

UNIVERSITY OF HOUSTON SYSTEM

BOARD OF REGENTS

AUDIT & COMPLIANCE COMMITTEE

ETHICS AND CONFLICT OF INTEREST POLICIES
OF THE
BOARD OF REGENTS AND EACH OF THE UNIVERSITIES



Sergio V. Leal
System-wide Compliance Officer
October 31, 2024

University of Houston System
Ethics and Conflict of Interest Policies
Summary
November 21, 2024

The Board of Regents Audit and Compliance Committee Charter and Checklist, item number 23, requires the Audit and Compliance Committee to conduct an annual review of the ethics and conflict of interest policies of the Board and each of the universities to ensure that the Board of Regents and the System have Conflicts of Interest policies in place applicable to each of the institutions. The policies include the Code of Ethics, Ethical Conduct of Employees, and Outside Activities/Disclosures, which addresses disclosures of Conflicts of Interest.

Updates were made to certain Ethics and Conflicts of Interest policies since they were last reviewed by the Audit and Compliance Committee on November 16, 2023. These changes were made to align with revised Board policies, to standardized information contained at the UH System's four universities, and to incorporate feedback from the UH System's community review. Additionally, the University of Houston Clear Lake retired its Nepotism policy and now solely adheres to the UH System policy on Nepotism.

These policies provide guidelines to avoid conflicts of interest, generally described as the use of one's university employment or position to obtain unauthorized privileges, benefits, or things of value for oneself or others. Standards of conduct for employees must also be maintained to fulfill their responsibility to the public in the performance of their official duties. The Board of Regents and System-wide policies set forth a code of accountability for all university employees in the performance of university responsibilities, identify areas of legal and ethical concern, and specify requirements for compliance with state laws, federal guidelines, Board of Regents policies, standards of ethics, and good business practices.

FY 2025
UNIVERSITY OF HOUSTON SYSTEM
ETHICS AND CONFLICTS OF INTEREST POLICIES
As of September 30, 2024
Table of Contents

The Board of Regents Audit Committee Charter and Checklist, item number 23, requires the Audit Committee to conduct an annual review of the ethics and conflict of interest policies of the Board and each of the universities. The following policies are attached for this review, noting in parenthesis the date of last update:

Page No.

Board of Regents

- 4 57.01 Ethics (08/24/23)
10 Board of Regents Conflict of Interest Certification FY 2023-2024

University of Houston System

- 12 SAM 02.A.08 Outside Interests/Activities Disclosures (10/14/23)
18 SAM 02.A.29 Ethical Conduct of Employees (10/23/23)
28 SAM 02.A.21 Nepotism (11/27/23)
30 SAM 01.G.03 Financial Conflict of Interest in Research (01/22/24)

University of Houston

- 37 UH Research Policy on Conflict of Interest in Research (04/2018)

University of Houston-Downtown

- 51 06.A.03 Standards of Conduct in Government-Sponsored Research (11/30/21)
54 06.A.07 Misconduct in Research, Scholarly, Creative and Government Sponsored
Activities (2/12/2020)

57 PERSONNEL

57.01 Ethics

57.01.1 Principles

All members of the Board and all employees of the System and its universities shall adhere to the highest ethical standards of conduct reflected in state law and Board policies.

57.01.2 Code of Ethics

All members of the Board and employees of the System and its universities are expected to adhere to the System code of ethics and obey all federal, state, and local laws. Employees are subject to disciplinary action for violating the code of ethics or laws, as well as any applicable civil or criminal penalties for law violations.

All members of the Board and employees of the System and its universities shall be furnished a copy of the code of ethics and Texas Government Code Section 572.051 within three (3) business days after the start of employment or commencement of service and shall receive regular training on such laws and policies.

All members of the Board shall annually sign conflict of interest certification statements affirming their compliance with their official oath and specific provisions of Texas statutes related to ethical behavior.

A. General Standards of Conduct

1. No Board member or employee shall accept or solicit any gift, favor, or service that might reasonably tend to influence them in the discharge of official duties or that they know or should know is being offered with the intent to influence their official conduct.
2. No Board member or employee shall use their position to secure special privileges or exemptions for themselves or others, except as is allowed by law.
3. No Board member or employee shall accept other employment or compensation that could reasonably be expected to impair their independence of judgment in the performance of their official duties.
4. No Board member or employee shall intentionally or knowingly solicit, accept, or agree to accept any benefit for having exercised their official powers or performed their official duties in favor of another.
5. No Board member or employee who exercises discretion in connection with contracts, purchases, payments, claims, or other pecuniary transactions shall solicit, accept, or agree to accept any benefit from a person or entity the employee knows or should know is or is likely to become financially interested in such transactions.
6. No Board member or employee shall receive any compensation for their services

to the System from any source other than the State of Texas except as is allowed by law.

7. No Board member or employee shall accept other employment or engage in any business or professional activity that foreseeably might require or induce them to disclose confidential information acquired by reason of their official position.
8. No Board member or employee shall disclose without authorization confidential information gained by reason of their official position, nor shall they otherwise use such information for their personal gain or benefit.
9. No Board member or employee shall engage in any form of sexual harassment as stated in Board policy 29.02 and System and University policies.

B. Conflict of Interest – Board members/Employees

1. No Board member or employee shall make personal investments in any enterprise that foreseeably might create a substantial conflict between their private interests and the System's interests.
2. No Board member or employee shall transact any business for the System with any entity of which they are an officer, agent, employee, or member, or in which they have a direct or indirect financial or other interest.
3. No Board member or employee shall act as an agent for another person in the negotiation of the terms of an agreement relating to the provision of money, services, or property to the System or any of its universities.

C. Conflict of Interest – Employees

1. Any employee involved in procurement or contract management shall disclose in the manner specified in the System policy any potential conflict of interest that is known by the Board member or employee with respect to any contract with a private vendor or bid for the purchase of goods or services from a private vendor with the University.
2. No employee shall have a direct or indirect financial or other interest, shall engage in a business transaction or professional activity, or shall incur any obligation that is in substantial conflict with the proper discharge of the employee's duties and responsibilities to the System.
3. The University shall not accept a gift, grant, donation, or other consideration to be used as a salary supplement without the prior written approval of the proposed recipient's immediate supervisor, the Dean or Vice President overseeing the college or division employing the proposed recipient, the Vice Chancellor for Legal Affairs/General Counsel, the President, and the Chief Audit Executive.

D. Conflict of Commitment. No employee's activities outside the System shall interfere with their duties and responsibilities to the System.

E. Use of University Resources. The resources of the University shall be used only in accordance with university policies and applicable law.

F. Outside Activities

Full-time exempt employees may engage in outside professional activities, provided such activities benefit the System and/or contribute to the professional development of the individual.

This privilege is subject in all instances to the conditions set forth below. Failure to comply with this policy may subject an employee to disciplinary action including reprimand, suspension, or termination.

1. The first responsibility of the individual is to the System, and outside professional commitments must not interfere with the employee's full-time responsibility to the System.
2. No outside obligation should result in any conflict of interest or conflict of commitment involving the individual's duties and responsibilities to the System or to its programs, policies, and objectives. Outside activities that represent actual or potential conflicts of interest or commitment must be avoided.
3. Use of System facilities, space, equipment, or support staff for outside activities is permitted only if a financial arrangement has been concluded between the individual and the administration prior to the individual beginning the outside activity.
4. Individuals may not represent themselves as acting in the capacity of System employees when conducting outside activities. The System bears no responsibility for any actual or implied obligations or liabilities incurred by the individual resulting from an outside activity.
5. Full-time exempt employees who wish to arrange outside activities must obtain prior written approval under the process established by the Chancellor. Review of such activities will include consideration of any real or apparent conflict of interest or conflict of commitment and the benefit of the proposed service to the System and the University and/or the professional development of the employee. Each full-time exempt employee who engages in an outside professional activity, including teaching on a temporary basis at other institutions, must ensure that such activities generally be not more than 8 hours per calendar week, and in no event exceed a maximum of 32 hours per month and must arrange such activities so as not to interfere with their System obligations, such as regularly scheduled classes.
6. When any of an individual's salary is paid from funds for externally sponsored activities, the time allowable for outside activities must comply with sponsor requirements.

The Chancellor will establish a process for monitoring outside activities of full-time exempt employees, including but not limited to compensated employment and board service, to ensure that such activities are consistent with the above policy.

G. Outside Employment or Appointments of Executive Officers

The Chancellor and Executive Officers of the System Administration and the Presidents and Vice Presidents of the Universities may become members of a Board of Directors, Trustees, Regents, or of a corporation or institution's Governing Body by whatever name, if the position: 1) is of benefit to the state or is required by state or federal law, and 2) creates no conflict of interest or conflict of commitment. Such service will usually be deemed to be in the best interest of the University of Houston System. Approval procedures for these positions will be as follows:

1. The Board should be informed of a non-compensated appointment of the Chancellor or a President of any institution, including a statement that the appointment meets the two requirements stated above.
2. Prior to the Chancellor or a President accepting an invitation to serve in an additional position that includes compensation greater than \$25,000. The Board must approve this appointment and must also make an official record of the compensation, including salary, bonus, per diem or other types of compensation. The Board should be informed of appointments to compensated Boards below the \$25,000 threshold.
3. Compensation is defined as remuneration for services rendered and does not include reimbursement of expenses whether by direct reimbursement or per diem.
4. The Board delegates to the Chancellor the authority to approve outside employment or appointments for the Vice-Chancellors of the system and each President is delegated the authority to approve for their Vice-Presidents, in compliance with the requirements stated above.

57.01.3 Dual Office Holding

The Board must give its approval before the Chancellor or a President of any university may hold other non-elective state or federal office. Approval must include formal findings that the dual office holding is of benefit to the state or required by state or federal law and creates no conflict of interest or conflict of commitment.

57.01.4 Nepotism

Members of the Board shall not appoint, confirm the appointment of, or vote for the appointment or confirmation of their relative or another Board member's relative to a position with the System unless the individual was continuously employed in the position for at least 30 days immediately before the appointment of the Board member to whom the individual is related. If this exception applies, the board member to whom the individual is

related may not participate in any deliberation or voting on the appointment, reappointment, confirmation, employment, reemployment, change in status, compensation, or dismissal of the individual if that action applies only to the individual.

System employees shall not hire, appoint, reappoint, promote, or supervise their relative and shall not recommend, approve, or otherwise act with regard to the hiring, appointment, reappointment, salary, promotion, or supervision of their relative. Relatives shall not be employed in the supervisory-subordinate relationship even if it results from marriage after the employment relationship was formed. The provisions of this policy apply to all System programs regardless of funding source.

For the purposes of this policy, the term “relative” is defined as anyone related to the Board member or employee within the third degree of consanguinity (i.e., parent, grandparent, great grandparent, brother, sister, half brothers and sisters, child, grandchild, great grandchild, aunt, uncle, niece, and nephew) and within the second degree of affinity (i.e., spouse, spouse’s parent, spouse’s grandparent, spouse’s sibling, spouse’s child, spouse’s grandchild, parent’s spouse, grandparent’s spouse, sibling’s spouse, child’s spouse, and grandchild’s spouse).

