus where the University has control over the perpetrator or the context of the harassment. Consensual romantic relationships between members of the University community are subject to other University policies, but alleged violations of such policy are investigated under this process and procedure. See Section 5.23 of the *Staff Handbook* (<http://hr.ou.edu/documents/files/handbook.pdf>), and Section 3.2.7 of the *Regents' Policy Manual*, as well as the respective campuses Faculty Handbooks.

### I. PROHIBITED CONDUCT

Conduct prohibited under the University's policy include, but are not limited to sex discrimination (including sexual orientation discrimination and gender identity or gender expression discrimination), sexual harassment, non-consensual sexual intercourse (or attempts to commit same), non-consensual sexual contact (or attempts to commit same), dating violence, domestic violence, stalking, sexual exploitation, retaliation, and any attempts to commit the same.

- A. **Sex Discrimination:** Includes sexual harassment and is defined as conduct directed at a specific individual or a group of identifiable individuals that subjects the individual or group to treatment that adversely affects their employment or education, or institutional benefits, on account of sex or gender (including sexual orientation, gender identity, and gender expression discrimination). It may include acts of verbal, nonverbal, or physical aggression, intimidation, or hostility based on sex or sex-stereotyping, even if those acts do not involve conduct of a sexual nature.
- B. **Pregnancy Discrimination:** The University prohibits discrimination on the basis of pregnancy, childbirth, false pregnancy, termination of pregnancy or recovery therefrom. Discrimination on the basis of pregnancy should be reported in accordance with this policy. Employees with questions regarding accommodations during pregnancy are encouraged to contact the Office of Human Resources (<http://hr.ou.edu>), students and visitors with questions regarding accommodations during pregnancy are encouraged to contact the Disability Resource Center (<http://www.ou.edu/dre/home.html>). For complaints arising under this policy, please report to the EOO or the Sexual Misconduct Officer.
- C. **Sexual Harassment** is a form of sex discrimination. Sexual harassment is unwelcome and discriminatory speech or conduct undertaken because of an individual's gender or is sexual in nature and is so severe, pervasive, or persistent, objectively and subjectively offensive that it has the systematic effect of unreasonably interfering with or depriving someone of educational, institutional, or employment access, benefits, activities, or opportunities. Students, employees, and visitors who

are subject to or who witnesses unwelcome conduct of a sexual nature are encouraged to report the incident(s).

- 1) **Hostile Environment Sexual Harassment** includes conduct that is sufficiently severe, pervasive, or persistent, objectively and subjectively offensive that it alters the conditions of education or employment or institutional benefits of a reasonable person with the same characteristics of the victim of the harassing conduct. Whether conduct is harassing is based upon examining a totality of circumstances, including but not limited to:
  - (a) the frequency of the conduct;
  - (b) the nature and severity of the conduct;
  - (c) whether the conduct was physically threatening;
  - (d) whether the conduct was deliberate, repeated humiliation based upon sex;
  - (e) the effect of the conduct on the alleged victim's mental or emotional state from the perspective of a reasonable person;
  - (f) whether the conduct was directed at more than one person;
  - (g) whether the conduct arose in the context of other discriminatory conduct;
  - (h) continued or repeated verbal abuse of a sexual nature, such as gratuitous suggestive comments and sexually explicit jokes; and
  - (i) whether the speech or conduct deserves constitutional protections.
- 2) **Quid Pro Quo Sexual Harassment** exists when individuals in positions of authority over the reporting party:
  - (a) make unwelcome sexual advances, requests for sexual favors or other verbal or physical conduct of a sexual nature; and
  - (b) indicate, explicitly or implicitly, that failure to submit to or the rejection of such conduct will result in adverse educational or employment action or where participation in an educational program or institutional activity or benefit is conditioned upon the reporting party's submission to such activity.

**Examples of Harassment:**

- A professor insists that a student have sex with him or her in exchange for a good grade. This is harassment regardless of whether the student accedes to the request.
- A student repeatedly sends sexually-orientated jokes in a group text to numerous other students even when asked to stop, causing one recipient to avoid the sender on campus.
- Explicit sexual pictures are displayed on an exterior door or on a computer monitor in a public place.
- Two supervisors frequently "rate" several employees and comment on their appearance within their earshot.
- A professor engages students in discussions in class about their past sexual experiences, yet the conversation is not in any way relevant to the subject matter of the class.
- An ex-girlfriend widely spreads false stories about the sex life of her former boyfriend to his clear discomfort, making him a social outcast on campus.

D. **Sexual Violence** means physical sexual acts perpetrated against a person's will or where a person is incapable of giving consent. A number of acts fall into the category of sexual violence, including rape, sexual assault, sexual battery, and sexual coercion.

- **Non-Consensual Sexual Intercourse** is defined as any sexual intercourse or penetration of the anal, oral, vaginal, genital opening of the victim, including sexual intercourse or penetration by any part of a person's body or by the use of an object, however slight, by one person to another without consent or against the victim's will.
- **Non-Consensual Sexual Contact** is any intentional touching, however slight, whether clothed or unclothed, of the victim's intimate body parts (primarily genital area, groin, inner thigh, buttock or breast) with any object or body part, without consent and/or by force. It also includes the touching of any part of a victim's body using the perpetrator's genitalia and/or forcing the victim to touch the intimate areas of the perpetrator or any contact in a sexual manner even if not involving contact of or by breasts, buttocks, groin, genitals, mouth or other orifice.
- **Sexual Coercion** is unreasonable pressure for sexual activity by using pressure (including physical or emotional pressure, intimidation, or threats), alcohol, medications, drugs, or force to have sexual contact against someone's will or with someone who has already refused. This includes rape, sexual assault, sexual exploitation and sexual misconduct.

E. **Sexual Exploitation** occurs when a person takes non-consensual, unjust or abusive sexual advantage of another for his or her own advantage or benefit, or to benefit or advantage anyone other than the one being exploited, and that behavior may not otherwise constitute one of the other sexual misconduct offenses.

**Examples of Sexual Exploitation include, but are not limited to:**

- non-consensual video or audio-taping of any form of sexual activity going beyond the boundaries of consent (such as letting a person or people hide in the closet to watch you having consensual sex without your partner's knowledge or consent);
- engaging in non-consensual voyeurism, such as observing sexual acts or body parts of another from a secret vantage point;
- knowingly transmitting a sexually transmitted disease or illness to another;
- exposing one's genitals in a non-consensual circumstance, or inducing another to expose his or her genitals;
- prostituting another person;
- other forms of invasion of sexual privacy.

F. **Relationship Violence** includes assault, battery or other physical abuse between those in an intimate, dating, or romantic relationship with each other

1) **Dating violence** is violence between individuals in the following circumstances:

- (a) The party is or has been in a social relationship of a romantic or intimate nature with the victim; and
- (b) The existence of such a relationship shall be determined based on a consideration of the following factors:
  - Length of the relationship
  - Type of relationship
  - Frequency of interaction between the persons involved in the relationship

2) **Domestic violence** means violence committed by:

- (a) Current or former spouse of the victim;
- (b) A person with whom the victim shares a child in common;
- (c) A person who is cohabitating with or has cohabitated with the victim as a spouse;
- (d) A person similarly situated to a spouse of the victim under Oklahoma domestic or family violence laws;
- (e) Any other person against an adult or youth victim who is protected from that person's acts under Oklahoma domestic or family violence laws

G. **Stalking** is defined as engaging in a course of conduct directed at a specific person that would cause a reasonable person to:

- (a) Fear for the person's safety or the safety of others, or
- (b) Suffer substantial emotional distress

For the purposes of this definition,

Course of Conduct means two or more acts, including, but not limited to, acts in which the stalker directly, indirectly, or through third parties, by any action, method, device, or means, follows, monitors, observes, surveils, threatens or communicates to or about a person or interferes with a person's property.

Emotional Distress means significant mental suffering or distress that may, but does not necessarily require, medical or other professional treatment or counseling.

H. **Other Misconduct**

- 1) Other forms of misconduct based on one's gender also constitute violations of this policy including: threatening or causing physical harm, extreme verbal abuse, or other conduct which threatens or endangers the health or safety of any person;
  - 2) Discrimination, defined as actions that deprive other members of the community of educational or employment access, benefits or opportunities on the basis of gender;
  - 3) Harassment, defined as unwelcome and discriminatory speech or conduct undertaken because of an individual's gender or that is sexual in nature that has the systematic effect of unreasonably interfering with or depriving someone of educational, institutional, or employment access, benefits, activities, or opportunities.
  - 4) Gender-based intimidation, defined as implied threats or acts that cause an unreasonable fear of harm in another;
  - 5) Gender-based hazing, defined as acts likely to cause physical or psychological harm or social ostracism to any person within the University community, when related to the admission, initiation, pledging, joining or other group-affiliation activity (as defined further in the Student Conduct Hazing Policy);
  - 6) Gender-based bullying, defined as repeated and/or severe aggressive behavior likely to intimidate or intentionally hurt, control or diminish another person, physically or mentally (that is not speech or conduct otherwise protected by the First Amendment);
- I. **Retaliation** is any attempt to penalize or take an adverse employment, educational or institutional benefit action, including but not limited to making threats, intimidation, reprisals, or other adverse action, against a person because of participation in a complaint or the investigation of discrimination, sexual harassment or sexual misconduct.



## II. CONSENT

Consent is the act of willingly agreeing to engage in sexual contact or conduct. Individuals who consent to sex must be able to understand what they are doing. Under this policy, “No” always means “No,” and the absence of “No” may not mean “Yes”.

- Consent is informed, knowing and voluntary. Consent is active, not passive. Silence, in and of itself, cannot be interpreted as consent. Consent can be given by words or actions, as long as those words or actions create mutually understandable permission regarding the conditions of sexual activity.
- Consent to one form of sexual activity cannot imply consent to other forms of sexual activity.
- Previous relationships or consent does not imply consent to future sexual acts.
- Consent cannot be procured by use of physical force, compelling threats, intimidating behavior, or coercion.

**Examples of when a person should know the other is incapacitated and may be unable to give valid consent include, but are not limited to:**

- the amount of alcohol, medication or drugs consumed
  - imbalance or stumbling
  - slurred speech
  - lack of consciousness or inability to control bodily functions or movements
  - vomiting
- Use of alcohol, medications, or other drugs will not excuse behavior that violates this policy.

## III. SANCTIONS

Students and employees who have been deemed to have violated the Sexual Misconduct, Discrimination, and Harassment Policy, are subject to in accordance with this policy, as well as the Student Code of Rights and Responsibilities found at [www.ou.edu/studentconduct](http://www.ou.edu/studentconduct) and the Faculty and Staff Handbooks. The following are typical sanctions that may be imposed.

- A. Sanctions for students can include verbal warning, written warning, disciplinary probation, educational sanctions, restitution, administrative fee, University-owned housing reassignment or termination, administrative trespass, suspension, expulsion, restriction or denial of University services, or delayed conferral of degree. Sanctions not listed may be used when deemed appropriate by the University.
- B. Sanctions for employees can include verbal/written reprimands, required counseling/training, community service, administrative leave with or without pay, removal of supervisory or other roles/duties, conduct agreements, other sanctions as deemed appropriate, up to and including abrogation of tenure and termination of employment.

## IV. STATE LAW DEFINITIONS

In accordance with the Violence Against Women Reauthorization Act of 2013, please be advised that the following definitions are applicable should you wish to pursue Oklahoma state criminal or civil actions. These definitions may differ from the University's administrative policy definitions noted above. The University's administrative system and disciplinary procedures are separate and distinct from those available to someone in a state civil or criminal action. Individuals may seek administrative remedies in accordance with this policy and also may seek state or federal civil or criminal remedies for the same incident through the applicable systems. The definitions set forth below are reviewed and verified annually; for a more frequently updated resource, please consult Oklahoma's State Court Network: site: <http://www.oscn.net>.

**Consent**

The term “**consent**” means the affirmative, unambiguous and voluntary agreement to engage in a specific sexual activity during a sexual encounter which can be revoked at any time. **Consent** cannot be:

1. Given by an individual who:
  - (a) is asleep or is mentally or physically incapacitated either through the effect of drugs or alcohol or for any other reason, or
  - (b) is under duress, threat, coercion or force; or
2. Inferred under circumstances in which consent is not clear including, but not limited to:
  - (a) the absence of an individual saying “no” or “stop”, or
  - (b) the existence of a prior or current relationship or sexual activity.

*21. O.S. § 113 (effective June 6, 2016)*

**Sexual Assault**

- (a) rape, or rape by instrumentation, as defined in Section 1111, 1111.1 and 1114 of this title, or
- (b) forcible sodomy, as defined in Section 888 of this title

*21. O.S. § 142.20*

**Rape**

- (a) Rape is an act of sexual intercourse involving vaginal or anal penetration accomplished with a male or female who is not the spouse of the perpetrator and who may be of the same or the opposite sex as the perpetrator under any of the following circumstances:
  - 1) Where the victim is under sixteen (16) years of age;
  - 2) Where the victim is incapable through mental illness or any other unsoundness of mind, whether temporary or permanent, of giving legal consent;
  - 3) Where force or violence is used or threatened, accompanied by apparent power of execution to the victim or to another person;
  - 4) Where the victim is intoxicated by a narcotic or anesthetic agent, administered by or with the privity of the accused as a means of forcing the victim to submit;
  - 5) Where the victim is at the time unconscious of the nature of the act and this fact is known to the accused;
  - 6) Where the victim submits to sexual intercourse under the belief that the person committing the act is a spouse, and this belief is induced by artifice, pretense, or concealment practiced by the accused or by the accused in collusion with the spouse with intent to induce that belief. In all cases of collusion between the accused and the spouse to accomplish such act, both the spouse and the accused, upon conviction, shall be deemed guilty of rape;
  - 7) Where the victim is under the legal custody or supervision of a state agency, a federal agency, a county, a municipality or a political subdivision and engages in sexual intercourse with a state, federal, county, municipal or political subdivision employee or an employee of a contractor of the state, the federal government, a county, a municipality or a political subdivision that exercises authority over the victim;

- 8) Where the victim is at least sixteen (16) years of age and is less than twenty (20) years of age and is a student, or under the legal custody or supervision of any public or private elementary or secondary school, junior high or high school, or public vocational school, and engages in sexual intercourse with a person who is eighteen (18) years of age or older and is an employee of the same school system.
  - 9) Where the victim is nineteen (19) years of age or younger and is in the legal custody of a state agency, federal agency or tribal court and engages in sexual intercourse with a foster parent or foster parent applicant.
- (b) Rape is an act of sexual intercourse accomplished with a male or female who is the spouse of the perpetrator if force or violence is used or threatened, accompanied by apparent power of execution to the victim or to another person.

### *21. O.S. § 1111*

#### **Rape by Instrumentation**

- (a) Rape by instrumentation is an act within or without the bonds of matrimony in which any inanimate object or any part of the human body, not amounting to sexual intercourse is used in the carnal knowledge of another person without his or her consent and penetration of the anus or vagina occurs to that person.
- (b) Provided, further, that at least one of the circumstances specified in Section 1111 of this title has been met; further, where the victim is at least sixteen (16) years of age and is less than twenty (20) years of age and is a student, or under the legal custody or supervision of any public or private elementary or secondary school, junior high or high school, or public vocational school, and engages in conduct prohibited by this section of law with a person who is eighteen (18) years of age or older and is an employee of the same school system, or where the victim is under the legal custody or supervision of a state or federal agency, county, municipal or a political subdivision and engages in conduct prohibited by this section of law with a federal, state, county, municipal or political subdivision employee or an employee of a contractor of the state, the federal government, a county, a municipality or a political subdivision that exercises authority over the victim, consent shall not be an element of the crime.
- (c) Provided, further, that at least one of the circumstances specified in Section 1111 of this title has been met; further, where the victim is nineteen (19) years of age or younger and in the legal custody of a state agency, federal agency or tribal court and engages in conduct prohibited by this section of law with a foster parent or foster parent applicant.

### *21. O.S. § 1111.1*

#### **Rape in First Degree – Second Degree**

- (a) Rape in the first degree shall include:
  - 1) rape committed by a person over eighteen (18) years of age upon a person under fourteen (14) years of age; or
  - 2) rape committed upon a person incapable through mental illness or any unsoundness of mind of giving legal consent regardless of the age of the person committing the crime; or
  - 3) rape accomplished where the victim is intoxicated by a narcotic or anesthetic agent, administered by or with the privity of the accused as a means of forcing the victim to submit; or
  - 4) rape accomplished where the victim is at the time unconscious of the nature of the act and this fact is known to the accused; or

- 5) rape accomplished with any person by means of force, violence, or threats of force or violence accompanied by apparent power of execution regardless of the age of the person committing the crime; or
- 6) rape by instrumentation resulting in bodily harm is rape by instrumentation in the first degree regardless of the age of the person committing the crime or
- 7) rape by instrumentation committed upon a person under fourteen (14) years of age.

(b) In all other cases, rape or rape by instrumentation is rape in the second degree

#### *21. O.S. § 1114*

##### **Forcible Sodomy**

- (b) The crime of forcible sodomy shall include:
- 1) Sodomy committed by a person over eighteen (18) years of age upon a person under sixteen (16) years of age;
  - 2) Sodomy committed upon a person incapable through mental illness or any unsoundness of mind of giving legal consent regardless of the age of the person committing the crime;
  - 3) Sodomy accomplished with any person by means of force, violence, or threats of force or violence accompanied by apparent power of execution regardless of the age of the victim or the person committing the crime;
  - 4) Sodomy committed by a state, county, municipal or political subdivision employee or a contractor or an employee of a contractor of the state, a county, a municipality or political subdivision of this state upon a person who is under the legal custody, supervision or authority of a state agency, a county, a municipality or a political subdivision of this state;
  - 5) Sodomy committed upon a person who is at least sixteen (16) years of age but less than twenty (20) years of age and is a student of any public or private secondary school, junior high or high school, or public vocational school, with a person who is eighteen (18) years of age or older and is employed by the same school system;
  - 6) Sodomy committed upon a person who is at the time unconscious of the nature of the act, and this fact should be known to the accused; or
  - 7) Sodomy committed upon a person where the person is intoxicated by a narcotic or anesthetic agent administered by or with the privity of the accused as a means of forcing the person to submit.

#### *21. O.S. § 888*

##### **Dating Violence**

Dating violence is not defined under Oklahoma law; however, the law does provide that any act of physical harm, or the threat of imminent physical harm against a person with whom a perpetrator was or is in a dating relationship is considered domestic violence, which defined below. The law defines dating relationship as: a courtship or engagement relationship. For purposes of this act, a casual acquaintance or ordinary fraternization between persons in a business or social context shall not constitute a dating relationship.

#### *22. O.S. § 60.1 (1), (5)*

**Domestic Violence**

Domestic violence is not defined under Oklahoma law; however, the law does provide that: any person who commits any assault and battery against a current or former spouse, a present spouse of a former spouse, a former spouse of a present spouse, parents, a foster parent, a child, a person otherwise related by blood or marriage, a person with whom the defendant is or was in a dating relationship as defined by Section 60.1 of Title 22 of the Oklahoma Statutes, an individual with whom the defendant has had a child, a person who formerly lived in the same household as the defendant, or a person living in the same household as the defendant shall be guilty of domestic abuse.

*21 O.S. § 644 (C)***Stalking**

Any person who willfully, maliciously, and repeatedly follows or harasses another person in a manner that:

- 1) Would cause a reasonable person or a member of the immediate family of that person to feel frightened, intimidated, threatened, harassed, or molested; and
- 2) Actually causes the person being followed or harassed to feel terrorized, frightened, intimidated, threatened, harassed, or molested.

For purposes of this section:

- 1) "Harasses" means a pattern or course of conduct directed toward another individual that includes, but is not limited to, repeated or continuing unconsented contact, that would cause a reasonable person to suffer emotional distress, and that actually causes emotional distress to the victim. Harassment shall include harassing or obscene phone calls as prohibited by Section 1172 of this title and conduct prohibited by Section 850 of this title. Harassment does not include constitutionally protected activity or conduct that serves a legitimate purpose;
- 2) "Course of conduct" means a pattern of conduct composed of a series of two or more separate acts over a period of time, however short, evidencing a continuity of purpose. Constitutionally protected activity is not included within the meaning of "course of conduct";
- 3) "Emotional distress" means significant mental suffering or distress that may, but does not necessarily require, medical or other professional treatment or counseling
- 4) "Unconsented contact" means any contact with another individual that is initiated or continued without the consent of the individual, or in disregard of that individual's expressed desire that the contact be avoided or discontinued. Constitutionally protected activity is not included within the meaning of unconsented contact. Unconsented contact includes but is not limited to any of the following:
  - (a) following or appearing within the sight of that individual,
  - (b) approaching or confronting that individual in a public place or on private property,
  - (c) appearing at the workplace or residence of that individual,
  - (d) entering onto or remaining on property owned, leased, or occupied by that individual,
  - (e) contacting that individual by telephone,
  - (f) sending mail or electronic communications to that individual, and
  - (g) placing an object on, or delivering an object to, property owned, leased, or occupied by that individual; and

- 5) "Member of the immediate family", for the purposes of this section, means any spouse, parent, child, person related within the third degree of consanguinity or affinity or any other person who regularly resides in the household or who regularly resided in the household within the prior six (6) months.

*21 O.S. § 1173*

**V. RISK REDUCTION TIPS**

With no intention to blame victims, and with recognition that only those who commit sexual violence are responsible for those actions, these suggestions may nevertheless help reduce the risk of experiencing a non-consensual sexual act:

- Trust your intuition. If you feel a person or a situation is unsafe, act on those feelings and leave the situation or person. You are probably right.
- When you attend parties, bring your own drinks and don't accept drinks from someone you don't know well and trust.
- Avoid drinking pre-made punches; they often contain high amounts of alcohol.
- Use the buddy system when going out. Make sure someone in your group is sober and keeping track of others.
- Take affirmative responsibility for your alcohol intake/drug use and acknowledge that alcohol/drugs lower your sexual inhibitions and may make you vulnerable to someone who views a drunk or high person as a sexual opportunity.
- Take care of your friends or colleagues and ask that they take care of you. A good friend will step in when they see potentially risky situations.
- Utilize a mobile safety app such as the OU Crimson Guardian app: <http://www.ou.edu/web/news events/articles/news 2016/crimson-guardian-app.html>

If you find yourself in the position of being the initiator of sexual behavior, you owe sexual respect to your potential partner. These suggestions may help you reduce your risk for being accused of sexual misconduct:

- Clearly communicate your intentions to your sexual partner and give them a chance to clearly relate their intentions to you.
- Understand and respect personal boundaries.
- DON'T MAKE ASSUMPTIONS about consent; about someone's sexual availability; about whether they are attracted to you; about how far you can go; or about whether they are physically and/or mentally able to consent. If there are any questions or ambiguity, then you DO NOT have consent.
- Mixed messages from your partner are a clear indication that you should stop, defuse any sexual tension and communicate better. You may be misreading them. You must respect the timeline for sexual behaviors with which they are comfortable.
- Don't take advantage of someone's drunkenness or drugged state, even if they did it to themselves.
- Realize that your potential partner could be intimidated by you, or fearful. You may have a power advantage simply because of your gender or size. Don't abuse that power.

- Understand that consent to one form of sexual behavior does not automatically imply consent to other forms of sexual behavior.
- Silence and passivity cannot be interpreted as an indication of consent. Read your potential partner carefully, paying attention to verbal and non-verbal communication and body language.

## VI. REPORTING SEXUAL MISCONDUCT, DISCRIMINATION, AND HARASSMENT

### A. Filing a Complaint

The Sexual Misconduct Officer has primary responsibility for investigations, education and training associated with this Policy and for such other duties as assigned by the Title IX Coordinator, and reports directly to the Title IX Coordinator. Persons who have complaints alleging violations of this policy may file their complaints with the Sexual Misconduct Officer, the Title IX Coordinator or an Associate Title IX Coordinator. Generally, complaints should be filed as quickly as possible to facilitate the ability to gather facts and evidence; however, all complaints will be reviewed regardless of when an incident occurred. Complaints concerning actions governed by this Policy can be submitted using the online form found at:

[https://cm.maxient.com/reportingform.php?UnivofOklahoma&layout\\_id=10](https://cm.maxient.com/reportingform.php?UnivofOklahoma&layout_id=10)

Online complaints can be made anonymously.

#### **For the Norman campus or Norman-campus based programs, contact:**

- Sexual Misconduct Officer, (405) 325-2215, Four Partners Place, 301 David L. Boren Blvd., Suite 1000, Norman, Oklahoma 73019, or [smo@nu.cdu](mailto:smo@nu.cdu)

#### **For Oklahoma City Health Sciences Center based programs, contact:**

- Associate Equal Opportunity and Title IX Officer, Faustina Layne, (405) 271-2110, 1105 N. Stonewall Avenue, LIB 164H, Oklahoma City, OK 73117, [faustina-layne@ouhsc.edu](mailto:faustina-layne@ouhsc.edu);
- Associate Title IX Coordinator — Student Affairs, Kate Stanton, (405) 271-2416, David L. Boren Student Union, Ste. 300, 1106 Stonewall Avenue, Oklahoma City, Oklahoma, 73117, [Kate-Stanton@ouhsc.edu](mailto:Kate-Stanton@ouhsc.edu);
- or the Sexual Misconduct Officer, (405) 325-2215 or [smo@ou.edu](mailto:smo@ou.edu)

#### **For Tulsa programs, contact:**

- Associate Equal Opportunity and Title IX Officer, Faustina Layne, (405) 271-2110, 1105 N. Stonewall Avenue, LIB 164H, Oklahoma City, OK 73117, [faustina-layne@ouhsc.edu](mailto:faustina-layne@ouhsc.edu);
- Associate Title IX Coordinator — Student Affairs, Josh Davis, (918) 660-3107, 4505 E. 41' Street IC76, Founders Student Center, Tulsa, Oklahoma 74135 or [jmdavis@ou.edu](mailto:jmdavis@ou.edu)
- or the Sexual Misconduct Officer, (405) 325-2215 or [smo@ou.edu](mailto:smo@ou.edu).

