



UNIVERSITY OF CENTRAL FLORIDA

**Board of Trustees  
Audit and Compliance Committee  
October 11, 2017, 4:30 – 5:00 pm  
President’s Board Room  
Conference Call-In Phone #1-800-442-5794, passcode 463796**

**AGENDA**

- |   |  |
|---|--|
| <b>I. CALL TO ORDER</b>   | Beverly Seay<br><i>Chair, Audit and Compliance Committee</i>   |
| <b>II. ROLL CALL</b>  | Margaret Melli<br><i>Executive Administrative Assistant of University Compliance, Ethics, and Risk</i> |
| <b>III. MEETING MINUTES</b>   |  |
| • <a href="#">Approval of the August 11, 2017, Audit and Compliance Committee meeting minutes</a> | Chair Seay   |
| <b>IV. NEW BUSINESS</b>   | Chair Seay   |
| • <a href="#">Compliance and Ethics Program Plan (AUDC-1)</a>                                     | Rhonda L. Bishop<br><i>Chief Compliance and Ethics Officer</i>   |
| <b>V. CLOSING COMMENTS</b>  | Chair Seay   |



UNIVERSITY OF CENTRAL FLORIDA

**Board of Trustees  
Audit and Compliance Committee Meeting  
August 11, 2017  
President's Board Room**

**MINUTES**

**CALL TO ORDER**

Trustee Beverly Seay, chair of the Audit and Compliance Committee, called the meeting to order at 9:00 a.m. by teleconference call. Trustee Yeargin attended by teleconference call. Trustees Self and Walsh were present.

**MINUTES APPROVAL**

The minutes from the April 12, 2017, meeting were approved unanimously.

**NEW BUSINESS**

University Audit Report (INFO-1)

Robert Taft, Chief Audit Executive, presented the University Audit Report. The report highlighted current and future audits, the roll-out of the new audit management software, and the Direct Support Organization consulting project.

2016-17 Work Plan Status of All Activities (INFO-2)

Rhonda L. Bishop, Chief Compliance and Ethics Officer, provided an update of the 2016-17 Work Plan Status of All Activities.

2017-18 Compliance and Ethics Annual Work Plan

Bishop outlined the 2017-18 Compliance and Ethics Annual Work Plan.

Employee Code of Conduct

Bishop announced the new Employee Code of Conduct, which will be in effect in the fall.

University Compliance, Ethics, and Risk Program Update

Bishop provided an update on the Department of Education's Office of Civil Rights request for information and the progress of implementing the federal NIST 800-171 cyber security requirements.

Chair Seay adjourned the Audit and Compliance Committee meeting at 9:52 a.m.

Respectfully submitted: \_\_\_\_\_  
Robert Taft  
Chief Audit Executive  
Date \_\_\_\_\_

Respectfully submitted: \_\_\_\_\_  
Rhonda L. Bishop  
Chief Compliance and Ethics Officer  
Date \_\_\_\_\_

**University of Central Florida  
Board of Trustees  
Audit and Compliance Committee**

**SUBJECT:** Compliance and Ethics Program Plan

**DATE:** October 11, 2017

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**PROPOSED COMMITTEE ACTION**

Approval of the Compliance and Ethics Program Plan.

**BACKGROUND INFORMATION**

The Compliance and Ethics Program Plan outlines and documents UCF's Compliance and Ethics Program (Program) and communicates roles and responsibilities in the Program. UCF's Program is reasonably designed to optimize its effectiveness in preventing or detecting noncompliance, unethical behavior, and criminal conduct. The development and approval of the Program plan is a requirement of Board of Governors Regulation 4.003 State University System Compliance and Ethics Programs.

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**Supporting documentation:** Attachment A: Compliance and Ethics Program Plan

**Prepared by:** Rhonda L. Bishop, Chief Compliance and Ethics Officer

**Submitted by:** Rhonda L. Bishop, Chief Compliance and Ethics Officer



UNIVERSITY OF CENTRAL FLORIDA

# Compliance and Ethics Program Plan

## Introduction

UCF is committed to conducting research, instruction, business, and all other activities with the highest ethical standards and in compliance with applicable federal, state, and local laws and regulations. This Compliance and Ethics Program Plan (Plan) outlines and documents UCF's Compliance and Ethics Program (Program) and communicates roles and responsibilities in the Program. UCF's Program is reasonably designed to optimize its effectiveness in preventing or detecting noncompliance, unethical behavior, and criminal conduct. The Program is developed consistent with the Code of Ethics for Public Officers and Employees contained in Part III, Chapter 112, Florida Statutes; other applicable codes of ethics; the Federal Sentencing Guidelines Manual, Chapter 8, Part B, Section 2.1 (Appendix A); and as required by the Florida Board of Governors Regulation 4.003 (Appendix B).

## Revisions

The Plan is intended to be a living document capable of keeping pace with the implementation of an effective compliance and ethics program, the university's mission, goals, and strategic initiatives, and the continually evolving regulatory landscape. As required by Board of Governors Regulation 4.003, the Plan and any subsequent changes will be approved by the UCF Board of Trustees and copy of the approved plan shall be provided to the Board of Governors. It is the responsibility of the chief compliance and ethics officer to enact modifications to this document and assure UCF's continued commitment to the highest ethical standards and the adherence to applicable federal, state, and local laws and regulations and university policies and procedures.

## Table of Contents

Elements of an Effective Program	2
Benefits of a Comprehensive Compliance Program	2
Element I – Oversight of Compliance and Ethics and Related Activities	2
Element II – Standards of Conduct, Policies and Procedures	6
Element III – Effective Training and Education	7
Element IV – Effective Lines of Communication	9
Element V – Routine Monitoring, Auditing, and Identification of Risks	11
Element VI – Respond Promptly to Detected Problems and Undertake Corrective Action	13
Element VII – Enforce and Promote Standards through Appropriate Incentives and Disciplinary Guidelines	14
Element VIII – Measure Compliance Program Effectiveness	15
<b>Appendices</b>	17
A. Federal Sentencing Guidelines Manual, Chapter 8, Section 2.1	
B. Florida Board of Governors Regulation 4.003	
C. UCF Audit and Compliance Committee Charter	
D. University Compliance, Ethics, and Risk Charter	
E. Accountability Matrix	
F. UCF Employee Code of Conduct	
G. UCF Policy 2-001.5 University Policy Development	
H. UCF Policy 2-101.1 University Regulation Development	
I. UCF Policy 2-700 Reporting Misconduct and Protection from Retaliation	
J. UCF Policy 2-800 Fraud Prevention and Detection	

- K. UCF Regulation 3.018 Conflict of Interest or Commitment; Outside Activity or Employment
- L. UCF Policy 4-504.2 Reporting a Potential Conflict of Interest or Conflict of Commitment in Research
- M. UCF BOT – UFF Collective Bargaining Agreement, Article 16
- N. Regulation 3.0124 Discipline and Termination for Cause of Non-unit Faculty and A & P Staff Members
- O. Regulation 3.0191 Disciplinary Action – University Support Personnel System

## **Elements of an Effective Compliance Program**

The elements of an effective compliance program are based on Chapter 8 of the Federal Sentencing Guidelines and serve as the foundation for Board of Governors Regulation 4.003. These requirements set forth an effective compliance and ethics program for organizations and require not only promoting compliance with laws, but also advancing a culture of ethical conduct. Federal agencies use these guidelines to determine the effectiveness of a compliance and ethics program, and to determine whether the existence of the program will provide safe harbor in the event of noncompliance.

These elements serve as the basis for UCF's Program and provide the objectives of the Program's work plan submitted annually to our Board of Trustees Audit and Compliance Committee. The Program is focused on projects and activities that will mitigate risks to the resources and reputation of UCF, as well as to the careers and professional reputations of its employees. The Plan is divided into eight elements and includes an overview of the projects and activities that have been developed to meet those requirements.

## **Benefits of a Comprehensive Compliance Program**

In response to the Federal Sentencing Guidelines and calls for increased accountability in public service, UCF took a proactive approach in 2011 to hire a chief compliance and ethics officer who was charged with developing an effective compliance and ethics program. In 2016, the Board of Governors approved Regulation 4.003 that requires all state university system schools to hire a chief compliance and ethics officer and implement a program by November 2018. The benefits of UCF's Program are that it:

- demonstrates appropriate stewardship over the resources entrusted to UCF
- commits the university to a culture of ethics and compliance, and to conducting all activities and business with the utmost integrity
- assures the UCF Board of Trustees, president, and senior leadership that programs are in place to conduct university activities in accordance with federal, state, and local laws and regulations, as well as institutional policies and procedures
- provides a mechanism to monitor performance and strengthen business practices
- mitigates fines or penalties that may be imposed on the university in the event of noncompliance.

## **Element I - Oversight of Compliance and Ethics and Related Activities**

The Federal Sentencing Guidelines require that an organization's governing authority be knowledgeable about the content and operation of the compliance and ethics program and that they exercise reasonable oversight with respect to the implementation and effectiveness of the compliance and ethics program. Board of Governors Regulation 4.003 requires that each Board of Trustees assign responsibility for providing governance oversight of the Program to the committee of the board responsible for audit and compliance.



## **UCF Audit and Compliance Committee**

The Audit and Compliance Committee is appointed by the UCF Board of Trustees and assists the board in discharging its oversight responsibilities. The committee oversees the following for UCF and its direct support organizations:

- internal control structure
- independence and performance of internal and external audits and corrective actions plans
- integrity of information technology infrastructure and data governance
- independence and effectiveness of the compliance and ethics program
- compliance with applicable laws and regulations
- standards for ethical conduct
- risk mitigation
- internal investigation processes.

The full charge and responsibilities of the committee is communicated in the committee's charter (Appendix C). The committee's charter is reviewed annually, updated as appropriate, and discussed with and approved by our Board of Trustees.

## **UCF President**

The university president serves as the chief executive officer of the university and is responsible for the operation of the university. The president must be knowledgeable about the Program and shall exercise oversight with respect to its implementation and effectiveness. In coordination with the Board of Trustees, the president designates a senior-level administrator as the chief compliance and ethics officer and is responsible for ensuring that the chief compliance and ethics officer has the independence and objectivity to perform the responsibilities of the position and has the adequate resources and appropriate authority, and that any imposed restriction or barrier that may impede the function of the chief compliance and ethics officer is removed.

## **Vice Presidents and Senior Leadership**

Vice presidents and members of the senior leadership team are responsible for fostering a culture of ethical conduct and compliance at UCF and for performing their roles in compliance with all applicable federal and state laws and regulations, as well as the policies and procedures of the university. In addition, all vice presidents and senior leadership team members are responsible for ensuring that any compliance programs under their area of supervision have adequate resources and are appropriately positioned to be effective, that the function of the program is not impeded, and that any imposed barriers to an effective Program are removed.

## **Chief Compliance and Ethics Officer**

The chief compliance and ethics officer is assigned the overall responsibility for the compliance and ethics program and is delegated day-to-day operational responsibility. The chief compliance and ethics officer reports functionally to the Audit and Compliance Committee of the Board of

Trustees and administratively to the president and to the vice president and executive chief of staff. The chief compliance and ethics officer and staff members have organizational independence and objectivity to perform their responsibilities and all activities of the office free from influence.

The chief compliance and ethics officer oversees the University Compliance, Ethics, and Risk office and is responsible for developing the Program as required by this Plan. The full responsibilities of the chief compliance and ethics officer and office are detailed in the University Compliance, Ethics, and Risk Charter (Appendix D). The charter is reviewed at least every three years for consistency with applicable Board of Governors and university regulations, professional standards, and best practices. The charter is approved by the Board of Trustees and a copy of the approved charter and any subsequent changes are provided to the Board of Governors.

To ensure the Program is effectively developed, the chief compliance and ethics officer is responsible for the following:

- maintaining a professional staff with sufficient size, knowledge, skills, experience, and professional certifications
- utilizing third-party resources as appropriate to supplement the department's efforts
- performing assessments of the program and making appropriate changes and improvements
- routinely communicating to the Board of Trustees Audit and Compliance Committee and president on the effectiveness of the compliance and ethics program
- developing and updating this plan.

### **University Compliance, Ethics, and Risk Office**

The University Compliance, Ethics, and Risk office led by the chief compliance and ethics officer is charged with implementing and sustaining the Program and the ongoing development of effective policies and procedures, education and training, monitoring, communication, risk assessments, and responding to reported issues. The office partners with responsible university personnel to monitor compliance and ensure appropriate corrective actions when necessary.

**Purpose Statement:** To provide oversight and guidance to university-wide ethics, compliance, and enterprise risk management activities, and foster a culture that embeds these disciplines in all university functions and activities.

### **Compliance and Ethics Advisory Committee**

The Compliance and Ethics Advisory Committee is comprised of subject matter experts who are responsible for compliance in their respective areas, as well as representatives from the Faculty Senate and Staff Council, Office of the Provost, Office of the General Counsel, and University

Audit. The compliance committee advises the chief compliance and ethics officer on the development of a comprehensive compliance and ethics program and the mitigation of compliance and ethical risks at UCF. In addition, the purpose of the committee is to ensure consistent communication and development of compliance and ethics programs across the university and to ensure that the elements of the Plan are implemented at all levels of the institution. The committee members are charged with promoting a culture of ethics, accountability, and compliance at UCF.

### **Compliance Partners**

The key to the Program's success is fostering a culture of ethics, compliance, and accountability that weaves compliance into everyday business processes at UCF. To achieve this goal, the Accountability Matrix (Appendix E) identifies the compliance and ethics requirements, the individuals responsible for those areas, and the vice president accountable for compliance and ethical conduct, as well as for ensuring that those areas are appropriately staffed and supported.

These individuals, referred to as *compliance partners*, play an important role in ensuring that the Program is effectively implemented and that risks are mitigated. Each compliance partner has a dotted line of responsibility to the chief compliance and ethics officer. They are required to report any incidents of noncompliance or unethical conduct, external requests related to compliance and ethics activities, or any imposed restriction or barrier to the effectiveness of their function or the Program to the chief compliance and ethics officer. The compliance partners annually report the effectiveness of compliance and ethics initiatives within their area responsibility to the University Compliance, Ethics, and Risk office.

### **Faculty, Staff, and Students**

The responsibility for compliance with laws, regulations, policies, procedures, and standards of conduct rests with every member of the UCF community. Through this commitment, each of us is preserving the distinguished reputation of the university, as well as the careers, professional reputations, and future of all of the faculty, staff, and students. This expectation is communicated to employees through the UCF Employee Code of Conduct and to students through *The Golden Rule*.

### **Exercise Due Diligence to Avoid Delegation of Authority to Unethical Individuals**

UCF uses reasonable efforts not to include within the university and affiliated organizations individuals whom UCF knew, or should have known through the exercise of due diligence, to have engaged in conduct inconsistent with an effective compliance and ethics program. As part of these efforts, University Compliance, Ethics, and Risk provides guidance on appropriate disciplinary actions related to noncompliance or unethical conduct and recommends the removal of individuals from Program related roles as appropriate.

In addition, background checks serve as an important part of the selection process at UCF. This type of information is collected as a means of promoting a safe environment for students, employees, and the public. UCF requires a background check on all prospective employees as a condition of employment and follows Equal Employment Opportunity Commission guidelines when evaluating information obtained through the background check process.

- Level 1 background checks are performed on final candidates prior to an offer of employment and UCF employs a third party agency. Information collected can include an employment history, education, character, finances, and criminal history. The Level 1 background check collects information from federal criminal, county criminal, national criminal database, Transunion social security trace, driving records, and the National Sex Offender Registry.
- Level 2 background checks are performed on prospective and current employees where required by law or university policy.

## **Element II - Standards of Conduct, Policies and Procedures**

As part of an effective Program, UCF develops expectations for ethical conduct and compliance through several avenues. Codes of conduct, regulations, and policies and procedures set expectations for ethical conduct and compliance. Additionally, University Compliance, Ethics, and Risk serves as a resource for regulation and policy development and assists UCF faculty and staff in identifying and understanding policies applicable to their roles. The following standards, policies and procedures are core to UCF's effective Program:

### **UCF Employee Code of Conduct**

The purpose of the UCF Employee Code of Conduct (Appendix F) is to provide one guiding document that serves to communicate expectations and requirements and provides a resource for employees when faced with questions or ethical dilemmas. Embedded in the code are UCF's ethical standards of honesty and integrity, respect, responsibility and accountability, and stewardship, as well as the five tenets of the UCF Creed. Together they communicate the ethical principles and values of the university. The UCF Employee Code of Conduct is part of UCF's comprehensive compliance and ethics program, supported by the UCF Board of Trustees, the president, and senior leadership. All employees are required to follow the UCF Employee Code of Conduct.

### **UCF Policy 2-001.5 – University Policy Development**

UCF Policy 2-001.5 (Appendix G) establishes how university policy is developed, reviewed, approved, and maintained. The chief compliance and ethics officer administers the policy and provides guidance on the effective development of policies and procedures. The chief compliance and ethics officer also chairs the University Policies and Procedures Committee that is charged with reviewing policies and procedures and providing a recommendation of approval prior to review and approval by the university president. All policies are maintained online in the UCF Policies and Procedures Manual and must be reviewed annually by the responsible authority and every five years by the committee. New and revised policies are communicated to the university community through the policy listserv.

### **UCF Policy 2-101.1 – University Regulation Development**

UCF Policy 2-101.1 (Appendix H) establishes how a university regulation is developed. The policy and process is administered by the vice president and general counsel in compliance with the procedures adopted by the Board of Governors. The Office of the General Counsel maintains the online regulation library and provides communication to the university community on new and revised regulations through the regulation listserv.

### **UCF Policy 2-700 – Reporting Misconduct and Protection from Retaliation**

UCF Policy 2-700 (Appendix I) is administered by the chief compliance and ethics officer and establishes how and where members of the university community, including companies that conduct business with the university, should report concerns. The policy statement includes three main expectations:

1. All members of the UCF community are expected and encouraged to make good faith reports of suspected misconduct.
2. An employee who knowingly makes a false report or provides false information during an investigation may be subject to disciplinary action up to and including termination.
3. Retaliation against anyone who, in good faith, reports misconduct, or who participates in an investigation of misconduct, is strictly prohibited.

The policy covers the avenues for reporting, including within an employee’s department, to central offices, to the University Compliance, Ethics, and Risk office, and through the UCF IntegrityLine (anonymous report line). The policy also covers the requirement to report possible fraud to University Audit and the requirements under Florida statute for reporting child abuse, neglect, and abandonment.

### **UCF Policy 2-800 - Fraud Prevention and Detection**

UCF Policy 2-800 (Appendix J) is administered by the Chief Audit Executive and communicates the requirement that suspected fraud, waste, or abuse be reported and investigated by University Audit. It is the policy of UCF to proactively exercise due diligence in the prevention and detection of fraud and objectively and independently investigate any misuse of university resources, as well as any suspected acts of fraud, theft, corruption, waste, or abuse, and to take appropriate disciplinary or legal action.

### **Element III – Effective Training and Education**

The University Compliance, Ethics, and Risk office and compliance partners are responsible for developing and implementing training and education to support ethical conduct and compliance at UCF. University Compliance, Ethics, and Risk collaborates with compliance partners to assist in the development, evaluation, and delivery of training. All UCF employees are provided training to conduct university business with the highest ethical standards and in compliance with applicable laws, regulations, and policies and procedures.

Creating training modules and identifying need-based education is pivotal to the success of the Program. As part of the Program's core training regarding compliance and ethical conduct, University Compliance, Ethics, and Risk developed and provides the following on-line and in-person training to employees:

***Employee Code of Conduct training*** – This training is provided to new employees during orientation and is available and promoted to current employees on a regular basis.

***Ethical Leadership training*** – This training is encouraged for all employees and provided by University Compliance, Ethics, and Risk through the leadership development program and as requested. The training covers the ethical standards and values of the university and provides a framework for employees to navigate ethical dilemmas and decision-making. Employees who attend learn what it means to be an ethical leader and how leaders impact the culture of the university.

***Potential Conflicts – Florida Code of Ethics for Public Officers and Employees training*** – This training provides an overview of the state's ethics laws, assists employees with identifying prohibited actions or conduct, and communicates the reporting and disclosure requirements of the state and university. This training is available and promoted to new and current employees on a regular basis.

***Gifts and Honoraria training*** – This training is based on the state's ethics laws as it relates to employees soliciting and receiving gifts, applicable reporting requirements, and communicates the university's standards. This training is available and promoted to new and current employees on a regular basis.

University Compliance, Ethics, and Risk also provides targeted versions of the training listed above to departments and groups, as requested. In addition, training is developed or updated to meet the needs of the Program and to address areas of concern. As part of the Program, the office provides training on the Clery Act and federal research compliance requirements in collaboration with compliance partners from the UCF Police Department, Office of Institutional Equity, and the Office of Research and Commercialization. Compliance partners develop and administer vital training to employees as part of UCF's effective Program and cover the large amount of ethical and compliance requirements applicable to the university.

## **Website**

In addition, the development and maintenance of the compliance website, which promotes UCF's policies and procedures, is a critical educational resource for university employees. Information on the website includes an overview of the Program, UCF Employee Code of Conduct, policies and procedures, the UCF IntegrityLine report line, UCF *IntegrityStar Newsletter*, educational modules and videos, and links for additional resources. The training videos provided on the website and distributed to employees through other channels, cover the topics of retaliation, phishing, employment of relatives, respecting others, and avoiding conflicts of interest.

## **IntegrityStar**

The *IntegrityStar Newsletter* is the official UCF Compliance and Ethics newsletter that is distributed to all employees three times per year (once per semester). Newsletter articles cover ethics and compliance topics, include articles by compliance partners, highlight new policies and regulations, and list upcoming training opportunities. The newsletter includes a recognition section in which employees are celebrated for demonstrating the values of the university. The newsletter provides guidance to employees and contains educational videos and cartoons that communicate ethical conduct and compliance requirements. Each newsletter provides a link to the IntegrityLine and reminds employees to report suspected misconduct.

### **Educational Outreach**

University Compliance, Ethics, and Risk also educates the university community on ethical and compliance requirements through correspondence such as employee-specific and all-employee emails, direct mailing to departments or employees, and distribution of the UCF Compliance and Ethics brochure. The brochure provides an overview of the office and Program at UCF and is distributed as part of new employee orientation, outreach events, and national Compliance and Ethics Week activities.

### **Compliance and Ethics Week**

Annually UCF celebrates national Compliance and Ethics Week through activities promoted and hosted by University Compliance, Ethics, and Risk. As part of the outreach activities, lunch and learn training sessions are conducted by compliance partners on compliance and ethical hot topics. During the week, the values of the university are celebrated and the elements of the Program are promoted to all employees.

### **Compliance and Ethics Training for BOT Members**

Board of Trustee members receive training regarding their responsibility and accountability for ethical conduct and compliance with applicable laws, regulations, rules, policies, and procedures as part of the orientation process and as requested by the chair. The chief compliance and ethics officer regularly educates the Board of Trustees Audit and Compliance Committee regarding applicable federal and state compliance requirements and the Program during committee meetings.

## **Element IV – Effective Lines of Communication**

As part of an effective program, organizations are required to have and publicize a system that allows for anonymity or confidentiality, whereby members of the university community can report or seek guidance regarding potential or actual misconduct without the fear of retaliation. All members of the UCF community are expected and encouraged to make good faith reports of suspected misconduct. These expectations are communicated in UCF Policy 2-700, Reporting Misconduct and Protection from Retaliation. The policy includes procedures for when to report and the communication lines that are available for reporting. As part of the options for reporting,

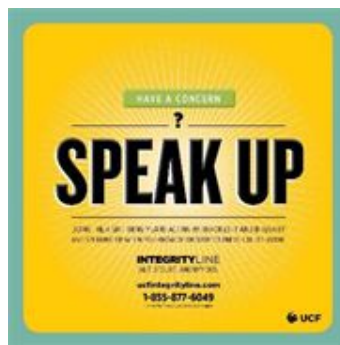
the UCF IntegrityLine, the anonymous reporting line, is provided and publicized to all members of the university community.

The UCF IntegrityLine is a secure reporting system administered by an independent third-party, NAVEX Global. The IntegrityLine is available 24 hours a day, 365 days a year, and is located at [ucfintegrityline.com](http://ucfintegrityline.com), or by calling 1-855-877-6049 toll-free. NAVEX Global uses their case management system, EthicsPoint to provide an anonymous way for individuals who may be reluctant to report suspected misconduct through university administrative or central offices. The internet portal never identifies a visitor and deletes the internet address so that anonymity is preserved. Callers are not traced or recorded.

IntegrityLine reports are processed by EthicsPoint and sent to the University Compliance, Ethics, and Risk office to address appropriately. All reports are reviewed, investigated, and responded to as discreetly and promptly as possible. Reports received through the UCF IntegrityLine are triaged in a joint meeting between the chief compliance and ethics officer and the chief audit executive. Based on the nature of the report, they are either investigated by the University Compliance, Ethics, and Risk office, or University Audit, or investigated jointly by both offices, or they may be referred to the appropriate compliance partner for review. When reports are received through the UCF IntegrityLine that involve behavior involving students under the UCF *Golden Rule*, the cases are referred to the Office of Student Rights and Responsibilities. When reports are criminal in nature, the reports are referred to the UCF Police Department.

If employees decide to provide their identity, every effort is made by the University Compliance, Ethics, and Risk office to keep their identity confidential. The university does not tolerate retaliation and will take all reasonable and necessary actions to protect members of the university community who have filed good faith reports of misconduct. If someone who has filed a report or participated in an investigation feels as if they are experiencing retaliation, they are directed to contact the University Compliance, Ethics, and Risk office immediately. Reports of retaliation are investigated by University Compliance, Ethics, and Risk and include the appropriate compliance partners based on the allegations.

The UCF IntegrityLine is publicized through multiple channels to the university community. The image to the right is the poster that is distributed to all building managers and placed throughout buildings on all UCF campuses. The IntegrityLine logo and link are also placed on all University Compliance, Ethics, and Risk web pages, compliance partner websites, *IntegrityStar Newsletter* editions, UCF Employee Code of Conduct, and training modules. In addition, wallet cards are distributed to all new employees during orientation, training sessions, and during outreach events. Marketing materials with the IntegrityLine information, such as ear buds, are distributed to employees during outreach events and training.





