AGENDA
ACADEMIC SENATE MEETING
February 15, 2012

1. CALL TO ORDER, ANNOUNCEMENTS & QUESTIONS
   Dr. Daniel

2. APPROVAL OF THE AGENDA
   Dr. Leaf

3. APPROVAL OF MINUTES
   January 18, 2012 Meeting
   Dr. Leaf

4. SPEAKER’S REPORT
   Dr. Leaf

5. FAC REPORT
   Dr. Leaf

6. STUDENT GOVERNMENT LIAISON REPORT
   Dr. Cordell

7. RESEARCH CONFLICT OF INTEREST POLICY
   Dr. Leaf/Rafael Martin

8. APPOINTMENT OF DENIS DEAN TO COMMITTEE ON QUALIFICATIONS OF
   ACADEMIC PERSONNEL
   Dr. Leaf

9. CEP PROPOSAL – GRADUATE CATALOG
    UNDERGRADUATE CATALOG
   Dr. Cantrell

10. ANNUAL REVIEW POLICY
    Dr. Leaf

11. DISCUSSION ITEM – PREREQUISITE GRADES
    Dr. Leaf

12. ADJOURNMENT
    Dr. Daniel
UNAPPROVED AND UNCORRECTED MINUTES

These minutes are disseminated to provide timely information to the Academic Senate. They have not been approved by the body in question, and, therefore, they are not official minutes.

ACADEMIC SENATE MEETING
JANUARY 18, 2012

PRESENT:  David Daniel, Hobson Wildenthal, Shawn Alborz, Peter Assmann, Poras Balsara, Kurt Beron, Dinesh Bhatia, Dan Bochsler, Judd Bradbury, Gail Breen, John Burr, Cy Cantrell, David Cordell, Gregg Dieckmann, John Ferguson, Lev Gelb, Jeremy Hall, Mustapha Ishak-Boushaki, Joe Izen, Ganesh Janakiraman, Murray Leaf, Stanimir Markov, Jessica Murphy, Ravi Prakash, Monica Rankin, Michael Rebello, Tim Redman, Liz Salter, Richard Scotch, Lucien Thompson, Zhenyu Xuan

ABSENT:  Bobby Alexander, Daniel Cohen, Gregory Dess, Kamran Kiasaleh, Sumit Majumdar, Syam Menon, Dennis Miller, Neeraj Mittal, Steven Nielsen, Lakshman Tamil, Mark Thouin

VISITORS:  Andrew Blanchard, Serenity King, Abby Kratz, Chris Parr, Austin Cunningham, Sheila Amin Gutierrez de Pineres, Mary Jo Venetis, Sharkey Andrews

1. CALL TO ORDER, ANNOUNCEMENTS AND QUESTIONS

President Daniel called the meeting to order and asked for questions. There were no particular announcements, but Dr. Daniel said that he was especially pleased with the way the fall semester worked out considering the large growth in student enrollment. In spite of the large spike in enrollment, he received no complaints from students regarding unavailability of class sections, overcrowding, etc. Dr. Daniel expressed appreciation to the faculty and academic leadership for their help in meeting these challenges.

Applications for next fall are being managed in new ways by the Provost. Our goal is for an overall enrollment increase of 4-5%. One way this will be accomplished is to exercise greater control over the awarding of Academic Excellence Scholarships. In addition to helping to limit the enrollment growth, this will help control the cost of these scholarships as well. Graduate applications are up 28-30% for next fall, and Dr. Daniel feels this is a reflection of the reputation of the University. The Provost has been enthusiastically encouraged to hire new faculty.

Dr. Daniel announced that an organizational change has been made splitting what was the Office of Business Affairs into the Office of Administration and the Office of Budget and Finance. This was done to reflect the massive workload in these two rather distinct areas of the University. There are still a number of very specific issues to resolve regarding the PeopleSoft conversion and we will have to make more of an investment in this.

On the administrative side we have a lot of new initiatives especially with regard to facilities. The Loop Road project with the City of Richardson has been funded and work will begin soon. We are building some additional surface parking lots now so they will be ready by fall. Two
parking garages will be built in the future. One will be by the residence halls and one next to the new energy plant next to the School of Management.

2. **Approval of the Agenda**
   Cy Cantrell moved to add approval of the proposed MSSE degree program and the approval of the undergraduate catalog as items from the CEP. Tim Redman opposed the motion because the undergraduate catalog material was not distributed in a timely fashion and moved that only the MSSE proposal be added to the agenda. Dean Pineres stated that the approval of the undergraduate catalog could wait until the February meeting. Tim Redman amended the motion adding only the MSSE proposal for consideration. Dan Bochsler seconded the amended motion. The agenda was approved as amended.

3. **Approval of Minutes**
   Cy Cantrell moved to approve the minutes as circulated. Peter Assmann seconded. The motion carried.

4. **Speaker’s Report – Murray Leaf**
   1. Our policy on Dishonesty in Theses and Dissertations was discussed with OGC. Dean Fitch still opposes the idea of a separate procedure and policy just for theses and dissertations and thinks it should be part of current policy on other forms of dishonesty. Maggie Wilensky, our UTD attorney, tentatively agreed and arranged a conference call with OGC on January 9. Gene Fitch, Abby Kratz, Priscilla Lozano, Dan Sharphorn, and I participated. In the call, Priscilla Lozano and Dan Sharphorn thought the issue was neutral legally, but they will try to devise an integrated wording, which we can then still accept or reject.

   2. Speaker Leaf has asked Marilyn Kaplan to have the Distance Learning Committee to take the lead in working on MyEdu for the Senate.

   At this time President Daniel remarked that he felt MyEdu may prove to be a very important initiative for us. It can have some very useful information and he can see why today’s student would be interested in having the option to access this type of information online. The program allows students to juggle their schedules more effectively. Students are interested in support tools that will allow them to get better advising.

   A concern was expressed that this type of word of mouth advising could undermine our own efforts at student advising. Dr. Daniel feels that we should work with MyEdu to give them comprehensive information.

   There was general concern about the type of information that was made available to MyEdu. Dr. Wildenthal stated that we have not given MyEdu any information, but if information was available and it is requested in the appropriate fashion we would make that information available. Anything that is in the MyEdu database right now has been obtained through public records or by student-driven postings online.

   3. Chancellor’s Dashboard: There is a possibility of having the Regents provide SciVal or Academic Analytics to the campus. If so, it would be useful in promotion-tenure evaluations among other things.
4. Mike Durbin, as President of the Retirees Association, has suggested that the UTD website include a virtual graveyard—a place to put and keep memorials and other statements recalling the contributions of faculty who have died.

5. **FAC REPORT - MURRAY LEAF**
   The Faculty Advisory Council will meet on January 26.

6. **STUDENT GOVERNMENT LIAISON REPORT**
   Sharkey Andrews, Student Government President, reported that the Student Senate will not meet until next week. March 31 is the date for the fourth annual I Heart UT Dallas health fair. She invited all faculty and staff to attend and bring their families and friends.

7. **CEP PROPOSALS**
   Cy Cantrell presented the graduate catalog front matter for review. These are primarily editorial changes. One substantive change deals with appeals of academic decisions. The newly reworded policy states that the only grounds for changing a grade will be clerical error or that it is unjust. The only ground for considering a grade to be unjust is that it is arbitrary or capricious, meaning that the grade cannot be considered reasonable given the material of the course, the overall performance of the class and the individual performance of the student. The new copy states that the university assumes that course-work is best evaluated by the instructor in the immediate context of the course activity. Requests for reconsideration must show with clear and convincing evidence why this assumption should be set aside. This is a considerably higher standard for a complaint than what we have had in the past.

