

THE UNIVERSITY OF ALABAMA IN HUNTSVILLE
INSTITUTIONAL CONFLICTS OF INTEREST AND CONFLICTS OF COMMITMENT
POLICY

Number: 06.09.05

Division: Administration - Office of Risk Management and Compliance

Date: January 1, 2024; Revised December 7, 2024

Purpose To provide guidance on identifying, acknowledging, and appropriately managing Conflicts of Interest (COI) and/or Conflicts of Commitment (COC) in compliance with Board Rule 106.2 and the State of Alabama Ethics Law, Ala. Code § 36-25-1, et. seq. Additionally, this policy outlines specific requirements for transparency and objectivity to help ensure the integrity of academic and administrative endeavors, and to help to protect The University of Alabama in Huntsville (“University” or “UAH”), its community members, and the public from financial or reputational harm.

Scope This policy applies to all faculty and staff, including graduate and undergraduate student employees, as well as their Unit Heads (as that term is defined in this Policy) for any and all activities other than research and sponsored activities as set forth in the Research Conflicts of Interest and Commitment Policy (“Policy 07.01.03”). If an activity or interest would not be considered a conflict of interest or commitment under Policy 07.01.03, but would be considered such under this Policy, this Policy shall be deemed applicable and enforceable.

Policy Board Rule 106.2 of The Board of Trustees of The University of Alabama states that University community members are expected to “*acknowledge and appropriately manage conflicts of interest.*”

The Board Rule further states that:

University Community Members should be loyal to the University's missions and institutions, appropriately objective and impartial in exercising their duties and discretion and follow applicable ethical standards. University Community Members must not use public offices or resources for private or other improper gain, or otherwise act under an improper conflict of interest related to their duties.

The term “University Community Members” includes the members of the Board of Trustees, senior administrators, and other members of the University community, including faculty, staff, students, volunteers, contractors, agents, affiliates, and others providing services to or on the University's behalf. The

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standards set out in this Policy clarify specific requirements applicable to certain groups within the University community at UAH.

The primary goals of this Policy are to: (a) prevent the personal interests and activities of employees from adversely or inappropriately influencing UAH operations; (b) provide a framework for recognizing and managing employee conflicts of interest and conflicts of commitment; (c) provide education and guidance to help minimize even the appearance of conflicts of interest and conflicts of commitment; and (d) standardize University-wide procedures for the disclosure, review, management, and approval of actual or possible conflicts of interest.

This Policy supersedes any conflicting language related to conflicts of interest and conflicts of commitment in other University policies and handbooks. This Policy does not displace or supplant any obligations of senior administrators under Board Rule 106 of the Board of Trustees of the University of Alabama, or any obligations of UAH employees under the Alabama Ethics Law, Code of Alabama 1975 § 36-25-1, et. seq., or federal law.

Definitions:

Approved Management Plan: A Management Plan, as defined in this Policy, that has been approved by the Provost and Executive Vice President (“Provost”) (for faculty COI/COC) or the Chief Administrative Officer (“CAO”) (non-faculty COI/COC). An Approved Management Plan is valid for one (1) year and must be renewed annually for so long as the identified COI/COC exists.

Conflict Management Plan (“Management Plan”): A plan that describes an actual, potential, or perceived COI/COC in detail, and outlines measures to actively reduce, mitigate, or eliminate the COI/COC. The Unit Head and the responsible Employee work together to develop a Management Plan. Management Plans must be signed by the Unit Head and the responsible employee and then be forwarded to the Institutional Conflict of Interest Review Board for review, comment, and recommendation. Management Plans do not become Approved Management Plans until approved by the Provost or the CAO as appropriate to the employee classification (refer to the definition of Approved Management Plan).

Management Plans will be submitted electronically through the electronic platform designated by Office of Risk Management and Compliance. A link to the current iteration of the plan template will be available on the UAH Compliance website and on the HR website.

Conflict of Commitment (COC): A Conflict of Commitment refers to a situation where an individual engages in external or internal activities, either paid or unpaid, that interfere with their Institutional Responsibilities and time commitment to the University. Examples of scenarios that may create a COC can be found on the Compliance web page: <https://www.uah.edu/compliance>.