(Policy last reviewed 8/24/2023)

Related Statutes, Policies, or Requirements

[Texas Constitution, Art. XVI, § 12 – Members of Congress; Officers of United States or Foreign Power; Ineligibility to Hold Office](#)

[Texas Constitution, Art. XVI, § 40 – Holding More than One Office; Exceptions; Right to Vote](#)

[Texas Government Code § 552.352 – Distribution or Misuse of Confidential Information](#)

[Texas Government Code § 572.051 – Standards of Conduct; State Agency Ethics Policy](#)

[Texas Government Code Chapter 573 – Degrees of Relationship; Nepotism Prohibitions](#)

[Texas Government Code, Chapter 574 – Dual Office Holding](#)

[Texas Government Code § 659.0201 – Gifts, Grants, and Donations for Salary Supplement](#)

[Texas Government Code § 2113.014 – Employee Standards of Conduct](#)

[Texas Government Code § 2155.003 – Conflict of Interest](#)

[Texas Government Code § 2261.252 – Disclosure of Potential Conflicts of Interest; Certain Contracts Prohibited](#)

[Texas Education Code § 51.923 – Qualifications of Certain Business Entities to Enter into Contracts with an Institution of Higher Education](#)

[Texas Education Code § 51.9337 – Purchasing Authority Conditional; Required Standards](#)

[Texas Penal Code Chapter 36 – Bribery and Corrupt Influence](#)

[Texas Penal Code § 39.06 – Misuse of Official Information](#)

System Administrative Memoranda (SAMs)

02.A.21 – Nepotism

02.A.29 – Ethical Conduct of Employees

Age Discrimination in Employment Act of 1967, 29 U.S.C. §§ 621-634 (age)

The Rehabilitation Act of 1973, Sections 501 & 505, 29 U.S.C. § 794 (disability)

Americans with Disabilities Act of 1990, as amended, Titles I & V, 42 U.S.C. § 12101, et seq. (disability)

Civil Rights Act of 1991 (42 U.S.C. § 1981) (race, color, disability, religion, sex, national origin, age)

Uniformed Services Employment and Reemployment Rights Act, 38 U.S.C. §4331 et seq., (veteran status)

Texas Labor Code, Chapter 21 – Employment Discrimination (race, color, disability, religion, sex, national origin, age)

40 Texas Administrative Code, Part 20, Chapter 819, Subchapters A-H – Texas Workforce Commission Civil Rights Division (race, color, disability, religion, sex, national origin, age)

**UNIVERSITY OF HOUSTON SYSTEM BOARD OF REGENTS
CONFLICT OF INTEREST CERTIFICATION
FY 2023 - 2024**

University of Houston System Board of Regents Policy requires that all members of the Board shall annually sign conflict of interest certification statements affirming their compliance with their official oath and specific provisions of Texas statutes related to ethical behavior. In accordance with this policy, I affirm that:

- I will faithfully execute the duties of the Board of Regents of the University of Houston System, and will to the best of my ability preserve, protect, and defend the Constitution and laws of the United States and of this State. *See Texas Constitution Art. 16, § 1.*
- I have not directly or indirectly paid, offered, promised to pay, contributed, or promised to contribute any money or thing of value, or promised any public office or employment as a reward to secure my appointment or confirmation, whichever the case may be. *See Texas Constitution Art. 16, § 1.*
- I will file a verified financial statement with the Texas Ethics Commission in accordance with Texas Government Code §§ 572.022 through 572.0252. *See Texas Government Code § 572.021.*
- I shall publicly disclose to the board any personal or private interest that I have in a measure, proposal, or decision pending before the board in a meeting called and held in compliance with Texas Government Code Chapter 551 (the Texas Open Meetings Act). I acknowledge that I may not vote or otherwise participate in such a decision pending before the board and further understand that my public disclosure shall be entered in the minutes of the meeting. *See Texas Government Code § 572.058(a).*
- I will disclose any legal or equitable interest in property that is acquired with public funds. Such disclosure shall be made by filing an affidavit within 10 days before the date on which the property shall be acquired, containing specific information as required by Texas Government Code 553.002.
- **I shall not:**
 - Accept or solicit any gift, favor, or service that might reasonably tend to influence me in the discharge of my official duties or that I know or should know is being offered with the intent to influence my official conduct. *See Texas Government Code 572.051(a)(1).*
 - Accept other employment or engage in a business or professional activity that I might reasonably expect would require or induce me to disclose confidential information acquired by reason of my position. *See Texas Government Code 572.051(a)(2).*

**UNIVERSITY OF HOUSTON SYSTEM
ADMINISTRATIVE MEMORANDUM**

SECTION: Human Resources

NUMBER: 02.A.08

AREA: General

SUBJECT: Outside Activities/Interests Disclosures

1. PURPOSE

An employee’s outside activities and interests have the potential to create conflicts of interest and conflicts of commitment with the employee's duties and responsibilities to their university. This document sets forth the certifications and disclosures that employees of any university within the University of Houston System (“UHS”) must make to ensure compliance with state law and Board of Regents policies and to assist employees in managing or eliminating potential conflicts.

2. POLICY

To view the policies that form the basis for the certifications and disclosures required in this document, see [SAM 02.A.29](#) – Ethical Conduct of Employees.

3. DEFINITIONS

- 3.1. Conflict of commitment: A situation in which an employee’s outside activities interfere with the employee’s duties and responsibilities to UHS, including their commitment of time and intellectual energies.
- 3.2. Conflict of interest: A situation in which an employee has a direct or indirect financial or other interest, engages in a business transaction or professional activity, or incurs any obligation that is in substantial conflict with the proper discharge of the employee's duties and responsibilities to UHS.

4. OUTSIDE ACTIVITIES

- 4.1. Prior Approval Required. All full-time exempt employees must request and receive prior written approval for the activities listed below, unless it falls under the list of pre-approved outside activities outlined in Section 4.6. **This requirement is in addition to any other disclosures and approvals required in Section 5.**
 - 4.1.1. Outside paid professional activity, such as consulting, for any company, organization, or individual where the work is for the same or similar types of activities or area of expertise for which the employee was hired by the university;

- 4.1.2. Startup company activity (i.e., starting, or joining with others to start, a company) where the work is for the same or similar types of activities or area of expertise for which the employee was hired by the university;
 - 4.1.3. Outside board service as detailed in Section 4.5 below;
 - 4.1.4. Any outside activity, regardless of compensation, that reasonably appears to create a conflict of interest or a conflict of commitment.
- 4.2. Process for Obtaining Approval. The process for obtaining such approval is by first completing the [Outside Activities Form](#). Approvals required for faculty requests include their chair, dean, and the Provost. Approvals required for staff requests include their supervisor, the applicable Vice President, and any additional levels of direct reports in between.
- 4.3. Considerations for Review. The approval authorities detailed in Section 4.2 above shall consider, on a case by case basis, whether such outside activities benefit UHS and/or contribute to the employee's professional development and whether such outside activities conflict with the employee's primary duties or create a conflict of interest, time or commitment with university obligations.
- 4.4. Time Commitment. Except for the limited pre-approved outside activities under Section 4.6, the time commitment expected of any outside activity described in Section 4.1 should generally be not more than 8 hours per calendar week, but in no event exceed a maximum of 32 hours per month.
- 4.5. Outside Board Service.
- 4.5.1. Prior Approval Required. Full-time exempt employees must receive prior approval before serving on a board, other than as described in Section 4.5.2. If such service is uncompensated and does not require an undue amount of time commitment, it can occur during work hours and be considered service to the university because of the benefit to the university that can result from such service. If such service is compensated, it must occur on the employee's own time and not during work hours.
 - 4.5.2. No Approval Required. Service on the board of a local organization, religious organization, neighborhood association, public, private or parochial school, youth sports or recreation league, and similar outside boards that are personal in nature is allowed on the employee's own time outside of work hours and no approval is required if it does not create, or create the appearance of, a conflict of interest or conflict of commitment.
- 4.6. Pre-approved Outside Activities. While many outside activities require prior approval, certain outside activities are so integral to UHS's mission that they do not require prior approval so long as the activity does not create, or create the

appearance of, a conflict of interest or conflict of commitment. Pre-approved activities include:

- 4.6.1. Acting in an editorial capacity for a professional journal;
- 4.6.2. Reviewing journal manuscripts, book manuscripts, grant or contract proposals, theses or dissertations;
- 4.6.3. Attending and presenting talks at scholarly colloquia and conferences;
- 4.6.4. Developing scholarly communications in books, journal articles, television productions and similar works, even when such activities result in financial gain, consistent with intellectual property and UHS or university policies and guidelines. (However, prior approval is required if an employee will be paid by an outside entity to conduct research related to their area of expertise);
- 4.6.5. Serving as a committee member or an officer of a professional or scholarly organization; and
- 4.6.6. Serving on a grant review committee.

5. OTHER REQUIRED DISCLOSURES AND PRE-APPROVALS

- 5.1. Dual Employment. Employees who want to work for another state agency or for another UHS university while also maintaining their current university employment must request and receive prior written approval.
- 5.2. Potential Financial Conflict of Interest in Research. In addition to the obligation to disclose and receive pre-approval for outside activities imposed by Section 4 of this policy, faculty, staff, and students who meet the definition of “investigator” must follow the applicable university’s research policy. This policy requires financial disclosures (1) at least annually, (2) at the time of submission for new funding, (3) at the time of submission of human or animal protocols if financial relationships related to the research exist, and (4) within 30 days of discovering or acquiring (e.g., through purchase, marriage, or inheritance) a new significant financial interest.
- 5.3. Potential Conflict of Interest with Private Vendor.
 - 5.3.1. An employee who participates as a committee member on a formal competitive bid or formal solicitation must disclose to the applicable university purchasing or procurement office any potential conflict of interest that is known by the employee with respect to any private vendor’s bid for the university’s purchase of goods or services valued at more than \$25,000. The disclosure must be made at any time during the

procurement process (from the initial request for bids until the completed final delivery of the goods or services).

- 5.3.2. An employee involved in contract management must disclose to the applicable college, school, or division business administrator any potential conflict of interest that is known by the employee with respect to any contract with a private vendor for the university's purchase of goods or services valued at more than \$25,000. The disclosure must be made during the term of the contract.
- 5.3.3. Notwithstanding the above, any employee involved in procurement or contracting activities at any dollar value who is aware that their participation in such activity may create a conflict of interest with a private vendor must refrain from such participation and recuse themselves if necessary, as required by the conflict of interest provisions in [SAM 02.A.29](#) – Ethical Conduct of Employees.
- 5.4. Nepotism Disclosure by Purchasing Personnel: All purchasing personnel working on formal solicitations or contracts valued at \$1 million or more must disclose in writing to the University of Houston Purchasing Department, on the form available through the Purchasing Department's workflow, whether the employee or employee's relative is an employee, partner, major stockholder (i.e., directly or indirectly owns or controls more than a 10 percent interest or a pecuniary interest with a value exceeding \$25,000 in a business entity), paid consultant with a contract of at least \$25,000 with the business entity, or other owner of the business entity under consideration for an award of the contract.
 - 5.4.1. For purposes of this disclosure, "purchasing personnel" is any employee who makes decisions on behalf of the university or recommendations regarding (1) contract terms or conditions, (2) who is to be awarded a contract (i.e., vendor selection), (3) preparation of a solicitation for a contract, or (4) evaluation of a bid or proposal.
 - 5.4.2. For purposes of this disclosure, "relative" is defined as a person related to another within the third degree by consanguinity (i.e., parent, grandparent, great grandparent, brother, sister, half-brother, half-sister, child, grandchild, great grandchild, aunt, uncle, niece, nephew) or within the second degree by affinity (i.e., spouse as recognized under Texas law, spouse's parent, spouse's grandparent, spouse's sibling, spouse's child, spouse's grandchild, parent's spouse, grandparent's spouse, sibling's spouse, child's spouse, and grandchild's spouse).
- 5.5. Annual Disclosure by Athletics Department of Athletically-Related Income and Benefits: Each academic year, full-time and part-time employees of the department of intercollegiate athletics must provide a written detailed account to the athletics compliance office of all athletically-related income and benefits from

Date: October 14, 2023

9. **REFERENCES AND RELATED STATUTES, POLICIES, OR REQUIREMENTS**

[Texas Education Code § 51.9337](#) – Purchasing Authority Conditional; Required Standards

[Texas Family Code Chapter 2](#) – The Marriage Relationship

[Texas Government Code § 572.021](#) – Financial Statement Required [Texas](#)

[Government Code § 573.002](#) – Degrees of Relationship

[Texas Government Code § 659.0201](#) – Gifts, Grants, and Donations for Salary Supplement

[Texas Government Code § 2261.252](#) – Disclosure of Potential Conflicts of Interest Certain Contracts

[Texas Government Code § 2262.004](#) – Required Nepotism Disclosure [Board Policy](#)

[57.01.2](#) – Code of Ethics

[NCAA Bylaw 11.2.2](#) – Athletically Related Income and Benefits

[SAM 02.A.29](#) – Ethical Conduct of Employees

[Outside Activities Form](#)

[Outside Activities/Interests Disclosures: Frequently Asked Questions \(FAQs\)](#)

[Outside Activities/Interests Disclosures: Considerations for Supervisors Reviewing Forms](#)

**UNIVERSITY OF HOUSTON SYSTEM
ADMINISTRATIVE MEMORANDUM**

SECTION: Human Resources

NUMBER: 02.A.29

AREA: General

SUBJECT: Ethical Conduct of Employees

1. PURPOSE

University of Houston System employees have a responsibility to the public in the performance of their official duties. High institutional and personal standards of conduct must be maintained to fulfill that responsibility. This document sets forth standards of conduct for employees in accordance with [Texas Education Code Section 51.9337](#), [Texas Government Code Section 572.051](#), and [Board of Regents Policies 57.01.2, 57.01.4, and 81.01](#). For purposes of this policy, the term “UHS” encompasses the University of Houston System and its universities, and the term “employee” refers to all employees of UHS and its universities.

2. POLICY

- 2.1. Employees shall avoid using their positions for purposes that are, or give the appearance of being, motivated by a desire for private gain for themselves or others, such as those with whom they have family, business, or other ties. Employees shall exercise the utmost good faith and honest dealing in all transactions, activities, and behaviors related to their duties to UHS and its property and resources.
- 2.2. Each employee is expected to obey all federal, state, and local laws and UHS and university policies, including this policy. Failure of an employee to comply with this policy or with applicable law shall constitute grounds for disciplinary action, up to and including termination of employment. An employee who violates any applicable federal or Texas law or rule may be subject to civil or criminal penalties in addition to any employment-related sanction.

3. DEFINITIONS

- 3.1. Benefit: Anything an independent third party observer might reasonably regard to provide a monetary gain or advantage. For the purposes of this policy, a benefit would include, but is not limited to, monetary gifts, meals, travel, entertainment, employment, services, or other items of monetary gain or advantage. This definition applies to the use of the term “Benefit” or “benefit.”

