Proposed Research Governing Principles

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ARKANSAS STATE UNIVERSITY
GOVERNING PRINCIPLES FOR LABORATORY
INSPECTIONS

1.0 INTRODUCTION

Arkansas State University (ASU) is committed to providing a safe work environment for its employees, students, ancillary workers, and visitors. A comprehensive safety plan includes governing principles for Laboratory Inspections.

2.0 PURPOSE

These governing principles are designed to ensure that laboratories are operated in a manner that is consistent with federal, state, local, and institutional guidelines.

3.0 DEFINITIONS

General Inspections are thorough periodic inspections of each laboratory facility. They are conducted each semester. Deans or their designees are required to accompany the inspector.

Laboratory a facility that provides controlled conditions in which teaching or research, experiments and measurement may be performed. Examples include chemical, biological, clinical and agricultural laboratories and art studios where hazardous products are used.

Safety Discrepancies are classified as follows:

Urgent - laboratory practices or conditions that are likely to negatively impact human health or the environment and must be resolved immediately. Examples include identification of a gas leak, emission of toxic gases, exposed utilities, etc.

Severe - laboratory practices or conditions that may result in injury to health or damage to the environment, but don’t pose an immediate threat. These discrepancies, nevertheless, must be addressed within 24 working hours. Examples include blocked pathways, improperly labeled chemicals, etc.

Serious – unsafe laboratory practices or conditions that pose minimal risk to human health and/or the environment but are, nevertheless, violate safe laboratory practices as articulated in the University’s Governing Principles.

Revised 4/29/11
**Persistent Safety Discrepancies** are urgent, severe, or serious continuing laboratory discrepancies of the same or similar nature that are noted two or more times by University or external inspectors. Examples include leaving an unlabeled beaker on a counter top two or more times, etc.

**Walk-Through Inspections** are monthly inspections that alternatively concentrate on environmental health/safety violations and on fire safety. These inspections are more cursory than general inspections, focusing on visible deficiencies. Upon request, the Dean or his/her designee may accompany the inspector on his/her rounds.

### 4.0 APPLICABILITY

These governing principles apply to all teaching and research laboratories on campus as per the definition above.

### 5.0 REGULATIONS

- Prudent Practices for Handling Hazardous Chemicals in Laboratories
- All applicable Federal and State Laws and Regulations concerning laboratory operation
- Governing Principles for Laboratory, Chemical, Biological, Radiological, and Laser Safety

### 6.0 GOVERNING PRINCIPLES

The University hereby establishes governing principles to inspect laboratory facilities on the ASU campus. Department of Environmental Health and Safety (EH&S) personnel will provide the Dean with at least seventy-two hours’ notice of upcoming walk-through or general inspections. The Dean, Chair, or designee may elect to accompany the inspector on walk-through inspections and are required participate in general inspections (as specified in the chart below).

The University will adhere to the following schedule of general laboratory inspections and will maintain documentation of each inspection as follows:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Frequency</th>
<th>Inspection Officials</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inspection of Eyewash Stations</td>
<td>Once Per Week</td>
<td>EH&amp;S</td>
</tr>
<tr>
<td>Inspection of Emergency Showers</td>
<td>Once Per Month</td>
<td>EH&amp;S</td>
</tr>
<tr>
<td>Walk-through Inspections</td>
<td>Alternating inspections for</td>
<td>EH&amp;S, Dean/Designee,</td>
</tr>
</tbody>
</table>

Revised 4/29/11
<table>
<thead>
<tr>
<th>General Inspection of Laboratories</th>
<th>Once Per Semester (Fall, Spring, Summer)</th>
<th>EH&amp;S Dean/ Designee, and/or Chair</th>
</tr>
</thead>
<tbody>
<tr>
<td>Follow Up Inspections</td>
<td>Urgent Discrepancies: Daily</td>
<td>EH&amp;S, Dean/ Designee, and/or Chair</td>
</tr>
<tr>
<td></td>
<td>Severe Discrepancies: Within one working week</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Serious Discrepancies: Within two working weeks</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Persistent Discrepancies: Consistent with the category of the discrepancy as articulated in the “Definitions.”</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Departments may provide electronic, photographic documentation of remedy for noted discrepancy in lieu of follow-up inspection.</td>
<td></td>
</tr>
<tr>
<td>On Demand</td>
<td>As Circumstances Dictate</td>
<td>EH&amp;S, Dean Designee, or Chair</td>
</tr>
</tbody>
</table>

The Dean or designee can ask to delay inspection of specific laboratories because of the sensitivity of experiments that are underway. If such a delay is requested, the Dean, Chair, or designee must provide justification for the delay and provide access during general business hours as soon as practicable.

In the event that a laboratory inspection reveals animal care and use, radiation or laser safety, or biohazardous material discrepancies, the appropriate official will be notified of the discrepancy.

### 7.0 ROLES AND RESPONSIBILITIES

**Environmental Health & Safety (EH&S)** will inspect all laboratories as specified above and will provide the Deans with report findings following inspection. A monthly inspection report will likewise be provided to the Deans, Chief Research Officer, Executive Vice Chancellor and Provost, Vice Chancellor for Finance and Administration, the Associate Vice Chancellor for Administration, and Chancellor. The monthly report will include a summary of all uncompleted discrepancies.

Revised 4/29/11
The **Executive Vice Chancellor and Provost** will review a report of all discrepancies and take appropriate action.

**Dean, Chairperson, or Designee** may accompany EH&S employees on walk-through inspections upon request and shall accompany the EH&S inspector when general inspections are conducted. They will take immediate action on urgent, severe, and persistent safety discrepancies. They will likewise follow up on serious discrepancies within two working weeks, and will report all actions taken to the EH&S Department. The Department may provide electronic documentation of corrections in lieu of a follow-up inspection.

**Researcher/Instructor** is responsible for maintaining a safe laboratory environment consistent with the University’s Governing Principles and with federal, state, and local statutes and regulations.

**Laboratory employees** are responsible for using safe laboratory practices, consistent with the University’s Governing Principles and with federal, state, and local statutes and regulations.

Revised 4/29/11
Subject to review of the Shared Governance Committee.

ARKANSAS STATE UNIVERSITY
GOVERNING PRINCIPLES
FOR THE USE OF CONTROLLED SUBSTANCES IN RESEARCH

1.0 INTRODUCTION

Arkansas State University (ASU) is committed to enhancing the growth of research and other sponsored activities on campus while simultaneously complying with federal and state laws and regulations concerning controlled substances.

2.0 PURPOSE

These Principles are designed to ensure security and accountability in the acquisition, use, and disposal of Controlled Substances. Substantial compliance with the regulations depends on the following factors:

1. The type of activity conducted (e.g., processing of bulk chemicals, preparing dosage forms, packaging, labeling, buying, possessing, and conducting research, etc.);
2. The type and form of controlled substances handled (e.g., bulk liquids or dosage units, usable powders, unusable powders);
3. The quantity of controlled substances handled;
4. The location of the premises and the relationship such location bears on security needs;
5. The type of building construction and the general characteristics of the building;
6. The type and adequacy of vault, safe, and secure enclosures or other storage system used;
7. The adequacy of electric detection and alarm systems, if any, including use of supervised transmittal lines and standby power sources;
8. The extent of unsupervised public access to the facility;
9. Procedures for handling business guests, visitors, maintenance personnel, and non-employee service personnel;
10. The availability of local police protection or of the registrant’s or applicant’s security personnel; and
11. The adequacy of the registrant’s or applicant’s system for monitoring the receipt, manufacture, distribution, and disposition of controlled substances in its operations.

