4-6-2009

Faculty Senate Agenda, April 6, 2009

Utah State University

FACULTY SENATE
April 6, 2009
3:00 – 4:30 p.m.
Merrill-Cazier Library Room 154

Agenda

3:00 **Call to Order**
Approval of minutes March 2, 2009……Mike Parent

3:05 **Announcements**……Mike Parent
- Roll Call
- Next year's Faculty Senate Calendar
- Senate and Senate Committee Elections

3:10 **University Business**……..Stan Albrecht, President
Raymond Coward, Provost

3:30 **Consent Agenda**
- PRPC Annual Report…….....Scott Cannon
- Policy Changes associated with USU's Human Research Protection Program…….Russ Price
- EPC Items……Larry Smith

3:40 **Information Items**
- Honorary Degrees and Awards……Sydney Peterson
- Commencement……..Sydney Peterson

4:00 **New Business**
Nominations for Faculty Senate President Elect……Mike Parent

4:20 **Adjournment**……...Mike Parent

USU FACULTY SENATE
MINUTES
MARCH 2, 2009
Merrill-Cazier Library, Room 154

Mike Parent called the meeting to order at 3:00 p.m.

Approval of Minutes

John Kras moved to approve the minutes of February 2, 2009. Byron Burnham seconded, motion carried.

Announcements

1. **Roll Call.** Senators are reminded to sign the roll at each meeting.

2. **Time Table for Electing Senate President.** By code the President-Elect is elected from the floor at the April Senate meeting by ballot and reported to the senate by the May meeting. The May meeting is really held at the end of April. We will entertain nominations from the floor at the next Faculty Senate meeting. There are some restrictions as to who is eligible. A nominee should have completed one year on the senate, those who are in their final term of their commitment are not eligible.

3. **Committee Elections.** The Committee on Committees is responsible for informing college deans and their administrative assistants about the election for various committees and also members to the Faculty Senate. Elections should be held during the month of March and results presented to the Senate in April. Refer to section 402.10.2 of the code if you have any questions.

University Business - President Albrecht

The final 2009 FY budget came in at another $171 million below appropriations. The legislature decided to cover the shortfall using one time monies. For the university it means a 4% reduction taken last September, plus the January 7.3% reduction with 3.625% backfill. Moving forward there is an 11.3% ongoing reduction for the FY 2010 already in place with a possibility of additional cuts up to 17.5%. There may be money coming to the university from the economic stimulus package and a combination of other sources. Notice has been sent out to the Deans about how the major federal agencies have received additional funding as part of the stimulus package. President Albrecht urges Deans and all departments to utilize these increased opportunities.

There are two other important bills the legislature is considering that will impact Utah State University. First, House Bill 364 includes additional boarder waivers for student recruiting and also a legacy component which would allow children of USU alumni to attend USU at in state tuition rates. This bill passed the House unanimously but still must pass the Senate.

Secondly, House Bill 432 gives temporary authority to College and University Presidents to shift funds between line items in addressing the budget reductions. This would give us a little more flexibility in addressing budget issues.

President Albrecht met with several alumni and donors in Palm Springs recently. The common theme among the donors is that they love Utah State and want to continue funding their scholarships and programs but given the economy it will be more difficult to meet their commitments to us.

Provost Coward updated the Senate on the Vice President of Student Services search. The search committee has made a recommendation to bring in 4 candidates and the president has approved them. They will begin their campus visits after spring break.

Consent Agenda Items

John Kras moved to approve the Consent Agenda, Vince Wickwar second, and the motion carried.

Information Items

ASUSU Tobacco Policy. Jeremy Jennings presented the proposed tobacco policy. Last year the students supported a total ban of tobacco use on campus. The total ban was rejected by the administration and they requested the policy be revised. The current proposal includes an expansion of the clean air act, the 25 foot barrier to include "in courtyards or other areas where air circulation may be impeded by architectural landscaping or barriers, such as but not limited to the TSC patio and bus stop enclosures". Also addressed is the sale of tobacco on campus and also group gatherings and tobacco advertising.

The proposal has been presented to CEA and PEA. The question was raised how selling tobacco on campus harms non-smokers. Jeremy said that the smokers he spoke with were not concerned about this. It is available elsewhere at more reasonable prices and they do not need it sold on campus.

Concerns were raised about international students and cultural differences with smoking. Also discussed were questions if smoking on the patio infringes on nonsmokers rights. Lengthy discussion continued on issues surrounding the proposed tobacco policy.

Mike Parent clarified that the Senate has an opportunity to provide feedback on this issue, but it is not a part of code that the Senate has the authority to change. Provost Coward confirmed that this is an administrative decision. A vote would be welcome to obtain a sense of the faculty but would not be binding in policy.

A motion was made and seconded that a straw poll be taken on the proposed revision to show a sense of the Senate for support of the proposal. Votes were made by show of hands and counted with 21 in favor of supporting the motion and 24 opposing. Motion failed.

ASUSU Excused Absence Policy. Jeremy Jennings presented the proposed changes to the Excused Absence Policy, adding a provision for students who are interviewing for professional school, graduate school or internships and the second modification addresses the University Ambassador program.

John Kras moved to accept the proposal as a package; it was seconded by Nat Frazier. Motion carried.

Key Issues and Action Items

PRPC Grievance Policies and Procedures 407.1.2. Scott Canon presented the second reading of the revision to section 407.1.2. The current revision includes language that the calendar may be suspended by the chair. At the last FSEC meeting Provost Coward pointed out possible inconsistencies with this language and PRPC was asked to review this and make suggestions to clarify the issue. PRPC suggests that the statement "suspension of the calendar by the chair" be stricken and limit this specifically to sections 407.4 and 407.6 and specify that

any suspension of the calendar is by majority vote of the Academic Freedom and Tenure Committee.

A **substitute motion** was made by Pat Lambert to modify the amendment to read the calendar may be suspended by a majority vote of the panel appointed by the AFT Committee. Several seconds were received and the motion carried. This passes as a second reading.

A motion was made and seconded for PRPC to look at the level 2 changes of section 406 of the code. Motion carried.

Adjournment

The meeting adjourned at 4:01 p.m.

PRPC Annual Report to the Faculty Senate Executive Committee

15-Mar-09

Scott Cannon, chair

CHARGE: The Professional Responsibilities and Procedures Committee advises the Faculty Senate regarding revision and implementation of policy, and the composition and revision of the Faculty Handbook.

