



IMR POLICIES FOR INVESTIGATORS

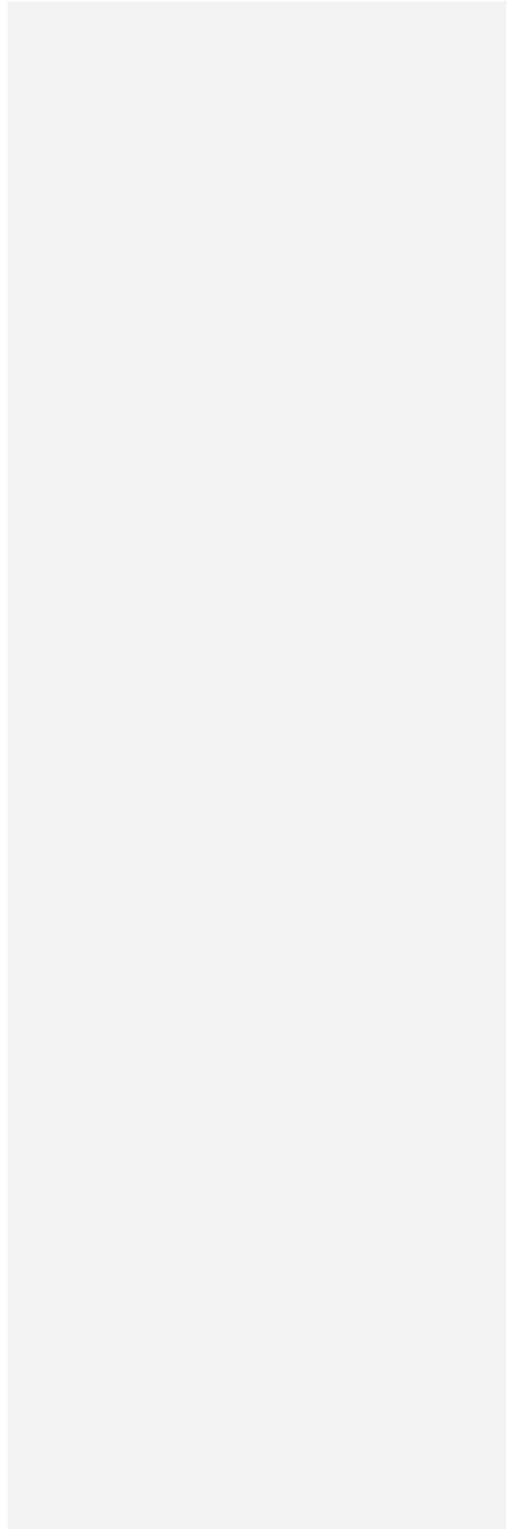


TABLE OF CONTENTS

Study-Specific Policies

- 700 Establishing an Account
- 707 Procurement Policy for Federal Expenditures

Employment Policies

- 101 Equal Employment Opportunity
- 103 Immigration Law Compliance
- 104 Conflict of Interest
- 105 Outside Employment
- 201 Employment Applications & Categories
- 701 Hiring Personnel

Financial Policies

- 107 Compensation of VA Employees
- 702 Expenditures
- 703 Transfer of Funds
- 704 Honoraria
- 705 Residual Funds
- 706 Travel

Employee Conduct Policies

- 202 Access to Personnel Files
- 501 Safety
- 503 Smoking
- 504 Emergency Closing
- 505 Visitors in the Workplace
- 506 Computer, Internet, & E-Mail Usage
- 601 Employee Conduct, Discipline, & Termination
- 602 Drug & Alcohol Usage
- 603 Sexual & Other Unlawful Harassment
- 604 Attendance & Punctuality
- 605 Personal Appearance
- 606 Whistler Blower Protection
- 607 Retention of Records Relevant to Audits & Reviews

Employee Benefits Policies

- 300 Employee Benefits
- 301 Vacation Benefits
- 302 Holiday
- 303 Workers' Compensation Benefits
- 304 Sick Leave & Family Leave
- 305 Time Off to Vote
- 306 Jury Duty
- 307 Health Insurance
- 308 Retirement Plan
- 401 Payroll
- 502 Work Schedules

Institute for Medical Research, Inc.	Policy on Establishing an Account with IMR	No.	700
		Effective Date	4/14/09
		Revision Date	8/21/13
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy on establishing an account.

Scope

IMR Investigators

Policy

Upon the full execution of a CRADA, Grant Award or other study-related agreement, an account is opened in the Investigator's name to be utilized for research expenditures.

When the Investigator's research protocol has been approved by the appropriate Durham VA Research Committees, the account then becomes active and appropriate research expenses may be submitted by the Investigator and/or his/her designee(s).

The protocol approval process may be addressed at the same time the agreement is being negotiated between IMR and the funding agency. Early notification to IMR of a potential research agreement may expedite the negotiation process. Although initial funding may be received prior to the approval of the protocol, funding cannot be utilized until the protocol has received all necessary approvals.

Each account is coupled with an active project but there are no limits to the number of accounts an Investigator may establish. Upon completion of a project and payment of all associated expenses, any remaining funds that are not required to be returned to the Sponsor may be moved into a miscellaneous account for research use. See the IMR Policy on Residual Funds for details.

At the beginning of each month, a detailed account statement for each account will be provided if there is activity in the prior month. Information is listed in chronological order and subsequent months are added to give the activity for the entire accounting year. If there is no account activity then statements are sent on a quarterly basis.

Institute for Medical	Procurement Policy for Federal Projects	No.	707
		Effective Date	10/1/17
		Revision Date	

Research, Inc.		Final Approval	Approved by IMR Board of Directors: 10-16-17
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Purpose

This policy communicates the Institute for Medical Research, Inc.'s (IMR) methods for the procurement of goods and services obtained with Workforce Investment Opportunity Act (WIOA) funds and sets forth the requirements provided by the Office of Management and Budget (OMB) Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, Final Rule Title 2 of the Code of Federal Regulations; 2 CFR 200.

Background

WIOA Sec. 184(a)(3)(A) requires each State (including the Governor of the State), local area (including the chief elected official for the area), and provider receiving funds under this title to comply with the appropriate uniform administrative requirements for grants and agreements applicable for the type of entity receiving the funds, as promulgated in circulars or rules of the Office of Management and Budget (OMB).

OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, Final Rule Title 2 of the Code of Federal Regulations; 2 CFR 200 supersedes and streamlines requirements from OMB Circulars A-21, A-87, A-110, A-122, A-89, A-102, A-133 and the guidance in Circular A-50 on Single Audit Act follow-up. 2 CFR 200, also referred to as the "Super Circular", consolidates the guidance previously contained in the aforementioned citations into a streamlined format that aims to improve both the clarity and accessibility of the guidance.

The effective date of 2 CFR 200 is December 26, 2014. Fiscal policies and OMB Circulars A-87, A-110, A-122 and A-133 requirement are still in effect for funding distributed *prior* to December 26, 2014. Funding awarded *after* December 26, 2014 must be in compliance with 2 CFR 200.

Procurement standards referenced in [2 CFR 200.110](#) and 200.317 - 200.326, allow for non-federal entities to continue to comply with procurement standards in previous OMB guidance for one additional fiscal year after this part goes into effect (June 30, 2016).

Scope

IMR Board of Directors, Research Investigators and staff and IMR administrative staff

Policy

A. Cost-Reimbursement Only [WIOA Sec. 184(a)(3)(B)]

Procurement transactions under this title between local boards and units of state or local governments shall be conducted on a cost-reimbursement basis only.

B. General Procurement Standards (2 CFR 200.318)

IMR will use documented procurement procedures that reflect State and local laws and regulations, provided that the procurements conform to applicable Federal law and standards identified in 2 CFR Parts 200.317 through 200.326.

IMR will maintain oversight to ensure that contractors perform in accordance with the terms, conditions, and specifications of their contracts or purchase orders.

IMR's [Code of Conduct and Conflict of Interest Policy](#) provides standards of conduct covering conflicts of interest and governing the actions of its employees engaged in the selection, award and administration of contracts. No employee, officer, or agent may participate in the selection, award, or administration of a contract supported by a Federal award if he or she has a real, perceived or potential conflict of interest. Conflicts of interest must be disclosed in writing when known in advance or announced to the voting body. The party must excuse themselves from any further discussion and/or vote on the matter in question. Violations of such standards are subject to disciplinary actions provided in IMR's Code of Conduct and Conflict of Interest Policy.

IMR's procurement procedures will avoid acquisition of unnecessary or duplicative items and promote cost-effective use of shared services by entering into state and local intergovernmental agreements for procurement or use of common or shared goods and services where appropriate. IMR will use Federal excess and surplus property in lieu of purchasing new equipment and property whenever such use is feasible and reduces project costs.

IMR will award contracts only to responsible contractors possessing the ability to perform successfully under the terms and conditions of a proposed procurement. Consideration will be given to such matters as:

- Contractor integrity,
- Compliance with public policy,
- Record of past performance, and
- Financial and technical resources.

IMR will maintain records sufficient to detail the history of procurement. These records will include, but are not limited to:

- Rationale for the method of procurement,
- Selection of contract type,
- Basis for contractor selection or rejection, and
- The basis for the contract price.

Time and materials contracts [For major construction only; 2 CFR 200.318(j)]: IMR may use time and material type contracts only after a determination that no other contract is suitable and if the contract includes a ceiling price that the contractor exceeds at its own risk.

IMR will be responsible for the settlement of all contractual and administrative issues arising out of procurement. These issues include, but are not limited to:

- Source evaluation,
- Protests,
- Disputes, and
- Claims.

C. Competition (2 CFR 200.319)

All procurement transactions must be conducted in a manner providing full and open competition consistent with the standards provided in section 200.319 of 2 CFR 200. In order to ensure objective contractor performance and eliminate unfair competitive advantage, contractors that develop or draft specifications, requirements, statements of work or invitations for bids or requests for proposals must be excluded from competing for such procurements.

IMR procurement transactions will contain no requirements that unduly restrict competition as specified in 200.319(a) and (b).

IMR procurement procedures will ensure that all solicitations:

- Incorporate a clear and accurate description of the technical requirements for the material, product, or service to be procured in a manner that does not unduly restrict competition; and
- Identify all requirements which the offerors must fulfill and all other factors to be used in evaluating bids or proposals.

IMR will ensure that all prequalified lists of persons, firms, or products which are used in acquiring goods and services are current and include enough qualified sources to ensure maximum open and free completion. IMR will not preclude potential bidders from qualifying during the solicitation period.

D. Methods of Procurement (2 CFR 200.320)

IMR may use one of the following methods of procurement:

1. **Micro-purchases** (purchases of \$1 - \$3,500 currently): Procurement by micro-purchase is the acquisition of supplies or services, the aggregate dollar amount per transaction which does not exceed the micro-purchase threshold (currently \$3,500, see Micro-purchase definition). To the extent practicable, IMR will distribute micro-purchases equitably among qualified suppliers. Micro-purchases may be awarded without soliciting competitive quotations if IMR considers the price to be reasonable.
2. **Small Purchases** (purchases of \$3501 - \$150,000): Small purchase procedures are those relatively simple and informal procurement methods for securing services, supplies, or other property that do not cost more than the Simplified Acquisition Threshold (as of the publication of 2 CFR Part 200, the Simplified Acquisition Threshold is \$150,000 but is periodically adjusted for inflation.) If small purchase procedures are used, price or rate quotations must be obtained from an adequate number of qualified sources.
3. **Competitive Proposals** (purchases of \$150,001 – and above): The technique of competitive proposals is normally conducted with more than one source submitting an offer, and either a fixed price or cost-reimbursement type contract is awarded. It is generally used when conditions are not appropriate for the use of sealed bids. If this method is used, the following requirements apply:
 - a. **Purchases over \$150,000 must be approved by the Board of Directors.**
 - b. Proposals must be solicited from an adequate number of qualified sources;
 - c. IMR will follow its written method for conducting technical evaluations of the proposals received and for selecting recipients;

- d. Contracts will be awarded to the responsible firm whose proposal is most advantageous to the program, with price and other factors considered; and
 - e. IMR may use competitive proposal procedures for qualifications-based procurement of architectural/engineering (A/E) professional services whereby competitors' qualifications are evaluated and the most qualified competitor is selected, subject to negotiation of fair and reasonable compensation. The method, where price is not used as a selection factor, can only be used in procurement of A/E professional services. It cannot be used to purchase other types of services though A/E firms are a potential source to perform the proposed effort.
4. **Sealed Bids (Formal advertising)** (purchases of \$150,001 – and above): Bids are publicly solicited and a firm fixed price contract (lump sum or unit price) is awarded to the responsible bidder whose bid, conforming with all the material terms and conditions of the invitation for bids, is the lowest in price. The sealed bid method is the preferred method for procuring construction, if the following conditions apply:
- a. **Purchases over \$150,000 must be approved by the Board of Directors.**
 - b. In order for sealed bidding to be feasible, the following conditions should be present:
 - i. A complete, adequate, and realistic specification or purchase description is available;
 - ii. Two or more responsible bidders are willing and able to compete effectively for the business; and
 - iii. The procurement lends itself to a firm fixed price contract and the selection of the successful bidder can be made principally on the basis of price.
 - c. If sealed bids are used, the following requirements apply:
 - i. Bids must be solicited from an adequate number of known suppliers, providing them sufficient response time prior to the date set for opening the bids for state, local and tribal governments, the invitation for bids must be publically advertised;
 - ii. The invitation for bids, which will include any specifications and pertinent attachments, must define the items or services in order for the bidder to properly respond;
 - iii. All bids will be opened at the time and place prescribed in the invitation for bids, and for local and tribal governments, the bids must be opened publicly;
 - iv. A firm fixed price contract award will be made in writing to the lowest responsive and responsible bidder. Where specified in bidding documents, factors such as discounts, transportation cost, and life cycle costs must be considered in determining which bid is lowest. Payment discounts will only be used to determine the low bid when prior experience indicates that such discounts are usually taken advantage of; and
 - v. Any or all bids may be rejected if there is a sound documented reason.