Conflict of Interest (COI): A Conflict of Interest refers to a situation in which an individual’s financial, professional, or other personal considerations may directly

or indirectly affect, or have the appearance of affecting, an individual's professional judgment in exercising any University duty or responsibility. Typically, a Conflict of Interest may arise when an individual has the opportunity or appears to have the opportunity to influence the University's business, administrative, academic, clinical, research, or other decisions in ways that could lead to improper financial, professional, or personal benefit or advantage of any kind, whether or not the value is readily ascertainable. Examples of scenarios that may create a COI can be found on the Compliance web page: <https://www.uah.edu/compliance>.

Employee: Any faculty member, staff member, undergraduate student employee, graduate student employee, postdoctoral employee, graduate research assistant, graduate teaching assistant, or contracted worker, regardless of the number of hours worked, and whether permanent, temporary, or on-call. Generally speaking, any individual earning W-2 reportable wages from UAH would be classified as an employee for the purposes of this Policy.

External Activity: An activity not included within someone's University employment responsibilities and performed for an entity other than UAH, whether or not for compensation, that draws on the professional knowledge, skill, and/or talents that employees utilize to fulfill their Institutional Responsibilities at UAH, including but not limited to the following:

- external employment;
- consulting;
- lecturing, presenting, performing, or speaking;
- establishing and/or supporting a start-up company;
- serving as an expert witness;
- serving on a board of directors or similar governing body;
- serving on a scientific advisory board; or
- appointments or other commitments to other academic institutions or research institutes.

Faculty Secondary Responsibilities: Professional activities or affiliations traditionally undertaken by faculty outside of the immediate institution employment context but where the faculty member represents UAH. Faculty Secondary Responsibilities may or may not entail the receipt of honoraria, remuneration, or the reimbursement of expenses, and may or may not include Professional Public Service Activities. Faculty Secondary Responsibilities are a subset of Institutional Responsibilities.

Institutional Responsibilities: All activities, duties, and responsibilities performed by an employee of UAH in the course of their primary employment or other relationship with UAH, including, but not limited to: scholarship, research, consultation, teaching, professional practice, administration, contracting or procurement responsibilities, Faculty Secondary Responsibilities, or Professional Public Service Activities undertaken in the course and scope of UAH employment.

Internal Activity: Activities performed for or on behalf of UAH by a UAH employee. Internal Activities may include, but are not limited to, Institutional Responsibilities as defined herein, non-instructional activities performed for additional compensation, volunteer activities, consulting/advising another UAH department/unit, providing instructional services for additional compensation, and service on committees/boards/etc.

Professional Public Service Activities: Activities specifically enumerated below, when provided for or on behalf of the groups specifically enumerated below, and when such are considered part of an employee's Institutional Responsibilities, whether or not separately compensated:

- professional studies (e.g., attendance at scientific meetings);
- seminars, lectures, performances, presentation, or continuing education sessions;
- service on review panels (e.g., participation in manuscript review, grant/contract review, academic program review, etc.);
- service on advisory committees; or
- service on a board of directors or similar governing body

and where those activities are performed for or provided to:

- U.S. federal, state, or local government agencies;
- institutions of higher education, academic teaching hospitals, medical centers, or research institutes affiliated with an institution of higher education, whether in the U.S. or abroad;
- nonprofit/philanthropic entities, professional societies, or professional associations that are not affiliates of or affiliated with industry or other for-profit entities;
- organizations accredited or approved by the appropriate independent boards or bodies governing oversight of continuing professional education activities; or
- civic groups.

Significant Financial Interest (SFI): Thresholds (i.e., types and amounts) of financial interest of employees or their spouse or dependents that reasonably appear to be related to the employee's Institutional Responsibilities as set forth below:

- With regard to any publicly-traded entity, SFI exists if the value of the financial interest received from the entity in the current or prior calendar year exceeds \$1,000 in the aggregate.
- With regard to any non-publicly traded entity, a SFI exists if:
 - the value of any remuneration received from the entity in the current or prior calendar year exceeds \$1,000 in the aggregate; or
 - the employee or a spouse or dependent(s) holds any equity interest (e.g., stock, stock option, or other ownership interest).
- With regard to intellectual property rights and interests (including but not limited to patents and copyrights), a SFI exists for any intellectual property licensed, optioned, or that has generated income/revenue.

