The OU Health Sciences Center Faculty Handbook is a **.pdf document with embedded bookmarks**. **Simply click on the main heading or section number on the Table of Contents or Index.**

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FACULTY HANDBOOK

The University of Oklahoma
Health Sciences Center

March 2024

Approved by the OU Board of Regents, March 12, 2024

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UNIVERSITY OF OKLAHOMA FACULTY HANDBOOK
HEALTH SCIENCES CENTER
March 2024

FACULTY HANDBOOK
Table of Contents

PREFACE

1. HEALTH SCIENCES CENTER: GENERAL INFORMATION

1.1 - HISTORY
1.2 - HEALTH SCIENCES CENTER CAMPUSES
1.3 - FACILITIES

2. UNIVERSITY GOVERNMENT AND ADMINISTRATION

2.1 - OKLAHOMA STATE REGENTS FOR HIGHER EDUCATION
2.2 - UNIVERSITY OF OKLAHOMA BOARD OF REGENTS
2.3 - ADMINISTRATIVE ORGANIZATION
2.3.1 - President
2.3.2 - Acting President
2.3.3 - Senior Vice President and Provost, Health Sciences Center
2.3.4 - Vice President for Administration and Finance, Health Sciences Center
2.3.5 - Vice President for Research, Health Sciences Center
2.3.6 - Vice President, OU Tulsa
2.3.7 - Interim Appointments of President, Senior Vice President and Provost, Vice Presidents, and Deans

2.4 - FACULTY SENATE, HEALTH SCIENCES CENTER
2.5 - STUDENT GOVERNMENT ASSOCIATION & STUDENT ORGANIZATIONS
2.6 - STAFF SENATES
2.7 - COUNCILS AND COMMITTEES
2.7.1 - Introduction
2.7.2 - Councils
2.7.3 - Standing Committees
2.7.4 - Other University Committees
2.7.5 - Attendance Requirements for Faculty Members of a University Council or Committee
2.7.6 - Resignation of Faculty Members from Council and Committee Membership During Leaves of Absence
2.7.7 - Administrative Search Committee
2.8 - COLLEGE AND DEPARTMENTAL ORGANIZATION
2.8.1 - College Administration
2.8.2 - Departmental Administration

3. FACULTY PERSONNEL POLICIES AND GENERAL INFORMATION

FACULTY PERSONNEL POLICY
3.1 - FACULTY APPOINTMENTS AND INFORMATION
3.1.1 - Regular Faculty
3.1.2 - Limited Term Faculty
3.1.3 - Dually-Employed/Appointed Faculty
3.1.4 - Volunteer Faculty
3.1.5 - Emeritus Faculty
3.1.6 - Health Professions Educators
3.1.7 - Part-Time Appointments
3.1.8 - Primary, Joint, and Secondary Appointments
3.2 - NEW FACULTY APPOINTMENTS, CHANGES, AND SEPERATIONS
3.2.1 - Appointment of New Regular or Limited Term Faculty
3.2.2 - Changes in Status
3.2.3 - Notifications of Non-Renewal or Termination of Tenure Track or Consecutive Term Appointment
3.2.4 - Resignation
3.2.5 - Administrative Titles
3.3 - ACADEMIC FREEDOM AND RESPONSIBILITY
3.3.1 - Institutional Academic Freedom
3.3.2 - Academic Freedom

3.3.3 - Academic Responsibility
3.4 - FACULTY ACCOUNTABILITY
3.5 - PROFESSIONAL ACTIVITIES OF THE FACULTY
3.5.1 - Teaching
3.5.2 - Research and Creative/Scholarly Activity
3.5.3 - Professional and University Service and Public Outreach
3.5.4 - Public Outreach Policy
3.6 - FACULTY EVALUATION
3.7 - SALARY ADJUSTMENTS
3.7.1 - Procedures for Salary Adjustments
3.8 - FACULTY TENURE
3.8.1 - Definitions
3.8.2 - Fiscal Responsibility
3.8.3 - Pre-Tenure Period
3.8.4 - Criteria for the Tenure Decision
3.8.5 - Procedures for Tenure Decision
3.9 - FACULTY PROMOTION
3.9.1 - Criteria for Promotion
3.9.2 - Procedures for Promotion
3.10 - SABBATICAL LEAVE POLICY
3.11 - AWARDS
3.11.1 - Regents' Awards
3.11.2 - Provost's Research Awards
3.11.3 - Provost's Teaching Awards
3.12 - DISTINGUISHED PROFESSORSHIPS
3.12.1 - David Ross Boyd Professorship
3.12.2 - George Lynn Cross Research Professorship
3.12.3 - Regents' Professorship
3.12.4 - Presidential Professorship
3.12.5 - David L. Boren Professorship
3.12.6 - Presentation to Board of Regents
3.13 - ENDOWED CHAIRS AND ENDOWED PROFESSORSHIPS
3.14 - COLLEGE AWARDS FOR FACULTY AND STAFF
3.15 - FACULTY SCHOLARSHIPS AND FELLOWSHIPS
3.16 - ABROGATION OF TENURE, TERMINATION OF EMPLOYMENT, SEVERE SANCTIONS, SUMMARY SUSPENSION, AND OTHER DISCIPLINARY ACTIONS
3.16.1 - Grounds for Abrogation of Tenure, Termination of Employment, and Severe Sanctions
3.17 - FACULTY APPEALS BOARD APPEALS
3.18 - THE FACULTY APPEALS BOARD
3.19 - FACULTY APPEALS BOARD PROCESS
3.19.1 - Initiation of Appeal and Request for a Faculty Appeals Board Hearing
3.19.2 - Formal Faculty Appeals Board Hearing Procedure
3.19.3 - Faculty Appeals Board Hearing Regulations
3.19.4 - Disposition of Charges
3.20 - NON-DISCRIMINATION POLICY AND SEXUAL MISCONDUCT, DISCRIMINATION, AND HARASSMENT POLICY AND GRIEVANCE PROCEDURES
3.21 - POST-DOCTORAL FELLOW GRIEVANCE PROCEDURE
3.22 - FACULTY PARTICIPATION IN COMMENCEMENT
3.23 - CANDIDACY FOR POLITICAL OFFICE
3.24 - PROFESSIONAL PRACTICE AND COMPENSATION PLANS

4. STUDENT POLICIES AND SERVICES

4.1 - STUDENT ADMISSION
4.2 - STUDENT ENROLLMENT
4.3 - ENROLLMENT TO AUDIT COURSES
4.4 - ENROLLMENT AS A SPECIAL STUDENT
4.5 - HEALTH SCIENCES CENTER STUDENT ENROLLMENT IN NORMAN CAMPUS COURSES
4.6 - NORMAN CAMPUS STUDENTS ENROLLING IN HEALTH SCIENCES CENTER COURSES
4.7 - OTHER ENROLLMENT OPPORTUNITIES
4.8 - FULL-TIME STUDENTS
4.9 - GRADING SYSTEM AND REPORTING OF GRADES
4.10 - ACADEMIC CALENDAR STANDARDS
4.11 - FINAL EXAMINATIONS
4.12 - COURSE ATTENDANCE-UNIVERSITY OF OKLAHOMA STUDENTS

4.13 - RESIDENT STATUS
4.14 - WAIVER OF FEES
4.15 - TUITION WAIVER FOR GRADUATE ASSISTANTS
4.16 - ACADEMIC APPEALS POLICY AND PROCEDURES
4.17 - ACADEMIC INTEGRITY
4.18 - ACADEMIC MISCONDUCT CODE
4.19 - COMPLETION OF ACADEMIC WORK FOR OTHERS
4.20 - STUDENT PROFESSIONAL BEHAVIOR IN AN ACADEMIC PROGRAM POLICY
4.21 - STUDENT RIGHTS AND RESPONSIBILITIES CODE
4.22 - ETHICS IN RESEARCH
4.23 - INTELLECTUAL PROPERTY POLICY
4.24 - NON-DISCRIMINATION POLICY AND GRIEVANCE PROCEDURE
4.25 - RELEASE OF STUDENT INFORMATION AND ACCESS TO STUDENT RECORDS
4.25.1 - Directory Information
4.25.2 - Confidential Information
4.25.3 - Disclosure of Education Records is Permitted
4.25.4 - Record of Requests for Disclosure
4.25.5 - Procedures to Inspect Education Records
4.25.6 - Correction of Education Records
4.25.7 - Limitations on Right of Access
4.25.8 - Refusal to Provide Copies
4.25.9 - Parental Access to Student Academic Records
4.26 - OKLAHOMA OPEN RECORDS ACT
4.27 - E-MAIL
4.28 - HSC STUDENT AFFAIRS & OU-TULSA STUDENT AFFAIRS
4.29 - STUDENT COUNSELING SERVICES
4.30 - OFFICE OF FINANCIAL AID
4.31 - STUDENT GOVERNMENT ASSOCIATION AND STUDENT ORGANIZATION ADVISORS
4.32 - SERVICES FOR STUDENTS WITH A DISABILITY
4.33 - VETERAN SERVICES
4.34 - INTERNATIONAL STUDENT SERVICES
4.35 - STUDENT HEALTH INSURANCE
4.36 - STUDENT HEALTH SERVICES
4.37 - STUDENT IMMUNIZATIONS
4.38 - UNIVERSITY HEALTH CLUB AND UNIVERSITY REASEARCH PARK HEALTH CLUB-OKLAHOMA CITY
4.39 - OU TULSA FITNESS CENTER
4.40 - ENGLISH LANGUAGE PROFICIENCY
4.41 - HONORS PROGRAM

5. GENERAL POLICIES AND SERVICES

5.1 - NON-DISCRIMINATION POLICY
5.2 - SEXUAL MISCONDUCT, DISCRIMINATION AND HARASSMENT POLICY, AND CONSENSUAL SEXUAL RELATIONSHIPS POLICIES
5.3 - REASONABLE ACCOMMODATION POLICY
5.4 - LOYALTY OATH
5.5 - NEPOTISM
5.6 - ACCESS TO PERSONNEL FILE POLICY
5.7 - EMPLOYEE ASSISTANCE PROGRAM
5.8 - HEALTH AND SAFETY POLICY - UNIVERSITY OF OKLAHOMA
5.9 - COMMUNICABLE DISEASE POLICY
5.10 - TOBACCO-FREE POLICY
5.11 - POLICY ON PREVENTION OF ALCOHOL ABUSE AND DRUG USE ON CAMPUS AND IN THE WORKPLACE
5.12 - POLICY FOR WORKPLACE THREATS AND VIOLENCE
5.13 - REMOVAL OF INDIVIDUALS NOT AFFILIATED WITH THE UNIVERSITY FROM UNIVERSITY PREMISES
5.14 - UNIVERSITY OF OKLAHOMA FIREARMS POLICY
5.15 - PRIVATE FUND RAISING
5.15.1 - Health Sciences Center Office of University Advancement
5.15.2 - University of Oklahoma Foundation, Inc.
5.16 - UNIVERSITY OF OKLAHOMA PRESS
5.17 - UNIVERSITY NAME, LOGOS, OTHER IDENTIFYING MARKS, AND SEAL
5.18 - CERTIFICATES
5.19 - OFFICIAL COMMUNICATIONS
5.20 - NEWS RELEASES
5.21 - CONTACTS WITH REPORTERS
5.22 - PUBLICATIONS AND PROMOTIONAL MATERIALS POLICY, SOCIAL MEDIA

5.23 - ADVERTISING AND PROMOTION POLICY
5.23.1 - Endorsement Prohibited
5.23.2 - Purchasing Advertising
5.24 - GENERAL ADMINISTRATIVE POLICIES AND PROCEDURES
5.24.1 - Procurement Procedures
5.24.2 - Authority to Sign Contractual Documents
5.24.3 - Property Controls
5.24.4 - Travel
5.24.5 - Use of State Vehicles for Private Purposes
5.24.6 - Liability Insurance
5.24.7 - Personal Vehicle Use
5.24.8 - Leased/Rented Vehicles
5.24.9 - Parking Regulations
5.24.10 - Police Department
5.24.11 - Lost and Found Service
5.24.12 - Hazardous Weather Conditions Policy
5.24.13 - Emergency Maintenance
5.24.14 - Telephone Service
5.24.15 - Mail Service
5.24.16 - Central Addressing
5.24.17 - Architectural and Engineering Services
5.25 - FACILITIES
5.25.1 - Facilities Management and Capital Planning
5.26 - PILOT PROGRAM FOR ENHANCEMENT OF EMPLOYEE WHISTLEBLOWER PROTECTION
5.27 - FRAUD PREVENTION, REPORTING, AND WHISTLEBLOWER PROTECTION POLICY
5.28 - INFORMATION TECHNOLOGY
5.28.1 - Policies, Standards, and Procedures
5.28.2 - Campus Events and Activity Notices
5.28.3 - Rounds and Seminars
5.29 - INTERNATIONAL TRAVEL REGISTRATION AND REVIEW POLICY

6. BENEFITS

6.1 - BENEFITS PROGRAMS
6.1.1 - Faculty Appointments – Benefits
6.1.2 - Benefits Continuation
6.2 - RETIREMENT PLANS
6.3 - OTHER RETIREMENT BENEFITS
6.3.1 - Eligibility for Retirement
6.3.2 - Benefits Upon Retirement
6.3.3 - Phased Retirement
6.3.4 - Retirees Returning to Work
6.4 - LEAVES POLICY
6.4.1 - Leave of Absence Without Pay
6.4.2 - Paid Time-Off (PTO)
6.4.3 - Extended Sick Leave Policy (ESL)
6.4.4 - Administrative Leave
6.4.5 - Military Leave of Absence
6.4.6 - Re-Employment Rights After Military Leave
6.4.7 - Family and Medical Leave
6.4.8 - Shared Leave Policy
6.4.9 - Leave to Donate Bone Marrow or Organs
6.4.10 - Breastfeeding Support
6.4.11 - Jury Duty
6.5 - HOLIDAYS
6.6 - ATTENDANCE AT SUMMER INSTITUTES
6.7 - ATHLETIC TICKETS
6.8 - CREDIT UNIONS
6.9 - ENROLLMENT OF FACULTY AND STAFF IN UNIVERSITY COURSES
6.10 - FACULTY HOUSE
6.11 - IDENTIFICATION CARD
6.12 - UNIVERSITY HEALTH CLUB, UNIVERSITY RESEARCH PARK HELATH CLUB, AND OU TULSA FITNESS CENTER

7. LIBRARY FACILITIES AND INFORMATION TECHNOLOGY

7.1 - ROBERT M. BIRD HEALTH SCIENCES LIBRARY
7.1.1 - Collections
7.1.2 - Services
7.2 - UNIVERSITY OF OKLAHOMA – TULSA LIBRARY
7.2.1 - Collections
7.2.2 - Services

8. RESEARCH

8.1 - OFFICE OF RESEARCH ADMINISTRATION
8.1.1 - Proposals and Contracts
8.1.2 - Routing Proposals
8.1.3 - Routing Contracts
8.1.4 - Funding Opportunities
8.1.5 - Institutional Committee Reviews
8.2 - DIVISION OF COMPARATIVE MEDICINE
8.3 - RESEARCH COUNCIL
8.4 - POLICY FOR CONSULTING ON GRANTS AND RESEARCH CONTRACTS AWARDED TO THE HEALTH SCIENCES CENTER
8.5 - SPONSORED PROGRAMS INCENTIVE PLAN POLICY
8.6 - POLICY REGARDING PRINCIPAL INVESTIGATOR ELIGIBILITY AT THE UNIVERSITY OF OKLAHOMA HEALTH SCIENCES CENTER
8.7 - UNIVERSITY OF OKAHOMA HEALTH SCIENCES CENTER POLICY ON LEVEL OF EFFORT COMMITTED ON SPONSORED PROGRAMS
8.8 - ALLOWABLE SALARY ON OUHSC GRANTS AND CONTRACTS FOR OUHSC EMPLOYEES WITH VA APPOINTMENTS
8.9 - UNIVERSITY OF OKLAHOMA HEALTH SCIENCES CENTER FACILITIES AND ADMINISTRATIVE COSTS POLICY FOR EXTERNALLY FUNDED PROJECTS
8.10 - POLICY REGARDING FACILITIES AND ADMINISTRATIVE (F&A) COSTS ON CLINICAL TRIALS
8.11 - SERVICE AS PROMOTIONAL SPEAKER FOR PRIVATE INDUSTRY
8.12 - ETHICS IN RESEARCH
8.13 - SBIR/STTR PROGRAMS
8.14 - INTERNATIONAL TRAVEL REGISTRATION AND REVIEW POLICY
8.15 - EXPORT CONTROLS

9. COMPLIANCE

9.1 - OFFICE OF COMPLIANCE
9.1.1 - Healthcare Billing Compliance
9.1.2 - Environmental Health and Safety Office (EHSO)
9.1.3 - Human Research Participant Protection (HRPP)
9.1.4 - Institutional Animal Care and Use Committee (IACUC)
9.1.5 - Radiation Safety Office (RSO)
9.1.6 - Institutional Biological Safety Committee (IBC)
9.1.7 - HIPAA Compliance Program

APPENDICES

APPENDIX A **Charter of the Regular Faculty and the Faculty Senate Health Sciences Center**

APPENDIX B **Charter of the Graduate Faculty and the Graduate Council**

APPENDIX C **Student Academic Policies**
C.1 - Academic Appeals Policy and Procedures
C.2 - Academic Misconduct Code
Flowchart – Scholarly Misconduct Procedures
C.3 - Student Professional Behavior in an Academic Program Policy – HSC
C.4 - Criminal Background Checks Policy for Current Students and Conditionally Accepted Students – Health Sciences Center
C.5 - Student Rights and Responsibilities Code and Procedures

APPENDIX D	**Intellectual Property Policy**
APPENDIX E	**Conflicts of Interest** **E.1 - Policy Regarding Conflicts of Interest** **E.2 - Institutional Conflict of Interest in Research Activities**
APPENDIX F	**Financial Emergency Policy**
APPENDIX G	**Program Discontinuance Policy**
APPENDIX H	**Sexual Misconduct, Discrimination and Harassment Policy**
APPENDIX I	**Consensual Sexual Relationships Policy**
APPENDIX J	**Non-Discrimination Policy**
APPENDIX K	**Opens Records Policy**
APPENDIX L	**Leave Policies** **L.1 - Shared Leave Policy – University of Oklahoma** **L.2 - Family and Medical Leave Act (FMLA)**
APPENDIX M	**Professional Practice Plans** **M.1 - College of Allied Health** **M.2 - College of Dentistry** **M.3 - College of Medicine** **M.5 - College of Medicine Faculty Compensation Plan** **M.6 - College of Nursing** **M.7 - College of Pharmacy** **M.8 - College of Public Health**
APPENDIX N	**Post-Doctoral Fellow Grievance Procedure**
APPENDIX P	**Ethics in Research**

1. UNIVERSITY OF OKLAHOMA HEALTH SCIENCES: GENERAL INFORMATION

1.1 HISTORY

The University of Oklahoma was founded upon authority of an act of the first legislature of the Territory of Oklahoma 17 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 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 affiliated with a corporate entity in the health sciences. 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 hospitals were managed under the title of OU Medical Center, formerly University Health Partners, but each retained its unique identity and special characteristics.

On February 1, 2018, OU Medical Center, The Children's Hospital, and OU Medical Center-Edmond ended their contract with HCA to become a locally owned and -managed nonprofit organization, OU Medicine. The group of hospitals began working under the umbrella brand of OU Health in October of 2020 and were renamed OU Health University of Oklahoma Medical Center, Oklahoma Children's Hospital OU Health, and OU Health Edmond Medical Center. In partnership with the University, OU Health provides the state's only comprehensive academic health system of hospitals, clinics, and centers of excellence focused on delivering evidence-based healthcare. OU Health Physicians, the state's largest and most comprehensive physician practice, cares for OU Health patients, and the majority of providers conduct research and train future physicians as members of the University faculty. Oklahoma Children's Hospital OU Health, Oklahoma's only freestanding children's hospital, provides comprehensive pediatric healthcare to the state and the region. OU Health also includes the only National Cancer Institute (NCI)-Designated Cancer Center – OU Health Stephenson Cancer Center at the OU Health Sciences– and the state's only Level 1 trauma center for both adults and children.

1.2 UNIVERSITY OF OKLAHOMA HEALTH SCIENCES CAMPUSES

The University of Oklahoma Health Sciences 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 OU Health Sciences 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 OU Health Sciences, approximately 3,600 students are enrolled in the more than 70 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 OU Health Sciences. These figures do not include over 3,000 volunteer physicians and other health professionals.

OU Health Sciences faculty and students use the clinical, laboratory, and teaching facilities of OU Health University of Oklahoma Medical Center and Surgery Center, OU Physicians Building, Oklahoma Children's Hospital OU Health and clinics, OU Health Stephenson Cancer Center at the OU Health Sciences, and OU Health Harold Hamm Diabetes Center at the OU Health Sciences. Students also use the facilities of Veteran's Affairs Medical Center, Dean A. McGee Eye Institute, 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 OU Health Sciences is one of a group of over 16 lead public and private health care and related institutions that make up the Oklahoma Health Center, including, but not limited to, the American Red Cross Central and Southwest Oklahoma Chapter; Dean A. McGee Eye Institute; Oklahoma Allergy and Asthma Clinic; Sylvan N. Goldman Center Oklahoma Blood Institute; Oklahoma Medical Research Foundation; Oklahoma School of Science and Mathematics; Veterans Affairs Medical Center; Presbyterian Health Foundation; OU Health University of Oklahoma Medical Center; Oklahoma Children's Hospital OU Health; University Hospitals Trust and numerous biotech and research organizations.

The OU Health Sciences 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 OU Health Sciences. 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 OU Health Stephenson Cancer Center at the OU Health Sciences, OU Health Harold Hamm Diabetes Center at the OU Health Sciences, OU Physicians Building, OU Health Family Medicine Center, Williams Pavilion, OU College of Medicine Academic Office Tower (Andrews Academic Tower), and other clinical facilities.

The Dental Clinical Sciences Building (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 in the College, which give the building its unique shape of a molar, 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 expanded in Spring 2022 to include a teaching and clinic site on the OU Tulsa Campus.

The Hudson College of Public Health occupies the OU Health Sciences' original teaching structure. The original medical school facility, completed in 1928, was renamed the College of Health Building and was renovated substantially in 1981. In September of 2018, the College was renamed OU Hudson College of Public Health.

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; Interprofessional Language Enrichment and Pre-Kindergarten Program (iLeap); faculty, staff, and student offices; and building support spaces.

The College of Nursing Building on Stonewall Avenue was dedicated in 1977 and named the OU Fran and Earl Ziegler College of Nursing in 2015. The College itself was founded in 1911 as a two-year School of Nursing. When the first nursing students graduated in 1913, the program became a three-year diploma program. In 1957, the School of Nursing was authorized to grant baccalaureate nursing degrees. 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 also operates classroom and simulation spaces in the University Research Park.

The College of Pharmacy, the University's oldest degree granting college and home to OU's first two graduates in 1896, moved its base of operations from the Norman campus to the OU Health Sciences in the Fall of 1976. The College moved into its newly completed facility, the Henry D. and Ida Mosier Pharmacy Building, in 1983. With the College's original mission of providing training for pharmacists, the College is deeply involved in pharmaceutical research and provides outreach programs for the public and practicing pharmacists.

The OU Health Sciences purchased the Medical Examiner's Building in 2018 and in 2022 renovated the building for the College of Pharmacy and renamed the building the Pharmacy Services Building. The Pharmacy Services Building houses the 1896 Pharmacy and the Nuclear Pharmacy program, which provides products for cancer patients and cancer research.

The Robert M. Bird OU Health Sciences Library was dedicated in 1978. The Library is the state's major repository for medical literature and houses the History of Medicine Collection. In addition to library services, the building houses the Offices of the President, Senior Vice President and Provost, Legal Counsel, Enterprise Risk Management,

Compliance, Research Integrity, Alumni and Development, Marketing & Communications, Institutional Equity, Graduate College, and Academic Affairs and Faculty Development.

The OUHSC Technology Center was built in 1971 and was acquired from the Oklahoma Medical Research Foundation in 1989. The 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 OU Health Sciences' first Family Medicine Clinic, was renovated in 1997, and a technical facility was completed in the same year. This facility is now the Interdisciplinary Learning Building, used for interdisciplinary instruction space.

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 OU Health Physicians 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. An addition to building in 2002 provided a new, modern classroom for Physician Associate Students.

The first two floors of the Student Center were completed in 1996 at a total project cost of $4 million and contained 26,900 gross square feet, including food service, meeting rooms, and HSC Student Government Association offices on the first floor and conference and study rooms and computer facilities on the second floor. A third-floor addition, containing an additional 12,000 gross square feet, was completed in 2002 at a construction cost of $2.7 million. The third floor includes an area to allow for student study, campus events, and socialization. The Union houses the Information Technology Help Desk, OU Health Sciences Student Affairs, and OU Health Sciences Recruitment & Admissions.

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 several of the campus core facilities. The Johnnie Crutchfield Research Laboratory located on the first floor contains three divisions of the OUHSC Institutional Research Core Facility: the division of DNA sequencing/Genomics, the Mass Spectrometry/Proteomics divisions, and the Metabolomics division. The other divisions of the IRCF include the Flow and Image Cytometry division, located on the third floor of BRC West; the Biosafety Level 3 lab on the first floor of BRC North; and the Macromolecular Crystallography on the fourth floor of BRC North.

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. OU Health manages the adult and pediatric clinical care at facilities in Oklahoma City and Tulsa, as well as at affiliated sites across the state.

Also acquired in 2009, the University Health Club is a premier health and fitness facility 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 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 OU Health Sciences campus, on the southwest corner of 8th Street and Lincoln Blvd. There is a second location at the University Research Park that 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 Health Breast Health Network-Central clinic.

The Peggy and Charles Stephenson Cancer Center opened in 2011 and is Oklahoma's only National Cancer Institute-designated 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 OU Health Sciences acquired the PHF Research Park in 2013, renaming it the University Research Park. A valuable asset at the Oklahoma Health Center, the University Research Park is a growing venture that contains six biotechnology research buildings that support more than 50 private companies, private-public initiatives, and many University activities. The University 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), a nine-story building completed in late 2016, is home to several academic departments and administrative offices of the 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 building. The Dean's Office staff and the Office of Continuing Professional Development are also located in the building.

The OU Health Sciences purchase of the OU Health Partners Building (formerly Oklahoma City Clinic) was completed in 2016. The clinical building contains 147,439 square feet to include a 13,700 square feet surgery center on four acres, strategically located in the center of the OUHSC campus.

The Service Center Building, formerly the Moon Junior High School, was built in the 1920s and purchased and expanded on in the 1970's. The Service Center Building houses the Facilities Management administrative offices and shops on the east side, and the west side consists of office space occupied by external tenants and OUHSC departments.

The G. Rainey Williams Pavilion originally began as a two-story structure in 1978 as the Physicians and Education Building and was added onto in the early 1980s. In 1995 the building was renamed to honor Dr. Williams who was a true gentleman, consummate thoracic and cardiovascular surgeon, master teacher, and role model physician who influenced the careers of countless students and residents. The building houses clinical and office space such as for Psychiatry/Psychology, Stephenson Cancer Center Clinical Trials and Research, the OK Breastfeeding Resource Center, Student Counseling Services, Recruitment and Admissions, Access and Opportunity, OU Education Services, and Community Outreach and Engagement.

The Mark Allen Everett Dermatology Clinic was originally built in 1970 with several additions since. In 2025 the building will be renovated to accommodate the College of Dentistry Faculty Practice, including its Pediatric Residency Clinic.

The O'Donoghue Research Building was originally built in 1979 and was a physical rehabilitation hospital for neurological cases. Today it houses several different medical research groups, the Oklahoma Healthy Aging Initiative program, administrative offices for the College of Pharmacy, and office and student space for the Physician Associate Program, Immigration Services, and others.

The Child Study Center it is affiliated with the Department of Psychiatry and Behavioral Sciences in the College of Medicine and Oklahoma Children's Hospital OU Health. It is a diagnostic and psychological testing center for people under the age of 21.

The University of Oklahoma-Tulsa operates in 25 buildings across Tulsa consisting of over 841,000 square feet. The Schusterman Center was acquired in 1999. The campus in the center of Tulsa originally was a 60-acre site with 16 buildings and 343,000 gross square feet. Since then, the Schusterman Center Clinic, Parking Garage, Learning Center Library, and Tandy Education Center have been built on the site increasing the square feet to 729,000. The Schusterman Center campus houses academic and research programs from Norman and the Oklahoma City campuses. The current OU Health Sciences professional and graduate programs offered in Tulsa are the Colleges of Allied Health, Medicine, Nursing, Dentistry, and Public Health. The campus also provides medical and dental clinical

services and large venues for events. The Tandy Education Center was added in 2016, featuring the latest advances in medical simulation and a training and feedback method in which students practice in lifelike circumstances using models or virtual reality.

OU Physicians' 42,000 square feet Wayman Tisdale Specialty Health Clinic opened in 2013. Located at 36th Street North and Hartford Avenue in Tulsa. The clinic was named in memory of the late OU and NBA basketball star, Olympic gold medalist, and musician Wayman Tisdale. It was built in response to a study showing a considerably lower life expectancy rate in north Tulsa compared to south Tulsa. One of the most important benefits of the clinic is the access it provides to primary care and specialty health services for the residents in north Tulsa and surrounding communities.

In 2005, the 60,000 gross square foot Hillcrest Family Medicine Center was constructed in Tulsa, and in 2017 the 10,000 square foot South Memorial Clinic facility was purchased to provide healthcare services to people living in Tulsa and the surrounding areas.

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 Oklahoma Senate. The members serve nine year overlapping terms.

The Board's 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 five times per year and are open to the public. The Executive 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 3305*, Oklahoma Statutes*.

2.3 ADMINISTRATIVE ORGANIZATION

The administrative organization of the University exists for the purposes of providing leadership and facilitating 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 OU Health Sciences is available at 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, OU Health Sciences; the Senior Vice President and Chief Financial Officer; the Vice President for Executive Affairs and Chief of Staff; Campus Operations; Vice President of Access and Opportunity; Enrollment Management; Human Resources and Chief Human Resources Officer; Intercollegiate Athletics Programs and Director of Athletics; Online Learning, Research and Partnerships, and Student Affairs; Vice President and General Counsel; Chief Government Affairs Officer; Chief Strategy Officer; Institutional Equity Officer; Chief Communications Officer; the Chief Audit Executive; and Vice-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, OU Health Sciences
Senior Vice President and Chief Financial Officer

Vice President and General Counsel
Vice President of Executive Affairs

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

In the event the President shall resign, be incapacitated, be on an extended leave of absence, or otherwise be unable to perform the duties of President 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. Until such time as such Acting or Interim President is designated, the above order of succession shall be applicable.

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

2.3.3 Senior Vice President and Provost, OU Health Sciences

The Senior Vice President and Provost of the OU Health Sciences is responsible to the President as the chief executive officer for this campus and its programs. 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, strategic planning and budgeting, 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 Provost, OU Health Sciences Administration; Vice President for Research; and Vice Provost for Academic Affairs and Faculty Development.

The Leadership Committee is composed of the Deans' Council, the principal staff, and the Senior Vice President and Provost, who serves as Chair. The Senior Vice President and Provost may appoint other campus leaders as appropriate. The Leadership Committee 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 Senior Vice President and Chief Financial Officer

Administration and Finance is responsible for leading the University's financial planning, and providing strategic management of accounting and finance functions, record-keeping and financial reporting. Areas of oversight are Budget and Financial Planning, Bursar Services, Financial Services/Controller, Human Resources, Information Technology, Payroll and Employee Services, Research Financial Services, and Shared Business Services Center.

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

2.3.5 Vice President for Research, OU Health Sciences

The Vice President for Research is responsible for the development and/or dissemination of official policies in the research and creative activity areas. 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 oversees the Office of Technology Commercialization to promote and facilitate the development of commercialization intellectual property relating to health care. The Vice President for Research also has responsibility for and oversight of the Core Laboratory Services, Research Informatics Applications, Office of Export Controls, Division of Comparative Medicine, Office of Research Administration, Institutional Animal Care and Use Committee (IACUC), and the Institutional Biosafety Review Committee (IBC).

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

2.3.6 Vice President, OU Tulsa

The Vice President, OU Tulsa, is a senior leader for the University of Oklahoma who reports to the University President and is a member of the President's team of Executive Officers. The Vice President, OU Tulsa, leads initiatives for OU-Tulsa that build and execute brand; strengthens marketing and communications; fosters strategic partnerships; and expands relationships with policy makers, industry leaders, influencers, and stakeholders. While all issues regarding academics and

research on the OU Tulsa campus are within the sole authority of the appropriate Senior Vice President and Provost, the Vice President, OU Tulsa, collaborates with the Provosts of the Norman and the OU Health Sciences campuses and their designated staff members in supporting and furthering the missions and priorities of the Norman and OU Health Sciences academic and research programs represented at OU Tulsa.

(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, UNIVERSITY OF OKLAHOMA HEALTH SCIENCES

The Faculty Senate at the OU Health Sciences is composed of members of the General Faculty of the OU Health Sciences. Each college on the campus is represented in the Senate according to a formula defined in the Charter of the General Faculty and Faculty Senate. Representatives of the Faculty Senate shall be elected by and from each college. They shall be elected for a three-year term.
The Senate exercises the powers of the General Faculty of the OU Health Sciences as delegated by the General Faculty (see Appendix A).

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

2.5 STUDENT GOVERNMENT ASSOCIATION & STUDENT ORGANIZATIONS

Every student enrolled in the OU Health Sciences campus program is a member of the OU Health Sciences Student Government Association (OU Health Sciences SGA) and is encouraged to participate in campus programming and engagement designed for a comprehensive academic health center. The OU Health Sciences SGA is composed of an Executive Board, Executive Council, and Student Senate. Executive Board members are annually elected by the OU Health Sciences Student Senate in April. Legislative powers of the OU Health Sciences Student Government Association shall be vested in the OU Health Sciences Student Senate. Representation to the OU Health Sciences Student Government Association Student Senate is on a basis of one voting member per 100 students enrolled, with each college's constituency guaranteed at least three voting members to ensure the student voice in the campus community. The OU Health Sciences SGA receives 10 percent of the student activity fee funding for disbursement to student organizations that are recognized by the University through registration and affiliation via OU Health Sciences & OU-Tulsa Student Affairs. The activities of Registered Student Organizations are not sponsored or endorsed by the University.

Each of the seven health professions colleges has one or more student-led organizations, which are supported by a college's student council/association. Academic and student organizations vary by college and are delineated in each organization's constitution. Each Registered Student Organization can apply for a portion of the student activity fees from the students it represents to use for various student activities and benefits.

OU Health Sciences program students geographically assigned to OU-Tulsa can participate in OU-Tulsa Student Government Association (OUTSA). Faculty and staff members can serve as advisers to registered student organizations with support from OU Health Sciences & OU-Tulsa Student Affairs

2.6 STAFF SENATES

The OU Health Sciences Staff Senate was organized to serve as a representative body for the staff of the OU Health Sciences. 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, OU Health Sciences*, approved by the Regents, 1974, 5-8-80; President 12-7-95, 12-05; Tulsa Campus 3-29-07)

2.7 COUNCILS AND COMMITTEES

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 that affect their responsibilities and welfare.

(b) are a means of marshaling the wide range of knowledge and expertise on all subjects available to the University to 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)

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. OU Health Sciences 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, staff, 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 *exofficio* 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. Faculty Senate may establish standing committees by recommendation from the Faculty Senate and approval of the Senior Vice President and Provost and the President. The President may establish specific committees, as may the Senior Vice President and Provost and the Board of Regents. Committees may be altered in their function or abolished upon recommendation of the Faculty Senate and approval of the President or in accordance with the policy that established the committee.

The membership of a standing committee varies with its function, but faculty participation is desired on all standing and specific committees. The terms of membership are stated when a committee is established. The Faculty Senate Committee on Committees makes membership recommendations in accordance with the policy establishing each standing committee. It may also make recommendations and appointments to specific committees, such as those established by the Senior Vice President and Provost or Board of Regents. Examples include:

Shared Leave Committee
Conflict of Interest Committee
OU IT Teaching and Learning Technologies Advisory Committee

Membership selection and appointment to the following standing committees are typically made by the President.