## **Element V – Routine Monitoring, Auditing, and Identification of Risks**

To ensure that the Program is followed, routine monitoring, risk assessments, and audits are performed. Through these efforts weaknesses and risks are identified and steps are taken to improve the program, strengthen internal controls, and mitigate the risks of misconduct and noncompliance. To fulfill the requirements of this element, the following activities are included in the Program:

### **Conflicts of Interest Disclosure**

As a state institution and recipient of federal funds, UCF must comply with both state and federal requirements regarding the disclosure and management of conflicts of interest and commitment. Additionally, the university is committed to conducting university business and activities with integrity and has developed policies and procedures to identify, manage, and, when appropriate, remove potential and actual conflicts of interest and commitment. University Compliance, Ethics, and Risk provides oversight and management of the university's conflicts of interest and commitment reporting process. Annually the office provides the Board of Trustees Audit and Compliance Committee a report based on monitoring efforts of the disclosure process and policies for the university, UCF direct support organizations and component units. Every five years the office conducts a full review of the conflicts of interest and commitment policies and procedures, disclosure process, monitoring efforts, and corrective actions or management plans for the university, UCF direct support organizations, and component units.

Each academic year, a potential conflict of interest and commitment disclosure is required of all faculty, executive staff, post-doctoral employees, and select individuals in university positions of trust, or other employees engaged in the design, conduct, and reporting of research at UCF. All other employees must submit a report prior to the initiation of any outside activity or employment and when a potential conflict of interest exists. An amended disclosure must be submitted within 30 days of any change in circumstances.

University Compliance, Ethics, and Risks provides training modules, guidance, review and approval of disclosures, reviews and monitors management plans, and performs investigations into conflicts of interest and commitment. The process of disclosing all outside activities for review and approval protects employees from unknowingly violating a state or federal law, and protects the credibility and reputations of employees and the university by providing a transparent system of disclosure, approval, and documentation of outside activities that might otherwise raise concerns of a conflict of interest or commitment. The following regulation and policy communicate the expectations for disclosure and compliance:

UCF Regulation 3.018 Conflict of Interest or Commitment; Outside Activity or Employment (Appendix K) is a longstanding university regulation that outlines the conflict of interest and commitment disclosure process at UCF and includes state and federal reporting requirements.

UCF Policy 4-504.2 Reporting a Potential Conflict of Interest or Conflict of Commitment in Research (Appendix L) communicates the federal disclosure requirements and procedures for faculty and staff who engage in federally funded research.

### **IntegrityLine Case Review**

Twice a month University Compliance, Ethics, and Risk reviews open investigations to ensure issues are being addressed in a timely manner and assesses the reports received for trends of noncompliance or risks. Annually, the office performs an analysis on data for the year and provides a report and overview to the board's Audit and Compliance Committee, president, and vice presidents. In response to trends identified through both the monthly and annual analysis, University Compliance, Ethics, and Risk provides guidance on noncompliance or risks identified and makes changes to the Program, provides targeted training and education, provides targeted communications and guidance, and collaborates with compliance partners to address issues as appropriate.

### **Risk Assessment**

University Compliance, Ethics, and Risk performs an enterprise-wide risk assessment of university activities every three years. This assessment identifies and ranks risks and evaluates the existence of appropriate internal controls to mitigate risks. The assessment, in conjunction with the elements of an effective compliance program, is the basis for the annual compliance work plan. The work plan stipulates development, review, training, monitoring or other activities that University Compliance, Ethics, and Risk will conduct during the year.

### **External Compliance Requests or Investigations**

University Compliance, Ethics, and Risk provides oversight and coordination of external inquiries into compliance with federal and state laws or NCAA requirements and takes appropriate steps to ensure safe harbor for the university in instances of non-compliance. As part of this responsibility, the office provides guidance to compliance partners, conducts investigations, and provides the university's response as appropriate. Based on the issues that are identified, the office ensures that appropriate changes are made to the Program to support compliance, ethical conduct, and mitigation of risks.

### **Coordination with Internal Audit**

University Audit serves as the university's internal auditor, providing internal audits and reviews, management consulting and advisory services, investigations of fraud and abuse, follow-up of audit recommendations, evaluation of the processes of risk management and governance, and coordination with external auditors. University Compliance, Ethics, and Risk provides guidance to University Audit on compliance-related audits and matters. Based on audit findings, University Compliance, Ethics, and Risk provides guidance, training, or assists departments with policy and procedure development. Fraud or other issues requiring investigation or an audit identified by University Compliance, Ethics, and Risk are referred to University Audit for appropriate response. As appropriate, both offices work together to evaluate or investigate misconduct or risks.

## **External Audits**

The UCF Audit and Compliance Committee is assigned oversight responsibility to:

- receive and review audits by the State of Florida Auditor General
- receive and review audits of the direct support organizations and component units
- review and contract with external auditors for special audits or reviews related to the university's affairs and report the results of any such special projects to the board.

Serving as the internal auditor, University Audit provides coordination and guidance to the board and senior leadership for external audits or investigative matters related to fraud, waste, and abuse and other matters as requested.

## **Element VI - Respond Promptly to Detected Problems and Undertake Corrective Action**

When non-compliance, unethical behavior, or criminal conduct is detected, the university takes the appropriate steps to prevent further similar behavior, including making any necessary modifications to the Program. University Compliance, Ethics, and Risk provides guidance on compliance, ethics, and risk related matters to the university community. The office collaborates with compliance partners and senior leadership to review and resolve compliance and ethics issues, accomplish objectives, and facilitate the resolution of problems. As part of this responsibility, the office performs the following:

### **Investigations**

The University Compliance, Ethics, and Risk office receives allegations of misconduct or noncompliance through multiple channels including direct reports from employees, compliance partners, individuals or entities external to the university, and the UCF IntegrityLine. Allegations of misconduct or noncompliance may also be identified through monitoring and other Program activities. The office initiates, conducts, supervises, coordinates, or refers to other appropriate offices investigations of misconduct or noncompliance, or performs reviews deemed appropriate in accordance with university regulations and policies, state statutes, and federal regulations.

### **Corrective Actions**

When problems are detected, University Compliance, Ethics, and Risk makes the appropriate modifications to the Program and updates the Plan to reflect those changes. When appropriate, the office provides oversight and guidance to compliance partners to make changes to the Program within their area of responsibility. In addition, the office provides recommendations to colleges, departments, or units for corrective actions to resolve and correct issues related to

misconduct or noncompliance identified through investigations, monitoring, or other activities.

It is the responsibility of each college, department, or unit's executive officer to implement recommended corrective actions. The office monitors the completion of recommended corrective actions and escalates issues as appropriate to senior leadership, the president, and the board's Audit and Compliance Committee. These efforts serve to ensure that the Program remains effective and that the university is taking steps to prevent the reoccurrence of misconduct, noncompliance, or criminal activity.

## **Element VII – Enforce and Promote Standards through Appropriate Incentives and Disciplinary Guidelines**

The Program is promoted and enforced consistently through the application of appropriate incentives and, when necessary, appropriate disciplinary measures resulting, for example, for instances such as employees engaging in misconduct or noncompliance and failing to take reasonable steps to prevent or detect misconduct, noncompliance, and criminal conduct. University Compliance, Ethics, and Risk, in consultation with the president and the board's Audit and Compliance Committee, provides guidance and recommendations for appropriate incentives and disciplinary measures to encourage a culture of compliance and ethics. When failures in compliance and ethics are identified, the Program requires that issues are addressed through appropriate measures, including education or disciplinary action.

### **Employee Performance**

Annually all employees receive performance appraisals. Employees are evaluated on the performance of their duties as communicated through job descriptions, whether they met expected goals and objectives and whether they performed in a manner consistent with UCF values.

### **Incentive Program**

University Compliance, Ethics, and Risk implemented a process for identifying and recognizing employees who exemplify the expectations of the Program and the values of the university. Three times per year, employees are recognized in an article in the *IntegrityStar Newsletter*. In addition, incentives are offered to employees who participate in the annual Compliance and Ethics Week activities.

### **Disciplinary Procedures for Employees**

Additionally, University Compliance, Ethics, and Risk provides guidance to supervisors and members of the senior leadership team on appropriate disciplinary action up to and including termination when misconduct, noncompliance, or criminal conduct is identified. As part of this process, University Compliance, Ethics, and Risk collaborates with Human Resources and General Counsel to ensure that supervisors provide disciplinary action consistently and in compliance with applicable laws, regulations, and policies. It is the responsibility of the supervisor or appropriate senior leader to ensure that disciplinary action is implemented,

including criminal charges when appropriate, and that other corrective actions are completed. The following policies communicate the expectations and procedures for disciplinary action: UCF Board of Trustees – United Faculty of Florida Collective Bargaining Agreement, Article 16 (Appendix M) provides the negotiated policy and procedures for disciplinary action for in-unit faculty.

Regulation 3.0124 Discipline and Termination for Cause of Non-unit Faculty and A & P Staff Members (Appendix N) communicates the policy and procedures for disciplinary action for non-unit faculty and Administrative & Professional employees.

Regulation 3.0191 Disciplinary Action – University Support Personnel System (Appendix O) provides the policy and procedures for disciplinary action for University Support Personnel System employees of the university with regular status.

### **Element VIII – Measure Compliance Program Effectiveness**

The Program is evaluated periodically to assess its effectiveness in promoting a culture of compliance and ethical conduct and for compliance with Chapter 8 of the Federal Sentencing Guidelines and Board of Governors Regulation 4.003. The following are the activities performed to assess the effectiveness of the Program:

#### **Annual Effectiveness Reports**

Annually University Compliance, Ethics, and Risk provides an annual report on the effectiveness of the Program to the board’s Audit and Compliance Committee and the president. To assess the program, compliance partners are required to report annually on their activities and efforts for meeting the requirements of the Plan through a survey developed by University Compliance, Ethics, and Risk. These reports, as well as the activities and efforts of the office, are assessed and included in the annual report. Based on this process any identified deficiencies are addressed and appropriate modifications are made to the Plan. As required by Board of Governors Regulation 4.003, any Plan revisions based on the report are approved by the Board of Trustees. A copy of the report and revised plan is provided to the Board of Governors.

#### **Culture Survey**

University Compliance, Ethics, and Risk conducts an anonymous survey every two years to evaluate the compliance and ethics culture at UCF. The results from the initial survey served as a benchmark for future surveys. The survey serves as a mechanism to identify opportunities to strengthen the compliance and ethics culture and to measure the compliance and ethics program’s progress. The survey is distributed by email to all university employees, including hourly, and student employees. The survey includes questions related to an employee’s knowledge of the Program, thoughts on the university’s culture, view of leadership, how comfortable they are raising concerns, and if they feel protected from retaliation.

### **Institutional Effectiveness Assessment Process**

As part of the university's Institutional Effectiveness Assessment Process, University Compliance, Ethics, and Risk annually develops an assessment plan that targets specific components of the Program to evaluate, measure, and improve. The process includes the annual setting of outcomes and measures, collecting data, reporting results, and developing a new assessment plan to measure the impact of the improvements made to the Program. Using this process allows the office to evaluate Program effectiveness and make improvements as necessary.

### **Program Effectiveness Review**

As required by Board of Governors Regulation 4.003, each university will obtain an external review of the Program's design and effectiveness at least once every five years. The review and any recommendations for improvement will be provided to the university president and Board of Trustees. The assessment will be approved by the Board of Trustees and a copy provided to the Board of Governors. The first review will be conducted within five years of the implementation of Regulation 4.003 and will be performed consistent with guidance from the Board of Governor's Inspector General's office.

**2. EFFECTIVE COMPLIANCE AND ETHICS PROGRAM**

Historical Note: Effective November 1, 2004 (see Appendix C, amendment 673).

**§8B2.1. Effective Compliance and Ethics Program**

- (a) To have an effective compliance and ethics program, for purposes of subsection (f) of §8C2.5 (Culpability Score) and subsection (b)(1) of §8D1.4 (Recommended Conditions of Probation - Organizations), an organization shall—

- (1) exercise due diligence to prevent and detect criminal conduct; and
- (2) otherwise promote an organizational culture that encourages ethical conduct and a commitment to compliance with the law.

Such compliance and ethics program shall be reasonably designed, implemented, and enforced so that the program is generally effective in preventing and detecting criminal conduct. The failure to prevent or detect the instant offense does not necessarily mean that the program is not generally effective in preventing and detecting criminal conduct.

- (b) Due diligence and the promotion of an organizational culture that encourages ethical conduct and a commitment to compliance with the law within the meaning of subsection (a) minimally require the following:
- (1) The organization shall establish standards and procedures to prevent and detect criminal conduct.
  - (2) (A) The organization's governing authority shall be knowledgeable about the content and operation of the compliance and ethics program and shall exercise reasonable oversight with respect to the implementation and effectiveness of the compliance and ethics program.
  - (B) High-level personnel of the organization shall ensure that the organization has an effective compliance and ethics program, as described in this guideline. Specific individual(s) within high-level personnel shall be assigned overall responsibility for the compliance and ethics program.
  - (C) Specific individual(s) within the organization shall be delegated day-to-day operational responsibility for the compliance and ethics program. Individual(s) with operational responsibility shall report periodically to high-level personnel and, as appropriate, to the governing authority, or an appropriate subgroup of the governing authority, on the effectiveness of the compliance and ethics program. To carry out such operational responsibility, such individual(s) shall be given adequate resources, appropriate authority, and direct access to the governing authority or an appropriate subgroup of the governing authority.

- (3) The organization shall use reasonable efforts not to include within the substantial authority personnel of the organization any individual whom the organization knew, or should have known through the exercise of due diligence, has engaged in illegal activities or other conduct inconsistent with an effective compliance and ethics program.
  - (4)
    - (A) The organization shall take reasonable steps to communicate periodically and in a practical manner its standards and procedures, and other aspects of the compliance and ethics program, to the individuals referred to in subparagraph (B) by conducting effective training programs and otherwise disseminating information appropriate to such individuals' respective roles and responsibilities.
    - (B) The individuals referred to in subparagraph (A) are the members of the governing authority, high-level personnel, substantial authority personnel, the organization's employees, and, as appropriate, the organization's agents.
  - (5) The organization shall take reasonable steps—
    - (A) to ensure that the organization's compliance and ethics program is followed, including monitoring and auditing to detect criminal conduct;
    - (B) to evaluate periodically the effectiveness of the organization's compliance and ethics program; and
    - (C) to have and publicize a system, which may include mechanisms that allow for anonymity or confidentiality, whereby the organization's employees and agents may report or seek guidance regarding potential or actual criminal conduct without fear of retaliation.
  - (6) The organization's compliance and ethics program shall be promoted and enforced consistently throughout the organization through (A) appropriate incentives to perform in accordance with the compliance and ethics program; and (B) appropriate disciplinary measures for engaging in criminal conduct and for failing to take reasonable steps to prevent or detect criminal conduct.
  - (7) After criminal conduct has been detected, the organization shall take reasonable steps to respond appropriately to the criminal conduct and to prevent further similar criminal conduct, including making any necessary modifications to the organization's compliance and ethics program.
- (c) In implementing subsection (b), the organization shall periodically assess the risk of criminal conduct and shall take appropriate steps to design, implement, or modify each requirement set forth in subsection (b) to reduce the risk of criminal conduct identified through this process.



CommentaryApplication Notes:1. Definitions.—For purposes of this guideline:

"Compliance and ethics program" means a program designed to prevent and detect criminal conduct.

"Governing authority" means the (A) the Board of Directors; or (B) if the organization does not have a Board of Directors, the highest-level governing body of the organization.

"High-level personnel of the organization" and "substantial authority personnel" have the meaning given those terms in the Commentary to §8A1.2 (Application Instructions - Organizations).

"Standards and procedures" means standards of conduct and internal controls that are reasonably capable of reducing the likelihood of criminal conduct.

2. Factors to Consider in Meeting Requirements of this Guideline.—

(A) In General.—Each of the requirements set forth in this guideline shall be met by an organization; however, in determining what specific actions are necessary to meet those requirements, factors that shall be considered include: (i) applicable industry practice or the standards called for by any applicable governmental regulation; (ii) the size of the organization; and (iii) similar misconduct.

(B) Applicable Governmental Regulation and Industry Practice.—An organization's failure to incorporate and follow applicable industry practice or the standards called for by any applicable governmental regulation weighs against a finding of an effective compliance and ethics program.

(C) The Size of the Organization.—

(i) In General.—The formality and scope of actions that an organization shall take to meet the requirements of this guideline, including the necessary features of the organization's standards and procedures, depend on the size of the organization.

(ii) Large Organizations.—A large organization generally shall devote more formal operations and greater resources in meeting the requirements of this guideline than shall a small organization. As appropriate, a large organization should encourage small organizations (especially those that have, or seek to have, a business relationship with the large organization) to implement effective compliance and ethics programs.

(iii) Small Organizations.—In meeting the requirements of this guideline, small organizations shall demonstrate the same degree of commitment to ethical conduct and compliance with the law as large organizations. However, a small organization may meet the requirements of this guideline with less formality and fewer resources than would be expected of large organizations. In appropriate

*circumstances, reliance on existing resources and simple systems can demonstrate a degree of commitment that, for a large organization, would only be demonstrated through more formally planned and implemented systems.*

*Examples of the informality and use of fewer resources with which a small organization may meet the requirements of this guideline include the following: (I) the governing authority's discharge of its responsibility for oversight of the compliance and ethics program by directly managing the organization's compliance and ethics efforts; (II) training employees through informal staff meetings, and monitoring through regular "walk-arounds" or continuous observation while managing the organization; (III) using available personnel, rather than employing separate staff, to carry out the compliance and ethics program; and (IV) modeling its own compliance and ethics program on existing, well-regarded compliance and ethics programs and best practices of other similar organizations.*

- (D) Recurrence of Similar Misconduct.—*Recurrence of similar misconduct creates doubt regarding whether the organization took reasonable steps to meet the requirements of this guideline. For purposes of this subparagraph, "similar misconduct" has the meaning given that term in the Commentary to §8A1.2 (Application Instructions - Organizations).*
3. Application of Subsection (b)(2).—*High-level personnel and substantial authority personnel of the organization shall be knowledgeable about the content and operation of the compliance and ethics program, shall perform their assigned duties consistent with the exercise of due diligence, and shall promote an organizational culture that encourages ethical conduct and a commitment to compliance with the law.*

*If the specific individual(s) assigned overall responsibility for the compliance and ethics program does not have day-to-day operational responsibility for the program, then the individual(s) with day-to-day operational responsibility for the program typically should, no less than annually, give the governing authority or an appropriate subgroup thereof information on the implementation and effectiveness of the compliance and ethics program.*

4. Application of Subsection (b)(3).—
- (A) Consistency with Other Law.—*Nothing in subsection (b)(3) is intended to require conduct inconsistent with any Federal, State, or local law, including any law governing employment or hiring practices.*
- (B) Implementation.—*In implementing subsection (b)(3), the organization shall hire and promote individuals so as to ensure that all individuals within the high-level personnel and substantial authority personnel of the organization will perform their assigned duties in a manner consistent with the exercise of due diligence and the promotion of an organizational culture that encourages ethical conduct and a commitment to compliance with the law under subsection (a). With respect to the hiring or promotion of such individuals, an organization shall consider the relatedness of the individual's illegal activities and other misconduct (i.e., other conduct inconsistent with an effective compliance and ethics program) to the specific responsibilities the individual is anticipated to be assigned and other factors such as: (i) the recency of the individual's*

*illegal activities and other misconduct; and (ii) whether the individual has engaged in other such illegal activities and other such misconduct.*

5. Application of Subsection (b)(6).—*Adequate discipline of individuals responsible for an offense is a necessary component of enforcement; however, the form of discipline that will be appropriate will be case specific.*

6. Application of Subsection (b)(7).—*Subsection (b)(7) has two aspects.*

*First, the organization should respond appropriately to the criminal conduct. The organization should take reasonable steps, as warranted under the circumstances, to remedy the harm resulting from the criminal conduct. These steps may include, where appropriate, providing restitution to identifiable victims, as well as other forms of remediation. Other reasonable steps to respond appropriately to the criminal conduct may include self-reporting and cooperation with authorities.*

*Second, the organization should act appropriately to prevent further similar criminal conduct, including assessing the compliance and ethics program and making modifications necessary to ensure the program is effective. The steps taken should be consistent with subsections (b)(5) and (c) and may include the use of an outside professional advisor to ensure adequate assessment and implementation of any modifications.*

7. Application of Subsection (c).—*To meet the requirements of subsection (c), an organization shall:*

- (A) *Assess periodically the risk that criminal conduct will occur, including assessing the following:*

(i) *The nature and seriousness of such criminal conduct.*

(ii) *The likelihood that certain criminal conduct may occur because of the nature of the organization's business. If, because of the nature of an organization's business, there is a substantial risk that certain types of criminal conduct may occur, the organization shall take reasonable steps to prevent and detect that type of criminal conduct. For example, an organization that, due to the nature of its business, employs sales personnel who have flexibility to set prices shall establish standards and procedures designed to prevent and detect price-fixing. An organization that, due to the nature of its business, employs sales personnel who have flexibility to represent the material characteristics of a product shall establish standards and procedures designed to prevent and detect fraud.*

(iii) *The prior history of the organization. The prior history of an organization may indicate types of criminal conduct that it shall take actions to prevent and detect.*

- (B) *Prioritize periodically, as appropriate, the actions taken pursuant to any requirement set forth in subsection (b), in order to focus on preventing and detecting the criminal conduct identified under subparagraph (A) of this note as most serious, and most likely, to occur.*

- (C) *Modify, as appropriate, the actions taken pursuant to any requirement set forth in subsection (b) to reduce the risk of criminal conduct identified under subparagraph (A) of this note as most serious, and most likely, to occur.*

*Background: This section sets forth the requirements for an effective compliance and ethics program. This section responds to section 805(a)(5) of the Sarbanes-Oxley Act of 2002, Public Law 107-204, which directed the Commission to review and amend, as appropriate, the guidelines and related policy statements to ensure that the guidelines that apply to organizations in this chapter "are sufficient to deter and punish organizational criminal misconduct."*

*The requirements set forth in this guideline are intended to achieve reasonable prevention and detection of criminal conduct for which the organization would be vicariously liable. The prior diligence of an organization in seeking to prevent and detect criminal conduct has a direct bearing on the appropriate penalties and probation terms for the organization if it is convicted and sentenced for a criminal offense.*

Historical Note: Effective November 1, 2004 (see Appendix C, amendment 673). Amended effective November 1, 2010 (see Appendix C, amendment 744); November 1, 2011 (see Appendix C, amendment 758); November 1, 2013 (see Appendix C, amendment 778).

Appendix B

**4.003 State University System Compliance and Ethics Programs**

- (1) Each board of trustees shall implement a university-wide compliance and ethics program (Program) as a point for coordination of and responsibility for activities that promote ethical conduct and maximize compliance with applicable laws, regulations, rules, policies, and procedures.
- (2) The Program shall be:
  - (a) Reasonably designed to optimize its effectiveness in preventing or detecting non-compliance, unethical behavior, and criminal conduct, as appropriate to the institution's mission, size, activities, and unique risk profile;
  - (b) Developed consistent with the Code of Ethics for Public Officers and Employees contained in Part III, Chapter 112, Florida Statutes; other applicable codes of ethics; and the Federal Sentencing Guidelines Manual, Chapter 8, Part B, Section 2.1(b); and
  - (c) Implemented within two (2) years of the effective date of this regulation.
- (3) Each board of trustees shall assign responsibility for providing governance oversight of the Program to the committee of the board responsible for audit and compliance. The charter required by Board of Governors Regulation 4.002(2) shall address governance oversight for the Program.
- (4) Each university, in coordination with its board of trustees, shall designate a senior-level administrator as the chief compliance officer. The chief compliance officer is the individual responsible for managing or coordinating the Program. Universities may have multiple compliance officers; however, the highest ranking compliance officer shall be designated the chief compliance officer. Nothing in this regulation shall be construed to conflict with the General Counsel's responsibility to provide legal advice on ethics laws. The chief compliance officer shall not be the same individual as the chief audit executive with the exception of New College of Florida and Florida Polytechnic University who may, due to fiscal and workload considerations, name the same individual as both chief audit executive and chief compliance officer.
- (5) The chief compliance officer shall report functionally to the board of trustees and administratively to the president. If the university has an established compliance program in which the chief compliance officer reports either administratively or functionally to the chief audit executive, then the university shall have five (5) years from the effective date of this regulation to transition the reporting relationship of the chief compliance officer to report functionally to the board of trustees and administratively to the president.

- (6) The office of the chief compliance officer shall be governed by a charter approved by the board of trustees and reviewed at least every three (3) years for consistency with applicable Board of Governors and university regulations, professional standards, and best practices. A copy of the approved charter and any subsequent changes shall be provided to the Board of Governors.
  