   Dr. Cunningham asked Dean Austin Cunningham if he had any comments. Dr. Cunningham stated that he agrees completely with this change and it is a welcome addition to the catalog.

   Dr. Cunningham said that the last catalog introduced a provision for doctoral students in their final semester allowing them to be enrolled in one semester hour as opposed to the previous rule that stated all students must be enrolled in at least three semester hours. In recognition of the ever-increasing cost of tuition, he is now proposing that all students in their final semester be allowed to register for one semester hour. Dr. Daniel asked what the rationale was for this when faculty is spending so much of their time editing theses and dissertations. Dr. Cunningham said that in many cases the students in their final semester have missed the deadline for application and all of the work has been done. Dr. Daniel stated that he had no objection in those cases where a student has submitted all the materials required for graduation by the first class day. If, however, they are still on campus working there is real cost associated with producing that work. Dr. Cunningham explained that solve the problem of students having to enroll in three hours when they only needed one hour to complete the degree requirements. The catalog simply states that a student must be enrolled in the semester of graduation. This provides the option to the degree program to specify what that enrollment means. This was acceptable to Dr. Daniel. Cy Cantrell moved that the graduate catalog copy be approved. Richard Scotch seconded. The motion carries.

**Executive Master of Science in Software Engineering Proposal:** Cy Cantrell presented this proposal. It is modeled closely after the Executive Master of Business Affairs in the School of Management. He explained that Executive Masters programs are popular in professional schools because they allow people to come to campus fewer times in total for the degree. The
content is the same for the existing Master of Science in Software Engineering. The difference is that students will come to campus three times per month instead of two or three times a week and that there is a specific price affixed to the program, which we have typically not done with degrees offered in the traditional format. The academic requirements are the same, but students will be interviewed prior to acceptance in the program. There is also a “work experience” requirement. Cy Cantrell moved to approve this proposal. Dan Bochsler seconded. The motion carried.

8. **Draft – Annual Review Policy**

Speaker Leaf stated that we do not presently have a formal policy on annual reviews. Since this has been considered an administrative process we have left it to the administration. They have developed set of practices which appear to be acceptable to the faculty. We will, however, be required to develop a policy with faculty involvement if the Regents approve the presently proposed amendments to Regents’ Rule 31102, dealing with post tenure review (periodic performance evaluation). The amendments will relate the post tenure review to the annual reviews, and will require all campuses to have an annual review policy established with Senate involvement as well as a post tenure review policy established with Senate involvement. This policy for UTD is intended to be pretty much what we already doing. Speaker Leaf asked the members of the Senate for their general reaction to the policy draft and whether this was something that he should recommend to the UT System Faculty Advisory Council for their consideration. Cy Cantrell suggested that practices may differ among different academic units and that the schools should have the ability to decide whether or not to include peer review as a part of their annual review process.

Tim Redman said that he thought this was an excellent start but cautioned rushing into a decision. He suggested that allowances should be made for faculty discretion to emphasize service or teaching over research at certain stages of their careers.

There was general concern expressed over rushing into a policy too quickly. The consensus of the Senate was to refer this item back to the Academic Council for further discussion. Speaker Leaf will do so, and will also incorporate the suggestions made in a revised version for discussion at the Faculty Advisory Council level.

9. **Review of Nontenure-System Faculty**

Speaker Leaf explained that the policy that was circulated in the agenda packet is not the original policy that was approved in 2006. That policy had a series of steps leading to longer contracts. That was removed in the policy that is now posted, so that the practice of giving annual contracts is consistent with this policy. Both noted that the Regents have a limit of three year contracts. The 2006 policy allowed contract terms up to that limit; the present version says UTD only issues annual contracts. The reason for the change was that the administration was concerned about being able to respond to the demands we have been receiving from the governor’s office for plans to return operating money to the state in the event of budget shortfalls. The administration does not think this is necessary; we can return to offering more security. But we should also try to strengthen the process of peer evaluation on which such longer contracts should be based.

Dr. Leaf asked Dr. Wildenthal if he would like to speak to the issue for the administration. Dr. Wildenthal stated that our Senior Lecturer colleagues are a totally essential highly valued and
valuable component of our university life. It could be that we do not spend enough time and
attention evaluating them. They are extremely important and we should pay more attention to
them and to their performance and to their relationship to the university.

Speaker Leaf asked if the Senate agreed to proceed with revising the policy to try to provide
more security for Senior Lecturers with longer-term contracts as well as making the review
process a university-level review comparable to the tenure/tenure-track review. That would
mean that we would need to develop clear and strong teaching evaluation standards.

Speaker Leaf said that one option that was considered in 2006 when the original policy was
approved was having the Committee on Qualifications of Academic Personnel or a comparable
university-level body that would review candidates for hiring and make recommendations to
the Provost. The opinion was expressed that this was not a practical solution and was not
workable.

Richard Scotch noted the importance of coming up with a system that would provide security
and appropriate recognition for Senior Lecturers while still allowing the schools the ability to
adapt to the changing market as new units are created and old units have to shift.

Speaker Leaf said that if there was agreement to move forward, the obvious way would be to
establish a committee of faculty and administrators. He asked for a motion to establish a “3+3”
committee to consider modifications of the current policy. Judd Bradbury moved. Ramaswamy
Chandrasekaran seconded. The motion carried. The Academic Council will decide on the
membership of the committee.

Speaker Leaf said that we are beginning the election process again and the Senate is required to
establish an ad hoc election committee. Last year the committee members were Ramaswamy
Chandrasekaran, David Cordell and John Wiorkowski.

Dr. Leaf asked Dr. Chandrasekaran if he was willing to serve again. He agreed. Dinesh Bhatia
volunteered to serve as well, along with David Cordell, who will chair the committee.

10. ADJOURNMENT
There being no further business, President Daniel adjourned the meeting.

APPROVED: ___________________________  DATE: _____________
Murray J. Leaf
Speaker of the Academic Senate
MODEL POLICY FOR DISCLOSURE OF SIGNIFICANT FINANCIAL INTERESTS
AND MANAGEMENT AND REPORTING OF
FINANCIAL CONFLICTS OF INTEREST IN RESEARCH—
ACADEMIC INSTITUTIONS

This policy governs the disclosure of individual significant financial interests and the
management and reporting of an individual financial conflict of interest in research performed at
this institution of The University of Texas System.

This policy provides requirements for the disclosure of financial interests that comply with the
disclosure requirements of federal regulations of the U.S. Department of Health and Human
Services (HHS) and the HHS Public Health Service, but this policy is not limited in application
to PHS-funded research. Rather, this policy applies broadly to research performed at the
institution, without regard to whether the research has external funding and, if externally funded,
regardless of the funding source. For this purpose, “research” means any systematic
investigation, study, or experiment designed to develop or contribute to generalizable
knowledge. The term includes both basic and applied research and product development.

This policy applies in addition to general institutional policies, such as policies on standards of
conduct, as well as other policies governing disclosure of activities and financial interests.

If a specific federal law or regulation provides different requirements than this policy, the more
stringent requirement applies.

