October 14, 2019

The Administrative Council met Monday, October 14, 2019, at 3:30 p.m., in the J. S. Bridwell Board Room in the Hardin Administration Building. Present were Dr. Suzanne Shipley, Dr. James Johnston, Dr. Beth Reissenweber, Dr. Keith Lamb, Mr. Fred Dietz, Mr. Tony Vidmar, Mr. Barry Macha, Dr. Kristen Garrison, Mr. Matthew Park, Ms. Leigh Kidwell, Dr. David Carlston, Ms. Debbie Barrow, Ms. Reagan Foster, Mr. Kyle Owen, Dr. Marcy Brown-Marsden, Dr. Kathryn Zuckweiler, Ms. Shelbi Stodgill, and Ms. Jennifer Smith.

Policy 3.144 – Office Hours for Faculty
President Shipley reported that the administration planned to ask the Board to temporarily suspend the requirement that faculty members keep at least ten office hours for students per week while the administration and faculty pilot a program of requiring only five hours per week. The policy would then be reviewed after the current academic year. No action was taken on this item.

Proposed Policy Revision – Policy 4.152 Police Department Administration and Regulatory Ordinances
Vice President Lamb reviewed the proposed changes with the Council. Following discussion, it was agreed that he would take the proposed changes through the Faculty Senate and Staff Senate before it was considered by the Administrative Council and forwarded to the Board of Regents.

New Policy UPP 2-510 Protection of Human Subjects in Research (Attachment H)
General Counsel Macha and Dean Zuckweiler presented information regarding this new policy. The purpose of this policy is to allow for the protection of human subjects involved in research by MSU faculty, staff and students in a manner consistent with federal regulations and any other current or future federal regulation. This policy was approved and will be placed on the agenda for the November meeting of the Board of Regents.

New Policy UPP 2-515 Protection of Animals in Research (Attachment G)
General Counsel Macha and Dean Brown-Marsden presented information regarding this new policy. The purpose of this policy is to allow for the protection of animals involved in research conducted by MSU faculty, staff, and students in a manner consistent with federal regulations. This policy was approved and will be placed on the agenda for the November meeting of the Board of Regents.
New Policy UPP 3/470 Chemical Safety (Attachment J)
Dean Brown-Marsden presented information regarding the new Chemical Safety policy. Council members approved the proposal and it will be placed on the agenda for the November meeting of the Board of Regents.

Rule and Regulations of Midwestern State University
General Counsel Macha presented the reorganization of policies. Changes were recommended by council members and Mr. Macha will submit the modified document to the Board of Regents at their November meeting.

New Policy UPP 3-420 Reporting Abuse and Neglect of Child, Elder or Disabled Person (Attachment E)
This policy defines the responsibility for reporting suspected abuse or neglect of children or an elderly or disabled person and complying with state law and applicable training requirements. Council members approved this policy and it will be placed on the agenda for the November meeting of the Board of Regents.

There being no further business, the meeting was adjourned at 3:33 p.m.

Suzanne Shipley, Chair

Jennifer Smith, Secretary
Midwestern State University
Policies and Procedures Manual

University Policy and Procedure (UPP)
UPP 2-510 (formerly 3.146): Protection of Human Subjects in Research

Approval Authority: Board of Regents
Policy Type: University Policy
Policy Owner: Provost and Vice President for Academic Affairs
Responsible Office: Director of Sponsored Programs and Research
Next Scheduled Review: 05/01/2021

I. Policy Statement

Midwestern State University ("MSU" or "University") recognizes the need for investigation in which human beings may serve as research subjects. Safeguarding the rights and welfare of human subjects is of prime concern to MSU, and this policy provides guidance in complying with federal laws and regulations and University rules and regulations relating to research involving human subjects. All personnel engaged in any given study are accountable for any actions or inactions that might contribute to injury of any persons placed at risk. The University will maintain such reviews as necessary to minimize the risks of injury to human subjects and to ensure protection of their rights and welfare. The fundamental responsibilities outlined above are meant to suggest a preventive attitude with respect to potential injury to human subjects at risk. However, to better ensure that all human subjects are adequately protected, authority is delegated and responsibilities are fixed as indicated below.