**Alternatively, for all campuses,** any person may contact Bobby Mason, Title IX Coordinator, (405) 325-3546, 660 Parrington Oval, Evans Hall 102, Norman, Oklahoma 73019, or [bjm@ouhsc.edu](mailto:bjm@ouhsc.edu)

Depending on the nature of the issues involved, the Sexual Misconduct Officer or other designated official will advise the reporting party about the applicable investigative process and disciplinary procedures. Details regarding the investigative process and disciplinary procedures are found in the *Investigative Process for Internal Complaints under the Sexual Misconduct, Discrimination, Harassment Policy*. All reporting parties will be informed of their options for reporting or not reporting an incident to law enforcement. Reporting parties are not required to report an incident to law enforcement (campus or local), but have the right to report to either, both, or neither. Campus authorities will also assist a reporting party in making a report with local law

enforcement if he or she wishes to do so. Where applicable, reporting parties will also be advised on the preservation of evidence that may be useful to a criminal proceeding and their right to seek a court-issued order of protection.

Reporting parties will also be advised about interim measures, as well as the University's policies regarding maintaining confidentiality of a reporting party's identity and/or the reported incident.

A reporting party has the right, and can expect, to have reports taken seriously by the University when formally reported, and to have those incidents investigated and properly resolved through these procedures. The University's ability to investigate and take action to address discriminatory conduct may be limited if a reporting party insists his or her name not be disclosed to the alleged perpetrator. The University must weigh such requests for privacy against its duty to provide a safe and nondiscriminatory environment. In cases indicating pattern, predation, threat, weapons and/or violence, the University will likely be unable to honor a request for confidentiality. In cases where the victim requests confidentiality and the circumstances allow the University to honor that request, the University will offer interim supports and remedies to the victim and the community, but will not otherwise pursue formal action.

#### **B. Interim Measures**

Complaining parties may request certain interim measures from the Sexual Misconduct Officer or the Title IX Coordinator. No formal complaint or investigation, civil or criminal, need occur before these options are available. The University will maintain confidentiality to the fullest extent possible in implementing these measures. Examples of interim measures include:

- Assistance in filing a complaint with the University and/or appropriate law enforcement agencies
- Assistance in filing for an Emergency Protective Order
- No Contact Order
- Change of class schedules and academic support
- Alternate housing arrangements
- Transportation arrangements and campus escorts
- OU Advocates
- Counseling services
- Blocking emails
- Other measures, as discussed

#### **C. Confidential Reporting**

On campus, some resources may maintain confidentiality with regard to reports of sexual harassment or discrimination. These resources can offer options and advice without an obligation to inform University officials unless you request that the information be shared. Parties wishing to report confidentially, may do so by contacting:

- **OU Advocates:** HSC/Norman (405) 615-0013 - provides referral and support; Tulsa OU Advocates (8 a.m. – 5 p.m.): (918) 660-3163 (after hours: 918-743-5763)
- **Goddard Health Center:** (405) 325-2911 - provides counseling/medical services
- **OU Psychology Clinic:** (405) 325-2914 - provides counseling services
- **Employee Assistant Program:** (800) 327-2513 (Norman/HSC); (918)587-9471 (Tulsa) – provides counseling services and referrals for University faculty/staff
- **HSC Student Counseling Services:** (405) 271-7336 – provides counseling services
- **OU-Tulsa Counseling:** (918) 660-3109 - provides counseling services



- **University of Oklahoma Ombudsperson:** Gloria White (405) 325-3297 - provides referral and resource information for University faculty/staff

#### **D. Mandatory Reporting**

With limited exceptions, every university employee **must** report conduct that could constitute sexual misconduct, discrimination, harassment, or other prohibited conduct under this policy. Attorneys, clergy members, licensed counselors or physicians who are engaged in such capacity may keep such reports confidential.

Supervisors, managers and faculty members with administrative duties or student supervisory duties are responsible for taking all appropriate action to prevent sexual misconduct, discrimination and harassment, to correct it when it occurs, and **must** promptly report it to the Sexual Misconduct Officer, (405) 325-2215 or other appropriate University official (e.g. the Title IX Coordinator/Equal Opportunity Officer, Bobby Mason, (405) 325-3546 or any of the University's Associate Title IX Coordinators).

The Sexual Misconduct Officer has primary responsibility for investigations, education and training associated with this Policy and for such other duties as assigned by the Title IX Coordinator, and reports directly to the Title IX Coordinator. Persons who have complaints alleging violations of this policy may file their complaints in writing with the Sexual Misconduct Officer, the Institutional Equity and Title IX Coordinator or an Associate Title IX Coordinator. Generally, complaints should be filed within 365 calendar days of the act of alleged sexual discrimination, harassment or misconduct to facilitate the ability to gather facts and evidence; however, complaints which exceed this time-frame will be reviewed as well. Complaints concerning actions governed by this Policy can be submitted online at <http://ou.edu/eoo/policies> or in person to the following:

#### **E. Reports Concerning Minors**

Members of the University community should be aware that the University often has minors on its campus for a variety of reasons, including field trips, tours, course credit, and camps. There are specific best practices with respect to hosting minors on campus: <http://www.ou.edu/web/landing/policy.html>.

Should you have a reasonable suspicion of any abuse or neglect of a minor while on University property, or where the minor is in your care at a University-related event, but the abuse may have occurred off-campus, irrespective of whether you are a mandatory reporter for Title IX purposes, you have an independent obligation under Oklahoma state law to notify the Oklahoma Department of Human Services immediately (1-800-522-3511) and local law enforcement and/or OUPD (405-325-1911), OUHSC PD (405-271-4911), or OU-Tulsa Police Department (918-660-3900). If any incidents also involve violations of the Sexual Misconduct, Discrimination and Harassment policy, you must contact DHS, law enforcement, and the University's Sexual Misconduct Office (405-325-2215).

#### **F. Immunity Policy**

The safety of students, employees, and the campus community are of utmost importance to the University. In order to encourage reporting of incidents of sexual assault, dating violence, domestic violence, stalking or other sexual misconduct, no reporting party or witness will be referred for disciplinary action if they engaged in the unlawful or prohibited use of alcohol and/or drugs when the reported incident occurred. Responding parties will not be referred for disciplinary action if they personally engaged in the unlawful or prohibited use of alcohol or drugs during the incident where an alleged policy violation occurred. Provided however, that a responding party may be held responsible for providing alcohol or drugs to the reporting party as a means of facilitating an alleged violation. Additionally, the use of alcohol or drugs will not excuse behavior by a responding party that constitutes a policy violation.

### **VII. EDUCATION, TRAINING, AND RESOURCES**

The University requires volunteers who will be providing volunteer services for (four) 4 or more days within a calendar year to take the following educational-training courses on an annual basis, and all other employees must take the course at least once during their career, usually within 30 days of service at the University

(<https://onpoint.ou.edu>). Employees may be required to be recertified on demand. Failure to have a certification of this required training may result in appropriate disciplinary action. Additional in-person trainings are also offered periodically and on request. Where University employees are also students, they will be required to also take the mandatory online training provided to students. For those without access to a computer or in need of additional assistance, please contact the University's Human Resources Department to take the training in an alternate format.

**A. For students, the University offers:**

- Mandatory online training for students through <http://onpoint.ou.edu>. Where students are also University employees, they will be required to take both the faculty/staff training and the student online training.
- Training on sexual harassment/discrimination/violence is included in the University's mandatory alcohol training program (in-person and online).
- In-person training for student groups and students through courses, orientation, and other meetings.
- In-person training for Active Bystander Intervention skills: [www.ou.edu/notonourcampus/](http://www.ou.edu/notonourcampus/)
- On-going campus campaigns and information at a variety of events concerning the policy and appropriate behaviors regarding sexual assault, dating violence, domestic violence, stalking, and other sexual misconduct.
- Informational website and brochures devoted to educating students at <https://www.ou.edu/content/eoo/policies.html>.
- In-person training (*Step In, Speak Out and LGBTQ Ally*) prevention workshops.
- OU Advocates available 24/7 to discuss all available resources on and off campus: (405) 615-0013. For Tulsa-based programs (8 a.m. – 5 p.m.) (918) 660-3163; after hours: (918) 743-5763.

**B. For employees, the University offers:**

- Mandatory online training for employees through: <http://onpoint.ou.edu>.
- In-person training on sexual harassment/discrimination/violence and mandatory reporting through new employee orientations, foundations in management, and other periodic training opportunities and upon request.
- In-person training for Active Bystander Intervention skills: [www.ou.edu/notonourcampus/](http://www.ou.edu/notonourcampus/).
- Ongoing campus campaigns and information at a variety of events, concerning the policy and appropriate behaviors, regarding sexual assault, dating violence, domestic violence, stalking, and other sexual misconduct.
- Informational website and brochures devoted to educating employees at: [www.ou.edu/sexualmisconduct](http://www.ou.edu/sexualmisconduct).
- In person training (*LGBTQ Ally*) prevention workshops.
- OU Advocates available 24/7 to discuss all available resources on and off campus confidentially: 405-615-0013. For Tulsa-based programs (8 a.m. – 5 p.m.): (918) 660-3163; after hours: (918) 743-5763.
- University Ombudsperson: Gloria White (405) 325-3297 to discuss available resources and options for faculty/staff confidentially

**C. Other resources available to the University community:**

- **OU Advocates (24/7):** (405) 615-0013 - provides free advocates and referrals to other resources on-campus and off-campus. For Tulsa-based programs (8 a.m. – 5 p.m.) (918) 660-3163; after hours: (918) 743-5763
- **Gender + Equality Center:** (405) 325-4929 — provides information and referrals

- **OUPD:** emergencies 405-325-1911; non-emergencies (405) 325-2864 - provides law enforcement support
- **Goddard Health Center:** (405) 325-2911 - provides confidential counseling/medical services on the Norman campus
- **OU Psychology Clinic:** (405) 325-2914 - provides confidential counseling services on the Norman campus
- **Employee Assistance Program:** (800) 327-2513 - confidential resources for HSC and Norman employees; (918) 587-9471 - provides confidential resources for Tulsa employees
- **Norman Police Department:** 911 for emergencies; (405) 321-1600 non-emergencies - provides law enforcement support
- **Norman Rape Crisis Center-Women's Resource Center:** (405) 701-5660 - confidential off-campus resource
- **Norman Domestic Violence Crisis Line:** (405) 701-5540 – provides confidential resources off campus
- **OUHSC-PD:** (405) 271-4300 - provides law enforcement support
- **HSC Student Counseling Services:** (405) 271-7336 - provides confidential counseling services on the HSC campus
- **OKC Rape Crisis/YWCA:** (405) 943-7273 - provides confidential resources off campus
- **OKC Police Department:** 911 for emergencies; (405) 231-2121 non-emergencies
- **Call Rape/Tulsa Rape Crisis:** (918) 585-3143 - provides confidential resources off-campus
- **OU Tulsa Counseling:** (918) 660-3109 - provides confidential counseling services on the Tulsa campus
- **Tulsa Police Department:** 911 for emergencies; (918) 596-9222 for non-emergencies provides law enforcement support
- **Tulsa 211 Helpline:** (918) 836-4357
- **Oklahoma Coalition Against Domestic Violence and Sexual Assault:** (405) 524-0700 - provides confidential resources off campus
- **Oklahoma Safeline:** (800) 522-7233 - provides confidential resources off campus
- **Heartline Health:** 1-800-273-TALK - provides referral and support
- **University Ombudsperson:** (405) 325-3297 - provides confidential guidance and referrals for University faculty/staff

#### D. Bystander Intervention

Bystander intervention is encouraged through safe and positive intervention techniques and by empowering third-party intervention and prevention. If you witness a policy violation, or behaviors that may lead to a policy violation, there are a variety of things you can do as a bystander, such as:

- Divert the intended victim (e.g. “help me out of here; I don’t feel well”)
- Distract the perpetrator (e.g. “looks like your car is being towed”)
- Confront the perpetrator (e.g. “don’t speak to him/her in that manner; you are going to get yourself into trouble”)
- Call for law enforcement assistance
  - Emergencies-911
  - Non-emergencies-
    - OUPD (405) 325-2864
    - OUHSCPD (405) 271-4300
    - OU-Tulsa PD (918) 660-3900
- Educate your community ([www.ou.edu/notonourcampus/](http://www.ou.edu/notonourcampus/))

- Attend bystander intervention work-shops for students through the Gender + Equality Center or for employees through the Institutional Equity and Title IX Office / Sexual Misconduct Office

### **VIII. INTENTIONALLY FALSE REPORTS**

Individuals who make reports that are later found to have been intentionally false or made maliciously without regard for truth may be subject to disciplinary action up to and including termination or expulsion. This provision does not apply to reports made in good faith, even if the facts alleged in the report cannot be substantiated by an investigation.

### **IX. FREE SPEECH AND ACADEMIC FREEDOM**

Members of the University community enjoy significant free speech protections guaranteed by the First Amendment of the United States Constitution. This policy is intended to protect members of the University community from discrimination and is not designed to regulate protected speech. No provision of this policy shall be interpreted to prohibit conduct that is legitimately related to course content, teaching methods, scholarship, or public commentary of an individual faculty member or the educational, political, artistic or literary expression of students in classrooms and public forums. However, freedom of speech and academic freedom are not limitless and do not protect speech or expressive conduct that violates federal or state anti-discrimination laws.

### **X. AVAILABILITY OF OTHER COMPLAINT PROCEDURES**

In addition to seeking criminal charges through local law enforcement, members of the University community may also file complaints with the following entities irrespective of whether they choose to file a complaint under this procedure:

#### **Office of Civil Rights:**

Kansas City Field Office:	<a href="mailto:OCR.KansasCity@ed.gov">OCR.KansasCity@ed.gov</a> 1-816-268-0550
Washington, D.C.:	<a href="mailto:OCR@ed.gov">OCR@ed.gov</a> 1-800-421-3481

#### **Equal Employment Opportunity Commission:**

Oklahoma City Field Office:	1-800-669-4000
Washington, DC:	1-800-669-4000 <a href="http://eeoc.gov/contact/">eeoc.gov/contact/</a>

#### **State of Oklahoma Attorney General's Office:**

Office of Civil Rights Enforcement:	405-521-2029 <a href="mailto:OCRE@oag.gov">OCRE@oag.gov</a>
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#### **Federal Funding Agencies:**

e.g. NASA	1-866-654-1440 <a href="mailto:LEP@NASA.gov">LEP@NASA.gov</a>
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\*Definitions taken, in part, from the model policy of NCHERM: [www.ncherp.org](http://www.ncherp.org)

(Regents, 3-8-2017)

## **H.2 INVESTIGATIVE PROCESS FOR INTERNAL COMPLAINTS UNDER THE SEXUAL MISCONDUCT, DISCRIMINATION AND HARASSMENT POLICY**

### **I. Who May Utilize this Procedure**

Grievances concerning sexual harassment, sex/gender discrimination, sexual assault/misconduct or violations of the Consensual Sexual Relationship Policy should be filed with the Sexual Misconduct Officer. Additionally, such claims may also be filed with the Institutional Equity Officer-Title IX Officer or his/her designee or with the University's Equal Opportunity Officer-Associate Title IX Coordinators (collectively referred to as the "Sexual Misconduct Officer"). This procedure is available to any person who, at the time of the acts complained of was employed by the University of Oklahoma, or is or was an applicant for employment or was enrolled as a student or an applicant for admission at the University, and the University has control over either the alleged perpetrator or the facility, or context of the event (whether on or off campus). The Sexual Misconduct Officer may, in his or her discretion, dismiss a grievance if he/she determines the person filing the complaint is not entitled to use this procedure.

### **II. Filing of Complaint**

Persons who have complaints alleging sex/gender discrimination, sexual orientation discrimination, discrimination based on gender identity or gender expression, sexual harassment, sexual assault/misconduct or under the Consensual Sexual Relationships Policy may file their complaints in writing with the Sexual Misconduct Officer or his/her designee.

Complainants who exercise their right to use this procedure agree to accept its conditions as outlined. Where multiple issues exist (i.e. sexual harassment and violation of due process or grade appeal), the complainant must specify all of the grounds of the grievance that the complainant should have reasonably known about at the time of filing. A grievance filed under this procedure may normally not be filed under any other University grievance procedure. Depending on the nature of the issues involved, the Sexual Misconduct Officer will advise the complainant about the appropriate procedure(s) to follow (e.g. applicable disciplinary policies and procedures for that campus). Parties to the complaint, including the respondent and/or the complainant may obtain the advice of any advisor/attorney at his/her own expense. Advisors and attorneys may be present during any meetings or hearings, but the witnesses and parties are to participate directly in the process, not the advisors/attorneys.

The Sexual Misconduct Officer in consultation with the Institutional Equity and Title IX Officer may modify these procedures at any time as deemed appropriate for compliance with federal, state, local law or applicable guidance.

### **III. Timing of Complaint**

Generally, to aid in a proper investigation, complaints should be filed with the Sexual Misconduct Officer within 365 calendar days of the act of alleged sexual discrimination, harassment or misconduct to facilitate the ability to gather facts and evidence. However, complaints which exceed this time-frame will be reviewed as well. Individuals are counseled that claims filed after lengthy lapses in time may be more difficult to investigate. The Sexual Misconduct Officer may reasonably extend this and all other time periods, and may, in his or her discretion, dismiss a grievance if the person is not entitled to use this procedure. Nothing herein should be construed to extend or restrict a person's right to file charges, lawsuits or claims with any other agency, law enforcement, or court, and individuals are encouraged to ensure their rights have not expired through these other avenues. Further, to the extent the complainant's allegations involve criminal activity, the Sexual Misconduct Officer may refer such matters to local law enforcement.

### **IV. Administrative Action**

- A. The University recognizes its obligation to address incidents of sexual assault, discrimination and harassment on campus when it becomes aware of their existence even if no complaints are filed; therefore, the University reserves the right to take appropriate action unilaterally under this

procedure, including but not limited to altering housing arrangements, issuing no-contact orders, modification of course-schedules, etc.

- B. With respect to students, the University Vice President for Student Affairs and Dean of Students or other appropriate persons in authority may take immediate administrative or disciplinary action deemed necessary for the welfare or safety of the University community.
- C. With respect to employees, upon a determination at any stage in the investigation or grievance procedure that the continued performance of either party's regular duties or University responsibilities would be inappropriate, the proper executive officer may suspend or reassign said duties or responsibilities or place the individual on leave of absence pending the completion of the investigation or grievance procedure.

#### **V. Withdrawal of Complaint**

The complainant may withdraw the complaint at any point during the investigation; however, the Sexual Misconduct Officer may determine in his or her discretion that the issues raised warrant further investigation despite the complainant's desire to withdraw the complaint.

#### **VI. Privacy of Proceedings and Records**

Individuals wishing to make legally confidential reports have the option of reporting those matters to the OU Advocates, the University Ombudsperson (for faculty/staff) licensed counselors, health professionals, clergy and attorneys to the extent the complainant engages them in such private capacity.

Although University officials will maintain an individual's privacy to the best of his or her ability, individuals should know that University officials (outside the context of licensed counselors and health professionals hired in their private capacity) may not be able to maintain legal confidentiality of the complainant, but will maintain his or her privacy as noted herein. The University's ability to investigate may be limited if a complainant insists his or her name not be disclosed to the alleged perpetrator. The University must weigh such requests for privacy against its duty to provide a safe and nondiscriminatory environment. Investigators and those involved with the investigation are individually charged to preserve privacy with respect to any matter investigated or heard. A breach of the duty to preserve privacy is considered a serious offense and may subject the offender to appropriate disciplinary action. Parties and witnesses are also admonished to maintain privacy with regard to these proceedings, and if they are University employees, failure to maintain said privacy may result in appropriate disciplinary action. Furthermore, federal law prohibits retaliation against those who file complaints, and the University will take responsive action if such retaliation occurs, up to and including termination and/or expulsion.

Except with respect to hearings before the Faculty Appeals Board or an applicable student disciplinary procedure, all records involving discrimination or harassment, upon disposition of a complaint, shall be transmitted to and maintained by the Institutional Equity Office as confidential records except to the extent disclosure is permissible or required by applicable law or University policy. It should be noted that under the Family Educational Rights to Privacy Act and the Clery Act that final disciplinary actions as well as the rationale and sanctions shall be reported to the complainant as well as reported in accordance with the Clery Act reporting requirements, where appropriate, to the extent the sanctions directly relate to the complainant. The University shall inform complainants if it is unable to ensure privacy.

#### **VII. Proceedings**

##### **A. Investigation**

Upon receipt of a complaint, the Sexual Misconduct Officer will notify complainant of the receipt of the complaint, and the officer is empowered to investigate the charge, to interview the parties and others, and to gather any evidence he or she deems pertinent. Generally, the Sexual Misconduct Officer interviews the complainant and any relevant witnesses identified by the complainant or the Sexual Misconduct Officer. Once sufficient information is gathered, the Sexual Misconduct Officer will then notify the charged individual of the allegations. With permission from the complainant, the Sexual

Misconduct Officer shall advise the charged individual of the name of the complainant. Where a complainant does not wish to be identified, the extent of the investigation may be limited; however, some form of limited investigation will be attempted while maintaining confidentiality of the complainant's identity. The Sexual Misconduct Officer will interview the charged individual and any witnesses the officer or charged individual identifies as relevant.

Additional evidence may be sought from any relevant party or witness, including but not limited to, email communications, social media postings, text messages, etc. Parties are expected to cooperate and provide this information. Failure to cooperate with an investigation may result in separate disciplinary proceedings. Parties should be aware that as members of the University community, their access to University resources has very limited privacy rights, and the University may obtain information through the University's resources and informational technology system with or without the individual's cooperation. The investigation and findings generally should be completed within 60 calendar days of receipt of the complaint, preferably sooner as practical.

Once the Sexual Misconduct Officer has gathered the information, he/she shall discuss his/her findings, where appropriate, with the Title IX Officer and/or the Equal Opportunity Officer or Associate Title IX Officer for a determination whether sufficient grounds exist to issue a finding of impropriety and/or to refer the matter to the appropriate administrative official.

At all times, through the proceedings, the original complainant shall have all rights afforded to the charged individual.

#### **B. Finding**

After the joint Title IX consultation, the Sexual Misconduct Officer shall render a finding based on the evidence as a whole, the totality of the circumstances, and the context in which the alleged incident(s) occurred, utilizing a preponderance of the evidence standard, i.e. the facts complained of are more likely true than not.

Upon completion of the investigation, the Sexual Misconduct Officer is authorized to take the following actions:

1. **Satisfactory Resolution** – The matter is resolved to the satisfaction of all parties. Provided, however, there will be no direct mediation between the parties. If a resolution satisfactory to the parties is reached, the Sexual Misconduct Officer may prepare a written statement or other applicable document indicating the resolution (e.g. issuing a no contact order). At that time, the investigation and the record shall be closed.
2. **Dismissal** – The Sexual Misconduct Officer finds that no policy violation occurred and dismisses the complaint, giving written notice of said dismissal to each party involved. Within five (5) University business days of the date of the notice of dismissal, the complainant may, in writing, ask the Title IX Officer or his/her designee to reconsider the finding. The request for reconsideration of the finding must indicate how and why the finding was inaccurate. If after reconsideration, the Title IX Officer determines that additional evidence not available at the time of the report would materially alter the findings, he/she may remand the matter to the Sexual Misconduct Officer for additional investigation and report or may take appropriate action. If no appeal is filed within the five (5) University business-day period or the Title IX Officer does not act on the appeal within five (5) University business days, the case is considered closed and the Sexual Misconduct Officer's findings are final. All appropriate administrative officials and parties shall be notified in writing that the matter is closed.
3. **Determination of Impropriety** – The Sexual Misconduct Officer makes a finding of impropriety and notifies the parties and appropriate administrative officer of the finding and may recommend actions to be taken.
4. **Referral of Faculty Appeals Board** – In the case of a complaint against a faculty member, the Sexual Misconduct Officer in consultation with the Provost, may determine that the evidence

is sufficiently clear and serious, warranting the immediate commencement of formal proceedings as provided in the Abrogation of Tenure, Dismissal before Expiration of a Term Appointment, and Severe Sanctions sections of the respective campuses *Faculty Handbook*.

Norman Campus: <http://apps.hr.ou.edu/FacultyHandbook/>

HSC Campus: <http://www.ouhsc.edu/provost/documents/FacultyHandbookOUHSC.pdf>

If the President concurs with the finding of the Sexual Misconduct Officer and Provost, the case may be removed from the grievance proceedings contained herein and further action in the case shall be governed by the Abrogation of Tenure, Dismissal before Expiration of a Term Appointment, and Severe Sanctions section in the *Faculty Handbook*.

### **C. Appeal of the Sexual Misconduct Officer's Findings**

#### **1. Appropriate Appellate Procedures**

##### **(a) Findings of Impropriety Against Students**

Where the Sexual Misconduct Officer determines a student has violated the Sexual Misconduct Policy, he/she shall refer the finding and the matter to the Student Conduct process. Any appeal of the finding shall be heard through the Student Conduct process. See [www.judicial.ou.edu](http://www.judicial.ou.edu).