5. Noncompetitive Proposals (Sole Source): Procurement by noncompetitive proposals is procurement through solicitation of a proposal from only one source and may be used only when one or more of the following circumstances apply:

- a. The item is available only from a single source; or
- b. The public exigency or emergency for the requirement will not permit a delay resulting from competitive solicitation; or
- c. The Federal awarding agency or pass-through entity expressly authorizes noncompetitive proposals in response to a written request from the non-Federal entity; or
- d. After solicitation of a number of sources, competition is determined inadequate.
- e. **Purchases over \$150,000 must be approved by the Board of Directors.**

E. Contracting with Small and Minority Businesses, Women's Business Enterprises, and Labor Surplus Area Firms (2 CFR 200.321)

IMR will take necessary affirmative steps to ensure that minority businesses, women's business enterprises, and labor surplus firms are used when possible.

F. Contract Cost and Price (2 CFR 200.323)

- 1. IMR will perform a cost or price analysis in connection with every procurement action in excess of the Simplified Acquisition Threshold (\$150,000) including contract modifications. The method and degree of analysis is dependent on the facts surrounding the particular procurement situation, but as a starting point, IMR will make independent estimates before receiving bids or proposals.
- 2. Where applicable, IMR will negotiate profit as a separate element of the price for each contract in which there is no price competition and in all cases where cost analysis is performed. To establish a fair and reasonable profit, consideration will be given to the complexity of the work to be performed, the risk borne by the contractor, the contractor's investment, the amount of subcontracting, the quality of its record of past performance, and industry profit rates in the surrounding geographical area for similar work.
- 3. Costs or prices based on estimated costs for contracts under the Federal award are allowable only to the extent that costs incurred or cost estimates included in negotiated prices would be allowable for IMR under Subpart E – Cost Principles-of the Uniform Administrative Guidance 2 CFR Part 200. IMR may reference its own cost principles that comply with the Federal cost principles.
- 4. The cost plus a percentage of cost and percentage of construction cost methods of contracting are not allowable.

G. Procurement Review (2 CFR 200.324)

- 1. IMR will make available, upon request by the Federal awarding agency or pass-through entity, technical specifications on proposed procurements where the Federal awarding agency or pass-through entity believes such review is needed to ensure that the item or service specified is the one being proposed for acquisition.

2. IMR will make available upon request, for the Federal awarding agency or pass-through entity pre-procurement review, procurement documents, such as requests for proposals or invitations for bids, or independent cost estimates when the circumstances detailed in 200.323(b) apply.
3. IMR is exempt from the pre-procurement review if the Federal awarding agency or pass-through entity determines that its procurement systems comply with this part.
 - a. IMR may request that its procurement system be reviewed by the Federal awarding agency or pass-through entity to determine whether its system meets these standards in order for its system to be certified. Generally, these reviews must occur where there is continuous high-dollar funding, and third party contracts are awarded on a regular basis.
 - b. IMR may self-certify its procurement system. Such self-certification must not limit the Federal awarding agency's right to survey the system. Under a self-certification procedure, the Federal awarding agency may rely on written assurances from IMR that it is complying with these standards. IMR must cite specific policies, regulations, or standards as being in compliance with these requirements and have its system available for review.

H. Bonding Requirements (2 CFR 200.325)

For construction or facility improvement contracts or subcontracts exceeding the Simplified Acquisition Threshold (currently \$150,000), the Federal awarding agency or pass-through entity may accept the bonding policy and requirements of the non-federal entity provided that the Federal awarding agency or pass-through entity has made a determination that the Federal interest is adequately protected. If such a determination has not been made, the requirements of 200.325(a) – (c) must be followed.

I. Contract Provisions (2 CFR 200.326)

IMR's contracts must contain the applicable provisions described in Appendix II to Part 200 – "Contract Provisions for non-Federal Entity Contracts Under Federal Awards".

J. Subrecipient and Contractor Determinations (2 CFR 200.330)

IMR will make a case-by-case determination whether each agreement it makes for the disbursement of Federal program funds casts the party receiving the funds in the role of a subrecipient or a contractor (see Subrecipient and Contractor in the Definitions section of this policy).

In determining whether an agreement between IMR and another non-Federal entity casts the latter as a subrecipient or a contractor, the substance of the relationship is more important than the form of agreement. IMR will use judgment in classifying each agreement as a subaward or a procurement contract.

In compliance with 2 CFR 200.330, IMR will classify eligible providers of WIOA Adult, Dislocated Worker and Youth services as subrecipients.

K. Delivery of Career Services-Adult and Dislocated Workers [WIOA Sec. 134(c)(2)(C)]

Career services described in WIOA Section 134(A) for eligible adult and dislocated workers shall be provided through the one-stop delivery system-

1. Directly through one-stop operators identified pursuant to section 121(d), or
2. Through contracts with service providers (subrecipients), which may include contracts with public, private for-profit, and private nonprofit service providers, approved by the local board.

L. Training Contracts [WIOA Sec. 134(c)(3)(G)(ii)]

1. Training services authorized under this paragraph may be provided pursuant to a contract for services in lieu of an individual training account (ITA) if-
 - a. The Consumer Choice Requirements [WIOA Sec. 134(c)(3)(F)] are met;
 - b. Such services are on-the-job training (OJT), customized training, incumbent worker training or transitional employment;
 - c. The local board determines there are an insufficient number of eligible providers of training services in the local area involved to accomplish the purposes of a system of individual training accounts;
 - d. The local board determines that there is a training services program of demonstrated effectiveness offered in the local area by a community-based organization or another private organization to serve individuals with barriers to employment;
 - e. The local board determines that-
 - i. It would be most appropriate to award a contract to an institution of higher education or other eligible provider of training services in order to facilitate the training of multiple individuals in in-demand industry sectors or occupations; and
 - ii. Such contract does not limit customer choice; or
 - f. The contract is a pay-for-performance contract.
2. Training services must be directly linked to an in-demand industry sector or occupation in the local area or the planning region, or in another area to which an adult or dislocated worker receiving such services is willing to relocate, except that a local board may approve training services for occupations determined by the local board to be in sectors of the economy that have a high potential for sustained demand or growth in the local area [WIOA Sec. 134(c)(3)(G)(iii)].
3. Nothing in this paragraph shall be construed to preclude the combined use of individual training accounts (ITAs) and contracts in the provision of training services, including arrangements that allow individuals receiving ITAs to obtain training services that are contracted this clause [WIOA Sec. 134(c)(3)(G)(iii)].

M. Selection of Eligible Providers of Youth Workforce Investment Activities (WIOA Sec. 107(d)(10)(B) and Sec. 123)

1. The local board shall award grants or contracts on a competitive basis to providers (subrecipients) of youth workforce investment activities based on the criteria in the State plan (including such quality criteria as the Governor shall establish for a training program that leads to a recognized postsecondary credential), and taking into consideration the ability of the providers to meet performance accountability measures based on primary indicators of performance for the youth program as described in

WIOA Section 116(b)(2)(A)(ii) and in WIOA section 102(b)(2)(D)(i)(V), based on the recommendations of the youth standing committee; and

2. Shall conduct oversight with respect to such providers.
3. Exceptions: A local board may award grants or contracts on a sole source basis if such board determines there is an insufficient number of eligible providers of youth workforce investment activities in the local area involved for grants and contracts to be awarded on a competitive basis.
4. Consistent with section 123, the local board may terminate for cause the eligibility of such providers (subrecipients).

N. Selection of One-Stop Operators [WIOA Sec. 121(d)]

The local board, with the agreement of the chief elected official, is authorized to designate or certify one-stop operators and to terminate for cause the eligibility of such operators. To be eligible to receive funds made available under this subtitle to operate a one-stop center, an entity:

1. Shall be designated or certified as a one-stop operator through a competitive process; and
2. Shall be an entity (public, private, or nonprofit), or consortium of entities (including a consortium of entities that, at a minimum, includes 3 or more of the one-stop partners described in subsection 121(b)(1)), of demonstrated effectiveness.

IMR will ensure that in carrying out activities under this title, one-stop operators-

1. Disclose any potential conflicts of interest arising from the relationships of the operators with particular training service providers or other service providers;
2. Do not establish practices that create disincentives to providing services to individuals with barriers to employment who may require longer-term services, such as intensive employment, training and education services; and
3. Comply with Federal regulations, and procurement policies, relating to the calculation and use of profits.

Q. Suspension and Debarment (2 CFR2900)

Non-federal entities and contractors are subject to the non-procurement debarment and suspension regulations implementing Executive Orders 12549 and 12689, 2 CFR part 180. These regulations restrict awards, subawards, and contracts with certain parties that are debarred, suspended, or otherwise excluded from or ineligible for participation in federal assistance programs or activities.

DEFINITIONS

Contract (2 CFR 200.22): A legal instrument by which a non-Federal entity purchases property or services needed to carry out the project or program under a Federal award. The term as used in this part does not include a legal instrument, even if the non-Federal entity considers it a contract, when the substance of the transaction meets the definition of a Federal award or subaward.

Contractor (2 CFR 200.23): An entity that receives a contract as defined in "Contract", above.

(2 CFR 200.330(b)): A contract is for the purpose of obtaining goods and services for the non-Federal entity's own use and creates a procurement relationship with the contractor (see 200.22 Contract). Characteristics indicative of a procurement contract relationship between the non-Federal entity and a contractor include when the non-Federal entity receiving the Federal funds:

- 1) Provides the goods and services within normal business operations;
- 2) Provides similar goods or services to many different purchasers;
- 3) Normally operates in a competitive environment;
- 4) Provides goods or services that are ancillary to the operation of the Federal program; and
- 5) Is not subject to compliance requirements of the Federal program as a result of the agreement, though similar requirements may apply for other reasons.

Cooperative Agreement (2 CFR 200.24): A legal instrument of financial assistance between a Federal awarding agency or pass-through entity and a non-Federal entity that, consistent with 31 U.S.C. 6302- 6305:

- (a) Is used to enter into a relationship the principal purpose of which is to transfer anything of value from the Federal awarding agency or pass-through entity to the non-Federal entity to carry out a public purpose authorized by a law of the United States and not to acquire property or services for the Federal government of pass-through entity's direct benefit or use;
- (b) Is distinguished from a grant in that it provides for substantial involvement between the Federal awarding agency or pass-through entity and the non-Federal entity in carrying out the activity contemplated by the Federal award.

Customized Training (WIOA Sec. 3(14): Training-

- A. That is designed to meet the specific requirements of an employer (or group of employers);
- B. That is conducted with a commitment by the employer to employ an individual upon successful completion of the training; and
- C. For which the employer pays a significant portion of the cost of training, as determined by the local board, taking into account the size of the employer and other factors determined by the board and further defined in this part.

Federal Award (2 CFR 200.38): Federal award has the meaning, depending on the context, in either paragraph (a) or (b) of this section:

(a)(1): The Federal financial assistance that a non-Federal entity receives directly from a Federal awarding agency or indirectly from a pass-through entity.

(a)(2): The cost-reimbursement contract under the Federal Acquisition Regulations that a non-Federal entity receives directly from a Federal awarding agency or indirectly from a pass-through entity.

- (b) The instrument setting forth the terms and conditions. The instrument is the grant agreement, cooperative agreement, other agreement for assistance in paragraph (b) of

200.40 Federal financial assistance, or the cost-reimbursement contract awarded under the Federal Acquisition Regulations.

- (c) Federal award does not include other contracts that a Federal agency uses to buy goods or services from a contractor or a contract to operate Federal government owned contractor operated facilities (GOCOs).
- (d) See also definitions of Federal financial assistance, grant agreement, and cooperative agreement.

Federal Awarding Agency (2 CFR 200.37): The Federal agency that provides a Federal Award directly to a non-Federal entity.