Committee Members

Scott Cannon (10) Chair, Science
David Hole (09) Agriculture
David Paper (10) Business
Susan Turner (10) Ed & Human Services
John Engler (10) HASS
Robert Schmidt (09) Natural Resources
Bob Parson (11) Libraries
Margie Memmott (11) Extension
Brett Shelton (09) Senate
James Evans (09) Senate
Paul Wheeler (09) Engineering

Meetings

12-Mar-08
9-Apr-08
10-Sep-08
8-Oct-08
12-Nov-08
10-Dec-08
14-Jan-09
11-Feb-09

Completed Actions	**Code section**	**date**	**disposition**
	407.1.2, 407.6, version G	Mar, 2009	passed by Senate
Simplification of the Academic Due Process calendar and clarification of the calendar suspension policy			
	202	Feb, 2009	passed by Senate
Review and editing of suggested policy changes proposed by the Ad-Hoc Code Review Committee			
	402.11.1, 402,12.6	Dec, 2009	passed by Senate
Discontinuation of the Distance and Electronic Education Subcommittee			
	405.7.2, version B	Sep, 2008	passed by Senate
Tenure Process: The inclusion of a list of potential reviewers that a candidate does not want contacted.			
	403.3.3, 407.6.2	Sep, 2008	passed by Senate
LGBT Inclusive Policy Change (FDDE Committee): PRPC was charged to draft language, as proposed by the FDDE			
	407.6.2	Sep, 2008	passed by Senate
Scheduling Grievances and Sanctions. Modification of grievance and sanction timelines.			
Actions under consideration	406		Under PRPC consideration
Review and editing of suggested policy changes proposed by the Ad-Hoc Code Review Committee			

20 February 2009

ITEM FOR ACTION

RE: Amendment of USU Policy #307, "Conflicts of Interest"

Concomitant with the efforts to accredit USU's Human Research Protection Program (HRPP), the USU Office of Compliance Assistance requests an administrative amendment of the existing Conflicts of Interest Policy to meet specific requirements of the accrediting body.

EXECUTIVE SUMMARY

One of the standards for accreditation of the HRPP, established by the Association for the Accreditation of Human Research Protection Programs (AAHRPP), requires that:

> "The Organization has and follows written policies and procedures to identify, manage, and minimize individual conflicts of interest of investigators. *The Organization works with the IRB regarding conflicts of interest, when appropriate.*" (emphasis added).

Based on this standard, AAHRPP has recommended additional language be added to the procedures section of the existing policy as follows:

> "When a disclosed conflict of interest involves human research, the Conflict of Interest Committee shall review the conflict prior to USU's Institutional Review Board (IRB) review, and provide a timely report to the IRB indicating the Committee's action concerning the conflict and its management. The IRB shall have final authority to decide whether the conflicting interests and their proposed management will allow the human research to be approved."

This language is in keeping with USU's intent to coordinate COI administration with HRPP activities, and places no additional burden on the research community.

RECOMMENDATION

The President and Vice President for Research recommend that the Board of Trustees approve the requested administrative change to USU Policy #307, "Conflicts of Interest."

RESOLUTION
UTAH STATE UNIVERSITY
BOARD OF TRUSTEES

WHEREAS, Utah State University has applied for accreditation of its Human Research Protection Program by the Association for the Accreditation of Human Research Protection Programs (hereinafter, AAHRPP); and

WHEREAS, AAHRPP requires that "the Organization works with the IRB regarding conflicts of interest, when appropriate," and has suggested specific appropriate language modifications to the existing USU Policy #307, "Conflicts of Interest;" that will ensure appropriate coordination; and

WHEREAS, it is USU's intent to strengthen its policies and procedures in managing conflicts of interest and also in protecting human participants in USU research:

NOW, THEREFORE, BE IT RESOLVED, that the Utah State University Board of Trustees hereby approves the proposal from the Office of Compliance Assistance to amend Policy #307, "Conflicts of Interest," as presented.

POLICY MANUAL

GENERAL

Number 307
Subject: Conflicts of Interest
Date of Origin: January 24, 1997
Effective Date of Last Revision: January 24, 2003

307.1 INTRODUCTION AND DEFINITIONS

For the purposes of this policy, a conflict of interest exists when a University employee owes a professional obligation to the University, which is or can be compromised by the pursuit of outside interests. Types of conflicts of interest that may exist include:

- Financial conflict - for example, an employee has a financial interest in a company that is funding research in his/her lab.
- Conflict of commitment - for example, an employee has committed more than 100% effort to a range of projects.
- Conflict of allegiance - for example, an employee's personal interests may create a bias in his/her discharge of University duties.

The purposes of this policy are to:

(1) Enhance the integrity of institutional research;

(2) Enhance the quality of the institution's educational program;

(3) Enhance the viability of the institution's outreach mission, especially as it relates to information diffusion and technology development and commercialization;

(4) Prevent a conflict of interest from harming the University and/or the employee.

307.2 POLICY

University employees shall not realize personal gain in any form which improperly influences the conduct of their University duties. They shall not knowingly use University property, funds, position, or power for personal or political gain, nor engage in any financial or personal activity which may disadvantage the University. They shall report in writing all reasonably foreseeable conflicts.

This policy does not intend to deny any employee opportunities available to all other citizens of the state to acquire private economic or other interests so long as this does not interfere with the full and faithful discharge of his/her University duties or disadvantage the University in any manner. Conflicts of interest are not necessarily unwarranted, unethical or illegal, nor are they always avoidable. Rather, it is the failure to disclose conflicts or potential conflicts to appropriate authorities; to comply with approved conflict management plans; to continue to engage in a conflict after disapproval by appropriate authorities; or to further conduct oneself in a manner that unethically hurts, hinders, or disadvantages the University that must be avoided. Potential conflicts of interest must be disclosed and managed as per policy.

References:

- Utah Code 67-16-1 et. seq. ,"Utah Public Officers and Employees' Ethics Act"
- Title 42 of the Code of Federal Regulations, Part 50.601 et.seq., "Subpart F--Responsibility of Applicants for Promoting Objectivity in Research for Which PHS Funding Is Sought." http://ori.dhhs.gov/html/policies/fedreg42cfr50.asp
- National Science Foundation Grant Policy Manual (95-26) Section 510, "Conflict of Interest Policies" http://www.nsf.gov/pubs/2002/nsf02151/gpm02_151.pdf
- USU Policy 403.3.3(2) Academic Freedom and Professional Responsibility, Standards of Conduct
- USU Policy 327 Intellectual Property and Creative Works

307.3 PROCEDURES

3.1 Internal Disclosure of Conflicts of Interest

All conflicts of interest shall be disclosed to an employee's line supervisor through:

(1) Annually disclosing that an employee does or does not have a conflict of interest.

(2) Event-driven disclosures made upon proposing or conducting work that will create a conflict of interest, disclosing the nature of the conflict and the expected duration of the conflict.**3.2 Managing Conflicts of Interest**

Every conflict of interest shall be appropriately managed by the University according to a conflict management plan to be prepared by the employee and the employee's immediate

supervisor, and/or a University compliance officer if available, and approved by the immediate supervisor (if not involved in preparation of the management plan), the dean or vice president (as appropriate), the Conflicts of Interest Committee, and the Provost or an authorized designee of the Provost. Management plans shall be appropriate to the conflict of interest, and may employ management approaches including the following:

(1) Avoidance.

(2) Public Disclosure. This approach should be used, for example, where human subjects will be involved in research conducted by an investigator who has a financial interest in the company sponsoring the research (or licensing a technology in which the investigator has a financial interest). In such cases, the informed consent form (as administered through the Institutional Review Board) shall disclose the financial interest to the participants, and any publication of study results shall disclose such financial interest.

(3) Balance. Diverse interest groups (including non-University third parties) are included in oversight of the project.

(4) Mediation. Such mediation may include oversight by the immediate supervisor, the dean or vice president (as appropriate), or a committee appointed by the immediate supervisor. In no case shall an investigator have direct financial oversight of a project sponsored by an organization in which he/she has a financial interest, nor shall any employee under the direct control of the investigator have financial oversight.