##### **(b) Findings of Impropriety Against Faculty Members**

###### **i. Severe Sanctions**

Where the Sexual Misconduct Officer determines a faculty member has violated the Sexual Misconduct Policy and based on consultations with the appropriate administrative officials, a severe sanction of abrogation of tenure, dismissal or summary suspension is imposed or recommended as noted in the respective faculty handbooks:

Norman Campus: <http://apps.hr.ou.edu/FacultyHandbook/>

HSC Campus: <http://www.ouhsc.edu/provost/documents/FacultyHandbookOUHSC.pdf>

###### **ii. Other than Severe Sanctions**

Where the Sexual Misconduct Officer determines a faculty member has violated the Sexual Misconduct Policy and based on consultations with the appropriate administrative official, a sanction less than abrogation of tenure, summary suspension or dismissal is recommended or imposed, the faculty member only may appeal the finding and sanction through the process noted in the applicable faculty handbooks. No additional complaints or grievances regarding the same subject matter may be filed with the Faculty Appeals Board.

##### **(c) Findings of Impropriety Against Employees**

Where the Sexual Misconduct Officer determines an employee has violated the Sexual Misconduct Policy, the employee may appeal the finding and recommended or imposed sanction through this appellate process.

##### **(d) Findings of Impropriety Against Third Parties**

Where the Sexual Misconduct Officer determines a third party has violated the Sexual Misconduct Policy, the third party may request the Title IX Officer or his/her designee



in consultation with the appropriate executive officer over the area reconsider the findings. If after reconsideration, the officers determine a remand is warranted, the matter will be referred to the Sexual Misconduct Officer for further investigation or modification. If the officers determine the findings are appropriate, the findings shall be final and binding on the third party without further appeal.

## **2. Request for an Appeal Through This Process**

- (a) Where the matter is not otherwise referred to other University procedures for review and action (e.g., Student Conduct process or Faculty Appeals Board process for severe sanctions), and if the appeal is permissible as noted above, the party accused of impropriety may appeal the finding in writing to the Equal Opportunity Office staff within five (5) University business days of the finding.
- (b) The request for appeal must contain the particular facts upon which the appeal is based. The Equal Opportunity Office staff or the University's designee, shall provide a copy of the request to the proper respondent(s) and the original complainant, and request a written response from the respondent.
- (c) Generally, the respondent will be the Sexual Misconduct Officer, and the initial complainant shall be a witness in the appellate proceedings, rather than a "respondent". In this type of appeal, all references to "respondent" in the appellate procedures shall refer to the Sexual Misconduct Officer and/or relevant members of the University administration. Provided, however, the initial complainant shall be entitled to all rights and procedures available to any party during the appellate process and shall be included in the definition of parties.
- (d) An appropriate University official/employee may be identified by the administration to manage the appeals process if the Equal Opportunity Office staff is also involved as the respondent along with the Sexual Misconduct Officer, where appropriate.

## **3. Response to Request for Appeal**

If a hearing is requested, the respondent's written response to the request for a hearing must be sent to the Equal Opportunity Office's staff or the University's designee within five (5) University business days of receiving notice that a hearing has been requested. The Equal Opportunity Office's staff shall provide a copy of the response to the party requesting the hearing. The initial complainant may likewise provide a written response within this timeline if he/she desires.

## **4. Selection of a Hearing Panel**

Within two (2) University business days following receipt of the written request for a hearing, the Equal Opportunity Office's staff or the University's designee shall contact the parties informally and initiate the process to determine the members of the Hearing Panel.

### **(a) Panel**

A five (5) member hearing panel will be chosen by the parties to the complaint from the following groups:

- \* on the Health Sciences Center campus and for HSC-based programs at the Tulsa campus, the 24-member Committee on Discrimination and Harassment. Provided, however, students may not sit on the hearing panels.
- \* on the Norman campus and for Norman-based programs on the Tulsa campus, from the 16-member Committee on Discrimination and Harassment with faculty

representation from the 50-member Faculty Appeals Board. Provided, however, students may not sit on these hearing panels.

(b) **Process of Panel Selection**

The Equal Opportunity Office's staff or University designee shall contact the parties informally to select the panel. The appellant and the respondent (in conjunction with the original complaint) will select five (5) names each from the pool, excluding students. The names will be listed in rank order with name number one (1) on each list being the preferred panelist.

The Equal Opportunity Office's staff or the University's designee will contact the individuals in the order selected. The first two (2) names on each list of who is available to serve will comprise the hearing panel.

Those individuals selected will choose a fifth name from the entire pool to serve as a panel member and who will serve as chair. If the individuals forming the hearing panel cannot agree on the fifth name and/or his or her service as chair, the Equal Opportunity Office's staff or University designee shall appoint the fifth name and the chair.

Any party to the complaint may ask the Equal Opportunity Office's staff or the University's designee to disqualify any member of the hearing panel. Such requests will be in writing and show sufficient grounds for removal. Furthermore, no panelist shall be expected to serve if he or she feels that a conflict of interest exists. Replacements shall be selected in the same manner as the original panel.

**D. Orientation Conference/Pre-Hearing**

Within ten (10) University business days of receiving notice of service on the Hearing Panel, or sooner if feasible, the chair shall attend an orientation and review the finding and response to determine whether there exist adequate grounds for a formal hearing.

**1. Orientation**

A member of the Equal Opportunity Office and/or the University's designee shall be present during the orientation, where he or she will provide the chair with a copy of the hearing guidelines, the written complaint, the request for a hearing, the written responses, and the Sexual Misconduct Officer's report.

**2. Prehearing**

Once the orientation is concluded, the chair shall review the materials, in private, to determine whether a formal hearing should be held. This is known as the prehearing. During the prehearing, the chair shall review the Sexual Misconduct Officer's report and the response documents and all relevant materials, and shall determine whether a formal hearing is warranted.

**3. Determination of Formal Hearing**

Whether a formal hearing is warranted shall be within the chair's discretion and based on the appellant's written appeal. To determine whether a formal is warranted, the chair shall base his/her decision on whether (a) there are insufficient evidence, utilizing a preponderance of the evidence standard, to support the Sexual Misconduct Officer's finding; or (b) additional evidence not previously available exists that substantially would have altered the Sexual Misconduct Officer's findings. Based on this review and analysis, the chair within its reasonable discretion shall determine whether a formal hearing is warranted, and shall immediately notify the parties in writing and the Equal Opportunity Office staff or University designee of its

decision. A determination that a formal hearing is warranted does not necessarily imply the Sexual Misconduct Officer's finding was erroneous.

#### **4. Determination Not to Hold a Formal Hearing**

If the chair determines that adequate grounds for a hearing do not exist in his/her reasonable discretion, then he/she immediately shall notify the Equal Opportunity Office staff, who in turn, immediately shall notify the parties and appropriate executive officers in writing. The Hearing Panel's services shall be concluded and the Sexual Misconduct Officer's findings shall be final.

The appropriate executive officer shall render his or her decision and notify the parties and the Equal Opportunity Office staff and Title IX Officer within five (5) University business days of the chair's notification to the executive officer of his/her decision. Any party may appeal the executive officer's decision in writing to the President within five (5) University business days of notice of the decision. If the President does not act within five (5) University business days of the request, the executive officer's decision is final.

### **E. Formal Hearing**

#### **1. Scheduling**

If the chair determines a formal hearing is warranted, the chair will schedule the formal hearing to be held within 30 calendar days of his/her decision to hold a formal hearing, preferably sooner. The chair shall immediately notify the Equal Opportunity Office staff and Title IX Office in writing, who in turn, shall notify the parties in writing of the date, time and location of the formal hearing.

The Equal Opportunity Office staff or University designees shall notify the parties in writing of the date, time, and location of the hearing, along with other relevant information concerning the hearing process. Parties are responsible for giving such notice to their witnesses. The hearing shall be scheduled to reasonably ensure that the appellant, respondent, original complainant and essential witnesses are able to participate. However, the chair may ultimately schedule all relevant deadlines and hearings.

#### **2. Procedures**

The Hearing Panel procedures shall be established with reference to the Hearing Guidelines provided by the Equal Opportunity Office staff or the University's designee at the orientation conference, and as determined by the chair in consultation with the University Legal Counsel, where appropriate. All parties shall be provided with a copy of the Hearing Guidelines simultaneously with the notice of formal hearing. Any party shall be entitled to present relevant evidence as determined by the chair of the Hearing Panel.

The parties shall present their own cases. Again, where the Sexual Misconduct Officer has found a policy violation, the Sexual Misconduct Officer presents the case on behalf of the original complainant and the original complainant is simply a witness. Should a complainant wish to present his/her case as well, they may do so and have equal rights under this policy.

Advisors and counsel may be present during the hearings and meetings, but may not directly participate. The parties reasonably may request a recess to consult with his or her advisor outside of the hearing.

The parties may call relevant witnesses to testify. However, the parties may not cross-examine one another. Alternate testimonial methods may be permitted, e.g., Skype, testifying behind a screen, etc., in the chair's discretion. The parties may submit questions to the hearing panel for the panel to ask each party, if relevant, as determined in the panel's discretion. The hearing shall be closed. Audiotape recordings of the proceedings shall be arranged by the chair and paid for by the University. Copies of the recording will be provided. Transcripts may be charged

to the requesting party; the original version of the recording shall remain the property of the University.

### **3. Standard of Review**

At the formal hearing, the appropriate standard of review is whether by a preponderance of the evidence, the report, or its result (a) is unsupported by any evidence, or (b) substantially would have been altered by the new evidence that was not previously available.

The chair acts as a monitor of the process and as a non-voting member except in cases of a tie vote. In such cases, the chair will act as the tie-breaker.

### **4. Resolution Prior to Conclusion of Hearing**

If the matter is resolved to the satisfaction of all parties prior to completion of the hearing, a written statement shall indicate the agreement recommended by the parties and the statement shall be signed and dated by each party and by the chair. The recommendation will be referred immediately to the Institutional Equity and Title IX Officer and/or Equal Opportunity Office staff, who in turn, shall immediately notify, in writing, the appropriate executive officer for final determination.

The executive officer shall notify the parties of his/her final determination within three (3) University business days of notification of the agreed resolution. Assuming the executive officer agrees with the resolution, the matter shall be closed. To the extent the executive officer disagrees with the resolution, he/she may render his/her decision and immediately notify the parties.

Any party may appeal the executive officer's decision in writing to the President with a copy to the Institutional Equity and Title IX Officer, and/or Equal Opportunity Office staff and all other parties. The President shall render a decision within five (5) University business days of notice of the appeal. If the President does not act within five (5) University business days of notice of the all, the executive officer's decision shall be final.

### **5. Findings and Recommendations**

In the event that no solution satisfactory to the parties is reached prior to the completion of the hearing, the Hearing Panel shall determine by majority vote, in writing, whether the finding should be upheld or modified or remanded for further action, and shall notify the Equal Opportunity Office staff of its findings and recommendations within three (3) University business days of the hearing (unless the Hearing Panel determines that because of unforeseen circumstances additional time is needed). The Equal Opportunity Office staff will immediately notify the proper executive officer in writing with copies to the President.

### **6. Executive Officer's Decision**

#### **1) Appellate Times**

Within three (3) University business days of receipt of the Hearing Panel's findings and recommendations, the appropriate executive officer shall inform the complainant and the respondent of the findings of the Hearing Panel and the executive officer's decision as permitted by applicable law. A copy of the executive officer's decision shall be immediately transmitted to the chair of the Hearing Panel, with copies to the President and the Equal Opportunity Office staff.

#### **2) Appeal to the President**

Any party (including the original complainant) may appeal the executive officer's decision to the President within three (3) University business days of the decision. If

the President does not act to change the decision within three (3) University business days of receiving the appeal, the executive officer's decision shall be final under the executive authority of the President.

(Regents, 6-18-81, 9-17-81, 10-13-83, 6-14-90, 6-13-91, 9-27-95, 1-14-97, 1-27-04, 6-23-04, 6-22-11, 3-8-17)

## 18. APPENDIX I

### CONSENSUAL SEXUAL RELATIONSHIPS POLICY

#### I. POLICY STATEMENT

Consensual amorous, dating, or sexual relationships have inherent risks when they occur between a faculty member, supervisor, or other member of the University community and any person over whom he or she has a professional responsibility. As noted in the Sexual Misconduct, Discrimination, and Harassment Policy, the risks include a student or subordinate's feeling coerced into an unwanted relationship to ensure they receive a proper educational or employment experience; potential conflicts of interest in which the person is in a position to evaluate the work or make personnel or academic decisions with respect to the individual with whom he or she is romantically involved; a perception by students or employees that a fellow student or co-worker who is involved in a romantic relationship with his or her supervisor or professor will receive an unfair advantage; either or both of the parties engaging in behavior destructive to the other or their academic or working environments if the relationship ends; and the potential that University/state resources are used inappropriately to further the romantic relationship.

Those with professional responsibility over others and with whom they have a romantic relationship should be aware that their involvement may subject them and the University to legal liability; consequently, such relationships are strongly discouraged. "Professional responsibility" is defined as performing functions including but not limited to teaching, counseling, grading, advising, evaluating, hiring, supervising, and making decisions or recommendations that confer benefits such as promotions, financial aid awards, or other remuneration, or that may impact upon other academic or employment opportunities.

#### II. DEFINITIONS

As used in this policy, the terms "faculty" and "faculty member" mean all those who teach at the University, and include graduate students with teaching responsibilities and other instructional personnel. The terms "staff" or "staff members" mean all employees who are not faculty, and include academic and non-academic administrators as well as supervisory personnel. The term "consensual sexual relationship" may include amorous or romantic relationships, and is intended to indicate conduct that goes beyond what a person of ordinary sensibilities would believe to be a collegial or professional relationship.

#### III. POLICY

##### A. Faculty/Student Relationships

##### 1) Within the Instructional Context

It is considered a serious breach of professional ethics for a member of the faculty to initiate or acquiesce in a sexual relationship with a student who is enrolled in a course being taught by the faculty member or whose academic work (including work as a teaching assistant) is being supervised by the faculty member.

##### 2) Outside the Instructional Context

Sexual relationships between faculty members and students occurring outside the instructional context may lead to difficulties. Particularly when the faculty member and student are in the same academic unit or in units that are academically allied, relationships that the parties view as consensual may appear to others to be exploitative. Further, in such situations, the faculty member may face serious conflicts of interest and should be careful to distance himself or herself from any decisions that may reward or penalize the student involved. A faculty member who fails to withdraw from participation in activities or decisions that may reward or penalize a student with whom the faculty member has or has had an amorous relationship will be deemed to have violated his or her ethical obligation to the student, to other students, to colleagues, and to the University.

**B. Staff/Student Relationships**

Consensual sexual relationships between staff and students are prohibited in cases where the staff member has authority or control over the student. A staff member who fails to withdraw from participation in activities or decisions that may reward or penalize a student with whom the staff member has or has had an amorous relationship will be deemed to have violated his or her ethical obligation to the student, to other students, to colleagues, and to the University. Failure to abide by this policy may result in disciplinary action, up to and including termination.

**C. Staff/Subordinate Relationships**

Supervisors, or those with professional responsibility, over someone with whom they have or have had an amorous, consensual, romantic, or sexual relationship must notify their direct supervisor that a management-control plan needs to be implemented, or that the supervisor wishes a transfer so that he or she is no longer in a position of professional responsibility over the affected individual. To avoid the severe risks noted, supervisors in such relationships may not manage, supervise, evaluate, or make other employment decisions concerning the individual with whom they are engaged in a romantic relationship. If the relationship ends, the management-control plan must remain in effect. Failure to notify a supervisor to ensure a plan is in place may result in disciplinary action, including termination, for that supervisor.

**IV. COMPLAINT PROCEDURE**

Complaints alleging a violation of the Consensual Sexual Relationships Policy shall be handled in accordance with the Grievance Procedure for Complaints Based Upon Sexual Misconduct, Discrimination and Harassment Policy. Complainants should contact the Sexual Misconduct Officer:

**Norman Campus Based Programs**  
301 David L. Boren, 4PP, Suite 1000  
Norman, Oklahoma  
(405) 325-2215

**Health Sciences Center Based Programs**  
Room 164H, HSC Bird Library  
Oklahoma City, Oklahoma  
(405) 271-2110

and/or the Equal Opportunity Office:

**Norman Campus Based Programs**  
Room 102, Evans Hall  
(405) 325-3546

**Health Sciences Center Based Programs**  
Room 164H, HSC Bird Library  
(405) 271-2110

Other locations may be determined from time to time. Please refer to <http://www.ou.edu/content/eoo.html> for an updated listing.

(Regents, 6-14-90, 6-13-91, 9-27-95, 1-14-97, 1-27-04, 6-23-04, 6-22-11, 9-19-11, 5-31-12, 3-8-17)

## 19. APPENDIX J

### NON-DISCRIMINATION POLICY

Diversity is one of the strengths of our society as well as one of the hallmarks of a great university. The University supports diversity and is committed to maintaining employment, educational, and health care settings that are multicultural, multiracial, multiethnic, and all-inclusive. Respecting differences is one of the University's missions.

The University does not discriminate or permit discrimination by any member of its community against any individual based on the individual's race, color, religion, political beliefs, national origin, age (40 or older), sex (see the Sexual Misconduct, Discrimination and Harassment policy <http://www.ou.edu/content/eoo/policies>), sexual orientation, genetic information, gender identity, gender expression, disability, or veteran status in matters of admissions, employment, financial aid, housing, services in educational programs or activities, or health care services that the University operates or provides.

University policy prohibits retaliation against a person for filing a complaint of discrimination or harassment under this policy or other applicable federal, state, or local laws. This policy also prohibits retaliation against any person who assists someone with a complaint of discrimination or harassment or who participates in any manner in an investigation or resolution of a complaint of discrimination or harassment.

#### I. DEFINITIONS

- A. **Discrimination:** Discrimination, including harassment, is defined as conduct directed at a specific individual or group of identifiable individuals that subjects the individual or group to treatment that adversely affects their employment, education, health care, or access to institutional benefits on account of the individual's or group's race, color, religion, political beliefs, national origin, age (40 or older), sex (see the Sexual Misconduct, Discrimination and Harassment policy <http://www.ou.edu/content/eoo/policies>), sexual orientation, genetic information, gender identity, gender expression, disability, or veteran status.
- B. **Harassment:** Harassment as a form of discrimination is defined as verbal or physical conduct that is directed at an individual or a group on account of the individual's or group's race, color, sex (see the Sexual Misconduct, Discrimination and Harassment policy <http://www.ou.edu/content/eoo/policies>), sexual orientation, genetic information, gender identity, gender expression, religion, political beliefs, national origin, age (40 or older), disability, or veteran status when such conduct is sufficiently severe, pervasive, and objectively offensive so as to have the purpose or effect of unreasonably interfering with an individual's or group's academic or work performance or ability to receive health care services or of creating a hostile academic, work, or health care environment viewed by examining a totality of the circumstances from the standpoint of a reasonable person with the same characteristics as the purported recipient of the harassing conduct.
- C. **Reasonable Accommodation/Accessibility and Other Assistance:**
  - 1) For staff employees of the University, please refer to **Section 5.24** of the Staff Handbook regarding disability and reasonable accommodations. Also see [www.drc.ou.edu](http://www.drc.ou.edu).
  - 2) For faculty of the University, See Faculty Handbook:
    - Norman Campus Faculty Handbook: <https://apps.hr.ou.edu/facultyhandbook/>
    - OUHSC Faculty Handbook: <http://ouhsc.edu/provost/documents/FacultyHandbookOUHSC.pdf>
  - 3) For students of the University, refer to the Disability Resource Center: <http://www.ou.edu/content/drc.html>



4) For individuals seeking or receiving health care from the University:

The department providing services will make available, at no cost to the individual, aids such as qualified sign-language interpreters, assistive devices, and alternate format materials (large print, audio, accessible electronic formats) to individuals who need such assistance and who are receiving health care from the University at no cost to the individual.

For individuals whose primary language is not English and who are receiving health care from the University, language interpretation and translation services will be made available. (See Policy and Procedures for Communication with Patients with Limited English Proficiency and Auxiliary Aids and Services for Patients with Disabilities Policy)

- D. **Retaliation:** Retaliation includes attempting to penalize or taking any form of adverse action against a person because of his or her filing of a complaint of discrimination or harassment and/or participating or assisting in any manner with an investigation or resolution of a complaint of discrimination or harassment. Adverse action includes, but is not limited to, making threats, intimidation, reprisals or any other adverse action relating to employment, academic, health care, or institutional benefits.

## II. EDUCATION AND TRAINING

The University requires all employees to complete an anti-discrimination training course at least once during their University employment, typically within the 30 days of beginning service at the University. Employees may be required to take the course at other times as well. Failure to complete this required training within the first 30 days of employment and as requested by University administration may result in appropriate disciplinary action. See <https://onpoint.ou.edu>. For those without access to a computer or in need of additional assistance, please contact University Human Resources for alternate methods of training.

Volunteers will provide volunteer services for four (4) or more days within a calendar year must take the course on an annual basis.

Students are advised and trained periodically through the Office of Student Affairs and through mandatory online training located at: <https://onpoint.ou.edu>. Students who are also employees must take both forms of training (one for faculty and staff and one for students).

## III. INTENTIONALLY FALSE REPORTS

Individuals who make reports that are later found to have been intentionally false or misleading or made maliciously and without regard for truth may be subject to disciplinary action up to and including termination or expulsion. This provision does not apply to reports made in good faith, even if the facts alleged in the report cannot be substantiated by an investigation.

## IV. FREE SPEECH AND ACADEMIC FREEDOM

Members of the University community enjoy significant free speech protections guaranteed by the First Amendment of the United States Constitution. This policy is intended to protect members of the University community from discrimination, not to regulate protected speech. No provision of this policy shall be interpreted to prohibit conduct that is legitimately related to course content, teaching methods, scholarship, or public commentary of an individual or faculty member or the educational, political, artistic or literary expression of students in classrooms and public forums. However, freedom of speech and academic freedom are not limitless and do not protect speech or expressive conduct that violates federal or state anti-discrimination laws.

## V. COMPLAINTS

Any individual who at the time of the actions complained of was employed by the University, was an applicant for University employment, was enrolled as a student or an applicant for admission at the University, or who was seeking or receiving health care services from the University, may file a complaint

with the Equal Opportunity Office (EOO) for review and investigation regarding complaints of discrimination or harassment against University students, faculty, staff, those third parties utilizing University services, or third parties on University premises:

- For Norman Campus and Norman campus extension programs, Room 102 Evans Hall (405) 325-3546;
- For Health Sciences Center campus and HSC campus extension programs: 405-271-2110, Room 164H, HSC Bird Library.

The University will make appropriate arrangements to ensure that individuals with disabilities and/or limited English proficiency are provided with services or language assistance needed to file a complaint. The EOO will be responsible for making such arrangements.

Such complaints must be brought within 365 calendar days of the alleged discriminatory event.

## **VI. ADDITIONAL AVENUES OF RECOURSE**

In addition to filing a complaint under the University's Nondiscrimination Policy, individuals may have additional reporting and legal options depending on the circumstances.

Examples of other potential avenues of redress include:

- \* Equal Employment Opportunity Commission ([www.eeoc.gov](http://www.eeoc.gov))
- \* U.S. Department of Justice ([www.justice.gov](http://www.justice.gov))
- \* U.S. Department of Education, Office of Civil Rights ([www2.ed.gov/ocr](http://www2.ed.gov/ocr))
- \* Oklahoma Human Rights Commission ([www.ok.gov/ohrc/](http://www.ok.gov/ohrc/))
- \* Local law enforcement including University of Oklahoma Police Department ([www.ou.edu/oupd/](http://www.ou.edu/oupd/))

Filing internal complaints does not satisfy any potential timing and reporting requirements otherwise required by the above entities or by law.

(Regents, 12-19-90, 6-13-91, 7-27-95, 1-14-97, 1-26-99, 3-29-00, 1-27-04, 6-23-04, 6-22-11, 2-29-12, 3-8-17)

## INVESTIGATIVE PROCESS FOR INTERNAL COMPLAINTS UNDER THE NON-DISCRIMINATION POLICY

### I. Who May Utilize this Procedure

Despite anything to the contrary provided in other University policies or procedures, the grievance procedure embodied herein governs all grievances (with the exception of grievances concerning sexual misconduct, discrimination and harassment which are governed by separate policy located at: <http://www.ou.edu/content/ooo/policies/misc.html>) filed with the University Equal Opportunity Officer/Title IX Coordinator (EOO) and shall be available to any person who, at the time of the acts complained of was employed by the University of Oklahoma, or is or was an applicant for employment or was enrolled as a student or an applicant for admission at the University. However, if the complainant initiates litigation or files a complaint with any state or federal agency, with respect to the issues presented to the EOO, any grievance under these procedures may be dismissed or stayed in the EOO's discretion as duplicative. The University EOO may, in his or her discretion, dismiss a grievance if he/she determines the person filing the complaint is not entitled to use this procedure.