- SFI does not generally include remuneration for Professional Public Service Activity with U.S. entities, textbook royalties, peer reviewed journal editorship activities for publishing companies, or other related items as determined by the Institutional Conflict of Interest Review Board.

Unit Head: Dean, chair, director, officer, associate or assistant vice president, vice president, or president, who has executive management responsibilities for supervising a department, unit, center, college, or division, or the next higher-level supervisor (e.g., dean, assistant/associate vice president, etc.) in the event the employee with a COI/COC is the head of a unit (e.g., department chair, director, etc.).

Related Policies

- 02.01.55 – Nepotism Policy
- 06.01.03 – Appropriate Use of IT Resources
- 06.01.06 – Electronic Mail and Other Electronic Communications
- 06.01.11 – Telecommunications Policy
- 06.02.01 – Staff Handbook
- 06.04.04 – Business Services Policy Manual
- 07.01.03 – Research Conflicts of Interest and Conflicts of Commitment Policy
- Faculty Handbook

COI and COC Disclosure and Management

Employee Responsibilities Under this Policy

Employees and others covered under this Policy should evaluate and appropriately arrange their external and internal interests in order to avoid compromising their ability to carry out their primary obligations to the University.

Most Conflicts of Interest or Conflicts of Commitment should generally be avoided or resolved through the exercise of personal judgment or discretion. When those options are not practicable, the COI/COC must be managed through the creation and implementation of a Conflict Management Plan.

Employees, by accepting employment at UAH, make a commitment to UAH that includes the appropriate and responsible use of the University's information and resources, including facilities, personnel, equipment, systems access, patents, copyrights, technology, logos, and work product, as well as the University's more intangible reputation and prestige. Employees must ensure that their use of UAH information and resources, their external and internal activities, and their financial interests do not interfere with, or appear to interfere with, their Institutional Responsibilities.

Employees are prohibited from engaging in activities from which they, their families, or their businesses will improperly benefit, financially or personally, because of an employee's position at UAH or through the use of UAH materials,

resources, or information. It is the responsibility of any employee with an actual or potential conflict of interest to inform their immediate supervisor of the conflict and of any potential or actual use of UAH resources or information in connection with the employee's External Activities or financial interests.

If, through the course of the appropriate review, it is determined that such use exceeds threshold amounts allowed by law and policy, appropriate remedial action will be taken that may include, but not be limited to, disciplinary action, contracting requirements, or reimbursement to the University for the fair market value of the use of the resource or information.

All UAH employees are required to:

- Complete an institutional COI and COC disclosure form within 30 days of hire, transfer, or promotion. (The disclosure form may be found at: <https://www.uah.edu/compliance>.)
- Use UAH resources, including confidential and/or privileged information, only for UAH purposes and only as allowed by applicable law and policy.
- Obtain approval as outlined in the Institutional Conflict of Interest and Conflict of Commitment Procedures prior to engaging in external activities, or in internal activities not directly related to their primary Institutional Responsibilities.
- Report any personal or financial interests that relate to their Institutional Responsibilities in accordance with this Policy, including any interests that might influence or appear to influence any decisions related to hiring or employment, grants, vendor selections, scholarships, or other benefit awards, within 30 days of the actual or potential COI or COC being identified. The Institutional COI and COC disclosure form in Kualu shall be used for such reporting.
- Complete COI and COC training, as specified in the Institutional Conflict of Interest and Conflict of Commitment Procedures document, within 30 days of hire, transfer, or promotion, and annually thereafter.
- Adhere to any Approved Management Plan.
- For any employee operating under an Approved Management Plan, complete an updated disclosure form and resubmit Approved Management Plans for review and continuation of approved status annually until such time as the COI or COC no longer exists.

Divisional / Department / Unit Responsibilities Under This Policy

All vice presidents, deans, chairs, department heads, executive directors, directors, managers, as well as all other employees responsible for approving, monitoring, managing, or reviewing potential COI / COC are required to:

- Promote and monitor compliance with this Policy and the related procedures.
- Ensure adequate processes are developed and communicated to their employees to allow for the review and approval of External and Internal Activity requests submitted by employees in their units, so that those

activities do not interfere with or appear to interfere with the Institutional Responsibilities of employees.