- (7) The Program shall address the following components:
  - (a) The president and board of trustees shall be knowledgeable about the Program and shall exercise oversight with respect to its implementation and effectiveness. The board of trustees shall approve a Program plan and any subsequent changes. A copy of the approved plan shall be provided to the Board of Governors.
  - (b) University employees and board of trustees' members shall receive training regarding their responsibility and accountability for ethical conduct and compliance with applicable laws, regulations, rules, policies, and procedures. The Program plan shall specify when and how often this training shall occur.
  - (c) At least once every five (5) years, the president and board of trustees shall be provided with an external review of the Program's design and effectiveness and any recommendations for improvement, as appropriate. The first external review shall be initiated within five (5) years from the effective date of this regulation. The assessment shall be approved by the board of trustees and a copy provided to the Board of Governors.
  - (d) The Program may designate compliance officers for various program areas throughout the university based on an assessment of risk in any particular program or area. If so designated, the individual shall coordinate and communicate with the chief compliance officer on matters relating to the Program.
  - (e) The Program shall require the university, in a manner which promotes visibility, to publicize a mechanism for individuals to report potential or actual misconduct and violations of university policy, regulations, or law, and to ensure that no individual faces retaliation for reporting a potential or actual violation when such report is made in good faith. If the chief compliance officer determines the reporting process is being abused by an individual, he or she may recommend actions to prevent such abuse.
  - (f) The Program shall articulate the steps for reporting and escalating matters of alleged misconduct, including criminal conduct, when there are reasonable grounds to believe such conduct has occurred.
  - (g) The chief compliance officer shall:
    - 1. Have the independence and objectivity to perform the responsibilities of the chief compliance officer function;
    - 2. Have adequate resources and appropriate authority;
    - 3. Communicate routinely to the president and board of trustees regarding Program activities;

4. Conduct and report on compliance and ethics activities and inquiries free of actual or perceived impairment to the independence of the chief compliance officer;
  5. Have timely access to any records, data, and other information in possession or control of the university, including information reported to the university's hotline/helpline;
  6. Coordinate or request compliance activity information or assistance as may be necessary from any university, federal, state, or local government entity;
  7. Notify the president, or the administrative supervisor of the chief compliance officer, of any unresolved restriction or barrier imposed by any individual on the scope of any inquiry, or the failure to provide access to necessary information or people for the purposes of such inquiry. In such circumstances, the chief compliance officer shall request the president remedy the restrictions. If unresolved by the president or if the president is imposing the inappropriate restrictions, the chief compliance officer shall notify the chair of the board of trustees committee charged with governance oversight of the Program. If the matter is not resolved by the board of trustees, the chief compliance officer shall notify the Board of Governors through the Office of Inspector General and Director of Compliance (OIGC);
  8. Report at least annually on the effectiveness of the Program. Any Program plan revisions, based on the chief compliance officer's report shall be approved by the board of trustees. A copy of the report and revised plan shall be provided to the Board of Governors;
  9. Promote and enforce the Program, in consultation with the president and board of trustees, consistently through appropriate incentives and disciplinary measures to encourage a culture of compliance and ethics. Failures in compliance or ethics shall be addressed through appropriate measures, including education or disciplinary action;
  10. Initiate, conduct, supervise, coordinate, or refer to other appropriate offices (such as human resources, audit, Title IX, or general counsel) such inquiries, investigations, or reviews as deemed appropriate and in accordance with university regulations and policies; and
  11. Submit final reports to appropriate action officials.
- (h) When non-compliance, unethical behavior, or criminal conduct has been detected, the university shall take reasonable steps to prevent further similar behavior, including making any necessary modifications to the Program.
- (8) The university shall use reasonable efforts not to include within the university and its affiliated organizations individuals whom it knew, or should have known (through the exercise of due diligence), to have engaged in conduct not consistent with an effective Program.

Authority: Section 7(d), Art. IX, Fla. Const.; History: New 11-3-16.

Appendix C

## **UCF Audit and Compliance Committee Charter**

### **1. Purpose**

The Audit and Compliance Committee (“Committee”) is appointed by the University of Central Florida Board of Trustees (“Board”) and assists the Board in discharging its oversight responsibilities. The committee oversees the following for the University of Central Florida (“University”) and its direct support organizations (“DSO”):

- internal control structure,
- independence and performance of internal and external audits and corrective actions plans,
- integrity of information technology infrastructure and data governance,
- independence and effectiveness of the compliance and ethics program,
- compliance with applicable laws and regulations,
- standards for ethical conduct,
- risk mitigation,
- and internal investigation processes.

### **2. Membership**

The Committee will consist of at least three members of the Board of Trustees.

Members will be independent and objective in the discharge of their responsibilities and free of any financial, family, or other material personal relationship that would impair their independence from management and the University.

The Chair of the Board will appoint the chair, vice chair, and additional members of the Committee. Members will serve on the Committee until their departure from the Board, resignation, or replacement by the Chair of the Board.

### **3. Experience and Education**

Members of the Committee should have professional experience and expertise in at least one of the following fields: post-secondary education, non-profit administration, law, banking, insurance and financial services, finance, accounting, financial reporting, auditing, risk management, or information technology.

As requested, the University and outside resources, as directed by the committee, may provide the Committee with educational resources relating to the Committee in maintaining and enhancing an appropriate level of financial and compliance literacy.

### **4. Meetings**

The Committee will meet as needed to address matters on its agenda, but not less frequently than three times each year.

A majority of the members of the Committee will constitute a quorum for the transaction of business.



Meeting agendas will be prepared jointly by the Committee chair, the chief audit executive, and the chief compliance and ethics officer taking into account recommendations from Committee members. Meeting agendas and appropriate briefing materials will be provided in advance to Committee members.

The Committee will maintain written minutes of its meetings.

The Committee may ask members of management or other individuals to provide pertinent information as necessary. In addition, the Committee may request special reports from University or DSO management on topics that may enhance its understanding of its activities and operations.

In addition to scheduled meetings of the full Committee, the Committee chair will meet with the chief audit executive and chief compliance and ethics officer on a regular basis or as needed.

The Committee is subject to Florida's Government in the Sunshine Law, as set forth in Chapter 286, Florida Statutes. The Sunshine Law extends to all discussions and deliberations as well as any formal action taken by the Committee.

## **5. Authority**

The Board authorizes the Committee to:

- Perform activities within the scope of its charter.
- Have unrestricted access to management, faculty, and employees of the University and its DSOs, as well as to all their books, records, and facilities.
- Study or investigate any matter related to audit, compliance, or related concerns such as potential fraud or conflicts of interest that the Committee deems appropriate.
- Engage independent counsel and other advisers as it deems necessary to discharge its duties.
- Provide oversight and direction of the internal auditing function, of external auditors, and of engagements with state auditors.
- Provide oversight and direction of the institutional compliance, ethics, and risk program, and be knowledgeable of the program with respect to its implementation and effectiveness.
- Perform other duties as assigned by the Board.

## **6. Roles and responsibilities**

With regard to each topic listed below, the Committee will:

#### **A. Internal Controls and Financial Statements**

- Evaluate the overall effectiveness of the internal control framework by reviewing audit reports and open audit issue status updates and investigation memorandum to determine if recommendations made by the internal and external auditors have been implemented by management.
- Make inquiries of management and the external auditors concerning the effectiveness of the University's system of internal controls.
- Determine whether the external auditors are satisfied with the disclosure and content of the financial statements, including the nature and extent of any significant changes in accounting principles.
- Review management's written responses to significant findings and recommendations of the auditors, including the timetable to correct weaknesses in the internal control system.
- Review the adequacy of accounting, management, and financial processes of the University and its DSOs.
- Review the financial reporting process implemented by management of the University and its DSOs.
- Review University and DSO management processes for ensuring the transparency of the financial statements and the completeness and clarity of the disclosures.

#### **B. External Audit**

- Receive and review audits by the State of Florida Auditor General.
- Receive and review audits of the direct support organizations and component units.
- Review and contract with external auditors for special audits or reviews related to the University's affairs and report the results of any such special projects to the Board.

#### **C. Internal Audit**

- Review the independence, qualifications, activities, performance, resources, and structure of the internal audit function and ensure no unjustified restrictions or limitations are made.
- Review the effectiveness of the internal audit function and ensure that it has appropriate standing within the University.
- Ensure that significant findings and recommendations made by the internal auditors and management's proposed response are received, discussed, and appropriately dispositioned.

- Review the proposed internal audit plan for the coming year or the multi-year plan and ensure that it addresses key areas of risk based on risk assessment procedures performed by Audit in consultation with management and the Committee.
- Obtain reports or notification concerning financial fraud resulting in losses in excess of \$10,000 or involving a member of senior management.

#### **D. Data Integrity**

- Review the adequacy of the university's information technology management methodology with regards to internal controls, including applications, systems, and infrastructure.
- Review the adequacy of the university's data management policies and procedures to ensure data security and data integrity in institutional reporting.

#### **E. Compliance and Ethics Program**

- Review and approve the Compliance Program Plan and any subsequent changes.
- Review the independence, qualifications, activities, resources, and structure of the compliance and ethics function and ensure no unjustified restrictions or limitations are made.
- Review the effectiveness of the compliance and ethics program in preventing or detecting noncompliance, unethical behavior, and criminal misconduct and ensure that it has appropriate standing and visibility across the University.
- Ensure that significant findings and recommendations made by the chief compliance and ethics officer are received, discussed, and appropriately dispositioned.
- Ensure that procedures for reporting misconduct, or ethical and criminal violations are well publicized and administered and include a mechanism that allows for anonymity or confidentiality, whereby members of the university community may report or seek guidance without the fear of retaliation.
- Review the effectiveness of the system for monitoring compliance with laws and regulations and management's investigation and follow-up (including disciplinary action) of any wrongful acts or non-compliance.
- Review the proposed compliance and ethics work plan for the coming year and ensure that it addresses key areas of risk and includes elements of an effective program as defined by Chapter 8 of the Federal Sentencing Guidelines.
- Obtain regular updates from the chief compliance and ethics officer regarding compliance and ethics matters that may have a material impact on the organization's financial statements or compliance policies.
- Review the findings of any examinations or investigations by regulatory bodies.

- Review the University and DSO conflict of interest policies to ensure that: 1) the term "conflict of interest" is clearly defined, 2) guidelines are comprehensive, 3) annual signoff is required, and 4) potential conflicts are adequately resolved and documented.

#### **G. Reporting Responsibilities**

- Regularly update the Board about its activities and make appropriate recommendations.
- Ensure the Board is aware of matters that may cause significant financial, legal, reputational, or operational impact to the University or its DSOs.
- Receive a summary of findings from completed internal and external audits and the status of implementing related recommendations.
- Receive a summary of findings from completed reports related to the compliance, ethics, or risk programs.

#### **H. Evaluating Performance**

- Evaluate the Committee's own performance, both of individual members and collectively, on a periodic basis and communicate the results of this evaluation to the Board.
- Review the Committee's charter annually and update as necessary.
- Ensure that any changes to the charter are discussed with the Board and reapproved.

*Approved by the UCF Board of Trustees January 13, 2017.*

Appendix D

## UNIVERSITY COMPLIANCE, ETHICS, AND RISK CHARTER

### **Purpose and Mission**

University Compliance, Ethics, and Risk provides oversight and guidance to university-wide ethics, compliance, and enterprise risk management activities, and fosters a culture that embeds these disciplines in all university functions and activities. The office provides centralized and coordinated oversight through the ongoing development of effective policies and procedures, education and training, monitoring, communication, risk assessment, and response to reported issues as required by Chapter 8 of the Federal Sentencing Guidelines and Board of Governors Regulation 4.003. These guidelines and regulation set forth the requirements of an effective compliance and ethics program and require promoting compliance with laws and ethical conduct.

The mission of the office is to support and promote a culture of ethics, compliance, risk mitigation, and accountability.

### **Reporting Structure and Independence**

University Compliance, Ethics, and Risk reports administratively to the president and the vice president and executive chief of staff, and functionally to the Audit and Compliance Committee of the Board of Trustees. This reporting structure promotes independence and full consideration of compliance, ethics, and risk recommendations and action plans.

The chief compliance and ethics officer and staff shall have organizational independence and objectivity to perform their responsibilities and all activities of the office shall remain free from influence.

### **Authority**

University Compliance, Ethics, and Risk has the authority to review or investigate all areas of the university, including its direct support organizations and faculty practice plan. Reviews and investigations shall not be restricted or limited by management, the president, or the Board of Trustees. University Compliance, Ethics, and Risk has unrestricted and timely access to records, data, personnel, and physical property relevant to performing compliance reviews and investigations, and to allow for appropriate oversight and guidance related to compliance, ethics, and risk mitigation efforts.

The chief compliance and ethics officer will notify the president and request remediation of any unresolved restriction or barrier imposed by any individual on the scope of any inquiry, or the failure to provide access to necessary information or people for the purposes of such inquiry. If unresolved by the president or if the inappropriate restriction is imposed by the president, the chief compliance and ethics officer will notify the chair of the Audit and Compliance Committee of the Board of Trustees. If not resolved, the chief compliance and ethics officer will notify the Board of Governors through the Office of the Inspector General and Director of

Compliance.

Documents and records obtained for the above purposes will be handled in compliance with applicable laws, regulations, and university policies and procedures. As required by law, University Compliance, Ethics, and Risk will comply with public records requests.

### **Duties and Responsibilities**

The duties and responsibilities of the chief compliance and ethics officer and staff include projects and activities that fulfill the requirements for an effective compliance and ethics program as required by Chapter 8 of the Federal Sentencing Guidelines and Board of Governors Regulation 4.003. The University Compliance, Ethics, and Risk Program (Program) will be reasonably designed to optimize its effectiveness in preventing or detecting noncompliance, unethical behavior, and criminal conduct. The Program's design supports mitigation of risks to the university and its employees and provides safe harbor in the event of misconduct or noncompliance. The following elements define the duties and responsibilities of the office:

1. Oversight of Compliance and Ethics and Related Activities
2. Development of Effective Lines of Communication
3. Providing Effective Training and Education
4. Revising and Developing Policies and Procedures
5. Performing Internal Monitoring, Investigations, and Compliance Reviews
6. Responding Promptly to Detected Problems and Undertaking Corrective Action
7. Enforcing and Promoting Standards through Appropriate Incentives and Disciplinary Guidelines
8. Measuring Compliance Program Effectiveness
9. Oversight and Coordination of External Inquiries into Compliance with Federal and State Laws and Take Appropriate Steps to Ensure Safe Harbor

The chief compliance and ethics officer and staff will:

- Develop a Program plan based on the requirements for an effective program. The Program plan and subsequent changes will be provided to the board of trustees for approval. A copy of the approved plan will be provided to the board of governors.
- Provide training to university employees and Board of Trustees' members regarding their responsibility and accountability for ethical conduct and compliance with applicable laws, regulations, rules, policies, and procedures. The Program plan will specify when and how often this training will occur.
- Obtain an external review of the Program's design and effectiveness at least once every five years. The review and any recommendations for improvement will be provided to

the president and Board of Trustees. The assessment will be approved by the Board of Trustees and a copy provided to the Board of Governors.

- Identify and provide oversight and coordination of compliance partners responsible for compliance and ethics related activities across campus and provide communication, training, and guidance on the Program and compliance and ethics related matters.
- Administer and promote the UCF IntegrityLine, an anonymous mechanism available for individuals to report potential or actual misconduct and violations of university policy, regulations, or law, and ensure that no individual faces retaliation for reporting a potential or actual violation when such report is made in good faith.
- Maintain and communicate the university's policy on reporting misconduct and protection from retaliation and ensure the policy articulates the steps for reporting and escalating matters of alleged misconduct, including criminal conduct, when there are reasonable grounds to believe such conduct has occurred.
- Communicate routinely to the president and the board of trustees regarding Program activities. Annually report on the effectiveness of the Program. Any Program plan revisions, based on the chief compliance and ethics officer's report, shall be approved by the Board of Trustees. A copy of the report and revised plan will be provided to the Board of Governors.
- Promote and enforce the Program, in consultation with the president and board of trustees, consistently through appropriate incentives and disciplinary measures to encourage a culture of compliance and ethics. Failures in compliance and ethics will be addressed through appropriate measures, including education or disciplinary action.
- Initiate, conduct, supervise, coordinate, or refer to other appropriate offices such inquiries, investigations, or reviews deemed appropriate in accordance with university regulations and policies, state statutes, and/or federal regulations.
- Make necessary modification to the Program in response to detected non-compliance, unethical behavior, or criminal conduct and take steps to prevent its occurrence.
- Assist the university in its responsibility to use reasonable efforts to exclude within the university and its affiliated organizations individuals whom it knew or should have known through the exercise of due diligence to have engaged in conduct not consistent with an effective Program.
- Coordinate or request compliance activity information or assistance as necessary from any university, federal, state, or local government entity. Oversee and coordinate external inquiries into compliance with federal and state laws and take appropriate

steps to ensure safe harbor in instances of non-compliance.

University Compliance, Ethics, and Risk provides guidance on compliance, ethics, and related matters to the university community. The office collaborates with compliance partners and senior leadership to review and resolve compliance and ethics issues and coordinate compliance and ethics activities, accomplish objectives, and facilitate the resolution of problems.

To ensure University Compliance, Ethics, and Risk staff has the capabilities to perform the duties and responsibilities as described the chief compliance and ethics officer will:

- Maintain a professional staff with sufficient size, knowledge, skills, experience, and professional certifications
- Utilize third-party resources as appropriate to supplement the department's efforts
- Perform assessments of the program and make appropriate changes and improvements

### **Professional Standards**

University Compliance, Ethics, and Risk adheres to the *Florida Code of Ethics* and the *Code of Professional Ethics for Compliance and Ethics Professionals*.

*The University Compliance, Ethics, and Risk Charter will be reviewed at least every three years for consistency with applicable Board of Governors and university regulations, professional standards, and best practices. Subsequent changes will be submitted to the Board of Trustees for approval. A copy of the charter and any subsequent changes will be provided to the Board of Governors.*

*Approved by the UCF Board of Trustees January 13, 2017*



Audit Committee - New Business

Appendix E

University Of Central Florida Compliance and Ethics Accountability Matrix						
Compliance Area	Vice President	Responsible Individual(s)	Compliance Partner	Compliance Activities		
Pre Award	Provost and Executive Vice President  Vice President for Research and Dean of the College of Graduate Studies	Director, Research Integrity & Compliance* Office of Research and Commercialization	Director, Research Integrity & Compliance* Office of Research and Commercialization	Sponsored Awards	Pre-award Requirements	
				Subrecipient Awards	Performance Reporting	Committed Effort Reporting
Post Award				Effort Reporting	Responsible Conduct	Export Compliance
				Cost Sharing	Allowable Costs	Indirect Cost
Research				Animal Research Required Training	Required Monitoring, Review and Oversight Conflicts of Interest	Human Subjects Research Required Training
Animal Subjects Research				Animal Welfare	Animal Protocols	Controlled Substances (in animal research)
				IACUC Operations	Documentation	
Human Subjects Research	Identification of Covered Research	Protocol Review	Adverse Event and Other Reporting			
	Approvals and Certification	IRB Operations Documentation	Subject Recruiting and Informed Consent			
Technology Transfer				Invention Disclosure	Patents	Contract Performance
				Disposition	Marketing	Contracting
Records & Registration/ Privacy (not HIPAA)/FERPA	Provost and Executive Vice President  Vice President for Student Development and Enrollment Services	Associate Vice President	Director* Registrar's Office	Student Records	Required Record Keeping	Training
			FERPA		Reporting	
Students		Director/Senior Associate AD* Learning Support Services	Student-athlete Advising	Student Disability Services		
		Associate Vice President and Dean of Students* Student Development and Enrollment Services	Student Rights and Responsibilities:	Clery Reporting	Student Records	
			Student Conduct		Drug Free Campus Act	
	Associate Vice President and Dean of Students*	Health & Counseling Centers:	Privacy	Risk Management		
		Billing Compliance	Stark, Anti-Kickback	HIPAA		
		Quality	Accreditation	Credentialing		
		Director, Integrity and Ethical Development* Office of Student Rights & Responsibilities	Student Integrity and Ethical Development	Training		

Audit Committee - New Business

Compliance Area	Vice President	Responsible Individual(s)	Compliance Partner	Compliance Activities		
Financial Aid	Provost and Executive Vice President	Associate Vice President*	Director, Student Financial Assistance* <i>Office of Student Financial Assistance</i>	Institutional Eligibility	Student Eligibility	Awards and Disbursements
Admissions	Vice President for Student Development and Enrollment Services		Associate Vice President* <i>Undergraduate Admissions</i>	Admissions		
Pegasus Health and College of Medicine	Vice President and General Counsel  Vice President for Medical Affairs and Dean of College of Medicine	Chief Legal Officer and Associate Vice President for Medical Affairs	Associate General Counsel, Legal Affairs & Special Projects* <i>College of Medicine</i>	HIPAA	Privacy	
			Manager, Legal Affairs and Health Care Compliance* <i>College of Medicine</i>	Billing Compliance Stark, Anti-kickback	Quality, Risk Management, Safety	Credentialing and Accreditation
Faculty Relations	Provost and Executive Vice President  Vice President and General Counsel	Associate General Counsel, Associate Provost	Associate Provost and Director of Operations* <i>Academic Affairs</i>	Discipline/Faculty Concerns	Collective Bargaining	Textbook Compliance Issues
Immigration (Taxes & SEVIS)	Provost and Executive Vice President  Vice President for Information Technologies and Resources	Vice Provost for UCF Global	Assistant Vice President* <i>International Affairs and Global Strategies</i>	Student Visa Regulations	SEVIS Reporting Obligations	Employee Visa Obligations
Technology Services		Associate Vice President & Chief Operating Officer	Information Security Officer* <i>Information Security Office</i>	Computer Use Email Web Publishing	Networking Telecomm Internet File Sharing	Records Management IT Project Management
Information Security				Information Security (for Hardcopy and Electronic Materials)		People Soft and Blackboard Security
Human Resources	Vice President for Administration and Finance and Chief Financial Officer	Associate Vice President for Human Resources and Chief HR Officer*	Associate Vice President for Human Resources and Chief HR Officer* <i>Human Resources</i>	Classification and Compensation Personnel Transactions	Recruiting Payroll Employee Health	Employee Relations Training and Development
Copyright and Licensing		Associate Vice President for University Services	Associate Vice President for University Services <i>University Services</i>	Granting Permissions Protecting University Rights	UCF Card University License Agreements	Obtaining Permissions Required Oversight or Notices
Dining Services Vendor Agreements				Food Acquisition Food Storage	Food Handling Staffing Controls	Required Certifications and Licenses

Audit Committee - New Business

Compliance Area	Vice President	Responsible Individual(s)	Compliance Partner	Compliance Activities		
Procurement			Director, UCF Procurement Services UCF Procurement Services*	Solicitation of Bids Diversity in Contracts		
Financial Reporting	Vice President for Administration and Finance and Chief Financial Officer	Associate Provost for Budget, Planning and Administration and Associate Vice President for Finance, Controller	Associate Provost for Budget, Planning and Administration and Associate Vice President for Finance, Controller <i>Finance and Accounting</i>	Financial Reporting	Fixed Assets	General Accounting
				Post Award G & C	Debt and Investments	
				Cost Accounting		
Accounts Payable/Receivable				Collections	Cashiering	Purchase and Travel Cards
				Disbursements	Travel	
Student Accounting				Student Tuition and Fee Assessment	Student Billing and Collection	Refunding Red Flags
Post Award Grants & Contracts		Post-award Requirements	Subrecipients Record Retention	Financial Reporting Receivables Management		
Taxes			Associate Director, Tax* <i>Finance and Accounting</i>	Taxes		
Financial Services		Associate Vice President for Debt Management*	Associate Vice President for Debt Management* <i>Debt Management/Financial Services</i>	Golden Knights Corp, UCF Finance Corp	Debt Management UCF Convocation Corporation	
Facilities Planning & Construction			Director, Resource Management <i>Facilities Operations</i>	Real Estate Acquisitions and Leases	Construction Contracts Management of Real Estate Holdings	
Hazard Risk Management		Associate Vice President for Facilities and Safety*	Director, Environmental Health and Safety* <i>Environmental Health and Safety</i>	Property and Liability Insurance	Physical Risk Control	Workers' Comp
Radiation Safety	Radioactive Materials			Waste Management	Radiation Safety	
	Radiation Producing Devices			Hazmat Requirements	Lab Safety	
	Laser Safety			Employee's Right to Know Statement	Personal Protective Equipment	
Chemical/Biological Safety	Select Agents and Toxins			Air Quality	Export Controlled Materials	
	Chemical Management	Artificial Gene Transfer	Recombinant DNA			
	Biological Safety	IBC Operations and Recordkeeping	Controlled Substances			
Fire & Occupational Safety			Building and Fire Codes	Ergonomics EM Safety		

Audit Committee - New Business

Compliance Area	Vice President	Responsible Individual(s)	Compliance Partner	Compliance Activities		
Campus Safety and Police		Associate Vice President and Chief of Police*	Associate Vice President and Chief of Police* <i>Police Department</i>	Crime Prevention	Campus Safety	Internet Crime
Workplace Safety				Workplace Violence & Threat Assessment	Drugs & Alcohol Violations	Weapons Violations
Emergency Management				Emergency Response and Preparedness	Continuity of Operations	Homeland Security Compliance
Office of Institutional Equity (OIE)	Vice President and Chief of Staff	Director, OIE*	Director, OIE* <i>Office of Institutional Equity</i>	Affirmative Action Plan Maintenance and Compliance	Discrimination Grievance Handling	Recordkeeping & Reporting Obligations
				Compliance with Title IX Requirements	Responding to External Complaints of Discrimination and Retaliation	Access/Disability Accommodations
Conflict of Interest Process	President	Chief Compliance and Ethics Officer*	Director of Compliance and Ethics* <i>University Compliance, Ethics, and Risk</i>	Training Reporting	Institutional Conflicts Oversight and Monitoring	Required Record Keeping
Athletics	President	Chief Compliance and Ethics Officer* Vice President and Director of Athletics	Senior Associate Athletic Director for Compliance* <i>Athletics Compliance</i>	Rules Compliance Monitoring	Documentation Eligibility	Education Financial Aid

\* Compliance and Ethics Advisory Committee Members

Appendix F



UNIVERSITY OF CENTRAL FLORIDA

# Employee Code of Conduct

## A Word from our President

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We all share the responsibility to conduct university business with integrity and uncompromising ethical standards. Compliance and ethics are a shared responsibility that require our vigilant attention, cooperation, and determination. My expectation is that each of you demonstrates an unwavering commitment to the highest standards of compliance and ethical behavior.

Our UCF creed emphasizes the core values of integrity, scholarship, community, creativity, and excellence. It is no accident that “integrity” heads the list. Integrity means doing the right thing, at all times. It means being honest, you have to be someone whose word can be trusted. Integrity also means being dependable, consistent, and accountable. We all want to work with someone principled who can be counted on to behave in an honorable way even when no one is looking.

You serve as a role model regardless of your position at UCF and your actions set the tone for a culture of compliance and ethics. Continue to hold yourself and each other accountable; know the laws, regulations, our policies, procedures, and ethical standards, and most important abide by them. This Employee Code of Conduct will help you in those efforts.

Thank you for your dedication, for your many contributions on campus and off, and for being such positive role models for your fellow Knights.

Keep reaching for the stars, GO KNIGHTS, and charge on!