### II. Filing of Complaint

Persons who have complaints alleging discrimination based upon race, color, national origin, sex, sexual orientation, genetic information, gender identity, gender expression, age (40 or older), religion, political beliefs, disability, or status as a veteran (together, "discrimination and harassment or retaliation"), may file their complaints in writing with the EOO. Provided, however, where claims include sexual harassment, sexual orientation or gender discrimination, the entire process shall be handled through the procedures noted in the Sexual Misconduct, Discrimination and Harassment Policy. The Equal Opportunity Officer is also an Associate Title IX Coordinator and may receive and investigate all such claims as well as coordination with the Institutional Equity and Title IX Office.

Complainants who exercise their right to use this procedure agree to accept its conditions as outlined. Where multiple issues exist (i.e. racial harassment and violation of due process or grade appeal), the complainant must specify all of the grounds of the grievance that the complainant should have reasonably known about at the time of filing. A grievance filed under this procedure normally may not be filed under any other University grievance procedure. Depending on the nature of the issues involved, the complainant will be advised by the EOO about the appropriate procedure(s) to follow (e.g. applicable disciplinary policies and procedures for that campus). Parties to the complaint, including the respondent and/or the complainant may obtain the advice of any advisor/attorney at his/her own expense; however, advisors and attorneys may not be present during any meetings or hearings during this process.

The EOO may modify these procedures at any time as deemed appropriate for compliance with federal, state, local law or applicable guidance.

### III. Timing of Complaint

Generally, any complaint should be filed with the EOO within 365 calendar days of the act of alleged discrimination or harassment. The EOO may reasonably extend this and all other time periods, and may, in his or her discretion, dismiss a grievance if the person is not entitled to use this procedure. Nothing herein should be construed to extend or restrict a person's right to file charges, lawsuits or claims with any other agency, law enforcement or court, and individuals are encouraged to ensure their rights have not expired through these other avenues. Further, to the extent the complainant's allegations involve criminal activity, the EOO may refer such matters to local law enforcement.

### IV. Administrative Action

- A. The University recognizes its obligation to address incidents of discrimination and harassment on campus when it becomes aware of their existence even if no complaints are filed; therefore, the University reserves the right to take appropriate action unilaterally under this procedure.

- B. With respect to students, the University Vice President for Student Affairs and Dean of Students or other appropriate persons in authority may take immediate administrative or disciplinary action deemed necessary for the welfare or safety of the University community.
- C. With respect to employees, upon a determination at any stage in the investigation or grievance procedure that the continued performance of either party's regular duties or University responsibilities would be inappropriate, the proper executive officer may suspend or reassign said duties or responsibilities or place the individual on leave of absence pending the completion of the investigation or grievance procedure.

#### **V. Withdrawal of Complaint**

The complainant may withdraw the complaint at any point during the investigation; however, the EOO may determine in his or her discretion that the issues raised warrant further investigation despite the complainant's desire to withdraw the complaint.

#### **VI. Privacy of Proceedings and Records**

Individuals wishing to make legally confidential reports have the option of reporting those matters to licensed counselors, health professionals, clergy and attorneys.

Although University officials will maintain an individual's privacy to the best of his or her ability, individuals should know that University officials (outside the context of licensed counselors and health professionals) may not be able to maintain legal confidentiality of the complainant, but will maintain his or her privacy as noted herein. Further, the University's ability to investigate may be limited if a complainant insists his or her name not be disclosed to the alleged perpetrator. The University must weigh such requests for privacy against its duty to provide a safe and nondiscriminatory environment. Investigators and those involved with the investigation are individually charged to preserve privacy with respect to any matter investigated or heard. A breach of the duty to preserve privacy is considered a serious offense and may subject the offender to appropriate disciplinary action. Parties and witnesses are also admonished to maintain privacy with regard to these proceedings, and if they are University employees, failure to maintain said privacy may result in appropriate disciplinary action. Furthermore, federal law prohibits retaliation against those who file complaints, and the University will take responsive action if such retaliation occurs, up to and including termination and/or expulsion.

Except with respect to hearings before the Faculty Appeals Board or an applicable student disciplinary procedure, all records involving discrimination or harassment, upon disposition of a complaint, shall be transmitted to and maintained by the EOO as confidential records except to the extent disclosure is permitted/required by applicable law or University policy. The University shall inform complainants if it is unable to ensure privacy.

#### **VII. Proceedings**

##### **A. Investigation**

Upon receipt of a complaint, the EOO will notify the complainant, via email, of his/her receipt of the complaint and is empowered to investigate the charge, to interview the parties and others, and to gather any evidence he or she deems pertinent. The investigation and findings should be completed within 60 calendar days of receipt of the complaint, or as soon as practical.

The EOO shall render his or her decision on a case-by-case basis based upon the evidence as a whole, the totality of the circumstances, and the context in which the alleged incident(s) occurred, utilizing a preponderance of the evidence standard, i.e. the facts complained of are more likely true than not.

Upon completion of the investigation, the EOO is authorized to take the following actions:

1. **Satisfactory Resolution** – The matter is resolved to the satisfaction of the University and the complainant. If a resolution satisfactory to the University and the complainant is reached

through the efforts of the EOO, he or she shall prepare a written statement indicating the resolution. At that time, the investigation and the record shall be closed.

2. **Dismissal** – The EOO finds that no policy violation occurred and dismisses the complaint, giving written notice of said dismissal to each party involved. There shall be no appeal from a finding of no policy violation except in exceptional circumstances where additional evidence not otherwise available at the time of the report is submitted by the original complainant. Any such appeal shall be in writing within 15 business days of the report addressed to the executive officer over the area, who shall render a decision within 10 business days of receipt of the appeal. If the executive officer takes no action within 10 business days of receipt of the appeal, the EOO's findings are final. Further, the decision of the executive officer shall be final.
3. **Determination of Impropriety**
  - a) The EOO makes a finding of impropriety and notifies the parties of the decision and may recommend any action to be taken. Either party may appeal said determination in writing to the EOO within 15 business days of the date of the notice of determination, and the issue proceeds to an appellate review as described below. If no appeal is filed within the 15 business-day period, the case is considered closed.
  - b) In the case of a complaint against a faculty member, the EOO may determine that the evidence is sufficiently clear and serious, warranting the immediate commencement of formal proceedings as provided in the Abrogation of Tenure, Dismissal before Expiration of a Term Appointment, and Severe Sanctions sections of the *Faculty Handbook*. If the President concurs with the finding of the EOO, the case may be removed from the grievance proceedings contained herein and further action in the case shall be governed by the Abrogation of Tenure, Dismissal before Expiration of a Term Appointment, and Severe Sanctions section in the *Faculty Handbook*; otherwise, this policy and procedure shall apply.
  - c) In the case of a complaint against a student, where impropriety is found (if not earlier referred to the Student Conduct Office for action), the matter shall be referred to the Student Conduct Office for appropriate action under the Student Code.

## B. Hearing

### 1. **Request for an Appellate Hearing**

- a) Except as noted above, either party may request, in writing, a hearing within 15 business days of the issuance of the EOO's finding and the request must contain the particular facts upon which the appeal is based as well as the identity of the appropriate respondent(s). The EOO's staff or the University's designee, where appropriate, shall immediately provide a copy of the request to the proper respondent(s).

Where the EOO's decision is favorable to the initial complainant, and the alleged perpetrator appeals the finding, the EOO shall defend his or her report and findings, and the initial complainant shall be a witness in the appellate proceedings, rather than a "respondent." In this type of appeal, all references to "respondent" in the appellate procedures shall refer to the EOO and/or relevant members of the University administration. In such cases, an appropriate University official/employee shall be identified by the administration to manage the appeals process and the Equal Opportunity Office shall only be involved as the respondent.

- b) Typically, only unresolved complaints following an investigation may result in a hearing before a panel selected from the membership of the Committee on Discrimination and Harassment, as described below. For the Norman campus, faculty-versus-faculty grievances with multiple issues are heard by the Faculty Appeals Board. For all campuses, grievances against students may, in the EOO's discretion, be heard by the appropriate

hearing body as set forth in the disciplinary policies and procedures applicable to each campus. The request for a hearing is to be addressed to the Equal Opportunity Office.

- c) If a hearing is requested, the respondent's written response to the request for a hearing must be sent to the Equal Opportunity Office's staff or the University's designee within ten (10) business days of receiving notice that a hearing has been requested. The Equal Opportunity Office staff or University designee shall provide immediately a copy of the response to the party requesting the hearing.

## 2. Selection of a Hearing Panel

Within ten (10) business days following receipt of the written request for a hearing, the Equal Opportunity Office staff or the University's designee shall initiate the process to determine the members of the hearing panel.

### a) Panel

A five-member hearing panel will be chosen by the parties to the complaint from the following groups:

- on the Health Sciences Center campus and for HSC-based programs at the Tulsa campus, the 24-member Committee on Discrimination and Harassment;
- on the Norman campus and for Norman-based programs on the Tulsa campus, from the 16-member Committee on Discrimination and/or from the 50-member Faculty Appeals Board.

### b) Committee on Discrimination

A committee on discrimination and harassment shall be established on each campus and comprised of staff members, students, and faculty in the following groupings:

- on the Health Sciences Center campus and for HSC-based Tulsa campus programs, eight (8) staff members appointed by the Staff Senate, eight (8) students appointed by the HSC Student Government Association, and eight (8) faculty members appointed by the Faculty Senate.
- on the Norman campus and for Norman-based Tulsa campus programs, eight (8) staff members with five (5) of those members appointed by Staff Senate and the remaining three (3) members appointed by the President, and eight (8) student members with five (5) members appointed by UOSA and the three (3) remaining members appointed by the President, with faculty representation being selected from the 50 member Faculty Appeals Board.

The terms of appointment shall be for three (3) years with initial terms of one (1), two (2), and three (3) years in each category to provide the staggered membership, except that each student shall be appointed for a one-year term.

### c) Process of Panel Selection

The Equal Opportunity Office staff or University designee immediately shall contact the parties informally to select the panel. The complainant and the respondent will select five (5) names each from the list of pool members provided by the Equal Opportunity Office staff or University designee within five (5) business days of contact from the EOO. The names will be listed in rank order with name number one (1) on each list being the preferred panelist. Failure to timely provide names shall result in EOO or University designee appointing the panel.

The Equal Opportunity Office staff or the University's designee will contact the individuals in the order selected. The first two (2) names on each list available to serve will make up the hearing panel.

Those individuals selected will choose a fifth name from the entire pool to serve as a panel member and chair. If the individuals selected for the panel cannot agree on the fifth name or who shall serve as chair, the Equal Opportunity Office staff or University designee shall appoint the fifth panel member and chair.

Either party to the complaint may ask the Equal Opportunity Office staff or the University's designee to disqualify any member of the hearing panel. Such requests will be in writing and show sufficient grounds for removal. Furthermore, no panelist shall be expected to serve if he or she feels that a conflict of interest exists. Replacements shall be selected in the same manner as the original panel.

### **3. Orientation Conference/Pre-Hearing**

Within ten (10) business days of receiving notice of service on the appellate panel, or sooner if feasible, the chair shall convene the hearing panel for an orientation and discussion of the grievance, and determine whether a formal hearing is warranted. A member of the Equal Opportunity Office staff and/or the University's designee shall be present during the orientation conference, where he or she will provide each panel member with a copy of the hearing guidelines, the written complaint, the request for a hearing, the written response, and the EOO's report.

Only panel members shall be present during the discussion of whether a hearing is warranted. The appellant must show through the written appeal, that the EOO's report is erroneous and a hearing would substantially alter the findings because (a) there is additional evidence to be presented that was not available at the time of the investigation that may substantially alter the EOO's findings, or (b) the investigation's findings are not supported by any evidence (i.e., the EOO must have evaluated the evidence using a preponderance of the evidence standard, (i.e., more likely than not a policy violation occurred). Based on this review and analysis, the hearing panel, within its reasonable discretion and by majority vote, shall determine whether a formal hearing is warranted. The finding a formal hearing is warranted does not necessarily imply the EOO's findings are erroneous. The hearing panel shall notify the parties and the EOO of its decision within five (5) business days of the prehearing.

If the panel agrees by a majority vote that adequate grounds for a hearing do not exist in its reasonable discretion, then they shall notify the Equal Opportunity Office staff or University designee immediately, who in turn, shall immediately notify the parties and the executive officer. The panel's services shall be concluded and the EOO's findings shall be final.

The appropriate executive officer shall render his or her decision and notify the parties and the EOO within ten (10) business days of receipt of the panel's decision. Either party may appeal the Executive Officer's decision in writing to the President within ten (10) business days of the notification of the decision. If the President does not act within ten (10) business days of the request, the executive officer's decision is final. Any decision by the President is likewise final.

### **4. Formal Hearing**

If the hearing panel determines a formal hearing is warranted, the chair will schedule the formal hearing to be held within 30 calendar days of the decision of the need for a formal hearing. The chair shall notify the parties and the Equal Opportunity Office within five (5) days of the prehearing conference.

The hearing panel procedures shall be established with reference to the Hearing Guidelines provided by the Equal Opportunity Office or the University's designee at the orientation conference, and as determined by the chair in consultation with the Equal Opportunity

Officer/Title IX Coordinator and/or University Legal Counsel, and shall provide that the parties may present relevant evidence.

The chair shall notify the parties of the date, time, and location of the hearing, along with other relevant information concerning the hearing process. Parties are responsible for giving such notice to their witnesses. The hearing shall be scheduled to reasonably ensure that the complainant, respondent, and essential witnesses are able to participate. However, the chair shall ultimately determine all relevant scheduling requirements. The parties shall present their own cases. No advisors or counsel may be present in the hearing.

The hearing panel shall determine whether the report, or its result (a) is unsupported by any evidence, or (b) is arbitrary and capricious, or (c) would be altered substantially by new evidence not previously available. The EOO must have evaluated the evidence using a preponderance of the evidence standard, i.e., more likely than not a policy violation occurred. The hearing panel shall evaluate the evidence in light of this standard of review.

The parties may call relevant witnesses to testify and may cross-examine witnesses called by the other party as determined by the chair. The hearing shall be closed unless all parties agree to an open hearing. Audiotape recordings of the proceedings shall be arranged by the chair and paid for by the University. Copies of the recording will not be provided. Transcripts may be charged to the requesting party; the original version of the recording shall remain the property of the University.

If the matter is resolved to the satisfaction of all parties prior to completion of the hearing, a written statement shall indicate the agreement recommended by the parties and the statement shall be signed and dated by each party and by the chair. The recommendation will be referred to the EOO, who in turn, shall immediately notify the appropriate executive officer for final determination. The executive officer shall notify the parties of his/her final determination within five (5) business days of notification of the agreed resolution. Assuming the executive officer agrees with the resolution, the matter shall be closed. To the extent the executive officer disagrees with the resolution, he/she may render his/her decision and notify the parties. Any party may appeal the decision in writing to the President with a copy to the EOO and all other parties. The President shall render a decision within five (5) business days of notice of the appeal.

#### **C. Findings and Recommendations**

In the event that no solution satisfactory to the parties is reached prior to the completion of the hearing, the hearing panel shall determine by majority vote whether the relevant decisions should be upheld or modified or remanded for further reconsideration, and shall render its findings and recommendations within ten (10) business days of the hearing (unless the hearing panel determines that because of unforeseen circumstances additional time is needed) and notify the Equal Opportunity Office staff/University designee, who in turn, shall notify immediately the proper executive officer with copies to the President.

#### **D. Executive Officer's Decision**

Within 15 business days of receipt of the hearing panel's findings and recommendations, the proper executive officer shall inform the complainant and the respondent of the findings of the hearing panel and the executive officer's decision. A copy of the executive officer's decision shall be immediately transmitted to the chair of the hearing panel, with copies to the President and the EOO.

#### **E. Appeal to the President**

The executive officer's decision may be appealed to the President within ten (10) business days of the executive officer's decision. If the President does not act to change the decision of the executive officer within ten (10) business days of receiving the appeal, the decision of the executive officer shall become final under the executive authority of the President. Any decision of the President shall



likewise be final. The University Equal Opportunity Officer/Title IX Coordinator can be contacted for more information:

- For Norman campus and for Norman-based Tulsa campus programs, Room 102, Evans Hall, Ph: (405) 325-3546;
- For Health Sciences Center campus and for HSC-based Tulsa campus programs, Room 164H, HSC Bird Library, Ph: (405) 271-2110.

**20. APPENDIX K**

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**OPEN RECORDS POLICY**

The Oklahoma Open Records Act (the “Act”) requires that public records of the University be open to any person for inspection, copying, or mechanical reproduction during regular business hours. The Act broadly defines “record” to include any document or electronic file created by, received by, or coming into the custody, control or possession of public officials in connection with the transaction of public business, expenditure of public funds, or administering of public property. Records may only be destroyed as provided by law.

Requests to inspect or copy records must be made in writing to the University’s Open Records Office (“ORO”). Because University officials are not authorized to release records requested under the Act, any employee who receives a request shall forward it immediately to the ORO. The Open Records Officer (the “Officer”) will then work with the relevant department to determine whether any responsive documents exist without creating new records.

When the University maintains responsive documents, the Officer will consider whether they are subject to one or more of the confidentiality or privilege exceptions enumerated in the Act. The Officer will then withhold the records entirely, make redactions to the records in accordance with the law, or release the records in their current form.

**21. APPENDIX L**

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**LEAVE POLICIES**

**L.1 - Shared Leave Policy – University of Oklahoma 3-5**

**L.2 - Family and Medical Leave Act (FMLA) 7-9**

## **L.1 SHARED LEAVE POLICY - UNIVERSITY OF OKLAHOMA**

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### **A. Purpose**

The Shared Leave Program is a means for a University employee to donate paid leave to a fellow University employee, who is eligible for and requires leave while experiencing a serious health condition, as defined, which has caused, or is likely to cause, the employee to take leave without pay.

### **B. Definitions**

#### **1) Employee Recipient**

Twelve (12) month employees who hold benefits-eligible appointments that accrue paid leave and who have had continuous employment for at least twelve (12) months preceding the serious health condition are eligible to be employee recipients. The recipient employee must have used all his/her paid time off (PTO), extended sick leave (ESL), and compensatory time hours (if applicable) prior to being eligible to receive shared leave. Shared Leave is not available for employees in off-work status due to workers compensation.

#### **2) Employee Donor**

Twelve (12) month employees who hold benefits-eligible appointments that accrue paid leave and have a paid leave balance greater than 50% of annual accrual are eligible to be employee donors. A donating employee can donate paid leave at any time during the budget year.

#### **3) Serious Health Condition**

A serious, extreme, catastrophic, or life-threatening medical condition is a period of incapacity requiring the employee to be medically unable to work for a period of five (5) days or more. The medical condition includes, but is not limited to, continuing treatment or supervision by a healthcare provider; or continuing treatment of a chronic or long-term health condition. The employee must be suffering from an extraordinary or severe illness, injury, impairment, or physical or mental condition that has caused, or is likely to cause, the employee to take leave without pay.

#### **4) Shared Leave Committee**

The Shared Leave Committee will monitor the Shared Leave Program, make policy recommendations to administration and employee governance groups, and approve the distribution of shared leave to the recipient. The Shared Leave Committee will consist of seven (7) University employees, with a term of three (3) years, and shall be recommended by the Faculty and Staff Senates and appointed by the Vice President, Administration and Finance. The Shared Leave Committee will report the overall utilization and evaluation of the Shared Leave Program annually to the Faculty and Staff Senates, the President, Provost, and the Vice President, Administration and Finance.

#### **5) Shared Leave Pool**

The Shared Leave Pool will include both: (1) paid leave hours donated by eligible employees for distribution to a specific employee who has applied for and been approved for receipt of shared leave, and (2) paid leave hours which have previously been donated but not distributed. Hours donated that were not distributed to a specific employee will be maintained in the pool, along with any hours donated for general distribution to eligible employees.

### **C. General Guidelines for the Shared Leave Program**

- 1) Shared leave is meant to cover only the duration of the serious health condition for which it was approved.

- 2) Donated paid leave is transferable between employees in different University departments, within each campus, with the approval of the Shared Leave Committee.
- 3) Any unused shared leave donated to a specific employee will be maintained in the Shared Leave Pool to be distributed to other qualified employees.
- 4) All donated leave must be given voluntarily. No employee shall be coerced, threatened, intimidated, or financially induced into donating paid leave for purposes of the Shared Leave Program.
- 5) Persons involved in the administration of the Shared Leave Program are responsible for guarding the privacy of leave recipients and donors. Communications with either group must be kept confidential.
- 6) Employees who are receiving shared leave will not accrue additional paid leave.

**D. Eligibility and Participation Requirements for Recipient**

- 1) The employee or his/her personal representative will complete a Shared Leave Request Form and attach documentation from a licensed physician or healthcare practitioner verifying the need for the leave and expected duration of the condition.
- 2) The employee must have a current satisfactory performance evaluation on file, or have no positive disciplinary actions on file during the previous twelve (12) month period.
- 3) The budget head will review the application and forward his/her recommendation to the Shared Leave Committee.
- 4) The Shared Leave Committee will determine eligibility of the employee based on:
  - (a) The definitions listed above.
  - (b) Whether all paid leave available to the employee has been used or is likely to be used. Absence due to personal illness beyond five consecutive working days will be deducted from the extended sick leave account if accrued time is available. Once the extended sick leave account is zero, the employee must also use all available paid leave hours before being eligible to participate in the Shared Leave Program.
  - (c) Whether the employee has abided by University policies regarding the use of paid leave.
- 5) If the employee meets the above criteria, the Shared Leave Committee will determine the amount of donated leave an employee may receive and may only authorize an employee to use up to a maximum of four hundred and eighty (480) hours in a twelve (12) month period. An employee cannot exceed two hundred sixty (260) days or two thousand eighty (2,080) hours of donated leave during total University employment.
- 6) The receiving employee shall be paid his/her regular rate of pay, up to a maximum of two-thousand five hundred (\$2,500) dollars per month of approved shared leave. Each hour of approved shared leave will be provided to the recipient on an hour for hour basis. The leave received will be designated as shared leave and will be maintained separately from all other leave balances.

**E. Eligibility and Participation Requirements for Donor**

- 1) The receiving employee must be eligible under the above criteria.
- 2) The donating employee will complete a Shared Leave Donation Form which must be sent to the Shared Leave Committee.
- 3) The donating employee may donate any amount of paid leave provided the donation does not cause the paid leave balance of the employee to fall below 50% of his/her annual accrual.

- 4) Donations must be made in full-hour increments.

(Regents, 1-1-01, 6-22-11)

## L.2 FAMILY AND MEDICAL LEAVE ACT (FMLA)

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The University provides to eligible employees a leave of absence in compliance with the provisions of the Family and Medical Leave Act (FMLA) 29 C.F.R. § 8.2.5. Provisions of existing University policies and the federal Family and Medical Leave Act of 1993 are designed to enable employees to balance their work responsibilities with the demands of caring for family members or in the event of serious personal illness or injury. The required posting is located on the Human Resources website ([www.hr.ou.edu](http://www.hr.ou.edu)) along with details concerning the process for FMLA. The following material provides general policy information concerning FMLA. The University's procedural elements of FMLA are the responsibility of Human Resources. When unique situations arise or when further clarification or assistance is necessary, Human Resources may be contacted. Because case law that further clarifies FMLA is consistently evolving, the University will endeavor to keep its employees informed of relevant changes or clarifications to FMLA.

### (A) Eligibility Requirements

Employees are eligible if they have worked for the University for at least 12 months (the 12 months need not be consecutive), and worked for 1,250 hours over the 12 months immediately preceding the commencement of the leave.

### (B) Basic Leave Entitlement

FMLA requires covered employees to provide up to 12 weeks of unpaid, job-protected leave to eligible employees for the following reasons:

- 1) Incapacity due to pregnancy, prenatal medical care, or childbirth;
- 2) Care for the employee's child after birth, or placement for adoption or foster care;
- 3) Care for the employee's spouse, son or daughter, or parent who has a serious health condition;
- 4) A qualifying exigency which occurs while the employee's spouse, child, or parent is on covered active duty or has been notified of an impending call or order to covered active duty in the Armed Forces. The term covered active duty means duty during deployment to a foreign country;
- 5) A serious health condition that prevents the employee from performing any or all of the essential functions of the employee's job.

The Family and Medical Leave Act also provides an eligible employee who is the spouse, son, daughter, parent, or next of kin the ability to take up to 26 work weeks during a 12-month period to care for a covered service member with a serious illness or injury. The leave shall only be available during a single 12-month period.

FMLA provides that spouses who are employed by the same entity and are both FMLA eligible may be entitled to a combined total of 12 weeks of leave during any 12-month period if the leave is taken for birth, placement, or parental care. The University has chosen a more generous allowance and makes available 12 weeks to each spouse for these events. The total FMLA-protected leave taken for the birth of a child or adoption of a child can be up to 12 weeks, but the leave must be taken consecutively during a single time period. Time off cannot be taken intermittently.

### (C) Definitions

- **Parent** – the biological parent or the person who raised the employee, e.g., adoptive parents or guardians. This term does not mean parents-in-law.
- **Child** – a biological child or someone the employee is responsible for raising who is under the age of 18 or is permanently incapable of self-care.
- **Covered Service Member** – a current member of the Armed Forces who is on active duty, has been called to active duty, or has been notified of an impending call or order to active duty in support of a contingency operation. Covered military members include members of the National Guard or Reserves (Army National Guard of the United States, Army Reserve, Navy Reserve, Marine Corps Reserve, Air National Guard of the United States, Air Force Reserve, and Coast Guard Reserve).