Chapter 1. General Provisions

Section 1.01. Who is Covered: “Covered Individual”

(a) An individual who, regardless of title or position, is responsible for the design, conduct, or
reporting of research, including a principal investigator, co-investigator, or project director, must
file and update financial disclosure statements under this policy. A person required to file and
update financial disclosure statements is referred to in this policy as a “covered individual.”

(b) A student enrolled at the institution who is responsible for the design, conduct, or reporting of
research that is not PHS-funded is considered to be a “covered individual” under this policy only
if the student has a significant financial interest that appears to be affected by the research or is in
an entity whose financial interest appears to be affected by the research. A student who is in
doubt about whether the student is a “covered individual” must request a determination by the
conflict of interest official appointed under Section 3.01.

Sec. 1.02. Collaborators and Contractors

(a) If research is carried out in cooperation with or through a subrecipient (e.g. a subcontractor,
contractor, or collaborator), this institution will enter into a written agreement with the
contracting party that provides legally enforceable terms that establish whether this policy or the
financial conflicts of interest policy of the contracting party applies to the researchers of the
contracting party.
(b) If the policy of the contracting party applies to its researchers, the contracting party must certify that its policy is consistent with the requirements of any applicable federal regulations. If the contracting party cannot so certify, the agreement must state that the researchers are subject to this policy as covered individuals for disclosing significant financial interests that are directly related to the researcher’s work at this institution.

(c) If the policy of the contracting party applies to its researchers, the agreement must specify the time periods for the contracting party to report identified financial conflicts of interest to this institution. The time periods must be sufficient for this institution to make any reports required by federal regulation.

(d) If the policy of this institution applies to the researchers of the contracting party, the agreement must specify the time periods for the researchers to submit a financial interest disclosure statement to this institution. The time periods must be sufficient for this institution to comply with its review, management, and reporting obligations under federal regulation.

Sec. 1.03. Education

(a) Each covered individual must acknowledge annually that the individual is aware of and has read this policy and is aware of the covered individual’s responsibilities regarding disclosure of significant financial interests and of applicable federal regulations.

(b) A covered individual must complete training in regard to this policy and applicable policies, regulations, and laws before engaging in research at the institution and at least once every four years thereafter. A covered individual who is new to the institution must complete the training before engaging in research at the institution or provide evidence of having completed the training at another institution of The University of Texas System within the last four years. A covered individual must complete the training immediately if the institution finds that the individual is not in compliance with this policy or the individual’s management plan, or if the institution revises this policy in a manner that affects the individual’s duties.

Chapter 2. Disclosure of Significant Financial Interests Related to Institutional Responsibilities

Sec. 2.01. Extent of Disclosure

(a) As often as required by Section 2.05, a covered individual shall complete or update a financial interest disclosure statement that:

(1) identifies all research in which the covered individual is engaged at the time of the disclosure; and

(2) discloses, as provided by Section 2.02, each significant financial interest of the individual and covered family members that reasonably appears to be related to the individual’s institutional responsibilities.
(b) “Institutional responsibilities” means any of the professional responsibilities of a covered individual on behalf of the institution, including research, research consultation, teaching, professional practice, institutional committee membership, or service on an institutional panel such as an Institutional Review Board (IRB) or Data and Safety Monitoring Board (DSMB).

(c) In determining whether research or a financial interest should be disclosed, the covered individual should resolve the doubt in favor of disclosure.

Sec. 2.02. Contents of Disclosure: Significant Financial Interests

(a) The following interests are considered to be significant financial interests and, subject to the exclusions provided by Subsection (b) of this section, a covered individual’s disclosure statement must include the following information in regard to the covered individual and covered family members, but only in regard to interests that reasonably appear to be related to the individual’s institutional responsibilities:

(1) Payments received from or equity interest in a publicly traded entity: the total amount and source of payments received in the preceding twelve months from a publicly traded entity and the value of any equity interest held in the entity on the date of disclosure that, when aggregated, exceed $5,000, including:
   (A) as to payments received:
      (i) salary; and
      (ii) any payment for services other than salary, such as consulting fees, honoraria, or paid authorship; and
   (B) as to equity interests held, any stock, stock options, or other ownership interest or entitlement to such an interest, valued by reference to public prices or other reasonable measures of fair market value;

(2) Payments received from a non-publicly traded entity or equity interest in a non-publicly traded entity:
   (A) the total amount and source of payments received in the preceding twelve months from an entity that is not publicly traded that, when aggregated, exceed $5,000, including
      (i) salary; and
      (ii) any payment for services other than salary, such as consulting fees, honoraria, or paid authorship; and
   (B) a description of any equity interest held in an entity that is not publicly traded, including any stock, stock options, or other ownership interests or entitlement to such an interest;

(3) Intellectual property and royalties:
   (A) a description of intellectual property rights held and any agreements to share in royalties related to those rights; and
   (B) the amount and source of royalty income that the covered individual or covered family member received or had the right to receive in the preceding twelve months;

(4) Travel: reimbursed or sponsored travel in the preceding 12 months, including the purpose of the trip, the identity of the sponsor/organizer, the destination, and the duration;
(5) GIFTS: the value and source of a single gift that the covered individual received in the preceding twelve months that exceeds $250 in value, or multiple gifts from a single entity that in the aggregate exceed $250 in value, other than gifts from a covered family member; and

(6) FIDUCIARY POSITIONS: a fiduciary position the covered individual held in a for-profit or nonprofit entity in the preceding twelve months, including a position as a member of the board of directors, an officer, or other executive or management position, for which the individual received any form of remuneration or reimbursement for expenses, and the name and principal address of the entity.

(b) The following interests are not significant financial interests and need not be disclosed on the disclosure statement:

(1) salary, royalties, or other remuneration paid by the institution to the covered individual, if the covered individual is currently employed or otherwise appointed by the institution;

(2) income from seminars, lectures, or teaching engagements sponsored by a federal, state, or local government, an institution of higher education as defined by 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute affiliated with an institution of higher education;

(3) income from service on an advisory committee or review panel for a federal, state, or local government, an institution of higher education as defined by 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute affiliated with an institution of higher education;

(4) income from investment vehicles, such as mutual funds or retirement accounts, as long as the covered individual does not directly control the investment decisions made in those vehicles; or

(5) travel reimbursed or sponsored by a federal, state, or local government agency, an institution of higher education as defined by 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education.

(c) In making disclosures under this section, the covered individual shall disclose the value of a significant financial interest within the following ranges:

(1) $0 - $4,999;

(2) $5,000 - $9,999;

(3) $10,000 - $19,999;

(4) amounts between $20,000 - $100,000 by increments of $20,000; or

(5) amounts above $100,000 by increments of $50,000.

(d) When describing a source, the covered individual shall provide the name and principal address for the source.
(e) The covered individual shall distinguish among information pertaining to the covered individual and covered family members whose financial interests and activities are also disclosed by the covered individual.

(f) The conflict of interest official may request further information about a covered individual’s travel, including the monetary value of the travel, in order to determine whether the travel constitutes a financial conflict of interest.

Sec. 2.03. Disclosure of Financial Interests of Other Persons: Covered Family Member

(a) For purposes of disclosure under Section 2.02, “covered family member” includes:

(1) a spouse;
(2) a dependent child or stepchild or other dependent, for purposes of determining federal income tax liability during the period covered by the disclosure statement; and
(3) a related or non-related, unmarried adult who resides in the same household as the covered individual and with whom the covered individual is financially interdependent as evidenced, for example, by the maintenance of a joint bank account, mortgage, or investments.