Campus Tenure Committee, OU Health Sciences
Commencement Committee
Committee on Discrimination and Harassment, OU Health Sciences
Employment Benefits Committee
Faculty Appeals Board, OU Health Sciences
Faculty Compensation Committee, OU Health Sciences
Honorary Degrees Screening Committee
Library Advisory Committee, OU Health Sciences
Presidential Professorship Selection Committee, OU Health Sciences
Retirement Plans Management Committee
IT Advisory Committee
Scholars Selection Committee
Copyright Committee
Patent 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, as appropriate, the 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.

2.7.5 Attendance Requirements for 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 search 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 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 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, OU Health Sciences, college, and departmental polices.

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 (typically 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 of the College.

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 the departmental faculty. Where appropriate, outside consultants should 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, as well as the Senior Vice President and Provost, 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 confer with the Senior Vice President and Provost and 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 University of Oklahoma Health 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 FACULTY APPOINTMENTS AND INFORMATION

The General Faculty of the University of Oklahoma Health Sciences 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.

Faculty appointment types may be tenured, tenure track, consecutive term, limited term, or volunteer (see Sections 3.1.1 – 3.1.6). 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, and if required, the President, and Board of Regents. The appointment must indicate the primary academic unit to which the faculty member is appointed.

For purposes of this Section 3, full-time FTE equivalent shall include those faculty whose combined OUHSC and OU Health (OUH)/OU Health Partners, Inc. (OUHPI) appointments or contracts for service total 1.0 (Dual employment), as well as those faculty who hold a 1.0 FTE at OUH/OUHPI with an academic appointment at OUHSC but without an assigned FTE or remuneration (Dual appointment). Dually-appointed faculty hired on or after January 1, 2023, may hold a consecutive term, tenure track, or limited term appointment, at the discretion of the department and college and subject to the proscribed appointment approval processes.

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 various factors, such as a faculty member's satisfactory performance and/or the academic unit's needs. Termination of employment without cause may become effective at any time, subject to notification requirements in Section 3.2.3.

Additional policies related to the faculty and the Faculty Senate are contained in Appendices A and B.

(Regents, 6-12-25)

3.1.1 Regular Faculty

A subset of the General Faculty is Regular Faculty. The Regular Faculty is composed of all full-time faculty with unmodified academic titles (assistant professor, associate professor, and professor) and shall be limited to those who hold tenured, tenure track, or consecutive term appointments who devote their full-time professional effort to University activities, including through dual employment/appointment at approved external entities. Regular Faculty may be paid all or in part by OUH/OUHPI (see, Section 3.1.3).

(a) Tenured appointments are automatically renewed.

(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 3.2.3, or 3.16.1.

(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 3.2.3 or 3.16.1.

(Regents, 3-12-24, 6-12-25)

3.1.2 Limited Term Faculty

Another subset of the General Faculty is Limited Term Faculty. Limited Term Faculty may be full-time or part-time and shall have academic titles such as instructor or lecturer, or titles modified by prefixes such as visiting, adjunct, instructional, or clinical.

Limited term Faculty may be paid all or in part by OUH/OUHPI (see, Section 3.1.3).

a) **Research** – Faculty holding limited term research appointments typically have titles of assistant professor of research, associate professor of research, or professor of research.
b) **Other** –
   i) Instructor 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.

Limited term appointments are not Regular Faculty appointments. Changes in Limited Term appointments can be requested in accordance with Section 3.2.2. Individuals serving in limited term appointments serve at the discretion of the chair with concurrence for their appointment and termination by the dean. Limited term appointments can be terminated with no less than 60 days' written notice from the dean of the faculty member's academic home dean. An exception to the 60-day written notice requirement may be made by the dean for terminations for cause under 3.16.1. In such cases, termination may be effective immediately.

Limited term faculty are not permitted to appeal termination to the Faculty Appeals Board.

(Regents, 3-12-24, 6-12-25)

3.1.3 Dually-Employed/Appointed Faculty

Dually-employed/appointed faculty are in paid or unpaid regular or limited term faculty appointments as defined below. Unless specified otherwise in the Proposed Terms of Faculty Appointment or Official Offer of Faculty Appointment Letter from the University, as many of the academic duties of dually-employed/appointed faculty occur in the hospital or clinical setting, dually-employed/appointed faculty members are required to maintain an employment relationship with the approved external entity, as a condition of their continued University appointment.

a) **Dual employees/appointees** are members of the General Faculty and may also be considered full-time, Regular Faculty, as more fully described in Section 3.2 below.

b) **Dual employees, dually-employed, and dual employment** shall mean those faculty who hold a paid academic appointment at OUHSC and a paid clinical position with OUHPI.
c) **Dually-employed OTRS Physicians** are faculty physicians who, at the time of integration, elected to retain employment with the University in order to continue their participation in the Oklahoma Teacher's Retirement System, rather than transfer employment to OU Health Partners, Inc. These physicians perform professional, clinical, and administrative services for OUH or OUHPI through an agreement between OUH or OUHPI and the University for their services ("OTRS Physicians"). The OTRS Physicians completed a Provider Acknowledgment agreeing to comply with all applicable OU Health and OUHPI policies and procedures. As dually-employed faculty, OTRS Physicians are required to continue to provide services at OU Health or OUHPI as a condition of their continued University appointment/employment.

d) **Dual appointees, dually-appointed, or dual appointment** shall mean those faculty who hold an unpaid (0.0 FTE) academic appointment at OUHSC and are employed at OUH/OUHPI.

References to "dual employee/appointee," "dually-employed/appointed," or "dual employment/appointment" shall apply to both paid and unpaid members of the General Faculty.

Dually-employed/appointed faculty may have the following titles:
a) Regular Faculty Appointments - Assistant Professor, Associate Professor, and Professor

b) Limited Term Faculty Appointments - Instructor, Clinical Instructor, Clinical Assistant Professor, Clinical Associate Professor, Clinical Professor, Instructional Assistant Professor, Instructional Associate Professor, and Instructional Professor or similar, as approved by the Senior Vice President and Provost.

(Regents, 3-12-24, 6-12-25)

3.1.4 Volunteer Faculty

Another subset of the General Faculty is 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.

Volunteer faculty must receive an Official Offer of Volunteer Faculty Appointment Letter, as approved by the Office of the Senior Vice President and Provost. The letter must outline the terms of the individual's responsibilities and conditions pertaining to the appointment. All volunteer faculty appointments must be entered into the University's appointment system. Volunteer faculty must take required University training.

(Regents, 1-26-99, 12-3-02, 6-25-08, 12-7-12, 9-14-17,3-9-22,3-12-24, 6-12-25)

3.1.5 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, dual employee/appointee, or volunteer faculty title upon the retirement of limited term, dual employee/appointee, 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/academic officers upon retirement or resignation from the position.

Emeritus faculty with continued access to University resources must take required University training.

(President, 9-10-85, Regents 12-7-12, 9-14-17)
(Regents, 1-26-99, 12-3-02, 12-7-12, 3-9-22)
(Regents, 1-26-99, 12-3-02, 6-25-08, 12-7-12, 9-14-17,3-9-22,3-12-24)

3.1.6 Health Professions Educators

Health Profession Educators (HPEs) are considered academic employees who serve in a limited and temporary capacity as an instructor. They are not eligible for benefits or any type of paid leave. Their only academic title is Health Professions Educator and they are not considered part of the General Faculty. HPEs serve in appointments at the discretion of the chair with concurrence of the dean. HPE appointments can be terminated at any time upon written notice to the HPE. HPEs are not permitted to appeal termination to the Faculty Appeals Board.

HPE appointees must be provided an Official Offer of HPE appointment letter, as approved by the Office of the Senior Vice President and Provost. The letter must outline the terms of the individual's responsibilities and conditions pertaining to the appointment. All HPE appointments and must be entered into the University's appointment system.

(Regents, 3-12-24)

3.1.7 Part-Time Appointments

A part-time appointment is one at less than 1.0 Full-Time Equivalent (FTE) (including dual employment/appointments with a combined FTE of less than 1.0), and has a modified title. It is considered limited term (see 3.1.2).

In advance of offering any part-time appointment, the academic unit and the faculty member 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. For new part-time faculty appointments, the terms of the appointment must be included in a Proposed Terms of Faculty Appointment letter. For a modification of a current faculty appointment, the terms must be included in a Faculty Appointment Change Memo (see 3.2.1 and 3.2.2).

(Regents, 7-15-96, 12-3-02, 12-7-12, 9-14-17,3-9-22,3-12-24)

3.1.8 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. For new primary appointment, the terms of the appointment must be included in a Proposed Terms of Faculty Appointment letter. For a modification of a current primary faculty appointment, the terms must be included in a Faculty Appointment Change Memo (see 3.2.1 and 3.2.2).

~~(b)~~ **Joint Appointments** – Appointments in two academic units or colleges (joint appointments) are permissible. Joint appointments must be in academic units only, not in a Center or Institute or similar entity. Joint appointments consist of a primary appointment in two academic units or colleges and cannot total more than 1.0 Full-Time Equivalent (FTE). A joint appointment may be offered to a new or current faculty member who will participate on an ongoing basis in both academic units' activities at a level significant enough to justify compensation and satisfy the Promotion are Tenure requirements of both academic units. The faculty member is appointed with the same title in each academic unit. A faculty member holding a joint appointment is expected to perform the same general responsibilities as the other faculty in each academic unit. Joint appointments must be approved by both academic units and colleges involved, and the Senior Vice President and Provost and where required the President, and the Board of Regents, consistent with the criteria below.

(c) 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. For new joint appointment, the terms of the appointment must be included in a Proposed Terms of Faculty Appointment letter. For a modification of a current joint faculty appointment, the terms must be included in a Faculty Appointment Change Memo (see 3.2.1 and 3.2.2).

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

(d) **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). A secondary appointment is recommended for a faculty member who holds a primary appointment in one **a**cademic Unit and who participates in the activities of another academic unit, but at a level that is not equivalent to faculty holding primary appointments of that academic unit. The secondary appointment gives the faculty member recognition for work performed in the secondary academic unit but does not but does not include faculty privileges provided to faculty with a primary appointment in the academic unit. Multiple secondary appointments are permitted, as determine appropriate by each Dean. Secondary appointments are modified by prefixes such as adjunct or clinical.

(Regents, 9-14-17,3-12-24)

(e) **Center Memberships** – Faculty must have a primary appointment in an academic unit to hold a membership in a center. Memberships to Centers require approval of the primary academic unit but are not an academic appointment. For Center membership criteria, contact the center director.

Center Supported Faculty Positions may be made with the input and approval of the chair and dean of the academic home, who must be included in only the complete hiring process and hiring decision. A signed faculty memorandum of understanding ("MOU") must be in place for the faculty hire. Academic chairs and deans are responsible for the performance and compensation reviews of faculty in these positions; they are expected to seek input from the center director(s) as appropriate. It is expected that the MOU will be updated if the faculty member has a modification that would impact the salary, title, or duties/responsibilities. Centers may not change the compensation appointment, responsibilities, or supervisor assignment for these faculty; only chairs & deans may initiate such changes.

(Regents, 3-12-24, 6-12-25)

3.2.1 Appointment of New Regular or Limited Term Faculty

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

(a) **Proposed Terms of Faculty Appointment (PTFA)** – The PTFA is the initial written statement provided to a newly appointed faculty member by the department chair or dean that describes the proposed terms of the individual's initial teaching, research, professional/clinical service[1] 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 PTFA do not constitute a guarantee or promise that the responsibilities will remain the same throughout the faculty member's employment. The department chair will provide, or provide access to, copies of the department and/or college tenure and promotion criteria where applicable to the type of appointment. All PTFAs require prior review and approval by the Senior Vice President and Provost.

(b) **Official Offer of Faculty Appointment (OFA)** – The OFA for regular faculty must come from the Senior Vice President and Provost or the President, and will include, when applicable, the statement that appointment is contingent upon the approval of the Board of Regents. The OFA for limited term appointments must come from the Dean if the compensation is under $150,000. It must come from the Senior Vice President and Provost and is contingent on approval by the Board of Regents if it is $150,000 or more. The official offer of faculty appointment will specify academic rank, appointment type (limited term, consecutive term, tenure track), beginning date of employment, base salary/clinical plan, full-time equivalent, length of pre-tenure period if tenure track (see Section 3.8.1(c)), and any special conditions pertaining to employment, including reference to dual employment/appointments and administrative roles and supplements. The OFA is separate from offers made by approved external entities. The official offer will also include information to access an on-line copy of the *Faculty Handbook* and contact information for faculty benefits. If the appointment is contingent upon the approval of the Board of Regents, the faculty member will be notified when such approval is in place.

(c) **Compensation** – The University recognizes that the professional effort of the faculty member may result in compensation in addition to the University base salary or compensation provided by the University. The conditions of such compensation are set out in each college's Professional Practice Plan, Compensation Plan, and/or Faculty Compensation Plan.

(Regents, 7-15-96, 12-3-02, 6-25-08, 12-7-12, 9-14-17, 6-27-19, 9-11-19,3-9-22, 3-12-24, 6-12-25)

3.2.2 Changes in Status

(a) Internal candidates applying for open Regular Faculty positions must meet the promotion and advancement criteria stated in Section 3.9 for the level of position sought.

(b) **Limited Term to Regular Faculty Positions** - 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

1 College of Medicine –dual employees'/appointees' clinical service responsibilities are outlined in the OUH/OUHPI approved external entity employment agreement.

initially appointed to limited term appointments may be moved to regular faculty appointments. Limited term appointments may not be changed to Regular Faculty appointments until all national search 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 Institutional Equity Office.

(Regents, 6-12-25)

(c) **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 on 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.

(d) **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)).

(e) **Tenured Appointments**

(1) 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.

(2) 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 (e)(3)) and (f) below). A faculty member granted tenure who changes from a full-time appointment to a volunteer appointment automatically forfeits tenure status. For clarity, faculty with a dual employment/appointment are considered part-time when their combined FTE is less than 1.0.

(3) A tenured faculty member retains tenure during University phased retirement.

(f) **Temporary Reduction in Employment** - Upon the recommendation of the chair of the academic unit and dean, the Senior Vice President and Provost may approve a tenured, tenure-track, or consecutive term faculty member's written 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., Small Business Innovative Research (SBIR) awards) when it is recommended that a tenured or tenure track faculty member be permitted to reduce employment to less than full-time for a period of six months or more and maintain tenured or tenure-track status, specific approval by the Board of Regents is necessary if the faculty member's full-time compensation exceeds $150,000. A written agreement must be reached among a tenure-track 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. For more information on SBIR/Small Business Technology Transfer (STTR) reductions, see Section 8.13.

(g) **Primarily Administrative Duties** - 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 the Senior Vice President and Provost as to whether the faculty member will remain on the tenure track, at what time they would be reviewed for tenure, and under what conditions.

(Regents, 12-7-12, 9-14-17,3-9-22, 3-12-24)

(f) **Faculty Appointment Change Memo (Change Memo)** – Any changes in faculty status must be documented in a Change Memo. The written statement will be provided to the faculty member by the department chair or dean after the change has been approved by the Senior Vice President and Provost. The Change Memo will describe the appointment change including any modifications to the individual's salary; title; rank; appointment type; the faculty member's teaching, research, professional/clinical service and administrative

responsibilities; and other special conditions pertaining to the appointment. Modified responsibilities and/or duties as set forth in the Change Memo do not constitute a guarantee or promise that the responsibilities will remain the same throughout the faculty member's employment. The department chair will provide, or provide access to, copies of the department and/or college tenure and promotion criteria where applicable to the type of appointment. If the appointment change is contingent upon the approval of the Board of Regents, the Faculty member will be notified of approval following the meeting.

(Regents, 3-12-24)

3.2.3 Notifications of Non-Renewal or Termination of Tenure Track or Consecutive Term Appointment[2]

Action on the non-renewal or termination during an appointment 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. Dual employment/appointments at OUHSC are contingent on maintaining an employment/appointment with OUH/OUHPI or an approved external entity; no further notice of non-renewal or termination is required when a dual employee/appointee no longer holds an appointment at OUH/OUHPI or the approved external entity.

Tenure track or consecutive term appointments can be non-renewed or terminated effective at any time and for any lawful reason with the required notice as indicated in (a), (b), (c), and (d) below. Tenure track or consecutive term appointments can also be terminated for cause pursuant to 3.16.1, with termination effective immediately and not subject to the notice provisions 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 without cause:

(a) Non-renewal or termination within first year of employment* (to be effective on or before the 365th 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.

*These provisions do not apply to dual employees/appointees.

The tenured, tenure track, or consecutive term 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.

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

3.2.4 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, 3-12-24)

[2] For notifications of non-renewal or terminations of Limited Term Appointments, see 3.1.2

3.2.5 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 approved by the Senior Vice President and Provost and do not require President or Board of Regents' approval, unless the faculty member's full-time compensation exceeds $150,000.

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, section, or division is designated in the title as a suffix.

(b) **Non-Academic Administrative Titles** – The titles Vice President, Senior Associate 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, sections, and divisions are led by Directors, Heads, or Chiefs; are appointed by the dean on recommendation of the chair and approved by the Senior Vice President and Provost; and do not require Board of Regents' approval, unless the staff member's full-time compensation exceeds $150,000. The usage of the prefixes Vice, Deputy, Senior, Associate, Assistant, Interim, and Acting is the same as with academic administrative titles.

(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 and, the Senior Vice President and Provost. The Senior Vice President and Provost may also designate "acting" titles.

(Regents 12-7-12, 9-14-17,3-9-22, 3-12-24, 6-12-25)

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 conductive 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. * NOTE: Dual employment/appointment at OU Health/OU Health Partners, Inc., is not considered to be employment outside of the University.

(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:

(Regents 3-9-22, 3-12-24)

"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 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 University of Oklahoma is governed by the Professional Practice or Compensation Plans of the various colleges.

(Regents, 12-3-02, 6-25-08, 12-7-12, 6-24-15(Regents 12-7-12, 9-14-17,3-9-22, 3-12-24, 6-12-25)

3.4 FACULTY ACCOUNTABILITY

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

(a) Faculty who accept full-time employment at the University owe their first faculty 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 or Compensation Plans. Unless the 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 Plan may result in sanctions and disciplinary actions. See Section 3.16 (e).

*Work performed by dually-employed/appointed faculty at an approved external entity is not considered to be outside work, so long as the work is within the duties for which the approved external entity regularly compensates the faculty member.

(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 and being available to students; conducting research or scholarly activity; meeting clinical assignments; providing patient care and/or population health services, and supervising students and/or trainees; reading and remaining professionally competent; attending professional meetings; and participating in meetings and essential committee work of the

department, the college, and the University as a whole. Faculty positions are not considered remote or hybrid, absent compelling temporary circumstances and appropriate written approvals. Deans and chairs will set expectations for faculty obligations, including office hours and expected on-campus work day schedules, which may vary depending on semester teaching load, research awards, clinical/service obligations, and the like.

(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 acknowledge proficient and responsible performance, reward meritorious performance, and identify areas that are marginal or need improvement.

(d) Meritorious, proficient, and responsible faculty performance is first and foremost an individual professional obligation. Responsible performance 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, faculty colleagues, staff, or 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, consistent with applicable policy.

(g) Administrative remedies, including counseling, career development support, reprimands, and other 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, severe sanctions, summary suspension, or termination. (Section 3.16)

(Regents, 1-26-99, 12-3-02, 6-25-08, 12-7-12, 9-14-17, 12-7-12, 9-14-17, 3-9-22, 3-12-24, 6-12-25)

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, multi-disciplinary, 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 University 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, 3-9-22, 3-12-24)

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, multidisciplinary, 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 and career development grants, counseling, and advising students and trainees. This includes the direction or supervision of students and trainees in reading, research, laboratory-based learning, simulation-based learning, 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, online instruction, laboratory or simulation-based instruction, 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 and stay informed about new developments in their field and in effective modes of instruction. They should seek to improve the methods of teaching their subject, use appropriate instructional methods and 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. Additionally, reputation may be evidenced by the publication of such instructional materials as laboratory, simulation, or instructional manuals; teaching cases for classroom; simulation or standardized patients; and development and use of video or audio instruction such as podcasting, online or distance education tools, or multimedia instructional materials and computer-assisted learning. Faculty may also develop and leverage the use of artificial intelligence tools to augment learning, and/or to refine the scope of assessment tools or 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, 3-12-24, 6-12-25)

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, implementation research, new application of information technology or artificial intelligence to improve education or health care, population health, health literacy, 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 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, 3-12-24, 6-12-25)

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 or the design and implementation of evidence-based

practices in clinical or health care provision or population health interventions, 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, including interdisciplinary and interprofessional programs.

Professional service also includes leading core research support services, 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 can 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 or population health services; 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, core facility, 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, 3-12-24, 6-12-25)

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 and compensation 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 (i.e., activities not associated with intentional efforts to build pathways into the health professions and biomedical sciences) are not included in this definition of Public Outreach, and as such, civic activities are 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 and/or evidence-based knowledge with the community toward this end. Public Outreach also helps OUHSC faculty and students learn to be aware of, engaged in, and responsive to the needs of our diverse population.

(Regents, 6-12-25)

(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 negatively impact the needs or resources of the department

(c) **PPP/Compensation Plan Exception for Certain Public Outreach Activities**

Faculty members who are subject to their college's Professional Practice Plan (PPP) or Compensation Plan may be permitted to dedicate, for the purpose of Public Outreach, time and professional service, as defined under the Plan, 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 negatively impact the needs or resources of the department

The faculty member must comply with all other requirements of the PPP or Compensation Plan and the faculty member's appointment.

(d) **Template Agreement**

It is a University requirement that a written 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 and is available through Vice President of Research Office and the Office of Legal Counsel. 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 for retention.

* NOTE: Dual employment/appointment at OU Health is not considered to be employment outside of the University.

(Administrative policy of the Senior Vice President and Provost – Revised September 2011; Regents 3-9-22, 3-12-24)

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 achievement, areas for growth and further development, and/or any areas of faculty performance deficiencies and with regard to identified deficiencies, to provide such faculty opportunities and incentives to correct the deficiencies. An annual performance review of each Regular or Limited Term faculty and Emeritus faculty holding an FTE as well as Health Professions Educators[3] 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

[3] Annual Evaluation of Volunteer faculty is expected but need not be on the same timeline or use the same evaluation tool as that used for Regular or Limited Term Faculty, Health Professions Educators and Emeritus faculty members who hold an FTE.

evaluation should contain sufficient specificity to identify areas of strength and those areas where growth or improvement are needed. A systematic procedure for accomplishing such evaluations shall be developed in each academic unit, consistent with the direction 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, and termination of tenure track or 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, 3-12-24, 6-12-25)

3.7 SALARY ADJUSTMENTS

(a) The most frequent reflection of a continuing faculty evaluation system is in the annual recommendation for merit salary increases. Deserving faculty should be rewarded, within the limits of the financial resources of the University and policies 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 additional administrative or managerial responsibilities may necessitate additional salary adjustment through an administrative supplement 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, 3-12-24)

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 teaching, research and creative/scholarly activity, professional associations, University service and public outreach, and administrative responsibilities, as well as on the faculty member's clinical service contributions, and as based on the College's Professional Practice or Compensation Plan and forward to the dean.

(c) The dean will review each recommendation and notify the chair of any changes or adjustments made to the recommendation.

(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 be available to discuss with each faculty member the reasons for the salary recommendation that was made as soon as feasible following final approval.

(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. In all cases, adjustments should be made only as funds are available and within the current programs and procedures for increases.

(g) If approved, any salary adjustments must be documented in a Change Memo (see Section 3.2.2 (f)). If the faculty member's full-time compensation exceeds $150,000, the salary adjustment will be contingent upon Board of Regents' approval.

(Regents, 12-3-02, 6-25-08, 9-14-17, 3-9-22, 3-12-24, 6-12-25)

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 or compensation (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.

(Regents, 3-9-22)

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 full-time service*** means full-time academic employment at an institution of higher education (including the University of Oklahoma).

(Regent, 6-12-25)

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 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). In select circumstances, a highly-qualified new faculty member may be appointed with tenure if all of the following are met:

1. 1. the faculty member has been tenured at an accredited research university, and the record demonstrates continued high-level performance;

2. 2. the faculty member will fill a leadership, highly specialized, strategic, or specialty position, as determined by the dean and Senior Vice President and Provost;

3. 3. the chair and dean of the appointing department and college have evaluated the faculty member's record and determined it to meet the tenure expectations of each; and

4. 4. the Senior Vice President and Provost agrees the faculty member's record supports tenure upon hire

(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.

(Regent, 6-12-25)

3.8.4 Criteria for the Tenure Decision

(a) 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.

(b) 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)

(c) 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 must document a record of scholarly attainment in teaching, research and creative/scholarly activity, and professional and University service and public outreach.

(d) 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.

(e) Any exception to faculty evaluation on performance 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.

(f) 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).

(g) 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.

(h) 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 (see Section 2.8.1 (c)) 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 except for securing letters of evaluation, which are solicited by the chair. 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 by the chair 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 vitae, including a summary of college and university degrees earned; all professional employment; all professional honors and awards; teaching, research and creative/scholarly activity, including an up-to-date list of professional publications by author in chronological sequence; and professional and University service and public outreach elements. Manuscripts in press or submitted for publication and abstracts in press or under review for national or international presentation should be listed separately (See 3.8.5(d), 3,4, and 5).

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, multidisciplinary or 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/trainees; 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 or simulation exercises, simulation techniques, multidisciplinary 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 regional, national, and 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 University or approved external entity 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, regional , or national associations; service on advisory boards for granting agencies or professional organizations; 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, deployment, improvement, and/or 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.

(Regents, 3-9-22, 3-12-24, 6-12-25)

(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 their 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 for this purpose either establish the full college as the academic unit or establish an *ad hoc* tenure review committee by selecting a sufficient number of tenured University faculty from both within and outside of the college to constitute a total of five members to serve as the candidate's academic unit tenure review committee. In the latter instance, all eligible tenured faculty from the college must be included before looking outside the college.

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 the 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 Office of the Senior Vice President and Provost for distribution to the Campus Tenure Committee. The dean will 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. In addition, Campus Tenure Committee members may vote at only one stage in the process – either at their academic level or at the Campus Tenure Committee level; when the member's academic unit needs the member to vote at the academic level to meet the minimum five tenured faculty requirement, the Campus Tenure Committee member shall vote at the academic level and recuse from voting at the Campus Tenure Committee level.

(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 Office of 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, 3-12-24, 6-12-25)

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 in any appointment type must be made based on 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 be consistent with those criteria for tenure contained in Section 3.8.4 (a) – (e).

Internal candidates applying for an open position of higher rank must meet the promotion and advancement criteria stated in Section 3.9 for the college in which the position is open.

Each college must have a document that sets forth the standards and procedures governing promotion of faculty within each department of the 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 unit(s) (see Section 2.8.1 (c)), 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 except for securing letters of evaluation, which rests with the department chair. 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 vitae, including a summary of college and university degrees earned; all professional employment; all professional honors and awards; teaching, research and creative/scholarly activity, including an up-to-date list of professional publications by author in chronological sequence; and professional and University service and public outreach elements. Manuscripts in press or submitted for publication and abstracts in press or under review should be listed separately (See 3.8.5 (d) (3)(4)(5)).

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 teaching and 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 are invited by the department chair, section chief, or division head and 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 faculty member 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 for this purpose either establish the entire college as the academic unit or establish an *ad hoc* promotion review committee by selecting a sufficient number of University faculty from both within and outside the college who are 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. In the latter instance, all eligible faculty in the college who are at the rank to which the candidate aspires, or higher, must be included before looking outside the college.

(e) The chair shall submit a separate promotion recommendation with supporting reasons. The section head and or Center director may 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 Office of 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 and consistent with college compensation plans, a promotion for faculty should be accompanied by an appropriate increase in salary (for example, typically at least $5,000 for 12-month Regular faculty promoted to Associate Professor and at least $8,000 for 12-month Regular faculty promoted to Full Professor). Promotions must not be delayed because of budgetary constraints. Promotions should be earned on their own right in accordance with Section 3.9 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 they have 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, 3-12-24, 6-12-25)

3.10 SABBATICAL LEAVE POLICY

Sabbatical Leave Application Deadlines: A sabbatical application must be submitted to the department chair or director by February 1 for a sabbatical leave beginning in the following academic year or later and no later than July 15 for a sabbatical beginning the following spring semester. The application must be approved by the dean and the Senior Vice President and Provost. Sabbatical Leave as a result of a faculty member's receiving a scholarship, award, or fellowship should follow the procedures for faculty awards and fellowships from the Office of the Senior Vice President and Provost, as noted in Section 3.15.

(a) **Purpose**

A sabbatical leave of absence is 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 robust study, research, writing, collaboration, and training.

A faculty member does not automatically earn sabbatical leave. Instead, it is an investment by the University with 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. A sabbatical leave is 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 is of such a nature that it 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 leave.

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, Intersession, Online, 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 at least 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 a faculty member on sabbatical with full base salary will continue at full benefits levels. (Dually-employed College of Medicine - OKC faculty should refer to the College's compensation plan for benefits payable information.)

2) Employment benefits for a faculty member 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.

(Regents, 3-9-22, 3-12-24)

(d) **Eligibility**

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

1) After six years of service, a faculty member with a 12-month Regular Faculty appointment 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, a faculty member with a nine- or ten-month Regular Faculty appointment 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 designated spring and fall 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, 3-12-24, 6-12-25)

(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 is given to a faculty member whose accomplishments in at least one of the three areas (teaching, research and creative/scholarly activity, university/professional service and public outreach) are exceptional and clearly exceed normal expectations.

(a) **Criteria for Selection**

A nominee must have contributed significantly to the mission of the department/unit in the award area (teaching, research and creative/scholarly activity, service/outreach) being recognized and must have fulfilled obligations and performed well in the other areas as well.

(b) **Eligibility**

Nominees must be full-time, regular or non-regular faculty members, including those with full-time dual employment at approved external entities. The faculty member must have been a University of Oklahoma employee during the period for which the outstanding contributions are being recognized; previous accomplishments at other institutions, if applicable, may be used in support of a continued outstanding performance in the area of the specific award. A recipient of an award in one area (teaching, research and creative/scholarly activity, service/outreach) is ineligible for the same Regents' Award during the subsequent five-year period but is immediately eligible for a Regents' Award in a different area.

i. Teaching

The educational training of students is at the core of the university mission. This training is accomplished through varied educational strategies and environments, including but not limited to in-class activities, hands-on student research training and mentorship, clinical teaching and mentorship, innovative course development (in-class and on-line), pedagogy improvements, and distance learning. Success of these activities must be demonstrated by measurable positive outcomes for students.

The nominator shall provide an informed commentary on the impact of the nominee's exceptional accomplishments, including classroom teaching, engagement with and commitment to students (including undergraduate, graduate, professional, and/or clinical residents and fellows), willingness to keep teaching material up to date with state of the art knowledge, willingness to support broader departmental teaching

mission, positive feedback from students via faculty evaluations and other channels and from peers via observation, engagement in faculty development activities related to pedagogy, new course development, service learning or service learning components, student advising and mentorship, formal and informal, supervision of graduate students.

ii. Research and Creative/Scholarly Activity

A clear expectation for a research-intensive university is the creation and dissemination of new knowledge and forms of creative activity. The creation of new knowledge derives from scholarly activities that drive innovation, with such activities supported by funding mechanisms appropriate to the discipline. Evidence of the creation of such new knowledge is established through impactful outcomes disseminated in different peer-reviewed formats that include publication of research manuscripts and books, performances and exhibits, and the effective mentorship and graduation of students and/or clinical residents and fellows. The impact of the nominee's research and creative/scholarly activities on the field of study must be substantiated by documentation appropriate to the discipline, and by letters of support from informed leaders in the nominee's field of study. For the Health Sciences Center, attention will be given to the ways in which a nominee may have an impact through team science and interdisciplinary/interprofessional scholarship.

iii. Professional and University Service and Public Outreach

The University is, in the broadest sense, an integral part of the community (intellectual and physical) in which it resides. A faculty member's contributions to the general community include professional service that may be specific to a discipline (e.g., clinical practice and excellence in outcomes such as quality and patient experience, service as journal editor, conference organizer, or in leadership positions in professional organizations) as well as impactful activities that benefit university-community interactions (e.g., teacher training and service learning projects). Such activities enhance achievements in teaching and research. Successful nominees shall have demonstrated exceptional performance in activities that enhance the university's role and standing in the community.

(c) **Nomination Procedures**

1) **Initiation**

The respective Senior Vice President and Provost will solicit recommendations for the awards by September 15 of each year and announce appropriate schedules for processing the nominations. Furthermore, the solicitations will be posted on the appropriate campus website, for access by nominators and faculty on all campuses.

2) **Recommendations**

Nominations may derive from department chairs or unit directors, elected members of departmental/unit Committee A, a departments/unit's approved nomination committee, Center leaders, or a group of faculty who are familiar with the nominee's qualifications for the award. Only one nomination by an academic unit or other nominating group of faculty is allowed for each of the Regents' Awards. The nominating entity will be responsible for assembling the nomination packets including supporting documentation.

Nominations shall be forwarded to the respective dean for review and endorsement. An optional letter from the dean, if included, will focus on evaluator comments regarding the quality and significance of the nominee's impact on the broader OU mission. The dean's letter will not count towards the 25-page limit outlined below. The dean will forward the nomination materials to the respective Senior Vice President and Provost by November 1.

3) **Supporting Documentation**

Nomination packets must include the following, not to exceed 25 pages combined:

- A letter of nomination, not to exceed three single-spaced pages;

- A customized vita containing the relevant information pertaining to the accomplishments and criteria cited for the award;
- A short biography (about 100 words) highlighting the nominee's most significant accomplishments, and written for a general audience.

Although not required, the nomination packet may include letters of support. Letters must specifically address the area of the award. No more than five letters should be included. These letters of support will not count toward the 25-page limit.

(d) **Selection Procedure**

The University Council on Faculty Awards and Honors shall consider only the formal nominations. The Council may seek additional data about the nominees from supplemental sources, as appropriate.

The Council shall recommend to 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 in the broadest sense as defined by the selection criteria. The Council also shall transmit all substantiating materials pertaining to all nominees. The Senior Vice President and Provosts will review the nomination materials and the Council's recommendations, and will forward their recommendations, along with all substantiating materials, to the President by February 1. The President will make recommendations to the Board of Regents.

The final selection of the recipients will be made by the Board of Regents.

(e) **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.

(f) **Perquisites**

Each award will consist of affixing the recipient's name to a permanent plaque in a prominent and suitable location and a one-time 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, 9-11-19, 3-12-24, 6-12-25)

3.11.2 Provost's Research Awards

The Provost's Research Award recognizes meritorious research. Two awards within both a basic science and a clinical science/translational category (based upon National Institutes of Health designations) may be given each year to full-time, regular faculty members (or a full-time FTE combined appointment with OU Health): one in each category for junior faculty (assistant professors); and one in each category for senior faculty (associate and full professors). The awards are given for significant individual 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 OU Health Sciences 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 OU Health Sciences 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, 7-7-21, 12-2-21, 6-12-25)

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. The awards are $2,000 each.

Two awards are given each year to full-time (or a full-time FTE dual appointment with OU Health), 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 OUHSC 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 career faculty member** who holds the rank of associate professor or professor, has served as a faculty member in an OUHSC 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.

(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 for 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, 12-2-21, 3-12-24, 6-12-25)

3.12 DISTINGUISHED PROFESSORSHIPS

Recipients of distinguished professorships are deemed to have achieved distinction in teaching; research and creative/scholarly activity; and professional and University service and public outreach. The University awards the following distinguished professorships:

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, 9-11-19)

3.12.1 David Ross Boyd Professorship

The David Ross Boyd Professorship is one of the University's highest honors, recognizing faculty who have consistently demonstrated outstanding teaching, guidance, and leadership for students in an academic discipline or in an interdisciplinary program within the University.