II. Reason for Policy

The purpose of this policy is to allow for the protection of human subjects involved in research conducted by MSU faculty, staff, and students in a manner consistent with federal regulations as stated in Code of Federal Regulations (CFR) Title 45 Part 46 Protection of Human Subjects (45 CFR 46) and any other current or future federal regulation relating to the Protection of human subjects in Research. In conjunction with 45 CFR 46.107, MSU has established an Institutional Review Board (IRB).

III. Application of Policy

All research and scholarly activity conducted under the auspices of Midwestern State University that involves human subjects must be reviewed and approved by the IRB before
the research begins and any data is collected. This includes survey research; research conducted by students, faculty, or staff, and both internally and externally funded research.

IV. Definitions

Human Subject(s) - Has reference to two definitions defined by federal agencies.

1. Department of Health and Human Services defines human subject as a living individual about whom the investigator conducting research:
   a. Obtains information or biospecimens through intervention or interaction with the individual and uses, studies, or analyzes the information or biospecimens; or
   b. Obtains, uses, studies, analyzes, or generates identifiable private information or identifiable biospecimens.

2. Food and Drug Administration (FDA) defines human subject as an individual who is or becomes a participant in research, either as a recipient of the test article or as a control. A subject may be either a healthy individual or a patient. When medical device research involves in vitro diagnostics and unidentified tissue specimens, the FDA defines the unidentified tissue specimens as human subjects.

Informed Consent - Means the knowing consent of an individual or her/his legally authorized representative, so situated as to be able to exercise free power of choice without undue inducement or any element of force, fraud, deceit, duress, or other form of constraint or coercion.

Institutional Review Board (IRB) – Means an administrative body established by the University to protect the rights and welfare of human research subjects recruited to participate in research activities conducted under the auspices of the University.

Investigator - Is considered to be an individual performing various tasks related to the conduct of human subjects research activities such as:

1. Obtaining information about living individuals by intervening or interacting with them for research purposes.

2. Obtaining identifiable private information about living individuals for research purposes.

3. Obtaining voluntary informed consent of individuals to be subjects in research.

4. Studying, interpreting or analyzing identifiable private information or data for research purposes.

Noncompliance - Means that researchers or individuals other than researchers, such as research staff, Institutional Review Board (IRB) staff, or IRB members, did not adhere to federal regulations and/or MSU rules, regulations, policies, procedures, requirements, or IRB determinations for conducting research involving human subjects.

Research - As defined by the Department of Health and Human Services (DHHS) means a systematic investigation, including research development, testing, and evaluation, designed to develop or contribute to generalizable knowledge (45 CFR 46.102(d)). Research is considered synonymous with Clinical Investigation as defined by the FDA. The following activities are not considered research by DHHS:

- Scholarly and journalistic activities (e.g., oral history, journalism, biography, literary criticism, legal research, and historical scholarship), including the collection and use of information, that focus directly on the specific individuals about whom the information is collected.
• Public health surveillance activities, including the collection and testing of information or biospecimens, conducted, supported, requested, ordered, required, or authorized by a public health authority. Such activities are limited to those necessary to allow a public health authority to identify, monitor, assess, or investigate potential public health signals, onsets of disease outbreaks, or conditions of public health importance.

• Collection and analysis of information, biospecimens, or records by or for a criminal justice agency for activities authorized by law or court order solely for criminal justice or criminal investigative purposes.

• Authorized operational activities (as determined by each agency) in support of intelligence, homeland security, defense, or other national security missions.

V. Procedures and Responsibilities

A. Review

1. This policy will be reviewed no later than February 1 of each odd-numbered year by the Chair of the IRB and the Provost and Vice President for Academic Affairs, with recommendations for revision presented to the President no later than March 1.

