



BUSINESS CONDUCT AND ETHICAL STANDARDS



UNIVERSITY
OF MIAMI

TABLE OF CONTENTS

Introduction	2
Message from the Chair of the Audit and Compliance Committee	4
Message from the President	5
Mission, Values, Standards, and Behaviors	6
Conflict of Interest and Foreign Engagements	12
Supplier Relations/Fair Trade	13
Export Control	16
Gifts and Entertainment	17
Gifts from UM to Third Parties	19
Misuse of University Assets	19
Proper Accounting	21
Ownership of Innovations, Creations, and Intellectual Property	24
University Compliance	27
UHealth Compliance	28
Fraud and Abuse Laws and Whistleblower Protection	30
Use of Electronic Communication Resources	31
Web and Digital Communications	34
Copyright Infringement	36
Faculty Consulting	38
Human Subjects Research	39
Research Misconduct	41
Confidentiality and Privacy	42
Use of the University of Miami Name, Seal, and Logo	44
Working Together	46
Useful Addresses and Phone Numbers	48



INTRODUCTION

The University of Miami is a large, diverse, and complex organization linking thousands of individuals and entities in missions of education, research, patient care, and community service. A paramount commitment to ethical standards of practice is essential to both the spirit of our institution and its practical operations.

Such a commitment serves a variety of useful functions. By articulating core values and policies that shape both daily and long-term operations, the University conveys what kind of employer, business affiliate, and neighbor it seeks to be. This handbook outlines University guidelines on business conduct, provides questions and answers on each issue covered, and gives direction for handling situations in which policies are not being followed.

The handbook also references relevant policies where applicable. However, please note that this handbook is not comprehensive, and is intended as a guide to the policies, not as a statement of the policies themselves. Users of this handbook should review the complete text of all the relevant University policies, which are available online at <https://umiami.policystat.com>, and University of Miami Health System policies are available at <https://umhs-umhc.policystat.com> and which cover the following areas:

- Business services (including bookstores, duplicating services, food service, general business policies, mail systems, materials management, public safety, purchasing, risk management, and travel)
- Purchasing
- Facilities and operations (including environmental health and safety)
- Finance (including planning and budgeting, financial accounting and reporting, payroll, non-payroll expenditures, and treasury)

- Human resources (including employment, affirmative action, wage and salary, pay, benefits, employee relations, and leaves of absence)
- Information technology (including information systems, which addresses security, access and confidentiality, software copyright, Web policies and electronic mail, and telecommunications)
- Real estate (including information on leases and sales of property)
- Research administration (including proposal development and negotiations, award management, cost principles, billing, and reporting)

The Faculty Manual, accessible online at the Faculty Senate site (<https://fs.miami.edu/index.html>), provides additional information on important faculty policies related to ethical matters and the intellectual property policy. These policies can be found on the University's PolicyStat site at <https://umiami.policystat.com>.

Policies are important both for what they say and for what they imply—in common occurrences and in situations not yet contemplated. A robust policy stimulates best practices in clear cases and provides guidance in complex and uncertain cases. The University expects proper business conduct whether a case is complex or easily resolved. The University makes policy changes periodically, and it is the responsibility of staff to review policies online regularly.

For questions regarding items not addressed in this guide, please contact the appropriate office using the phone numbers listed on the final two pages of this handbook.

MESSAGE FROM THE CHAIR OF THE AUDIT AND COMPLIANCE COMMITTEE

As chair of the Board of Trustees Audit and Compliance Committee, I want to encourage you to read and understand the matters detailed in this handbook, as they are critical to the University maintaining the highest standards of ethics and compliance possible. My colleagues on the board are proud of your work and want to assist you in your endeavors. We hope you find this tool helpful.

If you have any questions or concerns, please feel free to call any of the numbers listed on the last two pages of this handbook or the University Hotline at 877-415-4357 or **university-hotline.ethicspoint.com**. The hotline is a confidential reporting line managed by a third-party vendor where you can make an anonymous and confidential report.

Johnny C. Taylor Jr.

Chair, Audit and Compliance Committee
University of Miami Board of Trustees

MESSAGE FROM THE PRESIDENT

As colleagues, we are unified by our common purpose to transform lives. We work together, caring for students, patients, families, and community members. They trust us and rely on our expertise to help them by producing the very best educational, research, innovation, and service outcomes. To achieve these results, we live our values of integrity, responsibility, and excellence. We treat each other with dignity and mutual respect. This helps to build trust and fosters a sense that each of us belongs at UM.

At the U, we are a part of something bigger than ourselves. We support each other to make decisions and take actions that are guided by our commitment to do what is right, even when it is difficult to do so. We do this by acting responsibly and transparently in all our interactions. We behave ethically in teaching, business transactions, research, patient care, privacy and data protection, and many other activities. When we act ethically, we build trust between ourselves and with our business partners, domestically and abroad.

Our success depends on living the values of integrity, respect, diversity, tolerance, fairness, and resilience. These principles are at the heart of who we are and what we want to be. To help provide you with guidance on these issues, a University-wide committee of colleagues prepared this code of conduct handbook.

This guide summarizes standards, provides answers to some of the ethical questions facing us in everyday work situations, references University policies and procedures, and provides a directory listing of the key departments to turn to for further assistance.

Each of us must adhere to this code of conduct and hold one another accountable to a high ethical standard. Ask questions if you are unsure about what to do and promptly report any concerns. By doing the right thing in every situation, every day, we will build and maintain trust and support those we are committed to serving through our mission of education, research, innovation, and service.

I hope you find this handbook helpful. I am grateful to work with you as we advance the University of Miami as an exemplary institution.

Julio Frenk

President
University of Miami

MISSION, VALUES, STANDARDS, AND BEHAVIORS

At the U, our **mission** is to transform lives through education, research, innovation, and service. We are committed to fostering a culture of belonging where everyone at the University feels valued and has the opportunity to add value.

We intentionally shape our culture by adhering to a set of shared values and behaviors, service standards, and leadership expectations.

Our **core values** of diversity, integrity, responsibility, excellence, compassion, creativity, and teamwork (DIRECCT) provide the foundation for all of our behaviors.

Our **service standards** of safety, caring, responsiveness, and professionalism provide guidelines for how we treat one another and those we serve.

Our **leadership expectations** to build trust, be visionary, be inspirational, serve others, develop people, be courageous, be decisive, and demonstrate business acumen provide behavioral expectations for those who serve as University leaders.

DIRECCT Values

DIVERSITY

Valuing and including people from all cultures and backgrounds in the pursuit of our common goals

Behaviors

- I view differences of opinion as essential for growth
- I treat everyone with dignity and understanding
- I respect all members of the University community

INTEGRITY

Demonstrating honesty and fairness in our words and actions

Behaviors

- I uphold the highest standards of ethical behavior
- I act with sincerity and truthfulness in all interactions
- I model fair treatment and respect for everyone

RESPONSIBILITY

Exhibiting pride and accountability in the performance of duties and ensuring the long-term success of our University

Behaviors

- I utilize University resources in a responsible manner
- I make the goals of the University my priority
- I am dependable and trustworthy

EXCELLENCE

Striving to accomplish our goals with quality, rigor, passion, and distinction

Behaviors

- I perform each task with the highest level of quality
- I exceed the expectations of everyone I serve
- I actively seek opportunities to learn, grow, and improve performance

COMPASSION

Behaving in a caring, humane, and empathic way

Behaviors

- I seek to transform the lives of others for the better
- I listen to others with empathy and understanding
- I help to resolve and relieve stressful situations

CREATIVITY

Embracing innovation, flexibility, and originality in the pursuit of our vision and mission

Behaviors

- I actively pursue new and better ways for achieving desired results
- I recognize and encourage creativity among my colleagues
- I see improvement as my responsibility

TEAMWORK

Engaging and working well together to achieve optimal results

Behaviors

- I always communicate honestly and openly
- I treat others as they would like to be treated
- I support my colleagues in the pursuit of our common goals

Service Standards

Our **service standards** of safety, caring, responsiveness, and professionalism and their associated behavior expectations are:

SAFETY

Providing for the welfare and peace of mind for all

Behaviors

- Know and follow all safety procedures in your area
- Identify and help address potential safety hazards
- Educate others on safe behaviors
- Protect privacy of information

CARING

Treating every person with respect and dignity

Behaviors

- Listen to the needs, wants, and expectations of the people I serve
- Know or find answers for the people I serve
- Treat everyone with courtesy and respect

RESPONSIVENESS

Delivering the highest level of quality service with the optimal use of time and resources

Behaviors

- Offer others help when needed
- Address issues that negatively impact service
- Reduce waste of time and resources
- Look for ways to continuously improve and innovate

PROFESSIONALISM

Exhibiting quality in our physical environments and personal behaviors

Behaviors

- Maintain an appearance appropriate to my role
- Present an orderly and clean work environment
- Display a positive, solution-oriented attitude

Leadership Behaviors

Expected **leadership behaviors** associated with building trust, being visionary, being inspirational, serving others, developing people, being courageous, being decisive, and demonstrating business acumen are:

BUILDS TRUST

Able to be transparent by being authentic, conveying trust, and communicating openly, while involving key stakeholders in decision-making

Behaviors

- Practice humility and openness
- Conduct regular one-on-one meetings with individual team members
- Share information in a timely and effective manner
- Involve my team in making decisions that improve our processes

VISIONARY

Able to take a long-term perspective, conveying a belief in an outcome and displaying the confidence to reach goals

Behaviors

- Connect people to the long-term outcomes of their day-to-day tasks
- Advise staff and faculty to create goals that move the organization continuously toward excellence
- Coach others on generating solutions that help us reach our goals

INSPIRATIONAL

Able to inspire and motivate others in a positive manner

Behaviors

- Promote a positive and optimistic workforce
- Redirect conversations to be positive, reducing/discouraging negativity in the workplace
- Regularly use stories about my colleagues to positively illustrate business insights/objectives

SERVES OTHERS

Able to remove hassles and roadblocks so that others can accomplish tasks and goals

Behaviors

- Be approachable and accessible
- Actively listen to team members and follow up on their concerns
- Ask staff members “How can I help you?” at the end of each status update meeting
- Encourage and facilitate collaboration for stakeholders to work together to accomplish tasks and goals

PEOPLE DEVELOPER

Able to provide opportunities for people to be better, know better, and do better

Behaviors

- Encourage and support training and development for staff and faculty
- Provide timely and effective feedback
- Meet with staff regularly to discuss their professional and personal development opportunities
- Continually develop myself as a leader

COURAGEOUS

Able to seek out opportunities for continuous improvement, and fearless in intervening in challenging situations

Behaviors

- Recognize opportunities to identify challenges and propose solutions
- Seek new ways of doing things to improve processes and solve problems
- Do what is right rather than what might be popular

DECISIVE

Able to make informed decisions in a timely fashion

Behaviors

- Educate myself before making decisions
- Consider how decisions will affect my team and others
- Know when to make decisions and when to empower team members to make them

BUSINESS ACUMEN

Able to understand and transact business in a manner that leads to the best outcomes

Behaviors

- Be responsive and professional
- Communicate expectations and hold my team accountable for service excellence
- Know the business and operation of my unit/department/division to achieve the most positive outcomes

CONFLICT OF INTEREST AND FOREIGN ENGAGEMENTS

Conflicts of interest arise in situations in which University personnel might use their positions to obtain private gain for themselves or others, such as those with which they have family, business, or other ties. Conflicts occur in situations in which an interest (regardless of whether the interest is financial or not), appointment, affiliation, or other relationship may compromise, or appear to compromise, a person's objectivity when making work-related decisions, an investigator's professional judgement in conducting or reporting research, or a health care provider's decisions involving patient care.