(a) **Criteria for Selection**

Criteria which will be considered are the degree to which the candidate:

- has impacted the educational mission of the University;
- engages students and/or clinical residents and fellows in high-quality scholarship and professional service through effective mentoring strategies;
- establishes, communicates, and fulfills appropriate course and program goals;
- stimulates an intellectual inquisitiveness among students while creatively developing appropriate educational delivery formats and techniques appropriate to the program;
- mentors students (graduate, undergraduate, professional, and/or clinical residents and fellows) towards success in their chosen career paths;
- brings about change in students' knowledge, motives, and attitudes;
- establishes and promotes an inclusive culture in the University's educational mission;
- fosters the professional development of colleagues and serves as a model for colleagues and students.

(b) **Eligibility**

Nominees must be full-time faculty members who hold regular faculty appointments, including those with dual employment at approved external entities. Limited-term faculty at the OU Health Sciences may also be considered. Nominees will normally hold the rank of full professor but associate professors may be considered. The faculty member must have been a University of Oklahoma employee during the period for which the outstanding contributions are being recognized; previous accomplishments at other institutions, if applicable, may be used in support of a continued outstanding performance. Recipients are not eligible in subsequent years for a Presidential Professorship. Recipients are eligible for a David L. Boren Professorship, George Lynn Cross Research Professorship, and Regents' Professorship.

(Regents, 3-9-22, 6-12-25)

(c) **Nomination Procedures**

1) **Initiation**. The respective Senior Vice President and Provost will solicit recommendations for the professorship by September 15 and announce appropriate schedules for processing the nominations. Furthermore, the solicitations will be posted on the appropriate campus website, for access by nominators and faculty on all campuses.

2) **Recommendations**. Nominations may derive from department chairs or unit directors, elected members of departmental/unit Committee A, a department's/unit's approved nomination committee, Center leaders, or a group of faculty who are familiar with the nominee's qualifications for the award. Only one nomination per academic unit or other nominating group of faculty is allowed. The

nominating entity will be responsible for assembling the nomination packets, including supporting documentation.

Nominations will be forwarded to the respective dean of the college for review and endorsement. An optional letter from the dean, if included, will focus on evaluator comments regarding the quality and significance of the nominee's impact on the broader University of Oklahoma mission. The dean's letter will not count toward the page limit below. The dean will submit all the nominations and supporting documentation to the respective Senior Vice President and Provost by **November 1**. The respective Senior Vice President and Provost will forward these 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. Nomination packets must include the following, not to exceed 25-pages combined:

- A letter of nomination, not to exceed seven single-spaced pages;
- A short vitae containing the relevant information pertaining to the accomplishments and criteria cited for the award;
- A short biography (about 100 words) highlighting the nominee's most significant accomplishments, and written for a general audience.

In addition, the nomination packet must also include letters of support. Letters must specifically address the criteria of the professorship. No more than five letters should be included, with no more than three letters from students or student groups. These letters of support will not count toward the 25-page limit.

(d) **Selection Procedures**

1) **Review**. The University Council on Faculty Awards and Honors shall consider only the formal nominations. The Council may seek additional data about nominees from supplemental sources, as appropriate. The Council shall forward to the respective Senior Vice President and Provost its recommendation(s) for the professorship for review. The Council also shall transmit all substantiating materials pertaining to all nominees.

2) **Selection**. Each Senior Vice President and Provost will review the nominees and forward their recommendations, along with all nominations and all substantiating materials pertaining to the nominees, by February 1 to the President, who will make the recommendations to the Board of Regents. The final selection of the recipient(s) will be made by the Board of Regents.

(e) **Announcement**

The final selections will be announced for Norman Campus at the annual Faculty Award Ceremony and for the OU Health Sciences at the Spring General Faculty Meeting.

(f) **Perquisites**

In the year of designation as a David Ross Boyd Professor, the person receiving the award will receive a one-time 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.

(g) **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, 9-11-19, 3-12-24, 6-12-25)

3.12.2 George Lynn Cross Research Professorship

The George Lynn Cross Research Professorship is the highest research and creative activity honor given by the University to a faculty member who has demonstrated outstanding leadership over a period of years in their field of learning or creative activity.

(a) **Criteria for Selection**

A clear expectation for a research-intensive university is the creation and dissemination of new knowledge and forms of creative activity. The creation of new knowledge derives from scholarly activities that drive innovation, with such activities supported by funding mechanisms appropriate to the discipline. A nominee must have contributed significantly to the mission of the University of Oklahoma in research and creative activity, and must have been recognized nationally and internationally by peers for distinguished contributions to knowledge or distinguished creative work. Evidence of the creation of new knowledge is established through impactful outcomes disseminated in different peer-reviewed formats that may include publication of research manuscripts and books, performances and exhibits, and the effective mentorship and graduation of students. Recognition of scholarly activities may also include work in clinical trials and health services, quality improvement, and population health research. The impact of the nominee's research and creative/scholarly activities on the field of study must be substantiated by documentation appropriate to the discipline and by letters of support from informed leaders in the nominee's field of study. For the Health Sciences Center, attention will be given to the ways in which a nominee may have an impact through team science and interdisciplinary/interprofessional scholarship.

A nominee must have fulfilled obligations and performed well in the other areas of the university's function (i.e., teaching, service/outreach) as well.

(b) **Eligibility**

Nominees from the Norman campus must be tenured full-time faculty members. Nominees from the OU Health Sciences campus may include both consecutive term and tenured/tenure eligible faculty. Nominees will normally hold the rank of full professor but associate professors may be considered. The faculty member must have been a University of Oklahoma employee during the period for which the outstanding contributions are being recognized; previous accomplishments at other institutions, if applicable, may be used in support of a continued outstanding performance in the area of the specific award. Recipients are not eligible in subsequent years for a Presidential Professorship. Recipients are eligible for a David Ross Boyd Professorship, David L. Boren Professorship, and Regents' Professorship.

(c) **Nomination Procedures**

1) **Initiation**. The respective Senior Vice President and Provost will solicit recommendations for the professorship by September 15 and announce appropriate schedules for processing the nominations. Furthermore, the solicitations will be posted on the appropriate campus website, for access by nominators and faculty on all campuses.

2) **Recommendations**. Nominations may derive from department chairs or unit directors, elected members of departmental/unit Committee A, a department's/unit's approved nomination committee, Center leaders, or a group of faculty who are familiar with the nominee's qualifications for the award. Only one nomination per academic unit or other nominating group of faculty is allowed. The nominating entity will be responsible for assembling the nomination packets, including supporting documentation.

   Nominations will be forwarded to the respective dean of the college for review and endorsement. The nomination packages and names of potential external letter writers shall be forwarded to the respective campus Vice President for Research, who, in consultation with the respective dean, will develop a final list of potential evaluators who will be contacted for their support letters addressed to the deans.

3) **Supporting Documentation**. Recommendations are to be accompanied by specific indications that the person being recommended meets the criteria for selection.

Nomination packets must include the following, not to exceed 25-pages combined:

- A letter of nomination, not to exceed seven single-spaced pages;
- A short vitae containing the relevant information pertaining to the accomplishments and criteria cited for the award;
- A short biography (about 100 words) highlighting the nominee's most significant accomplishments, and written for a general audience.
- Names and contact information of national/international experts (15 maximum) in the nominee's area of research/creative activity who can be contacted for evaluator letters. These names should be solicited from the candidate and/or persons closely associated with the research area.

An optional letter from the Dean or respective Vice President for Research (Norman campus or OUHSC), if included, will focus on evaluator comments regarding the quality and significance of the nominee's impact on the mission of the respective College(s) and the university. This will be the only internal letter accepted. The letter from the Dean or Vice President for Research will not count towards the 25-page limit. Materials are due to the respective Vice President for Research by November 1.

(d) **Selection Procedures**

1) **Evaluations**. The Vice President for Research will present to the appropriate Research Council all nominations with the supporting documentation. In addition, the Vice President for Research will present to the Research Council the external evaluations and their own evaluation.

2) **Review**. The Research Council shall consider only the formal nominations. The Council may seek additional data about the nominees from supplemental sources, as appropriate. The Council shall forward to the respective Senior Vice President and Provost its recommendation(s) for the Professorship for review. Research Council also shall transmit all substantiating materials pertaining to all nominees.
3) **Selection**. Each Senior Vice President and Provost will review the nominees and forward their recommendations along with all substantiating materials, by February 1 to the President, who will make the recommendations to the Board of Regents. The final selection of the recipient(s) will be made by the Board of Regents.

(e) **Announcement**

The final selections will be announced for Norman Campus at the annual Faculty Award Ceremony and for the OU Health Sciences at the Spring General Faculty Meeting.

(f) **Perquisites**

In the year of designation as a George Lynn Cross Research Professor, the person receiving the professorship will receive a one-time 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.

(g) **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, 9-11-19, 3-12-24, 6-12-25)

3.12.3 Regents' Professorship

The Regents' Professorship recognizes a faculty member who has rendered outstanding service to the academic community or to an academic or professional discipline through extraordinary achievement in academic administration or professional service.

(a) **Criteria for Selection**

Eligibility

Nominees must be full-time faculty members who hold regular faculty appointments. The faculty member must have been a University of Oklahoma employee during the period for which the outstanding contributions are being recognized; previous accomplishments at other institutions, if applicable, may be used in support of a continued outstanding performance. Persons named Regents' Professors are not eligible in subsequent years for a Presidential Professorship. Recipients are eligible for a David L. Boren Professorship, David Ross Boyd Professorship, and George Lynn Cross Research Professorship.

(b) **Nomination Procedures**

1) **Initiation**. Each Senior Vice President and Provost will solicit recommendations for the professorship by September 15 and announce appropriate schedules for processing the nominations. Furthermore, the solicitations will be posted on the appropriate campus website, for access by nominators and faculty on all campuses.

2) **Recommendations**. Nominations should derive from administrative leaders at OU, including administrative officers, current and former department chairs, college Deans, and Provosts. Packets must be assembled by the nominee's administrative and/or evaluator unit. Nominations are due to the respective Senior Vice President and Provost by **November 1**.

3) **Supporting Documentation**. Nomination packets must include the following, not to exceed 25 pages combined:

- A letter of nomination, not to exceed seven single-spaced pages;
- A short vitae containing the relevant information pertaining to the accomplishments and criteria cited for the award;
- A short biography (about 100 words) highlighting the nominee's most significant accomplishments, and written for a general audience.

In addition, the nomination packet may also include up to five letters of support, either internal or external, but favoring at least two external letters. Letters must specifically address the criteria of the Professorship. These letters of support will not count toward the 25-page limit.

(c) **Selections Procedures**

1) **Review**. The University Council on Faculty Awards and Honors shall consider only the formal nominations. The Council shall forward to the Senior Vice President and Provosts its recommendation(s) for their review. The Council also shall transmit all substantiating materials pertaining to all nominees.

2) **Selection**. The respective Senior Vice President and Provost will review the nomination materials and the Council's recommendations and will forward their recommendations, along with all substantiating materials, by February 1 to the President, who will make recommendations to the Board of Regents. The final selection of the recipient(s) will be made by the Board of Regents.

(d) **Announcement**

The final selections will be announced for Norman Campus at the annual Faculty Award Ceremony and for the OU Health Sciences at the Spring General Faculty Meeting.

(e) **Perquisites**

In the year of designation as a Regents' Professor, the person receiving the award will receive a one-time 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.

(f) **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, 9-11-19, 3-12-24, 6-12-25)

3.12.4 Presidential Professorship

Presidential Professors are those faculty members who excel in all of their professional activities and who relate those activities to the students they teach and mentor, including undergraduate, graduate, professional students, as well as clinical residents and fellows. These professors inspire their students, mentor them in the process of research and creative/scholarly activity within their discipline, and exemplify to their students (both past and present) 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.

(a) **Criteria for Selection**

Eligibility

Nominees must be full-time, regular or non-regular faculty members, including those with dual employment at approved external entity. The faculty member must have been an OU employee during the period for which the outstanding contributions are being recognized; previous accomplishments at other institutions, if applicable, may be used in support of a continued outstanding performance in the area of the specific award. The nominee must have excelled in at least two of the three areas below. Recipients of the David L. Boren Professorship, David Ross Boyd Professorship, George Lynn Cross Research Professorship, and the Regents' Professorship are not eligible for a Presidential Professorship. At OUHSC, nominees also must have been in good standing for the previous five-year period to be eligible.

(Regents, 3-9-22)

i. Teaching

The nominee shall have demonstrated leadership in modernizing and improving the undergraduate/ graduate/ professional/ clinical instructional enterprise, including (i) the effectiveness of undergraduate (lower and upper division) and/or graduate, and/or professional courses developed and taught by the nominee, and (ii) the extent of the nominee's involvement with undergraduate/ graduate/ professional students and/or clinical residents and fellows in research/ mentoring/ advising within the academic discipline. In addition, the nominee must have actively participated in student-centered activities such as, but not limited to, OU's Undergraduate/Graduate Research Day, Stewart Wolf Day, Research Experiences for Undergraduates (REU) and/or First-Year Research Experience (FYRE) programs, freshman Gateway courses, professional clerkships, mentorship of honors student theses, and sponsorship of academic clubs. At OUHSC additional examples include faculty participation in GREAT (Graduate Research Education and Technology), SURP (Summer Research Undergraduate Programs), or similar mentored experiences for students and trainees or OUHSC faculty participation in student-focused community learning experiences like Unity Clinic or Bedlam Clinic.

ii. Research and Creative/Scholarly Activity

The nominee shall have demonstrated significant involvement of graduate/ undergraduate/ professional students and/or clinical residents and fellows in the nominee's research and creative scholarly activities. This should be supported by measurable peer-reviewed outcomes including the quality and quantity of theses and dissertations supervised, professional degrees/ certifications issued publications co-authored with students, and performances/exhibits that involve significant student participation. For the Health Sciences Center, attention will be given to the ways in which a nominee may have an impact through team science and interdisciplinary/interprofessional scholarship.

iii. University Professional Service and Public Outreach

The nominee must have contributed significantly to, and positively impacted, departmental/college/center/university committees and/or public outreach programs. A faculty member's contributions to the general community include professional service that may be specific to a discipline (e.g., clinical practice and excellence in outcomes such as quality and patient experience, service as a journal

editor, conference organizer, or in leadership positions in professional organizations), as well as impactful activities that benefit university-community interactions (e.g., teacher training and service learning projects). Such activities enhance achievements in teaching and research. Successful nominees shall have demonstrated exceptional performance in activities that enhance the university's role and standing in the community.

(b) **Nomination Procedures**

1) **Initiation**. The President in conjunction with the Senior Vice President and Provost of the Norman Campus and the Senior Vice President and Provost of the OU Health Sciences - (a) will review the number of vacant Presidential Professorships, (b) will hold three vacancies each year for recruitment and retention of qualified faculty, and (c) will issue a call for nominations by September 15. The solicitations will be posted on the appropriate campus website, for access by nominators and faculty on all campuses.

2) **Recommendations**. Nominations may derive from department chairs or unit directors, elected members of departmental/unit Committee A, a department's/unit's approved nomination committee, Center leaders, or a group of faculty who are familiar with the nominee's qualifications for the award. The nominating entity will be responsible for assembling the nomination packets, including supporting documentation.

   Nominations will be forwarded to the respective dean of the college for review and endorsement. An optional letter from the dean, if included, will focus on evaluator comments regarding the quality and significance of the nominee's impact on the broader OU mission. The dean's letter will not count toward the page limit below. The dean will submit all the recommendations and supporting documentation to the respective Senior Vice President and Provost by November 1.

3) **Supporting Documentation.** Nomination materials must include the following, not to exceed 25 pages combined:

   - A nomination letter (no more than three single-spaced pages) describing the nominee's impact on the scholarly and overall professional development of the students they teach and mentor;
   - A short vitae of the nominee that contains the relevant information pertaining to the accomplishments being cited for the award consideration;
   - A short biographical sketch (about 100 words) highlighting the nominee's most significant accomplishments and written for a general audience.

   In addition, the following must be included but will not count toward the 25-page limit:

   - Up to a total of five support letters from students (former or current) and professional colleagues (internal and/or external to OU) who can speak to the nominee's influence on students. These letters should, collectively, address as many of the relevant award criteria that the writer(s) can speak to.
   - The nominee's Summary Reports of Annual Evaluations for the previous three years, or since beginning at the University if the nominee has been at the University less than three years.

(c) **Selection Procedures**

1) **Selection Committee**

   Separate selection committees will be constituted on the Norman and OU Health Sciences campuses. The selection committees will be co-chaired by the respective campus' Senior Vice President and Provost and the Vice President for Research, who serve as non-voting members. Twelve members of the selection committee for each campus will be chosen as follows:

   The President will select six faculty and three academic administrators from among current members on the respective campus' Research Council, University Council on Faculty Awards and Honors, and Deans' Council to serve three-year staggered terms.

The President will also select two faculty-at-large members from the respective campus: at Norman Campus tenure-track and tenured faculty, and at OU Health Sciences campus tenure-track, tenured, or consecutive-term faculty, to serve two-year staggered terms.

The President will also select one distinguished outside individual to serve a two-year term.

2) **Selection Procedure**

The respective campus' Presidential Professorship selection committee shall consider only the formal nominations. The committees may seek additional data about the nominees from supplemental sources, as appropriate. The selection committees' selections for the Presidential Professors must be forwarded by February 1 to the President along with all nominations and all substantiating materials pertaining to all nominees. The President will make recommendations to the Board of Regents. The final selection of the recipients will be made by the Board of Regents.

(d) **Announcement**

The final selections will be announced for Norman Campus at the annual Faculty Award Ceremony and for the OU Health Sciences at the Spring General Faculty Meeting.

(e) **Perquisites**

The Professorship is awarded for a four-year term. Assistant and Associate Professors receive $5,000 per year and Professors receive $10,000 per year. To be eligible for funding in any given year, a faculty member must be considered as a full-time continuing member of the University.

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

Presidential Professors will receive the professorship funding as a taxable bonus paid annually,

(f) **Term of Award**

The Professorship is granted for a four-year term with the faculty member receiving the funding each year based on faculty rank. Recipients retain the Presidential Professor title permanently.

(Regents, 9-26-95, 1-27-04, 6-23-04, 6-25-08, 12-7-12, 9-14-17, 9-11-19, 10-24-19, 1-28-21, 3-12-24, 6-12-25)

3.12.5 David L. Boren Professorship

The David L. Boren Professorship is one of the University of Oklahoma's highest honors, recognizing faculty who have made exceptional and truly impactful contributions to the mission of the University of Oklahoma as a public research university.

(a) **Criteria for Selection**

To qualify for the Professorship, a faculty member must have consistently demonstrated outstanding teaching, research and creative activity, and leadership in professional and public service. The holders of this distinctive honor should demonstrate effective mentoring and engagement of students in advancing knowledge creation and making a positive difference in the world.

Criteria which will be considered are the degree to which the candidate:

1) demonstrates leadership in the development of impactful scholarship and creative activity that is viewed as seminal within one or more fields;
2) exhibits scholarship and creative activity in high quality venues (including peer-reviewed publications/performances) supported by national funding appropriate to the field, and has their work cited frequently;

3) inspires inquisitiveness and intellectual curiosity among students as judged by measurable outcomes;
4) fosters the professional development of colleagues and serves as a model for colleagues and students;
5) demonstrates strong sense of community and is instrumental in the creation, organization, and mobilization of other individuals, groups and resources that are involved in projects benefiting the community, whether specific to a discipline or by enhancing the university's role and standing in the larger community.

(b) **Eligibility**

Nominees must be full-time faculty members who hold regular faculty appointments, including those with dual employment at approved external entity. Nominees will normally hold the rank of full professor but associate professors may be considered. The faculty member must have been a University of Oklahoma employee during the period for which the outstanding contributions are being recognized; previous accomplishments at other institutions, if applicable, may be used in support of a continued outstanding performance. Recipients are not eligible in subsequent years for a Presidential Professorship. Recipients are eligible for a David Ross Boyd Professorship, George Lynn Cross Research Professorship, and Regents' Professorship.

(Regents, 3-9-22)

(c) **Nomination Procedures**

1) **Initiation**. Each Senior Vice President and Provost will solicit recommendations for the professorship by September 15 and announce appropriate schedules for processing the nominations. Furthermore, the solicitations will be posted on the appropriate campus website, for access by nominators and faculty on all campuses.

2) **Recommendations**. Nominations may derive from department chairs or unit directors, elected members of departmental/unit Committee A, a department's/unit's approved nomination committee, Center leaders, or a group of faculty who are familiar with the nominee's qualifications for the award. Only one nomination per academic unit or other nominating group of faculty is allowed. The nominating entity will be responsible for assembling the nomination packets, including supporting documentation.

   Nominations will be forwarded to the respective dean of the college for review and endorsement. An optional letter from the dean, if included, will focus on evaluator comments regarding the quality and significance of the nominee's impact on the broader OU mission. The dean's letter will not count toward the page limit below. The dean will submit all the nominations and supporting documentation to the respective Senior Vice President and Provost by November 1. The Senior Vice President and Provosts will forward these 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. Nomination packets must include the following, not to exceed 25-pages combined:

   - A letter of nomination, not to exceed seven single-spaced pages;
   - A short vitae containing the relevant information pertaining to the accomplishments and criteria cited for the award;
   - A short biography (about 100 words) highlighting the nominee's most significant accomplishments and written for a general audience.

   In addition, the nomination packet must also include letters of support from nationally or internationally recognized experts in the nominee's area of expertise (minimum: two for research/creative activity, one for teaching, one for service/outreach). Letters must specifically address the criteria of the professorship. No more than five letters will be accepted. These letters of support will not count toward the 25-page limit.

(d) **Selection Procedures**

1) **Review**. The University Council on Faculty Awards and Honors shall consider only the formal nominations. The Council may seek additional data about the nominees from supplemental sources,

as appropriate. The Council shall forward to the Senior Vice President and Provosts its recommendation(s) for the professorship for their review. The Council also shall transmit all substantiating materials pertaining to all nominees.

2) **Selection**. Each Senior Vice President and Provost will review the nomination materials and the Council's recommendations, and will forward their recommendations by February 1, along with all nominations and all substantiating material pertaining to all nominees, to the President, who will make recommendations to the Board of Regents. The final selection of the recipient(s) will be made by the Board of Regents.

(e) **Announcement**

The final selections will be announced for Norman Campus at the annual Faculty Award Ceremony and for the OU Health Sciences at the Spring General Faculty Meeting.

(f) **Perquisites**

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

(g) **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, 9-11-19, 3-12-24, 6-12-25)

3.12.6 Presentation to Board of Regents

All nominations shall be sent to the Board of Regents at least twenty (20) University business 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, 3-12-24)

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 OU Health Sciences 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 and approved in advance of an offer by the Senior Vice President and Provost.

(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).

(d) **Term of Appointment – OU Health Sciences Faculty**

An endowed position holder will be reviewed by the dean and Senior Vice President and Provost after 3 to 5 years, as indicated in the endowed position appointment letter. The endowed position may be renewed for a stated term or terminated. The endowed position holder may retain the title with a term notation included. Additional information about endowed positions is in the Guidelines for Endowed Appointments document, available from the Senior Vice President and Provost's Office.

(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, 3-12-24, 6-21-24, 6-12-25)

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 number of awards prior to any advertising or announcement.

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

3.15 FACULTY AWARDS 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. Such faculty awards and fellowships enhance the research reputation of the entire campus. The Senior Vice President and Provost will consider, on a case-by-case basis, requests for institutional support for faculty members receiving these awards or fellowships. Procedures are available from the office of the Senior Vice President and Provost.

(Regents, 5-11-78, 12-7-12, 9-14-17, 6-21-24)

3.16 ABROGATION OF TENURE, TERMINATION OF EMPLOYMENT, SEVERE SANCTIONS, SUMMARY SUSPENSION, AND OTHER DISCIPLINARY ACTIONS

(a) **Abrogation of Tenure** - Only the Board of Regents has the power to abrogate tenure, which results in the simultaneous termination of employment of a tenured faculty member. Tenured faculty may be terminated only through the abrogation process.

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 under 3.16.1. The Board of Regents shall give all reasonable consideration to the recommendations of the Faculty Appeals Board Hearing Committee.

Once the pre-hearing panel has determined after the pre-hearing conference that the matter will proceed to a formal hearing, the President may place the faculty member on unpaid leave. Should a formal Hearing

Committee ultimately find in favor of the faculty member, the faculty member will be entitled to any base compensation and applicable fringe benefits that would have been earned from the date of the leave of absence to the date of reinstatement after final disposition of the charges under Section 3.19.4. Any leave of absence, reassignment, or redistribution of effort imposed under this section is not in itself an appealable sanction.

(b) **Termination of Employment for Tenure Track, Consecutive Term, and Limited Term Employees**

The dean has the power to terminate limited term employees without cause by providing sixty (60) days written notice or may immediately terminate limited term employees with cause pursuant to Section 3.16.1. Pursuant to Section 3.1.2, limited term employees are not permitted to appeal termination to the Faculty Appeals Board.

The Chair will hold a pre-termination meeting with a tenure track or consecutive term employee and provide written notice of the basis for the termination recommendation made to the dean. The Senior Vice President and Provost, or the dean with approval from the Senior Vice President and Provost, has the power to terminate employment of tenure track or consecutive term faculty. Termination without cause is subject to the notice requirements contained in 3.2.3(a)-(d). The Faculty Appeals Board is the appropriate body to hear permissible appeals related to termination of employment for improper conduct described in Section 3.16.1. Termination under 3.16.1 may result in immediate termination of employment and is not subject to the notice requirements contained in 3.2.3(a) through (d). The faculty member may request a Faculty Appeals Board hearing following termination under Section 3.16.1.

Should a formal Hearing Committee find in favor of the faculty member, the faculty member will be entitled to any base compensation and applicable fringe benefits that would have been earned from the date of the termination to the date of reinstatement.

(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 tenure 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 clinical practice privileges); a fine; or a reduction in salary (excluding reduction resulting from removal of administrative title or duty). The Faculty Appeals Board is the appropriate body to hear appeals regarding severe sanctions.

The Senior Vice President and Provost, or the dean, with approval from the Senior Vice President and Provost, has the power to place a faculty member on an administrative leave of absence pending a severe sanction proceeding. The duration of leave may vary based on the circumstances giving rise to the hearing or appeal. Alternatively, the Senior Vice President and Provost may assign the faculty member to other duties or a redistribution of effort in lieu of leave.

(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/Compensation Plan privileges, nor to accrue Paid Time Off (PTO) hours if the suspension is without pay. 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, OU Health 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 or Compensation Plan policies, OU Health Policies, Billing Compliance Policies, or other University, 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.

* OU Health Policies apply to dual-employed/appointed OU employees.

(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 or the policies of any third party with which OU has contracted and agreed to require its employees to follow.

Minor sanctions may include, but are not limited to, suspension of teaching and clinic assignments, suspension of travel privileges for not more than 30 University business 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, 9-14-17,3-9-22, 3-12-24, 6-12-25)

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 in section 3.16. (For appeals related to prohibited discrimination, including sexual and racial harassment, refer to section 3.20.) 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, egregious or repeated unprofessionalism, or dishonesty;

(b) Substantial, manifest, or repeated failure to, and/or refusal to adhere to University policies provided, however, that a faculty member may not appeal a prior finding of a violation of University policy by a University administrative officer or body when such finding has already been appealed under that policy;

(c) Personal behavior preventing the faculty member from satisfactory fulfillment of professional duties or responsibilities or inability to perform essential job functions with or without reasonable accommodations;

(d) 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.

(e) 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. .

(f) Loss or suspension of a professional license, loss or suspension of prescribing authority, and voluntary or involuntary loss of clinical privileges – all with failure to reacquire within 45 days of loss or suspension; inability to obtain or maintain enrollment as a provider with an insurer; or inability to obtain or maintain professional liability insurance coverage.

(g) For faculty hired who spend their time in clinical practice or practice-related activities or those employed that are employed primarily by an approved external entity , poor clinical performance, unprofessional behavior, or conduct that jeopardizes patient safety.

(h) Loss or resignation of a dual employment, appointment, or arrangement to provide services at an approved external entity, including where an approved external entity informs the University that a faculty member's services are no longer needed; provided, however, that the University may elect, at its option, to offer to extend the faculty member's University employment or appointment and tenure.

(i) Admission of responsibility for violations of the University's Ethics in Research Policy or determination by the Deciding Official of responsibility for violations of the University's Ethics in Research Policy, where the Deciding Official determines that termination is an appropriate sanction.

Faculty may request a hearing to challenge the termination; however, for appeals under 3.16.1(d), (e), (f), (h), and (i), challenges to these terminations are limited to only the following grounds as appropriate: (1) whether or not the faculty member has been placed on the United States Department of Health and Human Services' list of excluded individuals and entities, (2) whether the criminal conviction or violation of court order prevents the faculty member from satisfactorily fulfilling professions duties or responsibilities, (3) whether the revoked or suspended credentials, inability to obtain or maintain enrollment as a provider with an insurer, or inability to obtain or maintain professional liability insurance are required for the faculty member's position, (4) whether the faculty member has lost their dual employment, appointment, or arrangement to provide services at an approved external entity, and (5) whether an admission or determination of violation of the University's Ethics in Research Policy has been made or whether the Deciding Official determined that termination was an appropriate sanction.

For consecutive term or tenure track faculty, the notice requirements contained in Section 3.2.3 (a) through (d) are not applicable to terminations under Section 3.16.1.

(Regents, 1-26-99, 12-3-02, 6-25-08, 12-7-12, 9-14-17, 3-9-22, 3-12-24, 6-12-25)

3.17 FACULTY APPEALS BOARD APPEALS

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

The Faculty Appeals Board shall consider eligible appeals based upon 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, severe sanctions, and summary suspension. The faculty member may seek redress through the Faculty Appeals Board 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 violation of due process or academic freedom or if there are other appealable grievances that have not been resolved administratively. It is also the appropriate appeal process for abrogation of tenure, termination of employment actions, severe sanctions, and summary suspension (Section 3.19).

The University's Non-Discrimination Policy and the Sexual Misconduct, Discrimination, and Harassment Policy and their associated procedures set forth the policies and procedures for all grievances and appeals related to any form of discrimination or harassment prohibited by University policy. Appendix H and Appendix J, VII B-E. Therefore, those matters are expressly outside of the authority and jurisdiction of the Faculty Appeals Board.

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.

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

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 OU Health Sciences shall consist of forty tenured faculty members representing fairly the existing colleges on the OU Health Sciences 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 their 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, 3-12-24)

3.19 FACULTY APPEALS BOARD PROCESS

3.19.1 Initiation of Appeal and Request for a Faculty Appeals Board Hearing

(a) Request for a Faculty Appeals Board 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 20 University business days after they 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, as described in Section 3.17 above, 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 or the University Ombudsperson does not extend the 20-day time period 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 20 University business days after he/she became or should have become aware of the alleged violation.

(Regents, 3-9-22, 6-12-25)

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

Deadline to Request a Hearing: Within 20 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, as described in Section 3.17 above, must submit, as the respondent, a written request for hearing to the Chair of the Faculty Appeals Board within 20 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 10 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, appoint a prehearing panel of three (3) members including the Chair and hold a pre-hearing conference by meeting with the complainant and respondent, either together or separately, to discuss the points of the complaint. The Faculty Appeals Board Chair will chair the pre-hearing conference. The purpose of the pre-hearing conference is to determine whether the Complainant's appeal sets forth sufficient basis to proceed to a formal hearing.

At the pre-hearing conference, no documents or physical evidence should be introduced, and no witnesses shall be called, but the Parties must appear and relate their views of the matter. A party who fails to appeal and/or participate in the pre-hearing conference is deemed to have waived future rights to formal proceedings. As soon as reasonably practicable, but not more than five (5) calendar days after the pre-hearing conference, the panel shall determine by majority vote whether the matter should proceed to a formal Hearing and notify the Parties, including the President, in writing. If the Respondent fails to appeal and/or participate, formal proceedings will cease and the President will recommend termination or abrogation of tenure to the Board of Regents.

3) The University's Non-Discrimination Policy; the Sexual Misconduct, Discrimination, and Harassment Policy; and the Consensual Sexual Relationships Policy and their associated grievance procedures set forth the policies and procedures for all grievances, appeals, and sanctions related to any form of discrimination or harassment prohibited by University policy and supersede these rules. Those matters are not within the jurisdiction of the Faculty Appeals Board unless jurisdiction is specifically granted pursuant to those policies.

4) 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.

(Regents, 6-12-25)

3.19.2 Formal Faculty Appeals Board Hearing Procedure

All appealable 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) To initiate the Faculty Appeals Board hearing procedure, the Chair of the Faculty Appeals Board will request statements be submitted within 10 University business days from the complainant and concurrently begin the process for selection of Hearing Committee members per (c) (1) through (8) below. The statement shall include:

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) and (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:

When providing written notice to the Parties that a matter is proceeding to a formal hearing, the Chair of the Faculty Appeals Board will include the list of names of the Faculty Appeals Board members who are eligible to serve on the Hearing Committee. The list shall not include a member or alternate of the same academic unit as or one who is related to the Respondent or Complainant. Members and alternates currently serving on another Hearing Committee shall also be ineligible. The Chair of the Faculty Appeals Board may, in the Chair's discretion, also exclude a member in the event of a known conflict of interest related to the person(s) or issue(s) at hand.

1) 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 five members of the Board to constitute the Hearing Committee, three additional members to serve as alternates.

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. The notice shall include a reminder that the matter is confidential and may not be shared with others, even if the member cannot serve.

2) 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 and to the other party 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, drawing again by lot.

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. The finalized list must identify which member of the Hearing Committee will serve as the Hearing Committee Chair. The finalized list must be completed within 10 University business days of the initial selection of the Hearing Committee and alternates by the Chair of the Faculty Appeals Board.

Every reasonable effort should be made by the Hearing Committee and both parties to hold the hearing as soon as possible.

3) 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.

4) 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.

5) 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 and the hearing; however, alternate members shall not participate in the Hearing or in the Hearing Committee's deliberations unless a member of the Hearing Committee is unable to serve.

(Regents, 6-12-25)

3.19.3 Faculty Appeals Board Hearing Regulations

The following regulations shall apply:

(a) The Chair of the Hearing Committee, after consulting with the attorney from 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 pre-hearing conference and 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. These representatives may not question witnesses or address the pre-hearing panel or 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)(2) and (b)(2) shall be provided by the Chair in paper copy to the entire Hearing Committee one day prior to the hearing. The written statements shall be returned to the Chair at the conclusion of the hearing.

(e) The principles of confrontation shall apply throughout the hearing. Both parties, but not their colleague or counsel, shall have the right to present, examine, and cross-examine witnesses and each other.

(f) The Faculty Appeals Board does not have the authority to require witnesses to appear or to require either party to produce evidence. 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. The Senior Vice President and Provost's Office shall work with the University Open Records Office to expedite any record requests related to a hearing before the Faculty Appeals Board.

(g) In matters relating to abrogation of tenure or termination of employment, the University shall bear the burden of proof, which shall be by a preponderance of the evidence; i.e., whether the allegations are more likely true than not true. In matters relating to severe sanctions other than abrogation of tenure or termination of employment, the burden is on the appealing party to prove by a preponderance of the evidence (i.e., more likely than not) that the sanction is unwarranted. In all other cases, the Complainant shall bear the burden of proof, which shall be by a preponderance of the evidence; i.e. whether the claims of wrongdoing or impropriety are more likely true than not true.

(h) 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/her recommendation, to the President.

(i) 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.

(j) 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.

(k) The University shall not be liable for any costs whatsoever incurred by the appealing faculty member except as set forth in this section.

(Regent, 6-12-25)

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 Executive Secretary to the Board of Regents. 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, 3-12-24)

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

Information on the policies, and the associated complaint and grievance procedures, can be found in Appendices H and J.

(Regents, 3-12-24)

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 their 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.

(Regents, 3-12-24)

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. All faculty members and employees of the University, however 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[4] 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.

B) Within 14 University 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 five University 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, 6-19-18,3-12-24, 6-12-25)

3.24 PROFESSIONAL PRACTICE AND COMPENSATION PLANS

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

Copies of Professional Practice are available from each college in Appendix M.

[4] 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.