(5) Abstention. The investigator does not participate in the project as a University employee, but acts only in his/her role in the sponsoring organization.

(6) Divestiture. The employee removes the conflict by forfeiting his/her interest in the sponsoring organization/licensee. In such cases, the employee permanently or for a specified period of time shall not resume a financial interest in the sponsoring organization or receive other forms of compensation from the company.

(7) Prohibition. The employee permanently withdraws from the secondary interests.

(8) No action required.

3.3 University Oversight of Conflicts of Interest

A Conflicts of Interest Committee shall be appointed by the University President to oversee the implementation of this policy. The Committee shall consist of the Provost or an authorized designee of the Provost (Committee Chair); representatives from the Office of the Vice President for Research, the Institutional Review Board, the Faculty Senate, the Office of Technology Management and Commercialization; a member external to the University; and any others deemed appropriate. The University compliance officer shall

serve as an ex-officio member of the Committee. The Committee shall meet on a regular basis to review all disclosed conflicts of interest, shall review for approval all conflict of interest management plans, and shall monitor all active plans on a regular basis.

When a disclosed conflict of interest involves human research, the Conflict of Interest Committee shall review the conflict prior to USU's Institutional Review Board (IRB) review, and provide a timely report to the IRB, indicating the Committee's action concerning the conflict and its management. The IRB shall have final authority to decide whether the conflicting interests and their proposed management will allow the human research to be approved.

20 February 2009

ITEM FOR ACTION

RE: Amendment of USU Policy #308, "Human Participant in Research"

Concomitant with the efforts to accredit USU's Human Research Protection Program (HRPP), the USU Office of Compliance Assistance requests administrative amendments of the existing Human Participants in Research Policy to meet specific requirements of the accrediting body.

EXECUTIVE SUMMARY

Standards for accreditation of the HRPP, established by the Association for the Accreditation of Human Research Protection Programs (AAHRPP), and interaction with AAHRPP personnel have identified administrative changes within nine sections to strengthen USU's primary policy guiding research with human participants. Among these, administrative changes to the following sections are recommended, (as included in Attachment A):

- Section 3 (line 31), indicating that no official of the university can approve research that has been prohibited by the IRB;
- Section 4.3(3), specifying in more detail informed consent requirements imposed by existing regulations;
- Section 4.5, specifying additional records to be retained by the IRB;
- Section 4.8, providing guidance on steps to be taken when evaluating allegations of non-compliance;
- Section 4.11, providing additional guidance on reporting of unanticipated problems
- Section 6, adding specific prohibitions on certain recruiting practices.

All proposed changes are consistent with current USU practice, and will more effectively communicate USU's expectations with regard to human research protection procedures at USU.

RECOMMENDATION

The President and Vice President for Research recommend that the Board of Trustees approve the requested administrative change to USU Policy #308, "Human Participants in Research."

RESOLUTION
UTAH STATE UNIVERSITY
BOARD OF TRUSTEES

WHEREAS, Utah State University has applied for accreditation of its Human Research Protection Program by the Association for the Accreditation of Human Research Protection Programs (hereinafter, AAHRPP); and

WHEREAS, AAHRPP has suggested specific appropriate language modifications to the existing USU Policy #308, "Human Participants in Research;" that more clearly delineate USU expectations with regard to some aspects of the conduct of human research; and

WHEREAS, it is USU's intent to strengthen its policies and procedures in protecting human participants in USU research:

NOW, THEREFORE, BE IT RESOLVED, that the Utah State University Board of Trustees hereby approves the proposal from the Office of Compliance Assistance to amend Policy #308, "Human Participants in Research," as presented.

ATTACHMENT A
LISTING OF SPECIFIC MODIFICATIONS TO POLICY #308, "HUMAN PARTICIPANTS IN RESEARCH"

Key:

Normal text:	Indicates existing language to be retained
~~Strikethrough text~~:	Indicates language to be removed
Highlighted text:	Indicates language to be added

SECTION 2

…The requirement for IRB review and approval applies to all Human Research involving USU Investigators or Human Participants in all locations, whether funded or not, and whether conducted by faculty, students or other employees... No such study shall begin before it has been approved by the IRB. No other official of the university may approve human research that has not been approved by the IRB.

SECTION 3.1

Principles that IRB members consider during their reviews are set forth in the *IRB ~~Protocol Review Standards~~* document ~~(available at: http://www.usu.edu/research/irb/forms/IRB%20Protocol%20Review%20Standards%203-19-03.pdf)~~ *Review Checklist* document (available at: http://irb.usu.edu/htm/guidelines) current at the time of application.

SECTION 3.2.2

If the IRB administrator finds that a protocol involves no more than Minimal Risk, expedited review may be conducted by ~~the IRB administrator and~~ a limited number of experienced board members ~~with~~ who possess expertise in the Research activity being conducted.

SECTION 3.3.3

Informed Consent Form – This document must conform to the requirements of the IRB Standard operating Procedures…and be approved for use in the study by the IRB. It contains the following elements as required under 45 CFR 46.116: …

A description of reasonably foreseeable risks or discomforts

A description of reasonably foreseeable benefits to participants and others …

…Contact information for:

- Answers to pertinent questions about the research
- Answers to pertinent questions about the research participants' rights
- Reporting of research related injuries or harms

The research team (if not provided above) for questions concerns or complaints

Someone independent of the research team for problems, concerns, questions, information or input.

A statement explaining that participation is voluntary and that there is no penalty ~~for withdrawal~~ or loss of benefit to which the participant was entitled if the participant withdraws or refuses to participate.

When appropriate:

The consequences of a participant's decision to withdraw from the research

An approximate number of participants involved in the study.

SECTION 3.6.2

The IRB shall retain for at least three years (or for protocols which are cancelled without participant enrollment, for at least a three-year period after cancellation) the following records in accordance with 45 CFR 45 Section 115:

Minutes of IRB meetings

Protocols

Scientific evaluations

DHHS-approved sample consent documents and protocols, when they exist.

Reports of injuries to participants

Records of continuing review activities, including Continuing Review Status Reports submitted to the investigator

Other progress reports submitted by investigators

Statements of significant new findings provided to participants

For initial and continuing review of research by expedited procedure:

The specific permissible category

A description of action taken by the reviewer

Any findings required under regulations

For exemption determinations, the specific category of exemption

Unless documented in the IRB minutes, determinations required by the regulations and protocol-specific findings supporting those determinations for:

- Waiver or alteration of the consent process
- Research involving pregnant women, fetuses and neonates
- Research involving prisoners
- Research involving children

For each protocol's initial and continuing review, the frequency for the next continuing review.

Copies of all correspondence between the IRB and Investigators

A list of IRB members (to be maintained continuously)

The Standard Operating Procedures of the IRB (to be maintained continuously)

SECTION 3.9

Allegations and findings of non-compliance. Non-compliance, for the purposes of this policy, shall be the failure to follow the regulations or the requirements and determinations of the IRB. Incidents of non-compliance shall be handled by the IRB unless the nature or duration of non-compliance indicates the need for institutional intervention.