(b) If the covered individual is in doubt about whether an individual is a covered family member, the covered individual should resolve the doubt in favor of disclosure.

(c) In disclosing financial interests, the interest of any legal entity, including a foundation or a trust that is controlled or directed by the individual or by the individual and covered family members, is considered to be the interest of the covered individual or covered family member as if the separate legal entity did not exist.

Sec. 2.04. Text of Documentation to be Provided on Request

If a covered individual discloses payments, intellectual property interests, or royalties, the covered individual must permit review of any related agreement, contract, offer letter, or other documentation on request of:

(1) the president of the institution;
(2) the conflict of interest official; or
(3) any other person or entity with administrative responsibility in regard to reviewing financial interest disclosure statements or approving a related management plan.

Sec. 2.05. When to Disclose; Period Covered by Statement

(a) A covered individual shall submit or update a financial interest disclosure statement:

(1) not later than the 30th day of initial employment, covering the 12 months preceding the date of disclosure;
(2) annually not later than March 1; and
(3) not later than the 30th day after acquiring a new financial interest that requires disclosure under Section 2.02, such as receiving payments, an equity interest, intellectual property rights, or royalties that would require disclosure on an annual financial interest disclosure statement.

(b) A covered individual who is planning to participate in a PHS-funded research project shall submit a financial interest disclosure statement not later than the time of application for PHS-funded research, except that an individual who is new to the institution and who is planning to participate in an on-going PHS-funded research project shall submit the statement not later than the 30th day of initial employment.

(c) The president of the institution or the conflict of interest official may require a covered individual to submit additional disclosures.

Chapter 3. Conflict of Interest Official; Disclosure Statement Review

Section 3.01. Conflict of Interest Official

The president or his or her designee shall appoint a conflict of interest official to perform the duties required by this policy and other duties as assigned by the president.

Sec. 3.02. Disclosure Statement Review; Determination of Financial Conflict of Interest

(a) The appropriate conflict of interest official shall review each financial interest disclosure statement and make two determinations:

   (1) whether any significant financial interest disclosed is related to research in which the covered individual is engaged; and

   (2) if so, whether a financial conflict of interest exists.

(b) A significant financial interest is related to research in which the covered individual is engaged if the conflict of interest official reasonably determines that the financial interest appears to be affected by the research or is in an entity whose financial interest appears to be affected by the research.

(c) A financial conflict of interest exists when the conflict of interest official reasonably determines that a significant financial interest could directly and significantly affect the design, conduct, or reporting of the research.

Sec. 3.03. No Expenditure of Funds Prior to Review and Determination

Neither the institution nor a covered individual may expend research funds unless the conflict of interest official has determined that no financial conflict of interest exists or that any financial conflict of interest is manageable in accordance with the terms of a management plan that has been adopted and implemented in accordance with Chapter 4 of this policy.
Sec. 3.04. Cooperation with Institutional Committees

The conflict of interest official and the appropriate IRB, IACUC, IBC, and other relevant committees shall cooperate in the consideration of whether a covered individual has a financial conflict of interest in regard to research and in the development and implementation of a management plan for that conflict of interest.

Chapter 4. Management of Financial Conflict of Interest

Sec. 4.01. Management Required for Financial Conflicts of Interest

(a) If the conflict of interest official determines that a covered individual has a financial conflict of interest, the official, in cooperation with the covered individual and other appropriate individuals designated by the conflict of interest official, shall develop a management plan governing that conflict of interest.

(b) If research is ongoing and a new covered individual discloses a significant financial interest related to that research or any other covered individual discloses a new significant financial interest related to that research, the conflict of interest official shall, not later than the 60th day after the filing of the disclosure statement:
   (1) review the disclosure statement to determine if a financial conflict of interest exists; and
   (2) if a financial conflict of interest exists, implement an interim management plan or implement other interim measures to ensure the objectivity of the research.

(c) If the conflict of interest official learns of a significant financial interest that was not timely disclosed or was not timely reviewed, the conflict of interest official shall, not later than the 60th day after learning of the interest:
   (1) determine whether the significant financial interest is a financial conflict of interest; and
   (2) if a financial conflict of interest exists, implement an interim management plan or implement other interim measures to ensure the objectivity of the research going forward.

(d) In addition, if a financial conflict of interest was not timely identified or managed, or if a covered individual fails to comply with a management plan, the conflict of interest official shall, not later than the 120th day after determining noncompliance:
   (1) complete and document a retrospective review and determination as to whether research conducted during the period of noncompliance was biased in the design, conduct, or reporting of the research; and
   (2) implement any measures necessary with regard to the covered individual’s participation in the research between the date that the noncompliance is identified and the date the retrospective review is completed.

(e) For PHS-covered research projects, the retrospective review shall cover key elements as specified by federal regulations and may result in updating the Financial Conflict of Interest Report, notifying the PHS, and submitting a mitigation report as required by federal regulation.
Sec. 4.02. Management Plan Design and Agreement

(a) A management plan may impose conditions and prescribe actions necessary to manage a financial conflict of interest, including an action reducing or eliminating the financial conflict of interest, to ensure that the design, conduct, or reporting of the research is free from bias or the appearance of bias. Examples of conditions or actions that may be prescribed include:

1. public disclosure of the conflict of interest in presentations and publications;
2. for human subjects research, direct disclosure of the conflict of interest to research participants;
3. appointment of an independent monitor with authority to take measures to protect the design, conduct, and reporting of research against bias, or the appearance of bias, resulting from the conflict of interest;
4. modification of the research plan;
5. change of personnel or personnel responsibilities, or disqualification of personnel from participation in all or a portion of the research;
6. divestiture or reduction of the financial interest; or
7. severance of relationships that create an actual or potential financial conflict of interest.

(b) A management plan must be in the form of a written agreement and must:

1. provide that the covered individual acknowledges receipt of the plan and understands the requirements of this policy and understands and agrees to comply with the required actions and other terms of the plan, including the time frames for required actions; and
2. clearly identify each specific person responsible for monitoring compliance with the management plan.

Sec. 4.03. Monitoring and Compliance

Each person conducting research under a management plan shall comply fully and promptly with the plan, and each person identified in the management plan as having responsibility for monitoring compliance with the plan shall carefully and fully monitor that compliance.

Chapter 5. Web Posting of Financial Conflict of Interest Information

Sec. 5.01. Posting of this Policy

This policy and each update of this policy must be publicly accessible through the Internet.

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[OPTION A – Sec. 5.02]

Sec. 5.02. Posting of Information Regarding Specific Financial Conflicts of Interest

(a) For each financial conflict of interest that is found to exist by the conflict of interest official, the institution will make the following information available to the public through the Internet in regard to each covered individual who contributes to the scientific development or execution of
the research project in a substantive, measureable way, including a covered individual who is the project director or principal investigator:

(1) the covered individual’s name;
(2) the covered individual’s title and role with respect to the research;
(3) the name of the entity in which the significant financial interest is held;
(4) the nature of the significant financial interest that constitutes a financial conflict of interest; and
(5) the approximate value of the significant financial interest by range or, if the dollar value cannot be determined by reference to public prices or other reasonable measures of fair market value, a statement to that effect.