Cordially yours,

**John C. Hitt**  
**President**



## MISSION STATEMENT

We are a public multi-campus, metropolitan research university that stands for opportunity. Our university anchors the Central Florida city-state in meeting its economic, cultural, intellectual, environmental, and societal needs by providing high-quality, broad-based education, and experience-based learning; pioneering scholarship and impactful research; enriched student development and leadership growth; and highly relevant continuing education and public service initiatives that address pressing local, state, national, and international issues in support of the global community.

### The five visionary goals that guide UCF

1. Offer the best undergraduate education available in Florida
2. Achieve international prominence in key programs of graduate study and research
3. Provide international focus to our curricula and research programs
4. Become more inclusive and diverse
5. Be America's leading partnership university

### UCF Collective Impact Strategic Plan - Our Promise

**Harness the power of scale** to transform lives and livelihoods.

**Attract and cultivate exceptional and diverse faculty, students, and staff** whose collective contributions strengthen us.

**Deploy our distinctive assets** to solve society's greatest challenges.

**Create partnerships at every level** that amplify our academic, economic, social, and cultural impact and reputation.

**Innovate academic, operational, and financial models** to transform higher education.

# Contents

<b>HONESTY AND INTEGRITY:</b>	
<b>OUR GUIDING PRINCIPLES</b>	<b>5</b>
The Purpose of the UCF Employee	
Code of Conduct	<b>6</b>
UCF Ethical Standards	<b>7</b>
Doing the Knight Thing	<b>8</b>
Asking Questions, Raising Concerns	<b>10</b>
UCF IntegrityLine	<b>11</b>
Protection from Retaliation	<b>12</b>
<b>RESPECT: OUR COMMITMENT</b>	
<b>TO EACH OTHER</b>	<b>13</b>
Dignity and Respect	<b>14</b>
Engaging, Exploring, and Advancing an Inclusive Culture	<b>15</b>
Equal Opportunity	<b>15</b>
<b>RESPONSIBILITY AND ACCOUNTABILITY:</b>	
<b>OUR COMPLIANCE COMMITMENTS</b>	<b>17</b>
Compliance and Ethics at UCF	<b>18</b>
Health, Safety, and Security in the Workplace	<b>19</b>
International Considerations	<b>20</b>
Research Integrity and Compliance	<b>21</b>
Intellectual Property and Copyrighted Material	<b>22</b>
Records Management	<b>23</b>
Information Privacy and Security	<b>24</b>
External Communications	<b>26</b>
<b>STEWARDSHIP: OUR DUTY AS</b>	
<b>PUBLIC EMPLOYEES</b>	<b>27</b>
Fiscal Responsibilities	<b>28</b>
Florida Code of Ethics for Public Employees	<b>29</b>
Avoiding Conflicts	<b>30</b>
Outside Activity and Conflict of Interest and Commitment Disclosure	<b>32</b>
<b>ADDITIONAL GUIDANCE &amp; RESOURCES</b>	<b>33</b>
Ethical Decision-Making	<b>34</b>
University Contacts	<b>35</b>
FAQs	<b>36</b>





# Honesty and Integrity: Our Guiding Principles



## THE PURPOSE OF THE UCF EMPLOYEE CODE OF CONDUCT

There are many laws, regulations, UCF policies, and ethical standards that we, as employees, are already expected to follow. The purpose of this Employee Code of Conduct is to provide one guiding document that highlights many of these requirements, and that can serve as a resource for employees when faced with questions or ethical dilemmas.

The UCF Employee Code of Conduct is part of UCF's comprehensive compliance and ethics program, supported by the UCF Board of Trustees, the president, and senior leadership. University Compliance, Ethics, and Risk oversees our compliance and ethics program with support from the Compliance and Ethics Advisory Committee and compliance partners.

Please read this Employee Code of Conduct carefully. All employees are required to follow the UCF Employee Code of Conduct. Students are required to follow The Golden Rule.

This UCF Employee Code of Conduct does not cover every law, regulation, or policy that applies to all employees, and it does not replace department, program, or unit codes of conducts or standards.



## UCF ETHICAL STANDARDS

UCF is founded on integrity and expects members of the university community to demonstrate an unwavering commitment to the highest standards of excellence and ethical behavior. As individual members of the university community, our behavior is a reflection of who we are and affects not only our reputation, but also the reputation of the university. The following ethical principles and values guide members of the university community in all decisions and actions:

### **Honesty and Integrity**

We are fair and honest in all of our activities and avoid actual or perceived conflicts of interests or commitments. We strive for transparency in our actions and do not allow plagiarism, lying, deliberate misrepresentation, theft, fraud, or cheating.

### **Respect**

We treat everyone with respect and dignity; we embrace, celebrate, and value diversity and inclusion. We respect the ideas of others, even when they differ from our own. We do not tolerate harassment, mistreatment, belittling, harming, or taking advantage of others.

### **Responsibility and Accountability**

We honor our commitments and take responsibility for our actions. We comply with all applicable laws, regulations, and policies, ensuring that all of our decisions are legal and ethically sound. We recognize our obligation to report unethical and illegal conduct.

### **Stewardship**

We use resources and information entrusted to UCF to support the university's vision, mission, and strategic goals. We do not use them for personal benefit, gain, or favor.



## DOING THE KNIGHT THING

Doing the Knight Thing means doing the right thing. Here at UCF, we promote a culture of integrity, trust, and respect, which is consistent with the UCF Creed. Since the UCF Creed's inception in 2001, the UCF community has consistently lived by its five tenets and those tenets remain just as relevant, if not more relevant, today.

### **The UCF Creed**

Integrity, scholarship, community, creativity, and excellence are the core values that guide our conduct, performance, and decisions.

### **Integrity**

I will practice and defend academic and personal honesty.

### **Scholarship**

I will cherish and honor learning as a fundamental purpose of my membership in the UCF community.

### **Community**

I will promote an open and supportive campus environment by respecting the rights and contributions of every individual.

### **Creativity**

I will use my talents to enrich the human experience.

### **Excellence**

I will strive toward the highest standards of performance in any endeavor I undertake.

Carefully read this Employee Code of Conduct, including the UCF Ethical Standards, and the UCF Creed. These resources will help you to identify the right course of action for most situations.

**If you are unsure of the right action to take, ask yourself:**

- Is it legal?
- Does it align with UCF standards and values?
- Would it violate UCF regulations or policies?
- Could it affect you financially or provide a personal benefit to you?

If you are still uncertain of the right thing to do in a given situation and need more assistance, consult with your supervisor, compliance partner of the related compliance area, University Compliance, Ethics, and Risk, or submit an inquiry through the UCF IntegrityLine. For more guidance on making the right decision, refer to the Ethical Decision-Making section of this Code of Conduct.

**Supervisors and managers have the added responsibility of:**

- Leading by example
- Setting clear expectations
- Supporting a respectful and professional work environment
- Promoting a culture where employees feel comfortable asking questions and raising concerns

Discuss expectations with your employees and provide them with the resources they need to follow this Employee Code of Conduct. Support an environment where employees feel empowered to ask questions and voice concerns. Always remember that employees raising concerns in good faith must never be retaliated against.



## ASKING QUESTIONS, RAISING CONCERNS

### Speak Up

Reflecting on our own actions is often the most effective way to maintain high standards of professionalism and ethical behavior. However, there may come a time when you will witness an employee acting contrary to this Employee Code of Conduct. Doing the right thing means acting with honesty and integrity and speaking up when you know of or suspect unethical behavior.

Employees, who in good faith believe that a violation of law, regulation, statute, UCF regulation, policy, procedure, guideline, or standard of conduct has occurred, or will occur, are expected and encouraged to promptly make a report of such suspected misconduct. Employees do not need to have details of the law or policy to suspect misconduct. It is better to report the suspected misconduct than to remain silent. Management has a special duty to recognize and report misconduct without reasonable delay.

Speak Up if you have ethical concerns about:

- Policy or regulation violations
- Conflicts of interest or commitment
- Financial matters
- Research misconduct
- Other questionable or unethical activity

### Where to Report - Options

There are several options for reporting concerns. You may choose to report:

- to your supervisor
- through central or administrative offices having specialized expertise relating to the concern
- to the UCF IntegrityLine
- or directly to University Compliance, Ethics, and Risk

Concerns related to potential fraud should be reported directly to University Audit. Sex or gender-based discrimination or harassment, sexual harassment, sexual assault, sexual exploitation, relationship violence, or stalking involving a student must immediately be reported to the Office of Institutional Equity or the Title IX Coordinator (if you are not a confidential employee). More information on this mandatory reporting requirement and contact information is available at the [UCF Shield website](#).

### Q&A

#### What if I am not sure I witnessed misconduct, do I still report the incident?

You do not need to have details of a law or policy to suspect misconduct. If you witnessed an incident that is not consistent with our UCF Ethical Standards or the UCF Creed, you should report the incident. It is better to report the suspected misconduct than to remain silent.



## UCF INTEGRITYLINE

Employees reluctant to report suspected misconduct directly to their supervisors or through university administrative or central offices are encouraged to use the UCF IntegrityLine.

The UCF IntegrityLine is a secure reporting system administered by an independent third-party. The IntegrityLine is available 24 hours a day, 365 days a year, and is available at [UCF IntegrityLine](#), or by calling 1-855-877-6049 toll-free. Individuals who may be reluctant to report suspected misconduct through university administrative or central offices have a way to report with complete anonymity.

IntegrityLine reports are processed by the third party and sent to University Compliance, Ethics, and Risk to address appropriately. All reports will be reviewed, investigated, and responded to as discreetly and promptly as possible.

### Q&A

#### **Can I really remain anonymous when reporting through the UCF IntegrityLine?**

Yes. The third-party does not generate or maintain any internal connection logs with IP addresses, so no information linking your PC is available. If you call in your report, an interviewer will simply type your responses into the website for you. Callers are not traced or recorded.

After submitting your report, you will receive a unique code referred to as a "report key." You will use this report key along with the password of your choosing to check in using the website or telephone. This allows you the opportunity to review follow-up questions, submit more information about the incident, or receive a status update.





## PROTECTION FROM RETALIATION

At UCF, we expect all employees to conduct university activities and business in an honest, ethical, and lawful manner. When we become aware of or have reason to suspect that an employee is not acting in this manner. We are expected to make a good faith report of suspected misconduct. Retaliation in response to reporting will not be tolerated. Knowingly making a false report or reporting with malice or reckless disregard for the truth is also prohibited.

Retaliation is an adverse or credible threat of an adverse employment action taken against an employee who submitted a good faith report of misconduct or participated in a misconduct investigation. Types of retaliation can include dismissal from employment, demotion, loss of salary or benefits, transfer or reassignment, denial of an earned promotion, and unwarranted written notice

or negative performance review.

To learn more, please review the [Reporting Misconduct and Protection from Retaliation Policy](#).

If you suspect retaliation in response to reporting a concern or participating in an investigation, please immediately contact [University Compliance, Ethics, and Risk](#) or file a report through the UCF IntegrityLine.



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*“As universities across the country and people around the world confront intolerance, hostility, and injustice, I join our UCF family in affirming the dignity of the individual and the respect for all people.”*

*John C. Hitt, University President*

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# Respect: Our Commitment to Each Other



## DIGNITY AND RESPECT

Here at UCF, we treat each other with dignity and respect. We embrace, celebrate, and value diversity and inclusion and that means that we respect the ideas of others, even when they differ from our own.

In all of our interactions, we are committed to being respectful and positive, and to maintaining an empowering and welcoming environment.

We do not tolerate harassment, mistreatment, belittling, harming, or taking advantage of others.

### Q&A

**A coworker sent a photograph with an offensive caption to some of us in the department via email. No one seemed bothered by it, but I found it offensive. Should I confront them or just let it go?**

We have an obligation to maintain a supportive and inclusive environment for all of our employees. Language or behavior that is offensive will not be tolerated.

If you feel uncomfortable speaking to your coworker directly, you can consult your department supervisor, Human Resources, the UCF IntegrityLine, or University Compliance, Ethics and Risk.

## ENGAGING, EXPLORING, AND ADVANCING AN INCLUSIVE CULTURE

We are strongest as an educational institution, employer, and community leader when we bring diverse thought and experience to our decision-making, teaching, research, and interactions with community members. Accordingly, all members of our university community have a responsibility to treat each other with consideration and respect.

Recognizing that each of us is an intersection of many aspects of diversity emphasizes the complexity of our experiences and the need to develop a culture that appreciates difference and sees diversity as a strength in our role as educational leaders.

### We are committed to:

- engaging with each other, recognizing and valuing each life as exceptional, in agreement or disagreement, in a manner that appreciates our distinctive experience and perspective as an opportunity to learn and to professionally achieve our highest potential, and
- contributing to and holding each other accountable for a culture that honors diversity, expects nondiscriminatory language, acknowledges the dignity of every individual, welcomes the opportunity to learn from and empower each other, recognizes that we are all a collection of identities and experiences rather than a living symbol of a singular stereotype.

Our commitment to diversity and inclusion is demonstrated through the many efforts of the [Office of Diversity and Inclusion](#).

## EQUAL OPPORTUNITY

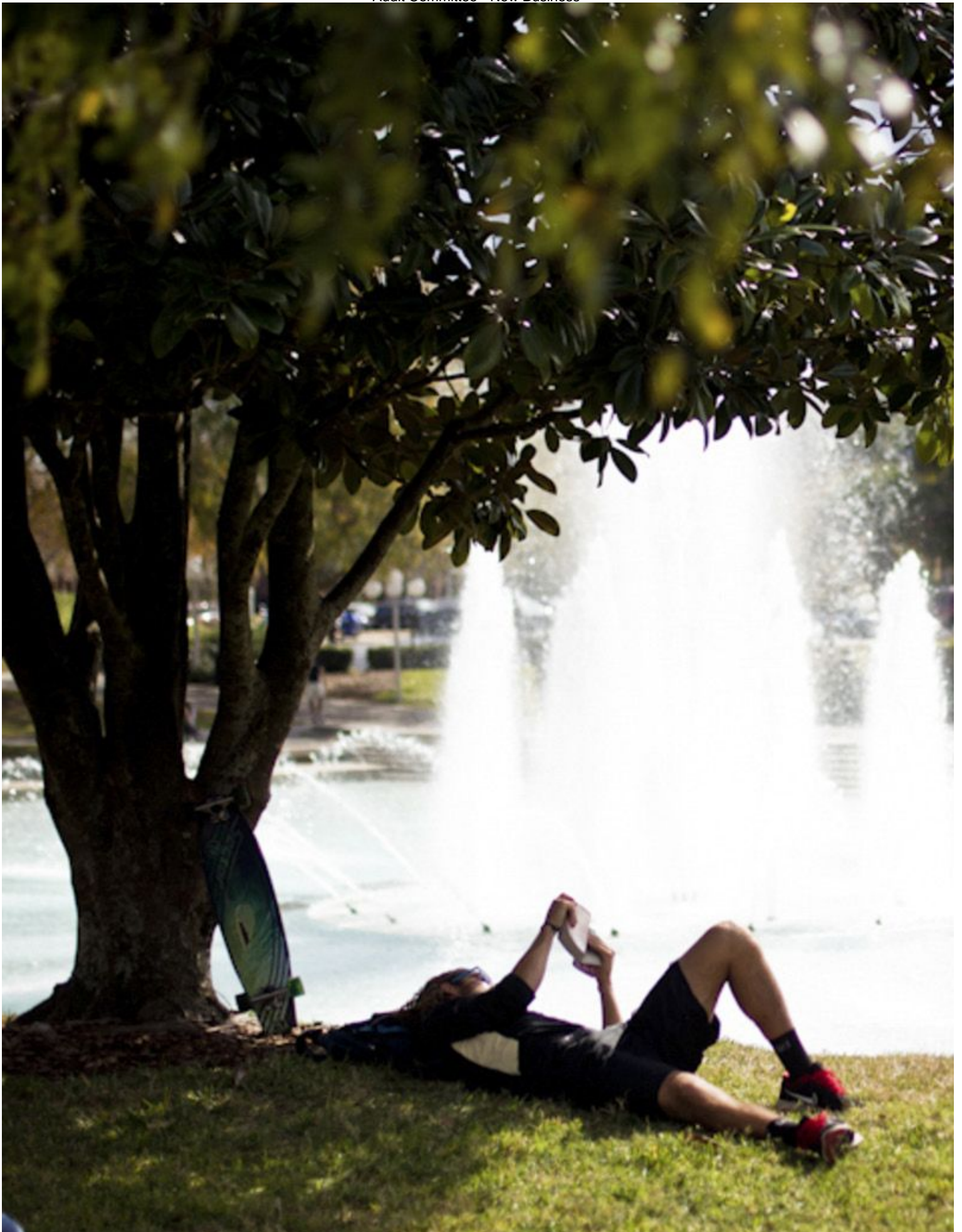
Our university is committed to providing access to education and employment without regard to race, ethnicity, color, sex (including pregnancy and parental status), sexual orientation, gender identity, gender expression, age, national origin, religion (or non-religion), physical or mental disability, marital status, genetic information, political affiliations, prior conviction of a crime, veteran's status, or membership in any other protected classes as set forth in state and federal law. This includes providing reasonable accommodations for employees' and students' disabilities or religious beliefs and practices and ensuring equitable hiring practices. This also includes the prohibition of inappropriate amorous relationships with students and other employees. More information is available on the [Office of Institutional Equity website](#).

We have zero tolerance for any form of discrimination or discriminatory harassment, including sex discrimination, sexual harassment, sexual assault, relationship violence, and stalking. Information and resources for employees is available the [UCF Shield website](#).

### Related Policy and Regulation:

UCF-3.001 Non-Discrimination; Affirmative Action Programs

UCF 2-004 Prohibition of Discrimination, Harassment and Related Interpersonal Violence



# **Responsibility and Accountability: Our Compliance Commitments**

## COMPLIANCE AND ETHICS AT UCF

Compliance with laws, regulations, policies, procedures, and standards of conduct rests with each of us at UCF. By doing our part, we are preserving the distinguished reputation of our university, as well as the careers, professional reputations, and future of all of our faculty, staff, and students.

In 2011, we formed the University Compliance, Ethics, and Risk office, led by the chief compliance and ethics officer. This office is charged with implementing and sustaining a comprehensive compliance and ethics program based on the key elements of The United States Federal Sentencing Guidelines and the Florida Code of Ethics for Public Officers and Employees. Compliance partners are embedded within each operational unit and lead targeted compliance programs across the university. The members of the Compliance and Ethics Advisory Committee (CEAC) assist in the development of a comprehensive compliance and ethics program and mitigating the compliance and ethics risks at UCF. The purpose of the committee and compliance partner involvement is to ensure consistent communication and development of compliance and ethics programs across the university and promoting a culture of ethics, accountability, and compliance at UCF.

***Working together, we form the university's comprehensive compliance and ethics program.***

For a list of compliance partners, including their departments and respective compliance responsibilities, refer to the **Accountability Matrix**. To view the list of CEAC members, refer to the **CEAC webpage**.

### Q&A

#### **Where can I find the policies and regulations that I am supposed to follow?**

The online repository of our policies and procedures is [available here](#). Our regulations are located [on this website](#). You should also consult your department, program, or unit's policies and procedures.

#### **How do I know when policies and regulations are added or updated?**

You can subscribe to notifications on the policies and regulations websites.

## HEALTH, SAFETY, AND SECURITY IN THE WORKPLACE

### Safe working environment

It is our duty to maintain a safe workplace by:

- Knowing and adhering to the workplace health and safety laws, university regulations, and policies applicable to us
- Correcting unsafe practices and conditions that are within our control
- Respecting the university officials who enforce the rules
- Participating in required drills and safety training
- Reporting incidents, injuries, and unsafe practices or conditions without delay

### Sustainability Initiatives

We are committed to energy sustainability and ensuring a productive environment for all members of the university community. Information on our sustainability initiatives and the role employees play in those efforts is available at [UCF Sustainability Initiatives website](#).

### Alcohol, Drugs, and Smoking

Being under the influence of illicit drugs or alcohol negatively affects our ability to perform our jobs and creates an unsafe environment for ourselves and others. We prohibit the possession, use, sale, and distribution of alcoholic beverages on university-owned or controlled property, or in the course of a university activity, except as permitted by law and authorized by the university. The unauthorized use, possession, sale, distribution, or attempt to obtain any narcotic or controlled substance is also prohibited on university-owned or controlled property or in the course of a university activity, except as permitted by law. The use of university-owned or controlled facilities to manufacture, process, or distribute any drug or controlled substance contrary to law is also prohibited. Additionally, we prohibit smoking on all university owned, operated, leased, and controlled properties to maintain a healthy and safe environment for our faculty, staff, students, and visitors.

### Weapons

At UCF, we prohibit the possession, use, or storage of weapons on property owned or controlled by the university, including in a university vehicle, on one's person, or in one's office or residence hall unless approved by the university. Additionally, the possession, use, or storage of weapons at events sponsored or hosted at UCF, without university approval, is also prohibited.

#### Related Policies and Regulation:

UCF 3-120 University Smoke-Free Policy

UCF 3-122 Campus Safety and Health Policy

UCF 3-115.1 Alcoholic Beverages on Campus

UCF 3-119.1 Weapons on University Property and at University Events

UCF Drug-Free Policy

UCF-4.035 Alcoholic Beverages on Campus

## INTERNATIONAL CONSIDERATIONS

### Complying with laws of other countries

Through our international partnerships and study abroad programs, some of our actions and activities will be subject to the laws of other countries. In addition to following the Employee Code of Conduct, we are required to know and follow these laws. If you have questions, contact the Office of the General Counsel or UCF Global for guidance.

### Anti-corruption and Bribery

Each of us has an obligation to comply with the U.S. Foreign Corrupt Practices Act and all country-specific anti-bribery and anti-corruption laws. These laws generally state that you may not give, promise, or offer anything of value, no matter how small, to anyone for the purpose of improperly influencing a decision, securing an advantage, avoiding a disadvantage, or obtaining or retaining business. If you engage in such behavior, you expose yourself and the university to civil and criminal liability and significant reputational harm; you also undermine the trust that our students, their parents, and the community have placed in us. If someone asks you to violate these laws, you must immediately notify the Office of the General Counsel or University Compliance, Ethics, and Risk, or you can submit a report through the UCF IntegrityLine.

### Export Controls

We encourage and support open research and the free exchange of ideas, but we are also committed to complying with United States export control laws, regulations, economic sanctions and trade embargoes. These laws control the release of certain technologies and information outside of the U.S. and to foreign nationals within the U.S. and exist to protect our country, its citizens, and the innovative superiority of the U.S. for reasons of national security, foreign policy, competitive trade, and the proliferation of weapons of mass destruction or military technologies. If you are traveling abroad or engaging in distance learning, or activities that may be subject to export control laws, please contact the [Office of Export Control Compliance](#) for guidance.

## Q&A

### What activities are subject to export controls?

Research, distance learning, foreign travel, international monetary exchange, provisioning or providing international service activities, providing technical assistance, advice, guidance or know-how related to export controlled technologies, international shipments or exports and imports of certain goods and technologies

### Research activities include:

Any type of proprietary information, technical data, trade secret, or non-public know-how, cook-books, recipes, methods, etc. may be subject to export controls. Modifying or enhancing publicly available technology and software creates a new item that may be subject to export controls to the extent that it is not intended to be made publicly available. The extent to which research is subject to export controls depends upon certain variables. Contact the [Office of Export Control Compliance](#) for additional guidance.

### Related Policies:

- UCF 2-900 International Academic Agreements
- UCF 2-901 UCF Policy for All Foreign Nationals
- UCF 2-903.2 Travel to Restricted Destinations
- UCF 4-209 Export Control Policy



## RESEARCH INTEGRITY AND COMPLIANCE

Our [Office of Research and Commercialization](#) works to ensure that research is conducted with the highest standards of integrity and in accordance with regulatory guidelines set forth by our university and the federal government. By preserving the standards of research, we hope to encourage innovative thinking and foster honesty and free-thinking in our students, graduates, faculty, and staff members. To help us achieve these goals, we have developed specific guidelines to follow when conducting research. See the related policies for more information.

**The Office of Research and Commercialization works to ensure conduct in the following areas:**

- Conflict of Interest
- Research Misconduct
- Export Control Compliance
- Effort Reporting and Certification
- Facility Security
- Office of Animal Welfare

All UCF employees who oversee or provide administrative support during research must follow all relevant laws, regulations, and policies. If you have questions or concerns, you may contact the [Office of Research and Commercialization](#) for assistance.