- 3.2. Conflict of commitment: A situation in which an employee's outside activities interfere with the employee's duties and responsibilities to UHS, including their commitment of time and intellectual energies.
- 3.3. Conflict of interest: A situation in which an employee has a direct or indirect financial or other interest, engages in a business transaction or professional activity, or incurs any obligation that is in substantial conflict with the proper discharge of the employee's duties and responsibilities to UHS.
- 3.4. Financial interest: For purposes of this policy, financial interest is defined as an interest in an individual or entity (other than a retirement plan, a blind trust, insurance coverage, or an ownership interest of less than one percent in a corporation) in which a person:
- 3.4.1. Owns or controls, directly or indirectly, an ownership interest of at least one percent, including the right to share in profits, proceeds, or capital gains; or
- 3.4.2. Could reasonably foresee that a UHS or university contract with the individual or entity could result in a financial benefit to the person.
- 3.5. Procurement activity: Activities undertaken by an employee involving the following:
- approvals, disapprovals, or recommendations concerning a procurement transaction, or selection of a vendor;
 - preparation of any part of procurement actions;
 - influencing the content of any specification or procurement standard; or
 - advising, investigating, or auditing any procurement transaction.
- 3.6. Relative: A person related to another within the second degree of affinity or the third degree of consanguinity and includes the following relations:
- 3.6.1. Parent, grandparent, great grandparent, brother, sister, half-brother, half-sister, child, grandchild, great grandchild, aunt, uncle, niece, nephew;
- 3.6.2. Persons married to: parent, grandparent, brother, sister, half-brother, half-sister, child, and grandchild;
- 3.6.3. Spouse (as recognized under Texas law) and spouse's: parent, grandparent, brother, sister, half-brother, half-sister, child, and grandchild.

4. GENERAL STANDARDS OF CONDUCT

- 4.1. Improper Acceptance of Benefits, Privileges, or Exemptions

- 4.1.1. Use of Official Position to Secure Privileges or Exemptions. No employee shall use their position to secure special privileges or exemptions for themselves or others, except as is allowed by law.
- 4.1.2. Employment or Compensation That Could Impair Judgment. No employee shall accept other employment or compensation that could reasonably be expected to impair the employee's independence of judgment in the performance of the employee's official duties.
- 4.1.3. Benefits Given in Exchange for Official Action. No employee shall intentionally or knowingly solicit, accept, or agree to accept any benefit for having exercised the employee's official powers or performed the employee's official duties in favor of another.
- 4.1.4. Benefits Given to Influence Decisions. No employee shall accept or solicit any gift, favor, or service that might reasonably tend to influence the employee in the discharge of official duties or that the employee knows or should know is being offered with the intent to influence the employee's official conduct.
- 4.1.5. Benefits Given by Vendor Who May Be Awarded Contract. No employee participating in a procurement activity shall solicit or accept any economic opportunity, employment, gift, loan, gratuity, special discount, trip, favor, or service from a person or entity to whom a contract may be awarded.
- 4.1.6. Benefits Given by Interested Party. Unless specifically allowed under Section 5 of this policy and applicable law, no employee who exercises discretion in connection with contracts, purchases, payments, claims, or other monetary transactions shall solicit, accept, or agree to accept any benefit from a person or entity the employee knows is interested in or likely to become interested in such transactions.
- 4.1.7. Honorarium Given Because of Official Position or Duties. Unless specifically allowed under Section 5 of this policy and applicable law, no employee shall solicit, accept, or agree to accept an honorarium in consideration for services that the employee would not have been asked to provide but for the employee's official position or duties. This prohibition includes a payment made to a third party in exchange for such services.
- 4.2. Conflict of Interest. No employee shall have a direct or indirect financial or other interest, shall engage in a business transaction or professional activity, or shall incur any obligation that is in substantial conflict with the proper discharge of the employee's duties and responsibilities to UHS. This includes, but is not limited to, the following:

- 4.2.1. Transacting UHS Business. No employee shall transact any business for UHS or any of its universities with any entity of which they are an officer, agent, employee, or member, or in which they have a direct or indirect financial or other interest.
- 4.2.2. Participating in Procurement Activity. No employee shall participate in a procurement activity if the employee has—or is aware that the employee’s relative has—an actual, potential, or perceived monetary interest in a procurement, including but not limited to, employment or prospective employment with an entity subject to the procurement activity.
- 4.2.3. Personal Investments. No employee shall make personal investments that could reasonably be expected to create a substantial conflict between the employee’s private interest and UHS’s interests.
- 4.2.4. Acting as an Agent. No employee shall act as an agent for another person in the negotiation of the terms of an agreement relating to the provision of money, services, or property to UHS or any of its universities.
- 4.2.5. Conducting Research. For federal and institutional requirements specific to potential financial conflicts of interest in research, see the applicable university’s research policy.
- 4.3. Conflict of Commitment. No employee’s activities outside UHS shall interfere with the employee’s duties and responsibilities to UHS or to its programs, policies, and objectives. Outside obligations that represent actual or potential conflicts of commitment must be avoided.
- 4.4. Unauthorized Disclosure or Use of Confidential Information
 - 4.4.1. No employee shall disclose without authorization confidential information gained by reason of their university position, nor shall they otherwise use such information for their personal gain or benefit.
 - 4.4.2. No employee shall accept other employment or engage in a business or professional activity that the employee might reasonably expect would require or induce the employee to disclose confidential information acquired by reason of their university position.
 - 4.5. Misuse of UHS Property or Resources. Unless specifically allowed under Section 5 of this policy and applicable law, no employee shall use UHS property or resources, including the name of UHS or its universities, for any purpose other than university purposes. See [SAM 01.C.04 – Reporting/Investigating Fraudulent Acts](#).

5. SPECIFIC EMPLOYEE CONDUCT

5.1. Benefits Employees May Accept

- 5.1.1. Gifts from Friends, Relatives, and Associates. Employees may accept gifts or other benefits from a friend, relative, or business associate with whom they have a relationship independent of the employee's official status, as long as the gift is given on account of the personal relationship and not on account of the official status.
- 5.1.2. Non-cash Items of Less than \$50 in Value. Employees may accept non-cash items of less than \$50 in value, as long as such items (1) are not solicited and not offered or accepted in exchange for any action or inaction on the part of the employee and (2) are not to an employee participating in a procurement activity from a vendor who may be awarded a contract.
- 5.1.3. Other Benefits Allowed Under Texas Penal Code Section 36.10. Employees who exercise discretion in connection with contracts, purchases, payments, claims, or other monetary transactions may accept a benefit from a person or entity the employee knows is interested in or likely to become interested in such transactions if the benefit falls under an applicable exception under Texas Penal Code Section 36.10.
- 5.1.4. Honorarium. Employees may accept an honorarium in consideration for a non-recurring service for which a fee is not traditionally required—such as a speech, guest lecture, workshop, or seminar—if the service was requested for a reason unrelated to the employee's official position or duties. However, if the honorarium is offered for a service because of the employee's official position or duties, an honorarium may not be accepted.

Regardless of the reason for the service being requested, the employee can accept reimbursement for meals, transportation, or lodging in connection with the service as long as the service is more than merely perfunctory.

- 5.2. Outside Activities by Full-time Exempt Employees. Full-time exempt employees (both faculty and staff) who want to engage in the following activities must comply with the requirements in this Section, in addition to any other applicable provision in this policy or other university policy (e.g., SAM 02.D.07 – Expert Witness Services):

- Outside paid professional activity, such as consulting, for any company, organization, or individual where the work is for the same or similar types of activities or area of expertise for which the employee was hired by the university;

- Startup company activity (i.e., starting, or joining with others to start, a company) where the work is for the same or similar types of activities or area of expertise for which the employee was hired by the university;
 - Outside board service as detailed in [SAM 02.A.08](#);
 - Any outside activity, regardless of compensation, that reasonably appears to create a conflict of interest or a conflict of commitment.
- 5.2.1. Prior Approval Required. The proposed activity must be disclosed and prior written approval obtained under the process outlined in [SAM 02.A.08, unless it falls under the list of pre-approved outside activities in SAM 02.A.08](#).
 - 5.2.2. Time Limitations. Except for the limited pre-approved outside activities outlined in Section 4.6 of [SAM 02.A.08](#), the activity should generally be not more than 8 hours per calendar week, but in no event exceed a maximum of 32 hours per month.
 - 5.2.3. Other University Obligations. The proposed activity must not interfere with an employee's university obligations, such as a faculty member's regularly scheduled classes.
 - 5.2.4. Authorization for Absences. Authorizations for absences from an employee's official place of duty shall be requested and approved in accordance with university policy governing leave entitlements.
 - 5.2.5. Affiliation with University. Employees may not represent themselves as acting in the capacity of UHS or university employees when engaging in the activity. UHS bears no responsibility for any actual or implied obligations or liabilities incurred by the employee resulting from the activity.
- 5.3. Governmental Appearances. Employees appearing in their official capacity on behalf of UHS or any of its universities before Congress or the Texas Legislature or their agencies, committees, or members to offer testimony, opinions, or commentary in regard to existing or potential laws, rules, or regulations must be expressly authorized do so by the Board of Regents or the Chancellor. Employees appearing in their individual capacity must clearly state in advance that they are appearing in their individual capacities and that their testimony, opinions and commentary are not authorized by and must not be construed as reflecting upon the position of UHS or any of its universities. See [SAM 09.A.01 – Governmental Relations Communications and Appearances](#).

5.4. Political Activities

- 5.4.1. Elective Office. Employees may run for local elective office and serve as elected members of the governing bodies of school districts, cities, towns, or other local governmental district, but may not receive a salary for serving as members of such governing bodies except as allowed under [Article XVI, Section 40\(b\)](#) of the Texas Constitution.
- 5.4.2. Political Campaigns. Employees may work on a political campaign as long as university funds, equipment, work time, or other resources are not used for the campaign, and the employee does not use the employee's official authority or influence to affect the result of any election or nomination of a candidate or to achieve any other political purpose. See [SAM 02.A.39 – Political Aid and Legislative Influence](#).

5.5. UHS Employment

- 5.5.1. Dual Employment. Employees may work for another state agency or for another UHS university while maintaining their current employment only if they have received pre-approval. The work performed for the state agency or other UHS university must be non-regular, part-time appointment or temporary appointment as defined in [SAM 02.A.34 – Types of Staff Employment](#). Compensation must be made through the university's payroll system and are subject to withholding and other payroll deductions, and benefits from the state must not exceed the benefits provided for one full-time employee.
- 5.5.2. Compensation from Sources Other Than State of Texas. Employees may receive compensation for services to UHS from sources other than the State of Texas only if allowed by law.
 - A. Salary Supplement from Donor. Employees shall not ask their university or agree on behalf of their university to accept a gift, grant, donation, or other consideration to be used as a salary supplement for themselves or for another employee without receiving prior written approval under the process outlined in [SAM 02.A.08](#).
 - B. Expert Witness Fees. Compensation for expert witness services to an employee called to appear in their official capacity on behalf of UHS or any of its universities shall be subject to the provisions of [SAM 02.D.07 – Expert Witness Services](#).
- 5.5.3. Additional Compensation. Pay for special projects performed for a university outside the employee's normal duties and normal work hours must serve institutional purposes, be consistent with university policies,

and comply with applicable law(s) with respect to employee compensation.

- 5.5.4. Nepotism. Employees shall not hire, appoint, reappoint, promote, or supervise their relative and shall not recommend, approve, or otherwise act with regard to the hiring, appointment, reappointment, salary, promotion, or supervision of their relative. Relatives shall not be employed in the supervisory-subordinate relationship even if it results from marriage after the employment relationship was formed. The requirements of nepotism statutes may be found in [Board Policy 57.01.4](#) and [SAM 02.A.21 – Nepotism](#).

5.6. Use of UHS Property and Resources

- 5.6.1. Incidental Use with No Direct Cost to University. UHS property or resources may be used for non-university purposes when such use is reasonable and incidental and does not result in any direct cost to UHS, such as use of telephones to make occasional local calls.
- 5.6.2. Financial Arrangement Prior to Use. UHS property or resources may be used for non-university purposes when an appropriate and equitable financial arrangement that adequately covers the university's costs has been concluded between the employee and the university prior to use. See [SAM 01.B.06](#) – Facilities Reservation and Rental and [SAM 03.A.05](#) – Contract Administration, for additional guidance.

6. PROCEDURES

- 6.1. Ethics Policy Distribution and Training. A copy of this policy and the Code of Ethics in Board of Regents Policy [57.01.2](#) shall be provided to employees annually and to each new employee within three (3) business days after the start of their employment. To acknowledge receipt and understanding of these laws and policies, all employees must annually complete Code of Ethics training.
- 6.2. Outside Activities/Interests Disclosures. Employees are responsible for disclosing outside activities and interests in accordance with [SAM 02.A.08](#) – Outside Activities/Interests Disclosures.
- 6.3. Reporting Law and Policy Violations. Employees are responsible for reporting suspected violations of law and policy in accordance with [SAM 01.C.04 – Reporting/Investigating Fraudulent Acts](#).