Federal Financial Assistance (2 CFR 200.40): For grants and cooperative agreements, assistance that non-Federal entities receive or administer in the form of:

- (a) Grants;
- (b) Cooperative agreements;
- (c) Non-cash contributions or donations of property (including donated surplus property);
- (d) Direct appropriations; and
- (e) Other financial assistance.

Fixed Amount Awards (2 CFR 200.45): A type of grant agreement under which the Federal awarding agency or pass-through entity provides a specific level of support without regard to actual costs incurred under the Federal award.

Grant Agreement (2 CFR 200.51): A legal instrument of financial assistance between a Federal awarding agency or pass-through entity and a non-Federal entity that, consistent with 31 U.S.C. 6302, 6304:

- (a) Is used to enter into a relationship the principal purpose of which is to transfer anything of value from the Federal awarding agency or pass-through entity to the non-Federal entity to carry out a public purpose authorized by a law of the United States and not to acquire property or services for the Federal awarding agency or pass-through entity's direct benefit or use;
- (b) Is distinguished from a cooperative agreement in that it does not provide for substantial involvement between the Federal awarding agency or pass-through entity and the non-Federal entity in carrying out the activity contemplated by the Federal award.

Incumbent Worker Training (proposed CFR 20 680.780): WIOA funded training for incumbent workers is designed to meet the specific requirements of an employer (including a group of employers) to retain a skilled workforce or avert the need to lay off employees by assisting the workers in obtaining the skills necessary to retain employment and conducted with a commitment by the employer to retain or avert the layoff of the incumbent worker. An ideal incumbent worker training would be one where a participant acquires new skills allowing him or her to move into a higher skilled and higher paid job with the company, thus allowing the company to hire a job seeker to backfill the incumbent worker's position. Incumbent worker training must increase both the participant's **and** the company's competitiveness. **An**

incumbent worker does not necessarily have to meet the eligibility requirement for career and training services for adults and dislocated workers under WIOA.

Individual with Barrier to Employment [WIOA Sec. 3(24)]: A member of one or more of the following populations:

- Displaced homemakers;
- Low-income individuals;
- Indians, Alaska Natives, and Native Hawaiians;
- Individuals with disabilities;
- Older individuals;
- Ex-offenders;
- Homeless individuals (see definition of Homeless Individuals), or homeless children and youth (see definition of Homeless Children and Youth);
- Youth who are in or have aged out of the foster care system;
- Individuals who are English language learners, individuals who have low levels of literacy, and individuals facing substantial cultural barriers;
- Eligible migrant and seasonal farm workers;
- Individuals within two (2) years of exhausting lifetime TANF eligibility under part A of title IV of the Social Security Act (42 U.S.C. 601 et seq.);
- Single parents (including single pregnant women);
- Long-term unemployed individuals;
- Such other groups as the Governor involved determines to have barriers to employment.

Local Board (WIOA Sec. 3(33)): A local workforce development board established under WIOA section 107, subject to section 107(c)(4)(B)(i).

Local Plan (WIOA Sec. 3(35)): A plan submitted under WIOA section 108, subject to WIOA section 106(c)(3)(B).

Micro-Purchase (2 CFR 200.67): A purchase of supplies or services using the simplified acquisition procedures, the aggregate amount of which does not exceed the micro-purchase threshold. Micro-purchase procedures comprise a subset of a non-Federal entity's small purchase procedures. The non-Federal entity uses such procedures in order to expedite the completion of its lowest-dollar small purchase transactions and minimize the associated administrative burden and costs. The micro-purchase threshold is set by the Federal Acquisition Regulation at 48 CFR Subpart 2.1 (Definitions). It is \$3,000 except as otherwise discussed in Subpart 2.1 of that regulation, but this threshold is periodically adjusted for inflation.

Non-Federal Entity (2 CFR 2900): A state, local government, Indian tribe, institution of higher education (IHE), for-profit entity, foreign public entity, foreign organization or nonprofit organization that carries out a Federal award as a recipient or subrecipient.

On-the-Job Training (OJT) (WIOA Sec. 3(44)): Training by an employer that is provided to a paid participant while engaged in productive work in a job that-

- A. Provides knowledge or skills essential to the full and adequate performance of the job;
- B. Is made available through a program that provides reimbursement to the employer of up to 50% of the wage rate of the participant, except as provided in WIOA section 134(c)(3)(H), for the extraordinary costs of providing the training and additional supervision related to the training; and

- C. Is limited in duration as appropriate to the occupation for which the participant is being trained, taking into account the content of the training, the prior work experience of the participant, and the service strategy of the participant, as appropriate.

Pass-through Entity (2 CFR 200.74): A non-Federal entity that provides a subaward to a subrecipient to carry out part of a Federal program.

Proposal Costs (CFR 200.460): The costs of preparing bids, proposals, or applications on potential Federal and non-Federal awards or projects, including the development of data necessary to support the non-Federal entity's bids or proposals.

Simplified Acquisition Threshold (2 CFR 200.88): The dollar amount below which a non-Federal entity may purchase property or services using small purchase methods. Non-Federal entities adopt small purchase procedures in order to expedite the purchase of items costing less than the simplified acquisition threshold. The simplified acquisition threshold is set by the Federal Acquisition Regulation at 48 CFR Subpart 2.1 (Definitions) and in accordance with 41 U.S.C. 1908. As of the publication of this part, the simplified acquisition threshold is \$150,000, but this threshold is periodically adjusted for inflation.

State Plan (WIOA Sec. 3(58)): A unified State plan under WIOA section 102 or a combined State plan under WIOA section 103.

Subaward (2 CFR 200.92): An award provided by a pass-through entity to a subrecipient for the subrecipient to carry out part of a Federal award received by the pass-through entity. It does not include payments to a contractor or payments to an individual that is a beneficiary of a Federal program. A subaward may be provided through any form of legal agreement, including an agreement that the pass-through entity considers a contract.

Subrecipient (2CFR 200.93): A non-Federal entity that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. A subrecipient may also be a recipient of other Federal awards directly from a Federal awarding agency.

2 CFR 200.330(a): A subaward is for the purpose of carrying out a portion of a Federal award and creates a Federal assistance relationship with the subrecipient, characteristics of which support the classification of the non-Federal entity as a subrecipient and include when the non-Federal entity:

- 1) Determines who is eligible to receive what Federal assistance;
- 2) Has its performance measured in relation to whether objectives of a Federal program are met;
- 3) Has responsibility for programmatic decision making;
- 4) Is responsible for adherence to applicable Federal program requirements specified in the Federal award; and
- 5) In accordance with its agreement, uses the Federal funds to carry out program for a public purpose specified in authorizing statute, as opposed to providing goods or services for the benefit of the pass-through entity.

Transitional Employment (WIOA Sec. 134(5) and proposed 20 CFR 680.830): A transitional job is one that provides a limited work experience (WEX), that is subsidized in the public, private, or non-profit sectors for those individuals with barriers to employment because of

chronic unemployment or inconsistent work history; these jobs are designed to enable an individual to establish a work history, demonstrate work success, and develop the skills that lead to unsubsidized employment.

Youth Standing Committee [WIOA Sec. 107(b)(4)(A)]: The local board may designate and direct the activities of standing committees to provide information and to assist the local board in carrying out activities under WIOA.

[WIOA Sec. 107(b)(4)(A)(ii)]: The Youth Standing Committee provides information to the local board for the purpose of assisting with planning, operational, and other issues relating to the provision of services to youth. The Youth Standing Committee shall include community-based organizations with a demonstrated record of success in serving eligible youth.

ACTION REQUIRED

IMR and its subrecipients of WIOA funds must adhere to the procurement practices outlined in this policy.

REFERENCES

- [WIOA](#), Sections:
 - 3-Definitions
 - 107(d)(10)(B)-Selection of Youth Providers
 - 107(h) - Conflict of Interest
 - 108(16)-Competitive Process in the Local Plan
 - 108(19) – Training Services in the Local Plan
 - 134(c)(3)-Training Services Adults and Dislocated Workers
 - 134(c)(3)(G)(ii)-Training Contracts
- [OMB Uniform Guidance 2 CFR Part 200](#)
Parts 200.318-200.326
- [Final Guidance: Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, Office of Management and Budget \(OMB\); Federal Register Vol. 79, No. 244](#)
 - [2 CFR part 2900](#), Department of Labor
- [TEGL 15-14](#)-Implementation of the New Uniform Guidance Regulations
- [WIN 0064, Change 1](#) – Federal Awarding Agency Regulatory Implementation of OMB's Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, Final Rule, 2 CFR 200

INQUIRIES

Direct Inquiries To:
Institute for Medical Research, Inc.
508 Fulton Street, 151-IMR
Durham, NC 27705
919-286-0411, ext. 7795

APPROVED

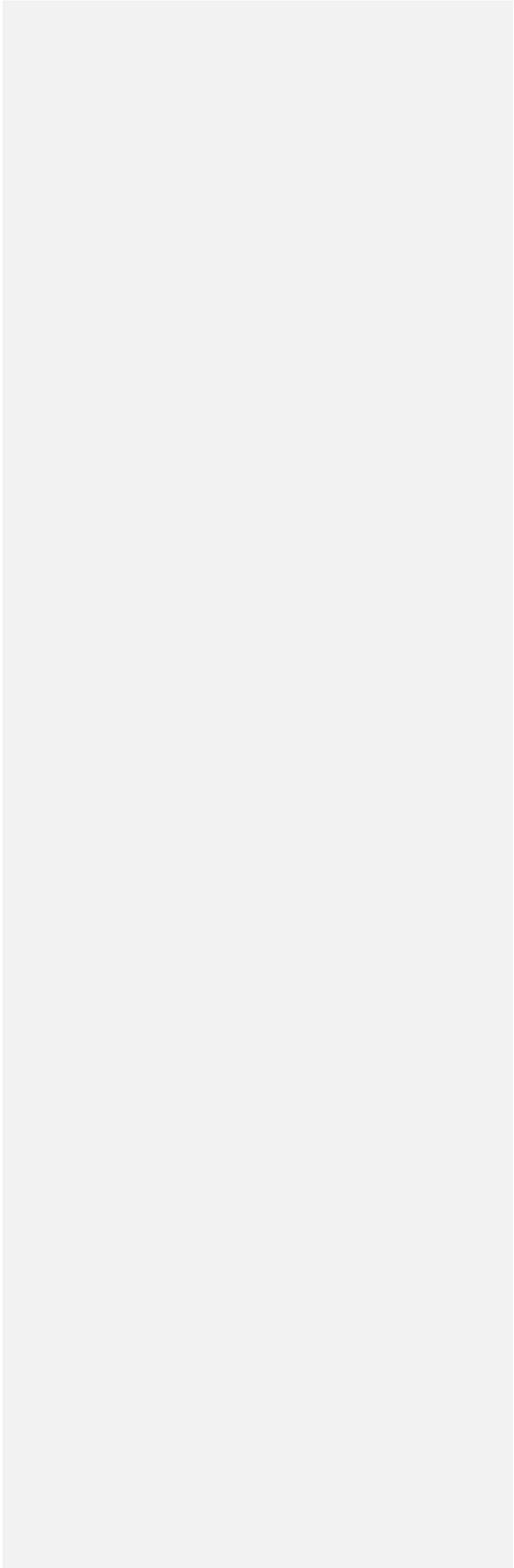
APPROVED

Lorie Moll
Executive Director

Date _____

Dr. John Whited, President

Date _____



Institute for Medical Research, Inc.	Equal Employment Opportunity	No. 101	
		Effective Date 4/14/09	
		Revision Date	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy regarding Equal Employment Opportunity.

Scope

All IMR Investigators and Employees

Policy

In order to provide equal employment and advancement opportunities to all individuals, employment decisions at IMR will be based on merit, qualifications, and abilities. IMR does not discriminate in employment opportunities or practices on the basis of race, color, religion, sex, sexual orientation, status as a parent, national origin, age, disability, or any other characteristic protected by law.

IMR will make reasonable accommodations for qualified individuals with known disabilities unless doing so would result in an undue hardship. This policy governs all aspects of employment, including selection, job assignment, compensation, promotion, discipline, termination, and access to benefits and training.

Any employees with questions or concerns about any type of discrimination in the workplace are encouraged to bring these issues to the attention of their immediate supervisor or the IMR Administrative Office. Employees can raise concerns and make reports without fear of reprisal. Anyone found to be engaging in any type of unlawful discrimination may be subject to disciplinary action, up to and including termination of employment.

Institute for Medical Research, Inc.	Immigration Law Compliance	No. 103	
		Effective Date 4/14/09	
		Revision Date 8/21/13	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy regarding immigration law compliance.

Scope

All IMR Employees and Investigators

Policy

IMR is committed to employing only United States citizens and aliens who are authorized to work in the United States and does not unlawfully discriminate on the basis of citizenship or national origin.