2. Institutional Review Board (IRB)

   a. Institutional Review Board Composition and Appointment

      (1) Members of the IRB will be appointed by the Provost and Vice President for Academic Affairs, in accordance with requirements for composition and qualifications for membership set forth in 45 CFR 46.107. At least one faculty member from each of the six academic colleges at MSU will be appointed, plus a chairperson. Colleges that consistently generate a high volume of IRB applications may request that a second faculty member from the college be appointed to the committee. Members are appointed for two-year terms.

      (2) The IRB chairperson will be selected from IRB members with at least one year of experience serving on the board and appointed by the Provost and Vice President for Academic Affairs. Another faculty member from the chairperson's college will be appointed to replace the chairperson as the college representative to the IRB.

      (3) Members will complete the training described in Section 3 (Training) below prior to serving.

   b. Review

      (1) The IRB will review research and other scholarly activity proposals in regard to the protection of Human Subjects in research. The IRB has the ability to approve, tentatively approve pending receipt of additional information, or disapprove the proposed research or scholarly activity.

      (2) Research or scholarly activity protocols involving the use of human subjects must provide evidence of the following:

          (a) Risks are minimized through procedures consistent with sound...
research design (reasonable risk beyond those incurred in daily life must be outweighed by benefits to the subjects).

(b) Selection of subjects is equitable and the setting appropriate.

(c) Informed consent is in accordance with state and federal regulations.

(d) Consent is documented unless waivers of documentation are allowable in accordance with 45 CFR 46.

(e) Continued monitoring takes place to ensure the safety of the subjects.

(f) Privacy and confidentiality are maintained consistent with MSU’s obligation under the Texas Public Information Act.

(3) Participation of human subjects must be voluntary and the information provided to gain subject consent must be adequate and appropriate. The Provost and Vice President for Academic Affairs may require additional safeguards be taken to protect the rights and welfare of vulnerable populations.

c. Research Subject to Full Committee Review

(1) Research projects not eligible for either exemption or expedited review under 45 CFR 46 guidance will be subject to full committee review.

(2) The committee meets on a monthly basis during each long semester to review proposals and policies. Additional meetings may be called as needed. The committee does not routinely meet or accept applications for full review during the summer.

(3) The investigator(s) may choose to be available for the committee meeting at which the project proposal will be reviewed in order to answer any questions the committee may have regarding the proposal. Attendance by the investigator(s) at this committee meeting is not required.

d. Continuation or Renewal

(1) A project that has been determined to be exempt from IRB review does not require further review (e.g. annual continuing review) unless the relevant details of the project change and/or federal regulations are revised in a way that makes the project ineligible for exemption.

(2) Continuing review of research and other scholarly activities that were approved by the IRB is conducted at intervals appropriate to the degree of risk, but no less than once per academic year. Approval of research is good for a one year period. If the research is to continue beyond the approved time the researcher must request an extension. The request for extension must be reviewed according to 45 CFR 46 guidance.

(3) If the investigator, during the course of conducting the research or scholarly activities, revises the protocol (e.g. makes changes to the informed consent form, survey instruments used, or number and
nature of participants), she/he must submit immediately an addendum to the approved protocol for review by the IRB.

3. Training

All individuals conducting research or other scholarly activity (including faculty, staff, students, etc.) that involve human subjects must complete a training course approved by the Provost and Vice President for Academic Affairs and endorsed by MSU's IRB and provide documentation of certification. Alternate courses may be accepted but only at the discretion of the committee. A certificate of completion must be submitted for all project personnel. Approval of an IRB application will be withheld until all project personnel have completed the course. All research assistants who will interact with participants or have access to identifiable data must also complete the training. Training is required regardless of whether the project is internally funded, externally funded, or unfunded. Although subject to modification based on changing federal guidelines, training is currently required annually for each student investigator and every three years for faculty/staff.