Non-compliant activities may be identified through IRB oversight, self-reporting, or reporting from employees, Human Participants or others. Allegations of non-compliance may be presented to the IRB administrator, the Federal Compliance Manager at the OCA, USU's Internal Audit Services (IAS) either through the hotline or with a representative of IAS, or to University Counsel. Reports of allegations should be made to the chair of the IRB, and any report of non-compliant behavior involving Research under the oversight of the IRB shall be reported to the IRB chair at the earliest opportunity….

The IRB Chair shall determine whether non-compliance is serious or continuing. Upon making a finding of non-compliance that is neither serious nor continuing, the IRB Chair shall take steps to correct the non-compliant behavior with the investigator….

…In conjunction with USU's Responsible Institutional Official (RIO) and others, the OCA receives and processes allegations of misconduct and non-compliance arising from Research activities of the university, and facilitates any associated inquiries and investigations. Information about and contacts for the OCA are available at: http://www.usu.edu/aia/academic/c_overview.cfm. Following investigation by the OCA, serious or continuing non-compliance is reviewed by the convened IRB. The Federal Compliance Manager, an ex officio member of the IRB, presents the findings if the investigation. All members of the IRB receive a copy of the initial application, the protocol, information describing the non-compliance, and the results of the OCA investigation. The IRB may consider actions including

Suspension of the research
Termination of the research, and

Notification of current participants when such information may relate to a participant's willingness to continue to take part on the research

Increasing frequency of continuing review.

SECTION 3.10

~~Adverse events and u~~ Unanticipated problems. Investigators shall follow the procedures contained in the IRB Standard Operating Procedures, Chapter 9.j ~~and IRB Handbook~~ whenever an ~~adverse event or another~~ unanticipated problem arises having to do with risks to Human Participants or others. The P.I. shall have responsibility for identifying and reporting unanticipated risks as set forth in SOPs, Chapter 4.f, submitting information to the chair of the IRB in sufficient detail for the chair to draft the report as required in 3.12, below, and otherwise as required by the SOPs. If the ~~adverse event or~~ unanticipated risk is life-threatening, emergency services shall be summoned and all reasonable steps shall be taken to ensure the safety and well-being of the Participants or any others affected. …

SECTION 3.12

Reports of unanticipated problems involving risks to participants or others, terminations, suspensions and serious or continuing non-compliance shall be submitted to federal agencies in compliance with applicable regulations. The IO shall ensure that all required reporting is completed within 15 business days….

The ~~c~~IRB Chair shall submit the draft report in a timely manner to the OCA and the RIO for review. The RIO shall have responsibility for final approval and signature of the report, and for its submission to the appropriate agency. Copies of the reports shall be distributed to the IRB, OHRP when the research is covered by DHHS regulations, and other federal agencies when research is overseen by those agencies and such agencies require reporting separate from that to OHRP….

SECTION 3.14 (New Section)

Recruitment prohibitions. The following activities shall not be permitted:

Payments to professionals in exchange for referrals of potential participants ("finder's fees"),

Payments designed to accelerate recruitment that are tied to the rate of timing of enrollment (bonus payments).

POLICY MANUAL

PERSONNEL POLICIES

Number 308
Subject: Human Participants in Research
Effective Date: June 1, 2007

308.1 PURPOSE

The purpose of this policy is to govern the involvement of human participants in the conduct of research at Utah State University. The University is committed to safeguarding the rights and welfare of human participants, and complies with the regulations of the U.S. federal government and the State of Utah.

308.2 DEFINITIONS

2.1 Research

For the purposes of this policy, research is defined in harmony with 45 Code of Federal Regulations (CFR) 46 as a systematic investigation, including research development, testing and evaluation designed to develop or contribute to generalizable knowledge.

For the purpose of this policy, generalizable knowledge is any result of research that is intended to be extended (or generalized) beyond the population or program being investigated. Such extension shall include public disclosure of such results either in public settings, through publication of a thesis or dissertation, or through other dissemination or publication.

The USU Institutional Review Board (IRB) shall have the sole responsibility, through interaction with the Principal Investigator (PI) and review as set forth in this policy, to determine whether an investigation to be conducted constitutes research in accordance with 45 CFR 46, as illustrated in Decision Chart #1, published as guidance by the Office of Human Research Protections (OHRP), available at: http://www.hhs.gov/ohrp/humansubjects/guidance/decisioncharts.htm.

2.2 Human Participant

A human participant ("participant") in research is a living individual, about whom an investigator (whether professional or student) conducting research obtains:

(1) Data through intervention or interaction with the individual; or
(2) Identifiable private information.

The terms "human participant" and "participant" are equivalent to the terms "human subject" and "subject" as used in the "Common Rule," 45 CFR 46.

2.3 Human Research

Human research, or research involving human participants, is any research, as defined above, that involves human participants in accordance with 45 CFR 46 and as illustrated in Decision Chart #1, published as guidance by the OHRP, available at: http://www.hhs.gov/ohrp/humansubjects/guidance/decisioncharts.htm.

The USU IRB shall have the sole responsibility of determining whether an investigation constitutes human research, under the above definition. The following activities, which may be found to be exempt from Common Rule (45 CFR 46) requirements, shall nonetheless be included among those to be submitted for IRB review: quality improvement programs and program evaluations carried out for other than exclusive use by the organization sponsoring the evaluation, classroom exercises that are associated with research methodologies courses, public health activities, and innovative health care.

2.4 Investigator

Investigator is a person or entity affiliated with USU, whether as an employee, student or otherwise, whose role statement, job description, employment assignment, and/or function within the University is, either in whole or in part, to carry out research. Such investigators shall include, but not be limited to, USU faculty, professional researchers, research assistants, laboratory and clinical staff, and others as may be designated by the Vice President for Research.

Principal Investigator (PI) is an investigator who is an employee of the University and is authorized by his/her unit and college, or by the Vice President for Research, to take responsibility for research involving human participants. This individual shall have primary responsibility for submitting research protocols and carrying out research programs that protect the health and well-being of Human Participants, as set forth in this policy.

2.5 Intervention

Intervention includes both physical procedures, by which data are gathered (for example, venipuncture), and manipulations of the participant or the participant's environment that are performed for research purposes.

2.6 Interaction

Interaction includes communication or interpersonal contact between investigator and participant.

2.7 Vulnerable Populations

The IRB gives special consideration to protecting the welfare of particularly vulnerable populations, such as children, prisoners, pregnant women, mentally disabled persons, or economically or educationally disadvantaged persons.

(1) A child is a person under the age of 18 who is not able to legally consent to treatments or procedures involved in the research (see Utah Code Annotated 75-1-201 [29]).
(2) A child's guardian, according to DHHS regulations, is an individual authorized to consent on behalf of the child to general medical care.
(3) A guardian of an incapacitated adult shall be a person who has qualified as such pursuant to testamentary or court appointment.

2.8 Private Information

Private information includes information about behavior that occurs in a context in which an individual can reasonably expect that no observation or recording is taking place, and information which has been provided for specific purposes by an individual and which the individual can reasonably expect will not be made public (e.g., a medical record). Private information must be individually identifiable (i.e., the identity of the subject is or may be ascertained by the investigator or associated with the information) in order for the obtaining of the information to qualify as research involving human participants.