In compliance with the Immigration Reform and Control Act of 1986, each new employee, as a condition of employment, must complete the Employment Eligibility Verification Form I-9 and present documentation establishing identity and employment eligibility. As required by law, IMR participates in the Employment Eligibility Verification Program (E-Verify) which electronically confirms an employee's eligibility to work in the United States after the completion of the Form I-9. This form and documentation must be completed and verified prior to beginning work.

Authority for the E-Verify Program is found in Title IV, subtitle A, of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (IIRIRA), Pub. L. 104-208, 110 Stat. 3009, as amended (8 U.S.C. § 1323a note). Authority for use of the E-Verify Program by Federal contractors and subcontractors covered by the terms of Subpart 22.18, "Employment Eligibility Verification", of the Federal Acquisition Regulation (FAR) to verify the employment eligibility of certain employees working on Federal contracts is also found in Subpart 22.18 and in Executive Order 12989, as amended.

Employees must notify the IMR Administrative Office immediately if their immigration status changes.

Employees may raise questions or complaints about immigration law compliance without fear of reprisal.

Institute for Medical Research, Inc.	Conflict of Interest	No. 104	
		Effective Date 10-29-12	
		Revision Date 8-22-16	
		Final Approval	Approved by IMR Board of Directors: 8-22-16

Purpose

This policy is designed to protect the interests of IMR by providing guidance on participation in IMR matters that might permit an officer, director, or employee to choose personal interests over the interests of IMR, or that might call into question the employee's independence, impartiality, or integrity of service to IMR.

Application of Policy

- 1.) Pursuant to 38 U.S.C. 7366(c), as amended by Public Law 111-163 801-806, all directors, officers, employees of IMR are subject to this conflict of interest policy. This policy is intended to supplement, but not replace, applicable Federal and state laws and Department of Veterans Affairs (VA) regulations and policies governing conflicts of interest, including those VA policies pertaining to research conflicts of interest.
- 2.) VA employees statutorily mandated to serve as NPC Directors as part of official VA duty ("Statutory VA Directors") and IMR employees who hold a VA Without Compensation (WOC) appointment, or who are detailed or assigned to VA under the Intergovernmental Personnel Act, are subject to the Federal conflict of interest laws and regulations, which control if in conflict with this policy.

General Policy

- 1.) Unless authorized by the IMR Board of Directors an IMR Director, officer or employee is prohibited from participating as part of his IMR duties in any matter in which he has a Conflict of Interest or the appearance of a Conflict of Interest. To participate in a matter means to engage in an aspect of the decision-making process through recommendation, approval, disapproval, investigation, advice-giving or the like, or through the active supervision of a subordinate who is so engaged.
- 2.) The final determination of the existence of a Conflict of Interest or the appearance of a Conflict of Interest rests with the Board of Directors of IMR.
- 3.) Each Director, officer or employee has an obligation to inform the Executive Director as soon as he believes that he has a real or potential Conflict of Interest or appearance of a Conflict of Interest that could affect his participation in an IMR matter.

Definitions

- 1.) Business Associate: A "Business Associate" is any person or entity, other than IMR, with whom an IMR officer, director or employee: 1) engages in the exchange of goods or

services for remuneration (other than routine consumer transactions); 2) served within the past year as an officer, director, trustee, general partner, agent, attorney, consultant, contractor or employee; or 3) or any of their Relatives serves, seeks to serve, or has an arrangement to serve as an officer, director, trustee, general partner, agent, attorney, consultant, contractor or employee.

- 2.) Close Relationship: A Director, officer or employee of IMR has a Close Relationship with Relatives, members of his household, and Business Associates such as general partners.
- 3.) Conflict of Interest: A Conflict of Interest exists when the interest of a director, officer or employee is or appears to be competing with the interest of IMR. A director, officer or employee may be considered to have a conflict of interest whenever he or someone with whom he has a Close Relationship has an existing financial or other material interest that affects or appears to affect the independence, objectivity, or integrity of the director, officer or employee in the discharge of his IMR responsibilities. Additionally, personal and business relationships may cause "dual loyalties" that are unrelated to personal financial gain, but nonetheless may raise conflict of interest concerns.
- 4.) Financial or Other Material Interest: An IMR director, officer or employee has a "Financial Interest" if through business, investment, or Relatives he has an ownership or investment interest in, or a compensation arrangement with, any entity or individual with whom IMR has or is contemplating a transaction or arrangement.
- 5.) Key Employee: An IMR employee with decision-making authority.
- 6.) Relatives: For purposes of this policy, "Relatives" are the spouse, parent, child and any other relative by blood or marriage with whom an IMR officer, director, or employee has similarly close personal ties, as well as any other member of his household.

Disclosure

- 1.) Duty to Disclose. All IMR directors, officers, and employees have a duty to disclose actual or potential Conflicts of Interest or appearance of a Conflict of Interest in accordance with this Policy.
- 2.) Disclosure Documents. The Board of Directors shall approve the content of the template Disclosure Questionnaire (Attachment A) and the Affirmation of Compliance statement (Attachment B) and any future substantive changes to them.
- 3.) Disclosure Procedures
 - A. All IMR Directors, officers and employees will complete a Disclosure Questionnaire and an Affirmation of Compliance upon initiating their association with IMR.
 - B. All IMR directors, officers and Key Employees will submit to the Executive Director a new Disclosure Questionnaire and Affirmation of Compliance statement any time a change in circumstances may result in a potential conflict of interest, but at least annually.

- C. Employees other than Key Employees will submit to the Executive Director a new Disclosure Questionnaire and Affirmation of Compliance statement any time a change in circumstances may result in a potential conflict of interest.

4.) Review

- A. The Executive Director shall conduct a preliminary review of all Disclosure Questionnaires.
 - B. The Executive Director will provide to the Board of Directors any Disclosure Questionnaire of a director, officer or Key Employee that contains a disclosure (i.e. a “yes” response). The Board will determine whether a conflict exists and if so, how to manage the conflict if possible. Disclosure Questionnaires containing no disclosures and the Affirmation of Compliance statements need to be submitted to the Board of Directors.
 - C. The Executive Director will provide to the Chair of the Board (or equivalent position) and the employee’s supervisor, the Disclosure Questionnaire of a non-Key Employee that contains a disclosure. The Chair, supervisor, and Executive Director that requires consideration by the Board.
- 5.) Sanctions. Failure to disclose as required by this Policy may result in sanctions, up to and including dismissal from IMR.
- 6.) Tracking. The Executive Director shall ensure that all IMR personnel fulfill their disclosure requirements and shall ensure that written documentation showing fulfillment of such requirement is maintained for three years.
- 7.) Confidentiality. Disclosure Questionnaires may contain confidential information and will be treated as confidential documents.
- 8.) Storage and Retention. The Executive Director will maintain Disclosure Questionnaires and Affirmations of Compliance statements with the official records of IMR in a secured container. The Disclosure Questionnaires and Affirmation of Compliance statements will be retained for at least three years with the most recent version of each retained until the end of the individual’s IMR relationship.

Requirement for Board Review of Potential Conflicts

- 1.) Whenever there is a reason to believe that a potential conflict exists between any interest of an IMR board member, officer or employee, and their duty to the IMR, the Board will promptly convene a meeting to determine whether a Conflict of Interest exists and the appropriate response.
- 2.) Any response by the Board will include, but may not necessarily be limited to, invoking the procedures described below with respect to a specific proposed matter.

- 3.) If there to believe that a potential conflict affects VA interest, the Board will bring the potential conflict to the attention of the appropriate VA authorities which may include the facility Research Conflict of Interest Committee or a VA OGC Deputy

Procedures for Determining and Managing Conflicts of Interest

- 1.) When a potential conflict exists between the interest of IMR and a director, officer or employee, the Board will consider the matter during a meeting of the Board. The affected individual shall recuse himself from participating in the potential Conflict of Interest and from the Board meeting at which the potential Conflict of Interest is considered.
- 2.) Procedures. Until such time as the Conflict of Interest is resolved, the affected individual shall recuse himself from participating in the matter that invoked the potential Conflict of Interest concern. The following procedures will apply:
 - A. Board Review. A director, officer or employee who has a potential conflict of interest with respect to a proposed IMR decision, policy or transaction or arrangement (an "interested party") will not participate in any way in, or be present during, the deliberations and decision-making vote of NPC with respect to such matter. However, that person will have an opportunity to provide factual information about the proposed conflict and/or matter regarding the potential conflict. Also, the Board may request that an interested party be available to answer questions. Board options include but are not limited to:
 - I. Allowing the proposed matter to go forward upon finding it in the best interest of IMR;
 - II. Prohibiting the proposed matter from going forward if it is found to have been irreparably tainted by the Conflict of Interest;
 - III. Approving mitigating actions (including but not limited to recusal, limitation of duties, transfer or reassignment, additional supervisory review or other action considered appropriate by the Board); or
 - IV. Recommending an alternative arrangement.
 - B. Vote. A decision by the disinterested members of the Board will be made by vote of a majority of members in attendance at a meeting for which a quorum is present. An interested director will not be counted for purposes of determining whether a quorum is present, or for purposes of determining what constitutes a majority vote of directors in attendance. Any person who is the subject of such vote shall not be present.
 - C. Minutes. The minutes of the Board meeting will reflect that the conflict disclosure was made to the Board, the vote taken and, when applicable, the abstention from voting and participation by any interested party. Whenever possible, the minutes should frame the decision in such a way that it provides guidance for consideration of future conflict of interest situations.

Violations of Conflict of Interest Policy

- 1.) If a director, officer, employee, or the supervisor of an IMR employee, has reason to believe that any other director, officer or employee has failed to disclose an actual or potential conflict of interest, such person has a responsibility to inform the chair of the Board or the executive director of their belief and its basis. In such event or should the chair of the Board, executive director, or any member of the Board become aware of a possible violation of this Policy, the chair of the Board, executive director, or other Director will refer the matter to the Board. The Board will inform the person of the allegation and will allow the person an opportunity to explain the alleged failure to disclose.
- 2.) If after affording an IMR director, officer, or employee with a potential or actual conflict an opportunity to disclose all material facts, the Board decides that such an individual has in fact failed to disclose a possible conflict of interest, the Board will determine the corrective steps to be taken and/or disciplinary action.

Training

- 1.) Requirements
 - A. All Directors, officers and employees (including those with VA WOC appointments to conduct VA research or education activities) shall receive training on this Policy within ninety (90) days of hire or affiliation with IMR.
 - B. Directors, officers and Key Employees shall receive training on this Policy annually thereafter.
- 2.) Tracking. The Executive Director shall ensure that all NPC personnel fulfill their training requirements and shall ensure that written documentation of such training is maintained for three years.
- 3.) Sanctions. Failure to fulfill the Training requirement may result in sanctions up to and including dismissal.

Training Requirements of VHA Handbook 1200.17

TRAINING	All NPC Staff	Key NPC Staff	Board Members and Officers
Mandatory Internal Controls. This is a one time training to be taken within the first 90 days of employment at the NPC or appointment to the Board.	No	Yes	Yes
Conflict of Interest Training. Initial training is required within 90 days of employment at the NPC or appointment to the Board.	Yes	Yes	Yes
Conflict of Interest Training. Annual training is required.	No	Yes	Yes
Both of these trainings are available on TMS for VA and non-VA employees. The Executive Director is responsible for ensuring that the facility Education team places these on the VA employees sites.			

Institute for Medical Research, Inc.	Policy on Outside Employment	No. 105	
		Effective Date 4/14/09	
		Revision Date	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's guidelines regarding outside employment.

Scope

IMR Board of Directors, Employees and Investigators

Policy

Employees may hold outside jobs as long as they meet the performance standards of their job with IMR. All employees will be judged by the same performance standards and will be subject to IMR's scheduling demands, regardless of any existing outside work requirements.

If IMR determines that an employee's outside work interferes with the performance or the ability to meet the requirements of their IMR position, the employee may be asked to terminate the outside employment if he or she wishes to remain in their IMR position.

A Federal criminal statute prohibits employees from participating personally and substantially in a particular matter in which the employee, to the employee's knowledge, has a financial interest, if the matter would directly and predictably affect that financial interest. The Government-wide Standards of Ethical Conduct for Employees of the Executive Branch, found in 5 CRF 2635, contain additional restrictions on outside activities.

Institute for Medical Research, Inc.	Policy on Employment Applications and Categories	No. 201	
		Effective Date 4/14/09	
		Revision Date 4/4/11	
		Final Approval	Approved by IMR Board of Directors: 11/4/10

Purpose

To establish and clarify employment applications and categories.

Scope

IMR Applicants, Employees and Investigators

Policy

Employment applications and background information

IMR relies upon the accuracy of information contained in the employment application, as well as the accuracy of other data presented throughout the employment process. Any misrepresentations, falsifications or material omission in any of this information or data may result in the exclusion of the individual from further consideration for employment, or if the person has been hired, termination of employment.

To ensure that individuals who join IMR are well qualified and have a strong potential to be productive and successful, it is the policy of IMR to check the employment references of applicants. In addition, applicants and/or employees may be subject to additional reference checks, security clearances and verification of education, employment, licenses, certifications, etc. as required by the VA.

