University of Colorado **Anschutz Medical Campus**

Campus Administrative Policy

Policy Title: External Gift Management and Institutional Integrity

Policy Number: 2044A Functional Area: Finance

Effective:	July 1, 2018
Date Last Amended/Reviewed:	July 1, 2018
Date Scheduled for Review:	June 30, 2023
Supersedes:	N/A, New Policy
Approved by:	Donald M. Elliman, Jr. Chancellor, University of Colorado Anschutz Medical Campus
Prepared by:	University Counsel
Reviewing Office:	Office of Regulatory Compliance; Office of Advancement
Responsible Officer:	Vice Chancellor of Advancement, Anschutz Medical Campus
Applies to:	CU Anschutz Medical Campus

A. Introduction

It is critical to the mission and reputation of the University of Colorado Anschutz Medical Campus (the "University") to maintain the public's trust by ensuring that the University's activities are neither compromised nor perceived to be biased by financial or other business considerations. This External Gift Management and Institutional Integrity Policy (the "Policy") is designed to support faculty, senior leaders, and the University by providing a structured process for the ethical review of gifts to the University that might pose a threat to institutional integrity.

This Policy aims to accomplish the following: ensure the integrity of the

University and its professional faculty and staff; protect the academic freedom of University faculty and staff; and support the receipt of external gifts that are fully consistent with the core values and mission of the University. This policy applies to all employees at the University of Colorado Anschutz Medical Campus.

B. Policy Statement

This Policy is focused on ensuring adequate review of gifts to the University that have not previously been required to undergo a formal, structured review, with a specific eye toward detecting and avoiding or mitigating potential reputational risks for the University and its faculty and staff. It aims to help faculty and staff detect, address, avoid, and/or mitigate institutional conflicts of interest or commitment ("COI").

This policy does not address individual faculty COI, which are addressed in other policies. Likewise, grants to support the conduct of research on human subjects are EXCLUDED from this Policy, as they already receive scrutiny through other regulatory mechanisms.

C. Prospective Institutional Integrity Review Committee

1. The Prospective Institutional Integrity Review Committee ("PIIRC") shall be created to administer and achieve the goals of this Policy. The PIIRC will establish mechanisms to ensure adequate prospective ethical review of all proposed gifts to the University, except for those that are for clinical research and that therefore receive ethical and legal review via other mechanisms and processes. All members of the PIIRC shall be appointed by the Chancellor, with expertise in each of the following areas: law, conflicts of interest, ethics, institutional finance, fundraising standards, and corporate relations.
2. Prospective review mechanisms for non-research gifts may include:
    a. Standard checklists for use by individual faculty members and Advancement Office staff;
    b. Local review by relevant faculty leadership or committees; and/or
    c. Review by the PIIRC, a PIIRC subcommittee or another designated University committee, department, or entity.
3. The PIIRC may suggest ongoing management plans to help mitigate any

risks associated with receiving and using proposed gifts, including developing agreements with faculty regarding periodic monitoring of the use of funds, or other aspects of managing the gift and carrying out the associated work the gift is intended to support.

4. The PIIRC is authorized to make recommendations to the Chancellor or their designee in regards to accepting, modifying, or rejecting proposed corporate gifts to the University and any associated risk mitigation plans. Final decisions regarding acceptance, rejecting, or attaching stipulations to the acceptance of any gift remains in the purview of the Chancellor or their designee.
5. The PIRC will communicate with appropriate individuals in the Office of Regulatory Compliance regarding ongoing management plans and other steps to be taken to help manage risks both to the University and to individual faculty members or faculty teams who are the recipients of gifts. Risk mitigation steps might include providing appropriate training and education to involved faculty members, staff, and other involved parties, and developing plans for periodic monitoring of the use of gift funds.

D. General Guidance and PIIRC Review Criteria

In making recommendations, the PIIRC will take into account the size, source, and whether or not any special risk associated with the gift exists and must be mitigated.