4. Records

In accordance with federal regulations, all IRB records are retained for at least three years, and records relating to the human subjects research conducted are retained for at least three years after completion of the research. All records will be made accessible for inspection and copying by authorized federal officials at reasonable times and in a reasonable manner.

5. Midwestern State University IRB Procedure Manual

Federal regulations at 45 CFR 46 require institutions to establish and follow written IRB procedures for each of the following areas:

a. conducting its initial and continuing review of research and reporting its findings and actions to the investigator and institution;

b. procedures which the IRB will follow for conducting its continuing review of research;

c. procedures which the IRB will follow for reporting its findings and actions to investigators and the institution;

d. procedures which the IRB will follow for determining which projects require review more often than annually;

e. procedures which the IRB will follow for determining which projects need verification from sources other than the investigators that no material changes have occurred since previous IRB review;

f. procedures which the IRB will follow for ensuring prompt reporting to the IRB of proposed changes in a research activity, and for ensuring that such changes in approved research, during the period for which the IRB approval has already been given, may not be initiated without IRB review and approval except when necessary to eliminate apparent immediate hazards to the subject; and

g. procedures for ensuring prompt reporting to the IRB, appropriate institutional officials, any department or agency head, and the Office of Human Research Protections (OHRP), HHS, or any successor office, or the equivalent office.
within the appropriate federal agency of:

(1) any unanticipated problems involving risks to subjects or others
    (hereinafter referred to as unanticipated problems);

(2) any serious or continuing noncompliance with 45 CFR Part 46 or the
    requirements or determinations of the IRB; and

(3) any suspension or termination of IRB approval.

h. MSU’s IRB processes and procedures are described in the IRB Guidelines
   document available on the IRB page on MSU’s website.

6. Noncompliance

   In accordance with 45 CFR Part 46, the IRB shall have the right to suspend or
   terminate approval of research that is not being conducted in accordance with the
   IRB’s requirements or that has been associated with unexpected serious harm to
   subjects. Any suspension or termination of approval shall include a statement of
   the reasons for the IRB’s action and shall be reported promptly to the investigator,
   the Provost and Vice President for Academic Affairs, and, in the case of externally
   funded research, to the cognizant department or agency head.

VI. Related Statutes, Rules, Policies, Forms, and Websites

   Related Statutes/Rules:

   Related Policies:
   MSU Policy 3.142: Faculty Research

   Related Forms:

VII. Responsible Office(s)

   Director of Sponsored Programs and research
   Phone: (940) 397-4315
   E-mail: kathryn.zuckweiler@msutexas.edu

VIII. History

   11/07/2003: Adopted and Approved
   05/__/2009: Revisions:
   • Title changed to “Institutional Review Board”
   • Added under Review Procedures
     ○ Changed from “Chair of HRSC Committee” to Human
       Subjects Review Committee Website”
     ○ Added “The HRSC recommends that students or faculty
       planning to conduct research complete NIH human
       subjects training (the web link is available through the
       HSRC website). Credit for completing the training is
       available. Training takes approximately two or three
       hours to complete.”
• Added “No investigator(s) should begin research involving human subjects without first receiving approval from the HRSC on a claim for exemption, an expedited review, or a full review. Approval for research cannot be granted after research has been conducted”
• Added under Exempt Research, “and Consent form if needed”
  • Deleted: The Chair of the HRSC, upon receipt, will forward the Claim for Exemption to an appropriate committee member assigned for review.
  • Added: Each application must have the appropriate signature indicating that the proposal has been read, reviewed, and approved within the originating department and college and that the proposal conforms to accepted practical and ethical standards of the discipline. This must occur prior to submission for HRSC consideration.
  • Deleted: Data collection may begin as soon as the expediting Reviewer has approved the proposal, and the Statement of expediting Reviewer does not approve the proposal, it will be forwarded to the full committee for review. The Chair of the proposal.