(b) The approximate dollar value of the significant financial interest shall be provided within the following ranges if it can be determined by reference to public prices or other reasonable measures of fair market value:

(A) $0 - $4,999;
(B) $5,000 - $9,999;
(C) $10,000 - $19,999;
(D) amounts between $20,000 - $100,000 by increments of $20,000; or
(E) amounts above $100,000 by increments of $50,000.

(c) The institution will update the information required by this section annually. In addition, for any financial conflict of interest of a covered individual whose information must be posted under this section and for which the information was not previously posted, the institution will make the information required by this section available not later than the 60th day after the financial conflict of interest is identified.

(d) The website on which the information is posted must note that the information is current as of the date listed and is subject to updates.

(e) The information required by this section must remain available on the Internet for three years after its most recent update.

(f) For PHS-funded research, in regard to project directors, principal investigators, and other senior or key personnel, this information must be available through the Internet before expending PHS funds.

[OPTION B – Secs. 5.02 and 5.03]

Sec. 5.02. Posting of Information Regarding Specific Financial Conflicts of Interest in Research Funded by PHS

(a) For each financial conflict of interest in PHS-funded research that is found to exist by the conflict of interest official, the institution will make the following information available to the public through the Internet in regard to each covered individual who contributes to the scientific development or execution of the research project in a substantive, measureable way, including a covered individual who is the project director or principal investigator:

(1) the covered individual’s name;
(2) the covered individual’s title and role with respect to the research;
(3) the name of the entity in which the significant financial interest is held;
(4) the nature of the significant financial interest that constitutes a financial conflict of interest; and
(5) the approximate value of the significant financial interest by range or, if the dollar value cannot be determined by reference to public prices or other reasonable measures of fair market value, a statement to that effect.

(b) The approximate dollar value of the significant financial interest shall be provided within the following ranges if it can be determined by reference to public prices or other reasonable measures of fair market value:

(A) $0 - $4,999;
(B) $5,000 - $9,999;
(C) $10,000 - $19,999;
(D) amounts between $20,000 - $100,000 by increments of $20,000; or
(E) amounts above $100,000 by increments of $50,000.

(c) The institution will update the information required by this section annually. In addition, for any financial conflict of interest of a covered individual whose information must be posted under this section and for which the information was not previously posted, the institution will make the information required by this section available not later than the 60th day after the financial conflict of interest is identified.

(d) The website on which the information is posted must note that the information is current as of the date listed and is subject to updates.

(e) The information required by this section must remain available on the Internet for three years after its most recent update.

(f) For PHS-funded research, in regard to project directors, principal investigators, and other senior or key personnel, this information must be available through the Internet before expending PHS funds.

**Sec. 5.03. Availability of Information Regarding Specific Financial Conflicts of Interest in Research Not Funded by PHS**

(a) For each financial conflict of interest in research not funded by PHS that is found to exist by the conflict of interest official, the institution will centrally retain and make the following information available to the public, upon request under the Texas Public Information Act (Chapter 552, Government Code), in regard to each covered individual who contributes to the scientific development or execution of the research project in a substantive, measurable way, including a covered individual who is the project director or principal investigator:

(1) the covered individual’s name;
(2) the covered individual’s title and role with respect to the research;
(3) the name of the entity in which the significant financial interest is held;
ITEM #7

(4) the nature of the significant financial interest that constitutes a financial conflict of interest; and

(5) the approximate value of the significant financial interest by range or, if the dollar value cannot be determined by reference to public prices or other reasonable measures of fair market value, a statement to that effect.

(b) The approximate dollar value of the significant financial interest shall be provided within the following ranges if it can determined by reference to public prices or other reasonable measures of fair market value:

(A) $0 - $4,999;
(B) $5,000 - $9,999;
(C) $10,000 - $19,999;
(D) amounts between $20,000 - $100,000 by increments of $20,000; or
(E) amounts above $100,000 by increments of $50,000.

(c) The institution will update the information required by this section annually. In addition, for any financial conflict of interest of a covered individual whose information must be available under this section and for which the information was not previously available, the institution will make the information required by this section available after the financial conflict of interest is identified in accordance with the deadlines provided by the Texas Public Information Act.

(d) The information required by this section must remain available for three years after its most recent update.

Chapter 6. Certification and Reports to PHS

Sec. 6.01. Certification and Report Required

Federal regulations require that each application for funding to the PHS include specific certifications and agreements in regard to this policy and financial conflicts of interest. Federal regulations also require that the institution make the reports required by this policy for PHS-funded research.

Sec. 6.02. Financial Conflict of Interest Report

Before the expenditure of any funds under a PHS-funded research project, the appropriate institutional officials will make the Financial Conflict of Interest Report to the PHS awarding component in compliance with 42 CFR Part 50, Subpart F, and 45 CFR Part 94. In general, those regulations require a Financial Conflict of Interest Report regarding those interests that the institution determines are financial conflicts of interest, including financial conflicts of interest of sub-recipients. The reporting will include specified information sufficient to enable the awarding component to understand the nature and extent of the financial conflict and to assess the appropriateness of the management plan related to the conflict of interest. The federal regulations require reporting within a specified period of financial conflicts of interest identified...
subsequent to an earlier report and require annual updating of reports regarding previously disclosed financial conflicts of interest.

Chapter 7. Enforcement

Section 7.01. Disclosure is a Condition of Employment or Relationship to Institution

(a) Timely, complete, and accurate disclosure of activities and financial interests consistent with this policy is a condition of employment at the institution, and a covered individual who does not comply with this policy is subject to discipline, including termination of employment.

(b) For a covered individual who is not an employee of the institution, compliance with this policy is a condition of participating with the institution in the capacity that qualifies the person as a covered individual. The institution may require the individual to execute a document certifying that the individual knows that compliance with this policy is a condition of participation.

Sec. 7.02. Federal Enforcement

(a) Federal regulations, 42 CFR Part 50, Subpart F, and 45 CFR Part 94, require the institution to notify the PHS of instances in which the failure of a covered individual to comply with this policy or a management plan appears to have biased the design, conduct, or reporting of PHS-funded research. The PHS awarding component may take enforcement action or require the institution to take action appropriate to maintaining objectivity in the research. The institution must make information available to HHS or the PHS awarding component as required by federal regulation.

(b) If the HHS determines clinical research funded by PHS to evaluate the safety or effectiveness of a drug, medical device, or treatment has been designed, conducted, or reported by a covered individual with a financial conflict of interest that was not managed or reported by the institution as required by federal regulation, the institution will require the covered individual involved to disclose the financial conflict of interest in each public presentation of the results of the research and to request an addendum to previously published presentations.

Chapter 8. Administration of Conflicts Policies; Records

Sec. 8.01. Oversight and Authority

The president or his or her designee shall appoint a conflict of interest official who is responsible for overseeing implementation of this policy and who may provide additional procedures and supplementary forms, as appropriate, consistent with this policy and applicable sponsor regulations.

Sec. 8.02. Records

(a) Records regarding the disclosure of financial interests and the management of a conflict of interest, including financial interest disclosure statements, a reviewing official's determinations,
and other records of institutional actions, shall be retained for the longer of at least three years after:

(1) the date of creation;

(2) the date of termination or completion of a research award or contract, or the submission of the final expenditures report, for research identified in a disclosure statement; or

(3) the date of final resolution of any investigation, audit, or similar action involving the records.