Situations that could be viewed as presenting a conflict of interest include:

- Financial arrangements by a University employee in a company that has business relationships with the University or to which the Health System may refer business (e.g. consulting, ownership interest)
- Use of students, staff, or University assets in external non-University activities
- Consulting, administrative, board membership, employment, appointment, or other financial or non-financial resource or obligatory relationship by an investigator with a company or institution that is sponsoring or otherwise supporting that individual's research
- Improper acquisition or conversion of University intellectual property rights
- Development of the same or similar technology for two different commercial entities
- Grants or other support for research and scholarship that overlap with proposed or previously funded grants or other support

Should you encounter a conflict or if the situation appears to present a conflict, you should consult with the University's business services office, UHealth compliance office, technology transfer office, or disclosures and relationship management in the Office of the Vice Provost for Research and Scholarship.

A conflict of commitment is also a conflict of interest. Full-time members of the faculty are expected to devote their primary professional loyalty, time, and energy to their teaching, research, and administrative responsibilities, as well as, where applicable, to patient care through the University of Miami Medical Group. Outside financial interests and activities should not interfere with the primacy of these commitments.

The University is deeply committed to supporting international collaboration, which is vital to fostering research and scholarship. However, due to significant concerns regarding some foreign engagements such as diversion of intellectual property, failure to make required disclosures of other support, commitment, activ-

ity or appointment, faculty must disclose affiliations, income, support and research and scholarship with or from a foreign source or entity.

For further information on this subject, please refer to the University of Miami Faculty Manual (<https://fs.miami.edu/faculty-manual/index.html>) and the applicable University of Miami Medical Group, business services, purchasing, human resources, technology transfer, and research policies available online at <https://umiami.policystat.com>, and University of Miami Health System policies available at <https://umhs-umhc.policystat.com>.

Questions and answers

Q: If I teach and conduct research in organic synthetic chemistry, can I open and own a private business to synthesize new organic chemicals?

A: No. Since the University could do this and organic chemistry is your field of expertise, this is a conflict.

Q: If the University releases an invention, patent application, patent, or other form of intellectual property to me, can I work on it in my laboratory?

A: No. The use of University resources in this case is a conflict.

Q: Who needs to disclose their outside interests to UM?

A: All full- and part-time faculty, University of Miami Medical Group members, and Miller School staff who could provide clinical or teaching services for UHealth must disclose their outside professional activities to UM by the end of each calendar year. All UM faculty are required to disclose their outside professional activities, foreign engagements, and financial and obligatory interests related to their institutional responsibilities at least annually. New interests must be disclosed to UM within 30 days of acquisition.

Q: If I have an outside interest (am an advisor to or hold equity in a non-UM entity), am I allowed to conduct research on a subject that might benefit the entity?

A: Most likely. If the UM COI committee determines that an investigator's outside interest could introduce bias into the research but is manageable, the COI committee would manage the situation with a set of stipulations designed to mitigate the potential for bias.

SUPPLIER RELATIONS/FAIR TRADE

The University of Miami Supply Chain Services and University Purchasing departments are authorized to act for the University in all procurement matters. Except where specifically authorized, faculty, staff, and students are prohibited from making commitments or negotiating on behalf of the University or acting as its agent in procurement or contract matters.

A “supplier” (vendor) is any firm, corporation, company, consultant, or individual with whom the University presently, formerly, or potentially conducts business. All suppliers must go through the onboarding process before they are approved to conduct business with the University. All suppliers are screened against the federal debarment and suspension lists through the University’s restricted party’s screening system (Amber Road and OFAC), the human resources employee list for potential conflict, and the State of Florida corporate filings when applicable.

Faculty and staff are expected to observe the following rules with regard to supplier relations:

- Strive to obtain the maximum value for each dollar spent by the University
- Demand honesty in sales representations and proposals, whether offered in verbal or written statements, advertisements, or product samples
- Make reasonable efforts to arrive at an equitable agreement that is in the best interest of the University when settling a controversy with a supplier; refer these matters, resolved and unresolved, to the supply chain services department
- Avoid activities that would give the appearance of preferential treatment toward any supplier
- Make all purchases through our online purchasing and procurement cards
- Make sure that all suppliers have completed the supplier onboarding process

The University of Miami Supply Chain Services and University Purchasing departments generally follow the National Association of Educational Procurement Code of Ethics in its relations with suppliers. You can visit the association’s website at www.naepnet.org.

Suppliers are expected to observe the following in their relations with the University:

- Conduct business in an atmosphere of good faith
- Be honest in representing the company’s products
- Report to the appropriate University compliance office or UHealth compliance office any solicitation or stipulation by a University employee seeking gifts, entertainment, favors, personal property, services, kickbacks, etc., for personal gain as a requirement for doing business with the University; failure of a supplier to report the solicitation ;or stipulation may result in termination of current contracts and orders as well as jeopardize future business with the University

Questions and answers

Q: Who is an approved supplier?

A: An approved supplier is a company that has registered on our supplier portal and has completed the supplier onboarding process, including satisfying the required insurance documentation. This information is verified and approved in the University’s supplier database. The completion of the onboarding process does not ensure that a purchase order will follow; rather, it implies that the supplier is eligible to do business with the University because it meets University requirements.

Q: How do I find an approved supplier?

A: The Supply Chain Services and Purchasing departments maintain a list of approved suppliers in the University’s Workday system. In the Workday search box, type the name of the supplier, or, to browse all suppliers, type “find suppliers.”

Q: What if a supplier is a member of my family?

A: As a general rule, the University does not do business with companies owned by its faculty, staff, or employees. You can, however, contact either the Supply Chain Services or University Purchasing offices for a review of the situation.

Q: A supplier asks what another supplier has bid or the price of its product or service. Can I tell one supplier another supplier’s bid or prices?

A: No. Supplier information and pricing is confidential and should not be discussed. The University is not required to disclose this information. Requests of this nature should be referred to the director of purchasing.

Q: A department needs equipment, supplies, or service. May I commit the University to purchasing the item or service from a certain company prior to obtaining the required bids?

A: No. Only the Supply Chain or Purchasing departments are authorized to commit the University in procurement matters. The University has set bid limits designed to keep the playing field fair. Supply Chain Services and Purchasing are available to assist you with the bidding process.

Q: My department has an immediate need for a piece of equipment that will enable research, classes, or business to continue. Should I place the order over the phone in order to expedite the delivery or service completion?

A: No. The University of Miami purchase order contains many terms and conditions that protect the University in case a dispute arises between the requisitioner and supplier. Without a purchase order, the University has no commitment to pay the bill, leaving the requisitioner potentially responsible for payment. Contact Supply Chain Services or Purchasing to protect both the University and yourself.

Q: A supplier wants to drop off a piece of equipment for my department to evaluate. Can I accept and use it?

A: Not without contacting Supply Chain Services or Purchasing for instructions. A special document is needed to cover the equipment while it is on campus.

Q: I received an agreement from a supplier for products I ordered. Can I sign this agreement?

A: No. All faculty and staff must adhere to the Contracts Process Policy. This policy establishes a framework for all types of contracts, review processes, signature authority, and other requirements before a contract may be executed on behalf of the University. The policy can be found at <https://umiami.policystat.com>.

Q: Can I sign an MOU with another university to do future collaboration?

A: No. Only those employees who have signature authority can execute MOU, contracts, agreements, and other instruments on behalf of the University. The Delegation of Contracting Approval and Signature Authority Policy, which can be found at <https://umiami.policystat.com>, establishes who has received delegated signature authority and is able to obligate the University with external parties.

EXPORT CONTROL

The University of Miami conducts focused research to advance knowledge, enhance student-learning experiences, and build its reputation in scientific and technical communities while providing positive returns on sponsoring partners' investments. While UM applies the principles of freedom of inquiry and open exchange of knowledge, we must also be mindful of the federal laws and regulations governing the exchange of research materials and results that are subject to export controls.

The Export Control Policy, which can be found at <https://umiami.policystat.com>, sets out the rules for interchange and interactions with foreign persons and entities within UM. This policy extends to all UM personnel retained by, or working at or for, UM who are required to conduct their affairs in accordance with U.S. export control laws and regulations. UM personnel must be familiar with the U.S. export control laws and regulations, including important exclusions and exemptions, as they relate to their responsibilities. UM personnel are accountable for safeguarding the items identified as export controlled, confidential, restricted, proprietary, or sensitive, whether classified or unclassified. It is the responsibility of each individual to be clear about all UM policies and exercise reasonable care in using and sharing export-controlled items and participating in activities where export controls apply.

Exporting is a privilege and it is of the utmost importance that UM deans, chairs, department administrators, faculty, principal investigators, researchers, and students adhere to the applicable federal regulations within the governing agencies for U.S. export control. For more information pertaining to UM export control compliance basics, visa applications, restricted party screening, procedures, forms, shipping, transportation, technology control plans, and international travel, please visit <https://www.ora.miami.edu/compliance/export-control-compliance/index.html>.

Questions and answers

Q: Who is a foreign person?