Violations of the Controlled Substances laws, even when unintended, can lead to substantial civil and criminal liability.

3.0 DEFINITIONS

Authorized Individuals are lab personnel who handle or manage Controlled Substances in approved research. Authorized Individuals must be trained in Controlled Substance shipping, receiving, security, inventorying, and recordkeeping procedures.

Controlled Substance is defined as a drug or other substance, or immediate precursor, included in schedule I, II, III, IV, or V of the Controlled Substances Act. The schedules identify materials
Subject to review of the Shared Governance Committee.

containing any quantity of a substance with a stimulant, depressant, or hallucinogenic effect and promote abuse or physiological or psychological dependence. Schedules I and II are the most stringently regulated, and include many widely known street drugs, including heroin, LSD, and cocaine as well as such drugs as pentobarbital. Schedule III compounds include many stimulants and depressants, pain killers, and anesthetics, including ketamine and buprenorphine. Schedule IV substances cover the balance of lower-abuse potential stimulants and depressants, while Schedule V includes therapeutic drug mixtures containing very limited quantities of Controlled Substances. Each Controlled Substance has a specific drug code assigned to it. A general list of Controlled Substances can be found at http://www.usdoj.gov/dea/pubs/scheduling.html.

**Drug Enforcement Administration (DEA)**, a unit within the Department of Justice, has responsibility for enforcing the controlled substances laws and regulations of the United States.

**Principal Investigator** is the individual with primary responsibility for solicitation, implementation, and administration of an externally sponsored grant or contract.

### 4.0 APPLICABILITY

All University employees who participate in or administer sponsored program activities, directly or indirectly, and use controlled substances in their research programs.

### 5.0 REGULATIONS

United States Code, Title 21

*Drug Enforcement Administration Practitioner’s Manual:*

Arkansas Code Annotated § 5-64-101\(^1\) and § 5-64-307\(^2\)

### 6.0 GOVERNING PRINCIPLES

A license from the DEA is required to acquire, make, possess or use a Controlled Substance and is: (i) issued to an individual, who may authorize other individuals to operate under his/her license; (ii) specific to drug schedules identified on the license, and to specific drug codes; and (iii) identified by a specific storage location. A copy of such license, whether issued to a principal investigator, department chair, or other designated official, shall be maintained in the Office of the Associate Vice Chancellor for Research.

Only licenses and authorized individuals will be permitted access to Controlled Substances.

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\(^1\) Authorized agents who conduct research on controlled substances are exempted from the provisions of this section. This section also defines a “practitioner” as a scientific investigator.

\(^2\) The State code directs “Practitioners” to comply with federal law when using controlled substances. The State does not have any of its own specific provisions in these cases.
Subject to review of the Shared Governance Committee.

**Licensure**

**Application.** PIs who wish to work with Controlled Substances should submit a copy of his/her Controlled Substances Application (see DEA Practitioner’s Manual at http://www.deadiversion.usdoj.gov/pubs/manuals/pract/pract_manual012508.pdf) to departmental administrators who should, in turn, submit the form to the Dean and to the Associate Vice Chancellor for Research who will approve use of the substance on campus.

It is ultimately the individuals identified on the licenses that have responsibility for ensuring proper acquisition, use, maintenance, and accountability of Controlled Substances. The number of Authorized Individuals on the application should only include those who are essential for efficient operation. Further, persons previously convicted of a felony offense related to Controlled Substances, were denied licenses, or were asked to surrender one may not be authorized to work with these materials. License holders should take steps to ensure that they, their Chairs or equivalents, Deans or equivalents, and the Associate Vice Chancellor for Research have a record of any such changes.

Researchers who occupy ASU space but are not employed by the University must obtain the approval of the Associate Vice Chancellor for Research and from the equivalent signatory at their home institutions to use Controlled Substances on the ASU campus.


**Renewal of Licensure.** License holders must provide complete, updated information about Authorized Individuals, drug codes, schedules, and licenses when they renew their licenses with the DEA. Please see http://www.deadiversion.usdoj.gov/pubs/manuals/pract/pract_manual012508.pdf.

**Scope of Use**

Controlled Substances may only be used for authorized, legitimate, medical or scientific research purposes to the extent permitted by the registrant’s license and registration and in conformity with state and federal statutes and regulations.

Synthesis of chemicals or drugs that have been deemed illegal or illicit by the DEA are prohibited unless they are consistent with the research protocol submitted to the DEA and are pre-approved by the Chair or equivalent official, Dean or equivalent, and the Associate Vice Chancellor for Research.

**Purchasing**

Purchasing shall be consistent with DEA rules, as specified in http://www.deadiversion.usdoj.gov/pubs/manuals/pract/pract_manual012508.pdf. Orders for Controlled Substances should be kept to the smallest quantity needed for efficient operation to conduct the indicated research.
Subject to review of the Shared Governance Committee.

**Storage**

Controlled Substances must be stored in securely locked, substantially constructed, drug cabinets or safes in locations where access is limited. (Standard file cabinets are not sufficient for their storage). Keys and/or combinations to the cabinets or safes should be secure and under the control of a limited number of Authorized Individuals. They may be removed only when they are being used for legitimate purposes.

Authorized Individuals should log out the smallest quantity of a Controlled Substance needed for efficient operation, generally no more than a single vial at a time, and must return any unused portions to the safe or vault during those times when they cannot attend to them or no longer need them.

If an Authorized Individual’s laboratory is not connected to the License Holder’s place of storage, the Authorized Individual must arrange to obtain his/her own license. If the license holder changes location and changes the storage location indicated on his/her license, s/he should notify the DEA in writing and make certain that the new cabinet meets Controlled Substance requirements.

**Reporting of Loss, Destruction, Theft, or Unauthorized Use**

Thefts, suspected thefts, unauthorized uses, or other losses of any Controlled Substance must be reported to the departmental administrator, University Police Department, and EH&S upon discovery. Additionally, the DEA requires laboratories to report losses within one business day of discovery. DEA Form 106, available on DEA’s website, is required.

Any unauthorized persons who gain access to Controlled Substances for the purpose of diversion or theft must be reported to the University Police Department and may be subject to the disciplinary policies of the University.

**Recordkeeping**

Laboratories are required to maintain records of purchase, use, storage, and disposal of Controlled Substances in accordance with guidelines contained at http://www.deadiversion.usdoj.gov/pubs/manuals/pract/pract_manual012508.pdf.

**Controlled Substances of Unknown Origin**

Occasionally, laboratories or animal facilities may come across Controlled Substances of an uncertain origin, sometimes referred to as “orphaned drugs.” In those circumstances, the laboratory or other facility should take the following steps: (1) make sure that the Substance is secured in a license holder’s locked safe or cabinet; (2) contact the EH&S office for disposal assistance and coordination; and (3) provide the DEA with a brief written description of the material (type and quantity), how the laboratory acquired it, and a proposed method of disposal. Please see http://www.deadiversion.usdoj.gov/pubs/manuals/pract/pract_manual012508.pdf for further details.
Subject to review of the Shared Governance Committee.

**Disposal**

The DEA’s Office of Diversion Control has specific requirements for disposal of Controlled Substances. These provisions can be found at [http://www.deadiversion.usdoj.gov/21cfr/cfr/1307/1307_21.htm](http://www.deadiversion.usdoj.gov/21cfr/cfr/1307/1307_21.htm).