(b) The institution will provide for a centralized repository for financial interest disclosure statements, management plans, and related records.

(e) The conflict of interest official, or another person designated by the president, shall provide the chancellor of The University of Texas System with copies of all guidelines, procedures, and forms used by the institution relating to financial conflicts of interest and shall ensure that the chancellor receives copies of any revised guidelines, procedures, and forms simultaneously with the implementation of the revision.

Sec. 8.03. Audits

The institution will provide for regular audits of financial interest disclosure statements to determine individual and institutional compliance with this policy.
1. Title

Disclosure of Significant Financial Interests and Management and Reporting of Financial Conflicts of Interest in Research - Health Academic Institutions

2. Policy

Sec. 1 Applicability. This policy applies to all University of Texas System health academic institutions. It is intended to promote objectivity in research by requiring those institutions to establish standards that provide a reasonable expectation that the design, conduct, and reporting of research is free from bias resulting from researcher financial conflicts of interest. It applies to externally funded research, regardless of the funding source, as well as to research that does not have external funding.

Sec. 2 Federal Regulations. This policy implements federal requirements pertaining to objectivity in research adopted by the Public Health Service of the U.S. Department of Health and Human Services, as well as those adopted by the National Science Foundation (42 CFR Part 50, Subpart F; 45 CFR Part 94; National Science Foundation Grant Policy Manual Section 510). However, this policy requires U. T. System health academic institutions to adopt standards for the disclosure, management, and reporting of individual financial conflicts of interest in research that go beyond the requirements of the federal regulations.

Sec. 3 Model Policy. Each U. T. System health academic institution must adopt a policy for the disclosure, management, and reporting of individual financial conflicts of interest in research. To satisfy this requirement, the institution may, but is not required to, adopt the model policy provided under Item 5 of this policy. If adopting the model policy, the institution may conform the organization and arrangement to those typical for the institution.

Sec. 4 Adoption of Policy Other than Model Policy. If the health academic institution does not adopt the model policy provided under Item 5, the institution must adopt a policy that is at least as stringent as the federal regulations adopted by the Public Health Service of the U.S. Department of Health and Human Services pertaining to objectivity in research (42 CFR Part 50, Subpart F; 45 CFR Part 94). In addition, the institution’s policy must be substantially similar to the model policy and specifically must:
4.1 apply to research that has external funding, regardless of the funding source, as well as to research that does not have external funding;

4.2 require the disclosure of significant financial interests in a manner that is at least as stringent as the disclosure requirements provided by Chapter 2 of the model policy; and

4.3 require the posting on the Internet of financial conflicts of interest in a manner that is at least as stringent as the requirements of Chapter 5 of the model policy.

Sec. 5 Institutional Requirements. Each health academic institution must:

5.1 include the policy in its Handbook of Operating Procedures;

5.2 amend the policy as necessary to comply with the federal regulations referenced in Section 2; and

5.3 post the up-to-date policy on a publicly accessible website.

Sec. 6 Administration and Enforcement. Each health academic institution must administer and enforce the policy.

Sec. 7 Initial Implementation. Each U.T. System health academic institution must adopt its policy for the disclosure, management, and reporting of individual financial conflicts of interest in research as required by this policy as soon as possible, but the policy must be implemented beginning not later than December 31, 2011[DATE], with appropriate transitional provisions for research that is in progress on the effective date of the institutional policy.

3. Definitions

None

4. Relevant Federal and State Statutes

42 CFR Part 50, Subpart F

45 CFR Part 94

National Science Foundation Grant Policy Manual Section 510

Section 51.912, Texas Education Code
5. Relevant System Policies, Procedures, and Forms

Rule 30104, Regents’ Rules and Regulations

Series 90000, Regents’ Rules and Regulations

Model Policy for Disclosure of Significant Financial Interests and Management and Reporting of Financial Conflicts of Interest in Research - Health Academic Institutions

6. Who Should Know

All U.T. System health academic institutions

7. System Administration Office(s) Responsible for Policy

Office of Health Academic Affairs
Office of General Counsel

8. Dates Approved or Amended

June 23, 2010
Amended September x, 2011

[DATE]

9. Contact Information

Questions or comments about this policy should be directed to:

- bor@utsystem.edu
Issuance of the Final Rule - Responsibility of Applicants for Promoting Objectivity in Research for which Public Health Service Funding is Sought and Responsible Prospective Contractors

Notice Number: NOT-OD-11-109

Update: The following update relating to this announcement has been issued:


Key Dates
Release Date: August 22, 2011

Issued by
National Institutes of Health (NIH), Office of Extramural Research

Purpose

The U.S. Department of Health and Human Services (HHS) is issuing a final rule in the Federal Register (http://www.gpo.gov/fdsys/pkg/FR-2011-08-25/pdf/2011-21633.pdf) that amends the Public Health Service (PHS) regulations on Responsibility of Applicants for Promoting Objectivity in Research for which PHS Funding is Sought (42 C.F.R. Part 50, Subpart F) and Responsible Prospective Contractors (45 C.F.R. Part 94). The final rule specifies compliance dates in the "Dates" section, as discussed further below.

Background

Since the promulgation of these regulations in 1995, the growing complexity of biomedical and behavioral research; the increased interaction among Government, research Institutions, and the private sector in attaining common public health goals while meeting public expectations for research integrity; as well as increased public scrutiny, all have raised questions as to whether a more rigorous approach to Investigator disclosure, institutional management of financial conflicts, and federal oversight is required. The HHS decided to explore the need for revisions to the 1995 regulations by publishing an Advance Notice of Proposed Rulemaking on May 8, 2009 (74 FR 21610).

After analyzing public comments, HHS published a Notice of Proposed Rulemaking (75 FR 28688, hereafter referred to as "NPRM") on May 21, 2010, proposing changes to the 1995 regulations to strengthen accountability and transparency. The proposed changes focused on Investigators’ disclosure requirements of significant financial interests (SFIs), Institutions’ reporting and management of identified financial conflicts of interest (FCOI), and public disclosure of information regarding Investigator FCOI.

On July 21, 2010, HHS published a Notice (75 FR 42362) extending the 60 day comment period for the NPRM by another 30 days and seeking comment on whether HHS should clarify its authority to enforce compliance with the regulations by Institutions and Investigators, and whether HHS should clarify how the regulations apply in circumstances in which an Investigator or a PHS-funded research project transfers from one Institution to another.