In addition to the Professional Practice Plan, Colleges may have a Faculty Compensation Plan. The purpose of the Compensation Plan is to provide a basis for establishing compensation and, where permitted, incentives for the designated faculty of the College. All faculty are subject to and must comply with the College's Faculty Compensation Plan, which must be consistent with University and OUHSC compensation policy and must be approved by the Senior Vice President and Provost.

(Regents, 9-14-17, 3-9-22,3-12-24, 6-12-25)

4. STUDENT POLICIES AND SERVICES

4.1 STUDENT ADMISSION

Policies and procedures as they relate to student admission may be obtained from the appropriate college or by contacting the HSC 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 twelve (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 Special Students. For additional information, contact the Office of Admissions and Records.

(Regents, 9-14-17)

4.5 HEALTH SCIENCES CENTER STUDENT ENROLLMENT IN NORMAN CAMPUS COURSES

HSC program students enrolling in courses on the Norman campus must receive permission from their HSC college. Approved Norman campus courses will be listed on the HSC student's transcript. For further information, contact the Office of Admissions and Records at (405) 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 Academic Records and Enrollment Services at (405) 325-4147.

4.7 OTHER ENROLLMENT OPPORTUNITIES

Information on independent study, courses taught off-campus, online courses, 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 twelve (12) hours in a fall or spring semester and at least six (6) hours in a summer term..

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 term. Students may not carry more than sixteen (16) hours per

semester or more than nine (9) semester hours per summer term for graduate credit 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 the summer term.

Many professional programs 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 set by each program. Students should contact their colleges for full-time requirements.

4.9 GRADING SYSTEM AND REPORTING OF GRADES

Grade Reports - Grade reports at the end of a semester or a summer term must be filed with the HSC 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 six (6) weeks after the last date of the clinical rotation.

Academic Forgiveness - 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 sixteen (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 (16) 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 HSC Office of 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 (3) or more final exams scheduled for the same day, instructors must offer make-up exams. Contact the HSC Office of Admissions and Records for procedural instructions.

4.12 COURSE ATTENDANCE-UNIVERSITY OF OKLAHOMA STUDENTS

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

4.13 RESIDENT STATUS

The Oklahoma State Regents for Higher Education policy governs resident status at the OU Health Sciences Center. Unless residency has been established in another state, an individual who resided in Oklahoma at the time of graduation from an Oklahoma high school and has resided in the state with a parent or legal guardian for two years prior to graduation from high school will be eligible for in-state status. This policy may be found on the OSHRE website at: https://www.okhighered.org/state-system/policy-procedures/part3.shtml (Chapter 3.18). In Oklahoma, non-resident students are required to pay non-resident tuition fees in addition to other applicable charges. Members of the armed forces stationed in Oklahoma and their dependents may be eligible for in-state tuition rates (OSRHE 3.18.7). Under specified conditions, undocumented students may also apply for in-state tuition (OSHRE 3.18.6).

The Office of Admissions and Records is responsible for determining resident status and any questions regarding this should be directed to them. This policy may be found online at: http://www.okhighered.org/. Additional information and the Petition for Oklahoma Residency can be found on the Admissions and Records website at https://admissions.ouhsc.edu/Prospective-Students/In-State-Out-of-State-Tuition-Policy.

4.14 WAIVER OF FEES

No student fee, resident or nonresident, 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. The appointment must begin on or before the first day of class to qualify for the waiver. Tuition waivers for eligible students will generally cover the student's required minimum enrollment (Section 4.8) 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; and 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 type 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, or other resource, including artificial intelligence resources, not explicitly approved by the instructor, 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 to maintain an environment conducive to the University of Oklahoma's missions. The Code establishes and administers standards of conduct through inclusive and holistic practices, fostering student learning and development while maintaining student retention and a sense of belonging. The Code and the Procedures are detailed in Appendix C. Further information is available upon request from HSC and OU-Tulsa Student Affairs in coordination with the Norman campus Office of Student Conduct.

To contact HSC Student Affairs, call (405) 271-2416. To contact OU-Tulsa Student Affairs, call (918) 660-3100.

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 ("IP Policy") are a part of any relationship of the University with any member of the faculty, staff, or student body. The IP policy, as amended from time to time, is part of the conditions of enrollment and attendance at the University by all students engaged in research using University resources and facilities, as well as a condition of employment for all University staff and faculty employed by the University (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 Institutional Equity Office's policies and procedures for a more detailed explanation and complaint procedure (Appendix J), contact the Institutional Equity Office on the Health Sciences Center campus directly at: (405) 271-2110 or ieo@ou.edu.

(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 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:

4.25.1 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 be verified by University officials only 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:

- Student's name
- Home and permanent address
- Electronic mail address
- Telephone numbers
- Major field of study
- Class year
- Enrollment status
- Anticipated degree date
- Participation in officially recognized University activities
- Degree 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.

4.25.2 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.

4.25.3 Disclosure of Education Records is Permitted

(a) To school officials who have a legitimate educational interest in the records. A school official is 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 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 in response to an ex parte order in connection with the investigation or prosecution of terrorism

(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 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.

(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.

4.25.4 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.

4.25.5 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 their record. Information that identifies the other student(s) must be redacted.

4.25.6 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.

   (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 decision shall be in writing, be based solely on the evidence presented at the hearing and delivered to all parties concerned who have a legitimate educational interest.

   (d) 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.

4.25.7 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, applications for employment, and receipt of honors or honorary recognition.

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

4.25.8 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

4.25.9 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, unless the University has been provided with evidence that there is a court order, state statue, or legally binding document related to divorce, separation, or custody that revokes these rights. 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.

4.26 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.

4.27 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)

4.28 HSC STUDENT AFFAIRS & OU-TULSA STUDENT AFFAIRS

HSC Student Affairs & OU-Tulsa Student Affairs are dedicated to the support and enhancement of the academic mission of the University. The departments provide services to both current and prospective students, as well as student life programming and campus-wide activities. 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, inclusive, and safe social atmosphere. Services are offered to ensure the physical, emotional, and mental health of all students and to provide guidance toward a career as a health care professional. Students learning at remote sites are supported via HSC Student Affairs.

Service areas include:

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

HSC Student Affairs is located in Suite 300 of the HSC Student Union. To contact HSC Student Affairs call (405) 271-2416 or email students@ouhsc.edu. For more information regarding HSC Student Affairs, visit http://students.ouhsc.edu/.

OU-Tulsa Student Affairs is located in Founders Student Center. To contact OU-Tulsa Student Affairs, call (918) 660-3100 or email TulsaSA@ou.edu. For more information regarding OU-Tulsa Student Affairs, see: https://www.ou.edu/tulsastudentaffairs

4.29 STUDENT COUNSELING SERVICES

HSC Student Counseling Services operates on both the Oklahoma City and OU-Tulsa campuses, providing confidential, in-person, and telehealth counseling for individuals, couples, groups, and crisis appointments. Costs for therapy services are included in the Student Counseling Services fee. TAO Connect, an expansive library of self-help videos, exercises, trainings, and tools, is also available to all OU students, staff, and faculty at no additional cost, accessed at us.taoconnect.org. Psychological 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 relationships are also available to students on a regular basis. In addition, wellness presentations can be given to faculty and staff on topics such as recognizing and assisting distressed students and suicide awareness and prevention.

Counseling services are available to students online via telehealth and in-person in the HSC Student Union in Oklahoma City and at the Schusterman Center in Tulsa. Students can call or email to schedule an appointment. Oklahoma City services are available at (405) 271-7336,. OU-Tulsa services are available at (918) 660-3109.

For more information on Student Counseling Services, visit http://students.ouhsc.edu/SCS.aspx or https://www.ou.edu/tulsastudentaffairs/counseling-services.

4.30 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 visiting 865 Research Parkway, Suite 240.

For more information: https://financialservices.ouhsc.edu/Departments/Student-Financial-Aid.

4.31 STUDENT GOVERNMENT ASSOCIATION AND STUDENT ORGANIZATION ADVISERS

Students are represented at the campus level by the University of Oklahoma Health Sciences Center Student Government Association (HSC SGA) and OU-Tulsa Student Government Association (OUTSGA), whose membership is composed of representatives of the college student councils/associations, campus-wide event liaisons/chairs, and multicultural student organizations as outlined in the SGA constitutions. The adviser for HSC SGA and OUTSGA is the Associate Vice President for HSC & OU-Tulsa Student Affairs or their designee.

Students are represented at the college level by their respective college student councils/associations. Advisers for student councils/associations should be supported by the college's student service office.

Any adviser 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.

Advisers should also be aware of the University of Oklahoma's Travel Policy when arranging travel plans for an administrative, Academic, or Registered Student Organization. Undergraduate, graduate, and professional students traveling in connection with events and activities of a Registered Student Organization 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 https://students.ouhsc.edu/Current-Students/Student-Resources/Forms-Handbooks-Policies.

For more information regarding the student organization registration process or student organization financial processes or for a complete listing of registered student organizations, please contact HSC & OU-Tulsa Student Affairs.

4.32 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 from the Accessibility and Disability Resource Center (ADRC), adrc@ou.edu, or (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. ADRC staff will review the documentation and send an e-mail to the student's University e-mail account provides information about next steps to finalize registration. 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 appointment with the Accessibility and Disability Resource Center team. During this appointment, ADRC staff and the student will engage in an interactive process and discuss any history of accommodation, current barriers related to the disability, relevant documentation, and relevant policies/procedures.

Information on policies and registration with ADRC may be found on the ADRC website at: https://www.ou.edu/adrc. Also, see Section 5.3 for the Reasonable Accommodation Policy.

4.33 VETERANS SERVICES

The HSC Office of Admissions and Records provides certification of enrollment for students at the Health Sciences Center 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 HSC Office of Admissions and Records.

HSC & OU-Tulsa Student Affairs offers supportive programing for students who identify as veterans or who are currently serving in the military. For more information, contact HSC & OU-Tulsa Student Affairs.

4.34 INTERNATIONAL STUDENT SERVICES

The Office of Immigration Services at the Health Sciences Center complies with immigration and federal laws governing 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; and post-graduate applications for practical training.

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

Further information may be found in the *Student Handbook* or by contacting the Office of Immigration Services at (405) 271-2189.

HSC & OU-Tulsa Student Affairs teams are dedicated to the support and success of international and all multicultural students. For more information regarding programming geared for International students, please contact HSC & OU-Tulsa Student Affairs contact.

4.35 STUDENT HEALTH INSURANCE

Per the University of Oklahoma Board of Regents' Policy, all students enrolled in OU Health Sciences Center (OUHSC) programs are responsible for maintaining health insurance and providing coverage information each semester of enrollment in their programs. OUHSC students are automatically enrolled in the university's student health plan at the beginning of each semester. The University's student health plan is administered by Academic Health Plans with coverage through Blue Cross Blue Shield. If a student has alternate insurance coverage that meets the University's waiver requirements (see: https://students.ouhsc.edu/Current-Students/Student-Wellbeing/Health-Insurance#waiver), they may waive their coverage in the student health plan. Students 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 didactic education, clinical education, and/or rotations until proof of coverage is provided. Additional information may be obtained by contacting the student services office within the student's college and/or HSC & OU-Tulsa Student Affairs.

To comply with this policy, students may participate in the student-sponsored health insurance policy, Academic Health Plans, or submit proof of comparable insurance coverage via the waiver system. Further details regarding acceptable health insurance coverage see: https://students.ouhsc.edu/Current-Students/Student-Wellbeing/Health-Insurance.

Enrollment forms and the Summary of Benefits for the Academic Health Plans Student Health Insurance Policy are available online at http://ouhsc.myahpcare.com/ or at HSC Student Affairs in the HSC Student Union, Suite 300, and OU-Tulsa Student Affairs in Founders Student Center.

Further details are available on the Student Affairs website.

4.36 STUDENT HEALTH SERVICES

The OU Health Student Health Clinic (Oklahoma City) and OU-Tulsa Student Health Clinic (Tulsa) provide acute and chronic care for injuries and illnesses, as well as routine preventative care.

HSC program students located in Oklahoma City receive care in the Student Health Clinic housed in the Family Medicine Center. Students located at OU-Tulsa receive care in Founders Student Center. A variety of medical services is provided as outlined at the links below.

Student, located in Oklahoma City and Tulsa, are charged a student health fee to defray the costs of these services. Remote site students do not pay a student health fee and are not eligible to receive student health services at HSC or Tulsa.

Students should contact their respective college student services office to obtain health history requirements. The Student Health Clinic, in coordination with an external vendor, serves as the repository for all mandatory health history forms.

See:
HSC-OKC | https://students.ouhsc.edu/Current-Students/Student-Wellbeing/Health-Clinic
HSC-Tulsa | https://www.ou.edu/tulsastudentaffairs/health

4.37 STUDENT IMMUNIZATIONS

The Student Screening, Vaccine, and Testing Policy lists the screening, vaccination, and testing requirements for each college.

4.38 UNIVERSITY HEALTH CLUB AND UNIVERSITY RESERCH PARK HEALTH CLUB – Oklahoma City

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

Membership for HSC program students geographically assigned to Oklahoma City is covered by their student fees. HSC program students not assigned to Oklahoma City can access the UHC and URPHC by purchasing a membership. Health Club memberships are available for faculty, staff, students and residents. For information on memberships, fees, and hours of operation, see: http://www.ouhsc.edu/uhc/ or contact the University Health Club at (405) 271-1650.

4.39 OU TULSA FITNESS CENTER

OU Tulsa Fitness Center, is available to all HSC students, medical residents, paid faculty, and staff, is housed in the Founders Student Center located at 4502 E. 41st Street. For questions or concerns please contact OU-Tulsa Student Affairs at 918-660-3100 or TulsaSA@ou.edu.

Membership for HSC program students geographically assigned to Tulsa is covered by their student fees. All OU-Tulsa students, faculty, and staff must have a Current Fitness Center Waiver on file with OU-Tulsa Student Affairs, as well as a valid OU-Tulsa Sooner Card ID to access the Fitness Center.

4.40 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.

4.41 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 point average of at least 3.75 will be graduated with Highest Honors; those with overall grade point averages of at least 3.50 but less than 3.75 will be graduated with High Honors; and those with overall grade point averages of at least 3.25 but less than 3.50 will be graduated with Honors.

5. GENERAL POLICIES AND SERVICES

5.1 NON-DISCRIMINATION POLICY

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, the following in accordance with the Americans with Disabilities Act (ADA) of 1990, as amended:

1) acquiring or modifying equipment or devices.
2) job restructuring.
3) providing part-time or modified work schedules.
4) reassignment to a vacant position if qualified.
5) Providing accessible digital content adjusting or modifying examinations, training materials, or policies.
6) providing readers and interpreters.
7) Making the workplace readily accessible to and usable by people with disabilities.

The Accessibility and Disability Resource Center (ADRC) (https://www.ou.edu/adrc) is the central point-of-contact to process all student requests for reasonable accommodation and to receive all relevant documentation required to determine disability status under law. The center will then engage in an interactive communication process with the student and make a recommendation on accommodation to the appropriate administrative unit.

The student must self-identify as an individual with a disability, engage in an interactive communication process with the ADRC, and provide appropriate diagnostic information to the Accessibility and Disability Resource Center that substantiates the disability. All diagnostic information is confidential. Memos regarding accommodations are sent only at the student's request.

Reasonable accommodation with respect to employment matters should be coordinated with the Office of Human Resources (https://hr.ou.edu/Policies-Handbooks/ADA-Services-for-Faculty-Staff). 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 Institutional Equity Officer and Title IX Coordinator in accordance with prevailing University's Investigative Process for Internal Complaints under the Non-Discrimination Policy.

(President, 2-16-93, Regents, 6-1-12, 3-9-22)

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 his/her 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 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 approve 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.

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 and approved by the Senior Vice President and Provost. 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.

Regardless of budgetary unit, University employees who are related by consanguinity or affinity within the third degree and involved in research activities together may be subject to additional requirements as determined by the appropriate campus's Conflict of Interest Officer. University employees are required to disclose relatives employed by the University on the conflict of interest disclosure form.

Relatives that are 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. 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 Executive Secretary of the Board of Regents, 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 that 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 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, 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 law, 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 submits 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, that affect their work or job performance; (2) job security and advancement opportunities for those who take advantage of this program; an assurance it 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) supervisor 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 costs incurred in undertaking recommended treatment.

Information about the Employee Assistance Program is available through the Human Resources website at: https://hr.ou.edu/EAP.

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 compliance.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.

(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 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 preventable 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.

Compliance and Enforcement

Compliance with this policy by all students, employees, and visitors to the campuses is expected based upon the University's commitment to a healthy environment on the campuses and the 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 also 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 Health Sciences Center can be found at: https://hr.ou.edu/Policies-Handbooks/Tobacco-Free.

The Oklahoma Tobacco Helpline can be accessed, toll free, at 1-800-QUIT-NOW or 1-800-784-8669 or, https://okhelpline.com/

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.

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/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.). All employees required to undergo drug testing due to their job duties will receive a copy of the applicable drug testing rules that apply to their position.

8) Provides for annual distribution from Human Resources 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 of property owned or leased 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/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 r 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/her designated officer within ten business days of its receipt. The President or his/her officer then has 15 business 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/ her appeal.

Neither the 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, as well as other weapons as identified in 21 O.S. 1277, are prohibited on all property owned, leased, or occupied by the Board of Regents at all times except as specifically authorized by law and/or University policy. 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, 9-11-19)

5.15 PRIVATE FUNDRAISING

The President and University Advancement are responsible to the Board of Regents for all private fundraising for the University. This policy applies to all elements of the University and is designed to assist the President and University Advancement in coordinating and directing this very important function in the operation of the University. Given the variable nature inherent in privately raised funds, the President, Deans, and/or Directors, shall not commit funds for future years beyond what is already raised.

(Regents 9-2-76, 12-2-03, 9-11-19)

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 University Advancement

The HSC Office of University Advancement 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 fundraising 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 University Advancement is the responsibility of the Vice President for University Advancement and the Health Sciences Center Assistant Vice President of the Office of University Advancement. All HSC faculty and/or other designated staff must have authorization from the HSC Office of University Advancement in conjunction with the Vice President for University Advancement and the Assistant Vice President 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.

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 Marketing and Communications, 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, 3-9-22)

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 OFFICIAL COMMUNICATIONS

The proper channels for communicating with legislative or other state or government officials is through the Senior Vice President and Provost, 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/her 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)

5.20 NEWS RELEASES

The University Regents have requested that news releases for print, broadcast, and digital media 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 Marketing and Communications 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 Division of Marketing and Communications, and requests for approval of releases may be initiated with that office.

(Vice President for Public Affairs, 8-1-80, 10-1-93; Regents, 3-9-22)

5.21 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 Division of Marketing and Communications. There is no objection to this procedure. However, any faculty or staff member who is contacted by and either gives a statement to the press or arranges for a subsequent interview is requested to inform the Vice President for Marketing and Communications. 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; Regents, 3-9-22)

5.22 PUBLICATIONS AND PROMOTIONAL MATERIALS POLICY, SOCIAL MEDIA

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 Marketing

and Communications or the designated publications office. The full text of this policy is maintained by the Division of Marketing and Communications. More information on the OU's Social media policy can be found in https://www.ou.edu/marcomm/social-media

(Regents 4-4-91, edited 3-29-00, 1-27-04, 6-23-04, 3-9-22)

5.23 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)

5.23.1 Endorsement Prohibited

The University does not endorse any commercial product, program, enterprise, or idea. For purposes of this policy, promoting OU Health is not considered an endorsement.

(Regents, 1-27-04, 3-9-22, 6-20-21-24)

5.23.2 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 Marketing and Communications or his/her authorized designee. Advance written approval of all layouts or copy must be obtained.

(Regents, 1-27-04, 6-23-04, 3-9-22)

5.24 GENERAL ADMINISTRATIVE POLICIES AND PROCEDURES

5.24.1 Procurement Procedures

The University of Oklahoma's Procurement Department (also referred to as the Purchasing Department) oversees the strategic direction and operational efficiency of procurement programs for the entire University system, including the Norman, Health Sciences Center, and Tulsa campuses and programs. Procurement has three primary objectives:

- Support the University's Mission by Creating Value – Ensure departments and business units and their faculty, staff, and students can effectively and efficiently accomplish their academic, research, and administrative missions by developing efficient procurement practices; engaging internal customers; managing supplier relationships; leveraging the buying power of the University, State of Oklahoma, and other cooperative groups and associations; negotiating cost effective contracts; and making procurement decisions in the best interest of the University.
- Ensure Open, Fair, and Honest Processes - An open, competitive process ensures fair and equitable treatment of potential suppliers; avoids conflicts of interests; increases the value to the University; protects against fraud, waste, or misuse; and builds trust and confidence in University processes.
- Maintain Accountability and Transparency – Inform and educate University administration, faculty, staff, students, alumnus, taxpayers, elected officials or bodies, and the general public on how the University uses and manages its resources and protects against waste or fraud. Transparency is essential to building and maintaining a relationship of trust and confidence between the University and the public.

Any agreement made with a vendor may be an enforceable contract. An individual who enters into one that is later found to be against governing laws, policies, and procedures, may be held personally liable. The University Procurement's website is the best place to learn about University acquisition rules.

5.24.2 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 appropriate 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)

5.24.3 Property Controls

General

The Property Inventory Section of the Department of Financial Services is responsible for maintaining a permanent and detailed centralized inventory system for recording all tangible capitalized property that meets the University's approved cost threshold and were purchased with University funds, acquired by private gifts, or transferred from an outside source as required by the Federal Government, the State of Oklahoma Office of Management & Enterprise Services (OMES), and the University of Oklahoma Board of Regents. Additionally, Property Inventory coordinates physical inventories of University- and sponsor-owned tangible capitalized property and selected tangible non-capitalized property on an annual basis.

Accountability and Responsibility

a. **Accountability**. Accountability for all moveable tangible property in use rests with department chairs, directors, and/or budget unit heads and is required in order to minimize risks of misuse, damage, theft, or loss of assets. Accountability is the requirement imposed on those individuals empowered with the authority to decide as to the acquisition, employment, and disposition of assets. Accountability cannot be delegated, but can be transferred to other accountable individuals or discharged through the proper execution of Property Inventory procedure. If a breach of accountability results in significant loss (either instantly or cumulatively over time) to the University, appropriate administrative action may be taken.

b. **Responsibilities**. Each department chair, director, and/or budget unit head is responsible for all property purchased or transferred to his/her area as reflected on the official inventory records of the University.

Off-Campus Usage of Assets

University Assets are to be used in OUHSC controlled locations. Assets may be allowed to be used by employees in off-campus locations with the proper authorization. In rare circumstances non-employees may be allowed to use assets off-campus.

For more information, please refer to the Property Inventory procedures and related forms found on the Financial Services website:

- **Financial Services – Property Inventory Policies and Procedures:**
  https://financialservices.ouhsc.edu/Departments/Auxiliary-and-Service-Unit-Accounting/Property-Inventory

- **Financial Services – Property Inventory Forms:**
  https://financialservices.ouhsc.edu/Forms/equipment-removal-form
  https://financialservices.ouhsc.edu/Forms/missing-equipment-notification
  https://financialservices.ouhsc.edu/Forms/equipment-inventory-off-campus-authorization-form

5.24.4 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.

5.24.5 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)

5.24.6 Liability Insurance

For all University employees working within the proper scope of their duties, the State of Oklahoma provides liability coverage, including general liability, automobile liability, and professional liability through a self-insurance pool administered by OMES State Risk Management under authority 74 O.S.§85.58A. Coverage under this program corresponds with the Oklahoma Governmental Tort Claims Act (OGTCA) 51 O.S. §151,et seq.. 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. In addition, OMES State Risk Management has secured Out-of- State Liability Insurance and Foreign Liability Insurance that provide both General Liability and Automobile Liability coverage for University employees while acting within the proper scope of their duties while traveling outside the State of Oklahoma or internationally. Further information is available from the University's Office of Enterprise Risk Management.

Texting while driving anytime is a violation of Oklahoma law. Specifically, the 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.

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.

5.24.7 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 Enterprise Risk Management on your campus.

5.24.8 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 Enterprise Risk Management.

5.24.9 Parking Regulations

The University of Oklahoma is empowered to regulate and enforce parking in the Oklahoma Health Center and Research Park. All employees and students 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 Services (https://parking.ouhsc.edu), Research Park 840, Suite 150; or (405) 271-2020.

The University of Oklahoma Health Sciences Center does not pay for parking for employees or students.

5.24.10 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. 13th street to N.E. 4th street and on the east side of Lincoln Boulevard from N.E. 15th street south to N.E. 8th street and from Lincoln Boulevard east to Lottie Avenue.

For more information about the jurisdictional boundary, visit: https://www.ouhsc.edu/police/About-OUHSC-PD/Jurisdictional-Boundaries

5.24.11 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.

5.24.12 Hazardous Weather Conditions Policy

It may become necessary to close part or all of 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 Weather Closure Committee. The determination of closing will be decided by the Senior Vice President and Provost in consultation with the Weather Closure Committee and with notice to a representative of OU Health. 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 sent out using the University's Emergency Communication System via text, phone call, email, website and other available outlets. In addition, this information will be distributed to the media via the HSC Police Department or the Division of Marketing and Communications.

(Regents, 3-9-22)

5.24.13 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 Facilities Management.

5.24.14 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.

5.24.15 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.

5.24.16 Central Addressing

Human Resources provides a Central Addressing function available for use by all OUHSC departments. It is located in Suite 270, Research Park 865, or call (405) 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 and programs.

2) Human Resources maintains a listing of all OUHSC employees, which is used to publish the campus telephone directory.

5.24.17 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 campus must be routed through Facilities Management to determine if oversight will be handled by A&E Services. All projects for the Tulsa Campus must be approved and have oversight by A&E Services.

5.25 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. For Non-University Sponsored Activities, a Facilities Use Agreement is required to be filled out and submitted to the Director of Enterprise Risk Management for final approval. The Facilities Use Agreement is located on the Office of Enterprise Risk Management's website at https://risk.ouhsc.edu/. Facility repairs, maintenance, and renovation are managed by the Facilities Management Department . No modifications to OUHSC facilities shall be made without prior approval from Facilities Management.

5.25.1 Operations

Operations is responsible for space planning and allocation processes, space surveys and facility studies, facilities inventory, lease management, campus master planning, and planning for the development of new facilities for campuses in Tulsa and Oklahoma City.

5.26 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.

5.27 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.

- Research Misconduct (see Appendix P)

Fraud detected or suspected by a University employee must be reported immediately to the University's Internal Audit department or if an individual would like to remain anonymous they can report concerns to the University's hotline, OU Report It at (844) 428-6531 or online at https://ouhsc.ethicspoint.com!

University employees are prohibited from taking any retaliatory action against an individual for good faith reporting, or for causing to be reported, suspected fraud. Any person who has been subjected to retaliation in violation of this policy or any person who knows that such retaliation has occurred should notify any of the following responsible offices: Internal Audit, Compliance 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 the following:

(1) 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.

(2) conducting periodic facilitated fraud risk assessments to identify areas of concern and update the highest fraud risks in the University and collaborate with management to effectively manage, mitigate, and monitor these risks.

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 (including identifying fraud risks) and deterrence, 2) adopt procedures consistent with generally accepted standards of fraud investigation to govern its conduct of fraud investigations, 3) administer the OU Report It! hotline; and 4) manage the appropriate referral of reports.

(Regents, 6-21-16)

5.28 INFORMATION TECHNOLOGY

OU Information Technology (IT) is a system wide organization that enables the achievement of the University's strategic goals in fulfillment of its purpose: We Change Lives.

Through its focus on streamlining and optimizing technology resources and its use of proven technologies, mature service management practices, and innovative design, OU IT unlocks efficiencies and creates capacity for investment in and support of key mission areas including research, cyber security, the student experience, and the administrative and operational systems that are fundamental to the University's operations and activities.

5.28.1 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 OU IT Policy Web Site at https://www.ou.edu/ouit/cybersecurity/policies for a list of applicable policies and policy details

5.28.2 Campus Events and Activity Notices

Inside HSC (http://inside.ouhsc.edu) is the primary medium of electronic communication for announcements to the OUHSC campus. Members of the OUHSC community are encouraged to review this webpage regularly to stay informed of activities and events on the campus.

Any individual with an HSC computer account can post items to Campus Events and Activities at http://news.ouhsc.edu.

Items submitted to Campus Events & Activities:

- Should be concise and provide links to additional information or forms, as necessary.
- Will be governed by the Acceptable Use Policy (https://www.ou.edu/ouit/cybersecurity) with the recognition that the Electronic Bulletin Board messages are not necessarily University business.

5.28.3 Rounds and Seminars Website

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 and activities.

5.29 INTERNATIONAL TRAVEL REGISTRATION AND REVIEW POLICY

OU employees must register certain international travel prior to departure. This registration and review will allow OU to ensure, for example, that appropriate insurance is in place for the travel and to determine the need for export licenses or additional documents that enable employees to travel with or access OU data and equipment from the designated country.

The International Travel Registration and Review policy can be found at https://universityok.navexone.com/content/dotNet/documents/?docid=47&public=true and questions can be directed to the Office of Export Controls.

6. BENEFITS

Faculty who are dually employed by OU Health or OUHPI receive their benefits through OU Health or OUHPI and should refer to their OU Health or OUHPI letter of employment and the benefits information provided by OU Health or OUHPI. The information in this Section 6.1 through 6.12, but excluding 6.2, is not intended for individuals with a dual OU Health appointment.

(Regents, 3-9-22, 6-20-21-24)

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, and flexible spending accounts for healthcare and dependent care expenses.

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 basic 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 reduced premium 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 .75 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, including student employees paid by the University. Additional information on all of these benefits can be found on the Human Resources website at www.hr.ou.edu.

(Regents, 3-9-22)

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 that 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, during an approved leave of absence period. The cost of coverage during the leave period is the employee's responsibility. Employer paid subsidies are not provided during an unpaid leave of absence.

(Regents, 3-9-22)

6.2 RETIREMENT PLANS

This section contains a general summary of the University's retirement plans. Two retirement tracks are available at the University of Oklahoma. Retirement Track A for employees hired on or before December 31, 2022, includes a defined contribution plan and the Oklahoma Teachers' Retirement System (OTRS). Retirement Track B includes only a defined contribution plan. For employees hired on or after January 1, 2023, Retirement Track A includes Oklahoma Teachers' Retirement System. Retirement Track B includes a defined contribution plan.

For employees hired on or before December 31, 2022, in either retirement track, 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. For employees hired on or after January 1, 2023, only Track B 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. All benefit eligible 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.

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 OUHSC 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 https://hr.ou.edu/. The University of Oklahoma is a participating member in Social Security. Additional information about Social Security is available at: www.ssa.gov.

*Employees who are dually employed are not eligible to participate in the University 403(b) but may participate in the 457(b). It is recommended that employees who are dually employed participate in either the 457(b) offered at OUHSC or the 457(b) offered at OU Health, but not both.

(Regents, 3-9-22)

6.3 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.

6.3.1 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.

6.3.2 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; and (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.

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.

6.3.3 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).

6.3.4 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.

6.4 LEAVES POLICY

6.4.1 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. 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 employee 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 employee's or 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 employee's work or 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. Employer-paid subsidies are not provided during an unpaid leave of absence; the cost of coverage during the leave period is the employee's responsibility.

(Regents, 11-12-43, 1-24-95, 1-27-04, 6-23-04)

6.4.2 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)

Nine- and ten-month faculty accrue 96 hours (12 days) of extended sick leave per year. There is no maximum accrual amount for full-time faculty members with the rank of instructor or above who hold continuous appointments through the Norman and Health Sciences Center campuses.

Nine- and ten-month faculty do not accrue other paid leave. Absences of nine- and ten-month faculty for reasons other than personal illness or care of a qualified family member[1] will be charged as leave without pay. 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.

Dually employed faculty should contact Human Resources for specifics on their PTO and other benefits.

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.

6.4.3 Extended Sick Leave (ESL) Usage

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, , 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. Nine-and ten-month faculty will

[1] Qualified family members are defined by the U.S. Department of Labor as child(ren), spouse, or parent. Child(ren) means a biological, adopted, or foster child, stepchild, legal ward, or child of a person standing in loco parentis, who is either under age 18, or age 18 or older and "incapable of self-care because of a mental or physical disability" at the time that FMLA leave is to commence. Spouse means a husband or wife as defined by or recognized in the state where the individual was married and includes individuals in a common law marriage or same-sex marriage. Parent means a biological, adoptive, step- or foster father or mother, or any other individual who stood in loco parentis to the employee when the employee was a minor. This term does not include parents-in-law.

not be required to take the first five days of leave for a personal illness or for the care of a qualified family member as unpaid leave as nine- and ten-month faculty do not accrue paid time off.

Extended sick leave for the purpose of an absence due to the care of a qualified family member with a serious health condition is permissible for those eligible for FMLA and with an approved certified FMLA qualifying event. Extended sick leave for the care of a qualified family member may be used for no longer than 11 weeks for staff members and 12-month faculty and no longer than 12 weeks for nine-month faculty.

For staff and 12-month faculty when there is no accrued time in the paid leave account, the first five days per incident of illness or care of a qualified family member must be leave without pay. Absence due to personal illness or care of a qualified family member beyond five consecutive working days will be deducted from the extended sick leave account if accrued time is available. When there is no accrued time in the extended sick leave account, absence due to personal illness or care of a qualified family member will be deducted from paid leave time. Scheduled paid leave time taken for consideration as time worked is defined in the Human Resources 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 or for care of a qualified member 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 or for care of a qualified member may be considered a continuation of the incident and charged to extended sick leave.

Absences due to personal illness or illness of a qualified family member must be reported in the time system. 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 or the care of a qualified family member must be taken in the following order for staff and 12-month faculty: five days of paid leave time, extended sick leave, remaining paid leave time, leave without pay. For nine-month and ten-month faculty, leave must be taken in the following order: extended sick leave and 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 may 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. Employees on Extended Sick Leave (ESL) will not accrue Paid Time Off (PTO).

Dually employed faculty should contact Human Resources for specifics on their ESL and other benefits.

(Regents, 4-4-91, 6-19-96, 3-29-00, 1-27-04, 6-23-04, 10-22-08, 6-1-12)

6.4.4 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 appropriate vice president.

(Regents, 7-23-87, 1-27-04, 6-22-11)

6.4.5 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 shall 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)

6.4.6 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; and (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).

6.4.7 Family and Medical Leave

This policy, in its entirety, is contained in Appendix L.

6.4.8 Shared Leave Policy

This policy, in its entirety, is contained in Appendix L.

6.4.9 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 30 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) ortheir designee and accompanied by written verification from the health care provider that the employee will serve as a donor.

6.4.10 Breastfeeding Support

The University supports meeting the needs of nursing mothers in the workplace. The University will make reasonable effort to assist employees who are breastfeeding after returning to work in the following ways:

1. Break time - Employees should be provided flexible and reasonable breaks as needed to facilitate breastfeeding or breast milk expression. To the extent a supervisor believes such breaks pose an undue burden, the supervisor shall consult with HR.
2. Location - Reasonable effort will be made to provide the employee, in close proximity of the work area, a comfortable and private location (other than a bathroom) that is shielded from view and free from intrusion close to an employee's work area with an electrical outlet to breastfeed or express breast milk, as well as access to a nearby clean water source and a sink for washing hands and rinsing breast pump equipment. Designated lactation rooms and access information for each campus can be found at https: //hr. ou. edu/Employees/Balancing-Work-Life/Nursing-Mothers. If employees prefer, they may also breastfeed or express milk in their private office.
3. Environment - When possible, employees should have access to a refrigerator for the storage of expressed breast milk. Breast milk should be stored in a refrigerator designated for food and not for medication. Sealed containers of breast milk must be labeled with the employee's name and date.

4. Resources - Breastfeeding information and lactation consultant support is available 24 /7 via the Oklahoma Breastfeeding Hotline Call: 1.877.271. MILK(6455) or Text: OK2 BF to 61222. Additional information is available at:
    a. https: //www. ok. gov/health/Family_Health/Breastfeeding/index. Html
    b. https: //www. ouhealth. com/health-services/pregnancy-childbirth/lactation-services-breastfeeding

(Regents, 6-21-11)

6.4.11 Jury Duty

Judicial/Jury Leave Pay will be given to benefits-eligible employees who are 1) called for jury duty or 2) subpoenaed as a witness before a court of law, legislative committee, or judicial body.
Documentation is required to access time off for judicial (jury) leave and should be maintained in the department file.