Employment Categories

It is the intent of IMR to clarify the definitions of employment categories so that employees understand their employment status and benefit eligibility. These categories do not guarantee employment for any specified period of time.

Each employee is designated as either NONEXEMPT or EXEMPT from federal and state wage and hour laws. NONEXEMPT employees are entitled to overtime pay under the specific provisions of federal and state laws. EXEMPT employees are excluded from specific provisions of federal and state wage and hour laws. An employee's EXEMPT or NONEXEMPT classification may be changed only upon notification by IMR management.

In addition to the above categories, each employee will belong to one other employment category:

REGULAR FULL-TIME employees are those who are regularly scheduled to work full-time

schedule. Generally, they are eligible for IMR's benefit package, subject to the terms, conditions, and limitations of each benefit program.

REGULAR PART-TIME employees are those who are regularly scheduled to work less than the full-time work schedule, -. Regular part-time employees are eligible for some benefits sponsored by IMR, subject to the terms, conditions, and limitations of each benefit program. Part time employees working an average of less than 15 hours per week, will not accrue leave.

In addition to one of the above described employment categories, all IMR employees involved in a research project **must** also be placed on a Without Compensation (WOC) Appointment with the Durham Veterans Affairs Medical Center. This appointment carries no additional duties or benefits, but allows IMR employees the opportunity to work at the Durham VA Medical Center.

Institute for Medical Research, Inc.	Policy on Hiring Personnel	No. 701	
		Effective Date 4/14/09	
		Revision Date 8/21/13	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

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Purpose

To establish IMR's policy on hiring personnel through IMR.

Scope

IMR Investigators

Policy

There are times when an Investigator may need to hire staff to support his research work. A written position description is required before an employee can begin working and it is the responsibility of the Investigator to determine a reasonable salary rate, the duties involved and the length of employment for a potential new hire. These determinations are to be based on the Investigators available research funds. The IMR Administrative Staff may advise the Investigator regarding salary rate, determining benefit eligibility and the costs associated with fringe benefits. Fringe benefits expenses include social security and Medicare tax, and additional benefits such as annual leave, holidays, sick leave, health insurance, 403(b) retirement, as appropriate.

Prior to making an offer of employment, the Investigator **must** contact the IMR Administrative Office to begin the pre-employment process. The pre-employment process includes meeting current IMR and Durham VA Medical Center requirements including a security clearance, verification of education and licensures, completion of required medical center training, etc. and may also include the successful completion of a pre-employment medical exam, if appropriate.

At the time of employment, the Investigator must also identify the study funds that are to be utilized for the employee's salary and benefits and the amount of effort to be charged if there are numerous studies. Changes to personnel effort on studies are a normal and expected occurrence but must be communicated to the IMR Administrative Staff **prior** to the change being implemented in order to adjust study budgets, salary agreements, etc as appropriate.

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Institute for Medical Research, Inc.	Policy on Compensation of VA Employees by IMR	No. 107	
		Effective Date 12/22/09	
		Revision Date 3/15/10	
		Final Approval	Approved by IMR Board of Directors: 3/15/10

Purpose

To establish IMR's policy on the direct compensation of Principal Investigators by IMR.

Scope

IMR Investigators

Policy

Title 18 USC 209(a) prohibits a full time employee of the executive branch of the US government from receiving salary or any contribution to or supplementation of salary from any source other than the US as compensation for services as an employee of the United States. While the statute is clear, there may be circumstances when work on non-VA or non-profit (NP) funded projects is distinct and separate from work performed for the VA.

In these instances, to determine eligibility for non-profit compensation for a non-profit project, the first issue to be addressed is accomplished by a memorandum of understanding (MOU) obtained from VA management or a position description specifying the investigator's VA scope of work, responsibilities and VA work hours. The MOU should also address, in particular detail, any VA paid activity that is related to the proposed NPC paid activity and any other issues that may be relevant in making a compensation determination or may be perceived as a conflict of interest. To be eligible for NP compensation, a determination must be made that the work performed for NPC pay is distinct from work performed for the VA.

If a determination is made that the Investigator is eligible to receive NP compensation, hours will be documented in keeping with current IMR payroll policies.

Institute for Medical Research, Inc.	Policy on Expenditures	No. 702	
		Effective Date 4/14/09	
		Revision Date 11/29/11	
		Final Approval	Approved by IMR Board of Directors: 11/29/11

Purpose

To establish the guidelines for the purchase of items utilizing IMR funds associated with an active research protocol or education project.

Scope

IMR Board of Directors, Research Investigators and staff and IMR administrative staff

Policy

The following requirements apply for all research purchases made through IMR:

- Sufficient funds must be available in the requester's project to cover costs.
- A research rationale must be provided for each research-related purchase.
- All purchases for sponsored research projects must be reasonable and necessary for the performance of the project as well as allowable and allocable under the terms and conditions set forth in the grant.

Pre-Approval Costs

Salary costs may be charged for protocol submission and other work involved in getting a new study up and running with the understanding that the costs will be reimbursed from either the study sponsor or from the PI from other funds. The salary costs will be applied to a new account for the new study and the funding will be provided from IMR Administrative funds. Upon receipt of payment from the study sponsor a reimbursement will be made to IMR's Administrative account. In the event an approved protocol/agreement cannot be reached then the PI will be liable for these costs.

IMR will reimburse appropriate research expenses upon the submission of the original receipt and a statement signed by the Investigator indicating the purpose

Reimbursements will NOT be made for gifts, liquor or any other item not related to research.

Meals in conjunction with non-routine meetings may be reimbursed but require explicit documentation including the reason for the meeting and individuals in attendance. It is advised that you contact the IMR administrative staff prior to any function involving food to determine if such costs are likely to be reimbursable.

Memberships and licenses are not usually allowable expenses.

Purchases that provide personal benefit are not allowed, nor are purchases that may give the appearance of conflict of interest. Please note that IRS rules in this area are not intuitive. IMR

will provide guidance and final authorization of payment rests with the Executive Director. Please review this section and whenever appropriate discuss the proposed purchases with IMR before ordering. Any questionable purchase or vendor must be approved by the Executive Director prior to making the purchase.

Procedures

IMR has accounts established with vendors that have been previously utilized. If the need to purchase an item from a vendor with whom IMR does not have an account arises, contact the IMR administrative staff with the details of the vendor. IMR will establish an account and notify the PI or the authorized staff once the account has been set up. Account numbers established with vendors are specific to IMR and should be utilized when purchases are made with IMR maintained funds. These are not be confused with account numbers assigned to the VA or Duke which may cause invoicing issues.

IMR purchase order (PO) numbers must be used for all purchases made. PO forms are available in the IMR Handbook or may be obtained from the IMR business office. Clearly indicate IMR as the "bill to" party with the appropriate mail stop included. Failure to do so may create payment problems which could have an adverse effect on your continued ability to purchase.

Any purchases including toxins, time sensitive chemicals or radioactive materials require additional procedures and an approval process prior to purchase. Contact the IMR administrative office for these procedures prior to purchase.

PI's may delegate in writing responsibility and/or approval of invoices to other study staff. The signature of the authorized individual on the invoices verifies that the items on the invoice were received in the quantity/quality specified; have been reconciled to the appropriate purchase order, will be used in correlation with an approved research/education project and that the purchase will directly or indirectly support the research/education project.

Resolving discrepancies in invoices is the responsibility of the individual who placed the order. Discrepancies that affect payment of invoices should be brought to the attention of the IMR administrative staff.

IMR maintains accounts with vendors who are competitive and generally offer the lowest price available. IMR vendors often match the prices given to the VA or Duke University. Questions and concerns with vendor selection or competitive pricing may be directed to the IMR office.

IMR understands the need to maintain continuity of vendors during the course of research. Also, the volume of purchases under \$5,000 makes it impractical to supply written documentation for each purchase. PI's and their authorized staff are required to use sound business judgment and to rely on professional experience in making the buying decision. All reasonable effort should be made to use and verify available discounts, check comparable market prices and review past purchase orders for similar items.

When a PI or authorized staff needs to use a single or sole source in the acquisition of a product or service with a cost of \$5,000 or more, a vendor justification is needed. Single sources means other sources are available but the PI chooses to use only one particular source. Sole source means that no other source than the one recommended is available that meets the needs for that specific purchase. The IMR business office **must** be contacted in advance of making these

types of purchases. All purchases over \$5,000 must include documentation of the need for the purchase, the basis of the contractor selection and the price data.

For all the purchases under the Federal Government Grants Programs, IMR abides by Circular A-110 of the Office of Management and Budget of the United States.

Subject Payments

IMR will issue checks to subjects for study participation and mileage, as appropriate, upon the completion of the required form.

Animal Purchases and Per Diems

Purchases of research animals require prior approval by the Research Protocol Office and Animal Facility before contacting IMR for a PO number.

At the end of each month, IMR receives a VA invoice for per diem fees which is forwarded to the Investigator for approval for payment.

Institute for Medical Research, Inc.	Policy on Transfer of Funds	No. 703	
		Effective Date 4/14/09	
		Revision Date 11/30/10	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish the guidelines for the transfer of IMR funds associated with an active research or education project.

Scope

IMR Board of Directors, IMR administrative staff and Investigators

Policy

IMR may receive unrestricted donations or restricted donations to support a specific investigator or research program. All funds deposited in the IMR are the property of IMR and are subject to policies and procedures established by the Board of Directors. Such policies and procedures will be consistent with applicable federal and state statutes and regulations and Board decisions. Decisions of the Board are final.

Procedures

External Transfer: Transfer of an active research or education project and the associated IMR funds may be made only after approval by the IMR Board of Directors, the project sponsor and the receiving institution. Such transfers may be made only to another 501(c)(3) non-profit organization with the same stated exempt purpose of conducting research. An investigator who wishes to relocate an approved active research or education project, must submit a written request for such a move to the IMR Board of Directors through the Executive Director.

IMR does not allow transfer of residual funds to any other organization.

Internal Transfer: The project sponsor must be notified of any substantial change in the status of the designated principal investigator on an active research project or education activity. Changes such as assigning a replacement principal investigator or changing the PI's role can be made only with prior written approval of the project sponsor and the facility R&D Committee. If the designated principal investigator of an active research project relocates, is terminated from the study, or dies, a written request to assign a replacement principal investigator must be submitted to the project sponsor. In addition, an amendment changing the principal investigator name must be executed if a clinical research agreement is involved.

Institute for Medical Research, Inc.	Policy on Receipt & Payment of Honoraria	No. 704	
		Effective Date 4/14/09	
		Revision Date	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish the policy regarding honoraria, speaking fees, writing fees and consulting payments.

Scope

All IMR administrative staff, research staff, and Investigators

Policy

IMR may receive unrestricted donations or restricted donations to support a specific investigator or research program. IMR may not accept honoraria provided to an investigator as payment for participation in an activity. In addition, IMR will not accept personal contributions from an investigator in support of the investigator's own research.

Procedures

Unrestricted donations may be made payable to the Institute for Medical Research, Inc., VA Medical Center (151), 508 Fulton Street, Durham, NC 27705, Tax ID # 56-1655431.

Institute for Medical Research, Inc.	Policy on Residual Funds	No. 705	
		Effective Date 4/14/09	
		Revision Date 5/11/13	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy for residual funds.

Scope

IMR Board of Directors, IMR administrative staff and Investigators

Policy

Funds provided to IMR for the general support of an investigator's research or education activities and funds remaining from completed projects are generally referred to as "residual funds" and held in "general research or education" accounts. Use of such funds for general research and education purposes is predicated on first fulfilling all requirements specified by the sponsor or any other donor at the time funds are initially received by IMR. Residual funds may be used only for scientific and professional expenditures and must further the conduct of VA-approved research or education.

Procedures

After completion of the research project for which funds are originally received, residual funds, if any, remaining in the project account are reclassified as "unobligated" or "miscellaneous" and may be used for the general support of research and education activities of principal investigators. In the donor acknowledgement letter or other communication, IMR informs the project sponsor that the principal investigator will be allowed to utilize the remaining balance of funds following completion of the project for the general support of the investigator's research and/or education at the VA facility.

After the project account is closed, residual funds may be transferred within IMR to other active research or education project account(s) for the same principal investigator or may be given to another DVAMC investigator by transferring the balance to another general research account in the new investigator's name. All expenditures must be consistent with policies and procedures established by the IMR Board of Directors and are subject to approval by the Executive Director.

If an account holder has had no activity (i.e., no expenditures on VA research or education activities) in a residual account in a 24 month period the account holder will be notified in writing by the Executive Director. In this communication, the account holder will be advised that there has been no activity in the last 24 months and will be asked to provide a plan for spending. The spending plan must include expenditures that occur within the next 6 months. Exceptions to this 6 month spending plan must be outlined in the response letter by the account holder approved

by the Board. Unless waived by the Board, if expenditures do not occur within the 6 month period the entirety of the residual funds will be swept into the IMR administrative account.