- **Qualifying Exigency** – for “son or daughter on active duty or call to active duty status” refers to the employee’s biological, adopted, foster child, stepchild, legal ward, or a child for whom the employee stood in loco parentis who is on active duty or call to active duty status, and who is of any age.
- **Military Caregiver** – the spouse, son, daughter, parent, or next of kin of a covered service member.
- **Serious Health Condition** – an illness, injury, impairment, or physical or mental condition that involves either an overnight stay in a medical care facility or continuing treatment by a healthcare provider for a condition that either prevents the employee from performing the functions of the employee’s job, or prevents the qualified family member from participating in school or other daily activities. Subject to certain conditions, the continuing treatment requirement may be met by a period of incapacity of more than three consecutive calendar days combined with at least two visits to a healthcare provider, or by one visit and a regimen of continuing treatment, or by incapacity due to pregnancy, or by incapacity due to a chronic condition. Other conditions may meet the definition of continuing treatment.
- **Qualifying Exigency** – qualifying exigencies encompass a wide range of specific activities in a number of broad categories and include, but are not limited to issues arising from a covered military member’s short notice deployment; military events and related activities, such as official ceremonies, programs, or events sponsored by the military or family support or assistance programs and informational briefings sponsored or promoted by the military, military service organizations, or the American Red Cross; certain childcare and related activities; making or updating financial and legal arrangements; and attending to certain post-deployment activities. An employee whose family member is on active duty or called to active duty status in support of a contingency operation as a member of the Regular Armed Forces is not eligible to take leave because of a qualifying exigency.

#### **(D) Benefits and Protections**

University employee-provided insurance coverage and costs will continue for employees for the 12 or 26 weeks (as applicable) of FMLA protected leave. The employee will continue to be responsible for payment of premiums for any additional coverage or elected dependent coverage. It is the employee’s responsibility to contact Employee Services as soon as possible to determine premium payment requirements. Employees on FMLA-protected leave will be eligible to change insurance coverage during the Annual Enrollment Period. If an employee on FMLA-protected leave does not return to work, he or she will also be eligible for continued insurance coverage as provided by the Federal Consolidated Omnibus Budget Reconciliation Act (COBRA) health benefit provision. Upon return from FMLA leave, employees must return to and be restored to their original or equivalent positions with equivalent pay, benefits, and other employment terms. Use of FMLA leave cannot result in the loss of any employment benefit that accrued prior to the start of an employee’s leave.

#### **(E) Use of Leave**

An employee is not required to use this leave entitlement consecutively except for excluded events. Leave can be taken intermittently or on a reduced-leave schedule when medically necessary. This leave should be scheduled and approved by the supervisor in conjunction with departmental leave policies. Changes in FTE or salary reduction should not be made during job-protected leave. Employees must make reasonable efforts to schedule leave for planned medical treatment so as not to disrupt the University’s operations. Leave due to qualifying exigencies may also be taken on an intermittent basis.

#### **(F) Use of Paid Leave During FMLA Absence**

FMLA runs concurrently with all other types of leaves. Employees are required to use accrued paid leave and extended sick leave (for their own serious health conditions) while taking FMLA leave prior to taking any unpaid leave of absence. See the *Staff Handbook*, Section 3.10 and 3.11, regarding paid leave and other types of leaves of absence. Absences related to an on-the-job injury for which Workers’ Compensation is received will also be designated as FMLA if the employee is eligible and the event is qualifying.



**(G) Employee Responsibilities**

Employees must provide 30 days advance notice of the need to take FMLA leave when the need is foreseeable. When 30 days' notice is not possible, the employee must provide notice as soon as practicable and generally must comply with normal call-in and other time and attendance procedures. More information can be found in Employee Rights and Responsibilities on the Human Resources website ([www.hr.ou.edu](http://www.hr.ou.edu)). University policy regarding outside employment will continue to apply to an employee while on FMLA. The University also requires both periodic reports of the employee's status during the course of the leave and his or her projected date of return to work.

**(H) Required Documentation**

Employees must provide sufficient information for the University to determine if the leave may qualify for FMLA protection, along with the anticipated timing and duration of the leave. Sufficient information may include whether the employee is able or unable to perform job functions or to what degree he or she is able to perform them. In the case of care of a family member, the information may include whether the family member is unable to perform daily activities, whether he or she needs hospitalization or continuing treatment by a healthcare provider, or circumstances supporting the need for military family leave. Dates must be provided by the healthcare provider or the active duty orders. Employees also must inform the University if the reason for the requested leave is the same reason for which FMLA leave was previously taken or certified. A release must be submitted prior to engaging in either full-time or part-time work. A full release is required at the conclusion of each FMLA event.

The active duty orders of a covered military member will generally specify whether a service member is serving in support of a contingency operation by citing the relevant section of Title 10 of the United States Code and/or by referring to the specific name of the contingency operation. This documentation is required by Human Resources. Each new FMLA event requires a new medical certification in support of the request for FMLA. Updates or periodic recertification may be submitted on a healthcare provider's letterhead notices/documents and do not have to be on a medical certification.

**(I) Failure to Return from FMLA**

If an employee does not return to work as agreed, unless other arrangements were made, he or she shall be considered to have resigned from the University effective the last day of the approved leave.

**(J) University Responsibilities**

The University designates the FMLA calendar year as a 12-month period measured forward from the date of an employee's first FMLA event. The University will inform employees whether or not they are eligible for FMLA qualifying leave. If the employee is eligible, the notice will specify any additional information required as well as the employee's rights and responsibilities. If the employee is not eligible, the notice will provide the reason(s) for ineligibility. The University will inform employees if leave will be designated as FMLA qualifying leave and the amount of leave counted against the employee's leave entitlement. If the University determines that the FMLA qualifying leave is not appropriate, the University will notify the employee. Additionally, the University will place the employee in the same or equivalent position upon his or her return from FMLA-qualifying leave and will not include such absences when taking disciplinary action because of absenteeism.

**(K) Unlawful Acts by Employers**

FMLA makes it unlawful for any employer to: (1) interfere with, restrain, or deny the exercise of any right provided under FMLA; (2) discharge or discriminate against any person for opposing any practice made unlawful by FMLA or for involvement in any proceeding under or relating to FMLA.

(Regents, 7-27-93, 6-22-11)

## **22. APPENDIX M**

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### **PROFESSIONAL PRACTICE PLANS**

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## **M.1 THE UNIVERSITY OF OKLAHOMA COLLEGE OF ALLIED HEALTH PROFESSIONAL PRACTICE PLAN**

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### **I. PREAMBLE**

Participation in the Professional Practice Plan is a condition of employment as stated in the Faculty Handbook. Faculty are obligated to comply with the Professional Practice Plan of their College. The faculty of the College of Allied Health is composed of professionals in a wide variety of specialties in the health-related fields. Diverse in their nature and scope, these specialties form an integral part of the health care delivery system and are essential to quality patient care and services. Professional services provided by the faculty of the College include, but are not limited to, those relating to health care distribution and delivery, rehabilitation of the sick and the handicapped, maintenance of health and quality of life. Faculty provision of professional services may include direct service delivery, patient care, consultation, and/or education of patients and professionals.

The Professional Practice Plan is a formal grouping of full-time faculty who render services to patients and/or specialized consultative services for a fee or who provide other services directly related to their professional credentials for fee. Patient care services shall be provided only by those faculty who are appropriately credentialed (license, certificate, or registration, where such exist) by the State of Oklahoma and/or by the appropriate national agency.

The Professional Practice Plan shall be governed by the following principles and policies:

It is the prerogative of the faculty member to decide whether or not to engage in professional activity other than as specifically assigned. If the decision is to engage in professional activity, the rules governing the Professional Practice Plan must be strictly observed. Engaging in professional activity other than in accordance with this document violates Regent's policy and is grounds for severe sanctions.

Fees received for professional activities are generated income governed by this Policy.

When members of the faculty engage in professional practice activities, these faculty members by their personal efforts and presence enhance the stature and reputation of the College of Allied Health and the Health Sciences Center.

Opportunities for professional practice will be delineated initially in the offer of employment letter for each new faculty person. As per the *Faculty Handbook*, annual work loads are subsequently negotiated between each faculty member and his or her Department Chair. The participation of faculty in professional practice contributes to the educational mission of the College of Allied Health, including the research component of education.

There must be upper limits to the time spent and income delivered from professional practice so that the primary goals of teaching, service, and scholarly activity are achieved. These limits are negotiated with the Department Chair with the approval of the Dean and within the guidelines articulated herein and in the Department Professional Practice Plan policies. Computation of fringe benefit withholding, FICA, and other payroll deductions shall be in accordance with University policies.

Fundamental differences exist among professional practice circumstances within the College and the Departments that include but are not limited to: (1) the unit of service for which a professional fee is rendered; (2) the amount of the customary fee per unit of service; (3) the status of the patient (ambulatory or hospitalized); and (4) the goal of the services rendered.

Adherence to this policy is a condition of employment for full-time faculty of the College of Allied Health of The University of Oklahoma Health Sciences Center. Under this policy, the lines of authority are from faculty to Chair to Dean to Provost to President to the Regents.

## II. OBJECTIVES

- 1) To provide a mechanism for faculty to supplement income and to enhance recruitment and retention of highly qualified faculty.
- 2) To provide incentives to the faculty to engage in the practice of their professions, to maintain and improve professional skills, to participate more actively in patient care and/or consultative services, and to enhance faculty scholarship.
- 3) To define rules governing the amount of time that shall be devoted to patient care and/or consultation for extra remuneration.
- 4) To provide a uniform procedure by which to account for the total income received by each member of the full-time faculty of the College of Allied Health in remuneration for all academic and other professional services, irrespective of the source of payment or nature of the professional service.
- 5) To provide a uniform procedure by which to account for all earnings generated by the faculty under the Professional Practice Plan.

## III. DEFINITION OF TERMS

### 1) Membership

- (a) Members of the faculty of The University of Oklahoma College of Allied Health who hold a full-time appointment (9, 10, or 12 month appointments) in the College of Allied Health will have the obligation (participation being a condition of employment) to participate and vote in the Professional Practice Plan. For those full-time faculty who hold less than a 12-month appointment, professional activities that are performed outside of the University contracted employment period and that do not involve University resources will not be considered under the Professional Practice Plan.
- (b) Members of the faculty in phased retirement must participate in the Professional Practice Plan to the extent that income is generated during the agreed-upon work week or using University resources.

### 2) Department Professional Practice Plan

Each Department will prepare a comprehensive Professional Practice Plan defining policies and procedures for professional practice activities within the Department. The Department Professional Practice Plan shall be consistent with the Professional Practice Plan policies of the Board of Regents and the College. The Department Professional Practice Plan will be developed and approved by those faculty engaged in Professional Practice Plan activities and the Dean. Administration of the Department Professional Practice Plan will be the responsibility of the Department Chair, with the advice of the Department Professional Practice Plan Advisory Committee, elected by and from Department members of the Professional Practice Plan. The Chair shall serve as a member of this committee with vote.

### 3) Guaranteed Base

This is the specific salary that is guaranteed annually by The University of Oklahoma through appointment to the faculty of the College of Allied Health by the Board of Regents of The University of Oklahoma to compensate the individual faculty member for that portion of his or her time devoted to academic programs and to ensure that the academic programs take precedence over other responsibilities. This guaranteed base salary may change from the date of employment through annual increases for merit pay and/or cost of living.

4) **Full-Time Equivalent Salary**

The FTE salary figure is a figure negotiated between the faculty member and the Department Chair and approved by the Dean. The FTE salary figure is the total potential salary that may be earned annually by a faculty member. It is the total of the guaranteed base and the Maximum Professional Earnings Potential.

5) **Maximum Professional Earnings Potential**

This is the difference between the guaranteed base salary and the full-time equivalent salary (the difference between III, 4. and III, 3. above).

- 6) The full-time equivalent salary will be developed and reviewed annually for each faculty member by the Department Chair. These recommendations from the Chair are transmitted to the Dean of the College of Allied Health and recommended for approval to the President and the Board of Regents of The University of Oklahoma. The only guaranteed salary is that specified in the Guaranteed Base. The total full-time equivalent salary expresses only the potential maximum salary a faculty person may earn in a given year and is dependent on earnings from Professional Practice Plan activities of that individual and the policies and procedures specified in the College and Department Professional Practice Plans.
- 7) The yearly income for each member from the Professional Practice Plan shall not exceed his/her annual base salary.
- 8) Each faculty member who participates in the Professional Practice Plan shall be informed in writing, at the beginning of each fiscal year, of his guaranteed annual base and full-time equivalent salary.

#### IV. **OPERATIONAL PROCEDURES**

- 1) Professional practice of faculty should be conducted so as not to interfere with teaching, service, scholarly activities, administration, or other Department activities as determined by the Department Chair.
- 2) The amount of time and the schedule of time devoted to generation of Professional Practice Plan income must defer to the teaching, service, and scholarly activity needs of the Department.
- 3) Professional income earned must be deposited to the Professional Practice Plan account. Income earned may or may not be subject to the Professional Practice Plan overhead and/or "tax" rules depending on the policies and procedures expressed herein and in Department Professional Practice Plans.
- 4) To assure the successful performance of the College's assigned tasks, members of the Professional Practice Plan shall not engage in professional activity which will result in their being unduly diverted from assigned duties. No more than an average of 20% of the work week shall be spent in Professional Practice Plan activities. Should a Department Chair determine it is in the interest of the Department that an exception be made and that other members of the Department can and will assume additional responsibilities, exceptions may be allowed to the 20% rule with approval of the Dean. In no event will an exception be made, nor any individual be absent from the campus more than a week at a time for Professional Practice Plan activities without the prior approval of the Dean. This approval will be given only in the most exceptional circumstances. Reports of time spent in the generation of income under this Professional Practice Plan shall be submitted each semester to the Department Chair and to the Dean of the College.
- 5) **Sources of Generated Income**
- (a) Patient care fees wherever earned by the faculty member
  - (b) Professional consultation

- (c) Honoraria
- (d) Other professional income

6) **Income Exclusions**

- (a) Prizes and awards
- (b) Faculty members interests in:
  - (1) Royalties
  - (2) Copyrights
  - (3) Patent Rights
- (c) Non-professional income
- (d) Compensation received as a result of military leave
- (e) Income earned during leave of absence without pay, and/or sabbatical leave as set out in the *Faculty Handbook*.

7) **Disposition of Gross Generated Income**

Generated income described above will be deposited daily by the individual Departments within the College of Allied Health to the designated appropriate accounts through the Office of the Bursar, The University of Oklahoma Health Sciences Center. The distribution of funds is determined by the College and Department Professional Practice Plans and will be administered by the–Department Chair. Distribution of these funds will be in the order listed below.

- (a) To the Department, for expenses and administrative costs as defined in the approved Department Professional Practice Plan.
- (b) To the Dean’s Office, 5% of all income generated using University facilities and/or other University resources, including time.
- (c) To that individual faculty member within each Department, to the extent that the individual faculty member has contributed to the generation of income, until any difference between guaranteed base and the full-time equivalent salary is equaled; and thereafter.
- (d) Any remaining balance will be retained in the Department sub-account to pay for the various expenditures related to Department functions as authorized by The University of Oklahoma Health Sciences Center Professional Practice Plan Expenditure Policy (8/26/97) and/or future amendments thereto.
- (e) The College of Allied Health will not pay retirement benefits on generated income.
- (f) Acceptable Categories of Expenditures by Departments include:
  - (1) Visiting consultants and lecturers at the Health Sciences Center
  - (2) Expenses directly related to faculty and staff recruitment
  - (3) Students – scholarships, stipends, and tuitions
  - (4) Personnel training courses and attendance at professional and educational meetings
  - (5) Maintenance of laboratories and equipment
  - (6) Office and administrative expenses
  - (7) Other expenses incurred in support of Department teaching, research, and professional service, including salaries
  - (8) Professional dues
  - (9) Other Department business expenses directly related to generation of professional fees. Since funds for which the University acts as custodian are commingled with public funds, all expenditures from such funds must be treated as public expenditures. Public policy requires

that public monies be expended for public and not private purposes. University administration, in consultation with the Advisory Council, will develop and publish guidelines consistent with public policy.

**8) Billing, Collecting, Accounting, Disbursement, and Auditing**

- (a) All procedures for billing, collecting, accounting, disbursement, and auditing shall be in accordance with controlling State Law in this regard and with current Board of Regents and University/College policies and procedures. Fees relating to professional consultation, honoraria, and the like which are received directly by the individual faculty member shall be deposited by the primary Department of the faculty member. Each faculty member holding an appointment in more than one Department of the College shall have, for purposes of this Professional Practice Plan, a primary Department responsible for depositing and monitoring generated income. Faculty members holding joint appointments in the College of Allied Health and in some other College shall participate in the Professional Practice Plan of the College which has primary responsibility for their promotion and tenure.
- (b) All accounts will be handled in accordance with standard accounting principles, the statutes of the State of Oklahoma, and the policies of the Regents of The University of Oklahoma, as they apply to such accounts.

**9) Governance of the Professional Practice Plan**

(a) The Advisory Council

(1) Duties

The Advisory Council shall represent the full membership of the Professional Practice Plan and shall be responsible for advising the Dean of the College on policy matters reflecting the operations covered by this policy. The members of the Professional Practice Plan will be governed by this policy as amended from time to time by the Board of Regents.

(2) Members of the Advisory Council shall consist of:

- a) The Chair of each Departments of the College of Allied Health.
- b) One additional faculty member-at-large elected by and from the faculty members of each Department of the College. Terms of members-at-large shall be for two (2) years.

(3) Meetings

The Advisory Council shall meet at least once annually at a time designated by the Chair of the Advisory Council or upon the request of four (4) members of the Advisory Council. Notice of the meeting and an agenda will be distributed to each member at least one week prior to the meeting.

(4) Officers

The officers of the Advisory Council shall be a Chair, a Vice Chair, and a Secretary who shall be elected annually by and from the members of the Advisory Council and serves as the Executive Committee. The Chair shall preside.

(5) Ad Hoc Committees

Ad Hoc committees may be appointed as necessary by the Chair.

## (6) Quorum and Voting

A quorum shall consist of a simple majority of voting members of the Advisory Council. Any official action of the Advisory Council requires a majority vote of its members present. Each member shall have one vote.

## (7) Rules of Order for Advisory Council and its Committees

## (a) Agenda

All items of business not requiring formal action by the Advisory Council, unless an objection is registered, are accepted "for information only". All items of business requiring formal action by the Advisory Council must be in the form of a resolution.

## (b) Procedural Motions

The latest edition of Robert's Rules of Order Newly Revised will be accepted as final authority for parliamentary procedures.

10) **Department Governance and Restrictions**

Nothing contained herein shall be construed to prevent members within any Department from suggesting additional Department restrictions as they may wish, but such restrictions shall not conflict with the College Professional Practice Plan.

11) **Accountability**

Gross and willful withholding of or misrepresentation in reports of income generated and/or time spent under this Professional Practice Plan shall constitute grounds for disciplinary action under the relevant provisions of the *Faculty Handbook*.

12) **Policy Amendments**

The policy for operation and governance of the Professional Practice Plan may be amended from time to time by the Regents of The University of Oklahoma. Proposed amendments may also be submitted to the Advisory Council for consideration consistent with the University's Professional Practice Plan policies and procedures. Amendments shall be considered by the Advisory Council that are:

- (a) Proposed to the Advisory Council by the Executive Committee, or
- (b) Proposed by fifteen (15) or more faculty members of the Professional Practice Plan.

13) **Ratification**

- (a) Ratification of the proposed amendment requires a 2/3rds affirmative vote\_of the full voting faculty membership of the Professional Practice Plan.
- (b) The amended Professional Practice Plan, if ratified, will then be forwarded through the Dean of the College of Allied Health and Provost, Health Sciences Center, to the President for the approval and for submission to the Board of Regents of The University of Oklahoma.

(Regents, 05-10-91, 09-11-03)



## **M.2 THE UNIVERSITY OF OKLAHOMA COLLEGE OF DENTISTRY FACULTY PRACTICE BYLAWS**

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### **I. The Dental Faculty Practice Group**

The dental faculty practice group of The University of Oklahoma College of Dentistry shall be known as **OU Dentistry**, hereafter referred to as the **“Group”**.

### **II. Scope and Objectives**

- 1) Develop and maintain an integrated, multidisciplinary, faculty dental group practice.
- 2) Promote, market, and provide the dental health care services of the Group to OUHSC employees, the public, and other approved entities.
- 3) Provide exemplary care, which reflects the mission of The College of Dentistry.
- 4) Enhance recruitment and retention of highly qualified dental faculty.
- 5) Enhance communication, cooperation, and collaboration between the College of Dentistry and the dental community.
- 6) Facilitate the development and training of faculty members.
- 7) Stimulate, within the local dental health community, a scholarly atmosphere conducive to health sciences education, state-of-the-art health care, and health sciences research.

### **III. Group Composition**

- 1) All full-time faculty (1.0 FTE) of the College of Dentistry who provide direct patient care shall be Participants in the Group and shall practice exclusively through the Group, in accordance with the requirements specified by these Bylaws and the Operational Policies. Participating full-time faculty shall be voting members of the Group.
- 2) Part-time faculty who have less than a 1.0 FTE and volunteer faculty who provide direct patient care may be Participants in the Group, upon the recommendation of their respective department chair and with the approval of the Advisory Council and the Dean. Once approved, they shall practice exclusively through the Group, in accordance with the requirements specified by these Bylaws and the Operational Policies. Such Participants shall be voting members of the Group.
- 3) Clinicians hired solely to provide care, as Participants in the Group, shall practice exclusively through the Group, in accordance with the requirements specified by these Bylaws and the Operational Policies. Such Participants shall be non-voting members of the Group.
- 4) Exceptions to Group Composition will be considered on a case-by-case basis and must be approved by the Advisory Council and the Dean.

### **IV. Participant Obligations**

Individual Participants shall abide by accepted clinical practice standards, as well as, federal and state regulations governing professional practices and the rights of patients. All Participants shall function as a single entity while fulfilling contractual obligations and providing services as required and agreed upon by the Group. (See VIII – Operational Policies and Procedures)

**V. Group Governance**

- 1) The Dean of the College of Dentistry shall have overall responsibility and authority for the management, planning, and operations of the Group. The Dean may delegate any responsibilities for managing, planning, or operating the practice.
- 2) The governance of the Group applies to the entire range of dental disciplines and specialties within the College. The unique characteristics of these disciplines and specialties should be recognized in the governance and operation of the Group.
- 3) The Group and its Participants shall comply with all University, Health Sciences Center, and College of Dentistry policies and procedures, including those dealing with management and financial accountability.
- 4) The governance structure of OU Dentistry shall be as delineated in Section VI, The Advisory Council.

**VI. The OU Dentistry Advisory Council**

- 1) The OU Dentistry Advisory Council shall represent all Participants of the Group. The Council is advisory to the Dean.
- 2) Functions and Responsibilities:
  - (a) Develop operational policies and procedures for OU Dentistry
  - (b) Develop a compensation plan for distribution of clinical revenues to Participants
  - (c) Review and recommend approval of the annual OU Dentistry budget
  - (d) Review and recommend for approval any capital expenditures that exceed limits established by the Associate Dean for Finance
  - (e) Oversee the operations of OU Dentistry and recommend corrective actions for identified deficiencies
  - (f) Ensure the Group operates as an integrated multi-disciplinary dental group practice
  - (g) Request and review operational, financial, and other management reports necessary to facilitate the efficient administration and operation of the Group and to satisfy audit requirements
  - (h) Establish guidelines for executing group clinical services contracts and service agreements
  - (i) Create such standing and ad hoc Councils as are required to conduct the business of OU Dentistry in an efficient and effective manner
  - (j) Establish programs for quality improvement, quality assurance, compliance, marketing, risk management, and other areas, as deemed necessary
  - k) Conduct OU Dentistry strategic planning sessions at least every three years
- 3) The Advisory Council shall be composed of:

**Voting Members:**

- (a) Three at-large general practice Participants
- (b) Three at-large specialty practice Participants
- (c) One at-large dental hygiene Participant

**Non-Voting Members:**

- (d) Chief Administrator of OU Dentistry
- (e) Associate Dean for Finance, College of Dentistry

Not all of the at-large specialty practice Participants can be from the same Division/Department.

Each elected member shall serve a three-year term and can be elected for a subsequent term after a period of one year. The original members of the Advisory Council shall be elected for one-, two-, and three-year terms so the terms of the Committee members shall be staggered. Original Council members elected to a one- or two-year term may be re-elected for one contiguous three-year term.

- 4) **Election of Advisory Council Members.** At-large members of the Advisory Council will be elected by a vote of the Group Participants during the annual meeting. The Advisory Council shall solicit nominations prior to the annual meeting. (See VII – Annual Meeting of Participants)

**Meetings.** The Advisory Council shall meet at least four times annually. Any Participants of OU Dentistry may attend any meeting of the Advisory Council in a non-voting capacity, excluding sessions involving personnel or other closed sessions involving sensitive matters. Minutes of all open session Advisory Council meetings will be distributed in a timely manner to all participants.

- 5) **Officers.** The officers of the Advisory Council shall be as follows: The Dean of the College of Dentistry shall be the Chair of OU Dentistry. The members of the Advisory Council shall elect the Vice-Chair. The Chief Administrator of OU Dentistry or designate shall serve as recording secretary.
- 6) **Quorum, Voting, and Procedural Authority.** A quorum shall consist of a simple majority of the Advisory Council members and must be present for the Council to take official action. Robert's Rules of Order (latest edition) shall be the authority for parliamentary procedures. Non-substantive deviations from the Rules shall not void any action taken by the Council.