**Shipping**

Federal law prohibits the export of Controlled Substances unless certain requirements are met, including, in most cases, export and import permits. Violators of the law risk arrest or fines both in the United States and the foreign country. Licensed brokers are available for transport of controlled substances. Contact EH&S for assistance in arranging for any necessary transport of Controlled Substances.
Subject to review of the Shared Governance Committee.

ARKANSAS STATE UNIVERSITY
GOVERNING PRINCIPLES FOR RECOVERY OF FINANCE AND ADMINISTRATION COSTS

1.0 INTRODUCTION

It is the policy of Arkansas State University (ASU) to request and recover the full indirect (F&A) costs to which it is entitled. Indirect costs reimburse the University for legitimate and real expenses that cannot easily be charged as direct costs on external grants and contracts. Recovered indirect costs in no sense represent a “profit” or otherwise discretionary disposable general revenue. Rather, indirect-cost recovery offsets expenses attributable to externally sponsored projects. These expenses include use of space and equipment, depreciation on equipment and facilities, utility costs, financial accounting, departmental administrative costs, and numerous other support services.

2.0 PURPOSE

The purpose of this statement is to clarify and reaffirm the University’s policy concerning Finance and Administration (indirect) costs.

2.0 DEFINITIONS

Facilities and Administrative Costs (F&As). F&As are broad categories of costs that are incurred for common or joint objectives and cannot be identified readily and specifically with a sponsored project, an instructional activity, or any other institutional activity. “Facilities” refers to depreciation and use allowances, interest or debt associated with certain buildings, equipment and capital improvements, and operation and maintenance expenses. “Administration” is defined as general administration and expenses, departmental administration, sponsored projects administration, student administration and services, and all other types of expenditures not listed specifically in one of the subcategories of Facilities (including cross allocations from other pools).

Principal Investigator. The individual(s) who has primary responsibility for management of a grant or contract.

4.0 APPLICABILITY

This policy applies to all external grant and contract proposals, external grants, and externally-funded contracts.

5.0 REGULATIONS

OMB Circular A-21, Revised 05/10/04

1 OMB Circular 21, Revised 5/10/04.
6.0 GOVERNING PRINCIPLES

6.1 Overview

Federal regulations require institutions of higher education to charge uniform F&A’s for federal and non-federal awards when permitted and when such charges are not governed by organizational rules or regulations. All proposals submitted by ASU employees therefore must recover full F&A costs, except under the conditions identified below. Any variation from the full rate, including the exceptions noted below, must be approved by the School/College Dean or designee and the Associate Vice Chancellor for Research or his/her designee.

6.2 Exceptions and Conditions

- **Agency Limitations.** The University will accept the maximum allowed by agencies that have a **written** policy limiting indirect costs to a specific percentage of the grant.

- **In-Kind Contributions.** When an agency requires significant in-kind contributions, the School/College Dean and University’s research administrators may choose to reduce the amount of indirect-cost collection, but only in cases in which the agency allows F&As to be used in lieu of other cost sharing or matching funds. **Such in-kind match is at the University’s discretion, and principal investigators must understand that such an agreement is granted only in unusual circumstances.**

- **Contracts of Less than $10,000.** The University will accept a waiver of indirect costs for any fixed-price contract or agreement that is less than $10,000 in total direct costs.

- **When F&As are Waived.** Provided F&As are allowed by the funding organization, any indirect costs that are waived must be identified in the proposal as matching or cost-sharing contributions.

7.0 RESPONSIBILITIES

**Principal Investigators**

Principal Investigators are responsible for including all F&As that ASU is eligible to collect in their grant proposals and/or contracts. Deviations from this principle must be approved by the Chair, Dean, Institute Directors, and the Associate Vice Chancellor for Research.
Subject to review of the Shared Governance Committee.

**Chairs, Deans, Institute Directors or Equivalent Administrators**
The chairs, deans, institute directors or equivalent administrators have responsibility for ensuring adhering to these governing principles and for approving any deviations, as articulated in Section 6.2 above.

**Associate Vice Chancellor for Research**
The Associate Vice Chancellor for Research has responsibility for approving any deviations from these governing principles, as articulated in Section 6.2 above.
Subject to the review of the Shared Governance Committee.

ARKANSAS STATE UNIVERSITY
GUIDELINES FOR CALCULATION OF FACULTY SALARIES IN EXTERNALLY-SPONSORED PROGRAM ACTIVITIES

1.0 INTRODUCTION

Full-time faculty are normally expected to participate in scholarly activities that enhance the reputation of the University and contribute to economic development of the region and State. Externally sponsored programs often require commitments of faculty time that are reimbursed by the funding agencies.

2.0 PURPOSE

The purpose of this document is to provide guidelines for calculation of salary expenses as they are allocated to specific grant and/or match accounts.

3.0 DEFINITIONS

**Base Salary.** The faculty member’s base salary is the amount that appears on the letter of contract each year.

**Buyout.** Buyouts are course releases that are generally used to foster increased research activity. Buyouts are often grant-funded but may also be funded by the University.

**Effort Certification.** Required by the government for federally-funded projects, effort certification is a process whereby investigators certify the time that they have spent on sponsored activities. The time devoted to a particular activity is expressed as a percentage of the total time spent.

**Faculty Workload.** Absent a research program, the typical load for a faculty member is to teach three classes each semester during the academic year. Consistent with the Faculty Handbook Section III.b., faculty members with active externally- or internally-funded research programs are allowed to buy out courses from semester to semester.

4.0 APPLICABILITY

These guidelines are applicable to all University employees who apply for or receive grant or contract funding from external sponsors.

5.0 REGULATIONS

Office of Management and Budget (OMB) Circular A-21
Arkansas State University Faculty Handbook 2006 as Amended 5/2010
Arkansas State University Governing Principles for Effort Certification (Draft)
6.0 GUIDELINES

6.1 Overview

The salaries of full-time faculty members, chairs of academic departments, and directors are full compensation for regularly-assigned activities performed in the areas of teaching, research, administration, or service for or in the name of the University. For the most part, the University pays faculty salaries; however, increasingly, external agencies are funding faculty salaries and benefits in exchange for their work on sponsored programs’ activities. These guidelines address methods for calculation of salary expenses associated with externally-funded grant and contract proposals. They also address the circumstances under which the faculty may receive extra compensation that is associated with research activities.

6.2 Faculty Buyout

As proposals are developed, faculty are required to estimate their commitment of effort and request project-related salary and fringe benefit buyout to the fullest extent possible. Buyouts are calculated by determining the percent of effort required for the activity each semester. Twenty to twenty-five percent effort is usually equated to the level of effort required to teach one class.

Though commitment of salary and fringe benefit expenses to the direct costs of a grant is preferred, it is also possible to use the faculty’s commitment of time when cost-sharing is required. Faculty buyout of any kind, whether funded by an external source or by the University, must be approved by the chair and dean of college.

The faculty member’s base salary and percent of monthly effort are utilized to determine the amount of the buyout. For example:

**Ex. 1 for a nine-month faculty member:**
- Nine-month base salary = $50,000.00
- Monthly salary = $50,000.00/9
- One month of buyout = $5,555.55
- 75% of one month of buyout = $4,166.66

**Ex. 2 for a twelve-month faculty member:**
- Twelve-month base salary = $60,000.00
- Monthly salary = $60,000.00/12
- One month of buyout = $5000.00
- 75% of one month of buyout = $3,750.00

6.3 Summer Salary for Nine-Month Faculty

Nine-month faculty are eligible for summer compensation (the period between each academic year) from externally-funded sources, provided that the grant/contract allows such expenditures.
Subject to the review of the Shared Governance Committee.