6.5 HOLIDAYS

Each academic year, the University recognizes 14 holidays, including New Year's Day, Martin Luther King Jr. Day, Memorial Day, Juneteenth, Independence Day, Labor Day, Thanksgiving Day, and Christmas Day, plus six 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.

(Regents, 3-9-22)

6.6 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)

6.7 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 (405) 325-2424.

6.8 CREDIT UNIONS

Faculty and staff who are members of FOCUS Federal Credit Union can authorize payroll deductions for loan repayments and/or savings.

6.9 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 benefits-eligible 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 benefits-eligible employee not designated as ”temporary” who enrolls in regular coursework will be charged one-half the resident tuition 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 tuition 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 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 full-time appointment during the summer, a three-hour limitation will apply on the waiver. A faculty member who is on a full-time nine-month appointment is considered to be full-time for purposes of any enrollment made during a following summer session. In such cases, those not on summer appointment may receive a one-half tuition waiver on six semester hours of credit. Under no circumstances will the reduced enrollment fee apply to more than six semester hours of coursework in a single semester or three hours in a summer session. Enrollment fees for hours taken over this maximum will be charged at the full rate. At the time of tuition 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.

6.10 FACULTY HOUSE

The Faculty House is located on the HSC Campus at 601 N.E. 14th Street and serves the Health Sciences Center campus and the metro Oklahoma City area. Hours of operation are 7:30 am until 2:00 p.m. Monday through Friday. Faculty House offers catering for groups from 10:00 a.m. to 3:00 p.m., serves breakfast from 7:30 a.m. until 10:00 p.m. and lunch from 11:30 a.m. until 2:00 p.m. They also handle food service for banquets and special events. The facility has an open dining room, and several private rooms, and a seasonal patio for events.

OU Health Sciences Center employees, staff, students, and retirees are allowed to dine at the Faculty House at their expense and without a membership and are able to reserve the Faculty House for private functions at a discounted rate.

More information is available at www.ouhsc.edu\facultyhouse.

6.11 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.

Cards may be obtained from the OneCard Office, 865 Research Parkway, Room 240A, from 8:00 a.m. to 5:00 p.m., Monday through Friday.

The initial card is provided free of charge; replacement cards cost $20.00.

6.12 UNIVERSITY HEALTH CLUB, UNIVERSITY RESEARCH PARK HEALTH CLUB, AND OU TULSA FITNESS CENTER

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.

The University Research Park Health Club is a premier health and fitness facility that occupies 6,000 square feet of space, incorporating the latest technological advancements in fitness and wellness. This facility is conveniently located within the University Research Park Complex on the first floor of 865 Research Parkway.

For a list of services, hours of operation, and membership rates, call (405) 271-1650.

OU Tulsa Fitness Center is available to all HSC students, medical residents, paid faculty, and staff is housed in the Founders Student Center located at 4502 E. 41st Street. For questions or concerns please contact OU-Tulsa Student Affairs at 918-660-3100 or TulsaSA@ou.edu

7. LIBRARY FACILITIES

7.1 ROBERT M. BIRD UNIVERSITY OF OKLAHOMA 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 OU Health Sciences 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 provides access to approximately 150,000 book and audio-visual titles and 9,000 journal titles in print or electronic format, and 170 databases.

The History of Medicine/Archive Collection contains books, journals, and manuscripts that are of historical value. Included in this collection are archives related to the OU Health Sciences which includes materials from each of the colleges, as well as the history of health care in Oklahoma. Historical digital collections are available from the Library's homepage and reflect a selection of the individual collections located in the History of Medicine.

The Library circulates most physical books; the archives and journals are non-circulating.

7.1.2 Services

The Library serves the OU Health Sciences community as well as health professionals, institutions, and consumers in the State. Access to the Library's resources and policies can be found on 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 used to locate and access both print and electronic titles available in the Library's collections. Electronic resources are available on campus and remotely to students, faculty, and staff affiliated with the OU Health Sciences. For assistance in using any of the resources contact the Reference and Instructional Services Department using Ask a Librarian on the home page. The Library provides informational workstations for accessing the catalog, databases, electronic books, journals, and information on the Internet, as well as access to word processing, spread sheet, database, and other software.

When materials are not available from the Library's collection, they can be borrowed through interlibrary loan. The Library is a member of several networks designed to expedite the transfer of materials 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. Copying, 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 the OU Health Sciences personnel.

7.2 SCHUSTERMAN LIBRARY, UNIVERSITY OF OKLAHOMA - TULSA

The Schusterman Library at OU-Tulsa is the primary library for all OU and OUHSC faculty, staff, and students in the Tulsa area. The Schusterman Library supports the OUHSC degree programs located in Tulsa in medicine, nursing,

allied health, dentistry, and public health, as well as OU undergraduate and graduate programs in architecture, computer science, education, engineering, human relations, library and information studies, organizational dynamics, public administration, and social work.

7.2.1 Collections

The Library collection contains more than 12,000 physical books, and over 67,000 physical journal volumes, with 135 active print journal subscriptions. OU-Tulsa students, faculty, and staff have complete access to all electronic resources provided by their respective main campuses. The online catalog is available for searching print and electronic titles owned by the Library

The Library's textbook reserves collection provides access to textbooks that students require for their coursework. The Rotation Reserves section provides access to selected print books used in clinical rotations by both medical and PA students in the School of Community Medicine. The Library also makes available for users an extensive collection of technology items, such as Chromebooks, webcams, chargers, and adapters.

7.2.2 Services

The Library provides interlibrary loan and document delivery for the OU-Tulsa campus. When materials are not available through the Library's collection, these can be requested and provided through interlibrary loan.

The Library serves all members of the OU-Tulsa campus. Information about the Library's services and policies are available on the Library's website: https://library.tulsa.ou.edu and offers a variety of services that enhance and support teaching and research on the OU-Tulsa campus.

Through chat, online, individual and group consultations, librarians collaborate on research questions, citation assistance, and presentation design.

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 Official 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 (VPR).

8.1.1 Proposals and Contracts

The Office of Research Administration , in conjunction with the VPR, 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 federal contract applications and negotiations, subcontracts, and collaborative projects with other institutions, including assisting with outside review of program project and center grants if needed; (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 grant applications and proposals in final form, including science-related documents (e.g., Specific Aims, Research Strategy, Significance, Innovation, Approach, Budget), must be routed through and reviewed by the ORA at least three (3) full University business days prior to the sponsor's deadline for standard applications and five (5) full University business days for large, multi-project applications. This includes all proposals to state, federal, non-profit, foundation, and industrial/pharmaceutical sponsors, regardless of the type of submission (hard copy or electronic). If the internal deadline is missed, the VPR or their designee may approve a waiver of the policy upon the investigator's request. 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 an Institutional Official in 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, data use, business associate, material transfer, confidentiality, license, consulting, speaking, fee for service, provider, and other professional service contracts; 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.

(Revised, 3-9-22)

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 the University and at granting agencies.

The ORA maintains a web page (http://research.ouhsc.edu) 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.

(Revised, 3-9-22)

8.1.5 Institutional Committee Reviews

All protocols for human subject 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, when applicants (either investigators or ORA) are notified that just-in-time information is needed. This notification is not a notice of award nor should it be construed to be an indicator of possible funding. 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 Use Committee (IACUC), Institutional Biosafety Committee (IBC), Conflict of Interest Office, Radiation Safety Committee, and Environmental Health and Safety Office. These approvals must be provided to ORA by the deadline request by the sponsor. 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 Health, Dean McGee Eye Institute, and/or other committees, centers, or entities**.**

(Revised, 3-9-22)

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. 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 (NIH), Office of Laboratory Animal Welfare, for the use of animals in research, testing, and training programs.

(Revised, 3-9-22)

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 recommends to the President, through the Senior Vice President and Provost, faculty nominees for the George Lynn Cross Research Professorship.

(Revised, 3-9-22)

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.
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, as well as the University, scrutinize consulting arrangements and may determine the services to be unnecessary or unauthorized. Such disallowed costs must be reimbursed with unrestricted or non-sponsored funds.

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. (Professional service agreements not involving grants or research must be approved through the University's normal approval process, see Section 3.5.3.)

(Revised, 3-9-22)

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 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) Any relationship to the University and/or 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.

(Revised, 3-9-22)

After the Award:

If a consultant line was not included in the proposal, the following steps must be taken:

1) A rebudget request must be sent to ORA and funds adjusted to include the consulting budget category. Justification for the need of 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 an Institutional Official in 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.

(Revised, 3-9-22)

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) A re-budget request must be sent to ORA and funds adjusted to include 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 an ORA Institutional Official and the 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; Revised, 3-9-22)

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

University Faculty salaries will be budgeted on sponsored research and grants and contracts commensurate with actual time and effort. Corresponding salary released from institutional accounts (e.g., 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 University 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, or a portion may be released to the faculty member as added incentive payment.
>
> 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 (PIs) 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 sponsoring mentor on the project, and to be responsible to the University 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 VPR 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 COMMITED 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, 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 of their respective College for those commitments and, therefore, may not commit 100% paid or unpaid effort to sponsored grants and/or contracts.[1]

8.8 ALLOWABLE SALARY ON OUHSC GRANTS AND CONTRACTS FOR OUHSC EMPLOYEES WITH VA APPOINTMENTS

8.8.1 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 and the salary from OU Health for dually employed faculty. 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. For dually employed COM faculty, institution base salary includes total compensation for both University and the affiliated institution.

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

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 IBS 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 8/8th 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.

8.8.2 Base Salary Calculations for Dually Employed OUHSC and OU Health (OUH) Clinical Faculty

IBS calculation for OUHSC/OUH dually employed faculty should be performed as outlined below:

All dually employed OUHSC/OUH Clinical Faculty who submit a proposal to an external sponsor should adjust their OUHSC salary to the equivalent of 1.0 FTE in their proposal budget. **Example**: Professor X has a dual OUHSC/OUH appointment. If his/her OUHSC (academic) FTE appointment is 0.2 FTE and the base salary in PeopleSoft is $40,000, Professor X (in coordination with their department support) should adjust his/her FTE and base salary to 1.0, which would result in an IBS of $200,000 to report on the grant application when preparing the budget. If these adjustments exceed a sponsor's salary cap, the salary cap should be used.

Adjusting the OUHSC IBS to 1.0 FTE equivalent allows flexibility for any necessary adjustments that need to be made regarding academic and clinical FTE splits at time of award, while still being compliant with OUHSC IBS policy.

As OUHSC/OUH dually employed Clinical Faculty receive additional awards, they will need to work with their departments to adjust their OUHSC (academic) FTE accordingly to align with their research commitment needs, while

1 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."

still appropriately reflecting their committed effort for each award. **Example**: Faculty with an academic appointment of 0.2FTE would have a maximum of 2.4 calendar months (CM) available for OUHSC academic/research commitments. If they need more than 2.4 CM for their combined academic/research award commitments, then OUHSC FTE would need to be increased and OUH clinical FTE decreased as necessary to prevent any potential FTE over-commitment for OUHSC/OUH dually employed faculty.

(Revised, 3-9-22)

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 sponsored projects, 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. The only exception to the negotiated rate is for those federal programs or entities where a lower rate is specified and published.

1.3 Any requests for an exception of the applicable indirect cost rate must follow the exception process described in Section 4.0.

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.

(Revised, 3-9-22)

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 sponsor funded research. The applicable on- and off-campus indirect cost rate(s) for research, public service, training, and instruction can be found on the Vice President for Research webpage.

The off-campus rate applies to facilities not owned/leased by the institution and to which rent is directly allocated to the project(s). If more than 50% of a project is performed off-campus, the off-campus rate will apply to the entire project.

(Revised, 3-9-22)

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 or other awards excluded by statute. This includes funds received directly from federal agencies and funds received indirectly from federal agencies as "flow-thorough" 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. Most non-profit entities limit F&A. OUHSC will accept the sponsor's F&A policy if the policy is published on the sponsor website, in the official program announcement, or on the sponsor-approved application form.

3.4 INDUSTRY: CLINICAL TRIALS - The facilities and administrative costs rate for Clinical Trials funded by Industry/Pharmaceutical companies may vary but must include 25% for core Institutional overhead costs. Departmental or College Administrative cost rates may be included in addition to the Institutional 25%. Any exceptions to the Department or College rate must be approved by the VPR and dean in writing in advance.

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. There will be no exceptions to the institutional rate for industry funded research.

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 those excluded by statute. All other deviations are subject to administrative approval by the Vice President for Research. If sponsor guidelines limiting facilities and administration costs are publicly documented, no exception request is required. All other requests to reduce F&A must be provided with each proposal requesting an exception.

4.2 All requests for exceptions to the University's Facilities and Administrative Costs Policy must be made in the electronic proposal routing form.

4.3 The Vice President for Research or delegate will make the final decision.

4.4 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.

(Effective July 1, 2009; Revised, 3-9-22)

8.10 POLICY REGARDING FACILITIES AND ADMINISTRATIVE (F&A) COSTS ON CLINICAL TRIALS

Seventy-five percent (75%) of all F&A costs are recovered by the VPR when all of the following are met:

1) The study is sponsored by an industrial company; i.e., pharmaceutical, device companies;
2) The study is clinical; i.e., involves living human subjects;
3) The study involves a drug or device;
4) Payment by the sponsor is 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 25% F&A costs recovered. All appropriate F&A costs (the Provost's 25% 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;Revised, 3-9-22)

8.11 SERVICE AS SPEAKER FOR PRIVATE INDUSTRY

- **Employees 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 all contracts for employees to serve as educational speakers for private industry must be routed through SoonerTrack.
    - Educational speaker agreements with annual cumulative payments below $5,000 and meeting certain criteria can be signed by the appropriate College Dean
    - Educational speaker agreements with annual cumulative payments at or above $5,000 must be negotiated and executed by ORA.

[Note: In this policy, the term "industry" means biomedical, pharmaceutical, medical device companies, and companies that make other products used in the treatment of patients or the provision of health care. For purposes of this policy, employees are not prohibited from promoting OU Health.]

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 all 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 the activity is acceptable under this policy.
For questions or clarification, please contact your department chair or dean.

(Senior Vice President and Provost, 6-27-16; Revised, 3-9-22)

8.12 ETHICS IN RESEARCH

The University's Ethics in Research Policy is included in Appendix P

8.13 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:

a) 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.
b) The principal investigator for the small business SBIR/STTR application and the principal investigator for the subcontract to the University must be different individuals.
c) 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 and prior approval by the Conflict of Interest Office
d) The Company must provide evidence of availability of functioning space (independent of University resources) in which Research activities can and will take place prior to submission of the grant application.
e) 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. For STTR awards, Employee must serve as principal investigator in their University capacity, unless otherwise allowed by the Conflict of Interest Office.
f) 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.
g) The Employee must work through his/her college/department to reduce his/her appointment if serving as the principal investigator on an SBIR award.

8.14 INTERNATIONAL TRAVEL REGISTRATION AND REVIEW POLICY

See Faculty Handbook, Section 5.28 for information.

8.15 EXPORT CONTROLS

Faculty members must comply with U.S. export control regulations when their work involves restricted publications; international travel; international collaborations; restrictions from the sponsor or contract; proprietary information or software; work with international faculty, staff, or students; hosting international visitors; international shipments; or international transactions.

Compliance with Export Control regulations also limits activity with entities listed on a United States Government Restricted Party List.

Export Control's policies and procedures can be found at
https://www.ou.edu/exportcontrols/policies_procedures_guidelines

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 and trainees 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
- Radiation Safety
- Human Research Protection Program / Institutional Review Board
- Environmental Health and Safety
- Institutional Biosafety
- Institutional Animal Care and Use Committee ("IACUC")
- 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 and clinical trial billing 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: Healthcare Billing Compliance Office.

9.1.2 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 the University environment; and provide technical assistance to administration, faculty, staff, and students 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 and students must perform their jobs and responsibilities 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 waste 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.

9.1.3 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 those 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.

9.1.4 Institutional Animal Care and Use Committee (IACUC)

The mission of the Institutional Animal Care and Use Committee (IACUC) is to provide for the safe and humane use of animals in education and research. The IACUC carries out this mission through its review and monitoring of proposals describing the use of animals; recurring review of the University's program for animal care and use; inspection of facilities and other locations where animal activities take place; review of concerns involving animals; and the evaluation and assessment of training for individuals involved with the use of animals.

The University has established an IACUC to oversee the Animal Care and Use Program for each of the Norman (OU) and Oklahoma City (OUHSC) campuses. Each campus Animal Care and Use Program and its IACUC functions autonomously in the application of federal regulations, policies, and ethical principles regarding research and training activities that involve vertebrate animals, regardless of sponsorship or performance site location. The OUHSC Animal Care and Use Program is accredited by AAALAC International. The OU and OUHSC Animal Care and Use Programs each maintain separate Animal Welfare Assurances with the Office of Laboratory Animal Welfare at the National Institutes of Health, and Research Facility Registrations with the Animal Care division of the United States Department of Agriculture - Animal Plant and Health Inspection Service.

Faculty and staff appointed by the Institutional Official of each campus Animal Care and Use Program make up the

membership of each IACUC. Members also include qualified individuals who are unaffiliated with the University. The IACUC is responsible for reviewing, requiring modification(s), and approving all activities involving the use of live vertebrate animals in research and teaching. IACUC approval is required before the initiation of any animal activities. Additional information about the OUHSC IACUC is available at http://compliance.ouhsc.edu/iacuc/Home.aspx. Additional information about the OU IACUC is available at https://www.ou.edu/acup.

9.1.5 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 each 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.

9.1.6 Institutional Biological Safety Committee (IBC)

The OUHSC Institutional Biosafety Committee (IBC) is charged with reviewing and approving the biological safety of all OUHSC, OU-Norman, and OU-Tulsa basic and clinical research activities involving (i) recombinant DNA and gene transfer including transfer to humans, microorganisms, and viruses, unless classified as exempt under Section III-F of the *NIH Guidelines for Research Involving Recombinant or Synthetic Nucleic Acid Molecules;* (ii) any work requiring biosafety levels 2 and 3 (BSL-2 and BSL-3) containment; and (iii) any work with biological toxins. Clinical research involving recombinant or synthetic nucleic acid molecules that is not approved by outside IBC services also must be reviewed and approved by the OUHSC IBC.

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 simultaneous with initiation for projects classified under Section III-E of the *NIH Guidelines for Research Involving Recombinant or Synthetic Nucleic Acid Molecules* and before initiation in all other cases specified above;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, personnel, 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.

9.1.7 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, see: https://apps.ouhsc.edu/hipaa/.

9.2 Research Integrity Office

The mission of the OUHSC Research Integrity Office is to promote and uphold ethical research practices by educating researchers on the responsible conduct of research, investigating allegations of possible misconduct, and fostering a culture of research integrity within the community. The Research Integrity Office oversees proceedings related to the Ethics in Research policy (see Appendix P), promotes the responsible conduct of research, and provides guidance and consultations for matters related to research integrity, research misconduct, and scholarly misconduct.

OUHSC requires all individuals who conduct or oversee research or who are eligible to conduct research or oversee research - including managing research accounts (administrative and/or financial aspects) - to complete the designated Research Integrity Training. Departments are responsible for assigning Research Integrity Training (via ePAF) to individuals in their unit whose duties involve conducting or overseeing research or whose salaries are paid from sponsored research accounts.

Additional information about the Research Integrity Office is available at: https://research.ouhsc.edu/research-support/research-integrity

10. APPENDIX A

CHARTER OF THE GENERAL FACULTY AND THE FACULTY SENATE – UNIVERSITY OF OKLAHOMA HEALTH SCIENCES

PREAMBLE

The General Faculty of The University of Oklahoma Health Sciences has adopted the following Charter, within the structure of the University, to assist with the orderly conduct and governance of its affairs, protecting the rights and jurisdictions of individual colleges and their respective faculties; to ensure due process; to provide a forum for the discussion of faculty concerns; and to support collaboration in achieving the goals and purposes of the OU Health Sciences (HSC).

This Charter is not intended to abridge the rights and privileges of any member or sub-group of the General Faculty (i.e., department or college faculty groups) to determine matters of their rightful jurisdiction, academic freedom, and responsibility.

ARTICLE I

10.1 NAME

The name of this organization shall be: "The General Faculty of The University of Oklahoma Health Sciences."

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 creative/scholarly activity, and professional and University service and public outreach; and

C. To develop, recommend, and implement policies for the OU Health Sciences and the University in matters relating to teaching, research and creative/scholarly activity, and professional and University service and public outreach in any matters affecting the welfare of the OU Health Sciences; and

D. To promote collaborative effort within and among faculty, professions, and colleges while respecting the rights and jurisdictions of the individual colleges in the OU Health Sciences.

ARTICLE III

10.3 MEMBERS

10.3.1 Section I. Members

The membership of the General Faculty of the OU Health Sciences shall be composed of all General Faculty members as defined in the OU Health Sciences Faculty Handbook.

10.3.2 Section 2. Voting Rights

All members of the General Faculty shall have full voting rights unless otherwise stated in this Charter.

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 OU Health Sciences is vested in the General Faculty of the OU Health Sciences, 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 General Faculty or by the Faculty Senate (see Article Vll, Section 5).

10.4.3 Section 3. Accountability of Senate

The Faculty Senate shall be accountable to the General Faculty, and none of the Senate's acts shall conflict with actions taken by the General Faculty.

ARTICLE V

10.5 OFFICERS

10.5.1 Section 1. Officers

The Officers of the General Faculty shall be the Officers of the Faculty Senate: Chair, Chair-Elect, Secretary, and Secretary-Elect. These Officers constitute the Executive Committee of the Faculty Senate.

The Executive Committee officers shall perform the duties prescribed by this Charter, by the parliamentary authority adopted by the General Faculty, and any other activities necessary to achieve the purposes of the General Faculty of the OU Health Sciences.

There may be liaisons from the General Faculty as needed and as approved by a simple majority vote of the Faculty Senate Executive Committee and filled by the designated body. The duties of liaisons will be defined upon the formation of the position.

10.5.2 Section 2. Election of Officers

The Chair-Elect and Secretary-Elect shall be elected yearly from the Faculty Senate by a simple majority vote of the Faculty Senate with voting by means designated by the current Chair and tabulation of ballots by a Chair designee. In the subsequent year, the Chair-Elect and Secretary-Elect shall serve out the offices of Chair and Secretary, respectively. The duration of an office shall be one year.

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.

10.5.4 Section 4. Replacement of Faculty Senate Officers

(a) A vacancy in the office of Chair shall be filled by the Chair-Elect. If that is not possible, a candidate to fill the vacancy shall be nominated by the Committee on Committees and approved by a simple majority vote of the Faculty Senate with voting by means as designated by the Chair and tabulation of ballots by a Chair designee.

(b) A vacancy in the office of Secretary shall be filled by the Secretary-Elect. If that is not possible, a candidate to fill the vacancy shall be nominated by the Committee on Committees and approved by a simple majority vote of the Faculty Senate with voting by means as designated by the Chair and tabulation of ballots by a Chair designee.

(c) A vacancy in the office of Chair-Elect or Secretary-Elect shall be filled by a candidate nominated by the Committee on Committees and approved by a simple majority vote of the Faculty Senate with voting by means as designated by the Chair and tabulation of ballots by a Chair designee.

(d) Any Chair-Elect or Secretary-Elect who fills a vacancy shall serve the remainder of the outgoing officer's current term and then serve the next full term.

(e) If the Committee on Committees recommends more than one candidate for a position, the candidate will be selected by a simple majority vote of the Faculty Senate.

ARTICLE VI

10.6 MEETINGS OF THE GENERAL FACULTY

10.6.1 Section 1. Meetings

The General 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 Faculty Senate activities, and for any other business that may arise.

10.6.3 Section 3. Special Meetings

(a) Special meetings of the General Faculty may be called by the Chair of the Faculty Senate, by the Senior Vice President and Provost of the OU Health Sciences, or by written petition of a total of thirty (30) General 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 General Faculty member shall be notified.

(d) Except in cases of emergency, at least seven (7) calendar days' notice shall be given, and the meeting shall be called within thirty (30) calendar days of the presentation of a petition.

10.6.4 Section 4. General Faculty Quorum

Sixty (60) members of the General Faculty of the OU Health Sciences, representing three or more Colleges, provided no more than thirty (30) of the quorum number are from any one college, and constitute a quorum for the General Faculty.

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 General Faculty from each OUHS 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 may be elected by each College for each additional one hundred (100) General 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 OU Health Sciences or their designee shall be an *ex-officio* member of the Faculty 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.

10.7.2 Section 2. Election

(a) Representatives of the Faculty Senate shall be elected by and from each College of the OU

Health Sciences. 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 elected to represent that College rounded to the next highest whole number. They shall be elected by ballot for a one-year term. 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 Faculty 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 simple majority vote of the General 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 Faculty 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 faculty of the removed Senator's College shall select an Alternate to fill that position for the remainder of the Faculty Senate 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 of the Faculty Senate shall be: Chair, Chair-Elect, Secretary, and Secretary-Elect. These Officers constitute the Executive Committee of the Faculty Senate.

There may be liaisons from the General Faculty as needed and as approved by a simple majority vote of the Faculty Senate Executive Committee and filled by the designated body. The duties of liaisons will be defined upon the formation of the position.

10.7.5 Section 5. Powers

(a) The Faculty Senate shall exercise the governance of powers of the General Faculty of the OU Health Sciences as delegated by the General Faculty.

(b) The Faculty Senate shall conduct the affairs of the General Faculty between the latter's meetings, make recommendations to the General 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 General Faculty.

(c) Any member of the General Faculty may bring matters relating to the governance before the General 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 generally meet at least nine (9) times a year and at other times as necessary.

(b) The Faculty Senate shall report significant Faculty Senate activities to the General Faculty in the spring Annual Meeting of the General Faculty.

10.7.7 Section 7. HCS Faculty Senate Quorum

A simple majority of the members of the Faculty Senate constitutes a quorum for the OU Health Sciences Faculty Senate.

ARTICLE VIII

10.8 COMMITTEES

10.8.1 Section 1. Standing and Special Committees

Standing or special committees of the General 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 Faculty Senate shall be an *ex-officio* member of any and all standing and special committees without voting privileges.

(b) All members of the General 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 College representation in the Faculty Senate.

(c) The Health Sciences Student Association may be invited to nominate a student to serve on selected Faculty Senate Committees.

ARTICLE IX

10.9 LIAISON WITH THE OU HEALTH SCIENCES 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 OU Health Sciences and to other administrative officers of the University in relation to matters of interest and importance to the General 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 OU Health Sciences a list of nominees who are willing and able to serve during the ensuing year on the OU Health Sciences 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 OU Health Sciences Message

At the first meeting of the General Faculty each academic year, the President of the University and the Senior Vice President and Provost of the OU Health Sciences, shall be invited to present to the General Faculty of the OU Health Sciences a statement on the State of the OU Health Sciences and their recommendations for furthering the progress of the OU Health Sciences.

10.9.4 Section 4. Disposition of Requests for Action

Requests from the Faculty Senate for action by the Administration or by the University's Board of Regents shall be directed to the Senior Vice President and Provost of the OU Health Sciences, who will then forward these requests to the President of the University. The Senior Vice President and Provost of the OU Health Sciences shall, within thirty (30) calendar days, report verbally or 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 OU Health Sciences Faculty, Staff, and Student Senates; the University President; and the Norman Campus Faculty Senate.

10.10.2 Section 2. Composition

The Senate Liaison Committee shall be composed of the Chair, Chair-Elect, and the Secretary of the Faculty 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 Faculty 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 Faculty 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 General 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 as follows:

(a) Amendments of this Charter and ensuing Rules and Operating Procedures may be proposed at any regular or special meetings of the Faculty Senate.

(b) Amendments must be approved by a two-thirds (2/3) vote of the Faculty Senate with voting by means designated by the Chair.

(c) Amendments shall be submitted to each Faculty Senate member for vote at least fifteen (15) calendar days prior to tabulation of ballots by a Chair designee.

10.12.2 Section 2.Effective Date

Amendments shall be effective immediately upon approval by a two-thirds (2/3) vote of the Faculty Senate of the Health Sciences.

ARTICLE XIII

10.13 ADOPTION

This Charter shall be effective once approved by a majority of the General Faculty in each of the Colleges of the OU Health Sciences 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. Revised and approved by the Faculty Senate 2/24/23 and the University Regents 3/12/24.)

11. APPENDIX B

CHARTER OF THE GRADUATE FACULTY AND THE GRADUATE COUNCIL

ARTICLE I

11.1 NAME

The name of this organization shall be: "The Graduate Faculty of the University of Oklahoma Health Sciences ."

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 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) Eligibility

An active graduate faculty appointment confers Membership in the Graduate Faculty, as either a Full Member or an Associate Member. To be eligible for a graduate faculty appointment, applicants must first have an academic appointment in one of the colleges offering graduate instruction at OUHSC. Members of the Graduate Faculty are appointed to the Graduate College by action of their respective departments/programs and with the approval of the Graduate College Dean. For detailed eligibility guidelines and processes, refer to the Operating Procedures of the Faculty of the OU Health Sciences Graduate College. A temporary graduate faculty appointment is not sufficient for either Full or Associate Membership in the Graduate Faculty.

(b) Full Members
Full Members shall be reviewed at intervals of five years by the Graduate Faculty Appointments Committee and the Graduate Council.

(c) Associate Members

The appointment of Associate Members shall be reviewed every three years by the Graduate Faculty Appointments Committee and the Graduate Council.

11.3.2 Section 2: Voting Rights

Full Members of the Graduate Faculty shall have voting rights in votes of the Graduate Faculty and when serving as voting members or voting officers of the Graduate Council. For the purposes of selecting representatives and determining quorum, each Member's affiliation will be the college of their primary academic appointment. Associate Members shall not have the right to 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 campus is vested in the Graduate Faculty of the OU Health Sciences.

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 OU Health Sciences, nor of the individual colleges of the OU Health Sciences.

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 direction 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 OU Health Sciences Graduate College and shall report the findings to the Senior Vice President and Provost of the OU Health Sciences.

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 OU Health Sciences 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. The Vice President shall not 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, or the Dean of the Graduate College or upon written petition of a total of fifteen (15) Members of the Graduate Faculty of the OU Health Sciences.

(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 five (5) University business days notice shall be given and the meeting shall be called within twenty (20) University business days of presentation of a petition.

11.6.2 Section 2: Quorum

Twenty (20) Members of the Graduate Faculty of the OU Health Sciences, representing two or more Colleges, constitute a quorum of the Graduate Faculty, 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 OU Health Sciences Graduate College, who shall serve as President, and cast a tie-breaking vote on the second ballot, except in matters related to the Review of Dean's Performance, as stated in Article IV, Section 5.

(b) One student representative, elected by the Graduate Student Association.

(c) Graduate Faculty Members, recommended by the college being represented by the Faculty Member and formally appointed by the Graduate Council:

(1) Representatives from each college depending on the number of Members of the Graduate Faculty in each college:

Graduate Faculty Members	Number of Representatives
1-19	1
20-89	2
90-149	3
≥150	4

(2) Additional representatives from colleges depending on the number of graduate students enrolled in graduate programs of departments of such college:

Students	Additional Representatives
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 appointed for terms of three years.

(b) Terms of office of members of the Graduate Council shall, excluding President, be staggered.

(c) No Member of the Graduate Faculty, excluding the President, shall serve more than two consecutive terms as a member of the Graduate Council.

(d) Elections shall be held annually between April and June. Terms shall start on July 1.

(e) Faculty vacancies during a term 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

Full Members of the Graduate Faculty as defined in Article III, Section 1, are eligible to serve as Members of the Graduate Council. Associate Members of the Graduate Faculty are not eligible to serve as Members of the Graduate Council.

11.7.4 Section 4: Meetings

(a) The Graduate Council shall typically meet at least six times each academic 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 through the Dean of the OU Health Sciences Graduate College, who shall act on behalf of the Graduate Council in carrying out the request(s). The Dean, as well as the Graduate Council, shall report in writing their disposition of any request for action or information received from the other party(ies) typically within thirty (30) calendar days. The reports will include rationale for actions taken or not taken by the Graduate Council and/or Dean.

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 Graduate Student Affairs, 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 graduate student as a member, with vote. Such student shall be selected by the Graduate Student Association.

(b) Full 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 OU Health Sciences Graduate College, shall appoint the committees of the Graduate Council. The Dean shall not participate in the appointment of the Dean's 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 OU Health Sciences and Norman campus Graduate Councils.

11.9.2 Section 2: Composition

The representatives from the OU Health Sciences shall be the OU Health Sciences Graduate Dean and two members of the Graduate Council of the OU Health Sciences, 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 that 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 ten (10) University business days prior to tabulation of ballots.

(d) All amendments shall be forwarded to the Senior Vice President and Provost.

11.11.2 Section 2: Effective Date

Amendments shall be effective after approval by the Senior Vice President and Provost.

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 OU Health Sciences and by the Senior Vice President and Provost.

(3-2024)

12. APPENDIX C – STUDENT ACADEMIC POLICIES

C.1 ACADEMIC APPEALS POLICY AND PROCEDURES

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 biased or capricious evaluation by the instructor(s) or evaluator(s). For purposes of this policy, bias is defined as unreasoned or unfair judgment against a person, . Capricious is defined as not logical, 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 biased 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 biased 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. Individuals advising the student or faculty member shall 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. The Chair serves as a voting member of the 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 biased 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 biased 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 biased 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 biased 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.)

(1) **Timeline**: 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 biased 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 of the college offering the course. (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). 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).

(1) Timeline: 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.

The dean 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.

(2) Selection of a Hearing Panel and Chair: 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.

(3) 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
(2) A copy of the written statement provided to the instructor, and
(3) a brief summary of the testimony of each proposed witness (including the instructor and the student)
(4) 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. The Chair , in consultation with Legal Counsel, will determine the relevance of submitted documents based on pertinence to the student allegation of bias or capriciousness.

a. **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. Meetings of the Hearing Panel, including the hearing, are closed to the public

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 pertinent 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.

(1) 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 biased or capricious.

(2) 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 biased 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 biased 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.

(j) 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 biased 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. The student's dean has the responsibility to confirm that the appropriate evaluation is reported to the Registrar and 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

(k) 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.

(l) **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 bias 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 biased or capricious. A student may not appeal an action taken simply because he/she does not agree with it.

(b) **Timeline**: A hearing request must be made within 10 University business days following the day when the student was notified of the suspension or dismissal. Appeals related to violations of the Student

Professional Behavior in an Academic Program Policy are handled according to the procedures noted below.

(c) **Request for a Hearing**: The student shall make a written request for a hearing to the Senior Vice President and Provost.. The student shall set forth his or her allegation of a biased or capricious decision to suspend or dismiss in a written statement that articulates the circumstances giving rise to the allegation and will provide the statement with the hearing request. The Senior Vice President and Provost shall deny any request for a hearing that does not meet the request 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

(d) **Selection of a Hearing Panel and Chair:** 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 select members (see 4.16.2) and 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. The Chair of the Hearing Panel is a voting member.

(e) **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,
(2) A copy of the allegation provided with the hearing request,
(3) A brief summary of the testimony of each proposed witness

(4) two copies of the exhibits proposed to be presented.

(5) 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.

(f) **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) Meetings of the Hearing Panel, including the hearing, are closed to the public.

(5) 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.

(6) 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 biased or capricious.

(7) 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 biased 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 bias 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.

(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 biased 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 biased or capricious. A student may not appeal an action taken simply because he/she does not agree with it.

(b) **Timeline**: The student shall make a written request for a hearing within 10 University business days following the day when the student was notified of the academic program-related decision. Appeals related to academic program-related decisions are handled according to the procedures noted below.

(c) **Request for a Hearing**: The student shall make a written request for a hearing to the Senior Vice President and Provost The student shall set forth his or her allegation that the dismissal or requirement to repeat a semester or year was biased or capricious in a written statement that details the

circumstances giving rise to the allegation and will provide the statement to with the request to the Senior Vice President and Provost.