**VII. Annual Meeting of Participants**

A meeting of all Participants of OU Dentistry shall be held annually in September. A report of the activities and the current state of the Group shall be given by the OU Dentistry Executive Director or designate to the Participants. New Advisory Council members will be elected during the annual meeting (see V.4 above).

The Dean or the Advisory Council may call special meetings of the membership as needed. All Participants must be notified at least seven days prior to the annual meeting or any special meetings of the membership. Those participating members in attendance at annual or specially called membership meetings will be considered a quorum for taking official action. (See VI.6 above) Minutes of all annual meetings will be distributed in a timely manner to all participants.

**VIII. Operational Policies and Procedures**

OU Dentistry shall establish such written Operational Policies and Procedures as are necessary to provide accountability and appropriate management of the Group and the Group's fiscal affairs. These policies and procedures are subject to review and recommendation for approval by the Advisory Council to the Dean as appropriate. These Operational policies and procedures must adhere to the following principles:

- 1) All direct patient clinical activities of Participants will be managed by the Group and shall follow Group policies and procedures regardless of size or location.
- 2) Whenever possible and appropriate, patient referrals should be made within the Group.
- 3) A faculty member's practice time shall be determined by their respective employment contract.

- 4) All clinical faculty members shall practice unless granted an exception by the Department Chair and/or Dean.
- 5) If full-time licensed faculty members (FTE 1.0) are granted an exception from practice, then they will dedicate an equivalent amount of time to teaching, research, and/or scholarly activity.
- 6) No policy shall violate or supercede University requirements, policies, or procedures.

#### **IX. Participant Compensation**

OU Dentistry shall establish a Compensation Plan to govern the distribution of clinical revenues to Participants. This Plan will be established, approved, and reviewed annually by the Advisory Council and the Dean. This Plan must adhere to the following principles:

- 1) The Group must be financially self-sustaining.
- 2) The Group must have a model for continued financial growth.
- 3) All revenues generated by Participants, including, but not limited to, revenue generated by patient care services, patient consultations, and supervision of professional services, will be deposited into Group accounts and be governed by the Compensation Plan.
- 4) All Group expenses and overhead will be paid prior to revenue distribution.
- 5) Each Participant must cover his/her respective practice overhead as governed under the terms of the Compensation Plan.
- 6) Funds shall be distributed in a fiscally responsible manner.

#### **X. Amendment of Faculty Practice Bylaws**

Ultimate authority for amendment of these Bylaws rests with The University of Oklahoma Board of Regents.

- 1) Amendments to the Bylaws may be proposed or initiated for the consideration of the Regents by:
  - (a) The Advisory Council.
  - (b) Petition from 20% of the current Group Participants.
  - (c) The Dean of the College of Dentistry
- 2) Proposed amendments will be presented to the full membership and require ratification by two-thirds (2/3) of the members present at an annual or special meeting.
- 3) Ratified amendments will be forwarded through the Dean of the University of Oklahoma College of Dentistry, to the Senior Vice President and Provost of the Health Sciences Center, and to the President for approval for submission to the Board of Regents of the University of Oklahoma.

**ADDENDUM:** The Group will continue to use the operational and compensation components of the 1996 bylaws (IV (1)-(5)) until the Advisory Council establishes and approves new Operational Procedures and Compensation documents.

Approved by Faculty Practice Participants 1/31/08

(Regents, 9-2-76; 6-15-78; 12-18-80; 10-31-96; 3-27-08)

### **M.3 THE UNIVERSITY OF OKLAHOMA COLLEGE OF MEDICINE PROFESSIONAL PRACTICE PLAN**

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#### **I. PREAMBLE**

The College of Medicine faculty are professionals whose education, training, knowledge, skills, and expertise allow them to engage in a wide range of professional practice activities, including clinical practice, clinical consultation, scientific consultation, and other activities of a professional nature.

When members of the College of Medicine faculty deliver care to patients, provide consultation for patient care, or provide scientific consultation, these faculty members by their efforts and presence enhance the stature and reputation of the College of Medicine and the Health Sciences Center. Active involvement by clinical department faculty in health care delivery practices is essential to the maintenance of their professional skills. Likewise, it is appropriate for basic science faculty to provide a reasonable degree of scientific consultation and other services to outside entities for which they may be compensated. Both of these types of activity contribute to the educational, research, and community service missions of the College of Medicine and the University.

The purposes of the faculty professional practice plan are (1) to provide economic support necessary to advance the College's educational, patient care, and research missions through a College of Medicine Enrichment Fund, also commonly referred to as the "dean's tax", (2) to ensure sufficient clinical encounters for the clinical education mission, and (3) to provide for accountability for faculty professional practice activities.

The College of Medicine Professional Practice Plan is subject to the policies and procedures established by the Board of Regents of the University of Oklahoma. The Professional Practice Plan applicable to all faculty of the College of Medicine.

#### **II. SCOPE OF COVERAGE**

1. All full-time and part-time faculty of the College of Medicine are encompassed by the professional practice plan, including:
  - (a) Physician faculty in clinical departments
  - (b) Non-physician faculty in clinical departments
  - (c) Basic science departments' faculty
2. The basic science faculty, including basic scientists whose appointment may be in a clinical department, are not included as members of the faculty clinical group practice described and named in the Bylaws of the faculty clinical group practice, unless special exception has been made by the respective department and approved by the practice group management committee and the Dean. The Department of Pathology shall be classified as a clinical department for the purpose of the professional practice plan.
3. The basic science faculty shall have no oversight or authority over the faculty clinical group practice.
4. The faculty clinical group practice shall have no oversight or authority over the finances or disposition of revenue from professional practice activities of the basic science faculty. Such oversight and authority rests with the respective basic science department and the College of Medicine.
5. Distribution of faculty professional practice collected revenues is subject to departmental policy within the limits of the policies of the College of Medicine and/or the University.
6. All sources of collected revenue generated by faculty, including but not limited to the following, are included within the scope of the professional practice plan and are subject to assessment for the College of Medicine Enrichment Fund (dean's tax) and to approved department assessment plans:

- (a) Patient care fees and other clinical practice revenue wherever earned by the faculty
  - (b) Professional consultation, including scientific consultation
  - (c) Honoraria
  - (d) Medical legal consultation
  - (e) Compensation for supervision of professional services
7. Revenue Exclusions. The following sources of revenue are not included within the scope of the professional practice plan:
- (a) Prizes and awards
  - (b) Faculty members' interest in royalties, copyrights, and patent rights
  - (c) Non-professional income
  - (d) Compensation received as a result of military duty
  - (e) Income earned while on a sabbatical or leave that has been approved by the Board of Regents
8. All faculty are subject to and must comply with the College of Medicine Faculty Compensation Plan, as approved by the Board of Regents of the University of Oklahoma.
9. The College of Medicine Enrichment Fund (dean's tax) is established by the Dean of the College of Medicine in consultation with department chairs.

### III. BOARD OF REGENTS' POLICY

Adherence to the Professional Practice Plan policy, as with all Board of Regents' policies, is a condition of employment for faculty of the College of Medicine. Under this policy, as in all University matters, the members of a Department are responsible to their Chair, as the Chair is responsible to his/her Dean, and the Dean, through the Senior Vice President and Provost of the Health Sciences Center, to the President, and subsequently to the Regents.

The process of exercising their discretion as professionals in matters of patient care or scientific consultation does not diminish the responsibility of faculty members to account to the University for all income earned, nor relieve them of the duty of compliance with policies and procedures of the Board of Regents governing site of practice.

#### Site of Practice Policy

The purpose of the site of practice policy is to concentrate patient care by the OU-employed full-time physician faculty of the College of Medicine clinical departments in those hospitals and other practice sites in which the major teaching and research programs of the College of Medicine are based. The patient care activities of the faculty may occur in any of the health care entities which comprise the Oklahoma Health Center in Oklahoma City, the Tulsa Medical Education Foundation hospitals in Tulsa, in designated hospitals and clinics in other College of Medicine program locations affiliated with either the Oklahoma City or Tulsa campuses, and in University owned or operated practice sites including those under the organizational structure of OU Medical System (Oklahoma City) which support the academic programs of the College and which can provide the technical environment necessary for modern, high-quality medical care and teaching.

Upon the recommendation of the OU Physician Council, and with approval of the Executive Dean, full-time faculty members based in Oklahoma City shall be permitted to act in a professional capacity in specific instances not covered above. Upon the recommendation of the Dean of the School of Community Medicine, full-time faculty members based in Tulsa, shall be permitted to act in a professional capacity in specific instances not covered above. As a condition of employment, faculty members who are employed by the University may not render patient care on a continuing basis except in those hospitals and teaching sites specifically authorized for such continuing patient care by the Regents.

(Regents, 9-13-94, 3-6-96, 3-5-97, 5-7-04, 9-14-17)

## **M.4 COLLEGE OF MEDICINE**

### **FACULTY CLINICAL GROUP PRACTICE • OU PHYSICIANS-OKLAHOMA CITY • BYLAWS**

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#### **ARTICLE 1**

##### **ORGANIZATION AND COMPENSATION**

###### **Section 1.1 Name**

The faculty clinical group practice of the University of Oklahoma College of Medicine (“OUCOM”), a division of the Board of Regents of the University of Oklahoma by and through the University of Oklahoma Health Sciences Center (“OUHSC”), shall be known as and hereafter referred to as OU Physicians (“OUP”). The name OU Physicians shall be used by both the OUCOM Oklahoma City and School of Community Medicine Tulsa group practice operational units; however, the remainder of this document refers only to the Oklahoma City OUP operational unit. Children’s healthcare specialists are an integral part of OUP and will be organized within OUP; however, they may use the name OU Children’s Physicians (“OUCP”) for marketing and business purposes provided that for all contracting purposes both OUP and OUCP shall appropriately indicate their legal status as part of the University (“OU”) (i.e., Board of Regents of the University of Oklahoma by and through OU Physicians).

###### **Section 1.2 Effective Date**

These bylaws shall go into effect July 1, 2017 (“Effective Date”) (see Article 4, Section 4.1).

###### **Section 1.3 Composition and Structure**

Organizationally, OUP is a component of the University of Oklahoma Board of Regents and accordingly operates under the Board’s authority and is subject to both Board of Regent’s policy and oversight<sup>1</sup>. OUP will initially consist of two Clinical Practice Divisions designated as the “Adult Clinical Practice Division” and the “Children’s Clinical Practice Division” (see Article 6, Section 6.1). Within each Clinical Practice Division, OUP-designated Clinical Units shall be established initially to correspond to each OUCOM clinical science department. Furthermore, OUP may organize Clinical Units as multidisciplinary service lines, which may include non-faculty physicians or faculty non-physicians, and Clinical Units may be affiliated with OUHSC Centers (see Article 6, Section 6.2). From a clinical practice perspective, clinical faculty will initially be primarily assigned to Clinical Units in either the Adult or Children’s Clinical Practice Division, recognizing that it may be necessary for some faculty to have a presence in both Clinical Practice Divisions.

###### **Section 1.4 Membership**

OUP shall be the exclusive faculty clinical group practice of OUCOM and includes all OU-employed full-time and part-time physician faculty of OUCOM clinical departments, OU-employed full-time non-faculty physicians, designated volunteer physician faculty, and designated non-faculty physician personnel who render clinical services directly to patients on behalf of OUHSC’s affiliated clinics or its major affiliated hospital partners, including OU Medical System (“OUMS”). OU-employed non-physician faculty may become members of OUP upon the recommendation of their respective department chair and the OUCOM Executive Dean and the approval of the Senior Vice President and Provost (hereafter “SVP/Provost”) of OUHSC. Members shall abide by accepted clinical practice standards and the regulations governing professional practices and the rights of patients. The individual practitioners of OUP will fulfill contractual obligations and provide services as required and agreed upon by OUP.

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<sup>1</sup> As a component of the University of Oklahoma, OUP and the OUP Council remain subject not only to these bylaws, but also to Board of Regents’ policies and other laws and regulations that impact state entities (e.g., state ethics regulations, employment policies, etc.). Accordingly, OUP and the OUP Council operate within the administrative framework of the University and its designated officers.

**ARTICLE 2****MISSION AND PURPOSE****Section 2.1 Mission**

The mission of OUP shall be to lead and advance the patient care mission of OUCOM and OUHSC and to support the missions of medical education; training; and basic, translational, and clinical research.

**Section 2.2 Purposes**

OUP's scope includes all aspects of clinical care provided by OUP members (see Section 1.4) across all care settings,<sup>2</sup> placing patients first and fostering interprofessional collaboration and practice. The purposes for which OUP is organized include, but are not limited to, the following:

- (a) Serve as a single integrated faculty clinical group practice that attracts and retains leading healthcare professionals and serves as a foundational component of a premier academic health center and integrated care delivery network.
- (b) Promote and market healthcare services to patients, payors, employers, and industry and other appropriate groups.
- (c) Develop new and refine existing clinical care delivery strategies to improve quality, access, and value for patients; promote population and community health; and effectively compete in a changing healthcare environment.
- (d) Conduct and coordinate medical care among networks of affiliated community healthcare providers.
- (e) Facilitate the education and training of healthcare professionals in a wide range of healthcare specialties and settings.
- (f) Advance research-based medicine by integrating and supporting basic, translational, and clinical research.
- (g) Stimulate within the local healthcare community a culture of continuing professional development.
- (h) Serve as an effective partner to OUMS and other affiliated hospitals/health systems.

**ARTICLE 3****GOVERNANCE****Section 3.1 OUP Council**

The OUP Council will provide direction and oversight of the management, operations, and financial viability of the faculty clinical group practice.<sup>3</sup> The OUP Council will strategically guide OUP and implement policies that promote the culture of a fully integrated clinical group practice and the delivery of high-quality, value-based patient care in support of the University's patient care, teaching, and research missions. The OUP Council shall be a competency-based body on behalf of the faculty clinical group practice as a whole, rather than a representative body (see Article 4), and will be composed of both adult and children's specialists. After a defined transitional period (see Article 4, Section 4.3), the OUP Council will be composed of 15 voting members (see Article 4.1, Section 4.2), 3 of whom shall serve as ex officio members and 12 of whom shall be appointed through a process recommended by the Nominating Committee and approved by the OUP Council.

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<sup>2</sup> In accordance with the policies set forth by the Board of Regents of the University of Oklahoma, the OUCOM Executive Dean shall approve all site-of-practice exceptions.

<sup>3</sup> As the governing body of the University of Oklahoma and its constituent components, the Board of Regents retains ultimate authority over the operations of OUP and the OUP Council, and both remain subject to oversight by applicable University officers. To the extent there is conflict between these bylaws and Board of Regents policy, Board of Regents policies shall control.



### Section 3.2 OUP Council Duties

The OUP Council shall emulate the function of a corporate board of directors for OUP, functioning under the auspices of the Board of Regents<sup>4</sup> by and through the SVP/Provost. In addition to guiding the division strategically and maintaining alignment with OUCOM, specific powers of the OUP Council include, but are not limited to:

- (a) Recommending the appointment of both the OUP President and the OUP Chief Executive Officer (“CEO”), such officers to emulate the traditional corporate function of the respective roles.
- (b) Creating OUP Clinical Units and recommending appointment of Clinical Unit physician leaders (“Clinical Unit Leaders”) and Clinical Practice Division physician leaders (“Clinical Practice Division Leaders”), subject to the processes described in Sections 6.1 and 6.2.
- (c) Directing necessary actions through the OUP executive leadership team, as described in Section 5.1, and Clinical Unit Leaders to ensure OUP consistently functions as a single, integrated multispecialty faculty clinical group practice.
- (d) Approving annual operating and capital budgets and any professional services agreements with OUMS and/or other designated affiliates.
- (e) Approving payor contracts and participating in clinical networks.
- (f) Approving other key business, fiscal, and operational policies and procedures for OUP (e.g., expansion of clinical practice policy, clinic access standards).
- (g) Identifying and approving corrective actions for deficiencies in clinical services.
- (h) Approving clinical compensation/incentive plans of the Clinical Units.
- (i) Approving expenditures that exceed limits determined periodically by the OUP Council.
- (j) Determining the desired competencies for the OUP Council.
- (k) Approving OUP Council voting members recommended by the Nominating Committee, as well as removing voting members.
- (l) Approving OUP strategic plans in accordance with OUCOM, OUHSC, and OUMS strategic plans/goals.
- (m) Ensuring OUP functions in a manner that upholds its obligations to patients, students and trainees, faculty members, and the University of Oklahoma.

### Section 3.3 Reserved Powers

Subject to the powers and policies of the OU Board of Regents, the OUP Council is authorized and is expected to carry out duties such as those listed in Section 3.2 above. However, through this governance structure certain actions of OUP will be subject to reserved powers held by OU<sup>4</sup> and exercised through the OUCOM Executive Dean, subject to the advice and consent of the SVP/Provost, including the following:

- (a) Appointment of members to and removal of members from the OUP Council as may be approved by the OUP Council, as noted in Section 3.2(k).
- (b) Selection/appointment and removal of the OUP President and OUP CEO as may be recommended by the OUP Council, as noted in Section 3.2(a).

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<sup>4</sup> The Board of Regents maintains certain required review and approval policies (including appointment and removal of personnel and approval of contracts) that limit the ability to act unilaterally without formal Board of Regents approval; the powers enumerated herein remain subject to those Board of Regents approval policies.

- (c) Appointment and removal of Clinical Practice Division Leaders and/or a Clinical Unit Leader.
- (d) Change of control, major restructuring, or major transactions.
- (e) Entering into major contracts with an impact of \$1 million or above on an annual operating basis.
- (f) Approval of major strategic priorities for OUP or a Clinical Practice Division or Clinical Unit within.
- (g) Approval of the master clinical compensation plan for OUP physicians.
- (h) Review and approval of audit and other information disclosures.
- (i) Approval of annual operating and capital budgets and any professional service agreements with OUMS and other designated affiliates.

#### **Section 3.4 Council Chair**

The OUP President will serve as the chairperson.

#### **Section 3.5 Vice Chair**

The Adult or Children's Clinical Practice Division Leader not filled by the OUP President (Section 6.1) will serve as the vice chairperson.

#### **Section 3.6 Secretary**

The OUP Council chairperson shall designate a secretary of the OUP Council. The secretary shall give notice of all meetings, keep the minutes of the OUP Council, and have charge of all of the records of the faculty clinical group practice.

#### **Section 3.7 Other Members**

Other members of the OUP Council shall have such powers and duties as are assigned by the OUP Council.

#### **Section 3.8 Appointment of Voting Council Members**

In the manner of a self-perpetuating board, appointment to the OUP Council shall be recommended by the Nominating Committee (see Section 3.10) and voted on by the existing members of the OUP Council, excluding outgoing members or members whose term is up for renewal. A simple majority vote will confirm a nominee's proposed appointment to the OUP Council subject to appointment by the OUCOM Executive Dean as provided in Section 3.3(a). Upon a rejection of a particular nominee, the Nominating Committee will continue to submit recommendations until a majority approval is secured as provided in Section 3.3(a).

#### **Section 3.9 Standing Committees**

The OUP Council may establish such committees as it deems appropriate, provided that the establishment of each committee is approved by a majority vote of OUP Council members. All reasonable efforts will be made to coordinate OUP committees closely with those of OUMS and integrate efforts to advance the entire clinical enterprise. All standing committees of OUP shall be chaired by a voting member of the OUP Council and will include suitable ex officio University officers (e.g., finance, legal etc.). Upon the assembly of the OUP Council, the standing committees will include, but not be limited to, the committees set forth in Sections 3.10–3.13 below. Upon formation of each standing committee, the OUP Council will approve a written charter that specifies the scope and responsibilities of that committee.

### **Section 3.10 Nominating Committee**

The OUP Council shall annually appoint a Nominating Committee of at least five members, the majority of whom will be non-OUP Council members. The OUP Council shall appoint the membership of the nominating committee to include at least one OU-employed physician from each of the following clinical areas:

- (a) Children's healthcare
- (b) Adult medical services
- (c) Adult surgical services
- (d) Women's healthcare
- (e) Hospital based services

The Nominating Committee shall establish a process to identify, evaluate, and propose nominees for OUP Council membership based on the desired competencies provided by the OUP Council and broad faculty and other OUP member input, a list of such processes and competencies to be developed, documented and attached hereto. In making nominations, the Nominating Committee will consider the skills of each proposed Council member to ensure that the Council at all times has membership possessing each desired competency. The Nominating Committee may perform such other functions as may be requested by the OUP Council from time to time.

### **Section 3.11 Finance and Budget Committee**

The OUP Council shall annually appoint a Finance and Budget Committee of at least five members. The committee will include the designated finance officer for OUP. Ex officio members who will collaborate closely with the OUP finance officer will include the OUCOM Senior Associate Dean for Finance and OUHSC VP for Finance and Administration. The Finance and Budget Committee may perform such other functions as may be requested by the OUP Council from time to time.

### **Section 3.12 Quality and Operations Committee**

The OUP Council shall annually appoint a Quality and Operations Committee (or an alternative name) of at least three members. The committee will include the OUP Chief Medical Officer and/or Chief Quality Officer. The Quality and Operations Committee may perform such other functions as may be requested by the OUP Council from time to time.

### **Section 3.13 Compliance and Ethics Committee**

The OUP Council shall annually appoint a Compliance and Ethics Committee of at least three members. The committee will additionally include resources such as the University HIPAA Privacy and Security Officials and the University Compliance Officer. The Compliance and Ethics Committee may perform such other functions as may be requested by the OUP Council from time to time.

## **ARTICLE 4**

### **COUNCIL MEMBERSHIP**

#### **Section 4.1 Composition**

The OUP Council will have a transitional membership for a transitional period of time and then convert to a smaller membership. For the period beginning July 1, 2017, and ending June 30, 2019 ("Transitional Period"), the Council will consist of 26 voting members (see Section 4.3). Effective July 1, 2019, the OUP Council will consist of 15 voting members (see Section 4.2), composed of both adult and children's specialists, 12 of whom will be appointed through a competency-based process facilitated and recommended by the Nominating Committee (Article 3, Section 3.10) to ensure the Council has an appropriate mix of perspectives and capabilities. In the event of further integration between OU Physicians and OUMS, the OUP Council may designate one or more health system administrators as ex officio non-voting Council members or as standing committee members.

## Section 4.2 Number and Appointment of Members

At the conclusion of the Transitional Period, the OUP Council shall consist of 15 voting members, including 3 ex officio voting members and 12 Council-appointed members. Of the 12 Council-appointed voting members, 10 shall be Clinical Unit or Clinical Practice Division Leaders and 2 shall be OU-employed practicing physicians who do not hold the position of Clinical Unit Leader, chair of an OUCOM academic department, or Clinical Practice Division Leader (“At-Large Physicians”). The OUP Council shall consist of:

- (a) SVP/Provost, OUHSC (ex officio; voting)
- (b) Executive Dean, OUCOM (ex officio; voting)
- (c) OUP Clinical Unit and Clinical Practice Division Leaders<sup>5</sup> (10; voting)
- (d) At-large OU-employed physicians (2; voting)
- (e) President, OUP (ex officio; voting)

## Section 4.3 Transition Period Council

The OUP Council shall be composed of not more than 26 voting members during the Transitional Period or at such earlier time as the OUP Council may decide through supermajority approval as defined by two-thirds affirmative vote of voting OUP Council members. Initial members of the OUP Council will include the 3 ex officio voting members designated in Section 4.2 (i.e. SVP/Provost, OUCOM Executive Dean, and OUP President), the 18 chairs of all OUCOM clinical departments, the Stephenson Cancer Center Director, and 4 OU-employed physicians appointed by the OUCOM Executive Dean in consultation with the SVP/Provost (one of which may be the Clinical Practice Division Leader not filled by the OUP President, as in Section 3.5). Upon the expiration of the Transitional Period, the OUP Council will appoint 12 members to the permanent OUP Council alongside the 3 ex officio voting members. The initial term of two years shall not count against any appointed OUP Council member’s term limit.

## Section 4.4 Membership Term

Other than those members serving ex officio, members shall serve a two-year term during the OUP Council’s Transitional Period. Upon the expiration of the Council’s Transitional Period, the chair of the OUP Council will divide the non–ex officio members of the permanent OUP Council into four classes of two members and one class of three members. Member terms shall be staggered such that one class will carry a term of five years, one class will carry a term of four years, one class will carry a term of three years, one class will carry a term of two years, and one class will carry a term of one year. Following the initial staggered appointments, the length of term for all non–ex officio members will be two years. Council members in the classes with initial terms of five and four years are not eligible for immediate reappointment. Other Council members may serve up to two consecutive terms at the approval of the OUP Council. Appointed members may return to the OUP Council after not serving on the Council for a full one-year period.

## Section 4.5 Vacancies

Any vacancies on the OUP Council will be filled by majority OUP Council vote following the recommendation of candidates by the Nominating Committee, subject to reserved powers (Article 3, Sections 3.1, 3.2, 3.3, 3.8, and 3.10).

## Section 4.6 Resignations

Any member may resign at any time by giving written notice to the chair. Such resignation shall take effect upon receipt of the written notice or at any later time specified therein.

## Section 4.7 Removal

Appointed members may be removed by the OUP Council as set forth in Section 3.2(k), subject to the reserved powers as set forth in Section 3.3(a). Additionally, any applicable member, who is excluded from participation in Medicare, Medicaid, or any other federal healthcare program, or who loses or surrenders their medical or other professional license to practice or clinical privileges or otherwise agrees with the licensing board not to practice, shall automatically be removed from the OUP Council without any action required.