After considering all public comments, and consistent with the proposals articulated in the NPRM, HHS developed the final rule, which includes the following major changes to the 1995 regulations:

<table>
<thead>
<tr>
<th>Topic</th>
<th>1995 Regulations</th>
<th>2011 Final Rule</th>
</tr>
</thead>
<tbody>
<tr>
<td>Significant Financial Interests (SFI) threshold</td>
<td>De minimis threshold of $10,000 for disclosure generally applies to payments or equity interests</td>
<td>De minimis threshold of $5,000 for disclosure generally applies to payments for services and/or equity interests.</td>
</tr>
<tr>
<td><strong>Which SFIs need to be disclosed (once the threshold is met)</strong></td>
<td><strong>Only those SFI the Investigator deems related to the PHS-funded research.</strong></td>
<td><strong>All SFI related to the Investigator’s institutional responsibilities.</strong></td>
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<tr>
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</tr>
<tr>
<td><strong>Excluded from disclosure requirement</strong></td>
<td>Income from seminars, lectures, or teaching, and service on advisory committees or review panels, for public or nonprofit entities</td>
<td>Income from seminars, lectures, or teaching engagements sponsored by and service on advisory or review panels for a federal, state, or local government agency, an Institution of higher education as defined at 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an Institution of higher education.</td>
</tr>
<tr>
<td><strong>Types of SFI excluded</strong></td>
<td>All forms of remuneration are included – specific questions such as mutual funds and blind trusts are addressed in FAQ on the NIH website.</td>
<td>Excludes income from investment vehicles, such as mutual funds and retirement accounts, as long as the Investigator does not directly control the investment decisions made in these vehicles.</td>
</tr>
<tr>
<td><strong>Travel reimbursements and sponsored travel</strong></td>
<td>Travel reimbursement is not mentioned explicitly in the regulations but is not excluded from the SFI definition.</td>
<td>Disclose the occurrence of any reimbursed travel or sponsored travel related to Institutional responsibilities (including purpose of trip, sponsor/organizer, destination, and duration). NOT required to disclose travel that is reimbursed or sponsored by a federal, state, or local government agency, an Institution of higher education as defined at 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an Institution of higher education. The Institution will determine if any travel requires further investigation, including determination or disclosure of the monetary value.</td>
</tr>
</tbody>
</table>
| **Information on an identified Financial Conflict of Interest (FCOI) reported by the Institution to the PHS Awarding Component** | Grant/Contract number | INITIAL REPORT
Requirements in 1995 regulations, plus:
Name of the entity with which the Investigator has a FCOI
Nature of FCOI, e.g., equity, consulting fees, travel reimbursement, honoraria
Value of the financial interest $0-4,999; $5K-9,999; $10K-19,999; amts between $20K-$100K by increments of $20K; amts above $100K by increments of $50K or statement that a value cannot be readily determined.
A description how the financial interest... |

**ITEM #7**
### ITEM #7

<table>
<thead>
<tr>
<th>Subrecipient Institutions/Investigators and Reporting of identified FCOIs</th>
<th>Institutions must take reasonable steps to ensure that Investigators working for subs comply with the regulations by requiring those Investigators to comply with the Institution's policy or by requiring the entities to provide assurances to the Institution that will enable the Institution to comply with the regulations.</th>
<th>Incorporate as part of a written agreement terms that establish whether the FCOI policy of the awardee Institution or that of the subrecipient will apply to subrecipient Investigators and include time periods to meet disclosure and/or FCOI reporting requirements. Subrecipient Institutions who rely on their FCOI policy must report identified FCOIs to the awardee Institution in sufficient time to allow the awardee Institution to report the FCOI to the PHS Awarding Component (e.g., NIH through the eRA Commons FCOI Module) to meet reporting obligations.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Accessibility</td>
<td>No requirement</td>
<td>Make information available concerning identified FCOIs held by senior/key personnel via a publicly accessible Web site or by a written response to any requestor within five business days of a request, and update such information as specified in the rule. This information will include at a minimum the Investigator’s name; the Investigator’s title and role with respect to the research project; the name of the entity in which the SFI is held; the nature of the SFI; and the approximate dollar value of the SFI, or a statement that the interest is one whose value cannot be readily determined through reference to public prices or other reasonable measures of fair market value.</td>
</tr>
<tr>
<td>FCOI training</td>
<td>No requirement</td>
<td>Each Investigator must complete training prior to engaging in research related to any PHS-funded grant or contract and at least every four years, and immediately under the designated circumstances: institutional FCOI policies change in a manner that affects Investigator requirements, an Investigator is new to an Institution, an Institution finds an Investigator noncompliant with Institution’s FCOI policy or management plan.</td>
</tr>
</tbody>
</table>
Retrospective Review  
(“Mitigation plan,” discussed in NPRM) 

Not mentioned

Institution is required to conduct a retrospective review in those cases of non-compliance with the regulations. The Institution will be required to notify the PHS Awarding Component promptly and submit a report to the PHS Awarding Component in cases where bias is found. The report will address the impact of the bias on the research project and the actions the Institution has taken, or will take, to eliminate or mitigate the effect of the bias.

Compliance Dates:

An Institution applying for or receiving PHS funding from a grant, cooperative agreement, or contract that is covered by the final rule must be in full compliance with all of the revised regulatory requirements:

- No later than 365 calendar days after the date of publication in the Federal Register, i.e. August 24, 2011;
- and
- Immediately upon making its institutional Financial Conflict of Interest (FCOI) policy publicly accessible as described in the final rule.

In the interim, Institutions should continue to comply with the 1995 regulations and report Investigator FCOIs to the Public Health Service (PHS) Awarding Component as required in the 1995 regulations.

NIH grant and cooperative agreement award recipients should continue to submit FCOI reports using the electronic Research Administration (eRA) Commons FCOI Module. Once the institution is required to be in full compliance with the regulatory requirements, the additional reporting requirements must be met. Therefore, if the eRA Commons FCOI Module is not updated by the time this occurs, the FCOI report should include an attachment that addresses the minimum elements of the FCOI report as provided in 42 CFR 50.605(b)(3).

**Inquiries**

Please direct all inquiries to:

Office of Policy for Extramural Research Administration
Division of Grants Compliance and Oversight
6701 Rockledge Drive MSC 7974
Bethesda, MD 20892-7974
Voice: (301) 435-0938
Fax: (301) 435-3059

or

FCOICompliance@mail.nih.gov

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Weekly TOC for this Announcement
NIH Funding Opportunities and Notices

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CEP Proposal – Undergraduate Catalog Copy

https://provost.utdallas.edu/bots/catalogbot

(requires login with UTD NetID and password)
CEP Proposal – Graduate Catalog Copy

INFORMATION NOT YET RECEIVED FROM CEP
ANNUAL REVIEW POLICY

1. Purpose

The university conducts annual reviews of faculty in accordance with Regents’ Rules 31102 and 30501. Annual reviews should focus primarily individual merit in relation to the performance of assigned duties. The primary purpose of the review is to compare that performance to university and unit expectations, and provide guidance to the faculty member accordingly.

If merit increases are recommended, the recommendations should be consistent with these evaluations.

2. Categories of Evaluation.

Evaluations will be made in the same areas of activity as are considered in promotion and tenure: namely, (1) creative productivity and professional achievement, (2) teaching effectiveness and (3) university citizenship. If the faculty member has administrative duties, these should also be included. Guidelines for what should be considered under each of these headings and the standards to be applied should be articulated by the faculty of each school and included in the school bylaws. The guidelines should state the standards, the philosophy or purpose behind them, and the school officers responsible for preparing the evaluation. Such evaluations will make use of directly known and objective information, ignoring hearsay and anonymous inputs. Faculty members are encouraged to call the attention of the Dean of their School to accomplishments or activities which they believe might be overlooked in order to assure that the information about these contributions will be complete.

3. Standards of Evaluation

Each faculty member being reviewed shall be placed in one of the following categories: a. exceeds expectations; b. meets expectations; c. does not meet expectations; d. unsatisfactory. Expectations shall be set by each school according to the faculty member’s rank and discipline, in accordance with the following general principles.