A: Any individual who is not a U.S. citizen, or is not a U.S. permanent resident alien (Green Card holder), or is not a protected individual (e.g., a refugee or person granted political asylum); and any foreign corporation/business/organization/group not incorporated or organized under U.S. law.

Q: What is an export?

A: An actual shipment or transmission out of the United States, including the sending or taking of an item out of the United States, in any manner. Exporting can also include verbal or written transmissions or communications (phone calls, emails, text messages, in-person conversations, visual observations, etc.) with persons located in other countries, even if the recipient is a U.S. person, or transmission or communications carried out in the United States, if the recipient is a foreign person.

Q: Where do UM employees find the most updated information pertaining to export control compliance?

A: By contacting the University export control officer or going to the Office of Research Administration's Export Control Compliance website at <https://www.ora.miami.edu/compliance/export-control-compliance/index.html>.

GIFTS AND ENTERTAINMENT

Gifts made to University faculty, staff, and employees may be in the form of entertainment, social invitations, sporting events, favors, personal property, services, food, or discounts. Gifts from vendors, contractors, or anyone conducting business with the University of Miami are usually offered as a gesture of goodwill or appreciation, often during the holiday season. Faculty, staff, and employees should be aware that these gifts may be given with the intent to influence a business decision and may create a conflict of interest. The person responsible for any business relationship has the obligation to handle gifts properly and in compliance with University policy.

For further information on this subject, please refer to the University policies available online at <https://umiami.policystat.com>, the University of Miami Health System policies available at <https://umhs-umhc.policystat.com>, and the Faculty Manual (<https://fs.miami.edu/faculty-manual/index.html>).

The association between the University's suppliers, vendors, or business partners and University employees should always be on a professional and business-like basis. Under no circumstances may University employees, during any 12-month period, accept gifts of more than "token" or "nominal" value from any supplier, vendor, or any individual or entity that has a business relationship with the Uni-

versity. Token or nominal value has been defined by the University as gifts less than \$75. While at times it may be difficult to quantify the cost of a gift, it is always important to consider the appearance of impropriety and unfair business practice. If you are unsure about the value or propriety of accepting a gift, you should immediately disclose the gift to your supervisor and seek his or her guidance on the appropriate action, which should be documented. The prohibition set forth in this paragraph also applies to individuals or entities that are actively seeking to become University suppliers, vendors, or parties to a business relationship with the University. To the extent that rejection of the gift would offend the giving party due to cultural norms, the employee may accept the gift but must turn it over to his or her department chair for donation to the University. No gift receipt will be issued to the employee for such a donation.

There are times when, during the course of business, it may be appropriate to conduct business during meals. In such instances, the meal should be for a specific business purpose. One should avoid frequent meals with the same supplier.

If you have any doubt or need help in determining if something is nominal or an appropriate business meal, please contact the executive director of purchasing at 305-284-5751 or sourcing.supplychain@miami.edu.

Questions and answers

Q: A vendor providing products or service to my department treats me to sporting events three or four times a year. Is this appropriate?

A: No. A one-time nominal or token gift of tickets is acceptable, but continued gifts would exceed prudent business practices. Since the value and repetitive nature of the gift is significant and could influence your business decisions, you should not accept future gifts/invitations.

Q: While attending a vendor presentation, I was offered some promotional items. Is this acceptable?

A: Yes. It is considered permissible to accept “giveaways” of promotional items such as pens, calendars, caps, and similar items that are offered by vendors at trade shows. In contrast, it should be an easy decision not to accept an item of substantial value, such as a TV, a \$50-dollar gift certificate, or a trip to Bermuda.

Q: A vendor working with the University has offered to let me stay at his vacation home (or company apartment) on Cape Cod for the weekend. Should I accept the invitation?

A: No. This gift would not be considered a token or nominal one. Acceptance would give the appearance of impropriety, and it would be poor business practice for you to accept this type of invitation.

GIFTS FROM UM TO THIRD PARTIES

The University, in fulfilling its mission of service, donates time and talents to organizations affiliated with the University. While the practice is not encouraged, donations of cash and other tangible assets may be appropriate under certain circumstances. Any gifts or donations to third parties must be approved by a vice president of the University, regardless of the amount or value of the donation. In addition, the gift or donation must be charged to a University unrestricted account.

Specifically, in regard to UHealth, there are statutes and regulations that prohibit the inducement of patients to seek services billable to the state and federal government health insurance programs. As a result of these specific risks, there are specific policies applicable to any UHealth faculty and staff regarding gifts to third parties, in particular patients. See the UHealth Cash and Non-Cash Patient Gift Policy for more details. You may find these applicable policies available online at <https://umiami.policystat.com>, and University of Miami Health System policies available at <https://umhs-umhc.policystat.com>.

MISUSE OF UNIVERSITY ASSETS

The University of Miami is committed to the highest standards of accountability and embraces a culture of honesty, ethics, and integrity in its operations. In that regard, University assets, such as cash, receivables, equipment, and buildings, must be properly safeguarded from loss and misuse. This responsibility rests with every employee, at all levels and in every department. All employees, regardless of position, have an affirmative duty to report known or suspected instances of fraud, theft, and corruption. Furthermore, University leaders are responsible for the design, development, implementation, and maintenance of an effective system of internal controls within their areas of responsibility and business function to ensure the detection and prevention of fraud.

Fraud is defined as “an act of deceiving or misrepresenting in order to secure unfair or unlawful gain.” Theft is “an act of appropriating dishonestly for one’s own use property entrusted to one’s care, which includes embezzlement or misappropriation.”

Fraud and theft have many different manifestations. Practices that may constitute fraud or theft include untruthful financial reporting; expense report falsification by submitting receipts that could result in double reimbursements, receipts for personal expenses, or receipts for expenses that were not incurred; dishonest or false workers compensation claims or insurance claims; kickbacks; bid rigging; misuse of University checks, credit cards, procurement cards, travel cards, or computers; misappropriation of cash; use of University equipment for personal purposes; and misuse of sponsored grant funds.

Fraud depletes the University and the department involved of vital resources. Every member of the University community, regardless of position, is expected to assist in preventing or identifying fraud.

If you are aware of or suspect fraud, theft, embezzlement, or misuse of University assets, you must immediately report the situation to your supervisor, chairperson, or dean, as well as to the chief audit and compliance officer (305-284-2605) or to the controller (305-284-4877). You may also call the University Hotline at 877-415-4357 or university-hotline.ethicspoint.com. The hotline is a confidential reporting line managed by a third-party vendor where you can make an anonymous and confidential report.

The University will not tolerate harassment, victimization, or retaliation against those who report fraud in good faith. Any reports involving intentional false or malicious allegations could lead to disciplinary action against the reporter.

Questions and answers

Q: What should I do if I notice that a coworker is ordering goods for personal use and charging them to a departmental account?

A: The misuse of University assets for personal gain is prohibited and constitutes fraud. You should report your suspicions to your supervisor, chairperson, or dean as well as to the Office of Audit and Advisory Services or the University controller for investigation and follow-up.

Q: I noticed a fellow employee submitting false receipts for business travel. What should I do?

A: Report it to your supervisor, chairperson, or dean as well as to the Office of Audit and Advisory Services or to the University controller for investigation and follow-up.

Q: I have a strong suspicion that fraudulent activity is taking place in my department. I would like to see it stopped but don't want to get involved. How do I proceed?

A: All honest allegations of fraud or embezzlement should be reported in order for University staff to investigate and correct the problem. The University encourages all faculty and staff to call the Office of Audit and Advisory Services when there is strong suspicion of wrongdoing; while the University prefers that complainants identify themselves, you may submit the information anonymously to the Office of Audit and Advisory Services or to the University Hotline at 877-415-4357.

PROPER ACCOUNTING

University of Miami faculty and staff must assume responsibility for safeguarding and preserving University assets and resources.

The following policy statements pertain to all University business activity and are applicable to all faculty and staff:

- All revenues generated by University activities and all expenditures for compensation, goods, and services must be recorded and the transactions accounted for in the University's approved financial systems.
- Workday Financials consists of the general ledger and many of the subsidiary systems for journals, operational accounting (including allocations), procurement, accounts payable, assets, banking, post-award research administration, expense re-imbursement, payroll, and human capital management. Workday integrates with many independent sub-systems (manual and automated) that serve as the basis for input to Workday. These subsystems include CaneLink, EPIC, Salesforce, Blackbaud, Service Now, Optifreight, Tidemark, and TMA, as well as online and paper transactions. All transactions, whether recorded directly into the general ledger or entered through a subsystem, should be recorded in a way that allows financial statements to be prepared in conformance with generally accepted accounting principles.

The University's associate vice president and controller is the primary person responsible for the maintenance and integrity of the University's financial records and statements and should be consulted on any matters relating to accounting policies and procedures. The University's associate vice president for budget and planning is the primary person responsible for budget and monitoring. Divisional chief financial officers must maintain a close business relationship with the associate vice president and controller and the associate vice president for budget and planning. This business relationship is further explained in the Liason Relationship with Divisional Chief Fiscal Officers Policy in the University policies available online at <https://umiami.policystat.com>, and University of Miami Health System policies available at <https://umhs-umhc.policystat.com>.

- All financial transactions must be timely and accurately recorded and must clearly identify the business nature of the transaction. Specific guidance pertaining to the timely posting of transactions for month-end is sent out via email in a monthly closing calendar. In addition, a fiscal year-end schedule is provided in a memorandum to all departments from the controller's office each spring.
- All transactions, whether recorded directly into the general ledger or indirectly from a subsystem, and any supporting documentation must be complete, accurate, and verifiable. Payments made on behalf of the University or reimbursements to faculty and staff must be made for the purpose described in the supporting documents.