7. REVIEW AND RESPONSIBILITIES

Responsible Party: Associate Vice Chancellor, Human Resources
System-wide Compliance Officer

Review: Every five years

8. APPROVAL

Approved: /Raymond Bartlett/
Senior Vice Chancellor for Administration and Finance

 /Dona Cornell/
Vice Chancellor for Legal Affairs and General Counsel

 /Renu Khator/
Chancellor

Date: October 23, 2023

9. REFERENCES AND RELATED STATUTES, POLICIES, OR REQUIREMENTS

Texas Constitution:

[Article XVI, Section 40\(b\)](#)

Texas Statutes:

[Education Code § 51.9337](#) – Purchasing Authority Conditional; Required Standards

[Government Code Chapter 554](#) – Protection for Reporting Violations of Law

[Government Code § 552.352](#) – Distribution or Misuse of Confidential Information

[Government Code § 556.004](#) – Prohibited Acts of Agencies and Individuals

[Government Code § 659.0201](#) – Gifts, Grants, and Donations for Salary Supplement

[Government Code § 572.051](#) – Standards of Conduct; State Agency Ethics Policy

[Government Code § 2113.014](#) – Employee Standards of Conduct

[Government Code § 2155.003](#) – Conflict of Interest

[Government Code § 2261.252](#) – Disclosure of Potential Conflicts of Interest; Certain Contracts Prohibited

[Family Code Chapter 2](#) – The Marriage Relationship

[Penal Code Chapter 36](#) – Bribery and Corrupt Influence

[Penal Code §39.06](#) – Misuse of Official Information

Texas Administrative Code:

[1 Texas Administrative Code § 45.3](#) (interpreting Texas [Government Code § 2155.003](#))

System Board of Regents Policies:

[57.01.2 Code of Ethics](#)

[57.01.4 Nepotism](#)

[81.01 Governmental Appearances](#)

System Administrative Memoranda:

[01.B.06 Facilities Reservation and Rental](#)
[01.C.04 Reporting/Investigating Fraudulent Acts](#)
[01.D.06 Protection of Confidential Information](#)
[02.A.21 Nepotism](#)
[02.A.34 Types of Staff Employment](#)
[02.A.39 Political Aid and Legislative Influence](#)
[02.D.07 Expert Witness Services](#)
[03.A.05 Contract Administration](#)
[09.A.01 Governmental Relations Communications and Appearances](#)

Other Agency Guides:

[State of Texas Procurement and Contract Management Guide](#)
[Texas Ethics Commission Guide to Ethics Laws for State Officers and Employees](#)

**UNIVERSITY OF HOUSTON SYSTEM
ADMINISTRATIVE MEMORANDUM**

SECTION: Human Resources

NUMBER: 02.A.21

AREA: General

SUBJECT: Nepotism

1. PURPOSE

This document sets forth the University of Houston System’s policy on nepotism, and requires compliance with [State of Texas statutes](#), Board of Regents Policy [57.01.4](#), and regulations regarding unfair employment practices due to nepotism. This administrative memorandum applies to all positions, full and part-time, regular and temporary, in all university programs, regardless of funding source.

2. POLICY

- 2.1. Members of the Board of Regents shall not appoint, confirm the appointment of, or vote for the appointment or confirmation of their relative or another Board member’s relative to a position with the System unless the individual was continuously employed in the position for at least 30 days immediately before the appointment of the Board member to whom the individual is related. If this exception applies, the Board member to whom the individual is related may not participate in any deliberation or voting on the appointment, reappointment, confirmation, employment, reemployment, change in status, compensation, or dismissal of the individual if that action applies only to the individual.
- 2.2. System employees shall not hire, appoint, reappoint, promote, or supervise their relative and shall not recommend, approve, or otherwise act with regard to the hiring, appointment, reappointment, salary, promotion, or supervision of their relative. Relatives shall not be employed in the supervisory-subordinate relationship even if it results from marriage after the employment relationship was formed.
- 2.3. The provisions of this policy apply to all System programs, regardless of funding source.

3. DEFINITIONS

- 3.1. Nepotism: Favoritism in employment shown to a relative.
- 3.2. Relative: For this administrative memorandum, the term “relative” is defined as anyone related to the Board member or employee within the third degree of consanguinity (i.e., parent, grandparent, great grandparent, brother, sister, half brothers and sisters, child, grandchild, great grandchild, aunt, uncle, niece, and nephew) and within the second degree of

**UNIVERSITY OF HOUSTON SYSTEM
ADMINISTRATIVE MEMORANDUM**

SECTION: General Administration

NUMBER: 01.G.03

AREA: Research

SUBJECT: Financial Conflict of Interest in Research

1. PURPOSE

The University of Houston System (“System”) is committed to maintaining a Research environment that adheres to the highest ethical standards for Research. This commitment includes compliance with regulatory requirements set forth by the Public Health Service (PHS) agencies (including the National Institutes of Health (NIH)), the National Science Foundation (NSF), the Department of Energy (DOE), the National Aeronautics and Space Administration (NASA), and other regulatory bodies. It is the responsibility of the System to promote objectivity in Research through the establishment of a conflict-of-interest policy for both individual researchers as well as the System as a whole.

The purpose of this policy is to protect the credibility and integrity of System researchers and staff, as well as the universities and agencies themselves, so the public trust and confidence in their Research activities are maintained.

2. POLICY

- 2.1. Individuals have a responsibility to identify and manage, reduce, or eliminate Financial Conflicts of Interest that may arise due to their role as Research Investigators. Therefore, the System requires all individuals meeting the definition of Investigator, as defined in this policy, to disclose certain financial interests related to their Institutional Responsibilities.
- 2.2. All Significant Financial Interests held by Investigators and their spouse and dependent children, as well as certain travel paid by a third party and certain procurement activities, must be disclosed under the procedures described in this policy.
- 2.3. Universities within the System may establish additional disclosure guidelines, consistent with this policy.

3. DEFINITIONS

- 3.1. Designated Official (DO): The individual at each University responsible for the solicitation and review of disclosures of Significant Financial Interests from each Investigator who is participating in or is planning on participating in Research.
- 3.2. Entity: Any domestic or foreign, public or private, organization (excluding a federal agency).

- 3.3. Financial Conflict of Interest (FCOI): A Significant Financial Interest that could directly and significantly affect the design, conduct, or reporting of Research. Similarly, a Significant Financial Interest that would reasonably appear to be affected by the Research, or that is in an Entity whose financial interests would reasonably appear to be affected by the Research.
- 3.4. Institutional Responsibilities: Investigators' professional responsibilities on behalf of the University, including but not limited to, activities such as Research, Research consultation, teaching, professional practice, institutional committee memberships, and service on institutional panels. All expectations, duties and responsibilities referred to in the University Faculty Handbook are considered Institutional Responsibilities.
- 3.5. Investigator: The project director or principal Investigator, and any other persons, regardless of title or position, who are responsible for the design, conduct, or reporting of Research or educational activities funded or proposed for funding. This may include, but is not limited to, faculty, staff, students, adjunct faculty, or sub- recipients (collaborators, consultants, contractors, or subcontractors). With respect to Research funded by the DOE, this also includes any person who participates in the purpose, design, conduct, or reporting of the project.
In addition, any Research team member who indicates a financial interest related to the submission of a human or animal Research protocol will be asked to complete a certification.
- 3.6. Management Plan: A written agreement that may impose conditions and prescribe actions necessary to manage an FCOI, to ensure that the design, conduct, or reporting of the Research is free from bias or the appearance of bias, including an action reducing or eliminating the FCOI.
- 3.7. Research: A systematic investigation, study, or experiment designed to develop or contribute to generalizable knowledge.
- 3.8. Significant Financial Interest (SFI): Anything of monetary value, whether the value is readily ascertainable, that 1) is related to the Investigator's Institutional Responsibilities; and 2) belongs to the Investigator or the Investigator's spouse or dependent children. This includes:
- Remuneration in excess of \$5,000 from a publicly-traded Entity during the preceding 12 months. For purposes of this definition, remuneration includes salary and any payment for services not otherwise identified as salary (e.g., consulting fees, honoraria, paid authorship);
 - Equity interest (stock, stock options, private equity or other ownership interest) in a publicly traded Entity valued in excess of \$5,000 at the time of certification;
 - Any combination of the above two items (equity and income) that exceeds \$5,000 during the preceding 12 months;
 - Venture or other capital financing;
 - Any amount of equity (stock, stock options, or other ownership interest) in a non-publicly traded Entity, including a start-up company;
 - Remuneration that exceeds \$5,000 from a non-publicly traded Entity in the past 12 months; or
 - Intellectual property rights and interests (e.g. patents and copyrights), upon receipt of such income related to such rights and interests, if in excess of \$5,000 paid by any source other than the Investigator's current institution.

Significant Financial Interest does NOT include:

- Salary, royalties or other remuneration paid by the institution to the Investigator, if the Investigator is currently employed or otherwise appointed by the institution;
- Income from seminars, lectures, or teaching engagements sponsored by a federal, state or local government agency within the United States¹, U.S. institution of higher education as defined at [20 U.S.C. § 1001\(a\)](#), U.S. academic teaching hospital, U.S. medical center, or U.S. Research institute that is affiliated with a U.S. institution of higher education;
- Income from investment vehicles, such as mutual funds and retirement accounts, as long as the Investigator does not directly control the investment decisions made in these vehicles;
- Income from service on advisory committees or review panels for a federal, state or local government agency within the United States¹, U.S. institution of higher education as defined at [20 U.S.C. § 1001\(a\)](#), U.S. academic teaching hospital, U.S. medical center, or U.S. Research institute that is affiliated with a U.S. institution of higher education; or
- Intellectual property rights assigned to the institution and agreements to share in royalties related to such rights.

4. PROCEDURE

4.1. All Investigators must certify their knowledge of and compliance with this policy by completing a Conflict of Interest Certification at least annually. A current Conflict of Interest Certification must be on file prior to the submission of a new proposal. In the event an Investigator is added after the time of application for an award, the Investigator must make such disclosures prior to participating in the project. Certifications and associated disclosures must also be actively updated or confirmed to be accurate:

- Prior to expenditure of any funds for a new award;
- If unrelated to proposals for funding, at the time of submission of human or animal protocols if financial relationships related to the Research exist; and/or
- Within 30 days of discovering or acquiring (e.g., through purchase, marriage, or inheritance) a new SFI.

4.2. A disclosure MUST include:

- The Investigator's current or pending relationship with the outside enterprise or Entity in which an SFI exists,
- The relationship of the Research (or NSF-funded educational activity) to the enterprise or Entity,
- The means by which the Investigator proposes to address actual or potential conflicts of interest that arise from the Investigator's Institutional Responsibilities and financial interests (or spouse's or dependent children's financial interests), and
- The dollar amount of the financial interest in specified ranges.

¹ Investigators, including subrecipient Investigators, must disclose all financial interests received from a foreign institution of higher education or the government of another country (which includes local, provincial, or equivalent governments of another country) as detailed here: <https://grants.nih.gov/grants/guide/notice-files/NOT-OD-18-160.html>.

- 4.3. Disclosures of Foreign Significant Financial Interest: Investigators, including subrecipients, must disclose all foreign SFIs (which includes income from seminars, lectures, or teaching engagements, income from service on advisory committees or review panels, and reimbursed or sponsored travel) received from any foreign Entity, including foreign institutions of higher education or foreign governments (which includes local, provincial, or equivalent governments of another country) when such interests meets the threshold for disclosure (e.g., income in excess of \$5,000).
- 4.4. Travel:
With some exceptions, federally funded Investigators must disclose reimbursed or sponsored travel paid for by a third-party Entity, including non-profit organizations, as well as foreign entities, foreign government, and foreign institutions of higher education. Disclosure is not required for travel sponsored by or reimbursed by a U.S. government agency, a U.S. institution of higher education or a Research institute affiliated with such, a U.S. medical center, or a U.S. academic teaching hospital. Travel disclosures must include, at a minimum: the purpose of the trip, the identity of the sponsor/organizer, the destination, and the duration.
- 4.5. Procurement:
In accordance with [Texas Government Code Section 2261.252](#) and [SAM 02.A.08](#), all institutional employees who are involved in procurement or contract management must disclose any potential conflict of interest with a private vendor. For example, a potential conflict of interest exists if the employee plans to purchase, or recommend or approve the purchase of, goods or services for the University from an Entity with which they or a family member have a direct or indirect financial or other interest.

5. **RESPONSIBILITIES**

5.1. Institutional Responsibilities

The DO is responsible for the solicitation and review of disclosures of SFIs from each Investigator at the institution. The DO may delegate this solicitation/review responsibility to another individual or a committee.

The DO or delegate will determine whether an Investigator's submitted SFI could directly and significantly affect the Research or is in an Entity whose financial interest could be affected by the Research. If it is determined that either of these conditions is valid, an FCOI exists. In the case of an FCOI, and prior to the expenditure of any Research funds, the DO or delegate will work with the Investigator, Chair, and Dean to develop a Management Plan to manage or eliminate the conflict, and to ensure to the extent possible that the Research is free of bias or the appearance of bias.