Summer salary for research activities is calculated using the faculty member’s base pay for the academic year, dividing by 9, and multiplying by the percent of effort. For example:

Nine-month base salary = $50,000.00  
Monthly salary = $50,000/9 ($5,555.55)  
One and one-half months of summer salary = $5,555.55 * 1.5 ($8,333.33)

Twelve-month faculty are not eligible for summer salary.

6.4 Salary Enhancements

The University has adopted the federal government’s prohibition concerning utilization of externally-sponsored programs to enhance the salaries of any of its employees. Specifically, charges to sponsored agreements may not exceed the proportionate share of the faculty member’s base salary (OMB Circular A-21, 5/10/04 Rev, J.10.d.).

6.5 Extra Compensation for Sponsored Programs’ Activities

State Limitations. The State of Arkansas allows payment of extra compensation under limited circumstances, but caps the total amount of compensation that nine- and twelve-month faculty may receive in any given fiscal year. For more information concerning these limits, contact the Office of Research Administration.

Extra Compensation Eligibility. The University has adopted the federal government’s limitations concerning extra compensation to sponsored programs’ activities. Specifically, extra compensation is limited to the following circumstances:

- where extra responsibilities are across disciplinary boundaries; or
- if the faculty member is consulting with a non-ASU entity; and
- the work performed is in addition to the faculty member’s regular departmental load, as defined above in the section entitled “Definitions.”

If the faculty member receives extra compensation, such expense must be specified in the agreement or approved in writing by the sponsoring agency (OMB Circular A-21, 5/10/04 Rev, J.10.d). Extra compensation for research activities that are outside of these boundaries is specifically prohibited.
Subject to the review of the Shared Governance Committee.

ARKANSAS STATE UNIVERSITY
GOVERNING PRINCIPLES FOR EFFORT REPORTING

1.0 INTRODUCTION

Universities that apply for and accept federally-sponsored research funding are required to report and certify its faculty and staff effort in accordance with the Office of Management Budget’s Circular A-21.

2.0 PURPOSE

The purpose of this document is to account for the time that Arkansas State University’s faculty, students, and staff spend on research and other University activities and to comply with federal effort reporting requirements as specified in Office of Management and Budget Circular A-21.

3.0 DEFINITIONS

Certifier. The person who certifies the effort report. In most cases, a full-time employee should certify his/her own time. The principal investigator/project director (hereafter referred to as PI) of the project is responsible for certifying for part-time staff and students.

Alternate Certifier. A person other than the employee who is allowed to certify the effort report. The PI can certify any employee effort tied to his/her project. The department chair and/or dean may be additional alternate certifiers. This individual must have suitable means of verification for the employee’s reported time.

Effort Reporting. Mandated by the federal government, effort reporting ensures that labor charged to federally-sponsored agreements is reasonable and reflects actual work performed. In most cases, the certification corresponds to salaries charged to the project; however, in some cases, it reflects the University-funded mandatory or voluntary cost sharing commitments. Effort reporting is also required for the appropriate calculation of the University’s negotiated Facilities and Administrative (F&A) rates with the federal government.

Effort reporting categories include:

- Organized research and development activities for which separate budgeting and accounting is required including: 1) Research Grants and/or Agreements, activities sponsored by either federal or non-federal agencies and organizations; and 2) Mandatory or Voluntary Committed Cost Share, cash and/or in-kind contributions that are required by the sponsoring agency or volunteered by the awardee.

- University sponsored activities including teaching, research, service and administration. Grant proposal preparation should be included in this category.

Institutional Base Salary. The institutional base salary is the amount that the University has agreed to pay the employee for his/her contract period, including any buyouts that have been
Subject to the review of the Shared Governance Committee.

negotiated. The institutional base salary does not include overload assignments, Pay received outside the contract period (e.g., summer salary) is not included in the institutional base salary but must be reported.

**Labor Distribution.** Allocation of funding sources by activity. For example, if an external funding entity pays for 25% of a faculty member’s time, the University’s records will reflect that commitment of time.

**Labor Redistribution.** If a faculty member’s contribution to a project exceeds 5% of estimated effort, or is 5% lower than anticipated effort, his/her effort should be redistributed.

### 4.0 APPLICABILITY

This policy is applicable to all University employees who apply for or receive grant or contract funding from external sponsors.

### 5.0 REGULATIONS

Office of Management and Budget (OMB) Circular A-21

### 6.0 GOVERNING PRINCIPLES

University employees who work on or receive a portion of their salaries from externally-funded projects must estimate their “after-the-fact” effort on a semesterly basis in the University-approved format.

#### 6.1 After-the-Fact Effort Reporting

ASU uses the “after-the-fact activity” method to meet A-21 requirements for effort reporting and requires employees to certify their actual efforts on a monthly basis. This certification is accomplished through the completion of an Effort Reporting Form.

Circular A-21 standards for a plan-confirmation system include the following:

- Reports must reflect after-the-fact accounting of the percentage distribution of employee activities. Charges may be made initially on the basis of estimates made before the services are performed, provided that such charges are promptly adjusted if significant differences are indicated by activity records.
- Reports will reflect the activities for which employees are compensated by the institution. To confirm that the distribution of activity represents a reasonable estimate of the work performed by the employee during the period, the reports are signed by the employee, principal investigator, or responsible official(s).
- The system identifies activities that are correlated to the calculation of F&A costs.

#### 6.2 Estimating Effort

In documenting and certifying effort on University activities, the following guidelines must be followed:
Subject to the review of the Shared Governance Committee.

- An individual’s effort distribution should reflect the percentage of actual time spent on various activities expressed as a percentage of total effort, not hours.

- In all but a very few circumstances, total effort may not exceed 100% and must only include activities for which the individual receives compensation from the University (including salary charged to sponsored agreements, but excluding incentive pay). If total effort is expected to exceed 100%, the individual must IMMEDIATELY notify his/her Chairperson, Dean, and the Office of Sponsored Programs.

- Sponsored effort may not exceed 90% of total effort unless pre-approved by the Associate Vice Chancellor for Research.

- The amount of effort identified as organized research must include cost share and voluntary match.

- The individual’s Effort Reporting Form must be modified immediately when there is a five percent (5%) or greater change in the distribution of activities. If a larger variance occurs, the certifier should request a salary reallocation to reflect the actual level of effort. An email should be sent to Sponsored Programs Accounting requesting the reallocation, with a copy to the PI (if certifier is not the PI), Department Chair, and Dean. With Chair and Dean approval, SPA will request the Budget Office to process the labor redistribution and update the effort certification. The certifier(s) will be notified when the updated effort report is available.

- When an individual who receives salary from a sponsored program is scheduled to leave the University, an effort report must be completed at the time of separation.

6.3 Timeline

Effort certification will occur each semester via the Self-Service Banner system, with the following timeline for each certification period:

<table>
<thead>
<tr>
<th>Semester</th>
<th>Certification Period</th>
<th>Certification Completion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spring</td>
<td>January 1-May 15</td>
<td>June 1-30</td>
</tr>
<tr>
<td>Summer</td>
<td>May 16-August 15</td>
<td>September 1-30</td>
</tr>
<tr>
<td>Fall</td>
<td>August 16-December 31</td>
<td>February 1 – March 2</td>
</tr>
</tbody>
</table>

E-mail notifications will be sent when the records are available for review and will be sent on a daily basis to the certifiers until the records are locked. A reminder email will be sent to the alternate certifier at the end of the second, third, and fourth weeks after the period is open if the employee has not certified. The deans will receive email notifications after the third and fourth weeks with an attached spreadsheet of employees who have not certified within their colleges. The FYI reviewers will also receive an email notification after the fourth week with an attached spreadsheet of all employees who have not certified. Certifiers will have the option to request a labor redistribution when necessary.
Subject to the review of the Shared Governance Committee.