(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) **Selection of a Hearing Panel and Chair:** 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 from the college's Academic Appeals Board (see 4.16.2). 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. The Hearing Panel Chair serves as a voting member.

(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) A copy of the student's statement alleging that the dismissal or requirement to repeat a semester or year was biased or capricious,

(3) 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) Meetings of the Hearing Panel, including the hearing, are closed to the public.
(5) 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.

(6) 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 biased or capricious.

(7) 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 biased or capricious decision.

(h) In cases where the student proves there was bias 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.

(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

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, including unpermitted and/or unattributed use of artificial intelligence tools;

(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, in writing, within 10 University business days of discovery, 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 the faculty or staff member shall 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, as stated in the course syllabus, without first filing a charge of academic misconduct, subject to the following limitations and conditions:

(a) **Scope and Timeframe Limits:** 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) **Grade Penalty Limits:** 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) **Admonition Requirements and Timeline:** 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 **Notification about a Misconduct Allegation:** The faculty member shall notify their dean in writing of the incident and the recommendation for admonition, 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, 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 30 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

(a) a faculty member who discovers an incident in a particular course must notify the dean with a brief description of the evidence (and notify 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 recommended additional penalties to the extent of denying credit in the course. The faculty member's grade sanction and any recommended additional penalties 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 reported to the Registrar and 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 (1) notify the student in writing of the charge of academic misconduct, (2) describe the alleged act and the grade penalty and any additional penalties recommended by the instructor, if a course is involved, and (3) inform the student about the right to request a hearing. Notice shall be provided to the student in person, or by mail to the last address provided to the University, or to the student's University email address if the student is enrolled. The dean shall simultaneously send notification to the Vice Provost for Academic Affairs.

Enrollment status: 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; (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, the student may submit a written statement concerning the charge and any related extenuating circumstances that may, by the dean's consideration, affect the imposition of disciplinary sanctions. The student may provide a statement and request to confer 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 a 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 the dean's discretion, may terminate the case.

12.4 HEARING

12.4.1 Academic Misconduct Boards

Each college shall establish an Academic Misconduct Board (AMB). Membership of the AMB for a hearing 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.

An AMB hearing panel, consisting of two students and three members of that college's faculty, will be selected to hear each case. The dean of the college shall appoint an additional faculty member from the AMB to serve as the hearing panel chair. The chair shall be a nonvoting member of the six-member hearing panel.

Responsibilities of the Hearing Panel Chair: The chair is responsible for administrative matters, including scheduling the hearing, notification to hearing participants, notification of hearing panel decisions, and dispensation of hearing related records.

12.4.2 Selection of AMB Hearing Panel

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 AMB Hearing Panel will consider the information and arguments presented, make findings of facts of matters in dispute, and determine whether, by a preponderance of the evidence, the student did engage in the alleged act.

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 chair of the AMB.

The parties may present to the panel relevant evidence and argument concerning extenuating circumstances that may affect decisions about what disciplinary actions might be imposed. The Panel will make recommendations to the dean concerning disciplinary sanctions. (Section 12.5)

12.4.4 Hearing Procedures

(a) The Chair, in consultation with Legal Counsel, shall use the procedures to be followed for the hearing.

(b) The Chair will advise each party of the deadlines for furnishing a list of witnesses to be called, including a brief description of expected testimony, and copies of exhibits to be used at the hearing. The chair will provide these documents to the parties.

(c) The Chair will distribute written notification of a hearing to the parties involved at least ten University business days in advance of the hearing date. Written notification must 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 University business days prior to the hearing.
(6) The hearing will be closed to the public and shall be confidential.

(e) Students who fail to appear after notice will be deemed to have admitted to the charges against them.

(f) Hearings shall be recorded.

12.4.5 **Responsibilities of Hearing Participants**

1. **Principals in the Case:** (a) The burden of proof shall be upon the complainant, who must establish the guilt of the student by a preponderance of the evidence, (b) Principals in the case shall have opportunity to question witnesses and present information and argument deemed relevant by the AMB Chair.

~~2.~~ **Witnesses:** (a) Witnesses shall be asked to affirm that their testimony is truthful. (b) Prospective witnesses other than the complainant and the student are excluded from the hearing during the testimony of other witnesses. (c) All parties, witnesses, and the principals in the case shall be excluded during AMB deliberations.

(l) **3. Hearing Panel Members:** Formal rules of evidence shall not be applicable in these proceedings. 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 at least five University business days prior to the hearing.

(m) (3) Final decisions of the AMB Hearing Panel 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 with the Chair to convey with the majority report.

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. It is the responsibility of the dean to ensure that the grade is properly record in the student record and provided to the Registrar. The AMB record of the case shall be destroyed by the chair of the AMB Panel 20 University business days after transmittal of the finding.

(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 Panel Chair will transmit the finding and recommendations 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 Hearing Panel 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) Dismissal – If a student is reinstated after a dismissal, it is only after a complete reconsideration of his or her case by the Senior Vice President and Provost.

(e) **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.

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 in writing to the Senior Vice President and Provost within ten days of the time such grounds for the appeal are discovered or should have been discovered.

Consideration of such appeals may be given 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 or she 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.

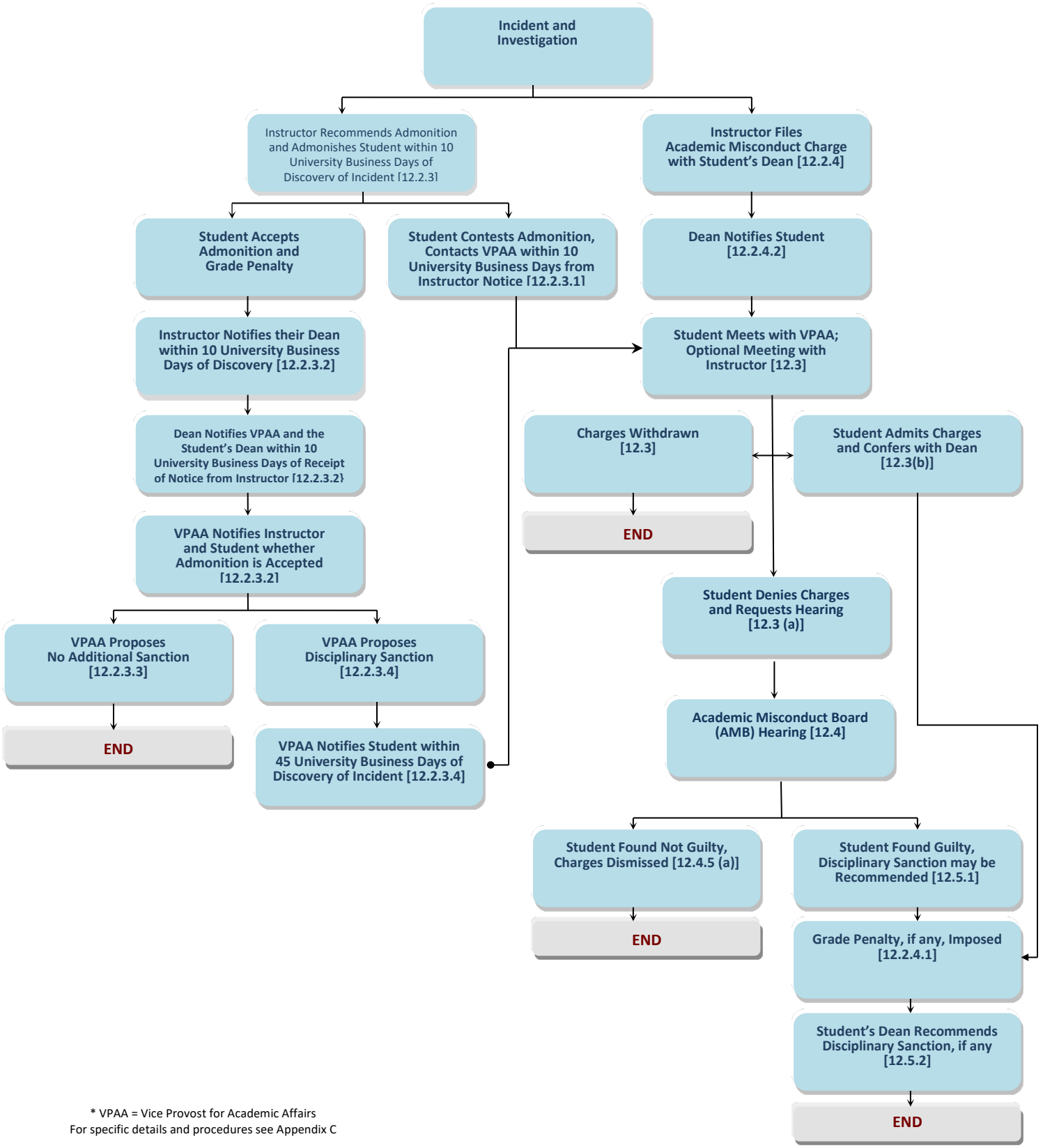
(Regents, 6-9-98, 1-26-99, 12-3-02, 6-25-08)

12.7 ACADEMIC MISCONDUCT IN OFF-CAMPUS OR ONLINE COURSES

The principles of academic integrity, due process, and confidentiality apply fully in all courses offered by any academic unit. When an allegation of academic misconduct arises in a course in which instruction is primarily given or received in a place or through a delivery mode other than geographically co-located with the academic unit, procedures shall be employed that 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 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

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 students) who possess the intellectual capacity for health professions and graduate study and 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 or scientist 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 a health sciences program, he or she commits to comply with all regulations, including those regarding ethical and professional conduct, established by the University, the respective College, and the Program.

As a distinct learning community within the University, health sciences educators have 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 the University (e.g., Higher Learning Commission (HLC), health professions programs (e.g., Association of Schools Advancing Health Professions (ASAHP), CODA, Commission on Denatal Accreditation (CODA), National League for Nursing Accrediting Commission (NLNAC), Liaison Committee on Medical Education (LCME), Accreditation Council for Pharmacy Education (ACPE), Council on Education for Public Health (CEPH) or license or certify OUHSC learners (e.g., National Commission on Certification of Physician Assistants (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 this 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. Document the priority placed by the Health Sciences Center on the academic standards related to student ethical and professional behavior.

2. Provide students, faculty, and staff with clear articulation of the expectations regarding student ethical and professional behavior.

3. Provide the OUHSC colleges with clearly articulated authority to act when dealing with student ethical and professional behavior issues.

4. Identify procedures for managing and addressing student ethical and professional behavior issues.

5. 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, simulations, online and technology-based classes);

2. professional, clinical and community sites that are part of the learning program (e.g., hospitals, clinics, community health centers, community-based organizations, 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, civility, 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:

1. 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.

2. 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). Failure to demonstrate professional demeanor 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)

3. 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)

4. Exhibiting disruptive or threatening 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)

5. 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)

6. Inappropriate interpersonal interaction with respect to race, color, national origin, sex, sexual orientation, genetic information, gender identity, gender expression, age, religion, disability, political beliefs, or status as a veteran.

7. 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)

8. 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

9. 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.

Informal Resolution. 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 with college student affairs and may be used in the future, where applicable, to indicate a pattern, practice, failure to benefit from redirection.

Formal Resolution. 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. The PCR indicates what steps the student is directed to take to resolve the matter and re-establish credibility for professional behavior in the academic program.

Following receipt of the PCR, the college's assistant/associate dean of student affairs will meet with the student to discuss resolution of the concern that generated the PCR and by which unprofessional behavior can be improved, thus allowing the student adequate opportunity to establish or renew a commitment to 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.

Unresolved or Repeated Professionalism Concerns: 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

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 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 who have an adverse finding may be disciplined in accordance with established University policy.

III. DEFINITIONS

Adverse Finding: A CBC report of anything other than "clear" or "no findings" or similar language used by the approved vendor that issued the CBC report.

Break in Enrollment: Non-attendance of at least one full semester or term (e.g., Fall, Spring, Summer or the equivalent clock hours).

Conditional Acceptance: 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 n applicant has met all program admission requirements and has been cleared of any Adverse Findings that would prevent eligibility for enrollment.

Full Standing: A student's eligibility to enroll in and to attend classes for at least one academic semester or term and indicating the student meets academic standards to remain enrolled and attend classes during that semester or term.

Matriculated. 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 graduation, professional certification or licensure. The purposes of conducting a 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 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 to the University of the CBC Consent and Release Form; and
   b) Complete and submit 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.

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 and 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 authorization 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, and 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 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 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 being permitted to re-enroll in any courses. The University considers a student on an approved Leave of Absence to be in continuous enrollment.

IX. SCOPE OF CRIMINAL BACKGROUND CHECKS

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

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

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 calendar 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 at any time 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 Graduate College faculty member, such as the Graduate Liaison, to serve the CBRC of the college/program sponsoring the graduate degree.

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
   d) A Graduate College faculty member, when applicable

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, laboratory, 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 within five University business days following receipt of the written response.

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 the CBRC of the college/program sponsoring the graduate degree.

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 educational, laboratory, practicum, or rotation activities,
   d) conflicts with what was self-reported by the student, or
   e) 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 within five University business days of any proposed disciplinary action in accordance with procedures under the applicable University policy. Actions may include censure, 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, in a Criminal Background Check, or in a written attestation can result in immediate removal of the applicant from the conditionally accepted applicant list or in dismissal of an enrolled student.

XIV. CONFIDENTIALITY OF RECORDS

The University maintainsCBC 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/fpco/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 within 30 University business days of the 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 AND PROCEDURES
The University of Oklahoma

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.

The Student Rights and Responsibilities Code and Procedures may be accessed here: https://www.ou.edu/studentconduct/students-rights-and-responsibilities

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 Work**s

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 – CONFLICTS OF INTEREST

E.1 INDIVIDUAL CONFLICTS OF INTEREST POLICY

I. GENERAL POLICY

A. **GENERAL OBLIGATION**. Conflicts of interest can result in serious harms such as improper personal benefits, loss of University resources, misuse of confidential information, and exploitation of employees, students, and others. Even without such consequences, conflicts of interest endanger the University's mission and betray the public's trust if left unreviewed. Therefore, all persons covered by this policy must promptly disclose any conflicts of interest, including any personal interest, activity, or relationship that may affect or detract from the proper exercise of University responsibilities, and must adhere to the University's judgment on permissibility and management.

B. **SCOPE**. This policy applies to all University Employees[1]. It establishes minimum standards and procedures for addressing personal conflicts of interest and outside professional employment. 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 these. This policy overlaps with but does not replace Employee responsibilities under state and federal law or other University policies, e.g., the IRB conflicts of interest policy; and, compliance with those laws/policies does not eliminate the requirement to comply with this policy, and vice versa. Institutional conflicts of interest and certain other specific personal conflicts are addressed by other University policies referenced in Appendix 3.

II. CONFLICTS OF INTEREST

A Conflict of Interest arises when a financial or other personal interest, activity, or relationship may reasonably be expected to compromise an Employee's judgment in carrying out his/her University responsibilities. When used in this policy, the term Conflict of Interest also includes potential conflicts (i.e., interests, activities and relationships that do not currently constitute a conflict but will foreseeably do so if not subject to limitation) and the appearance of a conflict (i.e., interests, activities, and relationships that in the University's judgment would impair public trust if not managed appropriately). Conflicts of interest include but are not limited to the following:

A. **SELF-DEALING**. Transacting any University business with oneself or one's Family or having a Significant Financial Interest in any Company that could foreseeably benefit from the Employee's decisions in discharging University responsibilities.

B. **USE OF UNIVERSITY RESOURCES**. Taking, allocating, or using any University Resources for a non-University purpose except as otherwise allowed by University policy.

C. **USE OF EMPLOYEES OR STUDENTS**. Hiring or supervising University Employees or students whom one supervises, instructs, or mentors, in a personal interest, activity, or relationship, or receiving a profit from sales or services to them.

D. **CONFLICTS OF COMMITMENT**. Engaging in any full or part-time activity that demands a level of time or energy that can reasonably be expected to impair the performance of one's University responsibilities. Outside activities ordinarily understood as full-time are presumed to be inconsistent with full-time University employment.

E. **ENDORSEMENT**. Presenting one's University affiliation, position, or credentials in a way that gives the appearance of University endorsement of any business, charity, or other outside entity or activity, or creating confusion as to University involvement in the activity.

[1] Definitions of capitalized terms are included in Section 2 and in Appendix 1.

F. **GIFTS**. Accepting a Gift that may reasonably appear to influence the exercise of one's University responsibilities, or that may appear to be compensation for such exercise, or that otherwise may be prohibited by law.[2]

G. **IMPARTIALITY**. Participating in a University matter involving specific parties that is likely to have a direct and predictable effect on the Employee's financial interests (or those of a member of his/her Family); or, where the Employee or Family member has a personal or business relationship with a directly affected party; or where the circumstances would cause a reasonable observer with knowledge of the relevant facts to question the Employee's impartiality. Examples of such parties include members of one's Family, persons with whom one lives or shares a bank account, and persons with whom one has or has recently had significant financial transactions such as employment, contracting, or indebtedness.[3]

H. **CONFIDENTIALITY**. Disclosing confidential information, including proprietary information, acquired through one's University employment to anyone not entitled to receive it.

I. **INTERESTS AND ACTIVITIES PRESUMPTIVELY PERMITTED**. The following interests and activities are presumptively permitted and need not be disclosed so long as they do not constitute a Conflict of Commitment and so long as they are not required to be disclosed by a unit's supplementary policy:

1. interests below the threshold of Significant Financial Interests in a Company that may do business with the University;

2. financial interests in a Company that does no business with the University, or does business with the University outside the course and scope of one's University responsibilities;

3. unpaid service on nonprofit or scholarly boards;

4. service as an editor of a professional publication;

5. services of a scholarly or professional nature for which tokens of appreciation (honoraria) are traditionally conferred and are not undertaken for personal financial gain, for example a scholarly presentation or program evaluation;

6. modest personal Gifts of a customary nature, ordinarily with a value less than $20, where knowledge of the relevant facts would likely not cause a reasonable observer to question the Employee's impartiality;

7. inclusion of University affiliation in publications or communications where not reasonably likely to be taken as endorsement;

8. modest personal use, excluding personal business use, of University Resources such as telephone and email as permitted by other University policies.

III. OUTSIDE PROFESSIONAL EMPLOYMENT, EXCLUDING ACTIVITIES COVERED BY A UNIVERSITY PROFESSIONAL PRACTICE PLAN[4]

A. **GENERAL PROVISIONS**. All Employees shall discharge their responsibilities to the University unhindered by outside employment or other commitments. Full-time Employees owe their primary professional duty to the University; any other employment or activity must be secondary. However, in light of their potential to create Conflicts of Interest, outside employment in the area of one's University duties ("outside professional employment") must be disclosed and approved and may be

[2] Employees receiving Gifts, gratuities, or other third-party benefits are advised to review Appendix 4 for additional legal restrictions. See Rules 4.8, 4.9, and 4.17.

[3] Employees engaged in a matter likely to have a direct effect on their financial interests are advised to review Appendix 4 for additional legal restrictions that may affect participation in the matter. See Rule 4.7.

[4] While excluded from this Section 3, Employees who are in HSC or other Professional Practice Plans are expected to comply with the terms of their respective Plans and all other applicable University policies and procedures.

limited as provided in this section. All Employees who are permitted to engage in outside professional employment that reasonably appears to create an actual, potential, or apparent Conflict of Interest shall provide their services in strict accordance with an approved management plan.

All Employees having decisional responsibilities, in the application for, design of, or conduct of sponsored research, e.g., investigators, key personnel, or as may otherwise be required by a sponsor, must disclose all outside professional employment.

B. **STAFF**. Staff Employees are expected to conduct University business during the University's regular business hours, or as otherwise assigned. Staff Employees may not conduct outside professional employment during their assigned University business hours except when leave is authorized. Salaried staff with appointments from 0.8 to 1.0 full-time equivalent (FTE) shall disclose and receive prior approval for all outside professional employment to assess possible conflicts of commitment. All staff employees must disclose and receive prior approval for outside professional employment that reasonably appears to create an actual, potential, or apparent Conflict of Interest.

C. **FACULTY**. During the terms of their academic appointment, faculty members must attend to all duties and responsibilities including classes, office hours, and service commitments. Faculty participating in a Professional Practice Plan should adhere to these principles in addition to those obligations arising under the Plan.

1. **Faculty During Academic Year**. Faculty members are individually and primarily responsible for arranging their University time. Full-time faculty may, with chair or director approval, commit up to 10 hours in any week for outside professional employment during University business hours so long as the activity does not reasonably appear to create a Conflict of Interest, does not interfere with the faculty member's University duties and responsibilities, and provides important elements of faculty professional development related to University duties and responsibilities. For faculty who accrue leave, the University shall determine the extent to which leave should be taken for outside professional activities.

2. **Summer Outside Professional Employment for 9-Month Faculty**. During any portion of the summer in which 9-month faculty are not on contract with the University, they may engage in outside professional employment without regard to the 10-hour-per-week limitation. Such outside professional employment is presumptively permitted; however, such employment must be disclosed for prior review for actual, potential, or apparent Conflicts of Interest and may not involve use of University Resources, including staff, except as otherwise provided by University policy and agreement by the appropriate office, e.g. the Office of Technology Development in the case of University-owned intellectual property.

3. **Part-Time Faculty**. Faculty with less than full-time appointments may engage in outside professional employment during any time not required by their University responsibilities, unless limited by the terms of their respective professional practice plans.

4. **Regular and Renewable-Term Faculty**. Regular and renewable-term faculty with appointments from 0.8 to 1.0 FTE must disclose all outside professional employment.

IV. DISCLOSURE AND REVIEW

A. **CONFLICT OF INTEREST OFFICE**. The University President shall designate a Conflict of Interest office or offices on the Norman and OU Health Sciences campuses which shall be responsible for the following:

1. **Education**. Providing to Employees on all campuses adequate information at least annually regarding this policy and their obligations hereunder and ensuring that Employees responsible for implementation and administration of this policy receive appropriate training to effectuate the aims of this policy.

2. **Procedures and Implementation**. Managing the activities of the Conflict of Interest Committees, providing oversight, and promoting uniform standards for conflict of interest disclosure, review, approval, and management across all campuses.

3. **Recordkeeping**. Maintaining an inventory of all conflict of interest disclosures, management plans, and related pertinent materials across all campuses. The office shall also devise standards for internal disclosure and for public disclosure of conflicts under management sufficient to assure ethical transparency while maintaining an appropriate level of privacy for personal financial interests and personnel records.

B. **CONFLICT OF INTEREST COMMITTEES**. The University President shall appoint two Conflict of Interest Committees: one on the Norman Campus and one on the OU Health Sciences Campus. Conflicts arising on the Tulsa Campus shall be decided by the Committee for the campus where the Employee's unit is based.

1. **Composition**. Committees shall be composed of four faculty recommended by Faculty Senate; three staff members recommended by Staff Senate from the salaried professional academic and administrative staff; the Vice President for Research or designee; the Senior Vice President and Provost or designee; and additional voting members with specialized competencies and expertise as may be appropriate for deliberations of each Campus's respective Committee. The Committees shall have a nonvoting member designated by the Office of Legal Counsel to provide advice and legal support.

2. **Powers and Responsibilities**. Committees shall determine the appropriate disposition of covered conflicts arising on their respective campuses.

3. **Delegation and Support**. Consistent with the aims of this policy, the Conflict of Interest Offices shall be responsible for the day-to-day operation of their respective Committees and shall establish procedures to obtain recommendations from appropriate individuals and units, to decide cases, to delegate routine matters to the Conflict of Interest Office, and to delegate decision-making for conflicts of a specialized nature where the decision-making expertise is localized.

C. **OBLIGATION TO DISCLOSE**. Employees shall disclose in accordance with their specific campus requirements. Employees shall disclose and seek prior approval for an interest, activity or relationship covered under this policy, or within 30 days of hire, if the activity or relationship predates the Employee's University employment. Disclosures shall be to the appropriate Conflict of Interest Office, in writing, and shall include a clear, detailed explanation of the Conflict. The Conflict of Interest Office may forward the disclosure to other offices for preliminary information, review, or advice as the Office deems necessary.

D. **REVIEW**. Disclosures shall be reviewed in accordance with procedures established by the Conflict of Interest Office. In light of the unique institutional responsibilities of executive officers, conflicts arising for Executive Officers shall be disclosed according to the Institutional Conflicts of Interest policy.

E. **POSSIBLE ACTIONS**. The Conflict of Interest Committee or its designee may determine that the activity, interest, or relationship constitutes (a) no conflict, (b) a potential conflict that will be permissible as long as certain limits are not exceeded, (c) a manageable conflict requiring a management plan; or (d) an unmanageable conflict requiring action to terminate either the interest or the University duty involved.

F. **MANAGEMENT PLANS**. When a Conflict of Interest, whether actual, potential, or apparent, requires management, the Conflict of Interest Committee or its designee shall, with information and input from the Employee and others as it deems appropriate, develop a management plan. Management plans must include a description of the conflict, a summary of the steps required for management, specific individual(s) responsible for the required steps, the records to be maintained under the plan, and a schedule for review, which must occur at least annually.

V. REMEDIATION, RESCISSION, AND ENFORCEMENT

Reports or evidence of policy violations received by the Conflict of Interest Office shall be reviewed, investigated, and referred to the appropriate office for action. Employees who fail to disclose a conflict of interest or to comply with a decision or approved management plan may be subject to discipline up to and including severe sanctions and termination. Employees are reminded that they also are subject to civil and criminal penalties for violations of state or federal laws relating to conflicts of interest. An approving authority may rescind an approved outside professional employment activity upon receipt of information indicating the activity is not consistent with this policy, applicable law, or other University policy. If approval is rescinded, the Employee shall be given written notice and an opportunity to respond to his or her campus Conflict of Interest Committee.

APPENDIX 1: DEFINITIONS

A. **COMPANY**. Any entity, other than the Board of Regents of the University of Oklahoma, through which business is conducted (profit or non-profit), including such organizations as a sole proprietorship, partnership, company, corporation, civic or social organization.

B. **EMPLOYEE**. All individuals employed by the University, whether full or part-time. For purposes of this policy, the term "Employee" shall also include postdoctoral fellows, visiting scholars, residents, graduate research and teaching assistants, volunteers, and all key personnel working on grants and contracts whether paid or unpaid.

C. **FAMILY**. Includes any individual who is a spouse/domestic partner, parent, child, stepchild, or sibling of an Employee or a member of the Employee's household. [5]

D. **GIFT**. Anything of value to the extent that consideration of equal or greater value is not received in exchange.

E. **INTELLECTUAL PROPERTY**. Any ideas, discoveries, inventions, technology, creative expressions and embodiments thereof in which a proprietary interest may be claimed such as patents, copyrights, trademarks, know-how, biological materials, and other forms of intellectual property legally recognized as set forth in the University's Intellectual Property Policy.

F. **SIGNIFICANT FINANCIAL INTEREST.**[6]

1. For a non-publicly traded company.

   a) Any ownership interest, by the Employee or his or her Family, in a private business, including but not limited to, a closely held corporation; limited liability company; Subchapter S corporation or partnership for which the Employee or his or her Family member is a director, officer, owner, manager, employee, or agent; or any private business, closely held corporation or limited liability company in which the Employee or his or her Family member owns or has owned stock, another form of equity interest, stock options, or debt instruments.

   b) Any Intellectual Property right or interest for which the Employee or his or her Family has received income.

   c) Receipt of income of Five Thousand Dollars ($5,000) or more by the Employee or his or her Family during the twelve months prior to the date of disclosure; or

2. For a publicly-traded company. Any interest for which renumeration during the twelve months prior to disclosure, plus the value of equity interest in the entity at date of disclosure, exceeds $5,000, when aggregated for the Employee and his or her Family.

3. Significant Financial Interests do not include:

   a) salary, royalties, or other remuneration paid by the University to employees (including Intellectual Property rights assigned to the University and agreements to share in royalties related to such rights); or

   b) investment vehicles, such as mutual funds and retirement accounts, where the Member does not directly control the investment decisions made by such vehicles.

G. **UNIVERSITY RESOURCES**. All University services, real and personal property including facilities, equipment, Intellectual Property, and workforce.

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[5] For the definition of "family" in the State Ethics Rules see Rule 4.2. Due to a university's unique ethical responsibilities in teaching and research, OU's definition is somewhat broader in scope.

[6] For the definition of "material financial interest" in the State Ethics Rules see Rule 4.7. Under federal law, the University's disclosure requirements are more restrictive, e.g., NSF sponsored research contracts, and rather than confuse the issue by applying different standards, the university elected to abide by the more restrictive rules.

APPENDIX 2: CONFLICTS OF INTEREST IN BUSINESS AND RESEARCH RELATIONSHIPS

A. **Company Board Membership/Officership**. Service as a director or officer (President, VP, CEO, COO, CFO, Scientific Officer) of a Company is normally acceptable; however, when the Company proposes to do or is doing business with the University, has licensed University technology, or there is, an actual, potential or apparent Conflict of Interest with one's University responsibilities (such as financial conflicts, conflicts of commitment, use of University Resources, potential or actual overlap between University research and Company research, and use or ownership of Intellectual Property), one shall disclose the relationship and seek written approval from the Conflict of Interest Committee pursuant to a management plan.

B. **Support of Students and Trainees by Companies.** The progress and academic standing of students and trainees must never be compromised. Accordingly, a Company may not be permitted to (i) support a student's academic program if the supervising Employee has Equity or serves as a director or officer (President, VP, CEO, COO, CFO, Scientific Officer) or (ii) employ a student or trainee to conduct research that overlaps with his or her University training or academic program, absent written approval by the Conflict of Interest Committee pursuant to a management plan. The Conflict of Interest Committee shall establish University policies and rules to regulate the circumstances under which the referenced employment relationships may be permitted.

C. **Funding for Sponsored Research and Service Activities.** There is a presumption against accepting funding from a Company in which the University or the Employee has a financial interest, or the Employee serves as a director or officer (President, VP, CEO, COO, CFO, Scientific Officer). The Conflict of Interest Committee shall establish University policies and rules to regulate the circumstances under which these relationships may be permitted.

D. **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 written contract between the University and the Company approved in accordance with University policy that outlines the Employee's responsibilities and/or University benefits. The Conflict of Interest Committee shall establish University policies and rules to regulate the circumstances under which the referenced employment relationships may be permitted.

APPENDIX 3: OTHER UNIVERSITY POLICIES RELATED TO CONFLICTS OF INTEREST

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 non-exhaustive listing of such policies follows. A University employee should consult specific University policies presented in the faculty and staff handbooks of their respective campuses for guidance and information regarding specific situations which may relate to Conflicts of Interest.

- Academic Freedom and Responsibility
- Acceptable Use of Information Resources
- Candidacy for Public Office
- Compliance Policies
- Conducting Private Business from University Facilities
- Consensual Sexual Relationship Policy
- Ethics in Research Policy
- Fraud Prevention, Reporting, and Whistleblower Protection Policy
- Fundraising or Solicitation
- General Purchasing Policies
- Intellectual Property Policy
- IRB Conflict of Interest Policy (researchers)
- Nepotism Policy
- Off-Campus Use of University Property
- Participating in Political Campaigns
- Professional Practice Plans – HSC
- Sabbatical Leave
- Sale of Required Instructional Material
- Service as Promotional Speaker for Private Industry – HSC
- Use of State Vehicles for Private Purposes

APPENDIX 4: OKLAHOMA STATE ETHICS RULES, RULE 4: CONFLICTS OF INTEREST (EXCERPTS)

Rules regarding conflicts of interests have been promulgated by the Oklahoma Ethics Commission, not the legislature, but they have the force and effect of law and there are civil penalties available for violating them. In that the Commission may modify the rules, a non-exhaustive COI list, as of 8/14/2019, is set forth below by subject. As applicable to an employee's circumstances, go to the Commission's web site <https://www.ok.gov/ethics/> click on "Ethics Laws, Guides & Forms" and review the latest version (annotated) of the applicable rule.

Rule 4.1. Purpose of Rule 4

Rule 4.2. Definitions

Rule 4.4. Misuse of Office

Rule 4.5. Misuse of Authority

Rule 4.7. State Officer Impartiality

Rule 4.8. Gifts from Vendors to Persons Engaged in Purchasing Decisions

Rule 4.9. Gifts from Successful Vendors

Rule 4.11. Gratuities Offered at Seminars, Conferences or Similar Events

Rule 4.12. Modest Items of Food and Refreshments

Rule 4.13. Acceptance of Meals, Lodging, Transportation and Other Benefits as a Result of Spouse's Business Activities

Rule 4.14. Acceptance of Meals, Lodging, Transportation and Other Benefits as a Result of Private Business Activities

Rule 4.15. Acceptance of Meals and Other Benefits for Conference Presentations

Rule 4.16. Acceptance of Meals for Professional, Civic or Community Events; Acceptance of Meals at Political Events

Rule 4.17. Gifts to Superiors by State Officers or Employees

Rule 4.18. State Officer or Employee Representation of Others in Transactions Involving the State

Rule 4.19. State Officer or Employee Representation of Others Before Employing Agency

Rule 4.23. State Officer or Employee Violation of Rules through Indirect Action.

E.2 UNIVERSITY OF OKLAHOMA – INSTITUTIONAL CONFLICT OF INTEREST POLICY

I. INTRODUCTION

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/scholarly 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 and/or reputation of the University 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 relations of the University or of one of its Covered Officials are such that their actions affect or could reasonably appear to affect, the conduct, review or oversight of the University's teaching, research, or service. Institutional conflicts also include potential conflicts (i.e., interests, activities, and relationships that will foreseeably create a real conflict if not subject to limitation) and apparent conflicts (i.e., interests, activities, and relationships that may impair public trust if not managed appropriately). Conflicts of the Board of Regents are handled as set forth in the Board of Regents Bylaws and are not within the scope of this policy.

This policy has been developed specifically to protect the integrity of the research and development process at the University of Oklahoma and to address ethical obligations of its Covered Officials. The policy is not intended to address all situations where different institutional priorities may come into conflict, or to supersede or modify other Conflicts of Interest policies, such as the Individual Conflicts of Interest Policy and other policies referenced therein. All University employees, including Covered Officials, are required to complete required trainings and submit annual disclosures as set forth in the Individual Conflicts of Interest Policy.

II. DEFINITIONS

1. Executive Officers: Executive Officers of the University include the President, the Vice President of Executive Affairs, Senior Vice Presidents and Provosts, Vice Presidents, Executive Secretary of the Board of Regents and Secretary of the University, and such other positions and the President may designate from time to time.
2. Covered Officials: Covered Officials includes all Executive Officers, including Interim and Acting Executive Officers and any individual serving as a Dean of a University College.
3. Significant Financial Interest: Significant Financial Interest has the meaning adopted by the University of Oklahoma, Board of Regents in the Individual Conflicts of interest Policy.
4. Family: Family has the meaning adopted by the University of Oklahoma, Board of Regents in the Individual Conflicts of interest Policy.
5. Institutional Conflict of Interest: An Institutional Conflict of Interest may occur whenever the financial interests of the institution, or of an institutional official who has authority to act on behalf of the institution ("Covered Official"), might affect - or reasonably appear to affect - institutional processes for the design, conduct, reporting, review, or oversight of research.
6. Academic Freedom: Academic Freedom has the meaning adopted by the Board of Regents in the Policy on Academic Freedom and Responsibility.