Additional Institutional Responsibilities:

- Maintenance of an up-to-date, written, enforced System Research FCOI policy and if applicable, University Research FCOI policy, made available through the publicly

accessible website.

- Notification to Investigators of new regulations and revised institutional policy/Investigator responsibilities.
- Reporting all required information regarding FCOI to federal sponsors.
- Responding to public information requests for information concerning SFIs.
- Maintenance/retention of all required FCOI records per funding agency requirements.

5.2. Investigator

- Being familiar with and abiding by federal regulations, the System Research FCOI policy, and if applicable, the University Research FCOI Policy.
- Ensuring that FCOI training is completed prior to utilizing Research funds and at least once every four years.
- Filing an FCOI Certification and disclosure (if appropriate) to the institution annually and updating it (if appropriate) within the timelines required by this policy.
- Confirming agreement to and complying with any Management Plan issued by the institution; retaining documentation that demonstrates compliance with the Management Plan, such as but not limited to: notices to journal editors or conference audiences, consent forms from human subjects Research, and notices to laboratory personnel.

5.3. College Deans, Department Chairs, and Center Directors

- Ensuring that Investigators submit and update annual certifications and disclosures.
- Ensuring that the assigned Management Plan monitor adheres to the monitor reporting timeline as determined by the DO or delegate.
As acknowledgers of the Investigator's disclosures and signatories to the Management Plan, College Deans, Department Chairs, and Center Directors are encouraged to provide input with regard to additional factual information, concerns, or any conditions or restrictions that might be imposed by the institution to manage, reduce, or eliminate such conflict of interest.
- Ensuring that required Management Plans are carried out and monitored until the completion of the Research.

6. AWARDEES AND SUBRECIPIENTS

When the University is the primary awardee of a collaborative PHS, NSF, NASA, or DOE funded project, it must assure that the financial interests of all subrecipients are reviewed and eliminated or managed properly. During the proposal stage and during the negotiation of a subaward, all subrecipients/potential subrecipients of PHS, NSF, NASA, or DOE funding will be required to certify the following in writing via a Letter of Compliance:

- The subrecipient institution has a policy in place to review and manage SFIs that meets regulatory requirements. For DOE awards, the subrecipient institution shall make such policy available via a publicly accessible website or, if the subrecipient does not have a public website, it shall make its written policy available to any requestor within five business days of a request.
- The subrecipient's policy applies to the sub-awarded portion of the Research project, and
- The subrecipient agrees that the identification and Management Plan of any FCOI identified will be submitted to the awardee University for required reporting purposes.

If the sub-awardee institution does not have a compliant FCOI program in place, the agreement must indicate that the subrecipient will follow the University FCOI policy, including the pre-award

Interim Vice Chancellor for Research

/Renu Khator/

Chancellor

Date: January 22, 2024

12. REFERENCES AND RELATED STATUTES, POLICIES, OR REQUIREMENTS

[Texas Government Code § 572.051](#) – Standards of Conduct and Conflict of Interest Provisions

[Texas Government Code § 2261.252](#) – Disclosure of Potential Conflicts of Interest; Certain Contracts Prohibited

[SAM 01.G.01](#) – Sponsored Research Activities

[SAM 02.A.08](#) – Outside Activities/Interests Disclosures [SAM 02.A.29](#)

– Ethical Conduct of Employees

[Department of Energy](#) (FAL 2022-02)

Department of Health and Human Services Code of Federal Regulations:

[42 CFR Part 50; 45 CFR Part 94](#) - Responsibility of Applicants for Promoting Objectivity in Research for which Public Health Service Funding is Sought and Responsible Prospective Contractors

[21 CFR Part 54](#) - Financial Disclosure By Clinical Investigators [National](#)

[Institutes of Health](#) (NIHGPS FY2023: 4.1.10)

[National Science Foundation Proposal & Award Policies & Procedures Guide](#) (NSF 23-1: Chapter IX-Recipient Standards)

[National Aeronautics and Space Administration](#) (GIC 23-07)

UNIVERSITY OF HOUSTON RESEARCH
POLICY ON CONFLICT OF INTEREST IN RESEARCH

"The cornerstone for managing conflicts of interest is transparency, and that begins with the Investigator's disclosure of Significant Financial Interests to the Institution." (CITI)

I. INTRODUCTION

The University of Houston is committed to maintaining a research environment that promotes attention to the highest ethical standards for research. This commitment includes compliance with regulatory requirements set forth by the Public Health Service (PHS),^{1,2} the National Science Foundation (NSF), and other regulatory and ethical bodies. It is the responsibility of the University to promote objectivity in research through the establishment of a Conflict of Interest Policy.

A conflict of interest might take various forms, but includes any circumstance where personal, professional, financial, or other private interests of a person or institution compromise or have the potential to compromise the exercise of professional judgment or obligations, or may be perceived as doing so. It is important to note that a conflict of interest depends on the situation and how it can be perceived, not necessarily on the character or the actions of the individual.

Conflicts of interest can arise from the fact that a mission of the University is to promote public good by fostering the transfer of knowledge gained through University research and scholarship to the private sector. Two important means of accomplishing this mission include consulting and the commercialization of technologies derived from University research. It is appropriate that individuals be rewarded for their participation in these activities through consulting fees, sharing in royalties arising from the commercialization of their work, ownership and/or other associations with start-up companies. It is wrong, however, for an individual's actions or decisions, made in the course of his or her University activities, to be guided by considerations of personal financial gain. Such behavior calls into question the professional objectivity and ethics of the individual and reflects negatively on both the Institution and the external sponsor of the research activity. Members of the academic community should conduct their affairs so as to avoid or minimize conflicts of interest, and must respond appropriately when apparent conflicts of interest arise.

¹ **Agencies within the Public Health Service:** Administration for Children and Families (ACF), Administration for Community Living/Administration on Aging, Agency for Health Care Research & Quality (AHRQ), Agency for Toxic Substances and Disease Registry (ATSDR), Centers for Disease Control & Prevention (CDC), Food and Drug Administration (FDA), Health Resources and Services Administration (HRSA), Indian Health Service (HIS), National Institutes of Health (NIH), Substance Abuse and Mental Health Services Administration (SAMHSA), Office of Global Affairs, Office of the Assistant Secretary for Health (OASH), Office of the Assistant Secretary for Preparedness and Response (ASPR)

² Many non-Public Health Service Agencies are now requiring compliance with Public Health Service Conflict of Interest Standards and Thresholds; for example: Alliance for Lupus Research (ALS), American Asthma Foundation (AAF), American Cancer Society (ACS), American Heart Association (AHA), American Lung Association (ALA), Arthritis Foundation (AF), Juvenile Diabetes Research Foundation International (JDRF), Lupus Foundation of America (LFA), Susan G. Komen Breast Cancer Foundation. *These are updated continuously.*

The purpose of this policy is to educate individuals about situations that generate research-related financial conflicts of interest, and to provide means for faculty, staff, students, and the University to identify, manage, reduce, and/or eliminate actual or potential conflicts of interest. Every member of the academic community has an obligation to become familiar with, and abide by, the provisions of this policy.

II. KEY DEFINITIONS

- **Investigator** – This policy applies to all individuals who meet the definition of Investigator. Specifically:

The project director or principal Investigator, and any other persons, regardless of title or position, who are responsible for the design, conduct, or reporting of research or educational activities funded³ or proposed for funding. In addition, any research team member who indicates a financial interest related to the submission of a human or animal research protocol will be asked to complete a certification.

This policy, therefore, can apply to collaborators, consultants, post-doctoral fellows, graduate students, and others who meet the threshold for responsibility.

At a minimum, all individuals listed as an investigator or key personnel on a research project must file a certification. It is the responsibility of the Principal Investigator (PI) to determine if other research team members meet this threshold based on their role in the research. See Compliance Guidance [here](#).

- **Research** - An activity is considered research if it meets the definition of research provided by the agency funding the project, or any agencies that oversee the project.⁴ If unfunded or not otherwise defined, the following definitions apply:
 - A systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge. Activities which meet this definition constitute research for purposes of this policy, whether or not they are conducted or supported under a program which is considered research for other purposes.⁵
 - Systematic study directed toward fuller scientific knowledge or understanding of the subject studied. Research is classified as either basic or applied according to the objectives of the sponsoring agency⁶
- **Certification/Disclosure Process** – All individuals who meet the definition of Investigator as defined above must provide certification of their knowledge of and compliance with this policy on an annual basis. The certification process involves either a certification that no significant financial interests exist, or the disclosure of existing significant financial interests to the Institution. In addition to the annual requirement, the acquisition or discovery of new

³ For the purpose of this policy, any *grants* to a college or department with the intent of funding a research project are treated as a research award.

⁴ For example, the U.S. Food and Drug Administration (FDA), in cases of clinical investigations under 21 CFR 46.102 (c)

⁵ 45 CFR 46.102(d): For example, some demonstration and service programs may include research activities.

⁶ <https://www.nsf.gov/statistics/fedfunds/glossary/def.htm>

financial interests requires disclosure within 30 days. All disclosures are reviewed by the University of Houston's Conflict of Interest Committee (COIC).

- **Significant Financial Interest (SFI)** – Anything of monetary value, whether the value is readily ascertainable, that 1) is related to the Investigator's professional responsibilities on behalf of the Institution; and 2) belongs to the Investigator or the Investigator's spouse or dependent children. Additional details regarding what constitutes a Significant Financial Interest are specified in Section III.
- **Financial Conflict of Interest (FCOI)** – A significant financial interest that could directly and significantly affect the design, conduct, or reporting of research.⁷ Similarly, if a significant financial interest could reasonably appear to be affected by the research,⁸ or the interest is in entities whose financial interests would reasonably appear to be affected by the research,^{3,9} review and elimination or management of the conflict is required.
- **Institutional Responsibilities** – Investigators' professional responsibilities on behalf of the Institution including, but not limited to, activities such as research, research consultation, teaching, professional practice, Institutional committee memberships, and service on panels such as Institutional Review Boards and Data Safety Monitoring Boards. All duties referred to in the University of Houston Faculty Handbook are considered Institutional Responsibilities.
- **Designated Official** – the individual at the Institution responsible for the solicitation and review of disclosures of significant financial interests from each Investigator who is participating in, or is planning on participating in, research. The Designated Official for the University of Houston is the Vice Chancellor/Vice President for Research and Technology Transfer.

III. CERTIFICATION OF COMPLIANCE

All individuals meeting the definition of Investigator as defined in this policy must certify their knowledge of and compliance with this policy by completing a Conflict of Interest Certification at least annually. Certifications and associated disclosures must also be actively updated:

- At the time of submission for new funding
- If unrelated to proposals for funding, at the time of submission of human or animal protocols if financial relationships related to the research exist
- Within 30 days of discovering or acquiring (e.g., through purchase, marriage, or inheritance) a new significant financial interest.

All significant financial interests held by investigators and their immediate family members¹⁰ must be disclosed. A **Significant Financial Interest (SFI)** is a financial interest that falls into

⁷ PHS definition

⁸ Also applies to NSF-funded educational activities [NSF Grant Policy Manual, Chapter V, 510]

⁹ NSF definition, also applies to NSF-funded educational activities

¹⁰ Spouse and dependent children

one of the following categories and is reasonably related to any of an investigator's institutional duties:

- Remuneration in excess of \$5,000 from a publicly-traded entity¹¹ during the preceding 12 months. For purposes of this definition, remuneration includes salary and any payment for services not otherwise identified as salary (e.g., consulting fees, honoraria, paid authorship);
- Equity interest (stock, stock options, or other ownership interest) in a publicly traded company valued in excess of \$5,000 at the time of certification;
- Any combination of the above two items (equity and income) that exceeds \$5,000 during the preceding 12 months;
- Any amount of equity (stock, stock options, or other ownership interest) in a non-publicly traded entity, including a start-up company;
- Remuneration that exceeds \$5,000 from a non-publicly traded entity in the past 12 months, or
- Intellectual property rights and interests (e.g. patents and copyrights), upon receipt of such income related to such rights and interests Income related to intellectual property rights in excess of \$5,000 paid by any source other than the Investigator's current Institution¹².

All disclosed significant financial interests that have a potential relationship to the discloser's engagement in research on behalf of the University of Houston are reviewed by the Conflict of Interest Committee (COIC) to determine if these interests conflict, or appear to conflict, with the research.