6.4 Sanctions.

Effort certifications must be completed in a timely manner. If not completed within the allotted four week certification period, the Dean and Chair of the affected department and the Associate Vice Chancellor for Research will be notified. If the effort has not been filed within ten (10) business days of such notification, salary and fringe benefit expenditures associated with the project in question will be reallocated to the principal investigator’s department. In addition, further project expenditures will be disallowed until certification has been completed.

Failure to comply with the requirements of these principles or applicable standards may also result in University disciplinary action, loss of privileges to conduct research or use University facilities and equipment, loss of grant funding, and civil or criminal penalties imposed under federal or state laws.

7.0 RESPONSIBILITIES

Employees

All employees who work on externally-funded projects are required to report their effort. Full-time employees should certify their own effort whenever possible and request a labor redistribution from Sponsored Programs Accounting if reported effort exceeds or is less than estimated effort, provided, however, that up to a 5% variance from estimated effort is allowed.

Principal Investigators

The principal investigator is required to certify his/her effort and the effort of students and part-time employees. Additionally, if a full-time employee is prevented from certifying for circumstances beyond his/her control, the principal investigator can certify on his/her behalf. If a situation arises which prevents a full-time employee from certifying, the principal investigator can certify on the employee’s behalf.

Chairs, Deans, Directors of Institutes, or Equivalent Administrators

Department chairs or deans may function as alternate certifiers in some circumstances, but such certification should only occur if the alternate certifier has first-hand knowledge of actual effort. Chairs, Deans, Institute Directors, or equivalent administrators will be provided with reports at reasonable intervals to ensure that the employees under their supervision complete their monthly effort certifications in a timely manner.

Office of Sponsored Programs

The Office of Sponsored Programs is responsible for administering the Effort Reporting Program and for working collaboratively with the Office of Research and Technology Transfer to develop reports that are suitable for management purposes.
ARKANSAS STATE UNIVERSITY
GOVERNING PRINCIPLES TO DIFFERENTIATE BETWEEN
SPONSORED PROGRAMS AND GIFTS

1.0 INTRODUCTION

Arkansas State University (ASU) is committed to advancing research/scholarship activities by providing the faculty with tangible support (within its financial limits) including release time, summer salary, start-up funding, matching funds, university funding for research activities, etc. It is likewise committed to advancing administrative clarity by providing managers and researchers alike the framework within which research activities are categorized and supported.

2.0 PURPOSE

The purpose of this document is to differentiate between gifts and sponsored programs and to outline a general framework for their proper solicitation, administration, and accounting.

3.0 DEFINITIONS

Facilities and Administrative Costs (F&As). F&As are broad categories of costs that are incurred for common or joint objectives and cannot be identified readily and specifically with a sponsored project, an instructional activity, or any other institutional activity. “Facilities” refers to depreciation and use allowances, interest or debt associated with certain buildings, equipment and capital improvements, and operation and maintenance expenses. “Administration” is defined as general administration and expenses, departmental administration, sponsored projects administration, student administration and services, and all other types of expenditures not listed specifically in one of the subcategories of Facilities (including cross allocations from other pools).

Gifts. Gifts are defined as items of value that are donated by an individual who expects nothing of significant of value in return, other than recognition and disposition of the gift in accordance with his/her wishes. In general, the gift characteristics include the following elements.

- No contractual requirements are imposed and there are no "deliverables" to the donor. However, the gift may be accompanied by an agreement that restricts the use of the funds to a particular purpose.

- A gift is typically irrevocable. While the gift may be intended for use within a specific timeframe, there are no "start" or "stop" dates that are normally associated with sponsored projects.

1 OMB Circular 21, Revised 5/10/04.
• Formal fiscal accountability reports to the donor are generally not required, though periodic progress and/or summary reports may be requested. Though characteristic of good stewardship, these reports are not usually contractually obligated.

**Sponsored Programs.** Sponsored Programs are externally-funded activities in which a university enters into a formal written agreement with a sponsoring entity to provide services in a specified area of interest. The agreement may take the form of a grant, contract, or cooperative agreement and generally includes a statement of work, provision for Facilities and Administration costs, detailed financial accountability, a specified period of performance, a requirement to return unused money at the end of the funding period, terms and conditions for the disposition of tangible assets (e.g., equipment, records, technical reports, etc.) and requirements for adherence to state and federal guidelines where applicable. Such submissions are often competitively reviewed. Examples include:

- awards to support research activities
- external Faculty "Career Awards" to support research efforts
- external funding to maintain facilities or equipment and/or operation of a center or facility which will be used for research
- external support to write books, when the purpose of is to publish research results.

4.0 **APPLICABILITY**

These governing principles affect all University employees and affiliated workers who are not employed by the University but may work collaboratively with faculty and/or staff.

5.0 **REGULATIONS**

Governing Principles and Procedures for Preparation of Sponsored Program Requests

6.0 **GOVERNING PRINCIPLES**

6.1 **Overview**

Both sponsored projects and gift-funded activities are externally-supported, with funds provided typically in response to a request or proposal. The classification of funding as "gift" or "sponsored" will affect, among other things, the way ASU accounts for the funds, calculates and applies F&A (indirect) costs, and reports on the use of the funds to the sponsor or donor.

ASU agrees to use restricted gifts as the donor specifies, and does not accept gifts that it cannot use as the donor intends. If circumstances change such that a gift cannot be used as the donor specified, the donor must approve a change in the original restriction, or ASU must receive court
approval to waive the restriction (if the donor cannot be contacted). University approval for changes in the purpose of a gift fund can only be granted by the Provost.

6.2 The Distinction between Sponsored Programs and Gifts

The distinction between sponsored programs and gifts can be subtle, so it is important to recognize the difference so that sponsors are approached appropriately and gifts and grants are managed and accounted for properly. There is a fundamental difference between a “gift” and a “sponsored program” and each follows separate paths. Gifts are bestowed voluntarily, without expectation or receipt of direct economic benefit, whereas sponsored programs are awarded to support a project with a defined scope of work from which the sponsor expects certain performance objectives to be achieved. The Offices of Research and Innovation and Sponsored Programs establish and manage sponsored program funds; the Development Office oversees the cultivation and stewardship of gift funds.

The following provides differentiating characteristics of gifts and sponsored programs.

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Gift</th>
<th>Sponsored Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal, state, local sources of public funding</td>
<td>Never</td>
<td>Always</td>
</tr>
<tr>
<td>Nonprofit funding</td>
<td>Rarely</td>
<td>Usually</td>
</tr>
<tr>
<td>Corporate funding</td>
<td>Sometimes</td>
<td>Rarely</td>
</tr>
<tr>
<td>Funds support direct mission of University</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Funds support mission of sponsoring agency</td>
<td>Usually not</td>
<td>Yes</td>
</tr>
<tr>
<td>Value exchange; sponsor may request tangible items of value; e.g., intellectual property, data, etc.</td>
<td>Little or no value exchange</td>
<td>Yes</td>
</tr>
<tr>
<td>Specifies the goal of an activity and, in some cases, specifies how to accomplish the activity.</td>
<td>Expresses goal only.</td>
<td>Specifies goal, and may also specify “how-tos.”</td>
</tr>
<tr>
<td>Penalties for non-performance</td>
<td>Return of unspent funds or unused materials.</td>
<td>Penalties may exist for failing to deliver items on a timely basis. Sponsor may include audit and compliance terms.</td>
</tr>
<tr>
<td>Publication and data review</td>
<td>Sponsors place few restrictions on review of results before they are made available.</td>
<td>Sponsor may place restrictions on how results are reviewed before being made available to a wider audience.</td>
</tr>
<tr>
<td>Time period</td>
<td>No time period is specified.</td>
<td>There is a specified time period over which the funds will be expended.</td>
</tr>
</tbody>
</table>
Document subject to review of the Shared Governance Committee.