• Added Expedited Research
  • (1) if the principal investigator and department chairperson determine that a project does not meet the criteria for exemption from institutional review, investigator(s) will prepare and submit a Claim for Expedited Research, a Cover Sheet, and a Consent form to the HRSC. Questionnaires to be used in the course of the proposed research must be submitted with Claim for Expedited forms
  • (2) Research qualifying for expedited review will usually involve little or no risk to participants who are under age of 18 or adults who will be audio or video taped. (see Examples of Research suitable for Expedited Review)
  • (3) Claims for Expedited review are handled on an “as needed” basis. Each application must have the appropriate signatures indicating that the proposal has been read, reviewed, and approved within the originating department and college and that the proposal conforms to accepted practical and ethical standards of the discipline. This must occur prior to submission for HRSC consideration. Data collection may begin as soon as the Expediting Reviewer has approved the proposal, it will be forwarded to the full committee for review. The Chair of the HRSC will notify the principal investigator regarding the status of the proposal.
• Under Research . . . Committee Review
o Monthly basis was changed to as needed basis
o Deleted: Additional meetings may be called as needed
o Added: each application must have the appropriate signatures indicating that the proposal has been read, reviewed, and approved within the originating department and college and that the proposal conforms to accepted practical and ethical standards of the discipline. This must occur prior to submission for HRSC consideration
o Changed “investigator” to “committee member from that college”
○ Deleted “prepare”
○ Added: The HRSC Chair will disseminate the complete proposal with attachments to all committee members
○ Added “review” and deleted “committee meeting at which the project is scheduled to be reviewed”
○ Changed to “majority of members” from “full committee”

08/09/2013: Revised to …

3.146 Provost and Vice President for Academic Affairs

PROTECTION OF HUMAN SUBJECTS IN RESEARCH

Date Adopted/Most Recent Revision: xx/xx/19

A. Purpose

1. **Midwestern State University recognizes the need for investigation in which human beings may serve as research subjects. Safeguarding** Midwestern State University places a special importance on a faculty member's commitment to quality teaching, scholarship, and service to the university, the community, and the professions. As a part of the scholarship component, students, both graduate and undergraduate, are encouraged to engage, with their teachers, in research as part of their Midwestern State University experience. Research is therefore viewed as a means for both enhancing teaching and learning, and for growing and promoting Midwestern State University. Because faculty and students of the university may utilize human subjects from time to time in conducting research, safeguarding the rights and welfare of human subjects is of prime concern to Midwestern State University, and this policy provides guidance in complying with federal laws and regulations and university regulations relating to research involving human subjects. All personnel engaged in any given study are accountable for any actions or inactions that might contribute to injury of any persons placed at risk. The university will maintain such reviews as necessary to minimize the risks of injury to human subjects and to ensure protection of their rights and welfare. The fundamental responsibilities outlined above are meant to suggest a preventive attitude with respect to potential injury to human subjects at risk. However, to better ensure that all human
subjects are adequately protected, authority is delegated and responsibilities are fixed as indicated below.

2. The purpose of this policy is to allow for the protection of human subjects involved in research conducted by Midwestern State University faculty, staff, and students in a manner consistent with federal regulations as stated in Code of Federal Regulations (CFR) Title 45 Part 46 Protection of Human Subjects (45 CFR 46; Revised January 15, 2009) and any other current or any future federal regulation relating to the Protection of Human Subjects in Research. In conjunction 45 CFR 46.107 with these federal regulations, Midwestern State University has established an Institutional Review Board (IRB).

3. All research and scholarly activity conducted under the auspices of Midwestern State University that involves human subjects must be reviewed and approved by the IRB before the research begins and any data is collected. This includes survey research; research conducted by students, faculty, or staff; and both internally and externally funded research. No research involving human subjects shall be undertaken unless the IRB has reviewed and approved such activity. This review shall determine whether these subjects will be placed at risk and, if so, whether:
   a. The risks to the subject are so outweighed by the sum of the benefit to the subject and the importance of the knowledge to be gained as to warrant a decision to allow the subject to accept these risks;
   b. the rights and welfare of any such subjects will be adequately protected; and
   c. legally effective informed consent will be obtained by adequate and appropriate methods.