An investigator must be the principal investigator or co-PI on at least one active VA research or education project in order to maintain, and request expenditures from, a general research account. Exceptions will be made only upon approval of the IMR Board of Directors.

In the event an investigator ceases conducting research, retires, dies or otherwise terminates his or her employment at the VA facility, or with IMR itself, all residual funds remaining in the investigator's general research account are to be transferred to another investigator or will be transferred to an IMR administrative account and used at the discretion of the IMR Board of Directors. All funds provided to IMR are intended to support VA projects and research and/or educational activities at the VA facility. IMR does not allow transfer of residual funds or corporation-owned equipment to any other organization other than a VA NPC.

I acknowledge receipt of this policy.

Signature of Investigator

Date

Printed name of Investigator

Institute for Medical Research, Inc.	Travel Policy	No. 706	
		Effective Date 4/14/09	
		Revision Date 9/23/11	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy on travel.

Scope

All IMR administrative staff, research staff, and Investigators

Policy

Mission Statement: The Institute for Medical Research's mission is to further VA research and education. Relevant travel expenditures help accomplish IMR's mission. Accordingly, funds donated to and accepted by IMR may be used to reimburse travel expenses associated with furthering VA research and approved education activities.

Acceptable Travel: Travel to research meetings of clinical specialty societies, research societies, national and international general clinical groups (e.g., AMA, WHO) the primary goals of which are to further medical knowledge, research, public health and/or education is acceptable when the proposed travel has a demonstrable VA research relevance or is related to an approved staff or patient education activity.

ALL travelers must attach a copy of the program material (i.e., program announcement, agenda, acceptance letter if making a presentation) to the Request for Travel Funds.

For VA employees: A **government** passport is now required by VA employees traveling out of the country. Official Government Passport issuance requires 60 days. Instructions are detailed in the link below.

If you plan to use "authorized absence" to attend any meeting, you are responsible for submitting Form 10-0101B and any other required VA paperwork through appropriate VA channels for approval. Questions regarding required VA paperwork may be addressed to your Service travel coordinator. A copy of this completed form must be submitted to IMR with your travel request.

Utilizing IMR funding for travel and/or tuition is considered by the VA as utilizing "donated" money. Prior to requesting IMR travel/tuition funding, current VA requirements must be met and a copy of the approved VA forms must be submitted with the request for funding. Please see requirements at link, below.

Failure to provide approved copies of any required VA paperwork will result in non-payment of travel.

[S:\All Employees\Education\Travel and Tuition](#)

Please note:

- Persons traveling on IMR funds cannot use government rate airfares.
- All IMR paid travel will be at the basic coach rate.
- All expenses should be "reasonable" as determined by the city involved.
- Reimbursement for hotel will be limited to single rate occupancy.
- The traveler is responsible for excess costs and any additional expenses incurred for personal preference or convenience unnecessary or unjustified in the performance of official business.
- Reimbursement for gratuities (taxi, limo, etc.) will be limited to no more than 20%.
- One reasonable long distance phone call "home", not to exceed 10 minutes, is allowed per day. Calls necessary to exigencies of business are allowed but require a statement to that effect.
- TAXI FARES: Once travelers arrive at their hotel, taxi cab fares will not ordinarily be reimbursed. All taxi fares claimed above must be justified separately and attached to this voucher. Reimbursement will be decided on a case-by-case basis

Approval Authority: Approval of proposed IMR travel funding requests will be the responsibility of IMR administrators, with the final authority for interpretation residing with the Executive Director. Exceptions to stated policy may be made only by the designated authority or the IMR Board of Directors. **Failure to provide approved copies of any required VA paperwork will result in non-payment of travel.**

Research and Education Relevance: It is the responsibility of the traveler to submit adequate documentation to justify a primary research purpose. If the travel is strictly for educational purposes, it must be documented as being work related instruction to improve performance of current duties; maintain or increase specialized proficiencies; or expand understanding of advances or changes in patient care, technology and health care administration.

Advance Payments: Travel advances will be limited to 80% of anticipated expenses. A travel advance may be requested by completing both the Travel Authorization & Travel Advance Forms.

Upon return from travel, all expenditures must be documented and unsubstantiated amounts must be returned. If the expenditures are not documented or if the excess amount is not returned, then these amounts will be considered taxable income and reported to the IRS as such.

Payment of conference registration fees may be requested in advance. IMR checks for such registrations may be made out to the organization sponsoring the meeting.

Receipts/Documentation: Original receipts are required for all expenditures of \$25 or more. Airline tickets (or e-tickets) and boarding passes are required for reimbursement for air fare.

Meals and Incidentals: In accordance with an IRS Accountable plan, meals and incidentals will be reimbursed at the prevailing federal per diem rate for the destination city. No receipts are required for meals and incidentals. Travel days will be reimbursed at 75% of the per diem rate.

Hotel Charges: Travelers will be reimbursed for reasonable hotel room costs as determined by the meeting site and prevailing hotel rates. The original itemized hotel bill must be submitted with the reimbursement request. Reimbursement may be made for reasonable laundry and dry cleaning costs if the hotel stay is five nights or more.

Transportation: Maximum transportation reimbursement shall be limited to the most reasonable method of travel, usually coach air fare. Use of private automobiles must be approved in advance by the Executive Director. When authorized, reimbursement will be made at the prevailing federal mileage reimbursement rate plus applicable tolls. In no case will reimbursement for use of private automobile exceed the coach air fare to the location in question. Actual odometer readings or MapQuest (or equivalent) mileage estimates will be required for reimbursement.

Ground Transportation: Ground transportation will be reimbursed at cost based on submission of original receipts. Reimbursements are limited to travel to and from the city-of-departure airport/train station plus parking; from airport/train station to hotel, and hotel to airport/train station. A receipt is required for parking charges. Once the traveler has arrived at the hotel, taxi cabs will not ordinarily be reimbursed (to go out for dinner, etc.). Because meeting hotels are generally within walking distance or provide free shuttle service to the conference site, any other cab fares requested will require a separate justification attached to the traveler's reimbursement request. These taxi exceptions will be reviewed and approved by the Executive Director on a case-by-case basis.

Use of a rental car may be authorized, if approved in advance by the Executive Director with valid justification.

Institute for Medical Research, Inc.	Policy on Access to Personnel Files	No. 202	
		Effective Date 4/14/09	
		Revision Date 8/21/13	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy on access to personnel files.

Scope

IMR Employees and Investigators

Policy

IMR maintains a personnel file on each employee and files are maintained in a locked cabinet in IMR's Administrative Offices. The personnel file includes such information as the employee's job application, resume, records of training, documentation of performance appraisals and salary increases, and other employment records.

Personnel files are the property of IMR, and access to the information they contain is restricted. Generally, only supervisors and management personnel of IMR who have a business purpose to review information in a file are allowed to do so. Any requests to review personnel files will be reviewed on a case by case basis.

Employees who wish to review their own file should contact the IMR Administrative Office. With reasonable advance notice, employees may review their own personnel files in IMR's offices and in the presence of an individual appointed by IMR to maintain the files.

Institute for Medical Research, Inc.	Policy on Safety	No. 501	
		Effective Date 12/22/09	
		Revision Date 3/15/10	
		Final Approval	Approved by IMR Board of Directors: 3/15/10

Purpose

To establish IMR's policy regarding safety.

Scope

IMR Employees and Investigators

Policy

To assist in providing a safe and healthy work environment for employees and visitors, IMR abides by the Durham VA Medical Center workplace safety program. The Durham VA Medical Center Safety Officer, Industrial Hygienist and Research Safety Officer are responsible for implementing, administering, monitoring, and evaluating the safety program. Its success depends on the alertness and personal commitment of all VA employees and IMR employees as well.

Information about workplace safety and health issues is provided to employees through regular communication channels such as supervisor-employee meetings, bulletin board postings, VA and/or IMR memos, or other written communications.

As defined in VA guidelines, the purchase of any toxin or time sensitive chemical, even those in exempted quantities, requires approval by the Research Industrial Hygienist. Prior to the purchase of any toxins or time sensitive chemical, research staff must first obtain the written approval of the Industrial Hygienist. Documentation of this approval must be provided to the IMR administrative staff prior to the purchase. Questions regarding this requirement may be addressed to the Occupational Safety and Health Specialist for Research or the Research Industrial Hygienist.

Employees and supervisors receive periodic workplace safety training. The training covers potential safety and health hazards and safe work practices and procedures to eliminate or minimize hazards. Some of the best safety improvement ideas come from employees. Those with ideas, concerns, or suggestions for improved safety in the workplace are encouraged to raise them with their supervisor, the IMR Administrative Office, or bring them to the attention of the Durham VA Medical Center Safety Officer, Industrial Hygienist or Research Safety Officer. Reports and concerns about workplace safety issues may be made anonymously if the employee wishes. All reports can be made without fear of reprisal.

Each employee is expected to obey safety rules and to exercise caution in all work activities. Employees must immediately report any unsafe condition to the appropriate supervisor. Employees who violate safety standards, who cause hazardous or dangerous situations, or who

fail to report or, where appropriate, remedy such situations, may be subject to disciplinary action, up to and including termination of employment.

In the case of accidents that result in injury, regardless of how insignificant the injury may appear, employees should immediately notify the IMR Administrative Office or the appropriate supervisor. Such reports are necessary to comply with laws and initiate insurance and workers' compensation benefits procedures.

Institute for Medical Research, Inc.	Policy on Smoking	No. 503	
		Effective Date 4/14/09	
		Revision Date	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy on smoking.

Scope

IMR Employees and Investigators

Policy

In keeping with the VA's and IMR's intent to provide a safe and healthy work environment, smoking in the workplace is prohibited except in those locations that have been specifically designated as smoking areas. Smoking is permitted in accordance with Medical Center Policy:

- (1) In any area external to the buildings, away from entrances and overhangs, where there is full view of the sky,
- (2) in the designated enclosed smoking shelter provided outside the ground floor of the V.A. Medical Center,
- (3) in the designated smoking area on the southwest corner of the V.A. Medical Center, exterior to the Ambulatory Care Entrance,
- (4) by supervised patients or staff participating in an approved research project on the effects of, or treatment for smoking. Smoking must be done in the area designated by the research protocol, with tobacco smoke vented outside of the V.A. Medical Center.

This policy applies equally to all employees, patients and visitors. Employees who fail to comply with this policy may be subject to disciplinary action.

Institute for Medical Research, Inc.	Policy on Emergency Closing	No.		504
		Effective Date		4/14/09
		Revision Date		
		Final Approval	Approved by IMR Board of Directors: 4/14/09	

Purpose

To establish IMR's policy on closing during emergency conditions.

Scope

IMR Employees and Investigators

Policy

At times, emergencies such as severe weather, fires, power failures, or earthquakes, can disrupt company operations. In extreme cases, these circumstances may require the closing of a work facility. The Executive Director, IMR has responsibility for declaration of emergencies and activation of all or part of this Plan.

When operations are officially closed due to emergency conditions, the time off from scheduled work will be unpaid. However, with supervisory approval, employees may use available paid leave time, such as unused vacation benefits.

All employees are expected to report to work in a timely fashion during inclement weather. However, in rare instances where employees make every reasonable effort to report to work and are unable to do so, appropriate leave may be granted after notifying their supervisor in accordance with established procedures. Employees who do not report to the scheduled duty due to the weather, must request annual leave or leave without pay for the entire tour of duty.

Supervisors have the authority to excuse tardiness for up to one hour for employees under their supervision due to inclement weather. The Executive Director may decide to allow supervisors to dismiss employees without charge to leave and/or excuse tardiness of greater than one hour. This would apply only to employees who have reported to work.

Employees in essential operations may be asked to work on a day when operations are officially closed. In these circumstances, employees who work will receive regular pay.

Institute for Medical Research, Inc.	Policy on Visitors in the Workplace	No.		505
		Effective Date		4/14/09
		Revision Date		
		Final Approval	Approved by IMR Board of Directors: 4/14/09	

Purpose

To establish IMR's policy on visitors in the workplace.

Scope

IMR Employees and Investigators

Policy

To provide for the safety and security of employees and the facilities at the Durham VA Medical Center, only authorized visitors are allowed in the workplace. Restricting unauthorized visitors helps maintain safety standards, protects against theft, ensures security of equipment, protects confidential information, safeguards employee welfare, and avoids potential distractions and disturbances.

Employees are responsible for the conduct and safety of their visitors.

If an unauthorized individual is observed on VA premises, employees should direct the individual to the lobby, immediately notify their supervisor or, if appropriate, contact the VA Police and Security.

Institute for Medical Research, Inc.	Policy on Computer, Internet & E-mail Usage	No. 506	
		Effective Date 4/14/09	
		Revision Date	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy on computer internet and e-mail usage.