- Review submitted requests for compatibility with the interests of UAH as a public academic institution and compliance with state law or policy related to the use of UAH resources or facilities.
- Determine whether requested external activities are more properly conducted as official UAH activities.
- Provide direction and supervision for proper accounting of employees' time for purposes of external or internal activities.
- Provide guidance on the use of UAH information and resources and approval processes so that the use of facilities, personnel, equipment, patents, copyrights, technology, and work product in approved external activities is done in accordance with the Employee Conflict of Interest/Commitment Disclosure Procedures and reimbursement is made to UAH at fair market value for such use where the use exceeds threshold amounts allowed by law or policy.
- Ensure there are written financial agreements for the payment of any portions of employees' salaries attributable to appointments, assignments, or work projects performed for other UAH divisions, units, or affiliated organizations.
- Develop and monitor Conflict of Interest and Conflict of Commitment Management Plans in accordance with this Policy.
- Adopt specific review and approval procedures for their units.
- Adopt more restrictive standards for approval if necessary for a particular unit.

Procurement Services - Contracts and Purchases

When mandated by Board Rule 106 and Code of Alabama § 41-16-82, a Vendor Disclosure Statement must be submitted by vendors seeking to do business with UAH. Procurement Services shall immediately notify the Chief Risk and Compliance Officer ("CRCO") of any identified COI/COC disclosed through a Vendor Disclosure Statement, and shall not proceed with processing the associated purchase order or contract until given approval by the CRCO to proceed.

Disclosure of Conflicts of Interest and Conflicts of Commitment

It is the responsibility of each employee to disclose annually to University officials any known or potential conflicts of interest and commitment, including, but not limited to, any SFIs, nepotism, business interests, internal or external activities, or any other potential conflicts (including sponsored or reimbursed travel), in accordance with the Institutional Conflict of Interest and Conflict of Commitment Procedures. These procedures provide a mechanism for identifying and disclosing any relationships or activities that might give rise to conflicts of interest or conflicts of commitment, or the appearance thereof, with assigned duties, responsibilities, or obligations to the University, in accordance with University standards. Any employee currently operating or considering the creation of a business should contact the Office of Risk Management and Compliance ("ORMC") to disclose any known or potential conflicts before operating or

creating the entity. ORMC will assist with reviewing and routing any submitted information to other University departments or leadership as needed to ensure potential conflicts are appropriately addressed.

In addition, each employee must, within thirty (30) days of discovering or acquiring (e.g., through marriage, purchase, inheritance, or other means) a new actual or potential COI or COC, submit an updated disclosure in accordance with the Institutional Conflict of Interest and Conflict of Commitment Procedures.

Disclosures in accordance with the Institutional Conflict of Interest and Conflict of Commitment Procedures must be completed by all new employees within the first thirty (30) days of employment. Disclosures must be updated prior to participation in any funded research, in accordance with this policy and policy 07.01.03, or any time circumstances require.

All employees will receive an annual email notice regarding this Policy, and a link to the location of the Policy and the related procedures. This information will be available throughout the year for employees who need to disclose any changes in circumstances as they occur. The University has the right to address or review all potential conflicts of interest or conflicts of commitment.

While all conflicts must be disclosed, not all conflicts can be managed via a Conflict Management Plan. If a Conflict Management Plan cannot be implemented, the disclosed activity may not be approved or allowed to occur.

Annual Conflict of Interest and Conflict of Commitment disclosures required under this Policy must not be confused with the following:

- The annual Statement of Economic Interests required of certain public employees by the Alabama Ethics Commission;
- Any disclosures required for research active individuals as outlined in the UAH Research Conflicts of Interest and Conflicts of Commitment Policy (07.01.03); or
- Any disclosures required of University executive leadership by Board Rules 106, 406, and other relevant rules and Chancellor proclamations.