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<sup>5</sup> Not including the OUP President, who is listed separately in 4.2(e).

**Section 4.8 Annual Meeting**

The annual meeting of OUP shall be held no later than October 31 each year.

**Section 4.9 Regular Meetings**

In addition to the annual meeting, the OUP Council shall hold regular semi-monthly meetings at such times and places as designated by the chair or vice chair. The OUP Council has the right to enter into an executive session for purposes allowed by law, with a quorum of voting OUP Council members required to be present. Any such session will be noted as confidential in the OUP Council minutes

**Section 4.10 Special Meetings**

Special meetings of the OUP Council may be called by the chair or upon the written request of any 14 voting members during the Council's Transition Period and any 8 voting members after the expiration of the Council's Transition Period. If the chair or the secretary neglects to issue such a call, the members making the request may issue the call.

**Section 4.11 Quorum**

A quorum shall consist of a majority of the voting members of the OUP Council. Voting members may participate in person or by phone/videoconference. Official actions of the OUP Council require a majority vote of physically present members, including proxy votes cast as described in Section 4.12.

**Section 4.12 Voting**

At any meeting of the OUP Council, each Council member present at the meeting shall be entitled to cast one vote for any item requiring a vote at a Council meeting. Proxy voting shall be permitted, and absent Council members may grant their vote to a physically present member of the Council in advance. However, no Council member present at an OUP Council meeting shall be permitted to cast more than one proxy vote in addition to their own vote (a maximum of two votes total). Approval of any item/action requires a majority vote of the OUP Council, subject to reserved powers in Section 3.3.

**Section 4.13 Compensation**

OUP Council members shall receive no compensation for their services; however, members may receive reimbursement for any reasonable expenses incurred in connection with such duties, as the OUP Council shall approve. Nothing herein shall be construed to preclude any members from providing service to OUP in any other capacity and receiving compensation therefor, subject to applicable conflict of interest and other policies.

**ARTICLE 5****EXECUTIVE LEADERSHIP****Section 5.1 Executive Leadership**

The OUP President and OUP CEO, positions that will be filled by two individuals, shall be recommended by the OUP Council and appointed by the OUCOM Executive Dean with the advice and consent of the SVP/Provost as described in Section 3.3. Subject to Board of Regents policy, the President will appoint the Chief Medical Officer and/or Chief Quality Officer, after consulting with the OUP CEO, and the CEO will appoint the remaining members of the executive leadership team, with the advice and consent of the OUP Council. Executive leadership will be responsible for managing the day-to-day business and operational activities of OUP, including all central practice management functions, and will work closely with Clinical Practice Division Leaders and Clinical Unit Leaders to manage clinical operations. In addition to the President and CEO positions, executive leadership is expected to include:

- (a) Chief Medical Officer
- (b) Other executive positions as determined by the OUP Council, in consultation with OUHSC, OUCOM, and OUMS leadership.

**Section 5.2 President**

The President of OUP shall be a physician member of OUP employed by OU and licensed to practice in the State of Oklahoma. The President of OUP will serve as the senior-most executive of OUP, and will not concurrently serve as a Clinical Unit Leader. The President will work with the OUP Council, other Clinical Practice Division Leader, and Clinical Unit Leaders to achieve clinical integration of the practice. The President will fulfill any other duties incident to the office of the President or which may be delegated to the President by the OUP Council from time to time. The President is accountable to the SVP/Provost; reports to the OUHSC Executive Dean or designee; and may hold additional titles within OUHSC, OUHSC, or OUMS.

**Section 5.3 Chief Executive Officer**

The CEO shall manage the collective business and operational performance of the faculty clinical group practice, including the provision of core practice management services, revenue cycle and electronic medical record implementation, comprehensive financial matters, clinical operations, and other duties incident to the office of the CEO or which may be delegated to the CEO by the OUP Council from time to time. The CEO is accountable to the SVP/Provost and OUHSC Executive Dean, and shall report to the OUP Council with a direct reporting line to the President of OUP.

**Section 5.4 Removal**

Section 3.3(b) provides for the removal of the OUP President or CEO. Removal of other OUP executive leaders may be initiated by the OUP CEO, after consultation with the OUP President, whenever the best interests of OUP will be served thereby or as otherwise designated by University policies.

**ARTICLE 6**

**ORGANIZATION AND RESPONSIBILITIES OF CLINICAL PRACTICE  
DIVISIONS' CLINICAL UNITS**

**Section 6.1 Clinical Practice Divisions**

OUP shall initially be organized to include distinct Clinical Practice Divisions including an Adult Clinical Practice Division and a Children's Clinical Practice Division. The Clinical Practice Divisions will operate under the direction of the OUP Council and the OUP President. Each Clinical Practice Division will be made up of Clinical Units as described in Section 6.2. Each Clinical Practice Division Leader will be appointed by the OUP Council subject to the advice and consent of the OUHSC Executive Dean. In an effort to maintain a streamlined reporting structure, the OUP President will serve as the Clinical Practice Division Leader of the Clinical Practice Division that corresponds with his or her primary adult or pediatric specialty (e.g., if the OUP President is a general pediatrician, he or she would serve as the Clinical Practice Division Leader of the Children's Clinical Practice Division, and the OUP Council would appoint a Clinical Practice Division Leader of the Adult Clinical Practice Division). The Clinical Practice Division Leader position not filled by the OUP President will serve as the Vice Chair of the OUP Council (Section 3.5). The Clinical Practice Divisions and the Clinical Units therein shall have accountability for the clinical practice and affairs of the physicians assigned to them. While it is organized within OUP, the Children's Clinical Practice Division may use the name OU Children's Physicians for marketing purposes. Finances may be separately maintained for both Clinical Practice Divisions; however, there will be one consolidated set of financial statements for OUP. Each Clinical Practice Division will be responsible for advancing patient care for their respective patient base and coordinating alignment with their respective health system administrative and functional leads, provided their individual efforts are also in the best interest of OUP as a whole.

**Section 6.2 Clinical Units**

Within each Clinical Practice Division, the faculty shall be organized into Clinical Units. At least one Clinical Unit shall initially be established corresponding to each OUHSC clinical science department. Additional Clinical Units may be established or modified, including multidisciplinary service lines, subject to the approval by the OUP Council, and these may be affiliated with OUHSC Centers, such as the Stephenson Cancer Center. The Clinical Unit Leader of each Clinical Unit shall manage the affairs of the Clinical Unit and report directly to the Clinical Practice Division Leader.

Each Clinical Unit initially corresponding with a clinical science department of OUCOM shall be led by the applicable department chair or their designee, as approved by the OUP Council and subject to the advice and consent of the OUCOM Executive Dean. On an annual basis, each Clinical Unit will work closely with the OUP CEO, executive team, and finance committee to develop an operating budget incorporating all sources of clinical revenue of the faculty and all related expenses in accordance with all policies and procedures established and approved by the OUP Council and in close collaboration with OUCOM and OUHSC. The day-to-day management of the clinical affairs of each Clinical Unit, subject to all applicable policies and procedures set forth by the OUP Council, will reside fully with the applicable Clinical Unit Leader.

## ARTICLE 7

### AMENDMENT BYLAWS

#### Section 7.1 Amendments

Ultimate authority for amendment of these bylaws rests with the Board of Regents of the University of Oklahoma.

#### Section 7.2 Review

These bylaws shall be reviewed by the OUP Council and OU Board of Regents at least every three years, as part of an evaluation of OUP's overall performance and to be consistent with University policies. Ultimate authority for amendments to these bylaws rests with the Board of Regents. Proposals for updates and amendments may originate with the OU Physicians Council by supermajority, the OUCOM Executive Dean, the Senior Vice President and Provost of the OUHSC, the University President, or the Board of Regents.

## ARTICLE 8

### DEFINITIONS

**Section 8.1 Definitions.** The following terms, as used in these bylaws, have the following meanings:

**Adult Clinical Practice Division:** A clinical practice division of OUP for the organization of OUP members providing clinical care primarily to adult patients.

**At-Large Physician:** Any OU-employed physician that is a member of OUP and does not hold the title of Clinical Unit Leader or Chair of an OUCOM academic department.

**Center:** An interdisciplinary center formally designated by the OUHSC.

**Children's Clinical Practice Division:** A clinical practice division of OUP for the organization of OUP members providing clinical care primarily to child and adolescent patients.

**Clinical Practice Division Leader:** The physician leader of an OUP Clinical Practice Division as set forth in Sections 3.2 and 6.1 of these bylaws.

**Clinical Unit:** An component within an integrated OUP for the purpose of organizing OUP members to deliver high-quality clinical care to defined patient populations, and to provide physician leadership for health system service lines, e.g., at OU Medical System.

**Clinical Unit Leader:** The physician leader of an OUP Clinical Unit as set forth in Sections 3.2 and 6.2 of these bylaws.

**Effective Date:** July 1, 2017.

**Full Time Faculty:** Faculty appointed according to Section 3 of the Faculty Handbook of the University of Oklahoma Health Sciences Center.

**OUCOM/Executive Dean:** The senior administrative officer of the OU College of Medicine, who reports to the SVP/Provost, and to whom the OUP President reports as in these bylaws.

**OUCP** OU Children's Physicians as defined in Section 1.1 of these bylaws.

**OUHSC:** The University of Oklahoma Health Sciences Center, a division of the University of Oklahoma Board of Regents.

**OUMS:** The University of Oklahoma Medical System, which includes the University of Oklahoma Medical Center, The Children's Hospital and the University of Oklahoma Medical Center Edmond.

**OUP Council:** The governing body of OUP described in Article 4 of these bylaws.

**OUP:** OU Physicians faculty clinical group practice as defined in Section 1.1 of these bylaws.

**Part Time Faculty:** Faculty appointed according to Section 3 of the Faculty Handbook of the University of Oklahoma Health Sciences Center.

**SVP/Provost:** The Senior Vice President and Provost of the OUHSC, who is the senior executive officer of the OUHSC, and to whom the Deans report, and to whom the OU Physicians President is accountable according to these bylaws.

**Transitional Council:** The OUP Council during the transitional period as described in Section 4.3 of these bylaws.

**Transitional Period:** A two-year period beginning at the Effective Date and concluding on June 30, 2019.

(Regents, 9-13-94, 3-6-96, 3-5-97, 5-7-04, 6-20-17)



## **M.5 COLLEGE OF MEDICINE FACULTY COMPENSATION PLAN**

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### **I. COMPENSATION PLAN PURPOSE AND OBJECTIVES**

#### **A. Purpose**

The purpose of the plan is to provide a basis for establishing compensation and incentives for the clinical and basic sciences faculty of the University of Oklahoma College of Medicine (COM).

#### **B. Objectives**

The Compensation Plan shall strive to achieve the following objectives:

- Be uncomplicated and understandable to participants.
- Provide adequate compensation to attract and retain faculty.
- Ensure fairness among faculty.
- Establish a structure to set compensation.
- Provide incentive to encourage clinical and research productivity.
- Provide for incentives to control expenses, improve quality, and strengthen the fiscal position of the departments, OU Physicians, and the COM.
- Create discretionary funds for program and faculty development.
- Provide funds for support of the COM.
- Be responsive to changes in the market.

### **II. APPLICABILITY**

The Compensation Plan will:

Apply to all full-time and part-time clinical and basic sciences faculty.

Apply to all sources of collected revenue generated within a faculty member's scope of employment with the college, including, but not limited to, the following:

- a) Patient care fees and all other professional practice revenue wherever earned by the faculty members
- b) Professional consultation
- c) Medical legal consultation
- d) Honoraria
- e) Compensation for supervision of professional services

The following are not included within the scope of this Compensation Plan:

- a) Prizes and awards
- b) Faculty members' interest in:
  - i. Royalties
  - ii. Copyrights
  - iii. Patent rights
- c) Nonprofessional income
- d) Compensation received as a result of military duty
- e) Income earned while on a sabbatical or leave that has been approved by the Regents

### III. OVERVIEW OF FACULTY COMPENSATION STRUCTURE

#### A. Introduction

Faculty compensation will be comprised of four possible components:

- University base
- Departmental Salary
- Administrative Salary
- Incentives

The term “Total Compensation” refers to the aggregate compensation derived from these four components.

Funds available to compensate faculty are derived from several sources:

- College of Medicine
- Hospital and affiliated agency support
- Grant and contract support
- Professional and/or medical legal consultation
- Professional fee revenues
  - Fee-for-service (FFS)
  - Capitation and package price contracts.

#### B. Guaranteed Salary

The Guaranteed Salary (as noted in B1 and B2 below) will be determined annually and will be set forth in the written, annual compensation agreement between the faculty member and the department and approved by the Board of Regents.

The Guaranteed Salary will be guaranteed by the department for the contract year.

For grant proposals to external agencies, the faculty members’ salaries will be based on the annual Guaranteed Salary. For example—the Guaranteed Salary will serve as the basis for calculation of the “direct salary” included on NIH grant or cooperative agreement proposals or applications (as per Notice OD-12-035 from NIH, January 20, 2012, or as it may be subsequently modified).

##### 1. University Base Compensation ( $X_1$ )

The University base is paid to all full-time faculty as part of employment with the college and to part-time faculty for specific services provided to the college.

The University base will be determined by a salary structure that considers rank and specialty.

The University base will be recommended by the department chair and approved by the COM Dean and University Board of Regents.

The University base for department chairs will be recommended by the COM Dean and approved by the University Board of Regents.

Except as provided in other University policies, the University Base ( $X_1$ ) will stay the same or increase in subsequent years.

Sources for the University Base component may include the following: state appropriations, hospital support, clinical earnings, grant and contract support, fees from consulting, and affiliated agency support.

## **2. Departmental Salary (X<sub>2</sub>)**

The departmental salary will be based upon a faculty member's contributions to the departmental mission.

The Departmental Salary will be proposed by the chair of the department annually, based upon the faculty member's performance and the department's fiscal circumstances. The departmental salary will be reviewed and approved by the COM Dean. The departmental salary may increase, decrease or stay the same in subsequent years.

The COM Dean and the University Board of Regents will approve the departmental salary for department chairs.

Sources for the Departmental Salary component may include the following: state appropriations, hospital support, clinical earnings, grant and contract support, and affiliated agency support.

## **C. Administrative Salary (Y)**

The administrative salary will be based upon a faculty member's contributions to the teaching, research, or clinical practice activities of the department.

The Administrative Salary will be proposed by the chair of the department or Dean annually based upon the faculty member's performance and the department's fiscal circumstances. The Administrative Salary should be tied to the performance of a specific role or the holding of an administrative position, for instance a Section Chief, Vice Chair, Program Director, Clerkship Director, or an Endowed Chair. If a faculty member ceases to perform the specified assignment or is released from holding the administrative position, this component of salary should also cease. The administrative salary will be reviewed and approved by the COM Dean. The administrative salary may increase, decrease or stay the same in subsequent years, and may be discontinued during the year if a faculty member no longer holds an administrative role or endowed chair.

The COM Dean and the University Board of Regents will approve the administrative salary for department chairs.

Sources for the Administrative Salary component may include the following: state appropriations, hospital support, clinical earnings, affiliated agency support, endowed chair earnings, contractual or consulting revenues.

## **D. Incentive Compensation (Z)**

Faculty may also be eligible for additional compensation in the form of an incentive.

Plans for distributing the incentive and formulas for determining incentives will be set by the department chair and approved by the COM Dean.

The COM Dean and University Board of Regents will approve the incentive component for department chairs.

Sources for the incentive component include the following: salary savings as part of the Sponsored Programs Research Incentive Plan, clinical and consulting earnings.

## **E. Final Incentive Compensation Payments**

The final incentive compensation payment will be paid to a faculty member either within the same month as the termination date or in the month immediately following. This final payment will be calculated in a manner consistent with the applicable departmental compensation plan.

This section applies to all faculty whose University service date is after October 31, 2004, and to all faculty whose University Service date is prior to October 31, 2004, unless there is a contrary written agreement entered into between an individual faculty member and the department prior to October 31, 2004.

All Department plans will stipulate the manner in which final incentive compensation payments are calculated. Estimated collections of patient accounts receivable, outstanding revenues (honoraria or consulting fees), and unpaid expenses, including, but not limited to, the faculty member's portion of the cost of medical malpractice insurance tail coverage, may be considered in this calculation.

#### **E. Review and Approval**

All Department compensation plans must adhere to the guidelines in the COM Compensation Plan, and all Department plans will be reviewed and approved by the Dean, subject to the provisions of Section 3.2(h) and 3.3(g) of the COM Faculty Clinical Group Practice Bylaws.

The COM Dean will approve the total compensation for each department chair on an annual basis. Monthly payments to chairs on the departmental salary/supplement and incentive components of total compensation will be approved by the Dean's Office.

When a faculty member's total compensation exceeds the 85th percentile of the most current AAMC Survey of Faculty Compensation, the Department will submit to the Dean's Office for review and approval a justification for the compensation level, including a detailed computation.

(Regents, 6-19-02, 10-27-04, 5-09-14, 9-14-17)

## **M.6 THE UNIVERSITY OF OKLAHOMA COLLEGE OF NURSING PROFESSIONAL PRACTICE PLAN**

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### **I. PREAMBLE**

The faculty of the College of Nursing is made up of both full-time and part-time faculty. The Faculty Practice Plan (FPP) applies to all nine-, ten-, and twelve- month faculty who hold full-time appointments.

Full-time members of the College of Nursing accept all rights, privileges and obligations of other University faculty as set forth in the University policies. Accordingly, a person who accepts full-time employment in the University of Oklahoma owes his first duty and his first loyalty to the University.

Obligations of a faculty member are not limited to meeting classes but include related activities of teaching, research and creative scholarly activity and professional and University service and public outreach, as well as University governance. Faculty are encouraged to engage, within the limits of the time available to them, in such income-producing activities as consulting work, sponsored research, professional nursing practice and other activities which are closely related to their University work. The decision to engage in such professional activities by the faculty members will be made with the knowledge and understanding that it must be done in accordance with the provisions of this policy.

Faculty who actively participate in professional activities acknowledge that it requires of the faculty a significant commitment in terms of energy, emotional dedication, time and the assumption of personal liabilities in addition to those assumed in carrying out academic programs.

Adherence to this policy, as with all Regents' policies, is a condition of appointment for full-time faculty in the College of Nursing. Under this policy, the faculty member is responsible to the Dean and the Dean, through the Senior Vice President and Provost, to the President.

### **II. OBJECTIVES**

1. To provide a uniform procedure for professional accountability in matters of professional activities and the income generated by these activities.
2. To improve the patient care and consultative resources of the Health Sciences Center for the benefit of the public health.
3. To promote discussions, seminars, or workshops under the aegis of the College of Nursing for the purpose of exchanging information and furthering the state of art of the profession.
4. To provide exemplary patient care and consultative models to meet the educational, research, and service goals of the College of Nursing.
5. To enhance recruitment and retention of highly qualified faculty by providing a source of funds with which to supplement income.
6. To provide incentives to the faculty to engage in the practice of their professions, to maintain and improve professional skills, and professional credentials.
7. To provide a procedure for accounting, reporting and auditing of all generated income.
8. To provide a procedure for the disbursement of generated income.
9. To provide basic financial data which can be made available and visible to all who have a legal right to examine such information.

### III. DEFINITION OF TERMS

#### 1. Membership

All full-time faculty of the College of Nursing shall be members of the Faculty Practice Plan.

#### 2. Base Salary

Base salary is defined as salary paid to the faculty by the College of Nursing or by affiliated institutions as part of the faculty member's workload within the Oklahoma Health Center. This does not include any paid benefits of employment.

#### 3. Workload/Work Time

Faculty members will be given workload assignments in accordance with the Workload Policy by the Assistant Dean of Academic Affairs. It is expected that a faculty member's first priority will be the duties at the College of Nursing.

#### 4. Supplemental Professional Earnings

Income generated by professional activities such as consulting or professional nursing practice, as discussed with and approved by faculty supervisor.

##### a) Sources of Supplemental Professional Earnings

Sources of supplemental professional earnings include, but are not limited to, the following:

- Nursing practice fees wherever earned by the faculty member.
- Professionally related consultation and community services
- Honoraria including but not limited to invited speaking, grant reviews, and continuing education teaching.
- Fees received for tutorial services

##### b) Income Exclusions

- Prizes and awards
- Faculty members interest in:
  1. Royalties
  2. Publication payments
  3. Copyrights
  4. Patent rights
- Nonprofessional income
- Compensation received as a result of military leave
- Income earned during paid leave, leave without pay, winter and spring breaks for nine- and ten-month faculty, and/or sabbatical leave
- Salary included under the definition of base salary.
- Income earned during those hours required to maintain clinical certification.
- Income earned during work for the College of Nursing Case Management Program.
- Income earned by supervising prescriptive authority students until such time that prescriptive authority is incorporated into the curriculum. After that incorporation is completed, monies earned supervising prescriptive authority through continuing education is subject to inclusion under the Faculty Practice Plan.

### IV. OPERATIONAL PROCEDURES

All operational procedures for the FPP are addressed in the College of Nursing operational procedures document.

(Regents 06-19-02, 01-25-06)

## **M.7 THE UNIVERSITY OF OKLAHOMA COLLEGE OF PHARMACY PROFESSIONAL PRACTICE PLAN**

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### **I. PREAMBLE**

The Faculty of the College of Pharmacy is composed of professionals with diverse backgrounds and specialties, each uniquely qualified to contribute to the health care delivery process and thus ultimately improve the level of patient care. Faculty may be involved in the delivery of professional services and this may manifest itself as direct patient care, consultation and/or education of patients and professionals.

When members of the Faculty deliver specialized personal consultative services or patient care, these Faculty members by their personal efforts and presence enhance the stature and reputation of the College of Pharmacy and the Health Sciences Center.

A reasonable degree of active involvement of the Faculty in the delivery of professional services is necessary to provide role-models for students, demonstrate the educational goals of the College of Pharmacy, and maintain professional skills. This contributes to the educational mission of the College of Pharmacy, including the research component of education. Active participation in health care delivery and professional services requires of the participant a significant commitment in terms of energy, emotional dedication, time, and the assumption of personal liabilities in addition to those assumed in carrying out academic programs.

### **II. OBJECTIVES**

- A. To improve patient care and consultative resources of the Health Sciences Center for the benefit of the public health. To provide exemplary patient care and consultative models to meet the educational, research, and service goals of the College of Pharmacy.
- B. To ensure effective control and administration by the University of Oklahoma and the College of Pharmacy of all PPP monies received and disbursed. To provide reporting and auditing of all monies received and disbursed as a result of Professional Practice of the membership.
- C. To enhance recruitment and retention of highly qualified faculty by providing alternate funding sources with which to supplement income. To provide incentives to the Faculty to engage in the practice of their professions. To maintain and improve professional skills, and to enhance Faculty scholarship.

### **III. DEFINITION OF TERMS**

#### **A. Membership**

Membership in the Plan applies only to those individuals of The University of Oklahoma College of Pharmacy who hold a greater than 50% appointment in the College of Pharmacy and have a modified or unmodified Faculty appointment.

All members of the Faculty of the University of Oklahoma College of Pharmacy must be appointed members of the plan as individuals and they must exercise their professional capabilities under this policy as individuals. The University will not recognize individual, section, or departmental corporations under this policy.

#### **B. Guaranteed Base Salary**

The guaranteed base salary is specified and guaranteed annually by contract with The University of Oklahoma, or one of the affiliated hospitals or clinics or other institutions of the Health Sciences Center, through appointment to the faculty of the College of Pharmacy by The Board of Regents of The University of Oklahoma. The guaranteed base salary compensates the individual faculty member for that portion of his or her time which will be devoted to academic programs and to ensure that the

academic programs take precedence over other responsibilities. This also includes amounts paid as a guaranteed salary by the Veterans Affairs Medical Centers and other affiliated hospitals for teaching and/or patient services. It is recognized the faculty member may devote as much of the remainder of his or her time as he or she wishes to professional practice activities and/or other professional involvement.

#### **C. Covered Activities**

Covered activities include all pharmacy-related professional and educational activities undertaken by a faculty member that are not assigned or required to support the academic programs of the College of Pharmacy. Examples include, but are not limited to, patient care activities, professional consultation, honoraria, continuing professional education, and all other professional activities not specifically excluded within these policies.

#### **D. Generated PPP Income**

All sources of income by College of Pharmacy faculty from activities covered by the PPP which are not compensated by the guaranteed base salary.