The following DO NOT require disclosure:

- Salary royalties, or other remuneration paid by the Institution to the Investigator if the Investigator is currently employed or otherwise appointed by the Institution,
- Income from seminars, lectures, or teaching engagements sponsored by a federal, state or local government agency, or an Institution of higher education within the United States¹³ as defined at 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an Institution of higher education,
- Income from investment vehicles, such as mutual funds and retirement accounts, as long as the Investigator does not directly control the investment decisions made in these vehicles;
- Income from service on advisory committees or review panels for a federal, state or local government agency, or Institution of higher education within the United States¹⁴ as defined at

¹¹ A company whose stock is available for purchase by the general public

¹² Unlicensed intellectual property that does not generate income is also excluded from the definition of Significant Financial Interest. Nonetheless, such interests have the potential to become significant and generate income, at which point they would become subject to the regulation

¹³ Investigators, including subrecipient Investigators, must disclose all financial interests received from a foreign Institution of higher education or the government of another country (which includes local, provincial, or equivalent governments of another country as detailed here: <https://grants.nih.gov/grants/guide/notice-files/NOT-OD-18-160.html>)

¹⁴ Investigators, including subrecipient Investigators, must disclose all financial interests received from a foreign Institution of higher education or the government of another country (which includes local, provincial, or equivalent governments of another country as detailed here: <https://grants.nih.gov/grants/guide/notice-files/NOT-OD-18-160.html>)

20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an Institution of higher education, or

- Intellectual Property Rights assigned to the Institution and agreements to share in royalties related to such rights

A disclosure MUST include:

- The investigator's current or pending relationship with the outside enterprise or entity in which a significant financial interest exists;
- The relationship of the research¹⁵ to the enterprise or entity,
- The means by which the investigator proposes to address actual or potential conflicts of interest that arise from his/her (or immediate family members) dual University and enterprise or entity roles, and
- The dollar amount of the financial interest in specified ranges.

Common sense must prevail in the interpretation of these provisions. That is, if a reasonable, disinterested person would question the relationship, it should be disclosed and approval sought for the proposed arrangement.

All investigator certifications and associated disclosures are submitted through and maintained within the university's Integrated Compliance Online Network (**ICON**).

Certifications *with disclosures meeting threshold* require additional online acknowledgment as follows:

Primary Appointment	Required Signatory if Significant Financial Interest is Disclosed
Tenure track academic faculty appointments	Department Chair
Non-tenure track research faculty appointments	Department Chair
Staff & students employed by an academic department or college	Department Chair
Staff & students employed by a Division of Research Center	Department Chair
Tenure track academic faculty appointments affiliated with a Division of Research Center	Department Chair
Non-tenure track research faculty appointments with a Division of Research Center	Center Director
Department Chair	College Dean
Division of Research Center Directors	Department Chair
College Dean	Provost
Provost, VP for Research	President

¹⁵ or NSF-funded educational activity

	Department Chair (if applicable)
President	Board of Regents
Exceptions: <ul style="list-style-type: none"> - College of Social Work - College of Architecture - College of Law - College of Hotel/Restaurant Mgmt - College of Optometry - College of Nursing - Academic Affairs (without department/college affiliation) - College of Business (Small Business Development Center only) 	Assoc. Dean for Research Assoc. Dean for Research Assoc. Dean for Research Assoc. Dean for Research Assoc. Dean for Research Assoc. Dean Provost Sr. Assoc. Dean for Faculty

Those faculty appointments with dual assignments require review by their primary appointment and are the responsibility of that college/department. Updated for clarification re: responsibility for review/management for faculty with dual appointment (10/2018)

Those required to acknowledge the Disclosure are encouraged to provide input with regard to additional factual information, concerns, or any conditions or restrictions that might be imposed by the Institution to manage, reduce, or eliminate such conflict of interest. This information will be made available to the COIC for consideration. The Division of Research reserves the discretion to add additional acknowledgers as deemed appropriate.

TRAVEL

With some exceptions, PHS-funded investigators must disclose reimbursed or sponsored travel paid for by a third-party entity, including non-profit organizations. Disclosure is *not* required for travel sponsored by or reimbursed by a government agency, a U.S. Institution of higher education or a research institute affiliated with such, a U.S. medical center, or a U.S. academic teaching hospital. When a travel request submitted through Concur indicates that an employee's travel is sponsored or reimbursed by a third party and the traveler is listed on a PHS award, the Conflict of Interest (COI) office in the Division of Research will receive an automated notification to review the Travel Request. *This does not slow down the approval process as the COI office is not involved in approving the Travel Request.* The COI Office will notify the traveler if further disclosure of the travel and reimbursement information is required.

Travel disclosures must include, at a minimum: the purpose of the trip, the identity of the sponsor/organizer, the destination, and the duration. The COIC will determine if further information is required, including a determination or disclosure of monetary value, in order to determine whether the travel constitutes an FCOI with PHS-funded research.

PROCUREMENT

In accordance with Texas Government Code 2261.252 and University policy, all institutional employees who are involved in procurement or contract management must disclose if they plan to purchase, or recommend or approve the purchase of, goods or services for the University of Houston from an entity with which they or a family member have a direct or indirect financial or other interest.¹⁶ In cases where a financial interest disclosed to the COIC may lead to the procurement of goods or services for the university (including university research), the University of Houston Division of Administration and Finance will be notified and the disclosure will be forwarded for their review; this review may result in additional management requirements. For questions regarding Texas Government Code 2261.252, please contact the Division of Administration and Finance.

IV. **DISCLOSURE REVIEW PROCESS**

All disclosures indicating a significant financial interest will be reviewed by the University of Houston's Conflict of Interest Committee, who shall advise the Vice Chancellor/Vice President for Research and Technology Transfer. This review will take into consideration any comments or concerns provided by the signatory.

An actual or potential conflict of interest exists when the Committee reasonably determines that the significant financial interest could directly and significantly affect the design, conduct, or reporting of research¹⁷ conducted on behalf of the University of Houston. Additional information may be required by the Committee to make this determination.

The policy does not apply to **Phase I** Small Business Innovation Research (SBIR) and Small Business Technology Transfer (STTR) applications/awards. However as the policy does apply to **Phase II** SBIR/STTR applications and awards, it is highly recommended that such interests are discussed with the COI office as a best practice, to ensure minimal delays in progressing to Phase II awards and beyond.

MANAGEMENT PLANS

If it is determined that a conflict exists, a final written agreement to manage the conflict is established by the COIC¹⁸. The investigator is required to accept the plan within the ICON system. A specific individual¹⁹ is assigned to monitor adherence to this plan and report to the COIC on a routine basis until the conflict is established within ICON to no longer exist.

Examples of conditions or restrictions that might be imposed to manage, reduce, or eliminate actual or potential conflicts of interest can include, but are not limited to:

- Public disclosure of the conflict in publications and presentations

¹⁶ Family members include the following relatives of the employee: child, parent, spouse, sister, brother, grandchild, grandparent, mother-in-law, father-in-law, son-in-law, daughter-in-law, stepson, stepdaughter, stepmother, stepfather, brother-in-law, sister-in-law, spouse's grandparent, spouse's grandchild, grandchild's spouse, or the spouse of a grandparent.

¹⁷ or NSF-funded educational activities

¹⁸ As delegated by the Institutional Official

¹⁹ The assigned monitor is, by default, the signatory on the disclosure unless otherwise delegated.

- Disclosure to human subjects participating in the research²⁰
- Disclosure to other research team members
- Appointment of an independent third party to monitor the research
- Modification of the research plan, with approval by the sponsor
- Change of personnel or personnel roles so that the individual in conflict does not participate in the part of the research that could be affected
- Reducing or eliminating the financial interest (e.g., sale of an equity interest)
- Severance of relationships that create financial conflicts

The institution may also request active monitoring of relationships that are determined not to represent direct and significant conflicts of interest if there is a reasonable potential for a conflict to develop in the future, based on the direction of the research and/or the relationship with the financial interest.

Departments, Colleges, and Center Directors are responsible for ensuring that required management plans are carried out and monitored until the completion of the research. All parties responsible for ensuring compliance with the management plan, including the monitor, will receive notification of the plan as follows:

Position	Parties Copied on Management Plan (in addition to the Signatory, plan monitor, and VP for Research/Tech Transfer)
Tenure track academic faculty appointments	College Dean
Non-tenure track research faculty appointments	College Dean
Staff & students employed by an academic department or college	College Dean
Staff & students employed by a Division of Research (DOR) Center	Center Director
Tenure track academic faculty appointments affiliated with a DOR Center	College Dean
Non-tenure track research faculty appointments with a DOR Center	N/A
Department Chair	Provost

²⁰ The U.S. Food and Drug Administration (FDA), in 21 CFR 54, sets forth additional regulatory requirements for financial disclosures by clinical investigators. If a University of Houston investigator holds the IND or IDE for FDA-regulated research, they are considered sponsor-investigators and are responsible for collecting and maintaining financial disclosures and related management plans. Please contact the COIC at COI@Central.uh.edu if you are a sponsor-investigator.

Division of Research Center Directors	N/A
College Dean	N/A
Provost, VP for Research	College Dean (if applicable)
President	N/A
Exceptions: - College of Social Work - College of Architecture - College of Law - College of Hotel/Restaurant Mgmt - College of Optometry - College of Nursing - Academic Affairs (without department/college affiliation) - College of Business (Small Business Development Center only)	College Dean College Dean College Dean College Dean College Dean College Dean College Dean

Should an investigator wish to appeal a decision made by the COIC, he or she may present the appeal in writing to the Committee through the following email address: coi@central.uh.edu. The Institutional Official will be made aware of all appeals.

V. TRAINING

All individuals meeting the definition of Investigator in Section II must take an Institutionally-recognized FCOI training course before utilizing research funds and at least once every four years²¹. The University of Houston recognizes the FCOI modules 1 and 2 provided through the Collaborative Institutional Training Initiative (CITI), of which UH is a member. Additional training may be required more often under certain circumstances (e.g., failure to disclose significant financial interests, noncompliance with approved management plan).

VI. RESPONSIBILITIES

A. Institution

1. Designated Official (DO)

The University of Houston Designated Official, for purposes of this policy, is the Vice Chancellor/Vice President for Research and Technology Transfer. The Designated Official is responsible for the solicitation and review of disclosures of significant financial interests from each Investigator at the Institution. The DO has delegated the solicitation/review responsibility to the University of Houston's Conflict of Interest Committee (COIC). The DO is provided all plans for the management of financial conflicts of interest, and works closely with the Committee to provide input as necessary.

2. The Conflict of Interest Committee (COIC)

²¹ Once the initial training has been completed, CITI offers a refresher course for every subsequent 4 years.

The University of Houston's Conflict of Interest Committee reports to the Vice Chancellor/Vice President for Research and Technology Transfer. The COIC is comprised of a minimum of 5 COIC members, which includes a Chairperson. As necessary, ex-officio members²² (including regular ex-officio representation from UH General Counsel) and a non-affiliated member²³ may be included. Members will be chosen to best represent the expertise and interests of the research being conducted at the University of Houston. COIC members will meet on a monthly basis as needed to review the disclosures and annual certifications that have been submitted through the ICON system to the Division of Research.

The COIC will determine²⁴ whether an Investigator's submitted SFI could directly and significantly affect the research or is in an entity whose financial interest could be affected by the research. If it is determined that either of these conditions is valid, a Financial Conflict of Interest exists. In the case of a Financial Conflict of Interest and prior to the expenditure of any research funds, the COIC will work with the Investigator, Chair, Dean, and DO to develop a plan to manage or eliminate the conflict, and to ensure to the extent possible that the research is free of bias.

COIC members will serve for a term of three years, at which time membership services and representation of the University's research interests will be reviewed. Members can serve consecutive terms with the concurrence of the DO. The COIC Chair and/or DO reserves the right to replace any committee member for non-performance or reasons related to ethical concerns.

3. Additional Division of Research (DOR) Responsibilities

- Maintenance of an up-to-date, written, enforced policy on research FCOI, made available through the publicly accessible University of Houston Division of Research website.
- Notification to Investigators of new regulations and revised Institutional policy/Investigator responsibilities.
- Reporting all required information regarding Financial Conflicts of Interest to federal sponsors.
- Making information regarding FCOIs of senior/key personnel on PHS funded projects publicly available.
- Maintenance/retention of all required FCOI records per funding agency requirements.

B. Investigator

- Being familiar with and abiding by federal regulations and UH Policy regarding FCOI.
- Ensuring that FCOI training is complete prior to utilizing research funds and at least once every four years, as outlined in section V.

²² Ex-Officio (non-voting) member: An ex-officio member will be chosen to provide additional information and assistance relevant to the COIC dealings, but will not be a voting member.

²³ Non-Affiliated Member: A non-affiliated member with no direct family or University ties.

²⁴ Within 60 days for PHS-funded research.

- Filing an FCOI Certification and disclosure (if appropriate) to the Institution annually and within 30 days of discovering or acquiring a new significant financial interest.
- Confirming agreement to and complying with any management plan issued by the Institution; retaining documentation that demonstrates compliance with the management plan, such as but not limited to: notices to journal editors or conference audiences, consent forms from human subjects research, and notices to laboratory personnel.