- The use of University funds or assets for any unlawful or improper purpose is prohibited. For further guidance on the permissibility of particular expenses, please refer to the University policies available online at <https://umiami.policystat.com>, and University of Miami Health System policies available at <https://umhs-umhc.policystat.com>.
- Bank accounts are established when approved by the Board of Trustees. No unrecorded or undisclosed bank accounts can be established by individual schools, departments, units, or others acting on their behalf to fund, or to assist in funding, any University activity. Please refer to the University policies available online at <https://umiami.policystat.com>, and University of Miami Health System policies available at <https://umhs-umhc.policystat.com>. No checks payable to the University of Miami should be held in a faculty or staff member's desk, filing cabinet, or any other storage for any period of time. All checks must be transmitted promptly to the appropriate office on each campus responsible for depositing the checks. University procedure requires the use of the sponsored lock box bank account for all sponsored checks. Please see the research administration procedure at <https://www.ora.miami.edu/about-ora/Post-Award/default-folder/index.html>.
- Each program in Workday has been assigned to a responsible person. Every employee responsible for a program must:
 - » Ensure that monthly reports of account activity are reviewed to determine that all transactions are accurate and complete.
 - » Verify that all revenue entries are correct.
 - » Verify that all entries made to each program have been properly allocated, representing expenses for activities that pertain to the purpose of the program.
 - » Take appropriate and timely action to correct any improper charges to a program by generating correcting entries to the program and obtaining necessary approvals. The Office of the Controller, including general accounting, financial reporting, research administration, property accounting, and cost studies, can assist departmental personnel in correcting the errors.
 - » Ensure that all charges made to research administration are appropriate and allowable under the sponsor's regulations.
- Research administration awards are subject to various agency rules and regulations. Each responsible person should be familiar with the agency guidelines and the Office of Research Administration policies (<https://www.ora.miami.edu/policies/index.html>). The Office of Research Administration has the expertise to help you process transactions for sponsored accounts and should be consulted when necessary.
- Contracts (defined below) on behalf of the University must be signed by only those employees authorized to do so by the Board of Trustees. Those include the president, executive vice president for academic affairs and

provost, and executive vice president for business and finance and COO, as well as those employees whom the president and the executive vice president for business and finance and COO have designated to execute contracts on behalf of the University. For a current list of employees who have been given signature authority, please review the Delegation of Contracting Approval and Signature Authority Policy, which can be found at <https://umiami.policystat.com>. Employees not specifically listed in the policy do not have signature authority and may not execute any contract on behalf of the University. A contract is any legally enforceable agreement between two or more parties. A University contract is any agreement between the University (including any of its subunits such as schools, divisions, departments, centers, University employee, etc.) and another party, which is intended to have a legal effect, whether it is titled "contract" or an "agreement" or untitled. An agreement may be a binding contract even though one party provides something of value to the other party at no charge. A contract may involve a commitment of University funds, facilities, personnel, or other resources in the University's name, or it may be a commitment for the University to give up a right it otherwise may have. The Contracts Process Policy, which can be found at <https://umiami.policystat.com>, is to clarify contracting expectations, ensure the proper review and execution of contracts, and minimize the University's exposure. This policy establishes a framework for understanding the specific types of contracts, review processes, signature authority, and other requirements before a contract may be executed on behalf of the University.

- Only authorized University officers may dispose of assets, as covered in the Sale and Disposition of Equipment Policy available online at <https://umiami.policystat.com>, and University of Miami Health System policies available at <https://umhs-umhc.policystat.com>.
- Faculty and staff lack authority to dispose of equipment. University equipment valued at \$2,500 or more and no longer needed must be transferred to the Surplus Property Office for either redistribution to the University or sale. Please call surplus property at 305-243-9696 for proper procedures regarding disposal of all surplus property.

Questions and answers

Q: I am responsible for a program; however, time constraints prevent me from reviewing account activity in detail and on a timely basis. May I assign this task to a staff member?

A: Yes, it is acceptable to assign the task. You do, however, remain responsible for ensuring that the person is fully trained to perform the task, performs the task assigned on a timely basis, and informs you of errors or omissions so that you can take appropriate corrective action.

Q: I need to process a transaction to a sponsored account after the end date of the award. Is this permissible?

A: It is permissible as long as it is allowable and allocable to the award. The date of service must be before the end date of the award and the transaction is processed no later than 45 days (this could be earlier, depending on the award-specific terms) after the end of the award. The Office of Research Administration must complete a financial report and submit it to the sponsoring agency, in most cases, no later than 90 days after the end of the award.

Q: I have to correct an entry to a sponsored account. How much time do I have?

A: Government regulations allow 90 days to correct a transaction from the day it is processed in an approved University financial system. Sponsored transactions that must be corrected after 90 days require a written justification. The justification should provide a valid explanation as to why the correction is past the 90-day period and steps taken to ensure timely corrections going forward. Only valid justifications will be approved and processed by the research administration office.

Q: I received a sponsored program-related check in my office. What should I do?

A: Obtain the research administration lock box address and mail the check to this address. Inform ORA of the issue so that they can notify the sponsor that future checks must be sent to the lock box.

OWNERSHIP OF INNOVATIONS, CREATIONS, AND INTELLECTUAL PROPERTY

Although the University does not undertake research or developmental work principally for the purposes of commercialization, patentable inventions and other works with commercial application may result from activities carried out by applicable personnel. The University has an obligation to appropriately develop innovations to both benefit the public and generate resources that further support the academic mission of the University.

Applicable personnel: All full- and part-time faculty, staff, employees, students, fellows, and non-employees who use University funds, facilities, or other resources, or participate in University-administered research, including visiting faculty and industrial personnel, regardless of obligations to other companies or institutions.

Courseware: Course syllabi, assignments, assessments, and/or other materials that are first created and made available to students as part of the educational curriculum at the University.

Creations: Copyrightable works created in the course of applicable personnel's scholarly and artistic pursuits, including literary works, textbooks, other scholarly books, journal articles, novels, poems, plays, musical compositions, and other artis-

tic works to disseminate for scholarly study or artistic expression; a student work created using student dedicated resources, as part of the educational curriculum at the University, including Capstone projects, papers, dissertations, and articles.

Incidental use: Use of none of the University's resources other than its library, limited secretarial or administrative resources, the University's computers and/or applicable personnel's office space; use of University laboratories, clinics, and equipment may also be construed as an incidental use in accordance with written policies jointly developed by a school or college and the provost or his/her designee.

Innovations: Patentable or un-patentable inventions, discoveries, processes, compositions, research tools, data, ideas, databases, know-how, copyrightable works that are not scholarly or artistic creations, and tangible property, including biological organisms, engineering prototypes, drawings, and software created, conceived, or made by applicable personnel within their normal duties (including clinical duties), course of studies, field of research or scholarly expertise, or making more than incidental use of the University's resources.

Intellectual property: Patent applications and patents, copyright registrations and renewals, trade secrets and trademarks.

Consistent with long-standing academic tradition, creations are owned by the author(s), unless otherwise agreed in a contract between the University and applicable personnel, including:

- the University has expressly commissioned the applicable personnel in writing to produce, or participate in production of, the work with the University's funds for a specific University purpose;
- the University has expressly assigned the applicable personnel in writing to produce or participate in the production of the work; or
- the work is otherwise subject to contractual obligations.

Creations meeting one of the above criteria will be treated as innovations and shall be owned by the University.

Innovations are owned by the University:

- Applicable personnel are required to assign and hereby do assign to the University all innovations. This assignment includes the right for the University to claim priority and recover for third party infringement or misappropriation.
- This assignment and abiding by this policy are conditions of employment and continued employment, access to University resources and/or receipt of funding by the University.
- The UM Inventions, Intellectual Property, and Technology Transfer Policy, which can be found at <https://umiami.policystat.com>, governs in the event of any inconsistent obligation to which applicable personnel may agree, including in any consulting agreement.

Intellectual property made or developed with not more than incidental use of University resources and not within normal duties (including clinical duties), course of studies, field of research, and scholarly expertise of applicable personnel will belong to the applicable personnel. If applicable personnel are uncertain about the disposition of rights, they should make full disclosure of the potential innovation or creation to the Office of Technology Transfer (OTT) for determination of rights.

The complete policies governing disclosure and ownership rights of innovations, creations, and intellectual property can be found in the Faculty Manual and the research policy/guidelines handbook. (<https://umiami.policystat.com> and <https://fs.miami.edu/faculty-manual/index.html>)

Questions and answers

Q. What does it mean to “own” intellectual property?

A: Ownership means having the legal or rightful title to something. UM faculty and staff are required as set forth in the University of Miami IP Policy (<https://umiami.policystat.com>, Faculty Manual, and Office of Research Administration website) to assign their rights to certain types of IP to the University. Assigning is a condition of employment, having access to the University’s resources and/or receipt of funding by the University. If in doubt as to whether IP needs to be assigned, contact OTT.

Q. Who is required to submit invention disclosures?

A: Anyone who is bound by the UM Inventions, Intellectual Property and Technology Transfer Policy, which can be found at <https://umiami.policystat.com>, is required to submit an invention disclosure for any inventions created in whole or part in relation to their job description at UM. This includes all UM faculty, staff (full and part-time), graduate students, and postdocs. Undergraduates may be subject to the IP policy on a case-by-case basis. When in doubt, contact OTT.

Q. When do I need to disclose a new invention?

A: Ideally, as soon as you have the invention moved beyond a mere idea and into practice. This does not mean that you have a working prototype, but do have something, such as a diagram and/or a description of what the invention is and how it works. In any event, file the invention disclosure at least three months before any publication or presentation. Please feel free to contact OTT if you have any questions about whether the invention is ready to be disclosed.

Q. What are the benefits of submitting an invention disclosure?

A: There are many benefits to submitting an invention disclosure: 1) You will be eligible to receive a share of any revenue generated from the invention; 2) The University may front any legal fees for patenting or other protection of the intellectual property (these can be significant and run into the tens or hundreds of thousands of dollars); and 3) Assistance from the Office of Technology Transfer in finding ways to market and commercialize your invention.

UNIVERSITY COMPLIANCE

Within higher education, universities are subject to a vast number of laws and rules that they must follow and comply with, whether they involve teaching, operations, or research, as well other areas that involve athletics, privacy and information security, discrimination, Title IX, international activities, and more. This is not just limited to federal and state laws and regulations. Compliance for a higher education institution also means following relevant case law, accreditation standards, and an institution’s own internal rules, policies, and procedures, and even contractual obligations of the institution as a result of agreements codified into contract, and employment contracts.

The University’s trustees and leadership are committed to having in place an effective and transparent compliance program to not only ensure that we comply with the laws, regulations, and policies that apply to our institution, but that we do so with the highest standards of ethical conduct and dedication in order to maintain the University’s prestigious reputation as a leading institution in academics and research.

The University has established the Office of University Compliance Services (UCS) to coordinate ongoing compliance activity efforts and to assess University performance. Those efforts are predicated on the requirements of Chapter 8 of the United States Sentencing Commission guidelines for an effective compliance program.