### **IV. OPERATIONAL PROCEDURES**

- A. It is the prerogative of the individual faculty member to determine whether and to what extent he or she wishes to engage in professional practice activities. Participation in professional practice activities must be approved by the individual faculty member's department chair prior to commencing such activities.
- B. The University shall not possess the right to control or direct faculty member employees regarding the performance of their professional practice activities. The University shall neither control nor direct the faculty member in their chosen PPP activities in such a way that will bias or interfere in the expected outcomes or results to be accomplished through the professional practice activity. Within a Pharmacist-Patient relationship, the right to terminate the Pharmacist-Patient relationship shall be vested only in the Patient and Pharmacist.
- C. The decision to engage in such professional practice activities by the faculty members will be made with the knowledge and understanding that the fees received for covered activities and professional services are to be included as generated PPP income governed by this policy. University fringe benefits will be computed on the guaranteed base salary. Amounts paid above these base salary amounts are to compensate faculty members for their professional practice activities. Such amounts will be paid to faculty members as W-2 income and may be included in the calculations of the University fringe benefits.
- D. Individuals participating in professional practice activities are required to report these activities to the department chair or other appropriate supervisor prior to initiating the activity and are required to adhere to University policy related to the processing of contracts and grants.
- E. Generated PPP income should be paid to the University and deposited directly into the College of Pharmacy Professional Practice Plan account. In those approved instances where payment is made directly to participating individuals, those funds must be deposited in this same PPP account. Sources of Generated PPP Income include:
  - 1) Patient care fees wherever earned by the faculty members
  - 2) Professional consultation
  - 3) Honoraria
  - 4) Continuing Education not sponsored by the OU College of Pharmacy
  - 5) Continuing Education sponsored by the OU College of Pharmacy
  - 6) Salary or hourly payments generated through one of the above covered activities
  - 7) All other professional activities not specified as excluded (below)



- F. Some types of income are not considered as generated PPP income and are excluded from these policies. Faculty should contact the department chair or supervisor to determine whether income earned falls into one of the categories of excluded income. Examples of income exclusions include:
- 1) Prizes and awards
  - 2) Non-professional income
  - 3) Compensation received as a result of military leave
  - 4) Income earned during leave without pay, but only when exclusion is specifically authorized by the Regents
  - 5) Faculty members' interests in:
    - (a) Royalties
    - (b) Copyrights
    - (c) Patent Rights
- G. In the case where compensation has already had FICA, State and Federal Tax paid: The University will withhold employee and employer FICA, State and Federal taxes. To receive employer FICA back from the University, you must wait until the University has fully paid employer portion of FICA and request transfer to your (PPP account) the portion of employer FICA withheld from your PPP income.
- H. In the case where compensation has already had FICA, State and Federal Tax paid: inclusion of a copy of check stub and indication on PPP request TAXES PAID will prevent FICA, State and Federal Taxes from being withheld twice.
- I. The approved percentage of PPP income to be paid to the Plan will be five (5) percent of OU College of Pharmacy Continuing Education income and ten (10) percent of "Other" income as listed in IV. E. 1-7. The monies paid to the Plan will cover direct and indirect administrative costs of the College and provide for a faculty development fund.
- J. Generated PPP income and payments are subject to University policies related to Billing, Collecting, Accounting, Disbursements, and Auditing.
- 1) The College of Pharmacy Professional Practice Plan account, a Special Agency Account of the University of Oklahoma Health Sciences Center, is the only authorized depository. This account will be the sole depository and expenditure account for generated PPP income and payments under this Plan. This account will be used for this purpose only and no commingling of funds will be permitted. All generated PPP income will pass through this account before being transferred to individual accounts or paid to the Faculty member.
  - 2) All accounts will be handled in accordance with standard accounting principles of the Statutes of the State of Oklahoma, and the Policies of the Regents of The University of Oklahoma, as they apply to Special Agency Accounts. All funds for educational and general purposes will be transferred to the Revolving Fund before being expended.
  - 3) The Dean's designee will make an annual report available to the PPP membership detailing the expenditures from the College of Pharmacy Professional Practice Plan account each calendar year.

## **V. DISPOSITION OF GROSS GENERATED INCOME**

- A. The approved percentage of PPP income paid to the Plan is designated to cover expenses under the Plan (see Item IV. I) and to provide funding for general faculty development activities and opportunities.
- B. The balance will be paid to that individual Faculty member or group within the College of Pharmacy, to the extent that the individual Faculty member or Faculty members of the group have contributed to the generation of income.

## VI. GOVERNANCE OF THE PROFESSIONAL PRACTICE PLAN

- A. The Professional Practice Committee of the College of Pharmacy is established to provide oversight of the Professional Practice Plan.

1. **Composition**

The Professional Practice Committee shall consist of: three (3) members elected for staggered three-year terms from the participating membership. No elected member shall serve more than two consecutive three-year terms.

2. **Charge**

The Professional Practice Committee shall be charged with the responsibility of advising the Dean regarding the administration of the Professional Practice Plan on behalf of the College of Pharmacy Faculty. The University administration including the accounting and legal departments, are available to assist the Committee as needed. In addition, the Professional Practice Plan Committee may obtain, at its expense, the advice of legal counsel, accountants, consultants, and others as required. It is expressly understood, however, that only the University legal counsel may prepare legal documents and represent the University and its constituent parts in its external affairs.

3. **Meeting and Quorum**

- (a) The Professional Practice Committee shall meet with the Dean at least once every calendar year or upon call of the Dean. The committee will also meet as necessary to discuss issues communicated to them by faculty or to conduct other business. A quorum shall consist of not less than two (2) committee persons.
- (b) Annually, at a time to be determined by the Professional Practice Committee, there shall be a meeting of the full membership of the Professional Practice Plan at which time an Annual Report of the Professional Practice Plan shall be given by the Professional Practice Plan Committee to the faculty. In addition, elections will be held for members of the Professional Practice Plan Committee. Special meetings may be called upon request of the Professional Practice Committee. The Annual Report shall contain a record of funds generated and disbursed retaining confidentiality of source of income and amount of income generated by or disbursed to each individual Faculty member.
- (c) Written proxy vote will be accepted contingent upon the proxying member delivering the proxy to a PPP member with a copy to the Chair.

## VII. ACCOUNTABILITY

A. **The Faculty**

- 1) Each faculty member holding an appointment in more than one College of the University of Oklahoma shall have, for purposes of this Plan, a primary college or department responsible for depositing and monitoring generated income. Faculty members holding joint appointments in the College of Pharmacy and in some other College shall participate in the Plan of the College which has primary responsibility for their promotion and tenure as defined in the *Faculty Handbook*. The process of exercising their discretion as professionals regarding matters of patient care and other professional activities, does not diminish their responsibility to account to The University under the plan for all income earned nor relieve them of the duty of compliance with policies and agreements of The Board of Regents governing site of practice. Although no time limitations are placed on faculty involvement in PPP activities, it is each faculty member's responsibility to insure that primary obligations to The University are above reproach.

- 2) Adherence to this Policy, as well all The Board of Regents' policies is a condition of employment for individuals of The University of Oklahoma College of Pharmacy who hold a greater than 50% appointment in the College of Pharmacy and have a modified or unmodified Faculty appointment. Under this policy, as in all University matters, the members of the College of Pharmacy are responsible to the Dean and the Dean through the Senior Vice President and Provost to the President.

#### **B. The Dean**

- 1) If this policy is to achieve its objectives, the income producing activities of the College must be well managed. Anything less than sound management will hinder the College's growth and development and damage the potential for Faculty income. It is important that everyone understand who is responsible. The Dean is charged with the responsibility of managing the business affairs of the College, including its income generating activities. At the same time the Faculty has a great interest in the College's development and in their own incomes. The advise of the Practice Plan Committee should be carefully weighed by the Dean.
- 2) The Practice Plan Committee cannot advise, however, without sound data; nor can the Faculty evaluate the performance of management or of the Practice Plan Committee without information. It shall, therefore, be the duty of the Dean or designee, in addition to conferring regarding policy and direction, to confer quarterly with the Practice Plan Committee regarding the costs associated with the operation of the College's income producing activities and at least once each year review with the whole membership the costs of the Plan.
- 3) The Dean shall also respond to questions posed by the members at the Annual Meeting, address the membership on the state of the College generally and make specific recommendations as to how the membership can improve the programs or assist in improving the management of the College's income producing activities.

### **VIII. MISCELLANEOUS PROVISIONS**

#### **A. Policy Amendments**

- 1) The policy for operation and governance of the Professional Practice Plan may be amended from time to time in any particular by the Regents of the University of Oklahoma.
- 2) Proposed amendments will be submitted to the Professional Practice Committee for advice or comment. In addition, amendments to the policy may be proposed or initiated for the consideration of the Regents by:
  - (a) Petition by greater than 1/3 of the members followed by
  - (b) Presentation by the Professional Practice Plan Committee with recommendation to the full membership, and requiring
  - (c) Ratification by written ballot of 2/3 of the full membership , and
  - (d) Forwarding the proposed amendment through the Dean of the College of Pharmacy and Senior Vice President and Provost, Health Sciences Center, to the President for approval for submission to the Board of Regents of the University of Oklahoma.

(Regents, 7-29-93, 11-5-09)

## **M.8 THE UNIVERSITY OF OKLAHOMA COLLEGE OF PUBLIC HEALTH PROFESSIONAL PRACTICE PLAN**

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### **I. PREAMBLE**

The faculty of the College of Public Health is composed of professionals of diverse backgrounds and expertise each qualified to contribute to the improvement of the health of the public. Hence, faculty members may be involved in consultative and/or educational activities.

When members of the faculty deliver specialized professional consultative and/or educational services, the stature and reputation of the College of Public Health and The University of Oklahoma Health Sciences Center are enhanced.

A reasonable degree of active involvement of the faculty in the delivery of professional services is necessary to provide role models for students and to maintain professional skills. Each of these contributes to the missions of the College of Public Health. It is recognized that participation in consultative and/or educational activities requires a significant commitment of time and energy as well as the assumption of personal liabilities.

It is understood that the University shall not possess the right to control or direct faculty members in the performance of their professional practice activities, and that whether or not a faculty member conducts professional practice activities shall be within each faculty member's sole discretion and the university shall neither control nor direct the faculty member as to the results to be accomplished. This understanding, however, does not exempt faculty from conflicts of interest limitations. It is further understood that the faculty member's primary professional responsibility is to the academic programs of the University and its affiliated institutions. All outside professional activities must be secondary.

Adherence to this policy, as with all policies of the Board of Regents, is a condition of employment for faculty in the College of Public Health. Under this policy, as in all University matters, the members of a department are responsible to their chairperson, as the chairperson is responsible to his/her Dean, and the Dean, through the Senior Vice President and Provost of the Health Sciences Center, to the President, and subsequently to the Regents.

### **II. OBJECTIVES**

The objectives are:

- (a) To enhance the recruitment and retention of highly qualified faculty by providing alternate funding sources with which to supplement income; to provide incentives to the faculty to engage in the practice of their professions; to maintain and improve professional skills; and to enhance faculty scholarship.
- (b) To improve the consultative and educational resources of the Health Sciences Center for the benefit of the public health.
- (c) To ensure effective administration by The University of Oklahoma and the College of Public Health of all monies received and distributed, and to provide reporting and auditing of all monies received and disbursed as a result of professional practice by the faculty.

### **III. DEFINITIONS**

- (a) Those individuals of the College of Public Health who hold at least a 50% appointment in the College and have a modified or unmodified faculty appointment are members of the Professional Practice Plan. For those individuals holding a 9-10 month appointment, those funds earned during the 2-3 months of non-appointment are not included.

- (b) All members of the faculty of the College of Public Health are appointed as individuals and they must exercise their professional capabilities under this plan as individuals. The University will not recognize individual, section, or departmental corporations.
- (c) The guaranteed base salary is that guaranteed annually by contract with The University of Oklahoma or one of its affiliated institutions. This is to compensate the individual for that portion of his or her time which will be devoted to academic programs and to ensure that the academic programs take precedence over other responsibilities as determined by the Department Chair. It is recognized that individual faculty members may devote as little of the remainder of his or her work week as he or she wishes to professional practice activities and/or other professional involvement.
- (d) The maximum amount of the work week that may be devoted to professional practice activities shall be negotiated annually at the time of annual review with the Department Chair or if not affiliated with a Department, with the Director of the Center or Institute. Any agreements are to be in writing. The Chairman of the Department will allow faculty to have a reasonable amount of time for professional practice activities, in keeping with the terms of this plan. In the case of Department Chairs, the amount of the work week devoted to professional practice activities shall be negotiated annually with the Dean, and in turn, the Dean shall negotiate with the Senior Vice President and Provost.
- (e) Non-professional income is that income generated by activities outside the professional expertise for which the faculty member is hired by the University or one of its affiliated institutions.

#### IV. OPERATIONAL PROCEDURES

- (a) It is the prerogative of the individual faculty member to determine whether and to what extent he or she wishes to engage in professional practice activities subject to negotiation with the Chair. The decision to engage in such professional practice activities by the faculty members will be made with the knowledge and understanding that the fees received for professional services, earned during or outside the work week, are to be included as generated income governed by this policy. University fringe benefits will be computed on the guaranteed base salary. Amounts paid above these base salary amounts are to compensate faculty members for their professional practice activities. Such amounts will be paid to faculty members as W-2 income and may be included in the calculations of the University fringe benefits.
- (b) Sources of Generated Income
  - i. Patient care and professional fees whenever or wherever earned by the faculty members
  - ii. Professional consultation
  - iii. Honoraria
  - iv. Continuing and other forms of education
  - v. Expert legal testimony
- (c) Income Exclusions
  - i. Prizes and awards
  - ii. Non-professional income
  - iii. Compensation received as a result of military leave
  - iv. Income earned during leave without pay, but only when exclusion is specifically authorized by the Regents
  - v. Faculty members' interests in:
    - (1) Royalties
    - (2) Copyrights
    - (3) Patent Rights
  - vi. Reimbursement for travel expenses

- (d) In the case where compensation has already had FICA, State and Federal Tax paid: inclusion of a copy of check stub and indication on PPP request TAXES PAID will prevent FICA, State and Federal taxes from being withheld twice.
- (e) In the case where compensation has not already had FICA, State and Federal Tax paid, the University will withhold employee and employer FICA, State and Federal taxes and other applicable benefits.
- (f) Billing, Collecting, Accounting, Disbursements, and Auditing
  - i. All revenues generated from faculty practice must be deposited with the HSC College of Public Health Professional Practice Plan.
  - ii. All receipts and disbursements will be handled in accordance with applicable University of Oklahoma Health Sciences Center, University of Oklahoma Board of Regents, and State of Oklahoma guidelines.

#### **V. DISPOSITION OF GROSS GENERATED INCOME**

Funds are to be expended in the following order:

- (a) All direct and indirect expenses used to generate income.
- (b) One (1) percent to the Dean's Fund for use in academic development of the College and four (4) percent to departmental funds.
- (c) The balance will be paid to that individual faculty member or group within the College of Public Health, to the extent that the individual faculty member or faculty members of the group have contributed to the generation of income.
- (d) Any other allocation requires a vote of the members of the professional practice plan.

#### **VI. GOVERNANCE OF THE PROFESSIONAL PRACTICE PLAN**

The Professional Practice Committee of the College of Public Health shall be the governing body as outlined below.

##### **Composition**

The Professional Practice Committee shall consist of one (1) member elected from each department for staggered three-year terms. No elected member shall serve more than two consecutive three-year terms.

The Professional Practice Committee shall be charged with the responsibility of advising the Dean and other University officials regarding the administration of the Professional Practice Plan on behalf of the College of Public Health Faculty. The University administration, including the accounting and legal departments, are available to assist the Committee as needed. In addition, the Professional Practice Committee may obtain, at its expense, the advice of legal counsel, accountants, consultants, and others as required. It is expressly understood, however, that only the University legal counsel may prepare legal documents and represent the University and its constituent parts in its external affairs.

##### **Meetings and Quorum**

The Professional Practice Committee shall meet with the Dean at least annually or on call of the Chair of PPP Committee or the Dean. A quorum shall consist of not less than two (2) committee persons.

Annually, at a time to be determined by the Professional Practice Committee, there shall be a meeting of the full membership of the Professional Practice Plan at which time an Annual Report of the Professional Practice Plan shall be given by the Professional Practice Committee to the faculty. In addition, elections will be held for members of the Professional Practice Committee. Special meetings may be called upon

request of the Professional Practice Committee. The Annual Report shall contain a record of funds generated and disbursed retaining confidentiality of source of income and amount of income generated by or disbursed to each individual faculty member.

Written proxy voting will be accepted contingent upon the proxying member delivering the proxy to a PPP member with a copy to the Chair.

## **VII. MISCELLANEOUS PROVISIONS**

### **Policy Amendments**

The policy for operation and governance of the Professional Practice Plan may be amended from time to time in any particular by the Regents of The University of Oklahoma. It is anticipated that the Regents will notify the members of the plan prior to such amendment with at least 30 days for response.

Proposed amendments will be submitted to the Professional Practice Committee for advice or comment. In addition, amendments to the policy may be proposed or initiated for the consideration of the Regents by:

1. Petition by greater than 1/3 of the members followed by,
2. Presentation by the Professional Practice Committee, with recommendation, to the full membership, and requiring,
3. Ratification by written ballot of 60% of the voting membership, and
4. Forwarding the proposed amendment through the Dean of the College of Public Health and Senior Vice President and Provost, Health Sciences Center, to the President for approval for submission to the Board of Regents of The University of Oklahoma.

(Regents, 9-2-76, 7-22-81, 2-9-84, 9-8-98)

## **M.9 COLLEGE OF PUBLIC HEALTH FACULTY COMPENSATION PLAN**

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### **I. COMPENSATION PLAN PURPOSE AND OBJECTIVES**

#### **A. Purpose**

The purpose of the plan is to provide a basis for establishing compensation and incentives for the faculty of the University of Oklahoma College of Public Health (COPH).

#### **B. Objectives**

The Compensation Plan shall strive to achieve the following objectives:

- Be uncomplicated and understandable to participants.
- Provide adequate compensation to attract and retain excellent faculty.
- Establish a structure to set compensation for faculty in a fair and consistent manner.
- Provide incentive for excellence and outstanding performance in teaching and mentoring, research and scholarly productivity, service, and administrative responsibilities.
- Provide for incentives to control expenses, improve quality, and strengthen the fiscal position of the departments and the COPH.
- Create discretionary funds for program and faculty development.
- Provide funds for support of the COPH.
- Be responsive to changes in the market.

### **II. APPLICABILITY**

The Compensation Plan will:

Apply to all full-time and part-time COPH faculty.

Apply to all sources of collected revenue generated within a faculty member's scope of employment with the college, including, but not limited to, the following:

- a. Salary derived from all sources (state funds, grants, contracts, etc.)
- b. Professional consultation
- c. Honoraria

The following are not included within the scope of this Compensation Plan:

- a. Prizes and awards
- b. Faculty members' interest in:
  - i. Royalties
  - ii. Copyrights
  - iii. Patent rights
- c. Nonprofessional income
- d. Compensation received as a result of military duty
- e. Income earned while on a sabbatical or leave that has been approved by the Regents

### **III. OVERVIEW OF FACULTY COMPENSATION STRUCTURE**

#### **A. Introduction**

Faculty compensation will be comprised of four possible components:

1. University base (X)
2. Departmental Salary (Y)
3. Incentive payments (Z)



(as defined by the CPH Incentive Plan, see *HSC Faculty Handbook*, section 8.5, page 8-4, and attached e-mail of 9/13/99)

4. Professional Practice Plan income (PPP)  
(as defined by the CPH Professional Practice Plan, see *HSC Faculty Handbook*, Appendix M, pages 22-37 through 22-40).

The term “**Total Compensation**” refers to the aggregate compensation derived from these four components (X + Y + Z + PPP).

Funds available to compensate faculty are derived from several sources:

- College of Public Health state funds allocation
- Grant support
- Contract support
- Professional consultation revenues (Fee-for-service)
- Endowed funds
- College discretionary funds

## B. **Guaranteed Salary**

The Guaranteed Salary (as noted in B1 and B2 below) will be determined annually and will be set forth in the written, annual compensation agreement between the faculty member and the department and approved by the Dean and the OU Board of Regents.

The term “**Guaranteed Salary**” is defined as X + Y and will be guaranteed by the department for the contract (fiscal) year.

For grant proposals to external agencies, the faculty members’ salaries will be based on the annual Guaranteed Salary. For example—the Guaranteed Salary will serve as the basis for calculation of the “direct salary” included on NIH grant or cooperative agreement proposals or applications (as per Notice OD-01-013 from NIH, January 11, 2001, or as it may be subsequently modified).

### 1. **University Base Compensation (X)**

The University base is paid to all full-time faculty as part of employment with the college and to part-time faculty for specific services provided to the college.

The University base will be determined by a salary structure that considers academic rank, academic discipline, credentials and market factors.

The University base will be recommended by the department chair and approved by the CPH Dean and University Board of Regents.

The University base for department chairs will be recommended by the CPH Dean and approved by the University Board of Regents.

Except as provided in other University policies, the University Base (X) will stay the same or increase in subsequent years.

Sources for the University Base component may include the following: state appropriations, grant and contract support, and college discretionary funds.

### 2. **Departmental Salary (Y)**

The departmental salary, if any, will be based upon a faculty member’s contributions to the departmental mission. Faculty will only be considered for the Departmental Salary (Y) component based upon an appropriate merit rank on their annual evaluation by the Department Chair.

The Departmental Salary will be proposed by the Chair of the department annually, based upon the faculty member's performance and responsibilities, and the department's fiscal circumstances. The departmental salary will be reviewed and approved by the CPH Dean. The departmental salary may increase, decrease or stay the same in subsequent years.

The CPH Dean and the University Board of Regents will approve the departmental salary for department chairs.

Sources for the Departmental Salary component may include the following: state appropriations, grant and contract support, agency support, endowed funds and college discretionary funds.

**C. Incentive Payments (Z)**

Faculty may also be eligible for additional compensation in the form of incentive payments, as defined in the CPH Incentive Plan, (see *HSC Faculty Handbook* section 8.5, page 8-4, and attached e-mail of 9/13/99).

**D. Professional Practice Plan (PPP)**

Faculty will also be eligible for additional compensation, as defined in the CPH Professional Practice Plan (see *HSC Faculty Handbook*, Appendix M, pages 22-37 through 22-40).

**Authorization**

Reviewed and approved by the CPH Executive Committee, August 2, 2005

Reviewed and approved by the CPH Faculty Board, October 13, 2005

(Regents, 12-5-05)

## 23. APPENDIX N

### POST-DOCTORAL FELLOW GRIEVANCE PROCEDURE

Although post-doctoral fellows are University employees, they are at the University primarily to receive additional education. Therefore, even though they are generally appointed for one year at a time, the University, through its designated officials, retains the right to evaluate the academic qualifications, performance, professional conduct, and suitability for promotion, continued education and certification of post-doctoral fellows receiving education at the University. Note: Clinical trainees enrolled in a College of Medicine graduate medical education program (i.e. resident or fellow) are subject to the Grievance Policy in the *Resident Handbook*, in accordance with the Resident Agreement, for grievances related to their program.

Because of the post-doctoral fellows' positions as employees who are also receiving education, any grievance brought by a fellow other than those clinical trainees in the College of Medicine, regarding his or her rights as a fellow or any allegation of wrongful administrative action resulting in probation, suspension, or dismissal and termination of post-doctoral education shall be brought under this policy. All grievances must be started within thirty days of the time the fellow knew or should have known of the decision or situation that is the subject of the grievance.

In the event a post-doctoral fellow has a grievance, the following steps shall be followed:

- 1) The post-doctoral fellow shall discuss the grievance with the supervisor or program director and attempt to resolve the issue within the program.
- 2) If the post-doctoral fellow is not satisfied with the program's decision on the issue, he or she may request a meeting with the Assistant or Associate Dean in charge of post-doctoral fellows in the College in which the fellow is assigned through submission of a written grievance within ten days of beginning the attempt to resolve the issue with the supervisor or program director.
- 3) The Assistant/Associate Dean shall investigate the written grievance.
- 4) The Assistant/Associate Dean shall attempt to arbitrate the grievance. If the matter cannot be resolved, the post-doctoral fellow may within seven days of receipt of the notification that the Assistant/Associate Dean was unable to resolve the issue request a hearing before the Post-Doctoral Fellow Appeals Committee. This request shall be written and submitted to the Dean of the College in which the fellow is assigned.
- 5) The Dean shall convene an ad hoc Post-Doctoral Fellow Appeals Committee to consider the fellow's grievance.
- 6) The Post-Doctoral Fellow Appeals Committee shall consist of six members: three selected from the faculty and three selected from among the post-doctoral fellows in the College where the post-doctoral fellow is assigned. The Dean of the College shall appoint the membership. The Assistant/Associate Dean shall serve *ex officio*.

**Charge:** The Committee may hear an appeal by a post-doctoral fellow who, (1) thinks he or she has been unfairly evaluated by a program or that his or her rights as a fellow have been abrogated, and (2) has been unable to resolve the matter in conference with the program director and the Assistant/Associate Dean. While the responsibility for evaluations rests with the program, the primary responsibility of the Committee is to mediate disputes which have not been satisfactorily resolved at the program level in order to protect both post-doctoral fellows and faculty from arbitrary and capricious decisions.

- 7) The Post-Doctoral Fellows Appeals Committee shall hear the grievance. The Committee shall determine the procedure and conduct of the hearing incorporating the basic principles of due process. The post-doctoral fellow may bring any person(s) whom he or she thinks will be able to contribute to his or her presentation to the Committee, and may be advised at his or her own expense by legal counsel, if desired. The post-doctoral fellow must notify the Committee Chairman at least seven days before the hearing if legal counsel will be present. If the post-doctoral fellow is accompanied by legal

counsel at the hearing or at any steps where the post-doctoral fellow and a University official meet, University Legal Counsel shall also be present. Neither counsel for the post-doctoral fellow nor for the University may directly address the Committee in any hearing except in answer to a specific question by a committee member. The Post-Doctoral Fellow Appeals Committee hearing will be recorded.

- 8) The Committee will render a written report containing findings of fact and recommendations regarding the dispute in question to the Dean for his consideration.
- 9) The Dean of the College shall review the hearing proceedings and the report of the appeals committee and render a final decision regarding the grievance and take appropriate action. Any post-doctoral fellow about whom the Committee makes an adverse recommendation to the Dean will have the opportunity to talk with the Dean before the Dean makes a final decision.

(Regents, 12-4-92, 12-3-02, 6-25-08)