External Activities Required to be Reported

The following activities require reporting. This is not an exhaustive listing:

- Employment outside of UAH
- Private consulting, advising, or speaking
- Teaching and/or research appointments for another entity other than UAH
- Seeking an elected public office
- Serving as an expert witness or legal consultant
- Practicing as a licensed professional
- Service on a board of directors
- Presentation at professional meetings where the employee is not representing UAH and in which an honorarium is being paid

- Professional activities provided in a foreign country, or directing the activities of others in a foreign country
- Activities involving more than incidental use of UAH facilities, equipment, or other resources
- Activities requiring the waiver or assignment of the employee's or UAH's rights or interests to any inventions, works, publications, or intellectual property that may be developed during the course of or from the activity
- Required use of books, supplies, equipment, software, or instructional resources at UAH when such are created or published by the employee or by an entity in which the employee has financial interest

External Activities Not Generally Requiring Reporting

The following activities may not require reporting if they fall within an employee's Institutional Responsibilities so long as the activity does not otherwise create a COI or COC. This is not an exhaustive listing:

- Peer review of articles or research proposals
- Unpaid scholarly collaborations at another domestic institution
- Receiving an honorary degree from another institution
- Editorial services for educational or professional societies
- Musical or other creative performances and exhibitions that are consistent with a faculty member's discipline

Internal Activities

Internal Activities that may involve a Conflict of Commitment include, but are not limited to, activities that are:

- Not included within one's primary Institutional Responsibilities; and
- Performed for additional compensation or to gain knowledge or experience not relevant to one's primary Institutional Responsibilities.

An example of an internal Conflict of Commitment might include a staff employee teaching a course at UAH for extra compensation and performing work related to that course during their normally scheduled working hours without making up that time or using leave.

Conflicts of Interest in Educational Settings

UAH must maintain an open academic culture, with decisions and actions related to education free of conflicts of interest related to any commercial interest. Commercial support of educational events, programs, or other activities sponsored by UAH must not influence educational content, research, or other scholarly activities. Employees and departments/units must follow applicable contracting policies and University standards for industry relationships.

Contracts and Purchases

A UAH employee may not participate in the selection, award, or administration of a contract or in the procurement of goods or services if that employee has a real

or apparent COI, and may not solicit or accept gratuities, favors, or anything of monetary value, from contractors, subcontractors, or vendors.

Any employee who is not involved in a contract or purchase but who becomes aware of an actual or apparent COI on the part of an UAH employee or on the part of a vendor, contractor, or subcontractor, must report the matter in accordance with the UAH Duty to Report and Protection from Retaliation policy (06.09.03).

Gifts, Awards and Prizes

Solicitation or acceptance of personal gifts, food/beverages, services, gratuities, or other things of value by UAH employees, their spouses, or their dependents is prohibited if such solicitation or acceptance influences, or has the appearance of influencing, education, research, purchasing, or other official UAH business decisions.

UAH employees may accept gifts, awards, and/or prizes provided that acceptance of these does not influence education, research, purchasing, or other official business decisions and provided that acceptance does not violate the Alabama Ethics Law or University policy.

All gifts to the University shall be handled in accordance with the 04.04.01 Gift Acceptance Policy and all gifts to employees shall be handled and reported in accordance with the 06.04.08 Awards Gifts and Prizes Policy. All Employees should disclose gifts, awards, or prizes received as part of their UAH duties. Gifts to University employees, their spouses, or their dependents are subject to further limitations defined within the Alabama Ethics Law, including de minimis value thresholds.

If an employee is concerned that a gift, gratuity, benefit, service, award, or prize may be perceived as unethical, that employee should consult with the Unit Head. It is the duty of the Unit Head to oversee and manage situations where even the perception of impropriety may occur.

In analyzing such a situation, the Unit Head should determine whether the proposed gift, gratuity, benefit, service, award, or prize:

- a. Serves a legitimate University business purpose and provides a net benefit to UAH;
- b. Meets customary industry practices and conventions;
- c. Puts the faculty or staff member in a questionable ethical position; and
- d. Is otherwise allowed by this Policy and all other University policies as well as the Alabama Ethics Law.

Research

Individuals, regardless of title, position, or employment, who are involved in the design, conduct and/or reporting of proposed or active research, including research funded under contracts, grants or cooperative agreements, are further

subject to the requirements of the Research Conflicts of Interest and Conflicts of Commitment Policy (07.01.03).