The chief audit and compliance officer and the executive director of UCS coordinate numerous existing compliance initiatives and further provides guidance on the University’s compliance activities. They work with various institutional offices throughout the University to provide support in several areas, such as:

- Promoting a culture of compliance and ethics;
- Coordinating compliance efforts and information, including reporting requirements, filings, and certifications to external agencies;
- Centralizing University policies and procedures, assisting in identifying gaps in University policies and operations, and aiding the appropriate offices with efforts to address deficiencies;
- Assisting various units in the University with providing appropriate training in the relevant areas of compliance;
- Reviewing changes in external laws and regulations and supporting efforts to respond to those changes;
- Establishing means to periodically assess compliance risks and other risks to the University; and
- Ensuring that any violations are addressed by appropriate corrective action.

UM expects members of the community to inform the appropriate contacts on campus if they have observed unethical, illegal, or suspicious activity. Those who have concerns regarding possible noncompliance with federal, state, or local laws and regulation in addition to University policies are expected to report these issues promptly. UM prohibits any retaliation against individuals who report or seek guidance on possible ethical or compliance issues in good faith.

Concerns may be reported anonymously, 24 hours a day, seven days a week, through the University Hotline at 877-415-4357 or online at **university-hotline.ethicspoint.com**. For more information, you may access the Office of University Compliance Services website at **compliance.miami.edu**, or call 305-284-4636.

UHEALTH COMPLIANCE

Together, the University of Miami Miller School of Medicine, University of Miami Medical Group, University of Miami Hospitals and Clinics, Sylvester Comprehensive Cancer Center, and Bascom-Palmer Ambulatory Surgery Centers in Palm Beach Gardens and Naples, comprise the University of Miami Health System (UHealth). The aforementioned components of UHealth are governed by very specific regulations, many of which apply only to health care providers. As a result, practices considered acceptable in other industries are often prohibited in health care; thus, a seemingly innocuous practice that violates policy might lead to significant penalties and sanctions regardless of a provider's good intent. UHealth is committed to conducting its affairs in accordance with all such governing federal, state, and local laws and, to that end, has adopted policies designed to protect the patients we serve and ensure we abide with applicable regulations as we pursue our mission to be a state-of-the-art academic medical center.

The purpose of the UHealth Compliance Program is to support UHealth's mission, vision, and core values and to help the institution fulfill its responsibilities to its patients and the community by promoting an environment that values ethical behavior and compliance with applicable laws. To that end, the UHealth compliance program supports all UHealth faculty and employees by providing accurate, concise, and up-to-date information and advice so individuals are aware of their compliance responsibilities and may seek guidance and assistance as necessary to effectively address compliance-related concerns. The UHealth compliance program is intended to foster an environment of open communication by educating employees of their obligation to abide by the rules and policies governing the institution and to promote ethical behavior by reporting known or suspected instances of noncompliance. It is the policy of the University of Miami and UHealth that individuals who, in good faith, report suspected noncompliance or wrongdoing, or who cooperate in investigations into compliance concerns, will be protected from retaliation or retribution related to such reporting or cooperation. In addition, the UHealth Compliance program continually assesses the effectiveness and quality of the program and monitors and reports on the organization's perfor-

mance relative to its regulatory responsibilities to ensure that all UHealth business is conducted ethically, with integrity, and in compliance with the law.

For more information, please contact **ComplianceHelp@med.miami.edu**.

Professionalism, ethics, and compliance

The University of Miami Health System has implemented a compliance program based on an institutional commitment to professional ethics and corresponding values of transparency, veracity, and accountability. It is shaped by guidance published by the U.S. Department of Health and Human Services and the Office of the Inspector General, as well as federal sentencing guidelines.

Adherence to UHealth's compliance plan will be considered when evaluating the performance of all employees, regardless of position. UHealth has designated a chief compliance officer of health affairs who reports directly to the executive vice president for health affairs and CEO of UHealth. In addition, UHealth has chartered an executive-level compliance committee to advise and assist the chief compliance officer of health affairs in implementing its compliance program. The UHealth compliance department provides mandatory training on the prevention of fraud, waste, and abuse for newly hired employees. Annual refresher sessions are required for existing employees. UHealth compliance also provides training on coding, billing, and documentation to support health care claims and a variety of topics regarding health care regulation.

To solve a problem, you must first identify it; thus, all UHealth employees are encouraged and expected as a matter of professionalism to report suspected or known instances of noncompliance through appropriate channels. UHealth encourages a culture of transparency and has developed nonretaliation policies to protect employees who make such reports in good faith.

When potential noncompliance within UHealth is identified, UHealth compliance investigates the matter to determine whether noncompliance has occurred. When concerns are substantiated by credible evidence, UHealth takes steps to remedy any harm arising from such noncompliance. Such corrective measures might include refunds of erroneously received reimbursement, process revisions, re-education of employees, implementation of additional controls, etc. Finally, and consistent with guidance published by the U.S. Office of Inspector General, UHealth leadership will hold individuals accountable for non-compliant behavior and will discipline employees accordingly for violations of internal compliance policies, as well as violations of relevant state and federal laws and regulations.

All UHealth faculty, employees, students, and others working on behalf of UHealth are expected to fully support the UHealth compliance program and to abide by all laws, standards, and policies, governing UHealth and the University of Miami. Employees and faculty may report any activity they believe to be in violation of University policies regarding coding and billing, as well as other regulatory concerns, to the chief compliance officer of health affairs, by contacting the UHealth

compliance office at 305-243-5842 or compliancehelp@med.miami.edu. Concerns also may be reported anonymously, 24 hours a day, seven days a week, through the University Hotline at 877-415-4357 or online at [university-hotline.ethicspoint.com](https://umiami.policystat.com). For more information, you may access the University Compliance Services website at compliance.miami.edu, or call 305-284-4636.

FRAUD AND ABUSE LAWS AND WHISTLEBLOWER PROTECTION

The University of Miami requires all faculty and staff to report all known or suspected violations of the False Claims Act (FCA). The FCA imposes liability on any person who (i) knowingly presents (or causes to be presented) a false or fraudulent claim for payment or approval, or (ii) knowingly makes or uses (or causes to be made or used) a false record or statement to get a false or fraudulent claim approved or to avoid or decrease an obligation to pay or transmit money or property to the government. Examples of violations of the FCA are submission of a claim to Medicare for payment for services not rendered, falsification of a time and effort report in connection with a claim for reimbursement from government grant, or claims submitted to a government payor pursuant to an arrangement that is in violation of the Physician Self-Referral Law (the Stark Law) or the Federal Anti-Kickback Statute. There are significant monetary penalties for violating the FCA. The FCA provides that, in addition to the government, private parties may bring an action on behalf of the United States as a qui tam relator and may share in the proceeds of the settlement. The FCA also allows a relator to recover fees and expenses incurred in bringing the action. The FCA provides protection to qui tam relators who are retaliated against for bringing an action under the FCA.

Individuals who are part of UHealth are subject to various federal and state fraud and abuse laws, including the Federal Anti-Kickback Statute and the Stark Law. UHealth and its employees are committed to full compliance with all applicable federal and state fraud and abuse laws.

The University does not allow retaliation against persons reporting such known or suspected violations—sometimes referred to as whistleblowers—for making such reports in good faith. See the Whistleblower Protection Statement found at <https://umiami.policystat.com>.

Report any known or suspected violation of the FCA to the appropriate supervisor, department head or chair, or Office of University Compliance Services. Concerns also may be reported anonymously, 24 hours a day, seven days a week, through the University Hotline at 877-415-4357 or online at university-hotline.ethicspoint.com.

All persons making reports of compliance concerns are assured that such reports will be treated as confidential to the extent permitted by law. Such reports will be shared with others only on a bona fide need-to-know basis. The University pro-

hibits retaliation and will take no adverse action against persons who make such reports in good faith, even if the report turns out not to be correct. Any faculty or staff member who believes that he or she has been subjected to or affected by retaliatory conduct for reporting a suspected violation of the FCA or for refusing to engage in activity that would be a violation of the FCA should report such retaliation to the University compliance officer.

USE OF ELECTRONIC COMMUNICATION RESOURCES

Access to electronic communication resources such as computers, information systems, or electronic services, including email and networks, owned by the University is considered a privilege. This privilege imposes certain responsibilities and obligations, which when granted, are subject to University policies and procedures and government regulations. University trustees, officers, faculty, students, staff, alumni, contractors, vendors, guests, consultants, volunteers, and temporary employees (collectively known as users) who use these resources on or off campus must follow and comply with all applicable policies, procedures, and rules governing that use.

Proper use of electronic communication resources involves those activities that support the University's academic, contractual, and operational needs while providing a respectful, safe, and ethical environment. The purpose of this policy is to define the expectations for users' behavior and use, and to assure the appropriate and authorized use of the University's electronic communication resources.

Users who have access to electronic communication resources must follow all relevant and applicable security policies, procedures, standards, and guidelines to:

- Ensure that access to protected data and information owned and/or used by the University is provided only to those authorized and authenticated users who have a right to view and use such data.
- Understand and abide by the rights and protection given student information; health information; financial information; and human, health, and science research information that may contain personally identifiable information and is classified as confidential and protected according to all applicable government and industry regulations and UM policies and procedures. Unauthorized disclosure may violate government regulations and UM policies and procedures, which may result in criminal charges that could result in monetary fines and imprisonment as well as University sanctions and consequences from failure to adhere to policies and procedures.
- Understand and acknowledge all applicable policies and procedures by signing a computer access authorization form.

- Demonstrate responsible use, care, and protection of usernames, passwords, and multifactor security authentication.

Appropriate use of University electronic communication resources involves those activities that support the needs of the University. University electronic communication resources are limited, and access to them is a privilege granted by the University.