C. Colleges, Departments, and Center Directors

- Colleges, Departments, and Center Directors are responsible for ensuring that investigators submit annual certifications and disclosures.
- Ensuring that the assigned plan monitor adheres to the monitor reporting timeline as determined by the COIC.
- As indicated in Section III, signatories are encouraged to provide input with regard to additional factual information, concerns, or any conditions or restrictions that might be imposed by the Institution to manage, reduce, or eliminate such conflict of interest. Acknowledgers will also be actively involved in the final monitoring of plans to manage or eliminate conflicts.
- **Departments, Colleges, and Center Directors are responsible for ensuring that required management plans are carried out and monitored until the completion of the research.**

VII. AWARDEES AND SUBRECIPIENTS

When the University of Houston is the primary awardee of a collaborative PHS- or NSF-funded project, it must assure that the financial interests of all subrecipients are reviewed and eliminated or managed properly. During the proposal stage and during the negotiation of a subaward, all subrecipients/potential subrecipients of PHS funding will be required to certify the following in writing via a Letter of Compliance:

- The subrecipient Institution has a policy in place to review and manage Significant Financial Conflicts of Interest that meets regulatory requirements.
- The subrecipient's policy applies to the subawarded portion of the research project, and
- The subrecipient must agree that the identification of and management plan of any FCOI identified will be submitted to the awardee Institution for required reporting purposes.

If the subawardee Institution does not have a compliant FCOI program in place, the agreement must indicate that the subrecipient will follow UH FCOI policy, including the pre-award and annual submission of a Certification (and disclosure, if applicable) to the UH COIC **within 30 days of the submission of the proposal.**

VIII. REPORTING

The Division of Research is responsible for reporting Financial Conflicts of Interest to funding agencies, as applicable:

Public Health Service (PHS)-Funded Projects

Initial Report

- Prior to the expenditure of funds under a PHS-funded research project, the University of Houston must report any Investigator Significant Financial Interests that are determined by the COIC, or a subrecipient Institution, to constitute a Financial Conflict of Interest.

Interim Reports

- The Institution must submit an FCOI report within sixty (60) days after its determination that an FCOI exists for an Investigator who is newly participating in the project or for an existing Investigator who discloses a new Significant Financial Interest to the Institution during the period of award.
- A FCOI report is required in cases of noncompliance (when an Investigator does not disclose a previously existing Significant Financial Interest in a timely fashion or the Institution fails to review a previously existing Significant Financial Interest during an ongoing NIH-funded project).

Annual Reports

- For any Financial Conflict of Interest previously reported by the Institution, the Institution shall provide an annual FCOI report that addresses the status of the financial interest and any changes to the management plan. Annual FCOI reports must specify whether the Financial Conflict of Interest is still being managed or explain why the Financial Conflict of Interest no longer exists. Annual FCOI reports must be submitted to the NIH for the duration of the project period (including extensions with or without funds) at the same time the Institution is required to submit the annual progress report, but through an alternative mechanism.

National Science Foundation (NSF)-Funded Projects

The University of Houston must notify NSF's Office of the General Counsel if it determines that it is unable to manage a Conflict of Interest related to an NSF-funded project satisfactorily. If the University of Houston determines a financial conflict with NSF research to be unmanageable (i.e. imposing conditions or restrictions would be either ineffective or inequitable, and the potential negative impacts that may arise from a significant financial interest are outweighed by the interests of scientific progress, technology transfer, or the public health and welfare), the NSF Office of the General Counsel will be notified electronically. UH and awardees will cooperate with the OGC's review of the institutional conflict of interest policy, actions taken by the institution with respect to the unmanageable conflict, and NSF requests for confirmation that proposed actions have been accomplished.

Other Funding Agencies

The University of Houston will make other required FCOI reports based on applicable funding agency requirements.

IX. FCOI RECORD RETENTION

The Division of Research is responsible for the maintenance and retention of all financial disclosure documentation and of all actions taken to resolve conflicts of interest for at least three years beyond the date of submission of the final expenditures report of the grant to which they relate, or until the resolution of any funding agency action involving those records, whichever is longer. Additional retention might be required under 45 CFR 74.53(b) and 92.42 (b) for different situations.

X. NONCOMPLIANCE

Failure of any investigator to comply with this policy shall constitute grounds for disciplinary action. Disciplinary action is based upon a reasonable investigation of the noncompliance and is consistent with the severity of the violation. A range of examples includes, but is not limited to, the requirement for additional training/monitoring for minor violations up to the imposition of restrictions on an academic staff member's participation in sponsored research for severe or continuing violations.

Additional PHS Requirements

- If an investigator fails to disclose a SFI in a timely manner or if for any reason the Institution fails to review a SFI, the Institution must, within 60 days, determine whether the SFI is related to the research, and whether it rises to the level of a FCOI. If found to be an FCOI, a management plan, even if interim, must be implemented. A FCOI report must be made to PHS at this time.
- In addition, where it is discovered that an the University of Houston has failed to manage a FCOI or where a researcher has failed to comply with a management plan, the Institution must, within 120 days, complete a retrospective review of research to determine whether the research conducted during the period of noncompliance was biased in the design, conduct, or reporting of the research. If bias is identified, a mitigation report must be developed that outlines a plan of action to eliminate or mitigate the effect of the bias. The results of that determination and the mitigation report must be submitted to PHS.

XI. PUBLIC ACCESSIBILITY

The Institution is required to make its policy on Financial Conflict of Interest publicly accessible via its website. In addition, responses to public information requests for information concerning Significant Financial Interests must be disclosed within five business days in writing. Disclosures must meet the following criteria:

- The significant financial interest was disclosed and is still held by the senior/key personnel as related to the PHS-funded project,
- The Institution determines that the Significant Financial Interest is related to the PHS-funded research, and

- The Institution determines that the Significant Financial Interest is a Financial Conflict of Interest.

The information that must be disclosed includes the following:

- Investigator's name;
- Investigator's title and role with respect to the research project;
- Name of the entity in which the Significant Financial Interest is held;
- Nature of the Significant Financial Interest; and
- Approximate dollar value of the Significant Financial Interest (dollar ranges are permissible: \$0-\$4,999; \$5,000-\$9,999; \$10,000-\$19,999; amounts between \$20,000-\$100,000 by increments of \$20,000; amounts above \$100,000 in increments of \$50,000) or a statement that the interest is one for which the value cannot be readily determined through reference to public prices or other reasonable measures of fair market value.

Written Requests for information may be made through:

- UH's public-facing Conflict of Interest website:
<http://www.uh.edu/research/compliance/coi/contact-us/>
- Via email at coi@central.uh.edu.

XII. RELATED RESOURCES

Department of Health and Human Services Code of Federal Regulations:

42 CFR Part 50; 45 CFR Part 94

21 CFR Part 54

Conflict of Interest FAQs

National Science Foundation Award and Administration Guide. Chapter IV

University of Houston Manual of Administrative Policies and Procedures (MAPP 08.01.01)

University of Houston System Administrative Memorandum (SAM 01.G.01)

UH Division of Administration and Finance Travel Request

UH Faculty Handbook

Effective Date: August 24, 2012

Revisions: 07/2013

05/2014

12/2014

01/2016

04/2016

05/2018

07/2018

06.A.03 Standards of Conduct in Government-Sponsored Research:

Memo to: All UH-Downtown/PS Holders

UH-Downtown/PS 06.A.03

Issue No. 2

From: Dr. Loren J. Blanchard, President

Effective date: 11/30/21

Page 1 of 4

Subject: Standards of Conduct in Government-Sponsored Research

1. PURPOSE

This PS outlines the standards of procedure and conduct in Government-sponsored research adhered to by the University of Houston-Downtown (UHD). These standards are part of a joint statement of The Council of the American Association of University Professors and The American Council on Education. All University employees must abide by the procedures outlined herein to prevent conflicts of interest with outside parties, including government agencies.

2. DEFINITIONS

There are no definitions for this policy.

3. POLICY

3.1 Favoring of Outside Interests and Conflicts of Interest are covered more thoroughly in UH SAM 02.A.09, UHD PS 05.A.07, and UHD PS 06.A.09. When a University employee involved in government-sponsored work has a significant financial interest in, or a consulting arrangement with, a private business concern, actual or apparent conflicts of interest must be avoided between his government-sponsored University research obligations and his/her outside interests and other obligations. Situations in or from which conflicts of interest may arise are:

3.1.1 Undertaking or orientation of the employee's University research to serve the research or other needs of the private firm without disclosure of these activities to the University and to the sponsoring agency;

3.1.2 Purchase of major equipment, instruments, materials, or other items for University research from the private firm in which the employee has the interest without disclosure of such interest;

3.1.3 Use for personal gain or to benefit a private entity of Government-sponsored work products, results, materials, records, or information that are not made generally available (This would not necessarily preclude appropriate licensing arrangements for inventions, or consulting on the basis of Government-sponsored research results where there is significant additional work by the employee independent of the Government-sponsored research);

3.1.4 Use for personal interest or other unauthorized use of privileged information acquired in connection with the employee's Government-sponsored activities. Privileged information includes, but is not limited to, medical, personnel or security records of individuals; anticipated material requirements of price actions; possible new sites for government operations; and knowledge of forthcoming programs or selection of contractors/subcontractors in advance of official notice.

3.1.5 Negotiation or influence upon the negotiation of contracts relating to the employee's Government-sponsored research between the University and private organizations with which the employee has consulting or other significant influence.

3.1.6 Acceptance of gratuities or special favors from private organizations with which the University does or may conduct business in connection with a Government-sponsored research project, or extension of gratuities or special favors to employees of the sponsoring Government agency, under circumstances which might reasonably be interpreted as an attempt to influence the recipients in the conduct of their duties.

3.2 Distribution of Effort is covered more thoroughly in UHD PS 06.A.06 and UHD PS 06.A.07. There should be a clear understanding, by all concerned parties, of the amount of time and responsibilities for which an employee is accountable, when involved in Government-sponsored research. A demonstrable relationship between the effort or responsibility proposed in the research agreement and the actual extent of the employee's involvement is expected in order to avoid any misconceptions of the amount of intellectual effort being devoted to the research in question.

3.3 Consulting for Government Agencies or their Contractors. When the University employee engaged in Government-sponsored research also serves as a consultant to a Federal agency, his/her conduct is subject to the provisions of the Conflict of Interest Statutes (18 U.S.C. 202-209 as amended). If the employee consults for one or more Government contractors, or prospective contractors, in the same technical field as his/her research project, care must be taken to avoid giving advice that may be of questionable objectivity because of its possible bearing on his/her other interests. In undertaking and performing consulting services, the employee shall make full disclosure of such interests to the University and to the contractor insofar as they may appear to relate to the work at the University for the contractor.

3.4 University Responsibilities. UHD recognizes that disclosure and consultation are the obligations assumed by the University when it accepts government funds for research. UHD will herein implement organizational and administrative actions to prevent conflicts of interest in Government-sponsored research.

3.4.1 The Associate Vice-President for Research and Sponsored Programs and the Principal Investigator will insure that all Government funds are expended for the purposes for which they are intended and that all services which are required in return for these funds are supplied.

3.4.2 Any UHD employee involved in Government-sponsored research must consult with the appropriate vice president before accepting any outside professional work to insure there will not be any real or perceived conflicts of interest with the research.

3.4.3 The AVP-ORSP or designee will serve as an informed source of advice and guidance for consultation on problems that may or do develop as a result of University employees' outside financial or consulting interests, as they relate to their participation in any Government-sponsored research.

3.4.4 All University employees participating in Government-sponsored research must abide by the standards outlined herein as well as those delineated in all Grant Administration policies (PS 06.A.xx).

4. PROCEDURES

4.1 Any UHD employee involved in government-sponsored research must consult with the appropriate vice president before accepting any outside professional work to insure there will not be any real or perceived conflicts of interest with the research.

4.2 The AVP-ORSP or designee will serve as an informed source of advice and guidance for consultation on problems that may or do develop as a result of University employees' outside financial or consulting interests, as they relate to their participation in any Government-sponsored research.

4.3 All University employees participating in government-sponsored research must abide by the standards outlined herein as well as those delineated in all Grant Administration policies (PS 06.A.06).

5. REVIEW PROCESS

Responsible Party (Reviewer): Associate Vice President for Research and Sponsored Programs

Review: Every three years on or before May 1st.

Signed original on file in Employment Services and Operations.

6. POLICY HISTORY

Issue #1: 05/02/01

7. REFERENCES

There are no references for this policy.

06.A.07 Ethical Conduct in Research and Government-Sponsored Activities

Memo to: All UH-Downtown/PS Holders

UH-Downtown/PS 06.A.07

From: Dr. Juan Sánchez Muñoz, President

Issue No. 3

Effective Date: 02/12/2020

Page 1 of 8

Subject: Misconduct in Research, Scholarly, Creative, and Government Sponsored Activities

1. PURPOSE

All members of the university community are expected to follow standards for conduct of scientific, scholarly, creative, and research activities, including but not limited to, faithful representation of data, accepting responsibility for the integrity of all work undertaken and reported individually or collectively, and accurate disclosure of all facts pertaining to all education and research and scholarly/creative activities.

This PS states the University of Houston-Downtown (UHD) policy and procedures for promoting ethical behavior in all research, scholarly and creative activities, and government-sponsored activities, and outlines how to handle allegations of scientific misconduct. This policy does not address items such as differences in interpretation or judgment of data, scholarly or political disagreements, personal or professional opinions, or private, moral or ethical behavior or views.