2.9 Minimal Risk

Minimal risk means that the probability and magnitude of harm or discomfort anticipated in the research are not greater, in and of themselves, than those ordinarily encountered in daily life, or during the performance of routine physical or psychological examinations or tests.

2.10 Conflict of Interest

Conflict of interest is a situation in which a University employee owes a professional obligation to the University, which is or can be compromised by the pursuit of outside interests. Conflicts of interest are further defined and discussed in USU Policy 307 Conflicts of Interest.

2.11 Confidentiality

Confidentiality is the withholding of certain information as specified under an agreement between USU and another individual or entity (e.g., a collaborating institution) wherein the entities agree to maintain as confidential all private information regarding the research, protocol, investigational process, and information discovered during the investigation. Also, the right of a human participant to have private information protected from disclosure except as allowed under the Privacy Rule (42 CFR 160, 164).

308.3 POLICY

USU investigators must adhere to strict ethical standards when involving human participants in their research. These standards are in place to protect the basic rights of participants. Any research that departs from the spirit of these standards violates University policy. All research performed under the auspices of USU, including collaborative research conducted with one or more public or private entities, in which human participants are involved must be reviewed and approved by the Institutional Review Board (IRB) appointed by the Vice President for Research, or by such other review body as shall be designated by the IRB. USU, through its Human Research Protection Program, its IRB and other review processes, works together with investigators, sponsors and research participants to uphold ethical standards and practices in its research.

The IRB review and approval process shall be conducted in accordance with all U.S. federal government and state laws, and all University policies and regulations that govern the use of human participants in research, including the IRB Handbook and the IRB Standard Operating Procedures current at the time of the review. The requirement for IRB review and approval applies to all human research involving USU Investigators or human participants in all locations, whether funded or not, and whether conducted by faculty, students, or other employees. It also applies to persons unaffiliated with the University who wish to investigate participants who are under the protection of the University, such as students and patients. No such study shall begin before it has been approved by the IRB. No other official of the University may approve human research that has not been approved by the IRB. Investigators are encouraged to consult with the IRB Administrator, or the IRB Chair, during preparation of an early draft of proposals to be submitted, at which time concise and current details concerning human research can be obtained.

The IRB web site, at http://www.usu.edu/research/irb , is made available to principal investigators, investigators, human participants and others in order to provide ready access to USU's Policies, Standard Operating Procedures, the IRB Handbook, and associated information. Interested parties should make use of the information provided electronically, and whenever appropriate they may contact the IRB Administrator or Chair for additional assistance with the preparation, approval, and execution of protocols involving human participants.

Investigators are referred to the following documents and regulations, hereby made a part of this policy by reference:

(1) *Ethical Principles and Guidelines for the Protection of Human Subjects of Research (The Belmont Report)*
(2) 45 CFR 46 "Protection of Human Subjects," (The "Common Rule")
(3) 45 CFR 160 and 164A,E "Standards for Privacy of Individually Identifiable Health Information," ("The Privacy Rule")
(4) 42 CFR 50, Subpart F, "Responsibility of Applicants for Promoting Objectivity in Research for which PHS Funding is Sought"
(5) Department of Health and Human Services guide document: "Financial Relationships and Interests in Research Involving Human Subjects: Guidance for Human Subjects Protection."

If an investigator is unsure of the interpretation of the federal and state statutes and guidelines as listed, or has other questions regarding the applicability or effect of federal, state, or local laws or regulations, he/she shall contact University Counsel for advice and direction.

The USU IRB is authorized to approve research protocols involving human participants through the Federal-Wide Assurance # 00003308, dated September 6, 2002. This assurance is on file with the Office of Human Research Protections, U.S. Department of Health and Human Services. USU delegates to the IRB the responsibility for reviewing research protocols primarily for the purpose of ensuring that human research is carried out in accordance with ethical principles, as outlined in the Belmont Report, and for protecting the welfare and rights of human participants. The IRB shall act independently in this capacity, but shall coordinate its review with other review bodies – including the Sponsored Programs Office, the Conflicts of Interest Committee, The Office of Compliance Assistance, and the Office of the Vice President for Research – whose responsibilities under USU policy include review of the scientific and scholarly validity of the proposed research study, and its freedom from bias introduced because of unmanaged conflicts of interest. The IRB is authorized to:

(1) Approve, require modification to secure approval, or disapprove all human research activities overseen or conducted at USU;
(2) Suspend or terminate approval of human research not being conducted in accordance with the IRB's requirements or that has been associated with unexpected serious harm to participants;
(3) Observe, or have a third party observe, the consent process;
(4) Observe, or have a third party observe, the conduct of the research.
(5) Authorize a separate IRB or other review body that has a current FWA to provide oversight of a multi-site or specialized study under an authorization agreement, as allowed by federal statute.

308.4 PROCEDURES

4.1 Principles

Principles that IRB members consider during their reviews are set forth in the *IRB Review Checklist* document (available at: http://irb.usu.edu/htm/guidelines) current at the time of application. These principles include:

(1) Minimizing the risks to participants.
(2) Balancing of risks with the potential benefits from the study.
(3) Obtaining informed consent from the participant or permission from a legal guardian before participation. Such consent or permission must be in writing unless waived by the IRB.
(4) Providing adequate detail about the study in language that is understood by the participant so the participant can make an informed decision.
(5) Maintaining participants' privacy and confidentiality.
(6) Informing participants that their participation is voluntary and that they are free to withdraw from the study at any time without consequence.

4.2 Protocols

Protocols submitted to the IRB are categorized as follows:

(1) Exempt from further review

Determination of exempt status shall be made in accordance with the standard operating procedures of the IRB, and shall in no case be made by an individual who might have a conflict of interest concerning the study. All research adjudged to be exempt shall nonetheless be subject to monitoring and continued review by the institution through the IRB so that the health, well-being and privacy of human participants involved in such research are adequately protected. Such review shall require an annual update confirming that the then-current activities qualify for exemption, outlining any changes made in the protocol or indicating that the project has been completed and/or terminated.

Certain human research shall be exempt from review under the following circumstances, in accordance with 45 CFR 46.101(b), subsections:

(a)Educational settings (see Decision Charts 2 & 3. All decision charts referred to in this subsection are available at: http://www.hhs.gov/ohrp/humansubjects/guidance/decisioncharts.htm).

(b) Or (c) Tests, Surveys, Interviews, Public Behavior Observations (see Decision Charts 2 & 4).

(d) Existing Data, Documents Records or Specimens (see Decision Charts 2 & 5).

(e) Public Benefit or Service Programs (see Decision Charts 2 & 6).

(f) Food Taste and Acceptance Studies (see Decision Charts 2 & 7).

(2) Subject to expedited review

If the IRB Administrator finds that a protocol involves no more than minimal risk, expedited review may be conducted by a limited number of experienced board members who possess expertise in the research activity being conducted. Selection of IRB members to conduct expedited reviews shall be by the IRB Chair, and expedited reviews shall be performed in accordance with the standard operating procedures of the USU IRB. This process generally requires a period of four to six weeks to complete.