The following uses of University electronic communication resources are violations of the use of electronic communication resources policy:

1. Intentional destruction, damage, or theft of University electronic communication, including:
 - i. Intentionally using a program designed to damage or render unusable an electronic communication resource (e.g., malware, denial of service attacks)
 - ii. Intentional circumvention of system security configurations, protocols, and mechanisms
 - iii. Theft of University electronic communication resources
 - iv. Monitoring, tampering with, misdirecting, modifying, or destroying University electronic communication resources, information, or data in violation of applicable law or regulations
2. Illegal use of University electronic communication resources, including:
 - i. Exercising, without permission or legal authority such as ownership or fair use, one or more of the exclusive rights granted to the copyright owner under section 106 of the Copyright Act (Title 17 of the United States Code)
 - ii. Violation of the U.S. Digital Millennium Copyright Act
 - iii. Violation of the Family Education Rights Privacy Act
 - iv. Violation of the Gramm-Leach-Bliley Act
 - v. Violation of the Health Insurance Portability Accountability Act
3. Use or circumvention of University electronic communication resources that would prevent or limit rightful use by users:
 - i. Applying for, creating, and using a fraudulent CaneID
 - ii. Obtaining and using a CaneID and password that is not assigned to the user
 - iii. Sharing the user's CaneID and password
 - iv. Obtaining unauthorized access to any University electronic communication resources
 - v. Giving an unauthorized person access to a University-owned or University-licensed commercial software, database, or service in violation of the license or terms of use
 - vi. Use of University electronic communication resources that would be in violation of the terms included in federal, state, and private grants and contracts awarded to the University community

- vii. Using University electronic communication resources for private profit in violation of University Conflict of Interest Policy or other applicable University employment manuals or employment contracts, which can be found at <https://umiami.policystat.com>.

4. Divulging protected data to unauthorized third parties as defined by the Data Classification policy (<https://umiami.policystat.com>); users who divulge such information to third parties are solely responsible for the actions of those third parties
5. Using University electronic communication resources to intentionally harass or threaten an individual

It is neither University policy nor practice to routinely examine files or file transmissions maintained on University electronic communication resources. When required to protect University electronic communication resources, the rights and/or property of the University or associated third parties, or to ensure compliance with University policy and applicable law, files and transmission of files may be subject to monitoring or examination. University officials, such as the general counsel's office, human resources or faculty affairs, in the ordinary course of their employment, and based on legitimate business purposes and the underlying circumstances of each case, will provide approval and guidance for such monitoring and examinations. Only University authorized employees or vendors, as determined by the general counsel's office and human resources will conduct requested and approved monitoring and examination of files. In such cases, the individual whose file(s) or communications contents are reviewed shall be notified after such review has taken place. Users must cooperate fully with any search conducted by the University for any lawful purpose, including internal audits.

The information technology policies listed below, along with other IT policies, are published on the UMIT website at <https://umiami.policystat.com> and should be used for reference and guidance.

- Acceptable Use of Info Tech Resources by Students
- Access Control User Account Management
- Computer Access and Confidentiality Policy
- Data Classification Policy
- Information Security Policy
- Mobile Computing Device Policy
- Password Security Policy
- Remote Access Policy
- Software Copyright Protection Policy
- Use of Electronic Communications
- Use of University Computing Facilities

Review additional policies that support the proper use of electronic communication in the Human Resources section of the University policies, available online at <https://umiami.policystat.com>, and University of Miami Health System policies available at <https://umhs-umhc.policystat.com>.

WEB AND DIGITAL COMMUNICATIONS

The purpose of the University Web Content Policy, which can be found at <https://umiami.policystat.com>, is to establish the rights and responsibilities for content contributors publishing content to University of Miami websites and other platforms, such as mobile applications and digital signs. It also establishes the governance authority for managing marketing, communications, and brand standards for University websites, mobile applications, and other web-based publications.

The University's Web Content Policy extends to all content found on any web-accessible address containing the third-level domain "miami.edu" or "umiami.edu."

The policy includes all content on any other domains registered by the University of Miami (its organizational areas, faculty, staff, students, or administrators) and that presents official University of Miami content.

The policy includes any content published by the University of Miami (its organizational areas, faculty, staff, students, or administrators) engaged in an official partnership, endorsement, or contractual agreement between the University of Miami or its constituencies and any other organization, legal entity, group, or individual.

The web content policy can also be found at miami.edu/webpolicy.

The policy includes guidelines for:

- Governance
- Registration of web properties
- Acceptable use
- Accessibility
- Advertising and sponsorship
- Branding
- Commercial use of web content
- Customer relationship management
- Copyright and trademarks
- Digital asset management and marketing tools
- E-commerce, fundraising, and revenue-generating content
- Bulk email

- Legal disclosures
- Search engine optimization
- Social media and social networks
- Web content management and strategy

Questions and answers

Q: Does the University of Miami have official policies for websites and web content?

A: Yes. The policies are detailed in the University's web content policy, available at <https://umiami.policystat.com>.

Q: Who is responsible for developing and maintaining official web policies?

A: It is the responsibility of the University's Office of University Communications to govern and enforce the effective and proper use of registered trademarks, copyrights, and official branding and organizational messaging on content consumed via the web.

Q: Is personal web content allowed on the University's web pages?

A: The University and its site owners are not required to support the hosting, development, or management of personal (unofficial) web content and may restrict the publishing of personal web content on its properties and domains. Content which would typically be interpreted as "personal" may be used anecdotally to support research; courses or teaching material; and/or academic, research, and intellectual pursuits. This content is, however, subject to any other applicable rules, regulations, laws, and University policy. Although not required to support services for the development of personal web content, areas may elect to allow links to personal web content outside of the University of Miami's network. The decision to allow this kind of content is the responsibility of individual site owners.

Q: I would like to follow the steps to publish a web page. Where can I submit a request for a web page?

A: All website names and locations must be registered with the Division of University Communications prior to hosting or publishing live content. Log unreported websites at <https://www.miami.edu/web-audit>. The web team is responsible for managing an easy registration process and a comprehensive system of all registered websites, website names, and website content support members. All properties and their respective domain names are subject to review and approval. Submit domain name requests for approval to webmaster@miami.edu.

COPYRIGHT INFRINGEMENT

It is the University of Miami's policy to respect third party copyrights and to duplicate or reproduce copyrighted materials owned by third parties only as allowed by law or by contractual agreement. All members of the University community are expected to comply with the copyright laws of the United States and with the University's policies with respect to copyrights.

Copyright is a form of protection that the law provides to the creators of "original works of authorship...fixed in any tangible medium of expression," both published and unpublished.

The legal doctrine of "fair use" attempts to address the educational needs of scholars and students by permitting the use of copyrighted material in certain circumstances. The fair use doctrine allows reproduction of copyrighted material for the limited purpose of criticism, comment, scholarship, teaching, or research. Considerations for determining whether a use of copyrighted material constitutes fair use include the following:

- Purpose and character of use (including whether the use is for nonprofit educational purposes, as opposed to commercial in nature)
- Nature of the copyrighted material
- Amount and substantiality of the portion used in relation to the copyrighted work as a whole
- Effect of the use on the value of or commercial market for the work

The scope of the fair use doctrine is not always easy to ascertain. One should never assume that obtaining permission from the copyright owner is unnecessary. The Office of Business Services assists members of the University community in addressing issues which may arise from the use of copyrighted material in the context of the University's research, teaching, and service mission.

The University is a complex organization with a multitude of programs geared toward the creation and dissemination of new knowledge. Our activities in pursuit of or within those programs may raise questions about the relationship of copyrighted material to the University's research, teaching, and service mission. The University's objective is to facilitate a constructive relationship between our academic mission and our legal responsibilities. For further information on this subject, please call the Office of Business Services.

Questions and answers

Q: Are there any circumstances when I can use a copyrighted material without obtaining permission from the copyright owner?

A: There are indeed instances in which copyrighted materials may be used without the permission of the copyright owner. Certain categories of photocopying are

permitted under the fair use doctrine without permission. For example, according to the Federal Copyright Act of 1976, permission is not required for the following reproductions:

- Making single or limited page copies for personal or scholarly use, or for library reserve designation
- Materials not under copyright protection (for example, most U.S. government documents and materials whose copyright has expired)
- Making multiple copies for classroom use, as long as reproduction of the copyrighted materials meets the requisite standards for brevity, spontaneity, and cumulative effect

Ultimately, each situation must be evaluated individually.

Q: Do exceptions to the copyright laws exist with regard to reproduction of software?

A: The only general exception regarding software concerns the user's right to make a backup copy for archival purposes. See Software Copyright policy, which can be found at <https://umiami.policystat.com>.

Q: Am I allowed to use copyrighted video in my teachings?

A: Many of the rights that are set forth in the United States Copyright Act, including the doctrine of fair use, apply to use of video in classroom instruction.

Q: Do I need permission to play music at events or as background music?

A: Yes. Copyright laws require music user to get permission from songwriters and composers. The University has music licenses with SESAC, ASCAP, and BMI, which provides unlimited access to expansive catalogue to millions of songs.

Q: Other than as permitted under the fair use doctrine, am I allowed to use copyrighted material in my classroom?

A: United States copyright law permits teachers and students to make certain uses of copyrighted material in a face-to-face classroom setting. As a teacher or student, you are allowed to perform or display a copyrighted material without permission from the copyright owner, provided that display or performance of the copyrighted material is done: (1) in a classroom "or similar place devoted to instruction," (2) in person during face-to-face teaching, and (3) at a nonprofit educational institution (such as the University of Miami). This exemption does not apply outside the context of in-person, classroom teaching at a nonprofit educational institution, such as in the context of distance learning. Additionally, if the copyrighted material is a motion picture or other type of video, or music, you must use a copy of the material that was lawfully made.

FACULTY CONSULTING

Many eligible faculty exercise their option to engage in consulting as outlined in their contracts and the Faculty Manual. Clinical faculty at the Miller School may engage in consulting activities only as described in the University of Miami Medical Group policies, which can be found at <https://umiami.policystat.com>. (See Conflict of Interest, Conflict of Commitment, Foreign Influence, and Institutional Conflict of Interest Policy).

For faculty engaged in consulting, business conduct issues usually arise in three main areas: (1) financial gains from outside consulting on the subject matter that is the substance of a grant or contract sponsored through the University by a corporation or business entity; (2) ownership of intellectual property; and (3) conflict of interest.

In the first area, faculty should avoid the perception of scientific misconduct that may result when “good” outcomes produce monetary rewards. Outside observers would be suspicious of data that is connected to a financial incentive.

In the second area, the University’s employment agreement provides for University ownership of certain intellectual property produced by its faculty and staff. See the ownership of intellectual property policy in this handbook and the University patent and copyright policy to determine whether a faculty member will own the relevant intellectual property and thus be able to transfer that ownership to an outside entity.