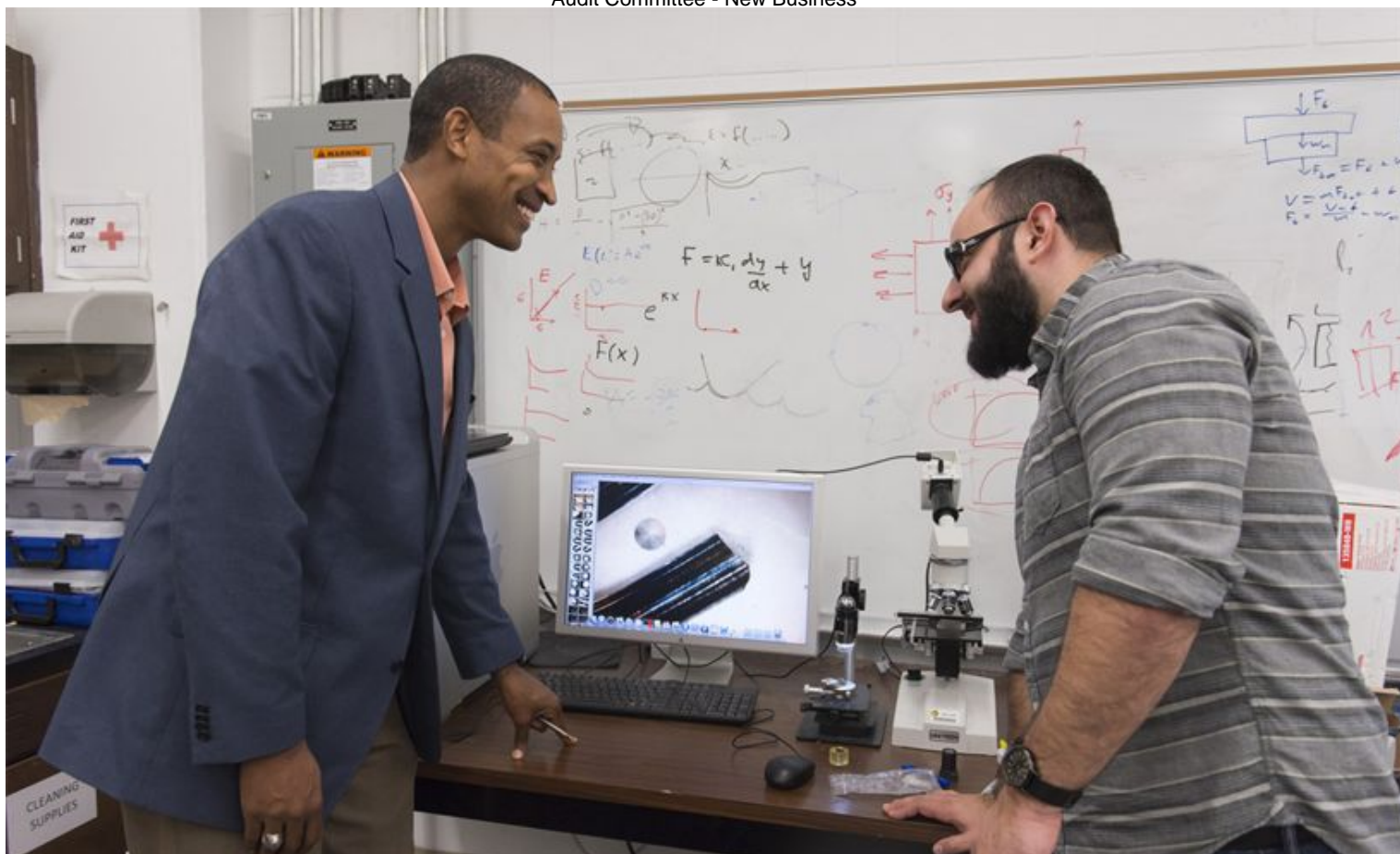
### Related Policies:

UCF 4-202.1 Human Research Protections

UCF 4-211 Research Misconduct Policy

UCF 4-504.2 Reporting a Potential Conflict of Interest or Conflict of Commitment in Research





## INTELLECTUAL PROPERTY AND COPYRIGHTED MATERIAL

### Intellectual Property

Intellectual property can include any inventions, literary and artistic works, symbols, names, images, and designs used in commerce that are produced or used within the university. We must be diligent in protecting UCF's intellectual property through measures such as forming non-disclosure and non-compete agreements, limiting the sharing of information with the public, keeping records in secure areas, and following clear guidelines as to the ownership of property and categorization of information as confidential. Different types of intellectual property are protected by separate laws. For more information on the various types of intellectual property and their protection, visit the [Intellectual Property website](#). You may also contact the [Office of the General Counsel](#).

### Copyrighted Material

All employees must be aware of and abide by all applicable copyright laws which includes protections for works of literature, music, drama, film, sculpture,

visual art, architecture, and other creative media. Before using any materials, we must check to ensure that they are not protected under copyright law, and if they are, must obtain the owner's permission prior to such use. Employees may contact the Office of the General Counsel or the [UCF Library Reference Department](#) with any questions on copyrighted materials.

### Related Resources:

UCF 2-103.2 Use of Copyrighted Material

UCF-2.029 Patents, Trademarks and Trade Secrets

UCF-2.033 Copyrights and Works

UCF Higher Education Opportunity Act Compliance Program for Peer-to-Peer File Sharing and Copyrighted Material

## RECORDS MANAGEMENT

### Public Records

We must be aware of and comply with Florida's public records law and Florida's retention schedules for public records. Most documents, including email messages and text messages, created or received by employees in connection with official business are public records. Unless a public record is exempt by statute, it must be produced to any person upon request with any exempt information removed. Before responding to any public records request, refer to university policy. For specific questions regarding public records laws, contact the Office of the General Counsel.

### Preserving Information

We preserve the institutional memory of our university by maintaining a complete archive of its history and accomplishments and to preserve that history in the University Archives. Employees create and maintain university public records in the course of their duties. It is the responsibility of all employees who create and maintain university public records in the course of our duties, in cooperation with the University Archives unit, to ensure that our university public records that document the history and activities of the university community are transferred to the University Archives for preservation. More information on this state requirement is available in the **Florida General Records Schedule GS5**.

Materials of historical interest include but are not limited to:

- administrative files
- financial documents
- reports, statistics
- strategic plans
- self-studies
- mission statements
- brochures, newsletters
- publications
- photographs
- multimedia materials

### Q&A

#### Does a public records request have to be in writing?

No, it may be made in writing or orally. The requestor also does not have to provide a legitimate need for the record. Be sure to read the policy on complying with public records requests.

### Related Policies:

UCF 2-100.4 Florida Public Records Act: Scope and Compliance

UCF 4-005.1 University Archives



## INFORMATION PRIVACY AND SECURITY

### Data and Information Privacy

As an institution of higher learning, we encourage, support, protect, and embrace freedom of expression to pursue scholarly inquiry and to share information with the global academic community. At the same time, we are expected to be familiar with and comply with university policies and regulations, and federal and state requirements governing privacy protections, such as:

- Family Educational Rights and Privacy Act (FERPA)
- Health Insurance Portability and Accountability Act (HIPAA)
- Health Information Technology for Economic and Clinical Health Act (HITECH)
- Defense Federal Acquisition Regulations (DFAR) and Federal Acquisition Regulation (FAR) requirements on Controlled Unclassified Information
- Other relevant regulations or contractual obligations such as Payment Card Industry Data Security Standards (PCI DSS)

### Q&A

**In my position at UCF, I handle student information quite often. Where can I find a quick guide or tip sheet to help me stay in compliance with FERPA?**

Resources on FERPA are available on the [Registrar's Office](#) website, including a page on [FERPA](#) and the following reference sheets:  
[FERPA Reference Sheet for UCF Staff](#)  
[FERPA Reference Sheet for UCF Faculty](#)

FERPA addresses the privacy of student education records. HIPAA is a comprehensive law and regulation that addresses the use and disclosure of individuals' protected health information by health care providers, health plans, and their contractors, and provides individuals rights to understand and

control use of their health information. Family Medical Leave Act (FMLA) records are covered under HIPAA. PCI DSS stipulates information security controls on technology and business processes that manage and store credit card data.

We all must protect the confidentiality, integrity, and availability of information generated, accessed, modified, transmitted, stored, or used by the university, regardless of the medium on which the information resides.

### Data and Information Security

Individuals working for or on behalf of our university who create, view, or manage university data are responsible for implementing appropriate managerial, operational, physical, and technical controls for access to, use of, transmission of, storage of, and disposal of university data in compliance with our policies. The UCF information security officer must be notified immediately if data classified as highly restricted or restricted is suspected of being compromised. In the event of a suspected information security incident, do not attempt to take action on your own, but preserve information as much as possible and contact University's Security Incident Response Team (SIRT) at [sirt@ucf.edu](mailto:sirt@ucf.edu).

As we continue to become increasingly reliant on technology, it is important that we take steps to protect information that we use, store, and send digitally. We follow security requirements and best practice guidelines specific to the proper and ethical use of technology to ensure the privacy and security of protected information. These requirements and best practice guidelines were created by federal, state, and UCF policymakers and continue to grow or develop as cybersecurity threats evolve and demands on technology changes.

To protect cyber security and privacy, report all suspected security and privacy incidents, which include but are not limited to:

- Unauthorized attempts (either failed or successful) to gain access to a system or data
- Unwanted disruption or denial of service
- Unauthorized use of a system for processing or storing data
- Inappropriate usage under university policy
- Theft or loss of university computing equipment

It is critical to follow these requirements when using our university's computing services or handling institutional data:

- Do not share your university password or use your university password on non-UCF websites
- Do not store university data in a personally owned storage device or cloud storage location, such as iCloud, and Google Drive
- Do not send Highly Restricted data via email without approval - data encryption is required
- Use encryption when storing highly restricted data – only use university provided secure location/servers for this purpose
- Do not open email attachments or click on links in an email without properly vetting the sender and the link - Examine carefully the sender and verify with the sender before opening attachments. Examine carefully the link (hover over with mouse pointer) to see where it's going to direct you, and copy and paste the link into your browser
- Before entering personal information, such as username and password, on a website, always make sure the website address is correct and legitimate, and is secured using "https"
- Do not collect credit card or bank account information via email, or store them insecurely. Proper processing of credit card and bank account numbers should be through secure university websites

To report an information security incident, such as unauthorized access to a university system or data, unauthorized usage of someone's account or the unauthorized distribution of highly restricted or restricted data, please contact the Information Security Office using one of the following two ways:

- Via email to [sirt@ucf.edu](mailto:sirt@ucf.edu)
- Call the UCF IT Support Center at 407-823-5117

## Q&A

### Where can I find resources on information security and potential threats such as phishing?

Visit [UCF IT](#) for general information security standards, procedures, best practices.

### Who do I contact to report an information security incident?

Contact University's Security Incident Response Team (SIRT) at [sirt@ucf.edu](mailto:sirt@ucf.edu)

## Disclosure of Sensitive Information

We have a duty to protect all sensitive information acquired during the course of our employment or service. Sensitive information includes, but is not limited to, the following categories of information, regardless of the format or medium in which the information is made, kept, or received (i.e., paper, electronic, video, verbal): any personally-identifiable information, financial information (including social security and credit card numbers), or health information; certain contracts; research information; proprietary information, alumni and donor information; university financial information; computer passwords; university proprietary information; and any other information for which access, use, or disclosure is governed by our university's regulations, policies, or procedures. University policy defines in detail the categories of information considered sensitive, and its level of sensitivity, and provides requirements on how it should be protected and handled in the event of a data breach.

## Related Policies and Regulation:

UCF 2-105.1 Identity Theft Protection

UCF 4-002.2 Use of Information Technologies and Resources

UCF 4-008.1 Data Classification and Protection

UCF 4-012 Collection and Use of Social Security Numbers

UCF-3.045 Sensitive Information Disclosure

## EXTERNAL COMMUNICATIONS

### Media Relations

[UCF News and Information](#) is the primary media and public relations office at UCF and the primary point of contact for news media issues and for coordinating the dissemination of news information to the public. So that we communicate clear, accurate, timely, and appropriate information to the public, employees who have not been authorized to speak on our behalf should refer media requests to a member of our [News and Information](#) team.

### Legal Requests

It is our policy, at UCF, to respond to legal and regulatory requests without undue delay. If you receive a subpoena that is university related, contact the [Office of the General Counsel](#). Additionally, the [Office of the General Counsel](#) must be informed of any and all criminal matters where the university or any of its departments or units is the victim of a crime. The [Office of the General Counsel](#) will serve as the university's representative in dealing with prosecuting authorities and is the only office that can communicate whether or not we will press charges against an individual or entity who is alleged to have committed a crime against the university or any of its departments or units.

### Regulatory Requests

For any non-routine government or regulatory requests that you receive or if you believe that a government official is asking you to participate in an unauthorized review, contact the [Office of the General Counsel](#) or [University Compliance, Ethics, and Risk](#) for guidance.

### Our Brand



At UCF, we speak with one voice. By speaking with one voice, we amplify our message and communicate clearly and consistently across multiple channels. It is our job to communicate our brand with unity, clarity, and consistency to ensure that people associate our university with credibility and quality. By using our collective voice integrity, we strengthen and share the UCF story. Employees should be aware of and follow the UCF branding guidelines [available here](#).

### Social Media

When using social media, we as employees must always be professional and respectful. What we post not only reflects on us as individuals, but also reflects on the university as a whole. We must not post confidential or protected information, and we are expected to be aware of and follow university standards governing appropriate uses of social media. More guidelines about social media may be [found here](#).

#### Related Policies:

UCF 2-106.1 Communication with Prosecuting Authority

UCF 6-002 News Releases and Media Relations



# Stewardship: Our Duty as Public Employees

## FISCAL RESPONSIBILITIES

Employees directly involved in the fiscal transactions of our university are required to comply with our written policies prescribing a system of accounting, internal controls, and operational procedures for all financial transactions. The university controller's office is the only office authorized to establish bank accounts or financial relationships in our university's name and is the designated custodian of all university funds. UCF Finance and Accounting is responsible for ensuring that any authorized department personnel have been properly trained in the receipt and handling of funding collected by the university. Departmental management is responsible for implementing proper collection practices and internal controls.

### When making a fiscal decision, you must ask yourself:

- Does this transaction influence any future business decisions I will make?
- Could this transaction appear to be a conflict of interest to anyone such as the press or media?
- Have I received prior approval to spend, accept, or manage these funds?
- Have I been trained in proper collection practices and internal controls?

### Authorized Employees

Only those employees with a valid delegation of authority from the president or other university official have the authority to enter into contracts with external entities on behalf of our university. Individuals who enter into contracts without signature authority may subject their departments or units to fines. Such individuals may also be personally liable under contract.

### University Resources

University resources are provided to carry out our university responsibilities. We are responsible for being good stewards of these resources, using them ethically and responsibly, consistent with university regulations, policies, federal, and state law. University resources include any facilities (meeting rooms, banquet halls, etc.), equipment, vehicles, technology or software, network and electronic systems, records, cash and cash equivalents (P-cards, checks, postage), supplies, or any resource available to you in your position. Time is also a resource and therefore, during work hours you are expected to devote your attention to your UCF responsibilities.

### Related Policies and Regulation:

UCF 2-008 Internal Control Policy

UCF 2-107.2 Signatory Authority Policy

UCF 3-200.1 Receipt and Deposit of Funds by Departments

UCF 4-002.2 Use of Information Technology and Resources

UCF-7.130 Administration and Finance; Purchasing



## FLORIDA CODE OF ETHICS FOR PUBLIC EMPLOYEES

As employees of a public institution we are each subject to the [Florida Statutes Chapter 112, part III Code of Ethics for Public Officers and Employees](#), also referred to as the state ethics laws. These laws are intended to ensure that we conduct ourselves independently and impartially, and do not use our public position for private gain. We are each expected to be familiar with the requirements in the state ethics laws and to refrain from engaging in any activity that creates a conflict of interest or a bias in decision-making, or that gives the appearance of a conflict or bias. The requirements apply to all of us, and include the following prohibited actions or conduct:

### **Solicitation and Acceptance of Gifts.**

Employees may not solicit or accept anything of value, such as a gift, loan, reward, promise of future employment, favor, or service that is based on an understanding that their vote, official action, or judgment will be influenced by such gift.

### **Unauthorized Compensation.**

Employees, their spouses, and minor children may not accept any compensation, payment, or thing of value when they know, or should know, that it is given to influence a vote or other official action.

### **Misuse of Public Position.**

Employees may not use or attempt to use their official position or any property or resource that is within their trust to obtain special privilege, benefit, or exemption for themselves or others.

### **Disclosure or Use of Information.**

Employees (including former employees) may not disclose or use information not available to the public and obtained by the reason of their position for their personal benefit.

### **Doing Business with One's Agency.**

Employees, acting in their official capacity, are prohibited from directly or indirectly purchasing, renting, or leasing any realty, goods, or services for UCF from a business entity in which the employees or their spouses or children serve as an officer, partner, director, or proprietor, or owns more than a 5% interest. Employees, acting in their private capacity, are also prohibited from renting, leasing, or selling any realty, goods, or services to UCF.

### **Conflicting Employment or Contractual Relationship.**

Employees may not work for or contract with a business entity or agency regulated by or doing business with UCF. Our employees also may not work for or have a contractual arrangement which will create a continuing or frequently recurring conflict between their private interests and the performance of their public duties or that will impede the full and faithful discharge of their public duties.

### **Contractual Services: Prohibited Employment.**

Employees who participate in the decision-making process involving a purchase request, who influence the content of any specification or procurement standard, or who render advice, investigation, or auditing regarding our contract for services, may not be employed by a person holding such a contract with UCF.

## Q&A

### **How do I know if a company is doing business with or plans to do business with UCF?**

You are required to confirm with the company before engaging in any employment or contractual arrangement.

### **If I own a business, can I sell products or provide services to UCF?**

No, not unless you meet one of the state exemptions and receive approval.

## AVOIDING CONFLICTS

### Conflicts of Interest and Commitment

Our professional allegiance must always be to the university. When our loyalty is tempted, or when our personal interests – family, friendships, financial, or social factors – could compromise our judgment, decisions, or actions in the workplace, then a conflict can arise. Simply put, conflicts of interest are a clash between interests and requirements. A conflict of commitment occurs when we spend so much time on our outside activities that our work at UCF suffers. Some situations where a conflict can occur:

- You or your family member either work for a company, or have an ownership interest in a company, that is doing business with UCF
- You use your position to seek employment for your relative
- You accept gifts from companies either doing business with UCF or that want to do business with UCF
- You use university time or resources to support your outside activities
- You work full time for a company while trying to maintain your full time employment at UCF
- You use university students to support your outside activities

### Accepting Gifts

Gifts offered directly to an employee engaged in a working relationship in his or her official capacity with a vendor are frequently offered to create or maintain a favorable opinion of the vendor to retain or gain our business. As employees of a public institution, the state ethics laws prohibit us from accepting these types of gifts. For that reason, even when it seems to benefit the university, gifts including meals and complimentary registration offered by vendors to employees where there is a working relationship, regardless of the value, are not permitted and may not be accepted. Employees are encouraged to contact [University Compliance, Ethics, and Risk](#) when there is any doubt about whether a gift is allowable. Gifts of nominal value such as small items at vendor tables including pens or candy offered to everyone, and not targeted to our employees, are generally permitted.

### Q&A

#### What if I leave UCF to work for a company after participating in the process to award the company a contract?

Resigning employees working for a company (without UCF’s written permission) during the life of the contract subjects the company to termination of the contract at our sole discretion.

### Related Policy and Regulation:

UCF 2-009 Gifts and Honoraria

UCF-3.018 Conflict of Interest or Commitment; Outside Activity or Employment

### Solicitation on Campus

The distribution or display of printed material, merchandise, or products designed to publicize, advertise, or encourage the purchase, use, or rental of property, product, merchandise, publication, or service is a solicitation. Employees must not engage in any activity considered solicitation while on campus without first receiving proper approvals from [UCF Business Services](#).

### Q&A

#### May I use my university email to invite friends and co-workers to purchase items from my jewelry party or to participate in a fantasy football game?

No. This is considered solicitation and is not permitted. Remember, your UCF email is for university business only.

### Political Activities

Supporting candidates or issues of our choice and participating in the democratic process is a privilege of citizenship, but we all must be careful to not in any way associate these activities as formal representation or endorsement by the university. Employees may run for public office or participate in appointed public service, but it is incumbent on the employee to demonstrate to his or her supervisor that no conflict of interest or conflict of commitment exists. If the elected or appointed public position adversely affects the duties and responsibilities of your university position, appropriate adjustment in compensation, length of contract, or prescribed duties shall be agreed to in writing and approved by the president or his or her designee.

#### Related Policy and Regulation:

UCF 2-600 Political and Campaign Activities

UCF-4.010 Solicitation on Campus

### Relationships in the Workplace

While consensual amorous relationships may seem harmless, they can create a conflict in the workplace by adversely affecting decisions, distorting judgment, and undermining workplace morale for all employees. This is particularly true where the relationship is one of unequal power (i.e., where one of the individuals in the relationship has a professional responsibility toward the other, such as in the context of instruction, advisement, or supervision). For this reason, employees in a supervisory position are prohibited from pursuing or engaging in an amorous relationship with anyone whom they supervise. Romantic partners, including spouses, will be separated for purposes of evaluation and direct supervision. Similarly, employees are prohibited from pursuing or engaging in an amorous relationship with any undergraduate student. With respect to graduate students, employees are prohibited from pursuing or engaging in an amorous relationship with a graduate student under that individual's authority. An "amorous relationship" is defined as an intimate, sexual, or any other type of amorous encounter or relationship, whether casual or serious, short-term or long-term.

Because the employment of any relative (includes persons who intend to marry or with whom the employee intends to form a domestic partnership or other intimate relationship) creates a potential or real conflict of interest, relatives are not permitted to be employed by, transferred to, or promoted within a single unit, department, or college where a direct or indirect supervisory relationship or conflict of interest exists, or any situation which places relatives in a foreseeable conflict between the interests of the university and the interests of the relatives.

#### Q&A

##### Why is the university getting involved in amorous relationships?

Employees working with students must be aware that amorous relationships with students are likely to lead to difficulties and have the potential to place employees at great personal and professional risk. The power difference between employees as compared to students means that any amorous relationship between an employee and a student is potentially exploitative or could at any time be perceived as exploitative. Employees engaged in such relationships also need to be aware that they may unexpectedly be placed in a position of responsibility for the student's instruction or evaluation.

Amorous relationships between supervisors and their subordinate employees often adversely affect decisions, distort judgment, and undermine workplace morale for all employees, including those not directly engaged in the relationship. This can lead to claims of favoritism, bias and collusion.

As we look to our peer and aspirant institutions and major employers across the nation, we see that we are not alone in our institutional decision to prohibit such relationships.

#### Related Policies:

UCF 2-004 Prohibition of Discrimination, Harassment and Related Interpersonal Violence

UCF 3-008.2 Employment of Relatives

## OUTSIDE ACTIVITY AND CONFLICT OF INTEREST AND COMMITMENT DISCLOSURE

Having a conflict is not always unlawful or prohibited. Some conflicts can be mitigated or managed, which is why disclosing all activities is important.

The process of disclosing outside activities for review and approval protects us from unknowingly violating a state or federal law, and protects our credibility and reputations by providing a transparent system of disclosure, approval, and documentation of outside activities that might otherwise raise concerns of a conflict of interest or commitment.

At the beginning of the academic year a disclosure is required of all faculty, executive staff, post-doctoral employees, and select individuals in university positions of trust, or other employee types engaged in the design, conduct, and reporting of research at UCF. Employees who do not meet one of the employee types subject to the annual disclosure are required to submit a report prior to the initiation of an outside activity or employment. Information on the disclosure requirements and the forms used for disclosure are located on the websites for [University Compliance, Ethics, and Risk](#) and the [Office of Research and Commercialization](#).

### Q&A

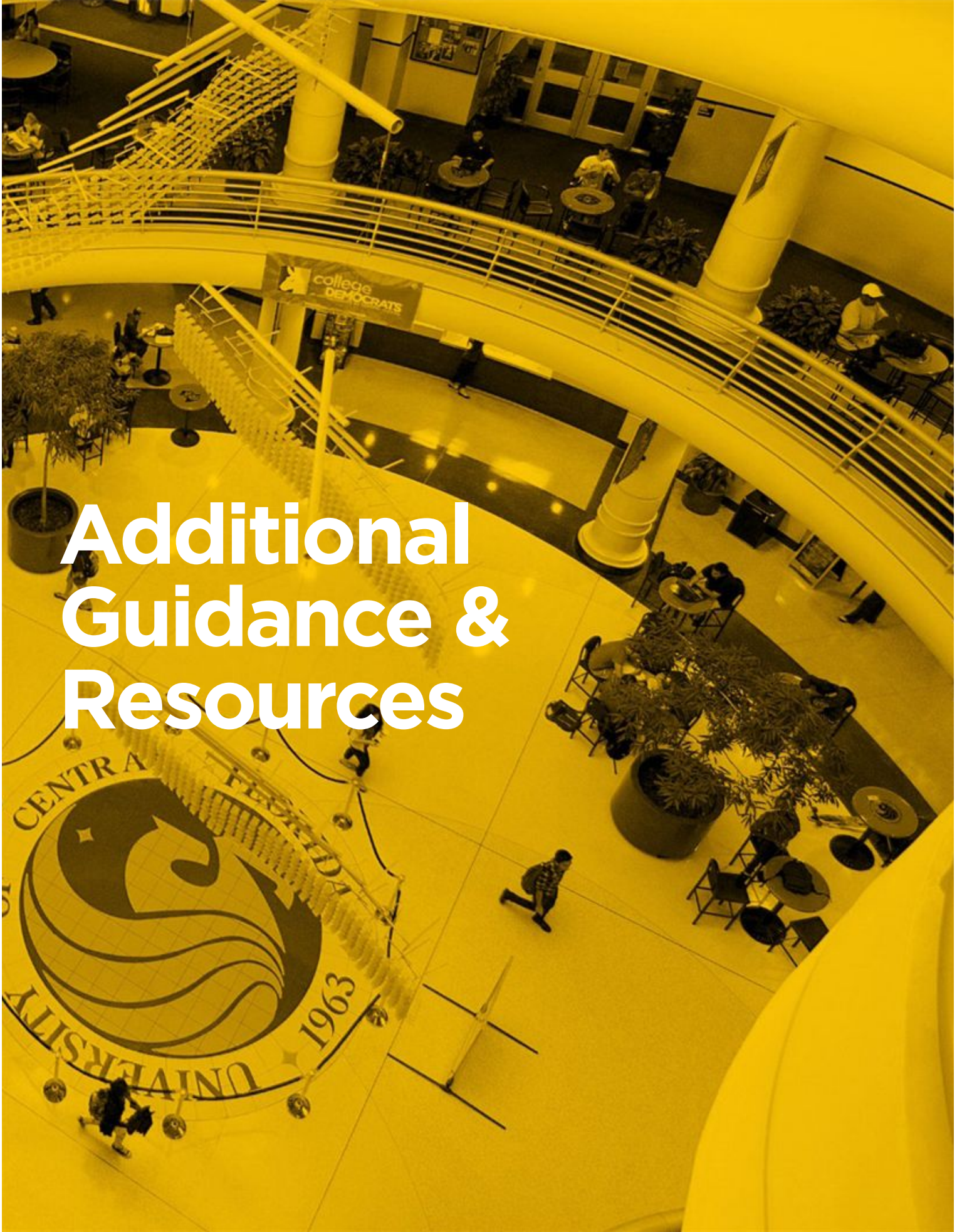
#### **How do I know which activities I am required to list in my outside activity disclosure?**

Activities that meet the definition of an outside activity are required to be disclosed in advance of starting the activity. This includes any compensated or uncompensated secondary employment or activity, private practice, private consulting, teaching, research, or other activity that is not part of your assigned duties at the university.

#### **Related Policy and Regulation:**

UCF-3.018 Conflict of Interest or Commitment; Outside Activity or Employment

UCF 4-504.2 Reporting a Potential Conflict of Interest or Conflict of Commitment in Research



# Additional Guidance & Resources

## ETHICAL DECISION-MAKING

Following our UCF Ethical Standards, ask yourself – will the decision I make demonstrate:

### 1. Honesty and Integrity

Am I being fair and honest, avoiding actual or perceived conflicts of interests or commitments?  
Am I being transparent?