(3) Subject to full review

In cases where more than minimal risk is involved, and where expedited review is deemed by the IRB Administrator to be insufficient or inappropriate, the protocol is subject to review by the full board. Such reviews typically require a period of four to six weeks to complete.

4.3 Protocols submitted to the IRB for review

Protocols submitted to the IRB for review shall be presented by a principal investigator, and shall consist of three components. (Forms and information can be found at http://www.usu.edu/research/irb)

(1) IRB Application Form

Completion of this form will allow the IRB Administrator to quickly place the protocol in the appropriate review category (exempt, expedited, or full board review). These forms have been developed to minimize the response time of the IRB. All sections of the application must be completed in order for the IRB to begin its review. Information should be written in lay language, avoiding jargon and acronyms.

(2) Copy of the grant, thesis, or dissertation upon which the project is based

If a project has none of the above documentation, a description of methods and objectives, and a clear, concise description of procedures to be used in the project shall be submitted.

(3) Informed Consent Form

This document must conform to the requirements of the IRB standard operating procedures as reflected in the *Informed Consent Checklist* (available at: http://www.usu.edu/research/irb/forms/InformedConsentChecklist.doc) and be approved for use in the study by the IRB. It contains the following elements as required under 45 CFR 46.116:

(a) A statement that the study involves research
(b) A statement of the research to be performed and the purpose of the research

(c) A description of reasonably foreseeable risks or discomforts
(d) A description of reasonably foreseeable benefits to participants and others
(e) Appropriate alternatives to the study that may benefit the participant
(f) A statement of confidentiality
(g) Availability of compensation or treatment for injury
(h) Contact information for

(i) Answers to pertinent questions about the research
(ii) Answers to pertinent questions about the research participants' rights
(iii) Reporting of research related injuries or harms
(iv) The research team (if not provided above) for questions, concerns, or complaints.
(v) Someone independent of the research team for problems, concerns, questions, information or input

(i) A statement explaining that participation is voluntary and that there is no penalty or loss of benefit to which the participant was entitled if the participant withdraws or refuses to participate.
(j) When appropriate:

(i) The consequences of a participant's decision to withdraw from the research.
(ii) An approximate number of participants involved in the study.

(k) The informed consent form shall contain adequate information, written in plain language familiar to the participant, so that he/she can make an informed decision regarding participation.

4.4 Protocol Process

IRB applications shall be completed on line in accordance with the IRB standard operating procedures. Incomplete packages will be returned to the investigator without review. The IRB Administrator and staff work with Investigators to verify completeness of submissions and identify concerns or needed clarifications. Reviews are then conducted as described above. If full board review is required, the investigator will provide ample copies of packets for each board member (as directed by the IRB administrator) no later than two weeks before the monthly IRB meeting.

Upon completion of the IRB review, notification of decision regarding the protocol is sent by the IRB Administrator to the investigator. Revisions are sometimes needed, and when the protocol is considered to meet acceptable standards, the research protocol will be approved for one year (beginning on the date the protocol was approved), or such other term (never greater than one year) as shall be determined by the IRB.

For those protocols that require an extension beyond the one-year limitation of the IRB approval, a status report will be mailed to the investigator by the IRB Office one month

before the anniversary approval date. The investigator will have ten working days from the date of receipt to submit the Status Report form. A memo shall be attached to the Status Report form stating the investigator's intention to continue the research and document any modification to the experimental protocol. The memo shall contain a concise overview of the research to date (i.e., current copy of the informed consent, number of subjects involved, summary of any recent significant findings, adverse events, etc.). If the protocol is acceptable, an approval letter will be sent to the investigator, extending the project for an additional year. Continuing review may occur more than once a year depending on the level of risk.

The investigator will maintain a current file for each protocol he/she submits and have a copy of all records relating to the research protocol (IRB application form, data derived from the study/case report forms/computer data/adverse events, correspondence with the IRB/sponsor/funding sources/FDA/others, sponsor's protocol—if applicable, original informed consent and assent forms).

4.5 Retention of Records

Records shall be retained by the PI for all protocols for three years from the date the study is completed, terminated, or discontinued. Federally-funded research may require a longer record retention period.

The IRB shall retain for at least three years after the completion of the research (or for protocols which are cancelled without participant enrollment, for at least a three-year period after cancellation) the following records in accordance with 45 CFR 45 Section 115:

(1) Minutes of IRB meetings.
(2) Protocols
(3) Scientific evaluations
(4) DHHS-approved sample consent documents and protocols, when they exist
(5) Reports of injuries to participants
(6) Records of continuing review activities including continuing review status reports submitted to the investigator.
(7) Other progress reports submitted by investigators.
(8) Statements of significant new findings provided to participants.
(9) For initial and continuing review of research by expedited procedure;
    (a) The specific permissible category
    (b) A description of action taken by the reviewer
    (c) Any findings required under regulations
(10) For exemption determinations, the specific category of exemption
(11) Unless documented in the IRB minutes, determinations required by the regulations and protocol-specific findings supporting those determinations for:
    (a) Waiver or alteration of the consent process
    (b) Research involving pregnant women, fetuses, and neonates
    (c) Research involving prisoners

(d) Research involving children

(12) For each protocol's initial and continuing review, the frequency for the next continuing review.

(13) Copies of all correspondence between the IRB and investigators.

(14) A list of IRB members to be maintained on a continuous basis.

(15) The standard operating procedures of the IRB to be maintained on a continuous basis.

Investigators will notify the IRB office if they either leave the University before the research is completed, or complete the research and leave the institution before the end of the three-year record retention date. If the investigator desires to take copies of the research records to another institution, additional issues may need to be resolved related to the Health Insurance Portability and Accountability Act (HIPAA, 45 CFR 160).

4.6 IRB Training in the Protection of Human Participants in Research

USU requires Investigators, co-investigators, and any research personnel who interact with participants in research to be trained in the ethical protection of human participants. Certification achieved by completion of prescribed training shall be valid for three years from the date that training was completed.

4.7 Conflicts of Interest

The IRB Application Form shall include questions designed to identify any potential individual conflicts of interest that may arise in connection with the study. Positive disclosures of conflicting interests shall be referred by the IRB Administrator to USU's Federal Compliance Manager so that the conflict of interest can be fully disclosed and managed or eliminated, as required under federal guidelines and in accordance with USU Policy 307 "Conflicts of Interest." No research for which a conflict of interest has been disclosed shall be conducted under an IRB-approved protocol until a Conflict of Interest Management Plan has been approved for the work by the USU Conflict of Interest Committee. In addition, members of the IRB shall be queried at the beginning of each IRB review meeting concerning potential conflicts of interest they may have in connection with protocols to be reviewed. Members of the IRB who disclose such conflicts may provide information to the Board as requested, but shall recuse themselves from voting for approval or disapproval of the protocol in question.

4.8 Allegations and Findings of Non-compliance

Non-compliance, for the purposes of this policy, shall be the failure to follow the regulations or the requirements and determinations of the IRB. Incidents of non-compliance shall be handled by the IRB unless the nature or duration of non-compliance indicates the need for institutional intervention.