All employees involved in sponsored programs or activities, as defined in Policy 07.01.03, and whether or not such programs or activities are managed by or through the Office of Sponsored Programs, shall be subject to the requirements of Policy 07.01.03 and additionally to this Policy for all other actual or potential conflicts not covered by Policy 07.01.03 or which, if identified under Policy 07.01.03, extend beyond a research or sponsored activity.

Implementation

The Provost and the CAO are responsible for the overall implementation of this Policy. Coordination of the requirements included in this Policy is the responsibility of the ORMC. The Vice President for Research and Economic Development is responsible for the development and enforcement of policies and procedures related to research and sponsored program conflicts of interest and conflicts of commitment as provided for in Policy 07.01.03.

Institutional Conflict of Interest Review Board (“ICIRB”)

The Provost and the CAO shall appoint an ICIRB which shall be composed of four (4) appointed full-time employees as well as a permanent co-chair appointed by the Provost. The ICIRB will be permanently co-chaired by the Chief Risk and Compliance Officer. Members other than the co-chairs shall be appointed as follows: one (1) representative from Academic Affairs appointed by the Provost, one (1) representative from Student Affairs appointed by the Vice President for Student Affairs, one (1) representative from Finance appointed by the Chief Financial Officer, and one (1) representative from University Advancement appointed by the Vice President for University Advancement. A representative of the University’s Office of Counsel will serve as a liaison (advisory, non-voting) member.

The ICIRB shall function as an advisory board for identified COI and COC. The appointed members shall serve three-year, staggered terms. (For the initial ICIRB appointments, in order to establish the staggered terms, the four appointed members shall determine the initial term length by lottery. One initial member shall serve a one-year term, one shall serve a two-year term, one shall serve a full three-year term, and one shall serve a four-year term.)

Vacancies on the ICIRB shall be filled by interim appointees appointed by the responsible appointing official as provided above. Interim appointees shall serve out the remainder of the term of the vacating appointee, except when the remaining term is 90 days or less, the appointee shall be considered the named replacement and shall not be considered interim and will serve the full three-year term in addition to the remainder of the expiring term.

ICIRB meetings are closed to the public and documentation/records are confidential personnel records.

No ICIRB member holding a SFI related to a Management Plan under review may participate in that review. No ICIRB member may participate in the review of a Management Plan involving an immediate supervisor, the member's Unit Head, or any family member (to include immediate and extended family). No ICIRB member may participate in the review of a Management Plan when such review would constitute any type of actual or perceived COI on the part of the member. ICIRB members must disclose any actual or potential COI and recuse themselves from such review.

The ICIRB shall:

- Review submitted Management Plans.
- Review amendments to an Approved Management Plan.
- At the request of the responsible Unit Head, perform annual reviews of existing Approved Management Plans.
- Conduct retroactive compliance reviews of existing Approved Management Plans and recommend corrective actions.
- Provide assistance to the Provost, CAO, and Office of Risk Management and Compliance in the implementation of this Policy.
- Maintain an ongoing awareness of University procedures, practices, and standards with regards to COI/COC and with a view towards assuring consistency with the terms of this Policy.
- Ensure that a proper balance is maintained between confidentiality and ICIRB operations and standards.
- Disclose any potential COI posed by serving on the ICIRB and/or any potential COI posed by reviewing specific submittals.

Records Retention and Access

Records of all disclosures made pursuant to the Institutional Conflicts of Interest and Conflicts of Commitment Policy, and of any action taken to resolve, manage, or eliminate any interest disclosed under this policy are generally considered to be employee records and should be maintained in accordance with applicable records retentions policies and guidelines.

Disciplinary Action

Violations of this Policy or violations of an approved Conflict Management Plan are grounds for progressive disciplinary action up to, and including, termination of employment at UAH.

Procedures

Procedures may be found at: <https://www.uah.edu/compliance>.

Review

The Office of Risk Management and Compliance, in consultation with the Provost and Chief Administrative Officer CAO, is responsible for the review of this Policy every five (5) years or whenever circumstances require.