Scope

IMR employees and Investigators

Policy

Internet access to global electronic information resources on the World Wide Web is provided to assist employees in obtaining work-related data and technology. The following guidelines have been established to help ensure responsible and productive Internet usage.

All Internet data that is composed, transmitted, or received via our computer communications systems is considered to be part of the official records of IMR and/or the VA and, as such, is subject to disclosure to law enforcement or other third parties. Consequently, employees should always ensure that the business information contained in Internet e-mail messages and other transmissions is accurate, appropriate, ethical, and lawful.

The equipment, services, and technology provided to access the Internet remain at all times the property of IMR. As such, IMR reserves the right to monitor Internet traffic, and retrieve and read any data composed, sent, or received through our online connections and stored in our computer systems. Employees should not use a password, access a file, or retrieve any stored communication without authorization.

Data that is composed, transmitted, accessed, or received via the Internet must not contain material that could be considered discriminatory, offensive, obscene, threatening, harassing, intimidating, or disruptive to any employee or other person. Examples of unacceptable content may include, but are not limited to, sexual comments or images, racial slurs, gender-specific comments, or any other comments or images that could reasonably offend someone on the basis of race, age, sex, religious or political beliefs, national origin, disability, sexual orientation, or any other characteristic protected by law.

The unauthorized use, installation, copying, or distribution of copyrighted, trademarked, or patented material on the Internet is expressly prohibited. As a general rule, if an employee did not create material, does not own the rights to it, or has not obtained authorization for its use, it should not be put on the Internet. Employees are also responsible for ensuring that sending any material over the Internet has the appropriate distribution rights.

Abuse of the Internet access provided, in violation of law or IMR policies will result in disciplinary

action, up to and including termination of employment. Employees may also be held personally liable for any violations of this policy. The following behaviors are examples of previously stated or additional actions and activities that are prohibited and can result in disciplinary action:

- Sending or posting discriminatory, harassing, or threatening messages or images
- Using the organization's time and resources for personal gain
- Stealing, using, or disclosing someone else's code or password without authorization
- Copying, pirating, or downloading software and electronic files without permission
- Sending or posting confidential material, trade secrets, or proprietary information outside of the organization
- Violating copyright law
- Failing to observe licensing agreements
- Engaging in unauthorized transactions that may incur a cost to the organization or initiate unwanted Internet services and transmissions
- Sending or posting messages or material that could damage the organization's image or reputation
- Participating in the viewing or exchange of pornography or obscene materials
- Sending or posting messages that defame or slander other individuals
- Attempting to break into the computer system of another organization or person
- Refusing to cooperate with a security investigation
- Sending or posting chain letters, solicitations, or advertisements not related to business purposes or activities
- Using the Internet for political causes or activities, religious activities, or any sort of gambling
- Jeopardizing the security of the organization's electronic communications systems
- Sending or posting messages that disparage another organization's products or services
- Passing off personal views as representing those of the organization
- Sending anonymous e-mail messages
- Engaging in any other illegal activities

Employees should notify their immediate supervisor, the IMR Administrative Office or an appropriate member of management upon learning of violations of this policy. Employees who violate this policy will be subject to disciplinary action, up to and including termination of employment.

Institute for Medical Research, Inc.	Policy on Drug & Alcohol Use	No. 602	
		Effective Date 4/14/09	
		Revision Date	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy on drug and alcohol use.

Scope

IMR Employees and Investigators

Policy

It is IMR's desire to provide a drug-free, healthful, and safe workplace. To promote this goal, employees are required to report to work in appropriate mental and physical condition to perform their jobs in a satisfactory manner.

While on VA/IMR premises and while conducting business-related activities off VA/IMR premises, no employee may use, possess, distribute, sell, or be under the influence of alcohol or illegal drugs. The legal use of prescribed drugs is permitted on the job only if it does not impair an employee's ability to perform the essential functions of the job effectively and in a safe manner that does not endanger other individuals in the workplace.

Violations of this policy may lead to disciplinary action, up to and including immediate termination of employment, and/or required participation in a substance abuse rehabilitation or treatment program. Such violations may also have legal consequences.

Under the Drug-Free Workplace Act, an employee who performs work for a government contract or grant must notify IMR of a criminal conviction for drug-related activity occurring in the workplace. The report must be made within five days of the conviction.

Employees with questions on this policy or issues related to drug or alcohol use in the workplace should raise their concerns with their supervisor or the IMR Administrative Office without fear of reprisal.

Institute for Medical Research, Inc.	Policy on Sexual and Other Unlawful Harassment	No. 603	
		Effective Date 4/14/09	
		Revision Date	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy on sexual and other unlawful harassment.

Scope

IMR Employees and Investigators

Policy

IMR is committed to providing a work environment that is free from all forms of discrimination and conduct that could be considered harassing, coercive, or disruptive, including sexual harassment. Actions, words, jokes, or comments based on an individual's sex, race, color, national origin, age, religion, disability, sexual orientation, or any other legally protected characteristic will not be tolerated. The VA provides ongoing sexual harassment training to ensure the work environment is free of sexual and other unlawful harassment.

Sexual harassment is defined as unwanted sexual advances, or visual, verbal, or physical conduct of a sexual nature. This definition includes many forms of offensive behavior and includes gender-based harassment of a person of the same sex as the harasser. The following is a partial list of sexual harassment examples:

- Unwanted sexual advances.
- Offering employment benefits in exchange for sexual favors.
- Making or threatening reprisals after a negative response to sexual advances.
- Visual conduct that includes leering, making sexual gestures, or displaying of sexually suggestive objects or pictures, cartoons or posters.
- Verbal conduct that includes making or using derogatory comments, epithets, slurs, or jokes.
- Verbal sexual advances or propositions.
- Verbal abuse of a sexual nature, graphic verbal commentaries about an individual's body, sexually degrading words used to describe an individual, or suggestive or obscene letters, notes or invitations.
- Physical conduct that includes touching, assaulting, or impeding or blocking movements.

Unwelcome sexual advances (either verbal or physical), requests for sexual favors, and other verbal or physical conduct of a sexual nature constitute sexual harassment when: (1) submission to such conduct is made either explicitly or implicitly a term or condition of employment; (2) submission or rejection of the conduct is used as a basis for making employment decisions; or, (3) the conduct has the purpose or effect of interfering with work performance or creating an intimidating, hostile, or offensive work environment.

If an employee experiences or witnesses sexual, or other unlawful harassment in the workplace, it should be reported immediately to his/her supervisor. If the supervisor is unavailable or if it is believed inappropriate to contact that person, you should immediately contact the IMR Administrative Office. Employees can raise concerns and make reports without fear of reprisal or retaliation.

All allegations of sexual harassment will be quickly and discreetly investigated. To the extent possible the confidentiality of the employee and that of any witnesses and the alleged harasser will be protected against unnecessary disclosure. When the investigation is completed, the employee will be informed of the outcome of the investigation.

Institute for Medical Research, Inc.	Policy on Attendance and Punctuality	No. 604	
		Effective Date 4/14/09	
		Revision Date	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy on attendance and punctuality.

Scope

IMR Employees and Investigators

Policy

To maintain a safe and productive work environment, IMR expects employees to be reliable and punctual in reporting for scheduled work. Absenteeism and tardiness place a burden on other employees and on IMR. In the rare instances when employees cannot avoid being late to work or are unable to work as scheduled, they should notify their supervisor as soon as possible in advance of the anticipated tardiness or absence.

Poor attendance and excessive tardiness are disruptive. Either may lead to disciplinary action, up to and including termination of employment.

Institute for Medical Research, Inc.	Policy on Personal Appearance	No. 605	
		Effective Date 4/14/09	
		Revision Date / /14	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy on personal appearance.

Scope

IMR Employees and Investigators

Policy

Dress, grooming, and personal cleanliness standards contribute to the morale of all employees and affect the business image IMR presents to customers and visitors.

During business hours or when representing IMR, employees are to present a clean, neat, and tasteful appearance. Employees should dress and groom themselves according to the requirements of their position and accepted business standards. This is particularly true if the employee's position involves dealing with customers or visitors in person.

Supervisors or department heads are responsible for establishing a reasonable dress code appropriate to position, utilizing the established medical center guidelines in the attached DVAMC Dress Code Policy. If the employee's supervisor believes the employee's personal appearance is inappropriate, he/she may be asked to leave the workplace until he/she is properly dressed or groomed. Under such circumstances, the employee may not be compensated for the time away from work. Supervisors should be consulted if an employee has questions as to what constitutes appropriate appearance. Reasonable accommodation may be made for a person with a disability.

[05.15 - DVAMC Dress.docx](#)

Institute for Medical Research, Inc.	Policy on Whistle- Blower Protection	No. 606	
		Effective Date 4/14/09	
		Revision Date 8/21/13	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy on whistle-blower protection.

Scope

IMR Employees and Investigators

Policy

IMR is committed to providing the best possible working conditions for its employees. Part of this commitment is encouraging an open and frank atmosphere in which any problem, complaint, suggestion or question receives a timely response. Employees must also be allowed to report any inappropriateness within the entity's financial management, violations of laws, rules or regulations, gross mismanagement, gross waste of funds, abuse of authority and any substantial specific danger to public health or safety.

Individuals are encouraged to report to the any activities that they believe to be illegal or improper. Employees are protected against retaliatory actions resulting from reporting unethical conduct and any employee who feels that adverse action has been taken toward him/her due to a report of improper activity should notify the Brian Letourneau, IMR Board Director as soon as possible. Mr. Letourneau may be reached directly at 919-620-8282 or brianel@yahoo.com.

In addition, if a situation occurs where an employee believes that they have been subject to workplace reprisal for whistle-blowing, they may also utilize the Durham VA Medical Center's Alternative Dispute Resolution Program (ADR) as detailed in Durham VA Medical Center Memorandum 558-03-4.36.

Institute for Medical Research, Inc.	Employee Benefits Overview	No. 300	
		Effective Date 4/14/09	
		Revision Date	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish an overview of IMR's employee benefits.

Scope

IMR Employees and Investigators

Policy

Eligible employees at IMR are provided a wide range of benefits. A number of the programs (such as Social Security, workers' compensation, state disability, and unemployment insurance) cover all employees in the manner prescribed by law.

Eligibility for additional benefits is dependent upon a variety of factors, including employment category. Your supervisor or the IMR Administrative Staff can identify the programs for which you are eligible. Details of many of these programs can be found in the Employee Handbook or obtained from the IMR Administrative Office.

The following benefit programs are available to eligible employees and may require contributions from both the employer and the employee:

- * 403b retirement plan
- * Health Insurance
- * Holidays
- * Jury Duty Leave
- * Sick Leave Benefits
- * Vacation Benefits

Institute for Medical Research, Inc.	Policy on Vacation Benefits	No. 301	
		Effective Date 4/14/09	
		Revision Date	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's vacation benefits.

Scope

IMR Employees and Investigators

Policy

The amount of paid vacation time employees accrue each year increases with the length of their employment as shown in the following schedule:

* Upon initial eligibility a full-time employee is entitled to 13 vacation days each year, accrued biweekly at the rate of 0.500 days.

* After 3 years of eligible service a full-time employee is entitled to 20 vacation days each year, accrued biweekly at the rate of 0.769 days.

* After 15 years of eligible service a full-time employee is entitled to 26 vacation days each year, accrued biweekly at the rate of 1 day.

Leave accrual for employees who work less than full time is pro-rated based on the number of regular hours worked per pay period. Intermittent employees will not usually accrue leave. If however, a supervisor believes based on the employee's superior qualifications, it is appropriate and necessary for recruitment and retention of an intermittent employee, a written request may be made by the supervisor to the Executive Director for that employee to accrue leave.

The length of eligible service is calculated on the basis of a "benefit year." This is the 12-month period that begins when the employee starts to earn vacation time. An employee's benefit year may be extended for any significant leave of absence except military leave of absence. Military leave has no effect on this calculation.

Once employees enter an eligible employment category, they begin to earn paid vacation time according to the schedule. They can request use of vacation time after it is earned.

Paid vacation time can be used in minimum increments of one-quarter hour. To take vacation, employees should request advance approval from their supervisors. Requests will be reviewed based on a number of factors, including business needs and staffing requirements.

Vacation time off is paid at the employee's base pay rate at the time of vacation.

Employees are encouraged to use available paid vacation time for rest, relaxation, and personal pursuits. In the event that available vacation is not used by the end of the benefit year, employees will forfeit the unused time unless the employer provides written approval for the employee to carry the leave over into the next calendar year. However, final approval to carry over leave lies with the Executive Director of IMR. Employees will be limited to a maximum carry over of 240 hours annual leave into the next benefit year.

Upon termination of employment, employees will be paid for unused vacation time that has been earned through the last day of work.

Institute for Medical Research, Inc.	Policy on Holidays	No. 302	
		Effective Date 4/14/09	
		Revision Date	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy on holidays.