III. POLICY

1. Identifying Institutional Conflicts of Interest
    a. Institutional Interests Related to Research: Any of the following institutional interests is presumed to create a potential or actual Institutional Conflict of Interest when related to existing or proposed research:
        i. Corporate or private gifts, including gifts in-kind, exceeding $1 million cumulatively within the previous year period (counting the current gift), or reasonably expected to exceed $1 million cumulatively within the past 2 years plus the next 12 months, from an actual or *bona fide* potential sponsor of research or from such donors who own or control products, methods, or procedures being studied or tested.
        ii. Gifts of material value from an actual sponsor of research or from donors that own or control products, methods, or procedures being studied or tested when the gift is

intended to directly support the research or to specifically benefit the department conducting it.

iii. University business contracts generating revenue for the University greater than $1 million cumulatively within the past 3 years.

iv. Royalties: Payments, such as royalty payments, milestone payments, and licensing fees, resulting from technology transfer, licensing/sale, and business activities that, for each arrangement, exceeds $100,000.00 in the preceding twelve-month period and any new University-held license. Royalties does not include any royalty interests held through University investments that are held through the OU Foundation.

v. Non-publicly Traded Equity: The University, through its technology licensing activities or investments related to such activities, has obtained an equity interest or an entitlement to equity of any value (including options or warrants) in a non-publicly traded company that is: (i) the sponsor of research at the University, or (ii) the manufacturer of a product or technology to be studied or tested in research at or under the auspices of the University.

vi. Publicly Traded Equity: University, through its technology licensing activities or investments related to such activities, has obtained an ownership interest or an entitlement to equity (including options or warrants) exceeding $100,000 in value (when valued in reference to current public prices, or, where applicable, by using accepted valuation methods), in a publicly-traded company that is (i) the sponsor of research at the University, or (ii) the manufacturer of a product or technology to be studied or tested through research at or under the auspices of the University.

b. Institutional Interests Related to Teaching, Creative Activity, or Service: While any Institutional Conflict of Interest identified in 1(A)(1)-(6) could also create an Institutional Conflict of Interest related to teaching, creative activity, or service, the independence of the faculty in such cases is presumed to be sufficiently protected by the Board of Regents' policy protecting academic freedom and the procedural protections of faculty grievance and tenure proceedings.

c. Institutional Interest Related to Covered Officials: Because of their broad supervisory and institutional decision-making power, the actions of Covered Officials may be perceived as the actions of the institution as a whole. Thus, their individual conflicts of interest may be imputed to the institution as a whole. While they may not conduct research or teach in their administrative capacities, they may be in a position to influence how these activities are conducted and/or reported. Accordingly, Covered Officials' business interests and significant financial relationships with outside entities and individuals (together "entities") must be disclosed, and managed if necessary, to prevent any real or apparent Institutional Conflicts of Interest.

i. An Institutional Conflict of Interest can arise when a Covered Official or his or her Family has a Significant Financial Interest in an entity doing business or proposing to do business with the University such that their interest affects, could foreseeably affect, or could reasonably appear to affect the conduct, review, or oversight of the University's teaching, research, or service.

ii. In addition, when a Covered Official or a member of his or her Family has other interests, activities, or relationships that would constitute a conflict according to the Individual Conflicts of Interest policy, the Covered Official shall be governed by the disclosure, assessment, and decision-making processes of this Institutional Conflicts of Interest policy.

iii. For Covered Officials, any personal interest, relationship, or activity that affects, touches, or concerns the University, or could reasonably foreseeably do so, will be deemed to create an actual or perceived Institutional Conflict of Interest. No interaction with the University will be deemed to be outside the course and scope of the Covered Official's University duties for purposes of this policy.

iv. In addition to actual conflicts, Covered Officials shall also disclose, for themselves and Family members, all Significant Financial Interests (as defined by State Ethics Rule 4.7) and all fiduciary relationships (i.e., relationships such as board memberships and management roles that give rise to a legal or ethical obligation to act in the best interests of a business or nonprofit entity).

v. Covered Official conflicts, Significant Financial Interests, and fiduciary obligations shall be disclosed as follows:

1. The President shall disclose any Individual Conflicts of Interest within the scope of the Individual and/or Institutional Conflicts of Interest policy when they arise. Disclosure shall be made in writing to the COI Officers for the Norman and OUHSC Campuses. Such disclosures will be also provided to the General Counsel and to the Chair of the Board of Regents, whose decision on permissibility and management of conflicts shall be final. The President shall also disclose in the same manner upon appointment and annually thereafter, all Significant Financial Interests and all outside fiduciary relationships for review and decision.
2. Covered Officials other than the President similarly shall disclose Conflicts of Interest that are within the scope of the Individual and/or Institutional Conflicts of Interest policy when they arise. Disclosure shall be made to the COI Officer(s) for the applicable campus(es). Such disclosures will be also provided to the General Counsel and to the Senior Vice President and Provost for the applicable campus (Covered Officials with academic appointments) or President (all other Covered Officials), whose decision on permissibility and management of conflicts shall be final. Covered Officials shall also disclose in the same manner upon appointment and annually thereafter, all Significant Financial Interests and all outside fiduciary relationships for review and decision.

d. Institutional Conflicts of Interest Related to University Officials Representing the University: In certain instances, the Conflicts of Interest Officers may determine that an individual, other than a Covered Official, who represents the University as a whole in any activity (for example, serving as a University representative on a public board) has an Individual Conflict of Interest that could create a real or apparent Institutional Conflict of Interest. In these instances, the appropriate Conflict of Interest officer may determine the Conflict of Interest should be treated as an Institutional Conflict of Interest.

e. Confidentiality of Disclosures: Personal disclosures shall be considered confidential, and the information disclosed will be available only to individuals duly charged with the responsibility for review. However, the information may be released in accordance with and as required by applicable law or lawful court order.

f. No later than 30 University business days after notice of the event giving rise to a real, potential, or apparent Institutional Conflict, the Conflicts of Interest Office of the appropriate campus or his/her designee shall secure information on institutional interests as follows: gifts reported by the Office of University Advancement; licenses and royalty or equity holdings, reported by the Office of Technology Commercialization; and business contracts, reported by the college or department generating such revenue. The Conflicts of Interest Officer, or their designees, shall then cross reference actual and bonafide potential University research sponsors against the Institutional Conflict of Interest information provided. If an actual or potential institutional conflict of interest is identified, the Conflict of Interest Office shall notify the appropriate Senior Vice President and Provost (“Provost”), who shall evaluate and act upon the conflict in accordance with this policy.

g. Any other employee who becomes aware of an apparent, potential, or actual Institutional Conflict of Interest, that would not be reported as set forth above in the ordinary course of business, shall promptly inform his/her unit head(s) (chair, center director and/or dean) or supervisor in writing. The Unit head(s) shall notify the appropriate Conflicts of Interest Office who will evaluate and act upon the report in accordance with this policy.

2. Managing Institutional Conflicts of Interest

a. Except for Institutional Conflicts arising from individual conflicts of Covered Officials, which must be disclosed and managed as set forth in Section VI(A)(5)(a) and (b) of these Procedures, above, the procedure for evaluating and managing Institutional Conflicts of Interest is as follows.

b. There is a presumption against allowing research to proceed when a real or perceived Institutional Conflict of Interest exists; however, such a presumption can be overcome if a management plan is developed that can either eliminate or adequately mitigate the conflict(s). The following steps shall ordinarily be taken for developing a management plan and are described in greater detail below: (a) factual inquiry performed by the appropriate Provost; (b) factual report made by the Provost to the Institutional Conflicts of Interest Committee; (c) Institutional Conflicts of Interest Committee issues a report and recommendation to either eliminate or manage the Conflict to the President or President's designee.

c. Upon notice of a real or perceived Institutional Conflict of Interest from one of the Conflicts of Interest Offices, the Provost shall oversee an initial inquiry as to the facts of the situation. In case of an overlap with other policies, the Provost shall determine which policy or reviewing office shall manage the process.
   i. If the Provost determines that no Institutional Conflicts of Interest exists or that it is already disclosed and managed properly, the disclosing party will be notified, and no action will be taken.
   ii. If the Provost determines that a potential Institutional Conflict of Interest exists, he or she will generate a report containing the facts of the situation, The Provost shall submit this report to the Institutional Conflicts of Interest Committee (the "Committee").

d. The Institutional Conflicts of Interest Committee will consist of the following members:
   i. All members of the respective campus's existing Conflicts of Interest Committee;
   ii. One member who is not employed by the University with experience with Institutional Conflicts of Interest;
   iii. The Conflicts of Interest Officers from the Norman and Health Sciences campus on their respective campus's committee (non-voting member);
   iv. A representative from the Office of the President (non-voting)

e. Upon receipt of the factual report from a Provost, the Committee shall determine if the potential Institutional Conflict of Interest could inappropriately affect or reasonably appear to inappropriately affect University research. The Committee will determine whether the Institutional Conflict of Interest is manageable or if it should be eliminated. When making these determinations and formulating a management plan, the Committee will make these determinations with the following in mind:
   i. The welfare of any human participants or animals involved in the research;
   ii. The integrity of any research process involved;
   iii. The effect and/or potential effect of the Institutional Conflict of Interest on the University's reputation; and
   iv. The effect and/or potential effect of the Institutional Conflict of Interest on the individual researcher's reputation.
   v. Additional factors may be appropriate for consideration as well. All relevant considerations shall be reviewed when developing a management plan.
   vi. In addition to the above general considerations, the following specific presumptions shall also apply:
      1. No research agreement with a company will contain any restrictions on publication of student theses or dissertations; except as permitted by Graduate College policy for the relevant campus;
      2. All individuals working on a research project subject to a management plan shall be informed in writing of the nature of the conflict and how it will be managed.

vii. If the Committee determines that the Institutional Conflict of Interest can be managed, the proposed management plan will 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, any potential actions set forth in the University's Individual Conflicts of Interest Policy.

f. A factual report and recommendation of a plan for elimination or management of the conflict shall be transmitted to the President or his/her designee. The President or his/her designee, in consultation with the General Counsel, shall have final approval. If the Institutional Conflict of Interest involves the President, then the Chair of the Board of Regents or his/her designee, in consultation with General Counsel shall have final approval.

g. Once approved by the President, the plan shall be transmitted to the appropriate Conflicts of Interest Office for implementation. Plans shall be implemented as follows:
   i. 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 Conflicts of Interest Office on the effectiveness of the plan and the progress of the research, listing related peer-reviewed publications and grants. The frequency of such reports shall be made at least annually.
   ii. If, during the conduct of the activity, the appropriate Conflicts of Interest Office determines that the conflict has not been properly managed, or has become unmanageable, or that the management plan is not being followed, he/she will then determine if the activity should cease, requires further modification, or requires employee divestment of an interest. If the plan requires further modification, the Conflicts of Interest Office will resubmit the plan to the Committee.
   iii. All management plans shall include. A provision regarding notice to anyone who has a role in implementing the plan. This provision shall include notifying outside agencies of conflict resolution and management, in accordance with their requirements.

3. Sanctions
   a. Disclosure of Conflicts of Interest—apparent, potential, and actual—is required for all employees as set forth in this policy and the Individual Conflicts of Interest Policy. Among other acts or omissions, failure to fully disclose conflicting relationships and/or interests or to follow a prescribed management plan is a serious breach of this policy and may itself be considered research or ethical misconduct.
   b. 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, as determined by the President or President's designees, University sanctions may include, without restriction, reprimand, restitution, loss of pay, suspension, dismissal, or abrogation of tenure.
   c. 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 may be reported to the appropriate Provost or Vice President or via any University compliance or ethics reporting hotline.

15. APPENDIX F

FINANCIAL EMERGENCY POLICY

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

A financial emergency is an imminent fiscal crisis that threatens any of the University's budgetary 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) Seven faculty members, one representing each of the seven colleges on the campus, appointed by the HSC 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 Institutional Equity 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 professional 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 includes the College of Medicine, Tulsa and the programs of other Health Sciences Center Colleges. While the financial emergency policy developed for the Health Sciences Center will apply with equal force to the Health Sciences Center programs in Tulsa, certain unique budgetary and programmatic differences require some differences in procedure.

The Committee that shall review the general plan for the Health Sciences Center programs in Tulsa shall be composed of:

(a) Six faculty members appointed by the HSC Senior Vice President and Provost from a list of twelve nominees elected by the faculty of the College of Medicine, Tulsa or the Health Sciences Center programs, as appropriate, 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 Institutional Equity, 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 University business 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 University business 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 termination of their employment. The dismissal of tenured faculty must be approved by the Board of Regents (see *Faculty Handbook* Section 3.16). Abrogation proceedings shall not apply in these terminations.

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 reemployment 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 reemployment. 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) Students

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 online or 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 Senior Vice President and Provost, in consultation with the Health Sciences Center deans and the Vice Presidents, Vice Provosts, and 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 directly or 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 to Comment

The Senior Vice President and Provost will conduct an open hearing Before the ad hoc Committee completes its deliberations, the Senior Vice President and Provost will accept written comments from University students and employees.

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. 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.

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 in coordination with HSC & OU-Tulsa Student Affairs, 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

SEXUAL MISCONDUCT, DISCRIMINATION, AND HARASSMENT POLICY

I. Policy on Sexual Misconduct, Discrimination, and Harassment

The U.S. Department of Education's Office for Civil Rights issued a Notice of Proposed Rulemaking (NPRM) regarding upcoming changes to the Title IX regulations. It is anticipated that there will be substantive changes for institutional sex-based discrimination and harassment definitions and grievance procedures, as well as more specific requirements for non-discrimination on the basis of pregnancy or related conditions. The implementation date for these changes is anticipated to be spring 2024.

Therefore, in anticipation of these upcoming changes, the entire Sexual Misconduct, Discrimination, and Harassment Policy may be accessed here:

https://www.ou.edu/eoo/about/sexual-misconduct-policies/_jcr_content/contentpar/download_2/file.res/SMDH%20NEW%20Policy%20Final%208-14-2020%20RSU_CU.pdf.

The University's Investigative Process for Formal Complaints of Sexual Harassment and Misconduct may be accessed here:
https://www.ou.edu/eoo/about/sexual-misconduct-policies/_jcr_content/contentpar/download_3/file.res/Grievance_Procedure_Investigative_Final_AMENDED_7-28-22.pdf

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 discrimination and harassment. The University prohibits discrimination based on sex or gender, which includes discrimination and harassment on the basis of pregnancy, sexual orientation, gender identity or expression, and all forms of sexual harassment, including sexual assault, dating violence, domestic violence, and stalking.

The Office of Institutional Equity is charged with oversight responsibilities and investigation of sex discrimination and sexual harassment as defined by this policy and in compliance with applicable federal laws, including Title IX of the Education Amendments Act of 1972, Title VII of the Civil Rights Act of 1964, the Violence Against Women Act of 1994 (as reauthorized), and applicable Oklahoma laws. In addition, the Office of Institutional Equity is charged with investigating sexual misconduct that constitutes Workplace Harassment, Employee Sexual Misconduct, and Prohibited Conduct under the University of Oklahoma Student Rights and Responsibilities Code.

Through its Institutional Equity Officer and Title IX Coordinator, the University reserves the right to independently address known concerns falling under this policy in order to stop sex discrimination and sexual harassment, prevent its recurrence, and remedy its effects. The term "Title IX Coordinator" refers to the Institutional Equity Officer and Title IX Coordinator who oversees the implementation of the University's Sexual Misconduct, Discrimination, and Harassment Policy, as well as the University's Non-Discrimination Policy and Affirmative Action Plan. The Title IX Coordinator has the primary responsibility for coordinating the University's efforts related to the intake, investigation, resolution, and implementation of supportive measures to stop, remediate, and prevent discrimination, harassment, and retaliation prohibited under these policies.

The Title IX Coordinator manages the Title IX Team and acts with independence and authority free from bias and conflicts of interest. The Title IX Coordinator oversees all resolutions under this policy and procedure. The Title IX Coordinator requires training for all Office of Institutional Equity staff, including investigators, as well as for Decision-makers and Informal Resolution Facilitators. These individuals are trained to ensure they are not biased for or against any party in a specific case, or for against Complainants and/or Respondents, generally. To raise any concern involving bias or conflict of interest, or reports of misconduct or discrimination by the Title IX Coordinator, contact President Joseph Harroz, Jr. at 660 Parrington Oval, Evans Hall, Room 110, Norman, OK 73019, (405) 325-3916, ouharroz@ou.edu. Concerns of bias or potential conflict of interest or reports of misconduct or discrimination by any other Title IX Team member should be raised with the Title IX Coordinator.

The term "Title IX Coordinator" as used herein may also include an Associate Title IX Coordinator or other member of the Title IX Team under the supervision of the Title IX Coordinator. For the purposes of this policy, the term "Complainant" means any individual who is alleged to be the victim of conduct that could constitute Prohibited Conduct. The term "Respondent" means any individual who is reported or alleged to be the perpetrator of conduct that could constitute Prohibited Conduct.

Any person seeking to invoke the protections of this policy may do so solely by providing notice to the Title IX Coordinator as provided herein; notice to other members of the University community will not be imputed to the Title IX Coordinator.

II. ADMINISTRATIVE CONTACT INFORMATION

Complaints or notice of alleged policy violations, or inquiries about or concerns regarding this policy and procedures, may be made to:

Christine Taylor
Title IX Coordinator
Office of Institutional Equity
920 Stanton L Young, Room 2320
Oklahoma City, OK 73104
(405) 271-2110
christine.taylor@ou.edu

Report online *here:* https://cm.maxient.com/reportingform.php?UnivofOklahoma&layout_id=10

(Regents, 3-8-2017)

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
920 Stanton L Young, Room 2320
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
920 Stanton L Young, Room 2320
(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 https://www.ou.edu/eoo/about/sexual-misconduct-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 policyhttps://www.ou.edu/eoo/about/policies-procedures/non-discrimination 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 https://www.ou.edu/adrc.

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. The OU Board of Regents adopted the Chicago Statement in November, 2022. See https://provost.uchicago.edu/sites/default/files/documents/reports/FOECommitteeReport.pdf for full statement.

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)~~Institutional Equity Office (IEO) 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, or IEO@ou.edu

- For Health Sciences Center campus and HSC campus extension programs: 405-271-2110,–920 Stanton L. Young, Room 2320 , or IEO@ou.edu

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 (IEO) will be responsible for making such arrangements.

Such complaints should 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)

* U.S. Department of Justice (www.justice.gov)

* U.S. Department of Education, Office of Civil Rights (www2.ed.gov/ocr)

* Oklahoma Human Rights Commission (www.ok.gov/ohrc/)

* Local law enforcement including University of Oklahoma Police Department (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/eoo/policies/misc.html) filed with the University Equal Opportunity Officer/Title IX Coordinator (IEO) 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 IEO, any grievance under these procedures may be dismissed or stayed in the IEO's discretion as duplicative.

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 IEO. 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.

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 IEO 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.

~~Upon receipt of a complaint alleging discrimination based on a protected characteristic/protected class, the IEO will conduct an initial evaluation of the merits of the complaint, review the context of the allegations in relation to the University's jurisdiction, and determine the appropriate investigatory action required. If a determination is made that the complaint does not fall within the University's jurisdiction or that the complaint does not allege a prohibited activity and further investigation is not required, the IEO will advise the Complainant of the finding and, if available, other procedures and/or processes. IEO may proceed with other appropriate actions or recommendations if warranted.~~

~~If the allegation is determined to be credible and within the University's Jurisdiction, the University will complete a thorough, and impartial investigation. An investigation can proceed with or without a written complaint.~~

The IEO 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 IEO within 365 calendar days of the act of alleged discrimination or harassment. The IEO may reasonably extend this and all other time periods, and may, in his/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 IEO 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 IEO 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 IEO may determine in his/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 IEO 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 IEO will notify the complainant and respondent via email, of IEO's receipt of the complaint and is empowered to investigate the charge, to interview the parties and others, and to gather any relevant evidence. The investigation and findings should be completed within 60 calendar days of receipt of the complaint, or as soon as practical.

The IEO shall render his/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 IEO is authorized to take the following actions:

~~1.~~ **Informal Resolution –** It may be appropriate to resolve the issues through an informal means in some instances. This may include educational conversations, facilitated dialogue between the parties, mediation, or a written agreement, or other resolution methods. The determination for utilization of informal resolution measures will be based on the nature of the allegations, request by the complainant, and willingness of the parties to participate.

2. Dismissal – The IEO 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 5 business days of the report addressed to the, Institutional Equity Officer. Both parties shall receive notice of the appeal. The non-appealing party will be afforded up to five (5) additional University business days to submit a written response to the appeal. The Institutional Equity Officer will provide the appeal and response 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 IEO's findings are final. Further, the decision of the executive officer shall be final.

3. Determination of Impropriety

a) The IEO 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 Institutional Equity Officer within five 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 five business-day period, the case is considered closed.

b) In the case of a complaint against a faculty member, the IEO 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 IEO, 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. <u>Hearing</u>

1. Request for an Appellate Hearing

a) Except as noted above, either party may request, in writing, a hearing within 5 business days of the issuance of the IEO'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 IEO's staff or the University's designee, where appropriate, shall immediately provide a copy of the request to the proper respondent(s).

Where the IEO's decision is favorable to the initial complainant, and the respondent appeals the finding, the IEO shall defend their 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 IEO 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 Institutional Equity Office shall only be involved as the respondent.

b) If a hearing is requested, the respondent's written response to the request for a hearing must be sent to the Institutional Equity Officer within ten (f10e) University business days of receiving notice that a hearing has been requested. The Institutional Equity Officer 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 Institutional Equity Officer 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 Institutional Equity Officer 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 Institutional Equity Officer within five (5) business days of contact from the IEO. 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 IEO appointing the panel.

The Institutional Equity Officer 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 Institutional Equity Officer shall appoint the fifth panel member and chair.

Either party to the complaint may ask the Institutional Equity Officer 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 Institutional Equity Officer shall be present during the orientation conference, where they 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 IEO'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 IEO'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 IEO's findings, or (b) the investigation's findings are not supported by any evidence (i.e., the IEO 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 IEO's findings are erroneous. The hearing panel shall notify the parties and the IEO 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 Institutional Equity Officer immediately, who in turn, shall immediately notify the parties and the executive officer. The panel's services shall be concluded and the IEOs findings shall be final.

The appropriate executive officer shall render their decision and notify the parties and the IEO 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 Institutional Equity 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 Institutional Equity Officer at the orientation conference, and as determined by the chair in consultation with the Institutional Equity Officer 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 IEO 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 IEO, who in turn, shall immediately notify the appropriate executive officer for final determination. The executive officer shall notify the parties of their 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, they may render their decision and notify the parties. Any party may appeal the decision in writing to the President with a copy to the Institutional Equity Officer 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 Institutional Equity Officer, 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 Institutional Equity Officer.

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 Institutional Equity 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, 920 Stanton l. Young, Room 2320 Ph: (405) 271-2110.

20. APPENDIX K

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

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

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

- **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.

- **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.

- **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.

- **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.

- **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)

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) 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. 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 the employee's share of any premiums and 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 or for the care of a qualified family member) 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. Refer to form WH-381 FMLA Notice of Rights and Responsibilities for more information. WH-381 (dol.gov). 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)

M.1 THE UNIVERSITY OF OKLAHOMA COLLEGE OF ALLIED HEALTH PROFESSIONAL PRACTICE PLAN

I. PREAMBLE

The faculty of the College of Allied Health ("College") is composed of professionals in a wide variety of health professions. These professionals and those they train form an integral part of the health care delivery system and are essential to quality patient care and services. 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 and the University of Oklahoma Health Sciences Center ("University").

The obligations of a faculty member to the University are not limited to meeting classes. There are obligations that include, but are not limited to, advising and being available to 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. Faculty are encouraged to engage, through the College Professional Practice Plan (PPP) in income-producing activities including consultant work, patient care, and professional education activities. Each PPP-eligible faculty member shall have the option to choose whether to engage in professional activity other than those activities specifically assigned. If the decision is to engage in professional activity, the rules governing the PPP shall be strictly observed. Adherence to this policy is a condition of employment for full-time faculty of the College. Under this policy, the lines of authority are from faculty member to Department Chair to Dean to Senior Vice President and Provost to President to the University of Oklahoma Board of 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 actively in patient care and/or consultative services, and to enhance faculty scholarship.

3. To define rules governing the amount of time that may be devoted to activities under the PPP.

4. To provide a uniform procedure by which to account for the total revenue generated by each member of the full-time faculty of the College of Allied Health for approved PPP activities.

5. To provide a uniform procedure by which to account for distribution of those revenues to faculty members.

III. DEFINITION OF TERMS

1. Membership

a. Members of the full-time faculty of The University of Oklahoma College of Allied Health will have the obligation (participation being a condition of employment) to participate as voting members in the PPP.

b. For those full-time faculty who hold less than a 12-month appointment, professional activities that are performed completely outside of the University contracted employment period and that do not involve University resources, including employee time, will generally not be considered PPP activity.

c. Faculty who hold less than a full-time appointment are not eligible to participate in the PPP.

d. Members of the faculty in phased retirement shall participate in the PPP to the extent that income is generated during the agreed-upon work week or using University resources, including employee time.

2. Guaranteed Base

a. The Guaranteed Base is the specific salary that is guaranteed annually by the University of Oklahoma through

appointment to the faculty of the College by the Board of Regents of the University of Oklahoma.

b. The Guaranteed Base is intended 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. The Guaranteed Base salary may change from the date of employment through approved increases.

3. Maximum Professional Earnings Potential

a. The Maximum Professional Earnings Potential is the upper limit of a faculty member's yearly earnings generated through activities under the PPP.

b. Effective January 1, 2023, the Maximum Professional Earnings Potential for each PPP-eligible faculty member shall be equivalent to the faculty member's Guaranteed Base salary.

c. As needed, the Maximum Professional Earnings Potential for individual faculty members may be renegotiated with the faculty member's Department Chair and with written approval from the Dean.

4. Full-Time Equivalent Salary

a. The Full-Time Equivalent (FTE) salary 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.

b. The FTE salary expresses the potential maximum salary a faculty member may earn per year and is dependent on earnings from PPP activities of that faculty member and on the policies and procedures specified in the College PPP.

IV. OPERATIONAL PROCEDURES

1. The faculty member's decision to engage in PPP activities shall be made with the knowledge and understanding that activities must be carried out in accordance with the provisions of the College PPP.

2. To assure the successful performance of the College's assigned tasks, PPP-eligible faculty shall not engage in professional activity that interferes with their assigned duties. It is expected that a faculty member's first priority will be the faculty member's assigned duties to the College.

3. An individual faculty member's total time spent in PPP activity shall not exceed the equivalent of 20% of a full-time work week (8 hours per week for a 1.0 faculty). Exceptions to this limit may be made only with prior written approval by the Department Chair and Dean.

4. Prior to engaging in any PPP activity, the faculty member must meet with the Department Chair of that faculty member's primary department to seek approval for that activity. At this meeting, the faculty member shall be prepared to discuss the nature, scope, and timeline of the proposed activity.

5. The Department Chair shall determine whether the faculty member's proposed PPP activity is consistent with the College PPP and shall indicate approval in writing for the activity to be conducted.

6. If a proposed PPP activity will take place during the faculty member's regular work week, the faculty member shall negotiate with the Department Chair regarding how assigned duties will be met in full while engaging in the PPP activity.

7. If the Department Chair approves the PPP activity proposed, the faculty member shall then meet with the College Grants/Contracts Coordinator to initiate a formal agreement for the activity. Activities may begin when (1) approved by the Department Chair and (2) approved by the College in the form of a fully executed contractual agreement. If an activity requires additional approvals or memoranda of agreement, the College Grants/Contracts Coordinator shall assist the faculty member in meeting those requirements prior to the start of the PPP activity. Depending on the activity, a conflict of interest disclosure also may be required.

8. Once PPP activity is initiated, it is the faculty member's responsibility to keep records of time spent in the activity and

to share those records with the Department Chair or Dean on request. It is the sole responsibility of the faculty member to ensure that these records are accurate and up-to-date.

9. All sources of collected revenue generated by faculty, including but not limited to the following, are included within the scope of the PPP. Note that services provided to OUH by dually employed individuals are not considered PPP sources and are thus excluded from this Policy. Examples of PPP sources include:
    a. Patient care services and consultations
    b. Professional consultation and/or supervision including scientific consultation
    c. Honoraria
    d. Continuing education
    e. Expert legal testimony and medical legal consultations
    f. Professional services agreements
    g. All other professional activities not specified as excluded (below)

10. Income Exclusions. The following sources of revenue are not included within the scope of the PPP:
    a. Prizes and awards
    b. Compensation received as a result of military leave or jury duty
    c. Activities performed outside of the faculty member's profession and that do not involve University resources
    d. Income earned during sabbatical leave as described in the OUHSC Faculty Handbook
    e. Reimbursement for travel expenses
    f. Faculty members' interests in:
        i. Royalties
        ii. Copyrights
        iii. Patent Rights

11. The determination of whether an activity is classified as PPP or PPP-exempt shall be made at the initial meeting between the faculty member and Department Chair and in consultation with the Dean, consistent with the above.

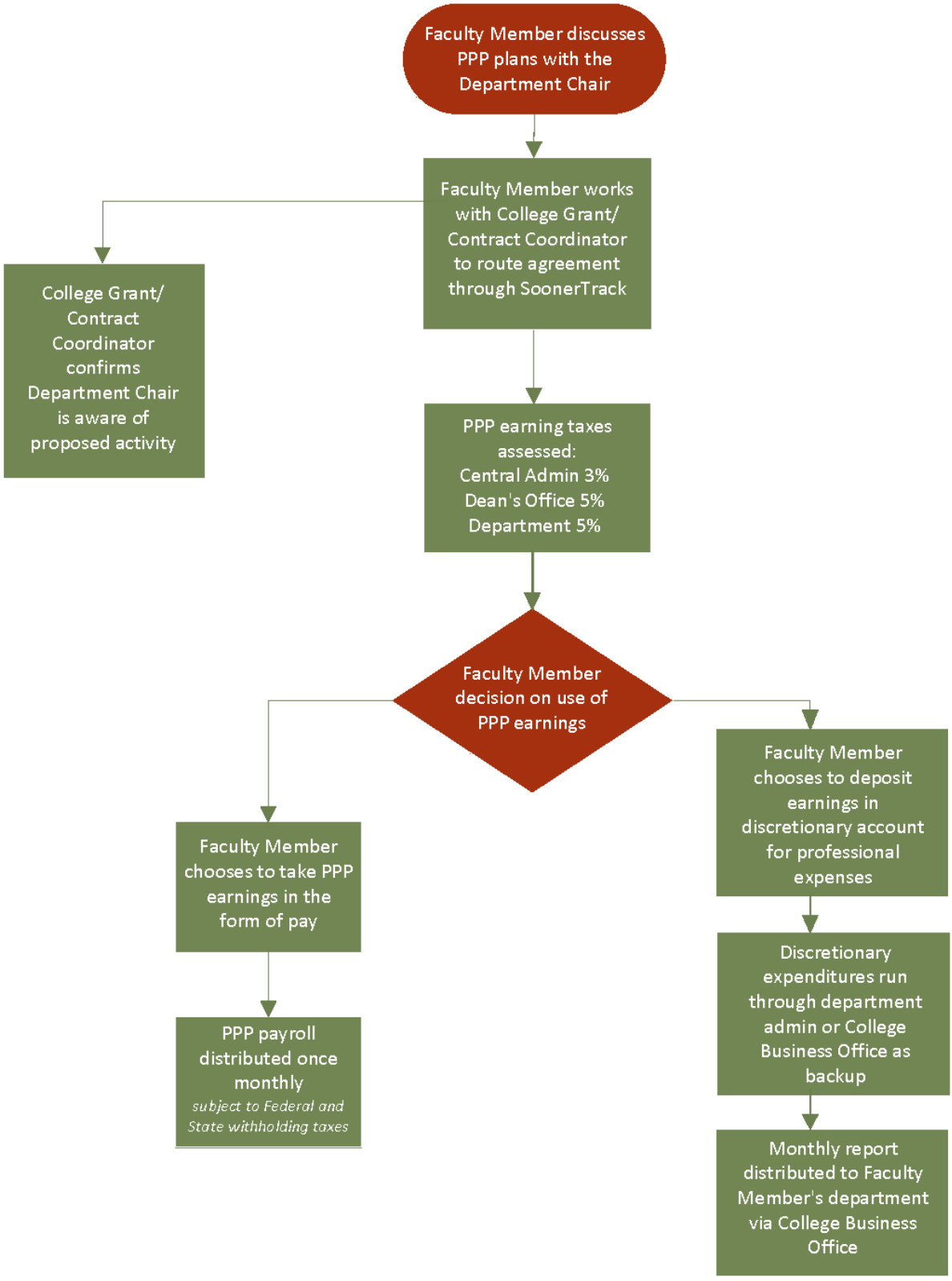
12. Income generated from PPP activity shall be deposited to the faculty member's uniquely-identified account by the College Business Office. Prior to distribution to the faculty member, deposited PPP income is subject to University, College, and departmental taxes for administrative costs, and expenses including University time. Distribution of these funds will be in the order listed below.

    a. To the Office of the Senior Vice President and Provost, 3% of PPP-generated income;
    b. To the College Dean's Office, 5% of PPP-generated income;
    c. To the faculty member's primary department, 5% of PPP-generated income;
    d. To the individual faculty member, all remaining PPP-generated income until any difference between the faculty member's Guaranteed Base and Full-Time Equivalent Salary is equaled;
    e. Thereafter, any remaining balance in PPP-generated income will be retained by the department.

13. When income is deposited to the faculty member's account, the Business Office will request that the faculty member elect whether to receive that income in the form of pay or to keep the income in a discretionary account to be used for professional expenses (*see Figure 1*).

    a. **If taken as pay,** PPP earnings will be distributed to the faculty member once monthly according to the College PPP payroll calendar.
        i. PPP earnings taken as pay are considered income subject to State and Federal withholding.
        ii. Retirement benefits are not paid on PPP earnings taken as pay.
    b. **If deposited into the faculty member's discretionary account,** PPP earnings will be held indefinitely for the faculty member's use. Expenditures from these funds must be for professional expenses and must be approved by the Dean.
        i. PPP earnings held in this way are not paid to the faculty member, considered income, and are therefore not subject to State and Federal taxes. Purchases made with these funds may be subject to sales or other taxes.
        ii. PPP earnings held in this way do not expire. If a faculty member retires or resigns from the University, any unspent funds in that faculty member's discretionary account are returned to the department.
        iii. Equipment and supplies purchased using PPP earnings remain the property of the University and may not be removed if the faculty member retires or resigns from the University.

Allied Health
Professional Practice Plan Flow



V. BILLING, COLLECTING, ACCOUNTING, DISBURSEMENT, AND AUDITING

1. 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 that are received directly by the individual faculty member shall be deposited by the primary Department of the faculty member as PPP earnings.

2. 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 another college shall participate in the Professional Practice Plan of the College that has primary responsibility for their promotion and tenure.

VI. GOVERNANCE OF THE PROFESSIONAL PRACTICE PLAN

1. The Advisory Council

a. The Advisory Council shall represent the full membership of the PPP 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 PPP shall be governed by this policy as amended from time to time by the Board of Regents.

b. The Advisory Council shall consist of:
   i. The Chair of each department in the College, and
   ii. One PPP-eligible faculty member-at-large per department, elected by and from the faculty of the College. Members-at-large shall serve two-year staggered terms.

c. The officers of the Advisory Council shall be Chair, Vice Chair, and Secretary, who shall each be elected annually by and from the members of the Advisory Council and who shall serve as the Executive Committee. The Chair of the Advisory Council shall preside.

d. 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 shall be distributed to each member at least one week prior to the meeting.

e. A quorum shall consist of a simple majority plus one 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.

f. 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.

g. The latest edition of Robert's Rules of Order Newly Revised will be accepted as final authority for parliamentary procedures.

2. Policy Amendments

a. The policy for operation and governance of the PPP may be amended from time to time by the Senior Vice President and Provost. Proposed amendments may also be submitted to the Advisory Council for consideration consistent with the University's PPP policies and procedures.

b. Amendments shall be considered by the Advisory Council that are:
   i. Proposed to the Advisory Council by the Executive Committee, or
   ii. Proposed by fifteen (15) or more members of the PPP.

c. Ratification of the proposed amendment shall require a two-thirds affirmative vote of the full voting faculty membership of the Professional Practice Plan.

d. The amended Professional Practice Plan, if ratified, shall then be forwarded through the Dean of the College of Allied Health to the Senior Vice President and Provost of the Health Sciences Center, for approval.

(Regents, 05-10-91, 09-11-03, 6-21-24)

M.2 THE UNIVERSITY OF OKLAHOMA COLLEGE OF DENTISTRY FACULTY PRACTICE BYLAWS AND PROFESSIONAL PRACTICE PLAN

I. The Dental Faculty Practice Group

The dental faculty practice group of the University of Oklahoma College of Dentistry shall be hereinafter 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 that 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, the dental community and other health professionals.

6) Facilitate the development and continuing dental education of faculty members, residents, and students.