<table>
<thead>
<tr>
<th>Reporting</th>
<th>The institution has no obligation to report to the donor how the gift is used or invested(^2), but the institution may do so as a component of donor stewardship.</th>
<th>Technical, programmatic, and/or financial reports are required.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tax Benefits</td>
<td>Foundations expect the University to provide a receipt for tax purposes.</td>
<td>None</td>
</tr>
</tbody>
</table>

If in doubt, refer to the statement of work, terms of agreement, and the intent of the donor or sponsor. If the appropriate classification is still unclear, the Associate Vice Chancellor for Research, the appropriate Dean, and the University’s Development Officer will confer and resolve the question.

6.3 **Coordination and Clarification**

To facilitate the solicitation and management of gifts and sponsored programs from corporations, foundations, and other private sponsors, the Offices of Research and Development shall maintain systems that consistently report and share information. It is acceptable for each to account for the same grant and/or gift as long as the records so note that it has been accounted for in each place, and as long as the institutional definitions for grants and gifts are satisfied.

\(^2\) CASE Management Reporting Standards Addendum (Nov. 2002).
ARKANSAS STATE UNIVERSITY
GOVERNING PRINCIPLES FOR THE
RESPONSIBLE CONDUCT OF RESEARCH

1.0 INTRODUCTION

Arkansas State University is committed to ethical conduct and provides training to its investigators in the responsible conduct of research.

2.0 PURPOSE

The purpose of these governing principles is to provide training in the responsible conduct of research to University employees and students who participate in University or externally-funded research programs. It is also designed to ensure compliance with Section 7009 of the America Creating Opportunities to Meaningfully Promote Excellence in Technology, Education and Science (America COMPETES) Act which requires that undergraduates, graduate students, and postdoctoral researchers who participate in National Science Foundation (NSF) projects receive training in the responsible and ethical conduct of research.

3.0 DEFINITIONS

Co-Principal Investigator. The co-principal investigator is a faculty member or administrator who has secondary responsibility for directing work on sponsored program projects.

Principal Investigator. The principal investigator is a faculty member or administrator responsible for directing work on sponsored program projects.

Responsible Conduct of Research (RCR). Responsible conduct in research, at minimum, is research that is built on commitment to:

- Acquiring and managing data using accepted practices;
- conveying information truthfully and honoring commitments;
- reporting findings precisely and taking care to avoid errors;
- appropriately crediting research colleagues for their participation in research projects and any publications or presentations that emanate from such research projects;
- using resources wisely and avoiding waste;
- letting the facts speak for themselves and avoiding improper bias;
- treating human subjects with respect and minimizing risk to their participation in University-sponsored research programs;
- caring for animals appropriately and minimizing their pain and suffering;
- providing students, post-doctoral fellows, and junior faculty members with mentoring and training opportunities; and
- aggressively pursuing alleged cases of research misconduct.
4.0 REGULATIONS

Section 7009 of the America Creating Opportunities to Meaningfully Promote Excellence in Technology, Education and Science (America COMPETES).

5.0 APPLICABILITY

These governing principles apply to all undergraduates, graduate students, and postdoctoral fellows, to principal, and co-principal investigators who apply for or participate in externally-funded sponsored programs.

6.0 GOVERNING PRINCIPLES

All individuals who apply for or participate in externally-funded research programs at Arkansas State University after July 1, 2010 are required to enroll in Responsible Conduct of Research (RCR) training before the onset of work. Core instructional areas (modules) of the Responsible Conduct of Research as indicated by the U.S. Office of Research Integrity include:

- **Data Acquisition, Management, Sharing, and Ownership**: Accepted practices for acquiring and maintaining research data. Proper methods for record keeping and electronic data collection and storage in scientific research. Includes defining what constitutes data; keeping data notebooks or electronic files; data privacy and confidentiality; data selection, retention, sharing, ownership, and analysis; data as legal documents and intellectual property, including copyright laws.

- **Conflicts of Interest and Commitment**: The definition of conflicts of interest and how to handle conflicts of interest. Types of conflicts encountered by researchers and institutions. Includes topics such as conflicts associated with collaborators, publication, financial conflicts, obligations to other constituencies, and other types of conflicts.

- **Human Subjects**: Issues important in conducting research involving human subjects. Includes topics such as the definition of human subjects research, ethical principles for conducting human subjects research, informed consent, confidentiality and privacy of data and patient records, risks and benefits, preparation of a research protocol, institutional review boards, adherence to study protocol, proper conduct of the study, and special protections for targeted populations, e.g., children, minorities, and the elderly.

- **Animal Welfare**: Issues important to conducting research involving animals. Includes topics such as definition of research involving animals, ethical principles for conducting research on animals, Federal regulations governing animal research, institutional animal care and use committees, and treatment of animals.

- **Research Misconduct** (fabrication or falsification of data including image manipulation, plagiarism). The meaning of research misconduct and the regulations, policies, and guidelines that govern research misconduct in PHS-funded institutions. Includes topics such as fabrication, falsification, and plagiarism; error vs. intentional misconduct; institutional misconduct policies; identifying misconduct; procedures for reporting misconduct; protection of whistleblowers; and outcomes of investigations, including institutional and Federal actions.

- **Publication Practices and Responsible Authorship**: the purpose and importance of scientific publication, and the responsibilities of the authors. Includes topics such as collaborative work and assigning appropriate credit, acknowledgments, appropriate citations, repetitive
publications, fragmentary publication, sufficient description of methods, corrections and retractions, conventions for deciding upon authors, author responsibilities, and the pressure to publish.

- **Mentor / Trainee Responsibilities**: the responsibilities of mentors and trainees in predoctoral and postdoctoral research programs. Includes the role of a mentor, responsibilities of a mentor, conflicts between mentor and trainee, collaboration and competition, selection of a mentor, and abusing the mentor/trainee relationship.

- **Peer Review**: The purpose of peer review in determining merit for research funding and publications. Includes topics such as, the definition of peer review, impartiality, how peer review works, editorial boards and ad hoc reviewers, responsibilities of the reviewers, privileged information and confidentiality.

- **Collaborative Science**: Research collaborations and issues that may arise from such collaborations. Includes topics such as setting ground rules early in the collaboration, avoiding authorship disputes, and the sharing of materials and information with internal and external collaborating scientists.

Only those instructional areas applicable to the grant funded research project are required to be covered. For example, a chemistry project might not involve the use of human subjects, thus the human subjects module would not be required as part of the training.

### 7.0 RESPONSIBILITIES

**Principal and Co-Principal Investigators**

Principal and Co-Principal Investigators who are conducting externally-funded research projects are responsible for assuring that undergraduates, graduate students, and post doctoral fellows participate in appropriate Responsible Conduct in Research training (depending upon discipline) offered by the CITI Program. Faculty investigators who have received, or are about to receive, external funding are also required to complete the CITI Program Responsible Conduct in Research Program before a grant account will be activated.