Scope

IMR Employees and Investigators

Policy

IMR recognizes the following holidays:

- * New Year's Day (January 1)
- * Martin Luther King, Jr. Day (third Monday in January)
- * Presidents' Day (third Monday in February)
- * Memorial Day (last Monday in May)
- * Independence Day (July 4)
- * Labor Day (first Monday in September)
- * Columbus Day (second Monday in October)
- * Veterans' Day (November 11)
- * Thanksgiving (fourth Thursday in November)
- * Christmas (December 25)

Eligible employees will receive paid holiday time based on the employee's straight-time pay rate (as of the date of the holiday) times the number of hours the employee would otherwise have worked on that day. Eligible employee categories:

- * Regular full-time employees
- * Regular part-time employees

A recognized holiday that falls on a Saturday will be observed on the preceding Friday. A recognized holiday that falls on a Sunday will be observed on the following Monday.

If a recognized holiday falls during an eligible employee's paid absence (such as vacation or sick leave), holiday pay will be given in lieu of a charge to vacation or sick leave.

If eligible nonexempt employees work on a recognized holiday, they will receive double time for holiday pay.

Institute for Medical Research, Inc.	Policy on Workers' Compensation Benefits	No. 303	
		Effective Date 4/14/09	
		Revision Date	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy on workers' compensation benefits.

Scope

IMR Employees and Investigators

Policy

IMR provides a comprehensive workers' compensation insurance program at no cost to employees. This program covers any injury or illness sustained in the course of employment that requires medical, surgical, or hospital treatment. Subject to applicable legal requirements, workers' compensation insurance provides benefits after a short waiting period, or if the employee is hospitalized, immediately.

Employees who sustain work-related injuries or illnesses should inform their supervisor immediately. No matter how minor an on-the-job injury may appear, it is important that it be reported immediately. This may enable an eligible employee to qualify for coverage as quickly as possible.

Neither IMR nor the insurance carrier will be liable for the payment of workers' compensation benefits for injuries that occur during an employee's voluntary participation in any off-duty recreational, social, or athletic activity sponsored by IMR.

Institute for Medical Research, Inc.	Policy on Sick Leave and Family Leave Benefits	No. 304	
		Effective Date 4/14/09	
		Revision Date	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy on sick leave and family leave benefits.

Scope

IMR Employees and Investigators

Policy

IMR provides paid sick leave benefits to all eligible employees for periods of temporary absence due to illnesses or injuries.

Eligible employees will accrue sick leave benefits at the rate of 13 days per year (4 hours for every 80 hours worked). Leave accrual for employees who work less than full time is pro-rated based on the number of regular hours worked per pay period.

Intermittent employees will not usually accrue leave. If however, a supervisor believes based on the employee's superior qualifications, it is appropriate and necessary for recruitment and retention of an intermittent employee, a written request may be made by the supervisor to the Executive Director for that employee to accrue leave

Paid sick leave can be used in minimum increments of one-quarter hour. An eligible employee may use sick leave for an absence due to his or her own illness or injury; for medical, dental or optical treatments or examination; for illness, injury or treatment/examination of a child, parent, or spouse of the employee; when exposed to a contagious disease which may jeopardize the health of others; or for bereavement purposes.

"Family member" means the following relatives of the employee: spouse, and parent thereof; parents; brothers and sisters and spouse's thereof; and any individual related by blood or affinity whose close association with the employee is the equivalent of a family membership.

Employees who are unable to report to work due to illness or injury should notify their direct supervisor before the scheduled start of their workday, if possible. The direct supervisor must also be contacted on each additional day of absence. If an employee is absent for three or more consecutive days due to illness or injury, a physician's statement may be required verifying the disability and its beginning and expected ending dates. Such verification may be requested for other sick leave absences as well and may be required as a condition to receiving sick leave benefits.

Before returning to work from a sick leave absence of ten calendar days or more, an employee

may be required to provide a physician's verification that he or she may safely return to work.

Sick leave benefits will be calculated based on the employee's base pay rate at the time of absence. Unused sick leave benefits are not subject to carry over requirements and will continue to accrue until used or employment is terminated. Unused sick leave benefits will not be paid to employees while they are employed or upon termination of employment.

Institute for Medical Research, Inc.	Policy on Time Off to Vote	No. 305	
		Effective Date 4/14/09	
		Revision Date	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy on time off to vote.

Scope

IMR Employees and Investigators

Policy

IMR encourages employees to fulfill their civic responsibilities by participating in elections. Generally, employees should be able to find time to vote either before or after their regular work schedule. If employees are unable to vote in an election during their nonworking hours, IMR will grant up to 2 hours of paid time off to vote.

Employees should request time off to vote from their supervisor at least two working days prior to the election day. Advance notice is required so that the necessary time off can be scheduled at the beginning or end of the work shift, whichever provides the least disruption to the normal work schedule.

Employees may be required to submit a voter's receipt on the first working day following the election to qualify for paid time off.

Institute for Medical Research, Inc.	Policy on Jury Duty	No. 306	
		Effective Date 4/14/09	
		Revision Date	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy on jury duty.

Scope

IMR Employees and Investigators

Policy

IMR encourages employees to fulfill their civic responsibilities by serving jury duty when required. Employees must show the jury duty summons to their supervisor as soon as possible so that the supervisor may make arrangements to accommodate their absence

To be eligible for receipt of regular pay, employees must submit the pay they received for jury duty to the IMR Administrative Office in order to avoid receiving double pay for the same time period.

Employees are expected to report for work whenever the court schedule permits.

Institute for Medical Research, Inc.	Policy on Health Insurance	No. 307	
		Effective Date 4/14/09	
		Revision Date 11/4/10	
		Final Approval	Approved by IMR Board of Directors: 11/4/10

Purpose

To establish IMR's policy on health insurance.

Scope

IMR Employees and Investigators

Policy

IMR's health insurance plan provides employees and their dependents access to medical insurance benefits. Employees in the following employment categories are eligible to participate in the health insurance plan:

- * Regular full-time employees
- * Regular part-time employees (working at least 30 hours per week)

Details of the health insurance plan are described in the Summary Plan Description (SPD). A SPD and information on cost of coverage will be provided in advance of enrollment to eligible employees.

Eligible employees may participate in the health insurance plan subject to all terms and conditions of the agreement between IMR and the insurance carrier.

Health Benefits Continuation

A change in employment categories that would result in loss of eligibility to participate in the health insurance plan may qualify an employee for benefits continuation under the Consolidate Omnibus Budget Reconciliation Act (COBRA).

The federal Consolidated Omnibus Budget Reconciliation Act (COBRA) gives employees and their qualified beneficiaries the opportunity to continue health insurance coverage under IMR's health plan when a "qualifying event" would normally result in the loss of eligibility. Some common qualifying events are resignation, termination of employment, death of an employee, a reduction in an employee's hours or a leave of absence, an employee's divorce or legal separation, and a dependent child no longer meeting eligibility requirements.

Under COBRA, the employee or beneficiary pays the full cost of coverage at IMR's group rates plus an administrative fee. IMR provides each eligible employee with a written notice describing rights granted under COBRA when the employee becomes eligible for coverage under IMR's

health insurance plan. The notice contains important information about the employee's rights and obligations.

Institute for Medical Research, Inc.	Policy on Retirement Plan	No. 308	
		Effective Date 4/14/09	
		Revision Date 6/19/13	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy regarding the retirement plan.

Scope

IMR Employees and Investigators

Policy

IMR offers a 403(b) retirement savings plan to provide employees the potential for future financial security for retirement.

To be eligible to join the 403(b) savings plan, employees work a minimum of 20 hours per week. Eligible employees may participate in the 403(b) plan subject to all terms and conditions of the plan.

The 403(b) savings plan allows employees to elect how much salary they contribute and direct the investment of their plan account so it can be tailored to meet their individual retirement needs. After six months of employment with IMR, the employer contributes an additional matching amount to each employee's 403(b) contribution not to exceed 7% of the employee's salary or \$3,500, whichever is less.

Employee's contribution to the 403(b) plan are automatically deducted from their pay on pre-tax basis, thereby reducing the amount of federal and state tax withholdings for an additional savings benefit to the employee.

Employees are always 100% vested in their salary reduction contributions made to the plan. Employees become 100% vested with respect to any employer matching contributions made on their behalf after completing three (3) vesting years of service with IMR.

Complete details of the 403(b) savings plan are described in the Summary Plan Description available to eligible employees. Contact the Administrative Office for more information about the 403(b) plan.

Institute for Medical Research, Inc.	Payroll Policy	No. 401	
		Effective Date 4/14/09	
		Revision Date 4/1/11	
		Final Approval	Approved by IMR Board of Directors: 11/4/10

Purpose

To establish the guidelines for reporting hours worked for employees of the Institute for Medical Research, Inc. (IMR).

Scope

All IMR administrative staff and research staff, supervisors, and Investigators either being paid or responsible for employees being paid, as IMR employees

Policy

It is the policy of IMR to provide timely salary payment through direct deposit for hours reported and authorized by the appropriate supervisor.

Procedures

Pay Periods

All employees are paid biweekly on every other Friday. Each paycheck will include earnings for all work performed through the end of the previous two week payroll period. Failure to submit a timesheet by 9:00 a.m. on the Monday morning following the end of the pay period, may result in delay of salary payment for that reporting period until the next scheduled reporting period. A current listing of IMR pay periods and paydays may be obtained from the IMR Administrative Office. In the event that a payroll reporting date falls on a day off such as a designated holiday, employees must provide the approved time sheet by 9:00 a.m. on the date prior to the holiday.

Timesheets

Hours worked are reported by completing an IMR timesheet (attached – see Forms). The fillable timesheet and instructions are emailed to the employee and is to be filled out on the computer to reduce calculation errors. Timesheets must account for 100% of the employee's time; and if the employee is paid from more than one funding source, must reflect the actual activity distribution of each employee; and must account for all activities for which each employee is paid. Timesheets are to be completed for both non-exempt and salaried employees.

Each timesheet must be signed by the employee and reviewed and approved by the appropriate authorizing official. It is the responsibility of the employee to ensure the timesheet is completed, signed by the authorizing official and delivered to IMR by the aforementioned deadline. As an alternative, effective immediately, all employees who choose to e-mail

timesheets, must include their supervisor on the e-mail. Supervisors who do not agree with the hours to be paid as reflected in the employee's e-mailed timesheet, MUST contact IMR x5442 or x5830 IMMEDIATELY to challenge the hours reported prior to the 9 a.m. Monday deadline. No response from the supervisor will be interpreted as approval, and approval signature will not be required. Those who choose to submit paper timesheets will continue to be responsible for submitting approved timesheets as per IMR policy.

Deductions and Corrections

The law requires the IMR make certain deductions from every employee's compensation. Deductions are taken for the applicable federal, state, and local income taxes in addition to the Social Security and Medicare taxes on each employee's earnings up to the IRS specified limit. As required by law IMR matches the amount of Social Security and Medicare taxes paid by each employee.

In addition to the above deductions IMR offers programs and benefits beyond those required by law. Eligible employees may voluntarily authorize deductions from their paychecks to cover the costs of participating in these programs.

IMR takes all reasonable steps to ensure that employees receive the correct amount of pay in each paycheck and that employees are paid promptly on the scheduled paydays. In the event there is an error in the amount of pay, the employee should promptly bring the discrepancy to the attention of the IMR Administrative Office so corrections can be made as quickly as possible. If you have any questions concerning your paycheck please contact the IMR Administrative Office at 919-286-0411 x 5180.

Direct Deposit

IMR utilizes direct deposit for payroll purposes. Employees are to provide advance written authorization to IMR including a voided check to establish the direct deposit of the employee's pay. This information should be provided within the first 5 days of employment. Employees will be provided an itemized statement of wages indicating their direct deposit and itemized deductions. In the event that a regularly scheduled payday falls on a day off such as designated holiday, employees will receive pay on the day prior to the holiday.

Institute for Medical Research, Inc.	Policy on Work Schedules	No. 502	
		Effective Date 4/14/09	
		Revision Date	
		Final Approval	Approved by IMR Board of Directors: 4/14/09

Purpose

To establish IMR's policy on work schedules, including overtime.

Scope

IMR Employees and Investigators

Policy

The normal work schedule for all full-time employees is 40 hours per week. Staffing needs and operational demands may necessitate variations in starting and ending times, as well as variations in the total hours that may be scheduled each day and week, including the utilization of part-time and intermittent work schedules and the scheduling of overtime.

Supervisors will advise employees of number of hours to be scheduled and when their schedules will normally begin and end.

When operating requirements or other needs cannot be met during regular working hours, employees may be scheduled to work overtime hours. When possible, advance notification of these mandatory assignments will be provided. All overtime work must receive the supervisor's prior authorization. Overtime assignments will be distributed as equitably as practical to all employees qualified to perform the required work.

Overtime compensation is paid to all nonexempt employees in accordance with federal and state wage and hour restrictions and overtime pay is based on actual hours worked per week. Time off for sick leave, vacation leave, or any leave of absence will not be considered hours worked for purposes of performing overtime calculations.