### 2. Respect

Am I being respectful to the ideas of others, embracing and valuing diversity and ensuring that I am not taking advantage of others?

### 3. Responsibility and Accountability

Am I certain that this action is legal and ethically sound?

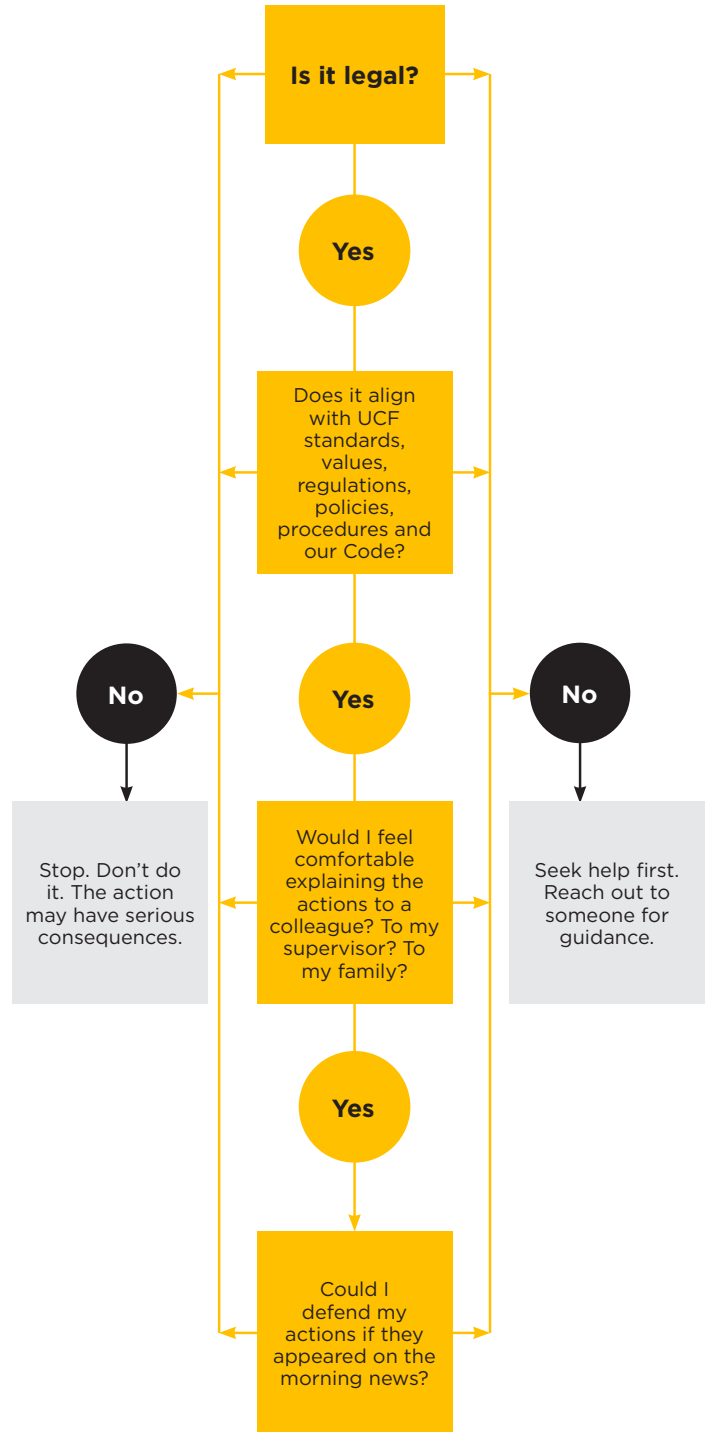
### 4. Stewardship

Am I using the university’s resources to carry out my responsibilities to the university, or will this use provide me some personal benefit?

For more guidance, refer to the [Framework for Ethical Decision Making](#).

If you are still uncertain of the right thing to do in a given situation and need more assistance, consult with your supervisor, compliance partner of the related compliance area, [University Compliance](#), [Ethics](#), and [Risk](#), or submit an inquiry through the [UCF IntegrityLine](#).

**If unsure, ask yourself:**





## UNIVERSITY CONTACTS

You are encouraged to contact your immediate supervisor or department management for more information on this UCF Employee Code of Conduct. You may also contact the compliance partner responsible for the related area of compliance.

For a list of compliance partners and a link to the CEAC, [click here](#). University Compliance, Ethics, and Risk is also available by telephone (407) 823-6263, email [complianceandethics@ucf.edu](mailto:complianceandethics@ucf.edu), or visit [UCF Compliance](#) for more information.

## UCF INTEGRITYLINE

If you are uncomfortable using other resources, are unsure who to contact, or want to raise a question or concern anonymously, use the UCF IntegrityLine. The IntegrityLine is available 24 hours a day, 365 days a year on [UCF IntegrityLine website](#), or by calling 1-855-877-6049 toll-free.

Please note that the UCF IntegrityLine is not a 911 or Emergency Service, and you may not receive an immediate response. If you require emergency assistance, please contact your local authorities or call 911.

## FAQS

### **What is the purpose of the UCF Employee Code of Conduct?**

The purpose of the UCF Employee Code of Conduct is to provide employees with a resource that summarizes many of our university policies and regulations, as well as state and federal regulations that apply to the university, and the ethical standards which employees are expected to follow. If you have questions, you can talk with your immediate supervisor, department manager, the Human Resources department, or University Compliance, Ethics, and Risk.

### **To whom does the Code of Conduct apply?**

The UCF Employee Code of Conduct applies to all employees including senior leadership, faculty, and staff members. The Student Code of Conduct outlines expectations for students.

### **What if some of my personal beliefs are in conflict with some of UCF's policies?**

We do not seek to change the personal beliefs of our employees. However, we do define expectations of how employees should behave in the workplace through our Employee Code of Conduct and university policies. These, in turn, are based on our ethical standards.

### **What happens if I accidentally violate our Code of Conduct, another policy, or a law/regulation?**

It really depends; every situation is different. Employee misconduct, whether intentional or accidental, will be reviewed by management to ensure proper resolution and/or disciplinary measures are carried out in accordance with UCF policy.

### **Will I be protected from disciplinary measures if I document and prove that a higher-ranking employee asked me to circumvent or break a law, regulation, or policy?**

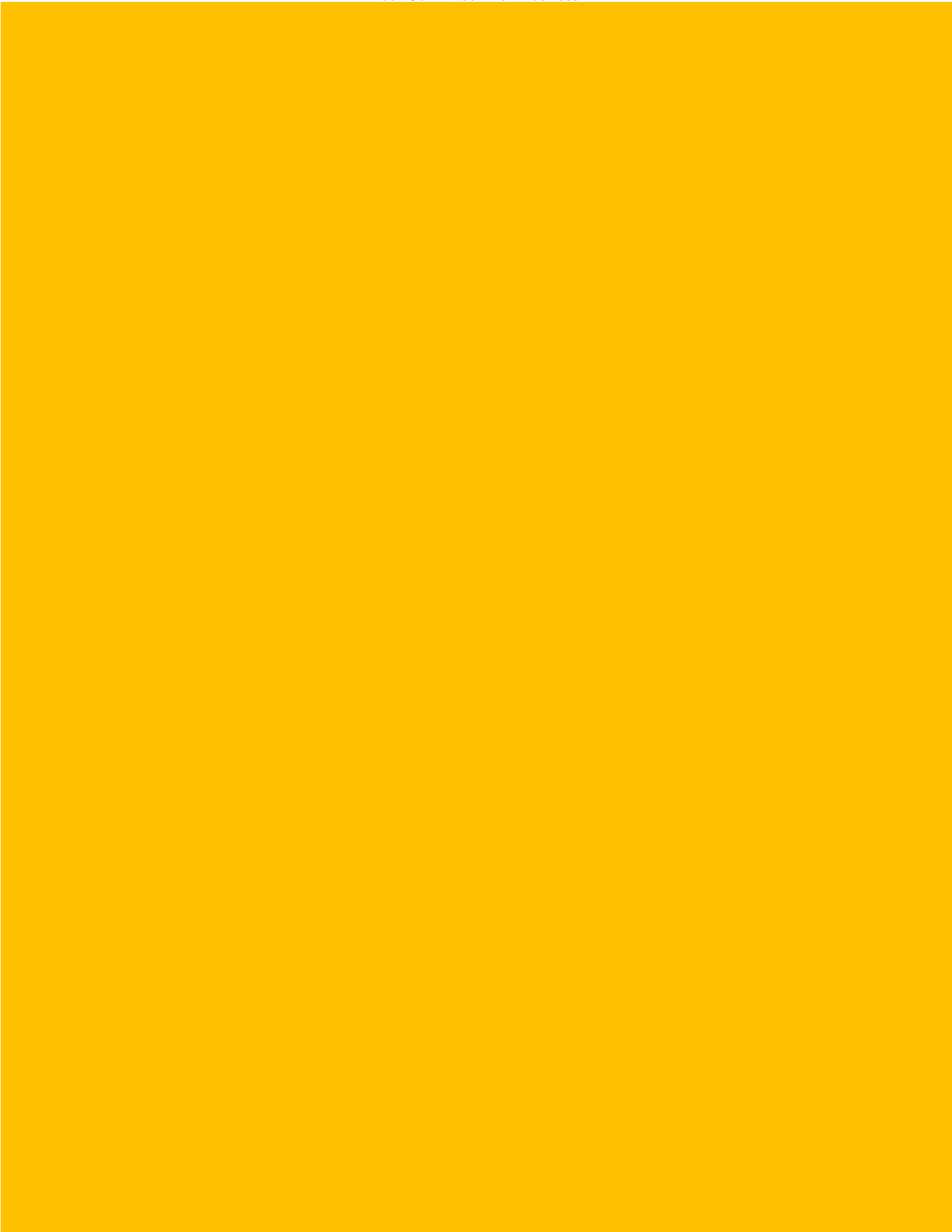
No, you must never engage in behavior that knowingly violates any law, regulation, or policy. If you feel you are being pressured to do something unethical, do not follow through and report your concern immediately. Refer to Asking Questions, Raising Concerns for reporting options.

### **To whom should I report a violation or suspected violation of the UCF Employee Code of Conduct?**

If you suspect that any member or affiliate member of our UCF community has violated any policy, regulation, or portion of the UCF Employee Code of Conduct, you have a responsibility to report it to the proper person in charge. You may contact the immediate supervisor, department manager, Human Resources department, or University Compliance, Ethics, and Risk to discuss and/or voice any questions or concerns. Employees reluctant to report through one of these avenues are encouraged to use the [UCF IntegrityLine](#).

If you become aware of an incident of sex or gender-based discrimination or harassment, sexual harassment, sexual assault, sexual exploitation, relationship violence, or stalking that involves any student and you are not a confidential employee (employee who is entitled to have privileged communications under state law), you must immediately report the incident to the Office of Institutional Equity or Title IX Coordinator (407-823-1336; [oiie@ucf.edu](mailto:oiie@ucf.edu); 12692 Gemini Blvd. S., Suite 123, Orlando, FL). More information on this requirement is available on the [UCF Shield website](#).





Appendix G



Office of the President

<b>SUBJECT:</b> University Policy Development	<b>Effective Date:</b> 1/4/2016	<b>Policy Number:</b> 2-001.5	
	<b>Supersedes:</b> 2-001.4	<b>Page</b> 1	<b>Of</b> 4
	<b>Responsible Authority:</b> Chief Compliance and Ethics Officer		

**DATE OF INITIAL ADOPTION AND EFFECTIVE DATE 2/1/2004**

**APPLICABILITY/ACCOUNTABILITY**

These guidelines on university policies and related procedures are applicable to all members of the university community.

**POLICY STATEMENT**

The University of Central Florida is governed by state and federal statutes, regulations of the Florida Board of Governors, and university regulations. The university must adopt policies and related procedures to dictate and guide the operations of the university when statutes, rules, and regulations do not provide specific guidance or do not offer procedures or implementation directives necessary for efficient university operations.

The University of Central Florida Policies and Procedures Manual is the official repository of university policies and related procedures. It may be reviewed online at <http://www.policies.ucf.edu>.

**DEFINITIONS**

**Minor Revisions.** Minor revisions are those changes that do not alter the scope or application of an existing policy and, therefore, do not require approval by the University Policies and Procedures Committee. Examples of minor revisions include, but are not limited to, title changes for individuals or departments, spelling corrections, address changes, form changes, and procedural changes.

**Policy.** A statement of management philosophy or practice established to provide direction and assistance to the university community in the conduct of university business or activities that directly and substantially affect multiple units, departments, or divisions with respect to their operations at the university. Policies must not conflict with statutes, rules, or regulations applicable to the university. Policies may include related procedures.

**Stakeholder.** A person, unit, department, or division within the university community interested in the terms and operation of the policy because it directly affects their role, responsibilities, and/or operations at the university.

**University Policies and Procedures Committee.** A committee designated and appointed by the president to act as the central body for making recommendations regarding the creation, updating, and management of university policies. This committee will include the chief compliance and ethics officer, the chief human resources officer or his or her designee, and other representatives appointed by the president. The general counsel or his or her designee and the chief audit executive or his or her designee will serve ex-officio on this committee in a non-voting capacity. The chief compliance and ethics officer serves as the chair of this committee.

## PROCEDURES

### A. Initiation of Policies

The need for a new policy or the revision or elimination of an existing one is identified by the president, a vice president, or a representative of the University Policies and Procedures Committee.

- (1) Working with a representative of the committee, the appropriate vice president(s) or their designees, oversees the creation of a draft of the policy following the guidelines described in B. The vice president who sponsors the policy is the *initiating authority*.
- (2) When the initiating authority has a working draft of the new policy, he or she should review that draft with stakeholders and should take their comments into account when preparing the draft for presentation to the committee.
- (3) All policies must be reviewed by the General Counsel's Office and the University Compliance, Ethics, and Risk Office prior to submission to the University Policies and Procedures Committee.
- (4) Policies submitted to the University Policies and Procedures Committee will be published for two weeks in the policies and procedures library for review and comment by the university community.
- (5) Comments will be provided to the University Policies and Procedures Committee and the initiating and responsible authority for consideration.
- (6) When the committee feels that the proposed policy is in an acceptable form, the chair of the University Policies and Procedures Committee will forward the final draft to the president for review and approval.
- (7) Once the president has approved the policy, the chair of the committee will incorporate it into the Policies and Procedures Manual.

B. Instructions for Drafting University Policies

Policies and related procedures must be submitted on the policy template listed under FORMS and must include the following information:

- The subject of the policy
- The responsible authority for the policy (division or department head, for example; by title, not name)
- Applicability or Accountability
- Policy Statement
- Definitions
- Procedures, if any are needed, to implement the policy
- The initiating authority for the policy (president, vice president, or University Policies and Procedures Committee—no others may initiate policy)

Policies and procedures may also contain the following information as necessary:

- General policy or preamble summarizing policy
- Background information
- Related information
- Related documents
- Forms
- Contacts

C. Review and/or Revision of Existing Policies

Each university policy must be reviewed annually by the responsible authority and by the committee every five (5) years to ensure that it remains current and relevant.

Revisions to a policy must be submitted to the University Compliance, Ethics, and Risk Office for review and submission to the University Policies and Procedures Committee. Revised policies will be published for two weeks for review and comment by the university community prior to consideration by the University Policies and Procedures Committee. Minor revisions do not require approval and may be requested at any time during the life cycle of a policy.

D. Dissemination of Information about New or Revised Policies

A university policy may be announced by email or released in a memorandum by the initiating authority. However, the policy must be provided in the form signed by the president and found in the Policies and Procedures Manual located at <http://www.policies.ucf.edu>.

E. Maintenance of the Policies and Procedures Manual

The chief compliance and ethics officer will maintain the Policies and Procedures Manual and publish policies for comment by the university community.

**FORMS**

- (1) Policy Template

**RELATED INFORMATION**

Colleges, centers, institutes, and units may have policies and procedures specific to their operations, but those will not be included in the university's Policies and Procedures Manual. Any such policies and procedures must not conflict with statutes, regulations of the Board of Governors, and university regulations or policies.

**CONTACTS**

Please direct questions related to this policy to the University Compliance, Ethics, and Risk Office.

**INITIATING AUTHORITY**

Vice President and Chief of Staff

<b>POLICY APPROVAL</b> <b>(For use by the Office of the President)</b>	
Policy Number: <u>2-100.5</u>	
Initiating Authority: <u>John Hill</u>	Date: <u>12-22-15</u>
University Policies and Procedures Committee Chair: <u>Phonda L Bishop</u>	Date: <u>12/21/15</u>
President or Designee: <u>John C. Hill</u>	Date: <u>1/7/16</u>

History 2-001 2/1/2004, 2-001.1 8/4/2004, 2-001.2 9/20/2004, 2-001.3 10/18/2006, 2-001.4 10/31/2013

2-001.5 *University Policy Development 4*

Appendix H



Office of the President

<b>SUBJECT:</b> University Regulation Development	<b>Effective Date:</b> 9/2/2014	<b>Policy Number:</b> 2-101.1	
	<b>Supersedes:</b> 2-101	<b>Page</b> <b>1</b>	<b>Of</b> <b>3</b>
	<b>Responsible Authority:</b> Vice President and General Counsel		

**DATE OF INITIAL ADOPTION AND EFFECTIVE DATE 2/18/2008**

**APPLICABILITY/ACCOUNTABILITY**

This policy applies to all units, colleges, and divisions of the University of Central Florida that make policy on behalf of the university or the specific unit, college, or division.

**POLICY STATEMENT**

When a unit, college, or division of the University of Central Florida, or the University of Central Florida Board of Trustees, makes a statement of general applicability that implements, interprets, or prescribes the duties and powers of the Board of Trustees in relation to the conduct or action of constituents or the public, that statement must be prepared as a university regulation and approved by the Board of Trustees or its designee.

**BACKGROUND INFORMATION**

The University of Central Florida Board of Trustees is charged with the administration of the University of Central Florida, including the adoption of regulations that explain to its constituents and the public how the powers and duties of the Board are implemented. Recognizing the benefit of creating a system-wide procedure for the adoption of such pronouncements, in July 2005 the Florida Board of Governors approved a procedure for the adoption, amendment and repeal of university regulations in the Regulation Development Procedure for State University Boards of Trustees.

## DEFINITIONS

**Internal management memoranda.** Statements, such as policies or memoranda, adopted by the university or a division or unit thereof, or by the Board of Trustees, that do not affect the private interests of any person and which have no application outside the University of Central Florida. For example, a policy that requires the approval of the department head to initiate payment to a vendor is a matter of internal management.

**Select university regulation.** A term adopted by the Board of Governors to refer to a university regulation that pertains to student tuition and fees, admissions, and articulation. Select university regulations require approval by the Florida Board of Governors prior to taking effect.

**University regulation.** University regulations are statements of general applicability adopted by the Board of Trustees (or its designee) to implement its powers and duties in relation to the conduct or action of constituents or the public. University regulations must be consistent with law and the resolutions, rules, and strategic plan of the Florida Board of Governors. University regulations do not include the following:

- internal management memoranda
- legal memoranda, opinions, and guidelines
- preparation of the budget
- negotiated contractual provisions, including those reached as a result of collective bargaining
- curriculum and other academic requirements

## PROCEDURES

When a unit, college, division, or the Board of Trustees identifies a need to make a written statement to inform the general public of how a power or duty of the Board of Trustees is to be exercised, the Office of the General Counsel should be consulted to prepare a draft regulation. This draft regulation will be forwarded to the Office of the President for review and approval prior to presentation to the University of Central Florida Board of Trustees or its designee. If the draft regulation is approved by the Board, then it will be considered a proposed regulation. The procedure is identical for proposed amendments to or repeals of existing university regulations.

The Office of the General Counsel will process all proposed university regulations, as well as all proposals to amend or repeal university regulations. The Office of the General Counsel will process all such proposals in accordance with the procedures adopted by the Florida Board of Governors for the development of university regulations.

As the designee of the Board of Trustees, the president can approve and enact most university regulations. Select university regulations must be approved by the Board of Trustees and then by the Florida Board of Governors.

**RELATED DOCUMENTS**

Regulation Development Procedure for State University Boards of Trustees, available at [www.regulations.ucf.edu](http://www.regulations.ucf.edu).

**CONTACTS**

Office of the General Counsel, 4365 Andromeda Loop, Millican Hall 360, Orlando, Florida, 32816-0015; (407) 823-2482.

**INITIATING AUTHORITY** Vice President and General Counsel

<b>POLICY APPROVAL</b> <b>(For use by the Office of the President)</b>	
Policy Number: 2-101.1	
Initiating Authority: <u><i>W. Kay Cole</i></u>	Date: <u><i>8/28/14</i></u>
University Policies and Procedures Committee Chair: <u><i>Shonda L. Bishop</i></u>	Date: <u><i>8/26/2014</i></u>
President or Designee: <u><i>John C. Hill</i></u>	Date: <u><i>9/2/14</i></u>



Appendix I



Office of the President

<b>SUBJECT:</b> Reporting Misconduct and Protection from Retaliation	<b>Effective Date:</b> 9/3/2014	<b>Policy Number:</b> 2-700	
	<b>Supersedes:</b>	<b>Page</b> 1	<b>Of</b> 6
	<b>Responsible Authority:</b> Chief Compliance and Ethics Officer		

**APPLICABILITY/ACCOUNTABILITY**

This policy applies to all members of the university community, including individuals and companies that conduct business with the university.

**POLICY STATEMENT**

The University of Central Florida is committed to a culture of integrity, compliance, and accountability that encourages the highest standards of ethical behavior. Members of the university community are therefore expected to conduct all university activities and business in an honest, ethical, and lawful manner. When members of the university community become aware of or have reason to suspect university activities and business are not conducted according to these expectations, UCF expects and encourages members of the university community to make good faith reports of suspected misconduct.

Because the university expects all reports of misconduct to be made in good faith, an employee who knowingly makes a false report or provides false information during an investigation may be subject to disciplinary action up to and including termination.

Retaliation against anyone who, in good faith, reports misconduct, or who participates in an investigation of misconduct, is strictly prohibited. The university will take all reasonable and necessary actions to protect members of the university community who have filed good faith reports of misconduct. Disciplinary action resulting from self-reported misconduct is not considered to be an act of retaliation.

## DEFINITIONS

**Good Faith Report.** A report of suspected misconduct made without malice to a supervisor, through central or administrative offices, to the UCF IntegrityLine, or directly to the University Compliance, Ethics, and Risk Office. For a report to be made in good faith, the reporting person should have reasonable cause to believe that the reported information is true.

**Misconduct.** Any violation of law, regulation, statute, UCF regulation, policy, procedure, guideline, and/or standard of conduct, whether intentional or inadvertent.

**Retaliation.** An adverse or credible threat of an adverse employment action taken against an employee as a result of submitting a good faith report of misconduct, or participating in a misconduct investigation. Types of retaliation can include dismissal from employment, demotion, loss of salary or benefits, transfer or reassignment, denial of an earned promotion, and unwarranted written notice or negative performance review. Less obvious forms of retaliation can include excluding the employee from meetings, withholding critical information necessary for the employee to perform his or her job, publicly ridiculing the employee, or allowing the employee's peers to create an atmosphere that is not conducive for the employee to perform well. A causal relationship between good faith participation in the reporting or investigation of misconduct and an adverse action is needed to demonstrate retaliation has occurred.

## PROCEDURES

The following options for making good faith reports of misconduct are available to members of the university community. Students not employed by UCF should use the resources available from the Student Development and Enrollment Services division, a list of resources are available at <http://www.sdes.ucf.edu/> (both options are available to students employed by UCF).

### I. When to Report

Individuals, who in good faith believe that a violation of law, regulation, statute, UCF regulation, policy, procedure, guideline, and/or standard of conduct has occurred, or will occur, are expected and encouraged to promptly make a report of such suspected misconduct. Individuals do not need to have details of the law or policy to suspect misconduct. It is better to report the suspected misconduct than to remain silent.

### II. Where to Report - Options

Individuals may choose to report suspected misconduct to their supervisors, through central or administrative offices, to the UCF IntegrityLine, or directly to the University Compliance, Ethics, and Risk Office. Details on each are provided below. Note that these reporting channels should not be used for reporting emergencies. Emergencies should be reported using 911.

### ***1. Supervisors***

Reports of suspected misconduct should normally be raised first with an individual's supervisor, or appropriate college, department, or unit administrator. Colleges and departments usually are most familiar with the issues and personnel involved and, therefore, may be best suited to address a concern. Supervisors receiving reports of potential fraud should contact University Audit for guidance and investigation.

### ***2. Central Offices***

In some cases, an individual may feel uncomfortable raising a report of misconduct at the college or department or other similar administrative unit level due to the nature of the subject matter or because of other legitimate considerations that suggest an alternative reporting process may be more appropriate. In such instances, the individual may report suspected misconduct through a central university office having specialized expertise relating to the concern, such as:

- Office of the Provost (noncompliance with academic regulations)
- Human Resources (A&P, USPS, and OPS employee relations issues)
- Faculty Relations (faculty, including adjunct faculty noncompliance)
- University Audit (potential fraud and internal control issues)
- Athletics Compliance (NCAA violations)
- Research Ethics and Compliance (falsification, fabrication, plagiarism in research)
- Office of Equal Opportunity and Affirmative Action, Title IX coordinator (discrimination, sexual harassment)

### ***3. University Compliance, Ethics, and Risk Office***

Individuals may also report suspected misconduct by contacting the University Compliance, Ethics, and Risk Office directly by calling the chief compliance and ethics officer at 407-823-6263, by email to [complianceandethics@ucf.edu](mailto:complianceandethics@ucf.edu), by mail to 4365 Andromeda Loop N., MH 328, Orlando, Florida, 32816, or in person at Millican Hall #328.

### ***4. UCF IntegrityLine***

Individuals reluctant to report suspected misconduct directly to their supervisors or through university administrative or central offices are encouraged to use the UCF IntegrityLine. The UCF IntegrityLine is administered by a third-party vendor, NAVEX Global, and offers individuals the option to report anonymously.