Non-compliant activities may be identified through IRB oversight, self-reporting, or reporting from employees, human participants or others. Allegations of non-compliance

may be presented to the IRB Administrator, the Federal Compliance Manager at the OCA, USU's Internal Audit Services (IAS) either through the hotline or with a representative of IAS, or to University Counsel. Reports of allegations should be made to the chair of the IRB, and any report of non-compliant behavior involving research under the oversight of the IRB shall be reported to the IRB chair at the earliest opportunity. Sufficient information shall be submitted to identify who exhibited the non-compliant behavior, when it took place, and any other pertinent details to allow for determination of non-compliance.

The IRB Chair shall make the initial determination if the allegation is in non-compliance involving human research. If non-compliance is suspected, but does not involve human research, the Chair shall provide all pertinent information to the Office of Compliance Assistance (OCA) for further action.

The IRB Chair shall determine whether non-compliance is serious or continuing. Upon making a finding of non-compliance that is neither serious nor continuing, the IRB Chair shall take steps to correct the non-compliant behavior with the investigator. The IRB Chair shall also notify the department head, dean, the Office of Compliance Assistance, and the responsible institutional official (RIO) of the circumstances surrounding the behavior and corrective actions taken.

In cases of serious non-compliance (defined as non-compliant activities that could jeopardize the rights or safety of human participants) or continuing non-compliance (defined as non-compliant activities that recur either on the same project or by the same investigator after the IRB Chair has taken corrective action), the IRB Chair shall notify the OCA for further action. The OCA has been established to provide support to the IRB, investigators, human participants, and other individuals and entities with regard to adherence to federal and state statutes, regulations and guidelines. In conjunction with USU's RIO and others, the OCA receives and processes allegations of misconduct and non-compliance arising from research activities of the University, and facilitates any associated inquiries and investigations. Information about and contacts for the OCA are available at: http://www.usu.edu/aia/academic/c_overview.cfm. Following investigation by the OCA, serious or continuing non-compliance is reviewed by the convened IRB. The Federal Compliance Manager, an ex-officio member of the IRB, presents the findings of the investigation. All members of the RIB receive a copy of the initial application, the protocol, information describing the non-compliance, and the results of the OCA investigation. The IRB may consider actions including

(1) Suspension of the research
(2) Termination of the research and notification of current participants when such information may relate to a participant's willingness to continue to take part in the research
(3) Increasing frequency of continuing review

4.9 Unanticipated Problems

Investigators shall follow the procedures contained in the IRB standard operating procedures, Chapter 9.j whenever an unanticipated problem arises having to do with risks to human participants or others. The PI shall have responsibility for identifying and reporting unanticipated risks as set forth in the SOPs, Chapter 4.f, submitting information to the chair of the IRB in sufficient detail for the Chair to draft the report as required in 4.11, below, and otherwise as required by the SOPs. If the unanticipated risk is life-threatening, emergency services shall be summoned and all reasonable steps shall be taken to ensure the safety and well-being of the participants or any others affected.

4.10 Suspensions and Terminations of Previously Approved Research

The IRB is authorized to suspend (defined as temporarily discontinuing) or terminate (defined as permanently discontinuing) research in order to protect the rights and welfare of research participants and others.

The determination of the appropriate action shall be made by the IRB chair, based on non-compliance with the IRB-approved protocol for the research, or on the association of the research with an unexpected serious harm to participants or others. Determinations shall be ratified by the membership of the IRB, and shall be reported to the OCA, RIO, University Counsel, and the appropriate funding agency as set forth in 4.11, below.

Suspensions may be lifted if an investigation determines that the harm was not associated with the research, or if compliance with the approved protocol is re-established, and is determined to be sufficient to protect the rights and welfare of human participants.

When a termination or suspension involves the withdrawal of current participants from a study:

(1) Enrolled participants will be notified by the IRB.
(2) Participants to be withdrawn will be informed by the IRB of any unexpected risks to which they may have been subjected, and shall be provided with support in understanding and ameliorating those risks.
(3) Participants to be withdrawn will be informed by the IRB of any follow-up that is required or offered, and will be informed that any adverse event or unanticipated problems involving risks to them or others should be reported to the IRB and others as appropriate.

4.11 Reports of Unanticipated Problems

Reports of unanticipated problems involving risks to participants or others, terminations, suspensions and serious or continuing non-compliance shall be submitted to federal agencies in compliance with applicable regulations. The IO shall ensure that all required reportings are completed within 15 business days.

The IRB Chair shall have responsibility for coordinating with the principal investigator, gathering any additional required information and writing the initial report, which shall include:

(1) The nature of the event or problem
(2) The findings of USU
(3) The action taken by the IRB and USU
(4) The reasoning underlying the actions taken
(5) Any plans or recommendations for a continuing inquiry or investigation

The IRB chair shall submit the draft report in a timely manner to the OCA and the RIO for review. The RIO shall have responsibility for final approval and signature of the report, and for its submission to the appropriate agency. Copies of the reports shall be distributed to the IRB, OHRP when the research is covered by DHHS regulations, and other federal agencies when research is overseen by those agencies and such agencies required reporting separate from that to OHRP.

308.5 CONTINUOUS IMPROVEMENT OF THE HUMAN RESEARCH PROTECTION PROGRAM

The IRB and OCA shall work together to measure and report the performance of the Human Research Protection Program to USU's administration. Annual and unannounced reviews of the IRB's operating and review procedures shall be carried out in order to assess the effectiveness and quality of the processes; and to assure compliance with USU's policies and procedures, and with applicable federal, state and local laws and guidelines.

USU Investigators, other USU employees, human participants and sponsors of research are encouraged to bring forward concerns and suggestions regarding improvement of the program, including the IRB review process.

308.6 RECRUITMENT PROHIBITIONS

The following activities shall not be permitted:

(1) Payments to professionals in exchange for referrals of potential participants (finder's fees).
(2) Payments designed to accelerate recruitment that are tied to the rate of timing of enrollment (bonus payments).

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Report from the Educational Policies Committee
March 5, 2009

The Educational Policies Committee met on March 5, 2009. The agenda and minutes of the meeting are posted on the Educational Policies Committee web page[1] and are available for review by the members of the Faculty Senate and other interested parties.

During the March 5th meeting of the Educational Policies Committee, the following discussions were held and key actions were taken.

1. Approval of the report from the Curriculum Subcommittee which included the following notable actions (Curriculum Subcommittee minutes[2]):

    - The Curriculum Subcommittee approved 44 requests for course actions (see minutes[2]).

    - The request from the Department of Mechanical and Aerospace Engineering to offer a Master of Science graduate degree in Aerospace Engineering was approved.

    - The request from the Department of Economics and Finance to offer a Minor in Quantitative Finance was approved.

2. There was no February meeting of the Academic Standards Subcommittee to report on.

3. Approval of the report of the February General Education Subcommittee. Of note:

    - The General Education Subcommittee is evaluating five year student performance data on the Computer Information Literacy (CIL) Exam in preparation for a discussion on the disposition of the CIL at their March meeting.

    - In response to a request by the Commissioner's Office of Higher Education to consider the AAC & U Liberal Education and America's Promise (LEAP) Essential Learning Outcomes, it was agreed that Utah State University's Citizen Scholar Objectives were consistent with the LEAP objectives. However, two modifications were made to USU's Citizen Scholar Objectives:

        3. recognize different ways of thinking, creating, expressing, and communicating through a variety of media **including: written, oral, visual, musical, and kinesthetic communication**;

        5. **ethical reasoning including the ability to** work effectively **and responsively**, both collaboratively and individually, **in all facets of their lives**.