**Undergraduates, Graduates Students, and Postdoctoral Fellows**

Undergraduates, Graduates Students, and Postdoctoral Fellows are responsible for successfully completing appropriate CITI Program training.

**Associate Vice Chancellor for Research**

Dissemination and administration of these regulations will be the responsibility of the Associate Vice Chancellor for Research.

Draft: March 10, 2010
1.0 INTRODUCTION

Centers and institutes play an increasingly important role in fulfilling the teaching, research, and service mission of Arkansas State University (ASU). This document establishes guidelines for the creation, operation, and review of new and existing centers and institutes at ASU. These guidelines will affect currently existing centers and institutes by encouraging their participation in the guidelines for operation and evaluation contained herein.

Both flexible and entrepreneurial, a center or an institute contributes to the academic life of the University by fostering collaboration among faculty, departments, and colleges, and by facilitating relationships with other research enterprises, community stakeholders, and grant-making agencies. They help to facilitate the University’s mission by providing alternative opportunities for teaching, scholarship, and service, while simultaneously enhancing the University’s reputation as a leader in scholarship and research.

2.0 PURPOSE

When academic centers, support centers, and institutes are appropriately designed, ably led, regularly reviewed, and carefully integrated with the University’s core mission, they make essential and powerful contributions to the University’s academic life. They are distinct entities that may be affiliated with departments and colleges. They have any or all of the following attributes:

- provide clear intellectual foci that define their essential programs and research activities;
- advance the scholarly missions of departments, colleges and the University;
- serve as the nucleus for research programs in established and emerging fields of strength;
- offer students and community stakeholders educational programs, training, and services that otherwise would not be available; and
- enhance the visibility and reputation of the University.

3.0 DEFINITIONS

- **Academic Centers.** Academic centers are teaching/research/service entities organized within departments or colleges that have focused missions and clearly defined objectives. They may stem from a single discipline or involve collaboration among disciplines. Academic centers typically will report to a dean and should attract the intellectual and professional participation of a critical mass of faculty members, visiting scholars, senior scientists, and/or leading professionals.

- **Affiliates.** Affiliates are individuals who participate in ASU’s education, research, or service activities, but are not employees nor students.
Subject to review of the Shared Governance Committee.

- **Support Centers.** Support centers are entities organized within colleges or executive-level offices. Their reporting structure typically is to a dean or executive official. Their purpose is to serve the academic community by assisting to fulfill the University’s mission of teaching, research, and service.

- **Institutes.** Institutes, like academic centers, are grounded in the teaching/research/service mission of the University. They typically have broader missions and multidisciplinary foci than academic centers and will most commonly report to the Provost or his/her designee. They should the intellectual and professional participation of a critical mass of faculty members, visiting scholars, senior scientists, and/or leading professionals. It is expected that most institutes would also include significant interaction with community stakeholders and be totally self-sufficient within a specified period of time.

- **Center or Institute Affiliates.** The University’s faculty and staff, community participants, or other external stakeholders may receive “affiliate” designations when appropriate. An affiliate’s designation indicates an individual’s key role in a center or an institute.

- **Designation as a Center or Institute.** Designation as a center or an institute is a competitive process that is administered by the Office of the Provost and Vice Chancellor for Academic Affairs and Research, in consultation with the Office of the Chancellor.

- **New Center or Institute.** Those centers or institutes that had not been officially designated as such by ASU on January 1, 2012.

- **Existing Center or Institute.** Those centers or institutes that had an official designation (i.e., recognized by the University) as a center or institute on or before January 1, 2012. These include the Center for Educational Excellence in the College of Education and the Beck Pride Center in the College of Nursing and Health Professions.

4.0 **APPLICABILITY**

This policy applies to all faculty and staff at ASU.

5.0 **GOVERNING PRINCIPLES**

5.1 **Establishment**

Designation as a center or institute is a singular honor reserved for those entities that are a) central to the mission of the University, b) interdisciplinary, c) entrepreneurial in approach, d) research intensive, e) venues for student learning, and f) linked to the community and to other external stakeholders. Additionally, centers and institutes must build upon faculty strengths; facilitate the creation of a multidisciplinary community of scholars; be linked to at least one academic program in order to provide research, service, and experiential learning opportunities for faculty and students; demonstrate the potential for attracting external support and/or demonstrably enhancing the University’s reputation; and demonstrate linkages to the community (desirable for centers, mandatory for institutes).

Academic centers and institutes require thoughtful analysis before they are established. Proposals for their establishment should include a statement of need, mission statement, goals and objectives, proposed name, benefits, a communications plan, relationships, affiliations, and a business plan. Please see Section 7.0 for more detailed instructions.
Subject to review of the Shared Governance Committee.

5.2 Management of Centers and Institutes

5.2.1 Role of the Director. The directors of centers and institutes are responsible for ensuring that their units contribute to the academic vitality and visibility of the University. Directors of the academic centers and institutes are appointed by the Provost and Vice Chancellor for Academic Affairs and Research with the advice and of the relevant Deans and Chairs. They must be members of the faculty, unless otherwise approved by the Provost and Vice Chancellor for Academic Affairs and Research. The appointment of a director must include a written enumeration of any additional compensation, change in workload, other alterations of the faculty member’s responsibilities, and any conditions of employment. The Director’s faculty contract will be modified or redrawn as necessary to reflect new levels of responsibilities and/or compensation.

5.2.2 Faculty/Constituent Affiliations. The leaders of centers and institutes are encouraged to develop relationships with the faculty and other stakeholders within and outside of the University. The Director has responsibility for recommending any affiliate positions to his/her supervisor.

Center or Institute affiliates should receive letters of appointment that contain the specified periods of service, position descriptions, compensation terms (if any), and descriptions of alterations in workload. Before agreeing to participate, any members of the faculty who anticipate serving in an affiliate’s role should seek advice from their chairs and/or deans concerning the impact that his/her involvement will have upon tenure and/or promotion. Faculty affiliates likewise should report any center or institute activities in their annual performance reports.

5.2.3 Policy and Procedure Compliance. All center and institute employees and affiliates are responsible for understanding and adhering to the University’s policies and procedures, including but not limited to financial and human resources policies and procedures, the gift acceptance policy, sponsored research policies and procedures, procurement policy, capital projects planning procedures, and all other relevant policies and procedures.

5.2.4 Establishment of Advisory Boards. If deemed appropriate by the Chancellor, Provost, Senior Associate Vice Chancellor for Academic Affairs and Research, and the Associate Vice Chancellor for Research, an external advisory board may be created for a center or institute to provide the unit with support and advice. Its responsibilities may include advising the director about activities that are consistent with the unit’s mission, reviewing the unit’s accomplishments in light of its goals, providing long-range guidance for the unit’s major direction and strategies, and contributing to and/or promoting the financial viability of the center.

The external advisory board may include qualified representatives from academic communities, professional organizations, corporations, governmental agencies, or other suitable entities that are relevant to the center or institute. Members of an external advisory board are appointed by the Chancellor upon the recommendation of the Provost, Senior Associate Vice Chancellor for Academic Affairs, and the Associate Vice Chancellor for Research. The Director or a nominating committee may recommend prospective board members, but cannot invite or appoint new members to the board independently.
Subject to review of the Shared Governance Committee.

If an advisory board is established, the expectations of membership should be clearly articulated. Terms should be for specific durations (no more than three years) and should expire on a rotating basis to ensure continuity.