The IntegrityLine is operated 24 hours a day, 365 days a year, and can be reached by using the secure Web Reporting System located at: [www.ucfintegrityline.com](http://www.ucfintegrityline.com), or by calling 1-855-877-6049 toll-free. IntegrityLine reports will be processed by EthicsPoint and sent to the University Compliance, Ethics, and Risk Office to address appropriately.

### ***Reporting Child Abuse, Neglect, and Abandonment***

Florida Statutes require any person who knows, or has reasonable cause to suspect, that a child is abused, abandoned, or neglected to report such knowledge or suspicion to the Department of Children and Families (DCF), regardless of where it occurs.

In addition, Florida Statutes and Board of Governors Regulation, requires the UCF Police Department and certain administrators (president, provost, senior/executive vice presidents, vice presidents, associate vice presidents, associate/vice provosts, deans, chief of police, equal opportunity programs director, intercollegiate athletics director, internal audit director, Title IX coordinator, and university compliance officer) upon receiving information from faculty, staff, or other institutional employees of known or suspected child abuse, abandonment, or neglect committed on university property, or during a university-sponsored event or function to report such knowledge or suspicion to the Department of Children and Families (DCF).

The law further prohibits UCF administrators from knowingly and willfully preventing another person from reporting such activity.

Report to the Department of Children and Families (DCF) by:

- Fax 1-800-914-0004 (Form available at <http://www.dcf.state.fl.us/programs/abuse/docs/faxreport.pdf>)
- Web <https://reportabuse.dcf.state.fl.us/>
- Florida Abuse Hotline 1-800-96ABUSE (1-800-962-2873)  
(Or TDD: 1-800-453-5145)

**If a child is in imminent danger, dial 911 first and then report to DCF.**

### ***Ombuds Office***

The University Ombuds Office, an informal, independent, confidential, neutral office that offers assistance and impartial advice regarding concerns related to UCF, is a resource for individuals unsure of which avenue to take. Communication to this office, however, does not constitute notice to UCF. The Ombuds Office will NOT contact the University Compliance, Ethics, and Risk Office and therefore individuals seeking advice from the Ombuds Office will ultimately need to report suspected misconduct using one of the methods described above. Contact information for the Ombuds Office is available at <http://www.ombuds.ucf.edu/>.

### **III. Protection from Retaliation**

Individuals who believe they have been subjected to acts of retaliation may file a written or verbal complaint with the University Compliance and Ethics Officer or through the UCF IntegrityLine. The University Compliance, Ethics, and Risk Office is responsible for conducting an investigation and/or contacting the appropriate university offices for review and disposition of the report per applicable university policy or the Collective Bargaining Agreement.

### **RELATED DOCUMENTS**

UCF Policy 2-800 Fraud Prevention and Detection: <http://policies.ucf.edu/documents/2-800FraudPreventionandDetectionFINAL.pdf>

UCF Policy 4-211 Research Misconduct: <http://policies.ucf.edu/documents/4-211ResearchMisconductFinalonLetterhead11-16-11.pdf>

2012-2015 BOT-UFF Collective Bargaining Agreement Article 20.12  
[http://www.collectivebargaining.ucf.edu/CBA/2012-2015CBA\\_reopener.pdf](http://www.collectivebargaining.ucf.edu/CBA/2012-2015CBA_reopener.pdf)

Florida Statutes §§112.311-.326, Code of Ethics for Public Officers and Employees Sections  
[http://www.leg.state.fl.us/statutes/index.cfm?App\\_mode=Display\\_Statute&Search\\_String=&URL=0100-0199/0112/0112PARTIIIContentsIndex.html](http://www.leg.state.fl.us/statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0100-0199/0112/0112PARTIIIContentsIndex.html)

Florida Statutes §112.3187, Florida Whistle Blower Act:  
[http://www.leg.state.fl.us/statutes/index.cfm?App\\_mode=Display\\_Statute&URL=0100-0199/0112/Sections/0112.3187.html](http://www.leg.state.fl.us/statutes/index.cfm?App_mode=Display_Statute&URL=0100-0199/0112/Sections/0112.3187.html)

Florida Statutes §39.201, Proceedings Related to Children:  
<http://www.flsenate.gov/Laws/Statutes/2012/39.201>

Florida Statutes §39.203, Proceedings Related to Children:  
<http://www.flsenate.gov/Laws/Statutes/2012/39.203>

Florida Statutes §39.205, Proceedings Related to Children:  
<http://www.flsenate.gov/Laws/Statutes/2012/39.205>

Florida Board of Governors Regulation 3.002 Penalties for Failure to Report Child Abuse:  
[http://www.flbog.edu/documents\\_regulations/regulations/Regulation3\\_001FINALPenaltiesForFailuretoReportChildAbuse.pdf](http://www.flbog.edu/documents_regulations/regulations/Regulation3_001FINALPenaltiesForFailuretoReportChildAbuse.pdf)

## **CONTACTS**

University Compliance, Ethics, and Risk Office, 4365 Andromeda Loop N. MH 328, Orlando, FL 32816-0001. (407) 823-6263. [complianceandethics@ucf.edu](mailto:complianceandethics@ucf.edu)

**INITIATING AUTHORITY**

Vice President and Chief of Staff

<b>POLICY APPROVAL</b> <b>(For use by the Office of the President)</b>	
Policy Number: 2-700	
Initiating Authority: <u>John Hill</u>	Date: <u>9-2-14</u>
University Policies and Procedures Committee Chair: <u>Ronald Bishop</u>	Date: <u>8/26/2014</u>
President or Designee: <u>John C. Hill</u>	Date: <u>9/3/14</u>

Appendix J



Office of the President

<b>SUBJECT:</b> Fraud Prevention and Detection	<b>Effective Date:</b>  12/22/2014	<b>Policy Number:</b>  2-800.1
	<b>Supersedes:</b>  2-800	<b>Page Of</b> <b>1 5</b>
	<b>Responsible Authority:</b> Chief Audit Executive, University Audit	

**DATE OF INITIAL ADOPTION AND EFFECTIVE DATE 10-17-2007**

**APPLICABILITY/ACCOUNTABILITY**

This policy applies to all members of the university community, including Direct Support Organizations (DSO) along with individuals and companies in relation to their business activities with the university.

**POLICY STATEMENT**

The university is committed to the highest standards of ethical behavior. Acts of fraudulent behavior can be costly and may erode the public’s trust and confidence in the integrity of the institution. It is the policy of the university to proactively exercise due diligence in the prevention and detection of fraud and objectively and independently investigate any misuse of university resources and any suspected acts of fraud, theft, corruption, waste, or abuse (collectively referred to as “fraud” for the remainder of this policy), and to take appropriate disciplinary or legal action.

It is the responsibility of each member of the university community to report fraud, waste, or abuse. University Audit is responsible for overseeing and investigating all allegations of defalcation, falsification, misappropriation, and other fiscal irregularities unless the Board of Trustees appoints an external party to perform the investigation. Individuals should not attempt to personally conduct investigations or interviews or discuss allegations with the individuals suspected of fraud.

## DEFINITIONS

**Abuse.** The improper use of something or someone.

**Defalcation.** An amount of funds misappropriated by a person trusted with its charge; also, the act of misappropriation.

**Falsification.** The action of falsifying information.

**Fiscal irregularity.** An occurrence in which there is a shortage or overage of public funds, illegal disbursement(s) resulting from fraud, forgery, alteration of vouchers, improper certification, or other improper practices, or improper accounting for receipts.

**Fraud.** A willful or deliberate act or omission with the intention of obtaining an unauthorized benefit, service, property, or something of value by deception, misrepresentation, or other unethical or unlawful means.

**Misappropriation.** The intentional, illegal use of the property or funds of the university or another person for one's own use or other unauthorized purpose.

**Waste.** An act or instance of using or expending something carelessly, extravagantly, or to no purpose.

## PROCEDURES

### A. Fraud Prevention

All levels of management should become familiar with the types of improprieties that might occur in their areas and be alert for any indication that such a defalcation, falsification, misappropriation, or other fiscal irregularity has occurred. Vice presidents are responsible for ensuring that a system of internal control is established and maintained that provides reasonable assurance that improprieties are prevented. All levels of management should establish and follow controls as applicable for their division or unit. University Audit is available to assist management in recognizing improper conduct and establishing internal controls, and providing fraud awareness.

U.S. Federal Sentencing Guidelines call for organizations to develop reasonable protections against internal and external threats of corruption and fraud. University Audit, with the assistance and active participation of other departments, will periodically perform a fraud risk assessment and advise management of the actions needed to reduce the risk of fraud.

### B. Fraud Detection

Fraud may include but is not limited to the following activities:

- Inappropriate purchases using university funds



- Theft or misuse of university fixed assets or tangible resources
- Misappropriation of funds
- Inappropriate use of contract or grant funds
- Identity theft or misuse of personal identifying information
- Inappropriate receipt of employee benefits
- Authorizing or receiving employee compensation for hours not worked
- Authorizing payments to vendors for goods not received or services not performed
- Establishment of fictitious or non-existent vendors
- Related party transactions
- Kickbacks
- Forgery, destruction, or alteration of documents (checks, time sheets, contracts, purchase orders, leave reports, budgets, etc.)
- Falsification of reports to management or external agencies
- Academic related fraud (grade alteration, bribery, or falsification of data)

Complaints can be made directly or anonymously to University Audit via telephone, email, letter, or in person. In addition, the UCF IntegrityLine is available as an alternative communication channel.

Individuals should not attempt to personally conduct investigations or interviews or discuss allegations with the individuals suspected of fraud.

### C. Investigation

As part of the investigation process, University Audit is responsible for determining whether allegations fall under the Whistle-blower Act (Section 112.3187, Florida Statutes) and coordinating an evaluation of internal control breakdowns for remediation. To avoid damaging the reputations of innocent persons and to protect the university from potential civil liability, the results of investigations will not be disclosed or discussed with anyone other than those persons who have a legitimate need to know.

Allegations or matters of conduct deemed outside the scope of this policy, such as personnel-related issues or potential scientific research misconduct, may be referred by University Audit to the respective area of management for review and appropriate action.

When an investigation reveals suspected criminal activity or is initiated due to an allegation of criminal activity, the University Police and other law enforcement agencies will be notified, as appropriate. University Audit will also inform and consult with the General Counsel as needed.

Violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting a federal award must be reported to the federal awarding agency or pass-through entity in a timely manner. Failure to properly or timely disclose can result in withholding payments to the university, disallowing costs, termination of the award, suspension, debarment, and restriction from receiving further awards.

University employees must support the university's fiduciary responsibilities and must cooperate with University Audit, University Police, and other law enforcement agencies in the detection, investigation, and reporting of fraudulent or criminal acts, including prosecution of offenders. Failure to cooperate with University Audit or providing false information in an investigation could result in disciplinary action up to and including termination.

The university will not tolerate harassment, victimization, or retaliation against those who report allegations of fraud or assist in an investigation.

#### D. Subsequent Action

Anyone found to have engaged in fraud or fraudulent conduct is subject to disciplinary action by the university up to and including termination or expulsion and civil or criminal prosecution. The university will make every effort to recover losses that result from fraudulent or criminal acts, including investigative costs. In addition, the university will report the employee's fraudulent gains to the Internal Revenue Service in accordance with their regulations for the investigation of tax evasion.

When their investigative costs are not recovered through restitution, litigation, or insurance, University Audit may seek reimbursement from the university department where the fraud occurred.

Employees who knowingly make false accusations are subject to disciplinary action up to and including termination. Anyone who harasses, victimizes, or retaliates against persons reporting fraud or assisting with an investigation is subject to disciplinary action up to and including termination or expulsion.

#### **RELATED DOCUMENTS**

Section 200.113, Code of Federal Regulations, Mandatory disclosures

<http://www.gpo.gov/fdsys/pkg/CFR-2014-title2-vol1/pdf/CFR-2014-title2-vol1-sec200-113.pdf>.

Section 8B2.1, U.S. Sentencing Guidelines, Effective Compliance and Ethics Program

<http://www.ucdmc.ucdavis.edu/compliance/pdf/ussg.pdf>.

Sections 112.311-.3261, Florida Statutes, Code of Ethics for Public Officers and Employees

[http://www.leg.state.fl.us/statutes/index.cfm?App\\_mode=Display\\_Statute&Search\\_String=&URL=0100-0199/0112/0112PARTIIIContentsIndex.html](http://www.leg.state.fl.us/statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0100-0199/0112/0112PARTIIIContentsIndex.html).

Sections 112.3187-.31895, Florida Statutes, Whistle-blower's Act

[http://www.leg.state.fl.us/statutes/index.cfm?App\\_mode=Display\\_Statute&URL=0100-0199/0112/Sections/0112.3187.html](http://www.leg.state.fl.us/statutes/index.cfm?App_mode=Display_Statute&URL=0100-0199/0112/Sections/0112.3187.html).

UCF Policy 2-700, Reporting Misconduct and Protection from Retaliation

<http://policies.ucf.edu/documents/2-700ReportingMisconductandProtectionfromRetaliation.pdf>

University Audit charter

<http://www.universityaudit.ucf.edu/Charter.asp>.

**CONTACTS**

UCF University Audit, 4365 Andromeda Loop N., MH 341, Orlando, FL 32816-0080. Phone: (407) 823-2889. [www.universityaudit.ucf.edu](http://www.universityaudit.ucf.edu)

**INITIATING AUTHORITY**

Vice President and Chief of Staff

POLICY APPROVAL (For use by the Office of the President)	
Policy Number: <u>2-800.1</u>	
Initiating Authority: <u>[Signature]</u>	Date: <u>12-18-14</u>
University Policies and Procedures Committee Chair: <u>[Signature]</u>	Date: <u>12/17/2014</u>
President or Designee: <u>[Signature]</u>	Date: <u>12/22/14</u>

## Appendix K

**UCF-3.018 Conflict of Interest or Commitment; Outside Activity or Employment.**

(1) Code of Ethics. The policies and requirements of Chapter 112, Part III, Florida Statutes, “Code of Ethics for Public Officers and Employees,” shall apply to all UCF employees whether or not they are members of a bargaining unit, and includes the following prohibited actions or conduct:

- (a) Solicitation and Acceptance of Gifts. University employees may not solicit or accept anything of value, such as a gift, loan, reward, promise of future employment, favor or service that is based on an understanding that their vote, official action, or judgment will be influenced by such gift.
- (b) Unauthorized compensation. University employees, their spouses and minor children may not accept any compensation, payment, or thing of value when they know, or should know, that it is given to influence a vote or other official action.
- (c) Misuse of Public Position. University employees may not use or attempt to use their official position or any property or resource that is within his or her trust to obtain special privilege, benefit, or exemption for themselves or others.
- (d) Disclosure or Use of Information. University employees (including former employees) may not disclose or use information not available to the public and obtained by the reason of their position for their personal benefit.
- (e) Doing Business with One’s Agency. University employees acting in their official capacity are prohibited from directly or indirectly purchasing, renting, or leasing any realty, goods, or services for the University from a business entity in which the employees or their spouses or children serve as an officer, partner, director, or proprietor, or own more than a 5% interest. Employees, acting in their private capacity, are also prohibited from renting, leasing, or selling any realty, goods, or services to the University.
- (f) Conflicting Employment or Contractual Relationship. University employees may not work for or contract with a business entity or agency regulated by or doing business with the University. Employees also may not work for or have a contractual arrangement which will impede the full and faithful discharge of his or her public duties. Employees may not create a continuing or frequently

recurring conflict between his or her private interests and the performance of his or her public duties.

- (g) Contractual Services: Prohibited Employment. University employees who participate in the decision-making process involving a purchase request, who influence the content of any specification or procurement standard, or who render advice, investigation, or auditing regarding the University's contract for services, may not be employed by a person holding such a contract with the University.

Additionally, Florida Statute 104.31 states that employees may not use their position to interfere with an election, to command, coerce, or advise any other employee to contribute towards any political purpose, or advise where he or she might purchase commodities or interfere in any other way with the personal right of employees. Further, employees may not participate in any political campaign for an election while on duty.

(2) General.

- (a) This regulation applies to all University employees, irrespective of bargaining unit, pay plan, rank, or employment status.
- (b) University employees are expected to fully and competently perform all duties pertinent to their employment. Outside activity or employment which interferes with an employee's obligations to the university or which represents a conflict of interest or commitment is prohibited.
- (c) Employees are required to submit a report of their intention to participate in outside activity or employment in advance of such engagement; and to resubmit such report annually or as required by section (3), below. If in the opinion of the president, or representative, the outside activity or employment creates an actual or potential conflict of interest or interference with the employee's duties, the employee will be notified to resolve the conflict or to provide further information that will allow the university to adequately manage any actual or potential conflict.
- (d) Any employee who wishes to request the use of any university facility, equipment, personnel, or other university resources in connection with an outside activity or employment is required to submit a written request for such use, in

accordance with subsection (3) below. See also University Regulations UCF-4.029 - 4.0294 relating to use of university facilities.

(3) Submission of Reports.

- (a) Faculty, Executive Services, Post-doctoral employees, and select individuals identified in University positions of trust or other employee types engaged in the design, conduct, and reporting of research must submit a report of outside activity or employment and potential conflicts of interest or commitment at the beginning of each academic year, irrespective of whether the employee has any activity or employment to report, using Form AA-21, "Potential Conflict of Interest or Commitment; Outside Activity or Employment Report." This report must be resubmitted during the course of the reporting period should there be a change in activity, such as new outside activity or employment, substantial increase in the commitment required for an outside activity or employment, or change in relationships that could create a conflict of interest. This report should be submitted online using the reporting process set forth by the University Compliance, Ethics, and Risk Office and the Office of Research and Commercialization. Further information is available in the Faculty Handbook, as well as on the web sites for the University Compliance, Ethics, and Risk Office and the Office of Research and Commercialization.
- (b) All other employees must submit a report prior to the initiation of any outside activity or employment, using Form HR-11, "Report of Potential Conflict of Interest, Outside Activity/Employment." This form must be resubmitted during the course of the reporting period should there be a change in activity, such as new outside activity or employment, substantial increase in the commitment required for an outside activity or employment, or change in relationships that could create a conflict of interest.
- (c) Any employee who wishes to request the use of university facilities, equipment, or personnel in conjunction with an outside activity or employment must submit a written request for such use using the appropriate form. For Faculty, Executive Service, Post-doctoral employees, and select individuals identified in University positions of trust or other employee types engaged in the design, conduct, and

reporting of research, any such request should be included with the report on Form AA-21. All other employees must use Form HR-12, "Permission to Use University Personnel, Equipment, Facilities, Students, or Services." Failure to submit such a request constitutes specific lack of permission to use any university resources in conjunction with an outside activity or employment. Each request will be evaluated on its own merits. The university is under no obligation to grant any such request.

- (d) Reports submitted under this regulation will be reviewed at appropriate levels of supervision. If a potential or actual conflict of interest or commitment is identified, the employee will be notified to resolve the conflict. If the employee has additional information that would assist the University in reviewing such conflict, the employee bears the burden of making that information available to the University. The resolution to a potential or actual conflict of interest may require the employee to cease the outside activity or employment or to divest oneself of the interests that are creating the conflict.
- (e) The Florida Commission on Ethics also requires individuals who are identified under Florida Statute 112.3145 as reporting individuals, to submit to the Commission a disclosure of their financial interests within 30 days of appointment, annually by July 1, and within 60 days after leaving their position. Employees considered reporting individuals will be notified of their status by a member of the Human Resources Department.

(4) If an employee does not agree with a decision by the president or representative, the employee may request relief under the provisions of the applicable UCF grievance procedure, but must follow the University's directive while pursuing the grievance.

(5) Other Applicable Regulations. Any employee who accepts compensation for outside employment shall comply with the applicable requirements of Section 112.313, F.S., and University Regulation UCF-3.0032.

(6) Nothing contained in this regulation shall excuse any employee who engages in outside employment or other activities which constitute a conflict of interest or commitment. A determination by the university not to object to an outside activity or employment does not preclude a finding by the State Ethics Commission that the activity or employment is not in

accordance with all applicable laws and regulations respecting conflicts of interest. The employee's obligation to avoid conflicts of interest is a continuing one.

*Authority: BOG Regulation 1.001. History—New 10-8-75, Amended 11-22-77, 4-30-81, 8-15-84, 11-4-90, Formerly 6C7-3.18, Amended 4-23-03, 10-30-07; Formerly 6C7-3.018, Amended 6-24-10, 3-13-14, 10-30-14, 6-23-17.*



Appendix L



Office of the President

<b>SUBJECT:</b> Reporting a Potential Conflict of Interest or Conflict of Commitment in Research	<b>Effective Date:</b> 08-20-12	<b>Policy Number:</b> 4-504.2	
	<b>Supersedes:</b> 4-504, 4-504.1	<b>Page</b> 1	<b>Of</b> 7
	<b>Responsible Authority:</b> Vice President for Research & Commercialization		

DATES OF INITIAL ADOPTION AND EFFECTIVE DATES: 2-18-08, 9-29-08

APPLICABILITY/ACCOUNTABILITY

This policy applies to all university faculty members, Executive Service employees, postdoctoral associates, Administrative and Professional employees, University Support Personnel System employees, Other Personnel Support employees, and students engaged in both sponsored and non-sponsored research.

PREAMBLE

As a part of UCF’s academic and research mission, the university encourages its employees to participate in sponsored research, consulting, and other activities that benefit the university, participants, affiliates, and the public at large. In doing so, UCF employees are obligated to act in the best interest of the university and to ensure that outside activities or outside financial interests do not interfere with their obligation to the university. The existence of trust from the public and from the scientific community is paramount to the successful advancement of knowledge and the growth of the university’s academic and research programs. In addition to the university’s expectation that research be conducted with the highest ethical standards and professional integrity, federal laws and state statutes regulate conflicts of interest and establish related ethical and integrity standards. This policy establishes a process to comply with these regulations and statutes.

BACKGROUND

Federal regulations and state statutes require institutions of higher education to bear primary responsibility for employees and affiliates to disclose conflicts of commitment, outside activity, and potential financial conflicts of interest. The university has the responsibility to establish Conflict of interest policies and procedures to provide appropriate safeguards to protect the interests of the

university and sponsored agencies, and to effectively communicate to faculty members, employees, students, and affiliates the university's conflict of interest and commitment policies and procedures.

## POLICY STATEMENT

University faculty members, Executive Service employees, postdoctoral associates, Administrative and Professional employees, University Support Personnel System employees, Other Personnel Support employees, and affiliates engaged in both sponsored and non-sponsored research, must disclose conflicts of commitment, outside activity, and financial conflicts of interest to designated officials. All university employees (including students) and affiliates planning to participate in or are participating in sponsored and non-sponsored research activity must comply with federal regulations and state statutes in regard to disclosing, managing, and reporting significant financial interests. All employees engaging in research must annually or within 30 days of discovering, acquiring, or committing to a new financial interest or commitment, report potential conflicts of interest or commitment, or the appearance of a conflict. University faculty members, Executive Service employees, postdoctoral associates, Administrative and Professional employees, University Support Personnel System employees, Other Personnel Support employees, and affiliates responsible for the design, conduct, or reporting of research must complete conflict of interest training prior to engaging in research. Training must occur at least once every four years or sooner if an applicable change occurs.

The Office of Research & Commercialization is charged with oversight of the conflict of interest and commitment program for research and is responsible for applicable policies, procedures, guidelines, and training to communicate the program requirements. In addition, the Office of Research & Commercialization is responsible for the review of disclosures and, when applicable, the review and approval of monitoring and management plans.

The University Compliance, Ethics, and Risk Office is charged with the oversight of the conflict of interest and commitment program.

## DEFINITIONS

**Conflict of Interest.** A divergence between an individual's private interests and his or her employment obligations to the university such that an independent observer may reasonably question whether the individual's actions or decisions are influenced or determined by considerations other than the best interest of the university.

**Conflict of Commitment.** An employee's devotion of time to activities that adversely affect his or her capability to meet their primary university responsibilities. Examples may include but are not limited to outside employment, *pro bono* or volunteer work, and government service in the public interest.

*4-504.2 Reporting a Potential Conflict of Interest or Conflict of Commitment in Research 2*

**Outside Activity or Employment.** Any compensated or uncompensated secondary employment or activity, private practice, private consulting, teaching, research, or other activity that is not part of the employee's assigned duties at the university.

**Financial Conflict of Interest.** A significant financial interest that could directly and significantly affect the design, conduct, or reporting of sponsored and non-sponsored research.

**Investigator.** The project director or principal investigator and any other person, regardless of title or position, who is responsible for the design, conduct, or reporting of sponsored and non-sponsored research. The term includes key personnel, collaborators, or consultants who are responsible for the design, conduct, or reporting of sponsored and non-sponsored research.

**Institutional Responsibilities.** An investigator's professional responsibilities on behalf of the university. The activities outlined in an employee's annual assignment or position description may include administration, teaching, research and creative activities, course preparation, curriculum development, lectures, evaluation of student efforts, academic advising, committee meetings and memberships, service on panels such as university review boards or data and safety monitoring boards, public service to include service on advisory committee's or review panels, and any other activity assigned by the employee's supervisor in accordance with university policies.

**Manage.** Taking action to address a financial conflict of interest, which can include reducing or eliminating the significant financial interest to ensure, to the extent possible, that the design, conduct, and reporting of research will be free from bias or personal financial gain.

**Research.** A systematic experiment, study, demonstration, or survey designed to develop or contribute general knowledge (basic research) or specific knowledge (applied research) in all fields by establishing, discovering, developing, elucidating, or confirming engineering, science, medicine, education, mathematics, humanities, and research involving human subjects or animals. The term includes product development to include a diagnostic test or drug.

**Affiliate.** A compensated or uncompensated subcontractor, sub-recipient, consultant, or other third-party entity performing research services for the university under a written or verbal agreement.

#### **Significant Financial Interest**

(1) A financial interest consisting of one or more of the following interests of the investigator (and those of the investigator's spouse and dependent children) that reasonably appears to be related to the investigator's university (institutional) responsibilities.

