Standard Operating Procedure TVAREF SOP – 11 Original Date – December 29, 2014

### TVAREF Hiring of Relatives Policy and Procedures

**Purpose:** The Tampa VA Research and Education Foundation, Inc. (TVAREF) is a non-profit entity incorporated in the state of Florida. Since Florida is a "right to work" state, it allows family members to be considered for any position in an organization provided the individual possess the proper knowledge, expertise and experience.

While TVAREF's hiring policy does not allow family members to work in situations where one family member <u>directly supervises or reports</u> to another it does allow the Board of Directors to consider and approve an exemption based upon the organizational need and the applicants background.

**Disclosure:** The following individuals must disclose their affiliation with any family member who is an employee of the Foundation by completing Attachment A and submitting it to the Executive Director.

- 1. All Applicants for positions with TVAREF.
- 2. Supervisory employees of TVAREF who become related to another TVAREF employee during the course of their employment with the Foundation.
- 3. An employee of TVAREF who is related to or becomes related to the Principal Investigator, Co-Principal Investigator, or Co-investigator (who has supervisory duties) and who's funding is administered by TVAREF.
- 4. An employee of TVAREF who is related to or becomes related to an individual who is employed by any other organization (i.e., VA, USF, etc) and either individual serves in a supervisory capacity and funds are administered by TVAREF.

**Compliance:** To comply with this policy, <u>any existing supervisory relationship</u> between individuals will be resolved by 1) the supervisor requesting an exemption from the Board of Directors (Attachment B), or 2) the resignation of one of the employees, or 3) the transfer of one of the employees to another position within the Foundation, if a suitable position is available.

For the purposes of this section, "family member" means a relative, by blood or marriage, including, but not limited to, a spouse; parent; child; grandparents; sibling; in-law; relatives through marriage (i.e., step-parent; step-child; step-sibling; step-in-law); or members of the same household (i.e., life partner; or live-in boyfriend or girlfriend).

#### **Procedures:**

a) All individuals who meet the requirements identified in the "Disclosure" section above must complete an Attachment A and submit it to the Foundation office.

- b) If a real or perceived appearance of impropriety exists or will exist, Attachment B must be completed and submitted to the Foundation office.
- c) The Executive Director or his designee will review the document(s) and make a recommendation to the Board of Directors as to whether or not a real or perceived conflict of interest exists or will exist..
- d) The Board of Directors will consider the recommendation of the Executive Director and the documents submitted.
- e) The approval or disapproval of the request for exception will be determined by a majority vote of the Board of Director's.
- f) The decision of the Board of Directors will be annotated in the Foundation minutes. The minutes will include the names of any abstaining members of the Board.
- g) Upon determining the approval or disapproval of the request for exception, Attachment C will be completed by the Chairperson and President of the Board.
- h) The decision by the Board of Directors to approve or disapprove the request for exemption is final.

William R. Gower, Jr., Ph.D.
President and Chairman of the Board
TVAREF



### Attachment A

I certify that I am aware of the (TVAREF) Policy on Hiring of Relatives SOP - 11.

I hereby state (circle one):

- I do not have a conflict with the Hiring of Relatives Policy or
- \*2. I have a conflict with the Hiring of Relatives Policy
- \* If you are an <u>applicant</u> and you circled #2 above, fill in the information below and submit it to the Foundation Office.

\*If you are an <a href="mailto:employee">employee</a> of the Foundation and you circled #2 above and you are requesting an exemption, fill in the information below and complete Attachment B. Submit both forms to the Foundation Office.

Name of Relative: Relationship:

Relative currently employed by:

Are either you or your relative a supervisor? Y N

Name of the research project:

Name(s) of the \*PI, \*Co-Pi or \*Co-investigator(s) for the project:

\*Please identify each individual as PI, Co-PI or Co-Investigator.

Signature Print Name Date
(Individual completing

this form)



Name of Relative:

# Attachment B Request for Exemption from Hiring of Relative Requirements

Relationship:		
Relative Employed by:		
	uld be employed (describe his/her expe r facts that you feel should be considere	
member would be directly supervisin	amily members to work in situations in wh g or reporting to another. In order to preve t will be necessary to designate an individuted supervisor.	ent the
Name of designated supervisor:		
Designated Supervisor Employed by	r:	
card, approve all requests for annua	ervisor by: assigning daily job assignmen I leave, sick leave or Leave With Out Pay awards, approve travel, and approve/disa riew.	, recommend
3	Print Name lividual completing this form)	Date



### Attachment C

## Determination by TVAREF Board of Directors

Date:				
То:				
1. The Board of Directors has reviewed your request for exemption. After considering all the pertinent information, the Board of Directors has:				
Approved	Disapproved	your request.		
2. If your request was approved, it is understood that "name of individual" will be supervised by "Name of supervisor" who is employed by				
3. If your request was disapproved and you are an applicant you cannot be employed by the Foundation.				
4. If your request was disapproved and you are an employee of the Foundation, appropriate action must be taken as describe in Page 1, "Compliance" Section", Items 2 and 3. You have 10 working days from the date of this letter to submit a written replay as to whether you or your relative will resign from the Foundation or are requesting reassignment, if a suitable position is available and the PI for the new position approves the transfer.				
Signature	(	Print Name (President & Chairperson TVAREF)	Date	