5.3.6 **Evaluation of Centers and Institutes.** All existing centers and institutes as of January 1, 2012 will be evaluated within two years of that date using the methodology described in Section 7, Procedures. At the end of the second year of operation, each new center or institute (those that did not exist prior to January 1, 2012) will be evaluated to determine whether it has contributed substantially to the mission of the University. Thereafter, all centers, whether new or existing on January 1, 2012, will be evaluated every fifth year of operation.

6.0 **RESPONSIBILITIES**

It is the responsibility of the Vice Chancellor for Academic Affairs and Research to approve the establishment of all centers and institutes and to precipitate their periodic review.

It is the responsibility of the Associate Vice Chancellor for Research, in collaboration with the Senior Associate Vice Chancellor for Academic Affairs and Research, to participate in the establishment of centers and institutes, to work with them on an ongoing basis to enhance research productivity, and to participate in periodic evaluations.

It is the responsibility of Deans and Chairs to sponsor development of the centers and institutes, monitor their ongoing activities when appropriate, and participate in periodic evaluations. It is likewise their responsibility to assure faculty release time when appropriate.

It is the responsibility of center and institute directors to:

- a. create strategic plans and goals in the context of the University’s academic mission;
- b. ensure that the units’ activities are consistent with their missions, goals, and objectives;
- c. interact with university faculty and administrators, as well as with external constituents;
- d. garner faculty, visiting scholar, and community stakeholder participation in the unit and secure affiliate appointments as appropriate via the chair, dean, or Provost;
- e. secure financial resources to support the center or institute and oversee fiscal matters and submitting financial reports as required;
- f. ensure that resources are used appropriately;
- g. employ and manage staff within the unit;
- h. ensure that terms contained in any grant and donor agreements are met;
- i. precipitate the development of annual and self-study reports; and
- j. ensure that all employees (faculty and staff) perform according to the ethical and moral standards of the University, and comply with all University, federal, state, local and University regulations and policies.
Subject to review of the Shared Governance Committee.

7.0 PROCEDURES

7.1 Establishment

Program requests must include the following elements.

a. **Statement of Need.** How the entity will advance the University’s mission and what opportunities that currently do not exist will be possible if the center or institute is established.

b. **Mission Statement, Goals, and Objectives.** A mission statement should be developed that clearly describes the center’s purpose, goals and objectives. The statement should link to the University’s statement of mission and should provide clear indication of desired outcomes.

c. **Naming the Center or Institute:** The proposed name for the center and the rationale for the name. The Provost will evaluate the proposal and recommend its approval or disapproval. The Provost reserves the right to modify the proposal as appropriate.

d. **Benefits.** The benefits garnered for faculty, students, staff and the community.

e. **Communications Plan.** How the new unit will be communicated to the University community and to external stakeholders.

f. **Relationships.** The relationship of the proposed unit to the faculty and to other educational programs, centers, institutes, the community, or other external constituencies.

g. **Consultations.** The entities that have been consulted within and outside the University. Copies of any letters of support must be included with the proposal.

h. **Business Plan.** The business plan should contain the following components.

1. A budget that includes anticipated revenues and expenses for the first five years of operation.

2. Current external funding, if any, and the duration of that funding. **NOTE:** A proposal must be submitted to and approved by the Provost prior to the initiation or acceptance of external funds. In some cases a grant proposal may be used to justify establishment of the center or institute. In such circumstances, the principal investigator must provide sufficient time for the Chair, Dean, and the Provost to evaluate the proposal.

3. Potential sources of internal funding and amounts.

4. Analysis of the anticipated true cost of the unit including any in-kind donations (e.g., personnel, operating supplies, travel, equipment, space, etc.)

5. A long-term methodology and plan to sustain the unit.

6. Listing of faculty and staff who will be involved in the proposed unit, what their roles will be, and the impact the new unit will have on their current responsibilities (if any). CV’s for current faculty and staff should be included.

7. The unit’s proposed administrative structure and organizational chart.

8. The space, equipment, or other physical requirements. Explain how existing facilities and resources will be used, or what facilities and resources must be added.
Subject to review of the Shared Governance Committee.

7.2 Annual Reports

All centers and institutes, whether new or existing, are required to submit annual reports of their activities by August 1 of each year. These reports must contain the following elements:

a. contribution to the visibility and stature of the university;
b. contribution to scholarship in the areas in which the Center is positioned;
c. involvement of faculty and students, including the names and disciplines of those who participate;
d. ability to garner the resources necessary to effectively address the goals and objectives articulated in the unit’s proposal;
   1. Number, dollar amount, and source of all competitive, extramural funding proposals.
   2. Number, dollar amount, and source of all competitive proposals funded.
e. financial statement that provides the unit’s operating costs;
f. financial statement that provides the unit’s true costs (including all in-kind contributions from the University or other sources);
g. ability to utilize the Center’s advisory board (if applicable) to enhance and expand the units’ activities;
h. reports of any obstacles encountered and the actions taken to overcome these obstacles, or the reason they were not solved.

7.3 Evaluation of New and Existing Centers and Institutes

Evaluation materials that must be submitted include:

a. a copy of the document that established the unit;
b. evidence of the unit’s ability to enhance the academic mission of the university;
c. extent of the unit’s contribution to the visibility and stature of the university;
d. a statement of the progress made in fulfilling the unit’s goals and objectives;
e. an evaluation of the impact the unit has had upon scholarship including publications, patents, creative activities, invited presentations, keynote addresses, service on federal panels, and awards or other special acknowledgements;
f. an evaluation of the impact the unit has had upon teaching at both the graduate and undergraduate levels;
g. an evaluation of the impact the unit has had on linkages with community stakeholders;
h. an assessment of the external funding that has been garnered during the review period;
i. an evaluation of the unit’s long-term fiscal viability;
j. an evaluation of the quality of the management of the unit;
k. a listing of all visiting scholars and postdoctoral fellows who have worked or are working with the unit (if applicable);
l. the efficacy of the unit’s advisory board (if applicable);
m. a financial statement of expenses incurred within the unit for the previous five years;
Subject to review of the Shared Governance Committee.

n. a financial statement that articulates the unit’s true costs (including all in-kind contributions from the University or from other source for the previous five years other relevant contributions).

The review process will include the following elements:

a. The Provost, in consultation with the appropriate campus constituents, will appoint a standing committee consisting of six ASU faculty members who will serve on rotating, three-year terms. All of the faculty members shall have significant research experience, in addition to having secured at least one competitively funded grant or contract. At their discretion, the Vice Chancellor may also seek participation from external constituencies.

b. The Associate Vice Chancellor for Research will serve as an ex-officio member of the Committee and his/her office will be responsible for administering the reviews.

c. The Associate Vice Chancellor for Research will develop a schedule identifying the semester in which each unit will be reviewed. Each unit will be given at least one semester to prepare for the review.

d. The center will prepare a self-study that addresses the evaluation criteria listed above.

e. The center/institute director will have an opportunity to meet with the Committee and to answer any questions that may arise from the self-study.

After evaluating the self-study document and any external input, the Committee will report its findings to the Provost and Vice Chancellor for Academic Affairs and Research. The report shall articulate the unit’s strengths and weaknesses and shall contain recommendations to 1) continue the center for an additional five-year period, 2) conditionally continue the center for a prescribed period until improvements (as articulated by the Vice Chancellor and the Committee) are met; 3) merge the unit with another unit on campus; or 4) dissolve the unit. In the latter case, the Committee should make recommendations to the Vice Chancellor about an orderly transition of any personnel or assets contained within the unit.