1. http://www.usu.edu/fsenate/EPC/2008-2009/Minutes/Mar52009epcminutes.pdf
2. http://www.usu.edu/fsenate/EPC/curriculum/2008-2009/Minutes/Mar52009ccminutes.pdf

REPORT OF THE
HONORARY DEGREE AND AWARDS COMMITTEE
to the
Faculty Senate
April 6, 2009

The information contained in this document is CONFIDENTIAL and for review by the Faculty Senate only. It is not to be disseminated to any person outside of the Faculty Senate.

COMMITTEE MEMBERS

Paul D. Parkinson, Chair (Board of Trustees and Alumni Council President)
Scott R. Watterson (Board of Trustees)
Suzanne Pierce-Moore (Board of Trustees)
Scott Deberard (Faculty)
Douglas Jackson-Smith (Faculty)
Wayne Wurtsbaugh (Faculty)
MerLynn Pitcher (Alumni Council)
Grady Brimley (ASUSU President)
Laurens Smith (Provost's Office)
Sydney Peterson (President's Office)

PURPOSE

The Honorary Degrees and Awards Screening Committee's major responsibilities are to implement procedures to solicit and encourage an adequate number of qualified nominations; to review all nominations for Honorary Degrees and Commencement Speaker Awards; and to forward nominations and recommendations to the Board of Trustees for their final selection and approval.

COMMITTEE ACTIONS

Honorary Degree Recipients 2009

The Honorary Degree and Awards Screening Committee recommended five candidates for honorary degrees to be presented at Spring Commencement 2009. The Board of Trustees has approved the following five candidates:

Robert F. Bennett

Reelected to a third term in the United States Senate in 2004, Senator Bob Bennett continues to serve the citizens of Utah with distinction. As counsel to Republican Leader Mitch McConnell, Senator Bennett retains his seat on the Republican leadership team where he advises the leader on legislative strategy and policy priorities. As a senior member of the Senate Banking Committee, and a member of the distinguished Joint Economic Committee, the Utah Senator is at the center of national economic policy discussions. From his seat on the powerful Senate Appropriations Committee, where he is the ranking member of the Subcommittee on Agriculture, Bennett works to balance fiscal discipline in government while also representing the needs of Utah in the distribution of federal funds. The Utah Republican also serves as the ranking Republican member on the Senate Rules Committee. Named an "Emerging Leader in a Post-September 11 Senate" by Congressional Quarterly Magazine, Bennett has received numerous awards for his contributions in the U.S. Senate. Prior to his election to the Senate in 1992, Bennett earned distinction in entrepreneurial and government activities. For his success as chief executive officer of the Franklin International Institute Bennett was named Inc. Magazine's "Entrepreneur of the Year" for the Rocky Mountain region. His Washington, D.C., experience includes service as chief congressional liaison at the U.S. Department of Transportation.

Marc C. Bingham

Marc Bingham is a graduate of Utah State University with a degree in wildlife management. In 1971 he founded and became the chief executive officer of PDC (Phone Directories Company), one of the most successful independent publishers in the yellow page industry. Prior to beginning PDC, he worked for the Bureau of Land Management in Price. Marc and his wife, Debbie, donated $15 million to Utah State University's Uintah Basin campus to fund construction of an Entrepreneurship and Energy Research Center. The gift is the largest private gift in USU's history. The building will become a state-of-the-art, high-tech educational facility to train students in business, entrepreneurship, accounting, engineering, water management, natural resources, environmental policy and other programs. The new Entrepreneurship and Energy Research Center will help Utah, the region and the nation develop energy resources more efficiently by enabling teams of professionals from key disciplines to work together with government, business and community partners to create synergistic solutions and to foster entrepreneurship.

Huey D. Johnson

Huey Johnson, a 1966 Utah State University graduate in Natural Resources, is an environmentalist and practical visionary, widely recognized for his pioneering work as a conservationist and environmental policymaker. He is the founder and president of the Resource Renewal Institute (RRI), an incubator for transformational ideas that challenge the piecemeal way natural resources are managed in favor of long-term, comprehensive policies that will guarantee the health of the planet and a high quality of life for future generations. He is a leading voice for Green Plans, integrated environmental strategies that are a proven and effective approach to protecting and sustaining the environment. Mr. Johnson served as president of The Nature Conservancy, and was its Western Regional Director for nine years. From 1976 until 1982, Mr. Johnson served as Secretary of Resources for the State of California. During his tenure he established conservation programs that doubled salmon populations, strengthened forestry regulations, preserved millions of acres of California wilderness, and protected more than 1,200 miles of wild rivers. Mr. Johnson is active in environmental affairs worldwide, serving on boards, advising political leaders, writing, and lecturing. He is the author of *Green Plans: Greenprint for Sustainability* (University of Nebraska Press, 1995). The book, now in its third printing, is part of environmental planning curricula at a number of universities. Mr. Johnson has received numerous awards including the President's Award for Sustainable Development in 1996 and the Sasakawa Prize, awarded by the United Ntaions in 2001 to honor Mr. Johnson's outstanding contributions to the environment.

Bonnie D. Parkin

Bonnie Parkin was the fourteenth general president of the Relief Society of The Church of Jesus Christ of Latter-day Saints (LDS Church) from 2002 to 2007. Parkin was also a member of the general presidency of the church's Young Women organization from 1994 to 1997. She graduated from Utah State University in 1962. As general Relief Society president not only did she represent over 5 million LDS women in 165 countries, but she reached out to literally thousands of non-LDS women and families. Examples of this include her partnership with organizations such as the United Nations, the World Health Organization and the American Red Cross to vaccinate children against measles in Mozambique and Ethiopia, her efforts to help those devastated by Hurricane Katrina, and her program to teach a group of Iraqi women how to care for and serve each other. She has focused much of her energy on preparing and nurturing young women. Her efforts to help women and serve families in need have taken her throughout the world, from South America to Asia, Europe and Africa.

Bertrand D. Tanner

Bertrand Tanner received his M.S. in Biometeorology from USU in 1975. He joined Campbell Scientific Inc., and rose to a position of Vice President. This company is internationally known for measurement systems used widely in environmental sciences, industry, and agriculture. He has been personally responsible for developing some unique sensors and measurement systems which are now indispensible in many areas of science, environmental monitoring and advanced agricultural technology. Areas which

use this technology include: monitoring the carbon budget of the Earth; studies and monitoring of air quality; determining efficient water use and pest control in agriculture; monitoring water quality, climate science and climate change. Mr. Tanner is a rare individual who not only rose to distinction in his profession, but also surpassed the academic standards defining a traditional doctorate degree. Mr. Tanner was diagnosed with cancer in late May 2008, and passed away in September 2008, much faster than expected. The process of nominating him for an honorary degree began well before this occurred. He will receive the award posthumously.

Commencement Speaker 2009

The Board of Trustees has approved Senator Robert F. Bennett as the Commencement Speaker for Spring 2009 (see short bio above). Additional names have been submitted for Commencement Speaker for Spring 2010.