1. Gift Amounts and Threshold Determinations
    a. Gifts that are valued at an amount less than $5,000 do not require formal review or completion of the Gift Review Checklist and Attestation Form (hereinafter, “C&A form”).
    b. Gifts received during fund-raising events (e.g., luncheons, galas, etc.) – if they are less than $25,000 and are intended for use in ways envisioned by the fundraising event (e.g., to support a specific program) – do not require formal review or completion of the C&A form.
    c. Gifts at or between $5,000 and $50,000 do not require automatic PIIRC review, but the faculty member receiving the gift should be requested to complete the C&A form.

d. Completed and signed C&A forms should be submitted to the Advancement Office and will be reviewed by the PIIRC on a quarterly basis.

e. Faculty members and advancement professionals should be encouraged to seek the guidance of the PIIRC at any time in completing the C&A form.

f. Gifts between $50,000 and $100,000 do not require PIIRC prior review but should be formally approved by the faculty member's supervisor, denoted by the supervisor's signature on the C&A form. The supervising faculty member (e.g., Department chair), may seek the guidance of the PIIRC at any time in deciding about approval and/or proposed risk mitigation strategies.

g. Gifts $100,001 and $1,000,000 should receive PIIRC review in advance of receipt and must have a written gift agreement. The PIIRC will produce a written recommendation regarding acceptance of the gift and any proposed risk mitigation plans prior to receipt of the gift.

h. Gifts greater than $1,000,000 must receive PIIRC review in advance of receipt and must have a written gift agreement; both the gift and any risk mitigation must be approved by the Chancellor or their designee prior to gift acceptance.

E. Gift Source Determinations

The following gift categories will be reviewed with heightened scrutiny, due to the possible impact on University reputation:

1. Gifts from individuals or organizations that produce products that purport to provide a health benefit, especially where the proposed activities might be perceived as constituting and/or an endorsement of the funder's product(s);
2. Gifts from individuals or organizations that produce products that have adverse health impacts, and which might therefore pose particular threats to the reputational integrity of the University and its key role in promoting the health of the public;
3. Gifts from individuals or organizations that have been the subject of substantial negative publicity, such as lawsuits, labor disputes and regulatory actions; and

4. Gifts to support programs of an individual faculty member who also receives research support from the individual or organization providing the gift.

Note that while gifts from individuals and organizations that meet one or more of the criteria above should receive an added level of scrutiny, such gifts may still be accepted if they support valuable programs that promote the mission of the University and if adequate plans to mitigate risk are in place.

In no case will any gift be accepted that is contingent upon the outcome of any research, purchasing or other business transaction conducted at or by the University. The University will not solicit or accept gifts that in any way limit the ability of its faculty to conduct and/or report scholarly work in accordance with the highest scientific, medical, professional, and ethical standards.

F. Risk Mitigation Planning

1. Any proposed gift (regardless size or source) for which a risk mitigation plan is put in place should be formally approved by the faculty member's department chair; approval can be denoted by the department chair's signature at the bottom of the Gift Review Checklist and on a written risk mitigation plan proposal.
2. Proposals for risk mitigation should be submitted in writing, along with the C&A form, to the PIIRC.
3. Faculty and department chairs should consult the PIIRC for assistance in developing risk mitigation plans or with any other questions that might arise; when in doubt, call for advice and assistance.

G. Definitions

None.

Notes

1. Dates of official enactment and amendments:
   July 1, 2018: Adopted/approved by the Chancellor.

2. History:
   Not applicable.

3. Initial Policy Effective Date: July 1, 2018

4. Cross References/Appendix:
   - Board of Regents Article 1D: Ethical Conduct of University of Colorado Employees
   - CU System Administrative Policy Statement 2027, Code of Conduct
   - CU System Administrative Policy Statement 4013, Disclosure of Interests
   - CU System Administrative Policy Statement 4016, Fiscal Code of Ethics