7) Stimulate 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 and Procedures. which are provided to new Participants by the Chief Administrator and maintained on the College of Dentistry Intranet. 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 review of the Advisory Council and approval of the Dean. Once approved, they shall practice through the Group, in accordance with the requirements specified by these Bylaws and the Operational Policies and Procedures during their assigned University time. Such Participants shall be voting members of the Group. Should a part-time or volunteer faculty member not be approved as a Participant in the Group, any other professional earnings associated with their faculty appointment would be governed by the Professional Practice Plan.

3) Clinicians hired solely to provide care shall as Participants in the Group practice through the Group in accordance with the requirements specified by these Bylaws and the Operational Policies and Procedures. Such Participants shall be reviewed by the Advisory Council and approved by the Dean, and 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 and the Senior Vice President and Provost.

IV. Participant Obligations

Individual Participants shall abide by accepted clinical practice standards, the Operational Policies and Procedures of the Group, 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 and authority for managing, planning, or operating the practice.

2) The governance of the Group applies to the entire range of dental disciplines and dental specialties, and other patient care services. The unique characteristics of these disciplines, specialties and patient care services should be recognized in the governance and operation of the Group.

3) The Group and its Participants shall comply with all University, Health Sciences, and College of Dentistry policies and procedures, including those dealing with management and financial accountability.

4) The governance structure of the Group shall be as delineated in Section VI, The College of Dentistry Faculty Practice Advisory Council.

VI. The College of Dentistry Faculty Practice Advisory Council

1) The College of Dentistry Faculty Practice 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 the Group.

   (b) Maintain a Professional Practice Plan for distribution of clinical revenues to Participants.

   (c) Review and recommend approval of the annual College of Dentistry Faculty Practice budget.

   (d) Review and recommend for approval any capital expenditures that exceed limits established by the Dean.

   (e) Oversee the operations of the Group and recommend corrective actions for identified deficiencies.

   (f) Ensure the Group operates as an integrated multi-disciplinary dental group practice.

   (g) 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, consistent with University policy.

   (i) Create such ad hoc committees and task forces as are required to conduct the business of the College of Dentistry Faculty Practice in an efficient and effective manner.

   (j) Establish programs for quality improvement, quality assurance, compliance, marketing, risk management, and other areas, as deemed necessary, in collaboration with central campus offices.

3) The College of Dentistry Faculty Practice Advisory Council shall be composed of:

   Voting Members:

(a) Up to three at-large general practice Participants
(b) Up to three at-large specialty practice Participants
(c) One at-large dental hygiene Participant

The Advisory Council must be composed of a minimum of five voting members.

Non-Voting Members:

(d) Chief Administrator of the College of Dentistry Faculty Practice (or equivalent)
(e) Dean for Administration and Finance, College of Dentistry

Not all of the at-large specialty practice Participants can be from the same division.

Elected members shall serve staggered, three-year terms, which shall begin on June 1st, and can be elected for a subsequent term.

4) **Election of Advisory Council Members.** At-large members of the Advisory Council will be elected by a vote of the Group Participants. The Advisory Council shall solicit nominations from the Group Participants prior to these elections

Meetings. The Advisory Council shall meet at least four times annually. Any Participant of the College of Dentistry Faculty Practice may attend any meeting of the Advisory Council in a non-voting capacity, excluding sessions involving personnel or other closed sessions involving sensitive matters, as determined by the Dean. The Office of the Dean shall provide administrative support to the Advisory Council, and minutes of all open session Advisory Council meetings will be distributed in a timely manner to all participants.

5) **Chair**. The Dean of the College of Dentistry shall be the Chair of the Group.

6) **Quorum, Voting, and Procedural Authority**. A quorum shall consist of a simple majority of the voting members of the Advisory Council and these voting members 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 the College of Dentistry Faculty Practice shall be held annually. A report of the activities and the current state of the Group shall be given by the Chief Administrator of the College of Dentistry Faculty Practice, or his or her designee, to the Participants.

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

The College of Dentistry Faculty Practice shall establish and maintain 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 the Operational Policies and Procedures of the Group regardless of size or location.

2) Whenever possible and appropriate, patient referrals should be made within the Group. Referrals outside the Group must comply with Stark and Anti-Kickback laws, conflicts of interest principles, and State Ethics rules and may not be to the referring provider's outside practice.

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 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 supersede University requirements, policies, or procedures.

IX. Participant Compensation

The College of Dentistry Faculty Practice shall establish and maintain a Professional Practice Plan to govern the distribution of clinical revenues to Participants. This Plan will be reviewed by the Advisory Council and approved by 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 Professional Practice 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 Professional Practice Plan. Examples may include but are not limited to:

   - Billing expenses
   - Staff salaries, wages and benefits
   - Fabrication of dental appliances in a professional laboratory
   - Materials and supplies

6) Funds shall be distributed in a fiscally responsible manner.

7) 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. Note that services provided to OUH by dually employed individuals are not considered professional practice plan sources and are thus excluded from this Policy. Examples of PPP sources include:

   a. Patient care services and consultations
   b. Professional consultation and/or supervision including scientific consultation
   c. Honoraria
   d. Continuing education
   e. Expert legal testimony and medical legal consultations
   f. Professional services agreements
   g. All other professional activities not specified as excluded (below)

8) Income Exclusions. The following sources of revenue are not included within the scope of the professional practice plan:
   a. Prizes and awards
   b. Compensation received as a result of military leave or jury duty

c. Activities performed outside of the faculty member's profession and that do not involve University resources
d. Income earned during sabbatical leave as described in the OUHSC Faculty Handbook
e. Reimbursement for travel expenses
f. Income earned by part-time faculty not during assigned OU time and not using OU resources.
g. Faculty members' interests in:
    i. Royalties
    ii. Copyrights
    iii. Patent Rights

X. Faculty Compensation Plan

In addition to the Professional Practice Plan, the College has a Faculty Compensation Plan. The purpose of the Compensation Plan is to provide a basis for establishing compensation and, where permitted, incentives for the designated faculty of the College. All faculty are subject to and must comply with the College's Faculty Compensation Plan that must be consistent with University and OUHSC policy and must be approved by the Senior Vice President and Provost.

The College's Compensation Plan is available upon request from the College of Dentistry Human Resources Department.

XI. Amendment of the College of Dentistry Faculty Practice Bylaws and Professional Practice Plan

1) Amendments to the Bylaws may be proposed or initiated for approval 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 College of Dentistry to the Senior Vice President and Provost of the Health Sciences Center for approval.

Approved by Faculty Practice Participants 1/31/08; 5/6/24

(Regents, 9-2-76; 6-15-78; 12-18-80; 10-31-96; 3-27-08, 6-21-24)

M.3 THE UNIVERSITY OF OKLAHOMA COLLEGE OF MEDICINE PROFESSIONAL PRACTICE PLAN

I. PREAMBLE

The College of Medicine faculty, which includes the School of Community Medicine faculty for purposes of this policy, 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 participate in scientific work, 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. These types of activities 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 therefore to: (1) provide economic support necessary to advance the College's educational, patient care, and research missions, (2) provide for accountability for faculty professional practice activities, and 3) provide an avenue for the funding of a College of Medicine Enrichment Fund, commonly referred to as a "Deans Tax," or a Department Assessment Plan to use when deemed appropriate and formally approved by college leadership.

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 is applicable to all faculty employed by the College of Medicine.

II. SCOPE OF COVERAGE

1. All full-time and part-time faculty employed by the College of Medicine, including the School of Community Medicine, are covered by the professional practice plan for work done in their University Capacity, 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 any 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 any 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.

(a) 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 College of Medicine Dean and Senior Vice President and Provost.

III. BOARD OF REGENTS' POLICY

Adherence to the Professional Practice Plan policy 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 and part-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 the OU Medicine, Inc., 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 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.5 COLLEGE OF MEDICINE FACULTY COMPENSATION PLAN

I. COMPENSATION PLAN PURPOSE AND OBJECTIVES

A. Purpose

The purpose of the Compensation 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), which includes the School of Community Medicine (SOCM) faculty for purposes of this policy.

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-Tulsa, SOCM, 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) All 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 or jury 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 aka "tenurable base"
Departmental Salary
Administrative Salary
Variable Compensation, including 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 (excluding salary)
Grant and contract support
Professional and/or medical legal consultation
Professional services revenues

B. Guaranteed Salary

The Guaranteed Salary (as noted in B1, B2, and B3 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 through the appropriate administrative process.

The Guaranteed Salary will be guaranteed by the department for the contract year and presented to the faculty in a written notification at the beginning of each 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 appropriate COM Dean, the Office of the Senior Vice President and Provost, and, where applicable, the University Board of Regents.

The University base for department chairs will be recommended by the appropriate COM Dean and, where applicable, 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/decrease in subsequent years.

Sources for the University Base component may include the following: state appropriations, hospital support (excluding salary), clinical earnings, grant and contract support, fees from consulting, and affiliated agency support.

2. Departmental Salary (X_2)

The departmental salary is 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 must be reviewed and approved by the appropriate COM Dean. The departmental salary may increase, decrease, or stay the same in subsequent years.

The COM Dean , the Office of the Senior Vice President and Provost, and, where applicable, the University Board of Regents must approve the departmental salary for department chairs.

Sources for the Departmental Salary component may include the following: state appropriations, hospital support (excluding salary), clinical earnings, grant and contract support, and affiliated agency support.

3. Administrative Salary (Y)

The administrative salary will be based upon a faculty member's contributions to the administration of teaching, research, administrative duties, 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 must be reviewed and approved by the appropriate 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. Should the faculty member no longer provide the additional or administrative duties(s) for the University of Oklahoma or serve in the administrative role(s) for the University of Oklahoma, the administrative salary associated with the duties/role(s) will be removed.

The appropriate COM Dean, the Office of the Senior Vice President and Provost, and, if applicable, the University Board of Regents must approve the administrative salary for department chairs.

Sources for the administrative salary component may include the following: state appropriations, hospital support (excluding salary), clinical earnings, affiliated agency support, endowed chair earnings, and contractual or consulting revenues.

C. Variable & Incentive Compensation (Z)

Variable compensation consists of compensation that is not guaranteed compensation; rather, it is subject to another entity's payment plan or the nature of how the compensation is earned or collected is variable.

Faculty may also be eligible for additional compensation in the form of an incentive.

Plans for distributing the variable and incentive compensation and the formulas for determining incentives will be set by the department chair and must be approved by the appropriate COM Dean.

The appropriate COM Dean and, where applicable, the 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 and clinical and consulting earnings.

D. Final Incentive Compensation Payments

The final earned 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 and when they are considered earned, including whether the faculty member must be employed for a certain time period and/or at the time payment is made. 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 this Faculty 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, if applicable.

The appropriate 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 appropriate 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 appropriate 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

I. PREAMBLE

The faculty of the College of Nursing is. composed of professionals with diverse backgrounds and specialties, each uniquely qualified to contribute to the health care delivery process and thus ultimately to 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, research, and/or education of patients and professionals.

When members of the faculty deliver specialized professional consultative services or patient care, the stature and reputation of the Fran and Earl Ziegler College of Nursing 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, demonstrate the educational goals of the College of Nursing, and maintain professional skills.

Active participation in health care delivery and professional services require of the participant a significant commitment in terms of energy, emotional dedication, and time, in addition to those commitments assumed in carrying out academic programs.

Adherence to this policy, as with all Regents' policies, is a condition of employment for faculty in the College of Nursing. Under this policy, as in all University matters, the members of the College are responsible to the Dean and, through the Senior Vice President and Provost, to the President and subsequently to the Board of Regents.

II. OBJECTIVES

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 patient care and consultative 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 Fran and Earl Ziegler College of Nursing 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. Membership: Membership in the Professional Practice Plan (PPP) applies to faculty appointment to the Fran and Earl Ziegler College of Nursing.

B. Guaranteed Base Salary: The Guaranteed Base Salary is specified and guaranteed annually by the University of Oklahoma through appointment to the faculty of the College of Nursing by the Board of Regents. The Guaranteed Base Salary compensates the individual faculty member for that portion of his or her time that will be devoted to teaching, research and creative/scholarly activity, and professional and University service and public outreach. The Guaranteed Base Salary is determined by a salary structure that considers rank and specialty, among other factors.

C. Workload/Work Time: The maximum amount of the work week that may be devoted to teaching, research and creative/scholarly activity, and professional and University service and public outreach shall be negotiated annually at the time of annual review with the Department Chair and the appropriate Associate Dean. Faculty will receive their workload assignments and any subsequent modifications to those assignments in writing from the College.

D. Professional Practice: Professional nursing practice and consulting and other services provided by a faculty member under a Professional Services Agreement between the University and a third party.

E. Professional Earnings: Income generated by professional practice: activities such as consulting or professional nursing practice, as discussed with and approved by faculty supervisor.

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. Examples of PPP sources include:

1) Patient care services and consultations
2) Professional consultation and/or supervision including scientific consultation
3) Honoraria
4) Continuing education
5) Expert legal testimony and medical legal consultations
6) Professional services agreements
7) All other professional activities not specified as excluded (below)

Income Exclusions. The following sources of revenue are not included within the scope of the PPP:

1) Prizes and awards
2) Compensation received as a result of military leave or jury duty
3) Activities performed outside of the faculty member's profession and that do not involve University resources
4) Income earned during sabbatical leave as described in the OUHSC Faculty Handbook
5) Reimbursement for travel expenses
6) Income earned by part-time faculty not during assigned OU time and not using OU resources.
7) Faculty members' interests in:
   a. Royalties
   b. Copyrights
   c. Patent Rights

F. Overall Compensation: Overall compensation is based on the percent effort in teaching, research and creative/scholarly activity, and professional and University service and public outreach, which is compensated through the Guaranteed Base Salary, plus the percent effort in Professional Practice, which is compensated as Professional Earnings. In addition to the Professional Practice Plan, the College has a Faculty Compensation Plan. The purpose of the Compensation Plan is to provide a basis for establishing compensation and, where permitted, incentives for the designated faculty of the College. All faculty are subject to and must comply with the College's Faculty Compensation Plan that must be consistent with University and OUHSC policy and must be approved by the Senior Vice President and Provost.

The College's Compensation Plan is available from the Dean's Office.

IV. OPERATIONAL PROCEDURES

A. Any Professional Practice that will result in the generation of income in addition to the Guaranteed Base Salary paid by the College of Nursing, and not specified under exclusions, is subject to the PPP.

B. Any Professional Practice that is recurrent and falls under the scope of this policy must be presented for approval by means of a Modified Business Plan (MBP) to the faculty Chair and to the Associate Dean for Clinical Affairs, Outreach and Practice Innovation for approval prior to the commencement of the activity.

   Once the MBP is approved by the faculty Chair, then the Associate Dean for Clinical Affairs, Outreach and Practice Innovation, in coordination with the College Finance Officer, will initiate a professional services agreement through ORA for the faculty member and the contracting agency.

C. Any costs associated with the generation of income will be reviewed by an ad hoc task force appointed by the Faculty Governance Board as defined under the Governance Section of this Plan. These are costs such as HSC University tax of 3%, the Dean's tax of 6% and portion of Associate Dean of Clinical Operations to manage this. The costs that faculty could review and potentially change are costs associated with paying for licensure, fees, certification and funds to pay

for continuing education.

V. DISTRIBUTION AND DISBURSEMENT OF SUPPLEMENTAL PROFESSIONAL EARNINGS

A. Faculty receiving only in-kind salary support (effort on the project) from the CON are not eligible to participate in the PPP for that project.

B. Faculty must meet their assigned workload to be eligible for PPP.

C. Active participation in the PPP shall terminate at the end of the period of extramural funding, upon termination of the faculty consultation/practice contract, or upon faculty termination.

D. All PPP payments must be processed through the OUHSC CON payroll office. Any work that has been approved and that exceeds the agreed upon practice effort will be paid through PPP payroll.

F. Faculty who have worked at least 20% FTE in a faculty practice in the current academic year may request professional development funding for costs associated with maintaining their license and certifications that are required for them to receive PPP. This includes costs for continuing education. The percentage of reimbursement for license, certifications, and continuing education will be pro-rated based on the amount of effort the faculty member has allotted for the practice piece of their role.

G. Active PPP participants, meaning faculty who have contributed to the PPP in the current academic year, may also apply for funds to attend national conferences that offer continuing education required for recertification. The percentage of funds approved will be pro-rated based on the amount of effort the faculty member routinely has allotted for the practice piece of their role.

VI. PROFESSIONAL PRACTICE TASK FORCE

A. The Faculty Governance Board shall appoint an ad hoc task force to review the Professional Practice Plan when needed to review costs associated with the PPP and any issues related to the operation of the plan. The purpose of such ad hoc task force will be determined in consultation with the Associate Dean for Clinical Affairs, Outreach, and Practice Innovation. At the conclusion of its work, the task force will forward any recommendations to the Faculty Governance Board and the Associate Dean for Clinical Affairs, Outreach, and Practice Innovation.

B. Membership – Task force members shall include faculty members who are assigned time for practice as part of their current workload; the Associate Dean for Clinical Affairs, Outreach and Practice Innovation; and the Associate Dean for Administrative and Financial Services or appropriate designee. The Faculty Governance Board shall appoint a faculty member to serve as chair of this task force.

C. Meetings – The Chair of the Professional Practice Task Force shall preside over all meetings of the Professional Practice Task Force. The Professional Practice Task Force shall meet to review any costs associated with the Professional Practice Plan and any issues related to the operation of the plan. Additional task forces may be appointed when needed, upon the request of the Faculty Governance Board or the Associate Dean of Clinical Affairs, Outreach, and Practice Innovation. Notice of any task force meeting and an agenda will be generally distributed to each member at least one week prior to the meeting.

VII. AMENDMENTS

A. The policy for operation and governance of the Professional Practice Plan for the College of Nursing may submitted for amendment from time to time in one of the following manners:

1. By a member of the Professional Practice Ad hoc task force submitting an agenda item to the Chair for discussion by the Faculty Practice Task Force with recommendation by the Task Force to the general faculty, OR

2. By greater than one-third of the general faculty submitting an agenda item to the Chair for discussion by the Professional Practice Task Force with recommendation by the Task Force to the general faculty.

B. Thereafter, ratification by two-thirds of the full general faculty is required to send the proposed amendment through the Dean of the College of Nursing, to the Senior Vice President and Provost of the University of Oklahoma Health Sciences Center for final approval.

(Regents 06-19-02, 01-25-06, 6-21-24)

M.7 THE UNIVERSITY OF OKLAHOMA COLLEGE OF PHARMACY PROFESSIONAL PRACTICE PLAN

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, in addition to those commitments assumed in carrying out academic programs.

II. OBJECTIVES

A. 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 teaching, research and creative/scholarly activity, and professional and University service and public outreach goals of the College of Pharmacy.

B. Ensure effective control and administration by the University of Oklahoma and the College of Pharmacy of all Professional Practice Plan (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. 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 to all faculty of The University of Oklahoma College of Pharmacy, including to part-time faculty engaged in PPP activity during their University time.

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 generated by College of Pharmacy faculty from activities covered by the PPP that 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 approved 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 for such activities.

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. 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. Note that services provided to OUH by dually employed individuals are not considered PPP sources and are thus excluded from this Policy. Examples of PPP sources include:

1) Patient care fees wherever earned by the faculty members
2) Professional consultation and/or supervision including scientific consultation
3) Honoraria
4) Continuing Education

5) Expert legal testimony and medical legal consultations
6) Professional services agreements
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. The following sources of revenue are not included within the scope of the PPP:

1) Prizes and awards
2) Compensation received as a result of military leave or jury duty
3) Activities performed outside of the faculty member's profession and that do not involve University resources
4) Income earned during sabbatical leave as described in the OUHSC Faculty Handbook
5) Reimbursement for travel expenses
6) Income earned by part-time faculty not during assigned OU time and not using OU resources.
7) Payments made directly to faculty from other University departments for approved additional duties
8) 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, faculty must wait until the University has fully paid employer portion of FICA and then request transfer to their 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.

J. Generated PPP income and payments are subject to University policies related to Billing, Collecting, Accounting, Disbursements, and Auditing.

V. DISPOSITION OF GROSS GENERATED INCOME

A. The individual faculty member will notify the Business Office at the time the payment is received of their preference to receive the funds through PPP payroll or to have the funds deposited into their individual PPP allotment account.

B. The approved percentage of PPP income paid to the Plan is designated to cover expenses under the Plan (see Item IV. I) and will be deposited into a Dean's Office account.

C. 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, per their disposition decision (see item V.A.)

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.

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 if more often. 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 as to Board of Regents' policies is a condition of employment for individuals of the University of Oklahoma College of Pharmacy. 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 advice 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.

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) 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, electronic, or other acceptable voting 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, for approval.

(Regents, 7-29-93, 11-5-09, 6-21-24)

M.8 THE UNIVERSITY OF OKLAHOMA HUDSON COLLEGE OF PUBLIC HEALTH PROFESSIONAL PRACTICE PLAN

I. PREAMBLE

The faculty of the Hudson 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 Hudson College of Public Health and the University of Oklahoma Health Sciences 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 Hudson 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 Hudson 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, 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 for the benefit of the public health.

(c) To ensure effective administration by the University of Oklahoma and the Hudson 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 Hudson 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 (PPP). For those individuals holding a 9-10 month appointment, those funds earned during the 2-3 months of non-appointment are not included to the extent they don't use University time or resources. Those who hold less than a 50% appointment are covered if they engage in PPP activity during their University time.

(b) All members of the faculty of the Hudson 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 that 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 Chair 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) 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. Note that services provided to OUH by dually employed individuals are not considered PPP sources and are thus excluded from this Policy. Examples of PPP sources include:

i. Patient care services and consultations
ii. Professional consultation and/or supervision including scientific consultation
iii. Honoraria
iv. Continuing education
v. Expert legal testimony and medical legal consultations
vi. Professional services agreements
vii. All other professional activities not specified as excluded (below)

(c) Income Exclusions. The following sources of revenue are not included within the scope of the PPP:

i. Prizes and awards
ii. Compensation received as a result of military leave or jury duty
iii. Activities performed outside of the faculty member's profession and that do not involve University resources
iv. Income earned during sabbatical leave as described in the OUHSC Faculty Handbook
v. Reimbursement for travel expenses
vi. Income earned by part-time faculty not during assigned OU time and not using OU resources.
vii. Faculty members' interests in:

(1) Royalties
(2) Copyrights
(3) Patent Rights

(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 Hudson College of Public Health Professional Practice Plan.

ii. All receipts and disbursements will be handled in accordance with applicable University of Oklahoma Health Sciences , University of Oklahoma Board of Regents, and State of Oklahoma guidelines.

(g) Faculty Compensation Plan

In addition to the Professional Practice Plan, the College has a Faculty Compensation Plan. The purpose of the Compensation Plan is to provide a basis for establishing compensation and, where permitted, incentives for the designated faculty of the College. All faculty are subject to and must comply with the College's Faculty Compensation Plan that must be consistent with University and OUHSC policy and must be approved by the Senior Vice President and Provost.

The College's Faculty Compensation Plan can be accessed on the Hudson College of Public Health Intranet Site.

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) Ten (10) percent to the Dean's Fund for use in academic development of the College plus four (4) percent to Departmental Funds. The amount of the percentage to be directed to the Dean's Fund will be reviewed annually by faculty led by the PPP Committee for financial necessity no later than May 1 of each year. In the absence of financial necessity, the fee will automatically be set at one (1) percent .

(c) The balance will be paid to that individual faculty member or group within the Hudson 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 Hudson 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 Hudson College of Public Health Faculty. The University administration, including the accounting and legal departments, are available to assist the Committee as needed.

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

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 consideration by:

1. Petition by greater than one-third 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 Hudson College of Public Health and Senior Vice President and Provost, Health Sciences for approval.

(Regents, 9-2-76, 7-22-81, 2-9-84, 9-8-98, 6-20-24)

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, and continued education 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, suspension, dismissal, or termination of post-doctoral education shall be brought under this policy. All grievances must be started within 10 University business 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 mentor or program director or chair and attempt to resolve the issue within the program. The post-doc fellow may also use the ombudsperson and Human Resources in the resolution process

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 University business 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 mediate the grievance. If the matter cannot be resolved, the post-doctoral fellow may within seven University business 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 Graduate College.

5) The Dean of the Graduate College 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 five members: two selected from the Graduate College faculty, two selected from among the post-doctoral fellows and an Assistant or Associate Dean from the Graduate College. The Dean of the Graduate College shall appoint the membership. The Assistant/Associate Dean in charge of postdoctoral fellows in which the fellow is assigned 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 mentor or program or that his or her rights as an employee have been abrogated, and (2) has been unable to resolve the matter in conference with the mentor, program director, or chair, and the Assistant/Associate Dean. While the responsibility for evaluations rests with the mentor and program or department, the primary responsibility of the Committee is to mediate disputes that have not been satisfactorily resolved at the program level in order to protect all parties from arbitrary and capricious decisions.

7) The Post-Doctoral Fellows Appeals Committee shall hear grievances meeting its Charge. 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 Chair at least seven University business 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. The Post-Doctoral Fellow Appeals Committee hearing is a confidential proceeding that will be recorded.

8) The Committee will render a written report containing findings of fact and recommendations regarding the dispute in question to the Graduate College Dean for consideration.

9) The Dean of the Graduate 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)

25. APPENDIX P

ETHICS IN RESEARCH

(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 reporting and investigating 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) **General Definitions**

Term	Definition
Allegation	An accusation of specific scholarly misconduct received through any means of communication that triggers the procedures described in this policy.
Complainant	Person who makes an allegation of scholarly misconduct, including those persons who make allegations through the university anonymous reporting line.
Complaint	All allegations of scholarly misconduct, one or many, against a specific respondent received at one time or sequentially.
Deciding Official (DO)	Institutional official responsible for final determinations over all scholarly misconduct matters. In the absence of any conflict, the OUHSC deciding official is the Senior Vice President and Provost.
Fabrication	Making up data or results and recording or reporting them.
Falsification	Manipulating research materials, equipment, or processes, or changing or omitting data or results such that the research is not accurately represented in the research record
Good faith allegation	Allegations of scholarly misconduct that a complainant or witness believes is true and that a reasonable person in that position would likewise believe to be true based on the information known at the time.
Home institution	The institution with jurisdiction over a specific allegation because it is the institution where the research misconduct took place and which retains and/or is responsible for the retention of the original research records.
Inquiry	Preliminary information gathering and fact-finding to determine if each allegation has substance (i.e. that sufficient evidence exits that scholarly misconduct may have occurred to warrant investigation)
Intentionally	To directly engage in falsification, fabrication, or plagiarism with the intent or purpose of misleading the reader of the research record.
Investigation	A formal review of all evidence to determine if scholarly misconduct occurred and by whom, and to recommend appropriate corrective actions and/or sanctions.
Knowingly	To engage in falsification, fabrication, plagiarism or other scholarly misconduct with actual knowledge, deliberate ignorance, or plain indifference of the misconduct.
Plagiarism	The appropriation of the ideas, processes, results, or words of another person without giving appropriate credit.
Preliminary Assessment	Initial review to determine if each allegation fits within the definition of scholarly misconduct and if each allegation is credible and specific so that potential evidence of misconduct may be identified.

Preponderance of the Evidence	Proof by information that, compared with that opposing it, leads to the conclusion that the fact at issue is more probably true than not.
Recklessly	To use or allow the use of, through action or inaction, falsified, fabricated, or plagiarized data while aware of an increased risk of such data being used or generated, or while the risk is so obvious that a typical research in the relevant research community should have known. Recklessness is distinguished from negligence, where an individual deviates from ordinary care that a typical researcher in the relevant research community would have exercised, but the individual is unaware that there was a substantial risk of falsification, fabrication or plagiarism.
Research	Any systematic investigation, including research development, testing, and reporting, designed to develop or contribute to the body of knowledge in any field. The term encompasses basic / applied /clinical research, and research training activities in the areas such as, but not limited to, biomedical and life sciences, natural sciences, engineering, humanities and arts, and social and behavioral sciences.
Research Misconduct	Fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results. A finding of research misconduct requires 1) that there be a significant departure from accepted practices of the relevant research community; 2) the misconduct be committed intentionally, knowingly, or recklessly; and 3) the allegation be proved by a preponderance of the evidence. Research misconduct does not include honest error or differences of opinion.
Research record	Any data, notes or results, in any media or format, which embodies the information resulting from research. A research record includes, but is not limited to, grant or contract applications, whether funded or unfunded; grant or contract progress or other reports; laboratory notebooks – physical or electronic; notes; correspondence; videos; photographs; X-ray film; slides; biological materials; computer files and printouts; manuscripts submitted or not; publications; equipment use logs; laboratory procurement records; animal facility records; human and animal subject protocols; medical charts; patient research files; computer code; musical scores; musical composition; and choreography.
Respondent	Person or persons against whom allegations of research misconduct are made or who are thought to be responsible.
Research Integrity Officer (RIO)	Institutional official with the primary responsibility for implementation of the procedures in this policy.
Scholarly Misconduct	See section (c) Definition of Scholarly Misconduct, below

(c) **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, (defined as fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results), 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:

(c)(1) Fabrication of data, which is making up data or results and recording or reporting them.

(c)(2) Falsification of data, which is manipulating research materials, equipment, or processes, or changing or omitting data or results such that the research is not accurately represented in the research record.

(c)(3) Plagiarism and other improper assignment of credit. Plagiarism is the appropriation of another person’s ideas, processes, results, or words without giving appropriate credit. Other improper assignments of credit are 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

(c)(4) 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

(c)(5) Serious deviation from the scientific method accepted in proposing or carrying out research, deliberate manipulations, or improper reporting of results

(c)(6) 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

(c)(7) 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.

(d) **Evidentiary Standards.**

The following standards apply to this policy:

(d) (1) *Standard of proof*. The institution must establish misconduct, including research misconduct, by a preponderance of the evidence.

(d) (2) *Burden of proof*.

i. The destruction, absence of, or Respondent's failure to provide research records adequately documenting the questioned research is evidence of research misconduct where the institution establishes by a preponderance of the evidence that the Respondent intentionally, knowingly, or recklessly had research records and destroyed them, had the opportunity to maintain the records but did not do so, or maintained the records and failed to produce them in a timely manner and that the Respondent's conduct constitutes a significant departure from accepted practices of the relevant research community.

ii. The Respondent has the burden of going forward with and the burden of proving, by a preponderance of the evidence, any and all affirmative defenses raised.

iii. The Respondent has the burden of going forward with and proving by a preponderance of the evidence any mitigating factors that are relevant to a decision to impose administrative actions following the university's Ethics in Research policy proceedings.

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

(e)(1) **Initiation of an allegation of misconduct.** Initial allegations and 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 or through the anonymous hotline (OU Report It! hotline URL: ouhsc.ethicspoint.com). 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 notify the Vice President for Research if PHS-supported research is involved. 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 as necessary and appropriate. These actions will be taken as necessary 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 personally.

The RIO, in consultation with the Vice President for Research, shall informally review allegations, to assess whether they are sufficiently specific and credible so that potential evidence of scholarly misconduct may be identified and to determine whether the allegations meet the definition of scholarly misconduct as defined in 3.23(c); 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 so long as the questioned research was carried out at OUHSC by the Respondent.

(e)(2) **Sequestration , Notification, and Time Limits**

(a) To the extent it has not already done so at the allegation stage, the RIO must, on or before the date on which the respondent is notified or the inquiry begins, whichever is earlier, promptly take all reasonable and practical steps to obtain 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, Legal Counsel, and IT Security.

(b) At the time of sequestration of physical 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. Electronic research records may be sequestered by the RIO during the allegation stage. This will typically occur within fifteen University business days after receipt of an allegation.

(c) Unless custody has been requested by and transferred to federal agencies or the federal Office of Research Integrity has advised that the university no longer needs to retain he records, the university must maintain records of research misconduct proceedings in a secure manner for seven (7) years after completion of the proceeding or completion of any Public Health Service proceeding involving the research misconduct allegation, whichever is later.

When the time limits detailed in this policy conflict with Public Health Service or other relevant funding sponsors' time limits regarding research misconduct proceedings, the time limit set by applicable federal law shall prevail.

(e)(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 they are waiving their 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 (e)(7)(b) below.

(e)(4) **Inquiry**

(a) The first step of the review process is an Inquiry which has as its purpose preliminary information gathering and fact-finding to determine whether each allegation has substance, such that sufficient

evidence exists that scholarly misconduct may have occurred to warrant 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 regular faculty at the rank of associate or higher 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 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 evidentiary 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. 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 may also conduct interviews of individuals possessing relevant information, such as 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 RIO.

(j) The review by the Inquiry Committee should be completed and a written report filed with the RIO within sixty calendar 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, if any, 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 written summary of progress to date, an explanation of why an extension is needed, and the anticipated completion date. The RIO will review the extension request. 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
- Relevant 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, if any
- The Committee's recommendation on initiating 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 in consultation with Legal Counsel should review the draft report for legal sufficiency and 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 a copy of or supervised access to all evidence on which the report is based. The Respondent shall be given ten University business days to comment in writing upon the findings and recommendations of the Inquiry Committee. The Respondent's comments will be included in 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 federal 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 Investigation 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 seven years after completion of the Inquiry

and shall, upon request, be provided to authorized Department of Health and Human Services personnel.

(e)(5) **Investigation**

(a) Prior to initiating the formal Investigation, the RIO will carry out all required and appropriate notifications to all parties with a need to know that an Investigation is being initiated, including the federal Office of Research Integrity, the National Institutes of Health,, or other sponsors, as appropriate. A copy of the Inquiry Report should accompany the notification, where appropriate. 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 an Investigation Committee 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. The purpose of the Investigation Committee is to investigate the allegation(s) by evaluating evidence and testimony to determine, based on a preponderance of the evidence, whether scholarly misconduct occurred, and, if so, the type and extent of the misconduct and who was responsible. The Investigation Committee should generally 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 Investigation Committee . 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 Investigation Committee, 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 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 relevant individuals involved.

The interviews must 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. Audio will be recorded from all interviews; transcripts of these interviews should be prepared from the audio files, provided to the interviewed party for comment or revision, and included in the investigatory file. The Investigation Committee may request the involvement of outside experts. The Investigation must be sufficiently thorough to permit the Investigation Committee 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 or additional allegations for the Investigation.

(h) All individuals involved in the Investigation are obligated to cooperate in a timely fashion by producing any additional data or information requested for the Investigation.

(i) The proceedings of the Investigation Committee are confidential and will be closed.

(j) The review by the Investigation Committee should be completed and a written report filed within 120 calendar days of written notification to the Respondent that an Investigation was being initiated. If the Investigation Committee determines that this deadline cannot be met, the Committee shall request an extension from the RIO. The request must include a summary of progress to date, an explanation of why an extension is needed, and the anticipated completion date. The RIO will review the report. If the extension is granted, the RIO shall inform all individuals with a need to know.

(k) Significant developments during the formal Investigation will be reported by the RIO to the Vice President for Research, the research sponsor, the federal Office of Research Integrity, or others necessary and deemed appropriate by the RIO.

(l) Upon completion of the Investigation, the Investigation Committee shall deliberate and prepare its findings and recommendations. The Investigation Committee shall submit to the RIO a full written report which details the Investigation Committee's findings and recommendations and the documentation to substantiate the findings.

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

- Nature and specifics of the allegations included in the charge to the Committee
- Relevant 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 determined by a preponderance of evidence 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; relevant 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 calendar days, if applicable
- Recommended University actions

The RIO in consultation with Legal Counsel will review the draft report for legal sufficiency and 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 , along with a copy of or

supervised access to the evidence on which the report is based. The Respondent shall be given thirty (30) calendar days to comment in writing on the draft report of the Investigation Committee. 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 is the Deciding Official (D.O.) for OUHSC and shall make a final 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, if any, before making the final 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 the 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 federal Office of Research Integrity and any other funding agency as required. 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."

(e)(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.

(e)(7) **Resolution**

(a) **Finding of absence of scholarly misconduct.** The RIO is responsible for the following actions. Any research sponsors or others initially informed of the Inquiry or Investigation shall be notified 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 individual(s) 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 to all relevant entities – including 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

(e)(8) **Appeal**

Individuals may appeal the finding of the Investigation and/or the sanction(s). 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