A. “Exceeds expectations” should be reflect a clear and significant level of accomplishment beyond what is normal for the discipline and unit. Generally speaking, an administrator should not judge half or more of their faculty to have exceeded expectations, and it is possible that none would. A judgment that a person exceeds expectations in creative productivity could reflect an usually important publication, external recognition for scholarly or creative achievement, or other such activity that brings notable recognition
or honor to the university. A judgment that a person exceeds expectations in teaching could be based on special accomplishments of a person’s students or winning a local, system, or award for outstanding teaching. “Exceeds expectations” in service could reflect election or appointment to particularly noteworthy positions in the university or other organizations, or special commendations for service on university, governmental, or scholarly organizations.

B. “Meets expectations.” In any given year, most faculty should meet expectations. Since it should be understood that there is some year to year variation in all faculty activities, the range of performances considered to meet expectations can should be wider than the range judged to meet or fail to meet expectations.

C. “Fails to meet expectations” should indicate a failure beyond what can be considered the normal range of year-to-year variation in performance, but of a character that appears to be subject to correction. Indications of failure to meet expectations in scholarly productivity would be no or nearly no publications or other creative productivity for that year, and no compensating production under way. Indications of failure to meet expectations in teaching would be an exceptional level of complaints, failure to meet classes, failure to update material for classes as needed, unfavorable peer evaluation of teaching if the unit arranged for such evaluation, or failure to carry a normal teaching load. Indications of failure to meet expectations in service would be refusal to accept appointments or failure to exercise diligence and responsibility in carrying out appointments.

D. “Unsatisfactory.” Would involve failing to meet expectations in one or more areas, and doing so in a way that reflects disregard of previous advice or other efforts to provide correction or assistance, or involves prima facie professional misconduct or dereliction of duty.

4. Evaluation Process

4.A. Preparation of file by faculty member

Each February, each faculty member will prepare an annual report with information under the following headings. Further details for preparing the report, including suggested templates for different entries, will be posted on the website of the Academic Vice President and Provost.

I. Name, School, Program or Field, Date of Submission

II. A narrative of one page or less, giving your professional history, principal current professional interests, and most note-worthy accomplishments. This brief biographic profile should communicate the significance of what you do, what you have accomplished, and what you are planning to do in the future, to a varied audience, including prospective
graduate students, new faculty colleagues, or outsiders searching for a prospective employee, consultant, expert commentator, guest columnist, speaker to a professional or non-professional group, etc. In composite, these profiles constitute the portrait of the University.

III. Scholarly and creative activity, categorized and sequenced as follows:
(PLEASE FOLLOW THE ATTACHED FORMATTING GUIDELINES)
   a) authored books
   b) edited books
   c) refereed publications
   d) complete articles in edited volumes
   e) refereed conference publications or abstracts
   f) juried exhibitions
   g) invited performances, colloquia presentations or exhibitions
   h) unrefereed publications
   i) unrefereed abstracts
   j) self-initiated exhibitions, lectures or performances
   k) submitted manuscripts, including when submitted and to whom
   l) U.S. Patents awarded
   m) other activities: lectures, speeches, presentations not documented in a publication

IV. Proposal and Grant Activity
   a) Proposals submitted: title, agency submitted, time duration, total requested.
   b) Grants received: title, agency granting, total requested, amount granted if different from total amount, start date, and time duration.
   c) Names of doctoral students (≥30 graduate hours) and stipend amounts (does not include tuition or benefits) whom you supported on contracts and grants, e.g., Jane Smith $20,000.

V. Teaching activities: list for each term, e.g.
   a) Organized courses
      Semester Prefix Number Course Name
      Enrollment
   b) Individual instruction supervised
   c) Calendar year: names of graduated students upon whose dissertation committees you served.
   d) Calendar year: names of masters and doctoral students who graduated under your supervision.
e) Calendar year: employer and position for doctoral students who graduated under your supervision in 2010.
f) Calendar year: for each doctoral student (≥30 graduate hours) by name under your supervision.

   aa) *number* of discipline-related refereed papers/publications, e.g., Jane Smith 2  
   bb) *number* of juried creative/performance accomplishments  
   cc) *number* of book chapters  
   dd) *number* of books  
   ee) *number* of external presentations

VI. Learning Assessment Activities:
   a) narrative of assessment activities undertaken in 2010 based on learning objectives of organized courses
   b) brief description of factors that may have influenced the results of those activities
   c) actions you intend to take to improve student learning, i.e. “closing the loop”

VII. Professional service activities:
   a) UTD administrative duties  
   b) school committees  
   c) university committees  
   d) outside Chair appointed by Graduate Studies for doctoral final oral exam  
   e) special service contributions to program, school, or university  
   f) service contributions external to UTD, e.g., professional society officer, journal editor, conference organizer, etc. 
   g) consultant activities

VIII. Special professional recognition: internal and external honors, awards, citations, prizes, etc.

4.B. Evaluations will be made by the administrative officers responsible for developing the university budget. The primary evaluation will be prepared by the program or departmental administrator immediately responsible for the faculty member under review. School guidelines will specify who this is. The recommendation to be sent to the Provost for the school will be prepared by the School Dean, taking into account program or departmental evaluations as well as considerations of equity and need across the school as a whole and the advice of other members of the Dean’s administrative structure as might be appropriate in that School.

4.C. Provision for corrections and objections. School guidelines should provide at least
one opportunity for the faculty member being evaluated to see the draft evaluation and offer responses or corrections. The School Dean’s evaluation will be shown to the faculty member evaluated, in writing. The faculty member will countersign to show that he or she has read the evaluation. If the faculty member objects to the evaluation, he or she may describe that objection in writing within a period of one week (seven days). The Dean’s evaluation will then be forwarded to the provost with the faculty member’s objection, if any.

School guidelines may also include provision for review of the recommendations by a faculty committee, such as a school Executive Committee or a peer review committee.

5. Uses of the evaluations.

Evaluations should be used to determine merit for merit raises.

One or more evaluations of “exceeds expectations” may also provide a basis for recommendation for special honors or for initiating consideration for more rapid or extraordinary promotion following the processes provided for in the university policy on promotion and tenure. This would require much more complete and comprehensive documentation than is required for the annual review.

An evaluation of “fails to meet expectations” or “unsatisfactory” may be used to determine recommended remedial actions, such as teaching effectiveness assistance, counseling, or mentoring in research issues or service expectations. Remedial actions may include adjustments of assigned duties. Remediation efforts should be described in a written plan. Such plan may include provisions for monitoring progress.

A tenured faculty member whose evaluation is “unsatisfactory” for two consecutive years may be subject to a comprehensive periodic performance evaluation (post-tenure review), as provided for in the policy on periodic performance evaluations. The decision to undertake a comprehensive period performance evaluation shall be made by the university Provost in consultation with the Dean of the School.

6. Clarifications and complaints.

Faculty members are encouraged to seek clarification of their salary increases whenever they have questions or dissatisfactions concerning them. Pursuit of such questions or complaints fosters better internal University communications and improves operation of the mechanisms for setting salary increases. Queries should be lodged with the School Dean. In Schools where Department Heads provide an initial merit increase recommendation for the Dean, a preliminary discussion should be held with the Department Head. If the matter remains unresolved fifteen days after discussion with the Dean, it may properly be taken to the Provost and, if unresolved there within fifteen days, to the President.

The university grievance policy is applicable.