Issues regarding the third area are more fully discussed in the section on conflict of interest in this handbook. For more information on this subject, please refer to the Faculty Manual (<https://fs.miami.edu/faculty-manual/index.html>); the Office of Technology Transfer; the Conflict of Commitment, Foreign Influence, and Institutional Conflict of Interest Policy; and related policies in the University policies available online at <https://umiami.policystat.com>, and University of Miami Health System policies available at <https://umhs-umhc.policystat.com>.

Questions and answers

Q: I am a faculty member and part of the University of Miami Medical Group. Can I perform consulting services for a pharmaceutical company?

A: Generally, yes, with the appropriate approvals, disclosures, and applicable limitations per University policy. Consulting that involves marketing or promotional activities is strictly prohibited.

Q: Can I sign a consulting agreement or contract that gives ownership of patentable property (inventions, discoveries, know-how, designs, patentable software, or processes) that is developed during the course of my consulting to the company hiring me?

A: No. This is prohibited since it violates your employment agreement with the

University. According to the Faculty Manual and the patent and copyright policy, the University automatically owns all patentable intellectual property that you develop during your employment in your particular field of research or teaching, regardless of where or when the property is created.

Q: I work as a consultant for a pharmaceutical company. Can I use University of Miami laboratories, diagnostic equipment, and administrative staff for my consulting services?

A: No. University space, equipment, facilities, staff, or assets shall not be used in connection with private consulting.

HUMAN SUBJECTS RESEARCH

The University of Miami is an international leader in research. Experiments in medicine, nursing, behavioral science, public health, and other disciplines generally require that people—often our patients—be asked to participate. Such research is a privilege, one that is justified when faculty, trainees, and students take care to ensure that the research follows applicable federal and state laws and, equally important, an evolving ethical standard of care.

This means that research subjects must generally be fully informed about studies in which they are being asked to participate, that they are able to understand and appreciate that information, and that their agreement to participate is voluntary. Moreover, when the University involves humans in research the University must ensure:

- The risk is reasonable in relation to any expected benefits when the research study exposes subjects to risk;
- The data collected about individuals are kept confidential;
- Data are analyzed with integrity and without bias resulting from conflicts of interest, and when faculty and students analyze the data they must do so with integrity and without (unmanaged) conflicts of interest; and
- Proposed research is consistent with all applicable requirements, including federal regulations, state law, AAHRPP accreditation standards and University policy.

These requirements are the result of both an international history of past abuses and a growing recognition that investigators have a moral duty to ensure that research volunteers are protected. At the University of Miami, as elsewhere, human subjects research is overseen by an official entity (at UM, the Human Subjects Research Office (HSRO); <https://hsro.uresearch.miami.edu/index.html>) and a suite of Institutional Review Boards (IRBs). The HSRO provides institutional and administrative oversight, and the IRBs (the University’s IRBs—comprising faculty peers and community members—or external IRBs) see to it that research participants provide informed consent, that their personal information is protected, that the risks they face are acceptable, and so on.

IRBs must make a number of judgment calls regarding individual studies, and this requires that members of these boards receive adequate research ethics education.

All research involving humans must be approved by an IRB or found to be exempt. Questions about what constitutes research and whether any special rules apply (as for children) must be addressed in advance by the HSRO/IRB.

Questions and answers

Q: I only want to review records of past clinic visits. Do all the patients who visited the clinic need explicitly to consent to my review?

A: Not necessarily. Some research may be conducted without individual consent/authorization, as long as certain conditions are met.

Q: Do I need IRB approval to review these records?

A: Yes. While IRBs may waive consent/authorization in certain cases, the research proposal itself must be submitted first to the IRB, and the waiver must be justified.

Q: I have residual blood samples in my lab. Surely, I can analyze these samples without IRB review, right?

A: Probably. However, if the samples include any information that could directly or indirectly identify the patient or former research subject, or if you know the identity of the individual from whom the sample was obtained, you must obtain IRB approval. Likewise, if the research involves genetic or genomic analysis, it may raise tricky questions regarding consent, the interests of family members, and questions related to future disclosure of research findings. Consequently, IRB review is required.

Q: I've heard that certain populations are regarded as "vulnerable" and are entitled to additional institutional protection. Is this true?

A: Yes. Children, adults who are unable to personally consent, students enrolled in their professor's study, employees enrolled in a study conducted by their supervisor, economically disadvantaged individuals and others are regarded as vulnerable to coercion or undue influence. Study designs must take this into account, and IRBs must make sure that adequate precautions are taken to protect members of such populations.

Q: May I use an IRB that is external to the University?

A: Yes, but only if federal regulations require the investigator to use an external IRB or when the sponsor requires the investigator to use an external IRB as a condition of conducting the study.

RESEARCH MISCONDUCT

The University's research integrity officer has the responsibility to investigate allegations of research misconduct. Administration of this responsibility is handled by the Office of Research Integrity within the Office of the Vice Provost for Research and Scholarship. According to the Faculty Manual, research misconduct is defined as "fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results. [It] does not include honest error or differences of opinion."

As a general rule, allegations of research misconduct should be reported to the vice provost for research and scholarship (the research integrity officer), who will perform an assessment to determine if an inquiry is warranted. Others who receive allegations of research misconduct should immediately forward them to the vice provost for research and scholarship. University policy provides for an initial inquiry of the allegation by tenured faculty members, selected from a standing body of qualified individuals, to determine whether 1) the allegation falls within the definition of research misconduct, and 2) preliminary information-gathering indicates that the allegation may have substance. The faculty conducting the inquiry must either recommend a formal investigation or determine that a formal investigation is not warranted. In the latter situation, the faculty must document reasons in support of its determination.

Allegations of misconduct are kept confidential to the extent possible, unless disclosure is required because of immediate health hazards, an immediate need to protect the interests of persons making the allegations or the interests of the accused, or the likelihood that the alleged incident will be reported publicly.

The University, adopting generally accepted procedures, "will use diligent efforts to restore the reputations of persons alleged to have engaged in misconduct when allegations are not confirmed, as well as to protect the positions or reputations of those persons who make allegations in good faith."

Additional information and the complete policy can be found in the academic matters section of the Faculty Manual (<https://fs.miami.edu/faculty-manual/index.html>).

Questions and answers

Q: I am a research technician and I think the person I work for is falsifying data. What should I do?

A: Discuss the matter with your chairperson or a trusted colleague to decide whether this needs to be reported. Another option is to contact the vice provost for research and scholarship directly, or to use the University Hotline.

Q: I am a faculty member and have a dispute regarding authorship with another faculty member. Is this research misconduct?

A: Whether or not an authorship dispute constitutes research misconduct depends on the facts. If you cannot resolve the matter with the other faculty member, the issue should be discussed with your chairperson or the vice provost for research and scholarship.

Q: I am concerned about the behavior of one of my research collaborators, but his actions do not seem to fall within the definition of research misconduct. Should I just forget about it?

A: According to a 2017 National Academies report on research integrity, “detrimental research practices” that are not research misconduct can and should be identified and remediated. Your concerns should be discussed with your chairperson or dean or the vice provost for research and scholarship.

CONFIDENTIALITY AND PRIVACY

The University of Miami is committed to the appropriate protection of confidential and private information. Members of the University of Miami community such as officers, faculty, students, workforce members, alumni, contractors, vendors, guests, consultants, volunteers, and temporary employees are creators of or have access to various types of sensitive, confidential, personal, and proprietary information. Sensitive, confidential, personal, and proprietary information includes but is not limited to personally identifiable information, business information, financial information, operational information, inventions, patents, trade secrets, and other classified or restricted information. The University prohibits the unauthorized seeking, disclosing, or selling of such information, including but not limited to confidential and personal information contained in health care records, student educational records, and employment records. It is expected that each member of the University of Miami community will comply with all applicable federal, state, and international regulations and laws, contractual obligations, and University policies and principles pertaining to the use, protection, and disclosure of such information. The obligation to preserve confidential and private information continues even after one's employment and/or relationship with the University ends.

Confidential and private data: Many aspects of University activities involve confidential, private, and proprietary information related to the varied constituencies served, such as patients, students, vendors, colleagues, alumni, donors, business partners, and others. All members of the University of Miami community are required to safeguard the private and confidential nature of the information acquired as part of their work, duties, and/or relationship with the University of Miami. Respect for the privacy of all records containing personally identifiable information, whether student, workforce member, trustee, faculty, donor, alumni, volunteer, or patient should be a priority for all members of the community.

All data should be disclosed only as required by law and strictly on a need-to-know basis to carry out University or department missions. All use of technology assets and computing devices, access to systems, and distribution of information must be restricted and safeguarded as confidential except as necessary to perform assigned tasks. University employees are expected to follow document preservation and retention guidelines and maintain data security using electronic and physical safeguards.

Any questions regarding confidentiality should be brought to the attention of one's supervisor, dean, or vice president, or the human resources, privacy and data security, or general counsel offices.

Electronic networks must not be abused or shared without written approval of supervisors. For more information, refer to the information technology section of this handbook.

Corporations/Research: We receive an ever-increasing amount of financial support from corporations that are eager to collaborate with universities. Corporate representatives directly contact faculty members, research administrators, technology transfer officers, and others. When a corporation receives information from the University, it may have obtained knowledge of great value that it can use to its economic advantage.

Our knowledge is the University's greatest asset and most valuable exchange medium. In general, funding sources award funds in exchange for knowledge. Therefore, please consult with the technology transfer, general counsel, or research administration offices before disclosing confidential information to corporate representatives. These University offices can help you determine whether information is confidential. When in doubt, the safe approach is to ask the appropriate corporate representative to sign our standard confidentiality agreement, which can be found in the Technology Transfer Guide for Faculty or on the UM Innovation-Technology Transfer website. (<https://innovation.miami.edu>) or at <https://umiami.policystat.com>.

Patient health records: The privacy of a patient's health records is secured by state and federal laws, notably the Health Insurance Portability and Accountability Act. The University of Miami's Office of Privacy and Data Security is responsible for assuring compliance with these laws and the associated regulations for all health information kept by University of Miami Hospitals and Clinics. For information, please visit <https://umiamihealth.org/privacy-office>.

Questions and answers

Q: I handle departmental budgets. Some employees have asked if I can let them know in advance what their merit increase will be. Can I do this?