This policy applies to the body of research, scholarly, or creative activity done during an individual's period of employment at the university; this policy operates independently from all other relevant review processes (including annual reviews and promotion and tenure). Misconduct committed prior to the date of this policy will be subject to the definition of misconduct in policy at the time of the misconduct, though procedure will operate under the current policy version.

Given the serious nature and implications of any allegations of misconduct, the university expects any individual(s) involved in any part of the reporting, inquiry, or investigation of alleged misconduct to act in good faith and maintain confidentiality.

2. DEFINITIONS

2.1 Misconduct is defined as fabrication, falsification, plagiarism, or other material deviation from practices commonly accepted in the academic and scientific communities for proposing, conducting, or reporting results from education, research, and scholarly or creative activities. Misconduct also refers to retaliation against a person who, acting in good faith, reports or provides information about suspected or alleged misconduct. Misconduct compromises the integrity of the individual, colleagues, and/or organization. All levels of misconduct, whether intentional or unintentional, are subject to disciplinary action as described in this policy.

2.1.1 Self-plagiarism, otherwise known as text recycling or text reuse, “occurs when sections of the same text appear (usually unattributed) in more than one of an author’s own publications.” (Committee on Publication Ethics, 2013)

2.1.2 Fabrication is making up data or results that are recorded and/or reported as authentic.

2.1.3 Falsification is the manipulating of research materials, equipment, processes to misrepresent data or findings, or omitting data or results such that the research and its results are not accurately represented.

2.1.4 A ghost author is someone “who is omitted from an authorship list despite qualifying for authorship.” (Committee on Publication Ethics, 2013)

2.1.5 A guest or gift author is someone “who is listed as an author despite not qualifying for authorship.” (Committee on Publication Ethics, 2013).

2.1.6 Material deviations from practices that are commonly accepted in the academic and scientific communities include unethical authorship practices (gift authorship, ghost authorship, or omitting authors who have made a substantive/bona fide (see section 3.3) contribution to the work in question) in all forums and venues, falsifying time and effort reports associated with sponsored programs, forging of authorizing signatures associated with the work, misrepresenting an individual’s qualifications, failure to obtain prior approval for human subjects research or animal research intended for publication or presentation, and deviation from other practices commonly agreed upon within the disciplines. [See section 3.3 for role of disciplinary faculty in identifying discipline-specific expectations.].

2.2 Inquiry is defined as a stage of preliminary information-gathering and initial fact-finding to determine whether an allegation or apparent instance of misconduct warrants an investigation. All inquiry interviews will be digitally recorded.

2.3 Investigation is a formal examination and evaluation of relevant facts to determine whether misconduct has taken place or, if misconduct has already been confirmed, to assess its extent and consequences and/or to determine appropriate action. All investigation hearings will be digitally recorded.

2.4 Relevant Parties is defined as the person(s) against whom the allegations were made, the person making the allegations, and the funding agency (if a government-sponsored activity).

2.5 Conflict of Interest is defined as per SAM 02.A.09.

2.6 Retaliation includes, but is not limited to, any adverse employment or educational action taken for making a report of misconduct or otherwise participating under this Policy.

3. POLICY

3.1 All members of the University community have the responsibility to report those activities which they believe constitute misconduct, either directly to the Senior Vice President for Academic and Student Affairs and Provost (SVPASA) or through the UH System anonymous fraud system. Such individuals reporting in good faith may not be subject to retaliation, and, as per the SAM 01.C.04, are protected by the Texas Whistleblower Act. As part of the protection of these individuals, the SVPASA may choose to notify the individual's chair and dean to be watchful (without providing specifics of the allegation).

Any actual or threatened retaliation or any act of intimidation to prevent or otherwise obstruct the reporting of academic misconduct or violation of this policy or the participation in proceedings relating to academic misconduct may be considered a separate violation of this or other UHD Policies.

3.2 All research and government-sponsored activities in which members of the University community engage shall be conducted according to the standards recognized in the academy for collegiate education, research, and scholarly/creative activities.

3.3 As part of the review of Annual Evaluation and Rank and Tenure criteria, all tenured and tenure-track faculty in each department must articulate expectations and definitions of what constitutes a "bona fide" role in scholarly work that would warrant authorship or similar credit, as well as identify any other expectations particular to the discipline(s) housed within the department. Each discipline within a department may develop and submit separate expectations and definitions; all expectations and definitions should be reviewed and voted on by all tenured and tenure-track faculty within the discipline or department. Faculty may consult or reference external professional organizations or resources as part of this task.

The Department Chair should ensure that the faculty undertake this task each year. All expectations and definitions must be reviewed annually and included with the Rank and Tenure Criteria, submitted no later than December 15 to the college dean and SVPASA as per PS 10.A.01.

3.4 All allegations of misconduct involving any sponsored program must be reported to the appropriate sponsoring agency as per the agency's guidelines, including science and/or engineering activities funded by the Public Health Service, the National Institutes of Health, and/or the National Science Foundation, must be reported according to the steps delineated in the procedures of these organizations.

3.5 If at any point during the inquiry or investigation phase the number of allegations and/or respondents expands beyond the capacity for executing the procedures of this policy as defined below, the Inquiry Team or the Investigating Committee (IC) may request that the SVPASA, in consultation with the President, expand timelines, resources, and personnel to accommodate the expanded scope.

4. PROCEDURES

4.1 Allegations of misconduct must be reported in writing to the SVPASA or through the UH System anonymous fraud reporting system for review and action. If the SVPASA has a possible conflict of interest, the allegation must be reported to the President. In such instances, duties assigned to the SVPASA in implementing this policy will be implemented by the President.

4.2 Interim administrative action may be taken by the university and/or the awarding agency upon receipt of allegations of misconduct scientific, scholarly, creative, and research activities. The SVPASA will authorize an inquiry into the suspected or alleged misconduct and determine whether the allegations warrant further investigation as violations of University policy. Within five working days of the receipt of a misconduct allegation, the SVPASA must appoint an Inquiry Team and give the team a timeline for completion and reporting (see section 4.3). The Inquiry Team will include the a representative from the Provost's Office who carries faculty rank along with two faculty members chosen from a pool of four faculty; the pool of four will consist of one elected tenured faculty member from each college, elected by Faculty Senate procedures for two-year terms.

4.3 The duration of the inquiry period will be 60 to 90 working days determined by the SVPASA at the beginning of the inquiry, depending on the complexity of the case. The inquiry timeline should be as timely as possible while allowing for due process and labor of individuals involved. The inquiry must include a meeting with the subject(s) of the allegation within 10 days after the Inquiry Team has been appointed. At that meeting, the Inquiry Team will inform the subject(s) about the timeline for this phase and provide a brief overview of this policy and process.

The inquiry should provide information sufficient to make a recommendation but need not provide exhaustive coverage of the allegation. This inquiry will result in the Inquiry Report minimally containing the following information:

- Date inquiry was initiated and date completed;
- Name and title of the person(s) against whom the allegations were made;
- General nature of the allegations;
- The application/grant number (if a government-funded activity);
- Evidence reviewed and persons interviewed; and
- Conclusions. (A recommendation to dismiss, expand, or amend the allegation(s) or proceed with a formal investigation.)

4.4 Within 10 working days of receiving the Inquiry Report, the SVPASA will notify in writing relevant parties of the decision—either to dismiss the allegations or to move to an investigation. At this time, the SVPASA will provide a copy of the Inquiry Report to the subject(s) of the allegation(s). All evidence and materials related to the inquiry shall be maintained by the Office of SVPASA for seven years after termination of the inquiry.

4.5 Within 30 working days after the SVPASA makes a decision to initiate a formal investigation, the SVPASA will appoint an IC. The SVPASA will make available to the IC the inquiry report along with all supporting materials collected during the inquiry. The

members of the IC will be appointed by the SVPASA in consultation with the Chief Integrity Officer or a similar member of the Provost's Office who carries faculty rank and the President of the Faculty Senate (or Senate President-elect in cases of conflict of interest or availability). The IC will consist of at least two tenured faculty representatives from each of the four academic colleges as well as the Chief Integrity Officer or other representative from the Provost's Office who carries faculty rank as an ex officio member.

4.6 The IC will meet within 10 working days of being appointed. At its first meeting, the IC will elect a chair from the appointed faculty members to handle procedural and administrative matters, as well as communicate the membership of the IC to the subject(s) of the investigation. The IC will also receive an orientation from the Provost and General Counsel regarding all relevant department, college, and university policies and documents. The investigative phase will begin at the meeting of the IC. The length of the investigative phase will be commensurate with the complexity of the allegations, number of subjects and witnesses in the investigation, and amount of evidence to be reviewed. The length of the investigative phase will be documented in the charge to the IC with justification by the Provost, with a maximum of 120 days.

4.7 In the course of the investigation, the IC will investigate and address all allegations of misconduct identified in the original allegation(s), and those that arise as a result of the inquiry and investigative process. The IC may conduct interviews, seek advice, request materials, or seek testimony material to the case.

4.8 The IC shall insure confidentiality of all related proceedings to the extent possible and shall undertake diligent efforts to protect the position, anonymity, and reputation of all parties in the investigation.

4.9 As part of its process, the IC must invite the subject(s) of the allegation to appear before the IC. If the subject(s) chooses to meet with the IC, he/she/they will be given sufficient time to present his/her/their case, which may include documents, written arguments, witnesses, and/or statements from external parties (which must be verifiable by the IC). The IC may ask questions of the subject(s) and any witnesses during this meeting. At this meeting, the subject(s) may have legal counsel or an advisor but must speak for himself/herself/themself. Written notification of the presence of legal counsel or an advisor by either the IC or the subject(s) must be provided to all parties at least one week in advance of the planned meeting. The subject(s) of the allegation will have access to all evidence available to the IC, including recordings of interviews with other parties. The subject(s) may also submit information to the IC at any point during the investigation phase. The subject(s) of the investigation may communicate with the elected IC chair or the Chief Integrity Officer or other provost's office IC representative regarding questions or concerns about the process, or contact the UHD Faculty Ombuds. If those individuals cannot address the questions or concerns, they will suggest an alternate source.

4.10 A record of the proceedings and all related documentation shall be maintained by the IC chair throughout the investigative process. All interviews conducted as part of the

investigation will be recorded. Breach of confidentiality by relevant parties may be grounds for action under existing university policy or procedure.

4.11 Within the given timeframe for the investigation, the IC will conclude its work, and issue a formal report summarizing its findings and conclusions with respect to all allegations of misconduct, which may include a majority and minority report. The formal IC report is an advisory document for the SVPASA, who will consider the report along with other policy violations, or findings of misconduct for each subject. The formal IC report, the record of the proceedings and all related documentation will be forwarded to the SVPASA. Within 10 working days of receiving the IC report, the SVPASA will forward copies of the report to the relevant parties.

4.12 All documentation related to the inquiry and investigation proceedings shall be retained for seven years in the Office of the Senior Vice President for Academic and Student Affairs and Provost.

4.13 Penalties and Appeals

4.13.1 Within 20 working days of receipt of the report, the SVPASA shall weigh the collected evidence, testimony, and findings of the inquiry and investigation to determine whether research misconduct has occurred. The SVPASA may consult with IC as part of this review. Consonant with the seriousness and intentionality of the offense, if the SVPASA determines that misconduct has occurred, the SVPASA may impose disciplinary measures which include, but are not limited to, a written notice to the employee, withholding of pay raises for a period of time, notification of the offense to pertinent organizations and publishers, or initiating dismissal procedures within the regulations of the University. The sanctions must be communicated in writing to the subject(s) of the investigation. If misconduct occurs related to any sponsored program, the SVPASA will notify the sponsoring agency as per the agency's guidelines. The SVPASA will notify the IC and parties whose decisions may need to consider such information including Rank and Tenure Committees, Department Chair, and Dean, of any sanctions.

4.13.2 Sanctions imposed by the funding agency, if misconduct occurs in a government-sponsored activity, range from minimal restrictions to suspension or termination of an active award, loss of funding and/or debarment or suspension of an individual, a department, or the University from participating in government-sponsored programs.

4.13.3 The subject of the investigation may appeal the sanctions imposed to the President. This written appeal must occur within 30 working days of the receipt of the sanctions. The President has 30 working days to render a written decision on the appeal. The President's decision will be final and binding.

5. REVIEW PROCESS

Responsible Party (Reviewer): Assistant Vice President for Research and Sponsored Programs

Review: Every three years on or before May 1st.

Signed original on file in Employment Services and Operations.

6. POLICY HISTORY

Issue #1: 10/16/95

Issue #2: 08/17/15

Issue #3: 02/12/20

7. REFERENCES

Committee on Publication Ethics. (2013). How to spot authorship problems.

Committee on Publication Ethics. (n.d.) Text Recycling Guidelines.

SAM 02.A.09

SAM 01.C.04

PS 03.A.23

PS 10.A.01

PS 10.A.05