(i) with regard to any publicly traded entity, a significant financial interest exists if the value of any remuneration received from the entity in the 12 months preceding the disclosure and the value of any equity interest or fixed asset value of the entity as of the date of disclosure, when aggregated, equals or exceeds \$5,000;

(ii) with regard to any non-publically traded entity, a significant financial interest exists if the value of any remuneration received from the entity in the 12 months preceding the disclosure, when aggregated, equals or exceeds \$5,000 or when the investigator (or the investigator's spouse and dependent children) holds any equity interest (e.g., stock, stock options, or other ownership interest); or (iii) intellectual property rights and interests (e.g., patents, copyrights, trademarks) upon receipt of income related to such rights and interests.

(2) The occurrence of any reimbursed travel (i.e., that which is paid on behalf of the investigator and not reimbursed to the investigator) related to the investigator's institutional responsibilities. This disclosure requirement does not apply to travel that is reimbursed or sponsored by a federal, state, or local government agency, or is funded through a sponsored contract or grant through the Office of Research & Commercialization.

(3) The term significant financial interest does not include the following:

- (i) salary, royalties, or other remuneration paid by the university,
- (ii) income from seminars, lectures, or teaching engagements sponsored by a federal, state, or local government agency, an institution of higher education, an academic teaching hospital, a medical center, or a research institute that is affiliated with the university,
- (iii) income from service on advisory committees, review panels for a federal, state, or local government agency, institution of higher education, an academic teaching hospital, medical center, or research institute affiliated with the university.

## PROCEDURE

### Disclosure:

Faculty, Executive Service employees, and postdoctoral employees participating in or planning to participate in sponsored and non-sponsored research activity must complete the Potential Outside Activity, Employment, and Conflict of Interest and Commitment Disclosure Report (Form AA-21) on an annual basis and within 30 days of discovering, acquiring, or committing to a new financial interest or commitment.

Administrative and Professional employees, University Support Personnel System employees, Other Personnel Support employees, adjunct faculty, students, and affiliates planning to participate in or who are participating in sponsored and non-sponsored research activity must complete the Potential Outside

*4-504.2 Reporting a Potential Conflict of Interest or Conflict of Commitment in Research 4*

Activity, Employment, and Conflict of Interest and Commitment Report (Form ORC-COI) on an annual basis and within 30 days of discovering, acquiring, or committing to a new financial interest or commitment.

The Office of Research & Commercialization in conjunction with the University Compliance, Ethics, and Risk Office will review disclosures. Disclosures containing actual or potential conflicts of interest will be reviewed by the conflict of interest committee. The conflict of interest committee will determine if a management plan or other action is necessary.

#### Training:

The Office of Research & Commercialization will provide conflict of interest training modules to investigators. Investigators are required to complete conflict of interest training prior to engaging in research at least every four years, and within a thirty day period if one or more of the following occur: 1) the university revises its conflict of interest policies, 2) an investigator is new to the university, and 3) the university finds that an investigator is not in compliance with the university's conflict of interest policy and procedures.

#### Reporting Conflict of Interests to Sponsors:

The Office of Research & Commercialization is responsible for reporting investigator's significant financial interests to sponsors in accordance with sponsors' regulations and their policies and procedures, to include annual reports, changes to management or mitigation plans, and retrospective reports. Investigators will provide sufficient data to the Office of Research & Commercialization and other designated university officials to report the nature and extent of the financial conflict.

#### Records:

The Office of Research & Commercialization is responsible for maintaining records relating to all investigator conflict of interest disclosures, the university's review and response to such disclosures, and all actions taken by the university in accordance with its policy and procedures for three years from the date the final expenditure report is submitted to the sponsor.

#### Noncompliance:

Failure by an investigator to comply with the university's financial conflicts of interest policy or a financial conflict of interest management or mitigation plan will result in disciplinary action up to and including termination for just cause.

#### Subrecipients and other Affiliates:

The Office of Research & Commercialization will incorporate for subrecipients (includes affiliates) terms that establish whether the financial conflict of interest policy of the university or that of the subrecipients will apply to the subrecipients' investigators. Subrecipients shall certify as a part of the agreement that their conflict of interest policies adhere to the university's conflict of interest policy.

If the subrecipient does not have a conflict of interest policy that meets or exceeds the university's conflict of interest policy, the subrecipient investigators must be subject to the university's financial conflict of interest policy.

**Public Accessibility:**

The university will post the conflict of interest policy and procedure as well as corresponding conflict of interest guidelines on a publically accessible

Web site. When an investigator's significant financial interest is still held by the investigator and the conflict of interest committee determines the significant financial interest is related to the investigators sponsored research, the Office of Research & Commercialization will post the following information on a publically accessible Web site: 1) the investigator's name, title and research project role, 2) the name of the entity in which the significant financial interest is held, 3) the nature of the significant financial interest, and 4) the approximate dollar value of the significant financial interest (within dollar ranges).

**RELATED INFORMATION**

- 1) National Institutes of Health Grants Policy Statement, Part II, Terms and Conditions of NIH Grant Awards, Subpart A: General, Chapter 4.1.10, and Financial Conflict of Interest
- 2) National Science Foundation Award Administrative Guide, Chapter IV-Grantee Standards, Part A
- 3) State of Florida Code of Ethics for Public Officers and Employees - Florida Statutes, Title X, Chapter 112.313 - 112.326
- 4) UCF Regulation - UCF-3.018, Conflict of Interest or Commitment; Outside Activity or Employment

**RELATED DOCUMENTS**

- 1) Public Health Service Conflict of Interest Regulations - Title 42, CFR Part 50 and 45 CFR Part 94
- 2) National Science Foundation Conflict of Interest Regulations - Title 45, Part 680
- 3) Food and Drug Administration Regulations-Financial Disclosure by Clinical Investigators - 21 CFR, Part 54
- 4) UCF BOT-UFF Collective Bargaining Agreement
- 5) UCF Golden Rule Student Handbook

*4-504.2 Reporting a Potential Conflict of Interest or Conflict of Commitment in Research 6*

RELATED UCF WEB SITES

<http://www.research.ucf.edu/compliance>

<http://compliance.ucf.edu/conflict-of-interest/>

FORMS

- 1) AA21 - Potential Outside Activity, Employment, and Conflict of Interest and Commitment Report (faculty, executive staff, and post-doctoral employees)
- 2) ORC-COI - Potential Outside Activity, Employment, and Conflict of Interest and Commitment Report (A&P, USPS, OPS (to include adjunct faculty)
- 3) HR-11 - Report of Potential Conflict of Interest, Outside Activity and Employment for A&P or USPS Employees
- 4) HR-12 - Use of University Personnel, Equipment, Facilities, Students, or Services

INITIATING AUTHORITY

Vice President for Research & Commercialization

POLICY APPROVAL (For use by the Office of the President)	
Policy Number: 4-504.2	
Initiating Authority: <u>[Signature]</u>	Date: <u>8-20-12</u>
Policies and Procedures Review Committee Chair: <u>[Signature]</u>	Date: <u>8-20-12</u>
President or Designee: <u>[Signature]</u>	Date: <u>8/20/12</u>

*4-504.2 Reporting a Potential Conflict of Interest or Conflict of Commitment in Research 7*

Appendix M

2015-2018 CBA

recommendation of the department or equivalent unit prior to making his/her final tenure recommendation.

**15.9 Leave.** Authorized leaves of absence shall be credited or not credited toward the period of tenure-earning service according to the provisions of Section 17.4.

**15.10 Termination/Layoff.** Tenure/permanent status guarantees annual reappointment for the academic year until voluntary resignation, retirement, removal for just cause, or layoff.

## ARTICLE 16

### *DISCIPLINARY ACTION AND JOB ABANDONMENT*

#### **16.1 Just Cause.**

(a) The purpose of this article is to provide a prompt and equitable procedure for disciplinary action taken with just cause. Just cause shall be defined as:

- (1) incompetence, or
- (2) misconduct.

(b) An employee's activities which fall outside the scope of employment shall constitute misconduct only if such activities adversely affect the legitimate interests of the University

**16.2 Letters of Counseling/Instruction.** Letters of Counseling or Instruction may be provided to employees to provide guidance for bringing conduct or performance into compliance with university policies, rules, or provisions of the Collective Bargaining Agreement. Such letters, that may include recommendations for participation in an Employee Assistance Program, are not considered discipline and may be used only as evidence to demonstrate the employee's awareness of University expectations.

**16.3 Progressive Discipline.** Both parties endorse the principle of progressive discipline as applied to professionals.

#### **16.4 Notice of Intent.**

(a) Oral Reprimand and Written Reprimand. No notice of intent or employee response time is required when an employee receives an oral reprimand or written reprimand.

(b) Suspension or Termination. When the president or president's representative has reason to believe that a suspension or termination should be imposed, the president or president's representative shall provide the employee with a written notice of the proposed action and



2015-2018 CBA

the reasons therefore. Such notice shall be sent via certified mail, return receipt requested, or delivered in person with written documentation of receipt obtained. The employee shall be given ten (10) days to respond in writing to president or president's representative before the proposed action is taken. The president or president's representative then may issue a notice of disciplinary action under Section 16.5.

**16.5 Notice of Disciplinary Action.** Any notice of disciplinary action shall include a statement of the reasons therefore and a statement advising the employee that the action is subject to the Grievance Procedure in Article 20. All such notices shall be sent via certified mail, return receipt requested, or delivered in person to the employee with written documentation of receipt obtained.

**16.6 Disciplinary Action Other than Termination.** The University retains its right to impose disciplinary action other than termination for just cause including, but not limited to, suspension with or without pay.

**16.7 Termination.** A tenured appointment or any appointment of definite duration may be terminated during its term for just cause. An employee shall be given written notice of termination at least six months in advance of the effective date of such termination, except that in cases where the president or representative determines that an employee's actions adversely affect the functioning of the University or jeopardize the safety or welfare of the employee, colleagues, or students, the president or representative may give less than six months' notice.

**16.8 Employee Assistance Program.** Neither the fact of an employee's participation in an Employee Assistance Program, nor information generated by participation in the program, shall be used as a reason for discipline under this Article, except for information relating to an employee's failure to participate in an Employee Assistance Program consistent with the terms to which the employee and the University have agreed.

**16.9 Job Abandonment.**

(a) If an employee is absent without authorized leave for twelve (12) or more consecutive days under the provisions of Section 17.1, the employee shall be considered to have abandoned the position and voluntarily resigned from the University.

(b) Notwithstanding paragraph (a), above, if the employee's absence is for reasons beyond the control of the employee and the employee notifies the University as soon as practicable, the employee will not be considered to have abandoned the position.

Appendix N

**UCF-3.0124 Discipline and Termination for Cause of Non-Unit Faculty and A&P Staff Members.**

(1) Just cause shall be defined as:

- (a) Incompetence; or
- (b) Misconduct.

(2) Termination and Suspension.

- (a) The appointment of a non-unit faculty or an A&P staff member may be terminated or suspended during its term for just cause. The employee shall be given a written predetermination notice of a proposed termination or suspension by the president or his designee. The notice shall state the reasons for the proposed termination or suspension. The predetermination notice shall provide the opportunity for a predetermination conference regarding the proposed action, if requested in writing within five business days of receipt of the predetermination notice. The predetermination conference shall be informal in nature and shall allow the employee an opportunity to present any information or records regarding the proposed action.
- (b) A written final notice shall be issued to notify the employee of the University's final decision regarding the proposed action. Any termination or suspension imposed under this subsection shall take effect as set forth in the final notice issued by the President or designee. An employee who is terminated or suspended under this subsection may grieve such action as set forth in University Regulations UCF-3.036 (non-unit faculty) or UCF-3.037 (non-unit A&P).

(3) Leave Pending a Predetermination Conference. Notwithstanding the provisions of paragraph (3)(a) above, the President or his designee may immediately place an employee on administrative leave when the president or designee has reason to believe that the employee's presence on the job would: adversely affect the functioning of the university; or jeopardize the safety or welfare of any employee, colleague, student or patient. An involuntary administrative leave under this subsection may be with or without pay. As soon as practicable after placing an employee on leave under this provision, the president or president's designee shall serve written notice upon the employee, including a statement of the reasons for any action taken. Either concurrent with or subsequent to that notice the University shall issue a predetermination notice regarding proposed disciplinary action in

accordance with Section (3) above. If the employee has been placed on leave without pay under this subsection and ultimately prevails in the predetermination procedure, the employee shall be reinstated with back pay.

(4) Other Disciplinary Action. The president or designee retains the right to impose disciplinary action other than termination or suspension for just cause. Disciplinary actions include, but are not limited to, written reprimand, demotion, payment of fines, loss of future salary increases, or reassignment. The employee shall be given written notice of any disciplinary action other than termination or suspension, which notice shall state the reasons for the disciplinary action. Any disciplinary action taken under this section shall be subject to the grievance procedure found in University Regulations UCF-3.036 or UCF-3.037, as applicable. Counseling shall not be considered disciplinary action under this section.

(5) Notification. Whenever notice is provided to be given under this Regulation, the notice shall be personally delivered to the employee or mailed by certified mail to the employee's address of record with the university. The deposit of such notice in the U.S. Mail satisfies the requirement of notification and constitutes delivery of such notice. The University also may, but is not required to, provide notice to the employee by electronic mail to the employee's University-assigned electronic mail address.

*Authority: BOG Regulation 1.001. History—New 4-30-81, Amended 12-27-83, Formerly 6C7-3.124, Amended 3-16-03; Formerly 6C7-3.0124, Amended 6-22-09, 4-20-10, 5-2-16, 2-20-17.*

Appendix O

**UCF-3.0191 Disciplinary Action - University Support Personnel System.**

(1) Scope and Purpose.

(a) This regulation applies to all University Support Personnel System employees of the university with regular status. The provisions of this regulation are subject to applicable provisions of collective bargaining agreements. Employee discipline is an action that is to be undertaken with care, objectivity, and with full consideration of the rights and interests of both the employee and the university.

(b) The university subscribes to the principle of the use of discipline to correct employee conduct and behavior. Such discipline will normally be issued in a progressive manner, dependent upon the facts and circumstances of each case. Penalties will be imposed, dependent upon the seriousness of the offense and any aggravating or mitigating circumstances, or as otherwise required by law.

(c) Probationary Employees: The probationary period shall be a working-test period required of any USPS employee following appointment to any class in which the employee does not hold regular status. It is important to note that for purposes of discipline, regular status refers to an employee’s status in the USPS and not a specific position. Consequently, an employee with regular status in USPS, but in probationary status in a class, may be removed from the class during this probationary period, without the application of these standards. New employees, in probationary status in the USPS may be dismissed during this probationary period without the use of these standards and without the right of appeal.

(2) Guidelines on Employee Discipline. The immediate supervisor has the primary responsibility for taking or requesting disciplinary action against an employee, but should consult with their higher level authority. Human Resources has the responsibility of providing guidance to the various departmental units with regard to the administration of disciplinary actions and for assuring that they are accomplished in accordance with USPS regulations and the policies and guidelines of the university.

(3) Delegation of Authority. Discipline may only be administered by the supervisor who has been delegated the authority to do so. This delegation of authority varies with the severity of the disciplinary action and is identified in the following table:

Disciplinary Action	Authority
Oral Reprimand	Employee’s immediate supervisor or higher level supervisor

Written Reprimand Employee's immediate supervisor or higher level supervisor with the approval of the department head

Suspension, Discharge The dean, director or department head shall arrange for a review of the proposed action by the Director of Human Resources, or his/her designee. If the proposed action is approved, the Director of Human Resources, or his/her designee, will implement the suspension/discharge.

(4) Types of Disciplinary Action.

(a) Oral Reprimand – Involves a discussion between the supervisor and the employee regarding the infraction with an emphasis on correcting the employee's behavior. A written confirmation of an oral reprimand may be kept in the employee's personnel file.

(b) Written Reprimand – For more serious or repeated cases of infractions, the supervisor, with approval of the second level supervisor, will counsel the employee as to the correct and expected behavior as well as record the circumstances of the violation in memorandum form, giving the original to the employee and sending a copy to Human Resources.

(c) Suspension – The suspension of an employee shall normally be based on the recommendations of the supervisor and shall be subject to the approval of the dean, director or department head and the Director of Human Resources or his/her designee to ensure consistency of action throughout the institution. The Director of Human Resources or his/her designee will issue all suspensions.

(d) Discharge – When less severe actions fail in correcting an employee's job related behavior, or when the offense requires immediate separation from employment, a discharge action should be taken. The supervisor shall normally recommend the action, and it shall be subject to the approval of the dean, director or department head and the Director of Human Resources or his/her designee, who shall issue the discharge. If authorized by the Director of Human Resources or his/her designee, an employee may be placed on administrative leave with or without pay pending an investigation, which may be continued between the notice of proposed disciplinary action and the date of final action. Employees who are discharged for disciplinary reasons will not be eligible for rehire.

(5) Standards for Disciplinary Actions. Included herein are standards for the administration of disciplinary actions for various types of offenses. The following is not all-inclusive, and the

disciplinary action selected for a particular offense will be chosen based on the facts of the specific situation taking into consideration any extenuating circumstances. Previous offenses will be considered when determining the level of discipline to impose as to a new offense subject to the following: after two years have elapsed from the date of written reprimand or one year has elapsed from an oral reprimand, such reprimand will not be used for escalating the level of disciplinary action but will be referenced. Suspensions and written reprimands in lieu of suspension can be used indefinitely, with no time limit whatsoever. These standards do not preclude the imposition of more or less severe penalties depending upon all circumstances surrounding a particular incident.

(a) **Absence Without Authorized Leave.** The failure to secure approval for an absence from work during the established shift or work period. Included under this standard are absences that are not reported to management in accordance with departmental or university guidelines.

1. First occurrence: Written reprimand.
2. Second occurrence: Suspension.
3. Third occurrence: Discharge.

Provided, however, that the failure to secure approval for an absence of two or more consecutive days shall be considered a second occurrence; and the failure to secure approval for an absence of three or more consecutive days shall be considered a third occurrence. This standard shall also apply to employees who fail to return to work as specified in an approved leave of absence.

(b) **Abuse of Sick Leave.** Falsification by an employee of a notification of absence due to personal illness, injury or exposure to contagious disease.

1. First occurrence: Suspension or discharge.
2. Second occurrence: Discharge.

(c) **Possession or Use of a Deadly Weapon or a Dangerous Material.** Possession or use of firearms, fireworks of any description, explosives, chemicals which are disruptive, explosive, or corrosive in nature, or any weapon other than a common pocket knife.

1. First occurrence: Suspension or discharge.
2. Second occurrence: Discharge.

(d) **Damage or Destruction of University Property or Equipment.** The actual or attempted damage, destruction, or careless operation of university property or equipment which may or

may not result in personal injury. (If personal injury does result, more severe discipline may be imposed.) Sabotaging equipment or facilities will result in discharge.

1. First occurrence: Written reprimand to discharge.
2. Second occurrence: Suspension or discharge.
3. Third occurrence: Discharge.

(e) Conduct Unbecoming a Public Employee. Any act or acts on or off the job, that renders an employee ineffective within the university, affects the ability for acceptance by others, or poses a threat to the safety and well-being of members of the university community.

1. First occurrence: Suspension or discharge.
2. Second occurrence: Discharge.

(f) Conviction of a Misdemeanor or Felony. When an employee is convicted of a misdemeanor or felony as a result of a crime committed on or off the job and that conviction results in a negative effect on the employee's ability or availability to perform the duties of the job whether immediate or in the future.

1. First occurrence: Suspension or discharge.
2. Second occurrence: Discharge.

(g) Absenteeism. The university has a right to expect that employees will be available to perform work with a reasonable degree of regularity and to conduct their personal business using accrued leave without the need to resort to the use of approved leave without pay or unscheduled absences. If there is a pattern of absence by the employee, such as consistent absence on the day preceding or following the employee's regular days off, absence on the same day of each week or each month, or absences that occur with such frequency as to constitute a hardship on the office/department, these absences may be considered excessive.

1. First occurrence: Oral reprimand.
2. Second occurrence: Written reprimand.
3. Third occurrence: Suspension.
4. Fourth occurrence: Discharge.

(h) Tardiness. The failure to report to work at an established time at the beginning of the work shift, or the late return to work at the established time after lunch or rest period.

1. First occurrence: Oral reprimand.
2. Second occurrence: Written reprimand.

3. Third occurrence: Suspension.

4. Fourth occurrence: Discharge.

(i) Misuse of Confidential Information. To use or disclose information not otherwise available to the general public and gained by reason of his or her official position for his or her personal gain or benefit of any other person or business entity.

1. First occurrence: Written reprimand to discharge.

2. Second occurrence: Suspension.

3. Third occurrence: Discharge.

(j) Falsification of Records. The misrepresentation or omission of any facts, whether verbal or written, with the intent to defraud or otherwise mislead.

1. First occurrence: Written reprimand to discharge.

2. Second occurrence: Discharge.

(k) Fighting. A physical assault on or against another person.

1. First occurrence: Written reprimand to discharge.

2. Second occurrence: Discharge.

(l) Horseplay. Actions which are intended to be mischievous or prankish rather than malicious. If personal injury results, more severe disciplinary action up to and including suspension or discharge will be considered on the first occurrence.

1. First occurrence: Oral reprimand.

2. Second occurrence: Written reprimand.

3. Third occurrence: Suspension.

4. Fourth occurrence: Discharge.

(m) Insubordination. The unwillingness or refusal to comply with a direct order or any established work assignment of the immediate supervisor or higher level supervisor. This includes, but is not limited to, the refusal to carry out an assignment, refusal to work overtime, willful delay in carrying out an assignment, or responding with defiance to a reasonable work order or assignment issued by the immediate supervisor or higher level supervisor.

1. First occurrence: Suspension.

2. Second occurrence: Discharge.

(n) Leaving Work Station Without Authorization. The unauthorized absence by an employee from the work station or duty location during the established work period or the



leaving of a work station for a lunch or rest period without being properly relieved where that station must be maintained during such period.

1. First occurrence: Written reprimand to suspension.
2. Second occurrence: Suspension.
3. Third occurrence: Discharge.

(o) Loafing. The continued idleness or nonproductiveness during working hours which diverts the employee from performing assigned tasks. This includes wasting time, engaging in idle talk or gossip, conducting personal business, or using business phone or computers for personal reasons.

1. First occurrence: Oral reprimand to written reprimand.
2. Second occurrence: Written reprimand to suspension.
3. Third occurrence: Suspension to discharge.
4. Fourth occurrence: Discharge.

(p) Misuse of Position. The misuse of powers of authority that accompany a position for personal advantages such as to assist friends or family for financial or other gains.

1. First occurrence: Written reprimand to discharge.
2. Second occurrence: Discharge.

(q) Misuse of University or University Controlled Property or Equipment. The unauthorized use of any university or university controlled property or equipment for any reason other than for official university business.

1. First occurrence: Written reprimand to discharge.
2. Second occurrence: Discharge.

(r) Neglect of Duty. Carelessness in omission of, or inattention to, the performance of assigned duties and responsibilities. Negligence is synonymous with carelessness and signifies lack of care, caution, attention, diligence, or discretion.

1. First occurrence: Written reprimand to discharge.
2. Second occurrence: Discharge.

(s) Abuse of Intoxicants. Being under the influence of, being in possession of, the sale of, or the distribution of any controlled substances or illegal drugs while on duty; or violating the University's Drug-Free Workplace/Drug-Free Schools Policy. (This provision does not extend to prescribed use of prescription medications.)

1. First offense: Suspension to discharge.

2. Second offense: Discharge.

(t) Rudeness to Students, Staff or the Public. Impolite, discourteous, unprofessional, or uncooperative language or actions towards students, staff, or the public.

1. First occurrence: Oral reprimand.

2. Second occurrence: Written reprimand.

3. Third occurrence: Suspension.

4. Fourth occurrence: Discharge.

(u) Sexual Harassment. Any unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly a term or condition of employment, (2) submission to or rejection of such conduct by an individual is used as basis for employment or personnel decisions, or (3) when such conduct has the purpose or effect of substantially interfering with performance of work or creating an intimidating, hostile, or offensive working environment.

1. First occurrence: Written reprimand to discharge.

2. Second occurrence: Discharge.

(v) Sleeping While on Duty. The failure of an employee to remain awake while on duty during the established work shift.

1. First occurrence: Suspension.

2. Second occurrence: Discharge.

(w) Use of University equipment or work time to view pornography or explicitly nude images for non-business reasons.

1. First occurrence: Suspension to discharge.

2. Second occurrence: Discharge.

(x) Theft or Stealing. The unauthorized taking of any property or service.

First occurrence: Discharge.

(y) Threatening and/or Abusive Language. The use of language which is threatening, profane, vulgar, or abusive.

1. First occurrence: Written reprimand to discharge.

2. Second occurrence: Discharge.

(z) Violation of Safety Practices. The failure to adhere to or follow established safety rules or requirements. This includes the failure to report an accident of an employee involving personal injury, failure to wear safety equipment, and the performance of any unsafe action.

1. First occurrence: Written reprimand to suspension.
2. Second occurrence: Discharge.

(aa) Willful Violation of a Provision of Law or Board of Governors or University Regulation. The deliberate failure to abide by Board of Governors or University Regulations or to follow the statutes governing employment by the State of Florida. This may include, but is not limited to giving or accepting a bribe, discrimination in employment, or illegal campaigning.

1. First occurrence: Written reprimand to discharge.
2. Second occurrence: Discharge.

(bb) Strike or Concerted Activity. Instigating or supporting in any manner a strike. A strike is defined by Florida Statute as: The concerted failure of employees to report for duty; the concerted absence of employees from their positions; the concerted stoppage of work by employees; the concerted submission of resignations by employees; the concerted abstinence in whole or in part by any group of employees from the full and faithful performance of the duties of employment with a public employer [such as the University] for the purpose of inducing, influencing, condoning, or coercing a change in the terms and conditions of employment or the rights, privileges, or obligations of public employment, or participating in a deliberate and concerted course of conduct which adversely affects the services of the public employer; the concerted failure of employees to report for work after the expiration of a collective bargaining agreement; and picketing in furtherance of a work stoppage. The term “strike” shall also mean any overt preparation, including but not limited to, the establishment of strike funds with regard to the above activities.

First occurrence: Discharge.

*Authority: BOG Regulation 1.001. History–New 1-10-82, Amended 10-26-82, 12-29-88, Formerly 6C7-3.191, Amended 3-2-94, 4-23-03, 7-26-04; Formerly 6C7-3.0191, Amended 6-11-09.*