A: All budget and personnel data are to be disclosed to employees only by their authorized supervisors at the appropriate time designated by department heads.

Q: Can student grades or disciplinary issues be released to University personnel?

A: Both the Buckley Amendment and University policy treat these types of information as confidential. Such information may not be released without following appropriate guidelines. FERPA provides that such information can be released to other school officials deemed to have a legitimate educational interest. Check with your department chairperson for instructions.

Q: Can I share my email access code with a friend?

A: Access codes and data are confidential and must not be shared.

Q: What is confidential information with respect to research data?

A: In general, this is information or knowledge that can be used to enable a third party to reproduce proprietary (novel and unique) results. This does not apply to public knowledge that has already been disclosed in a patent, publication, or presentation.

Q: Will my contacts be offended if I ask them to sign a confidentiality agreement? Will they think that I don't trust them?

A: No. This is common and accepted practice that parties use to protect themselves.

USE OF THE UNIVERSITY OF MIAMI NAME, SEAL, AND LOGO

The University of Miami name, seal, symbols, slogans, and logo associated with, and used by, the University are registered marks exclusively owned by the University.

Visual Identity Policy: The Office of University Communications is responsible for the University's visual identity and for ensuring that it is preserved and enhanced through effective, well-designed communications. It manages and monitors the use of the system and makes system graphics available to the University community and other authorized parties. The University of Miami visual identity manual provides specific guidelines and standards for all forms of University communication.

Use of University marks on commercial goods: The University requires all departments, individuals, organizations, and companies, both internal and external, to obtain prior approval before producing any product that will display University marks, regardless of the method of distribution. These marks may not be used in any medium, other than approved University programs, without the approval of the assistant vice president for business services or his or her designees. Schools, departments, or student groups wishing to use the University's marks on commercial goods (e.g., T-shirts, cups, pens, etc.) also must secure such approval. All manufacturers that produce goods bearing any of the University's

trademarks must either be licensed or have received special permission from the University's Department of Auxiliary Services to produce such products without a formal license agreement.

Any questions regarding the use of the University name, seal, or logo should be referred to the assistant vice president for business services.

For further information, please refer to the Business Services area of the University policies available online at <https://umiami.policystat.com>, the University of Miami Health System policies available at <https://umhs-umhc.policystat.com>, and the University's Visual Identity Manual (https://ucomm.miami.edu/_assets/pdf/tools-and-resources/umiami-visual-identity-guide.pdf).

Questions and answers

Q: A local youth sports organization wants to use our logo on their uniforms. Is this permitted?

A: No. The use of our name or logo is licensed. The licensing fees paid by the vendors give them rights to use the University name or logos, and the value of that right might be diminished if other groups are allowed to use the logo. Permission for uses like this may be granted only by the assistant vice president for business services.

Q: Can we use University of Miami official stationery for private correspondence?

A: No. Only official University of Miami business may be transacted using this stationery.

Q: A local company wants to use the ibis logo in an advertisement. Is this allowed?

A: No. Endorsements by the use of our logos are not permitted.

Q: Who can or should become licensed?

A: All manufacturers that produce goods bearing any of the University's trademarks must either be licensed or have received special permission to produce such products without a formal license agreement. Manufacturers producing goods with the University's marks for sale to a University department or an officially recognized student group are not required to pay royalties on the goods sold to the University's department or student groups but are required to be licensed. If the department or student group sells or distributes the goods with all proceeds used to benefit the University, no royalties are due. In order to do this, both the manufacturer and the University's department or student group must first obtain permission prior to the production of any product bearing the University's marks.

Q: Is anyone exempt from royalties?

A: Sales of items bearing the University's marks to University departments and authorized student groups are exempt from the royalty charge if all proceeds from the department or student group selling these insignia goods are used to benefit the University. For a department or student group to obtain royalty exemption, requests must be submitted for prior written approval to the Department of Auxiliary Services and presented to the manufacturer prior to their production of the goods.

Q: Why regulate the use of UM's marks?

A: The licensing program strives to regulate, promote, and protect the commercial use of the University's name and identifying marks, both on and off campus. The University of Miami benefits from public recognition of our images, and when properly managed, these images provide the critical unifying look that establishes a strong visual presence. The look then becomes identified with the quality of UM's programs, products, and services and distinguishes our programs from those at other universities. Royalties collected from licensed merchandise are returned to the University to help support University programs and services.

WORKING TOGETHER

Cultural diversity: In today's workplace, there is a constant need to align business objectives with the goal of retaining and developing a diverse workforce. Business leaders in today's culturally dynamic environment must harness the wealth of such human diversity. Employees from different racial and ethnic backgrounds make cultural diversity a critical issue and an undeniable resource for all enterprises. The University of Miami is no exception. The road ahead is challenging and exciting as we come to understand the vast array of values and backgrounds in our workforce and maximize their potential. The University is committed to working with diverse cultures and accepting each as a vital link in the University's mission.

Our goal: The University's goal is to provide equal opportunity through all of its educational programs and activities as well as through recruitment, employment, promotion, and retention of individuals at all levels within the University's employment structure without regard to race, color, religion, sex (including pregnancy), sexual orientation, gender identity, genetic information, national origin, age, disability, marital status, familial status, or other protected classification. This goal is affirmed in the Equal Opportunity Policy of the University (<https://umiami.policystat.com>).

Sexual harassment protection: Sexual harassment in employment or educational programs and activities is not tolerated by the University. Sexual harassment includes, but is not limited to, physical or verbal abuse of a sexual nature, including graphic commentaries about an individual's body, sexually degrading remarks used to describe an individual, or unwelcome propositions and physical advances

of a sexual nature. Sexual harassment also includes the threat or insinuation that the lack of sexual submission will be used as a basis for employment or educational decisions affecting or interfering with an individual's employment, academic standing, other conditions of employment, or academic or career development. The sexual harassment definition, policy, and grievance procedures are addressed in the University's Sexual Misconduct and Sex- or Gender- Based Discrimination Policy (<https://umiami.policystat.com>).

Consensual relationships: Consensual relationships within the workplace give the appearance of a compromising conflict of interest, favoritism, or bias. In order to ensure fairness and minimize conflicts of interest in the work environment, University policies provide guidelines for the reporting and management of relationships where one party has supervisory responsibility or authority over another, as well as any influence in the terms, conditions, or privileges of employment; or an educational program or activity. Please refer to the University's Nepotism/Consensual Relationships Policy (<https://umiami.policystat.com>).

Drug-free workplace: Consistent with the provisions of the Drug-Free Workplace Act, the unlawful manufacturing, distribution, dispensation, possession, or use of a controlled substance is prohibited in the University's workplace. Violations will subject the employee to disciplinary action. The University's commitment to a drug-free environment is embodied in its Drug and Alcohol Policy.

Information: Employees who have questions or complaints relating to these policies are encouraged to discuss them with their immediate supervisor or contact their Human Resources partner.

USEFUL ADDRESSES AND PHONE NUMBERS

All University phone numbers utilize a 305 area code.

UM/UHealth Policies and Procedures

University policies available online at umiami.policystat.com, and University of Miami Health System policies are available at umhs-umhc.policystat.com

Audit and Advisory Services

Gables One Tower, suite 1160
1501 Building
internal-audit-services.miami.edu

Coral Gables Campus	284-2605
Medical Campus	243-6589

Report fraud, embezzlement, internal theft, and misappropriations

Office of the Controller

Gables One Tower, suite 150
controller.miami.edu

Controller	284-4877
General Accounting	284-4244
Financial Reporting	284-4352
Cost Studies	284-5902
Property Accounting	284-4658

Questions and information regarding accounting, correction of errors, misuse of University assets

Office of Research Administration

Gables One Tower, suite 650
ora.miami.edu

All Campuses	284-3871
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Workplace Equity and Inclusion

Gables One Tower, suite 355
Coral Gables Campus
hr.miami.edu/about-hr/service-areas/about-wei

All Campuses	284-3064
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UHealth Compliance: Office of Regulatory and Billing Compliance

1501 NW 9th Ave., 4th floor, Miami, FL 33136
umiamihealth.org/en/uhealth-compliance

Medical Campus	243-5842
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Questions regarding regulatory compliance; physician, hospital, and research billing compliance

University Compliance Services

Gables One Tower, suite 700
compliance.miami.edu

	284-4636
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Questions about University compliance and ethics

Office of Technology Transfer

Converge Building, suite 300
innovation.miami.edu

Medical Campus	243-5689
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Questions regarding patents, copyrights, intellectual property, licensing intellectual property

Purchasing

Gables One Tower, suite 400
purchasing.miami.edu

Coral Gables Campus	284-5751
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Questions regarding supplier relations/fair trade, future or existing contracts

Supply Chain Services

Gables One Tower, 8th Floor
umiamihealth.org/en/supply-chain

Medical Campus	243-4996
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Questions regarding supplier relations/fair trade, future or existing contracts

Business Services

Gables One Tower, suite 1230
business-services.miami.edu

Coral Gables Campus	284-5550
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Questions regarding all University non-sponsored contracts, licensing use of University name, seal, and logo

Office of the Vice Provost for Research and Scholarship

Gables One Tower, suite 650
research.miami.edu

All Campuses	243-1790
UDisclose helpline	243-0877

Questions regarding conflicts of interest or scientific misconduct

University of Miami Ethics Programs and University of Miami Institute for Bioethics and Health Policy

Dominion Tower, suite 916
ethics.miami.edu

Medical Campus	243-5723
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Questions regarding research, clinical, business, and academic ethics

UHealth Finance and Accounting

9675 NW 117th Avenue, Suite 310, Medley, Florida 33178

Medical Campus	243-9000
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University of Miami Health System

Human Resources

Gables One Tower
hr.miami.edu

Coral Gables and Marine Campuses	284-3798
Medical Campus	243-6106

Questions and information about government regulations and compliance with human resources issues (e.g., sexual harassment)

University Hotline

877-415-4357

All concerns regarding ethics, integrity, conflicts of interest, sexual harassment, scientific misconduct, fraud, embezzlement, misappropriations, violations of drug-free workplace, discrimination, and adherence to federal laws and regulations and University policies.



This handbook was originally developed in 1998 for the University of Miami community by a committee of faculty and staff.

The handbook was revised in 2018/2019 and 2021/2022.

The Business Conduct and Ethical Standards Handbook is also available on the **[University of Miami Compliance Website](#)**.