B. Review

This policy will be reviewed no later than February 1 of each odd-numbered year by the Chair of the IRB and the Provost and Vice President for Academic Affairs, with recommendations for revision presented to the President no later than March 1.

C. Institutional Review Board (IRB)

1. Institutional Review Board Composition and Appointment Committee Make-up and Appointment

2. Federal Requirements

The IRB, in compliance with federal regulation 45 CFR 46.107, shall have at least five (5) members with varying backgrounds to promote complete and adequate review of research activities commonly conducted by Midwestern State University. The IRB shall be sufficiently qualified through the experience and expertise of its members, and the diversity of the members, including consideration of race, gender, and cultural backgrounds and sensitivity to such issues as community attitudes, to promote respect for its advice and counsel in safeguarding the rights and welfare of human subjects. The committee shall be able to ascertain the acceptability of proposed research in terms of institutional commitments and regulations, applicable law, and standards of professional conduct and practice. The committee shall, therefore, include persons knowledgeable in these areas. If the committee regularly reviews research that involves a vulnerable category of subjects, it shall include one or more individuals who are primarily concerned
with the welfare of these subjects. The committee's make-up must also take the following factors into consideration:

a. The committee may not consist entirely of men or entirely of women, or entirely of members of one profession.

b. The committee shall include at least one member whose primary concerns are in nonscientific areas.

c. The committee shall have at least one member who is not otherwise affiliated with the institution and who is not part of the immediate family of a person who is affiliated with the institution.

d. The committee may not have a member participating in its initial or continuing review of any project in which the member has a conflicting interest, except to provide information requested by the committee.

e. The committee may, in its discretion, invite individuals with competence in special areas to assist in the review of complex issues that require expertise beyond or in addition to that available on the committee. These individuals may not vote with the committee.

3. Midwestern State University's Specifications

a. Membership of Midwestern State University’s IRB will include:

   a. One (1) member from the Wichita Falls community.

b. At least six (6) faculty members (one from each of the six colleges) from Midwestern State University and a Chairperson. Members of the IRB committee will be appointed by the Provost and Vice President for Academic Affairs in accordance with requirements for composition and qualifications for membership set forth in 45 CFR 46.107 from a list of candidates from each of the six colleges as recommended by the dean of each college. At least one faculty member from each of the six academic colleges at Midwestern State University will be appointed, plus a chairperson. Colleges that consistently generate a high routinely-conduct research with human participants and generate a higher volume of IRB applications may request that the Provost and Vice President for Academic Affairs appoint a second faculty member from the that college be appointed to the committee. Members are appointed for two-year terms.

c. The IRB chairperson will be selected from IRB members with at least one year of experience serving on the board and appointed by the Provost and Vice President for Academic Affairs. Another faculty member from the Chairperson’s college will be appointed to replace the Chairperson as the college representative to the IRB.

d. Members will complete the training described in Section 3H below prior to serving.

4. Review

a. The IRB will review research and other scholarly activity proposals in regard to the protection of human subjects in research. The IRB has the ability to approve, tentatively approve pending receipt of additional information, or disapprove the proposed research or scholarly activity.

b. Research or scholarly activity protocols involving the use of human subjects must provide evidence of the following:
(1) **Risks are minimized through procedures consistent with sound research design** (reasonable risk beyond those incurred in daily life must be outweighed by benefits to the subjects)

(2) **Selection of subjects is equitable and the setting appropriate**

(3) **Informed consent is in accordance with state and federal regulations**

(4) **Consent is documented unless waivers of documentation are allowable in accordance with 45 CFR 46**

(5) **Continued monitoring takes place to ensure the safety of the subjects**

(6) **Privacy and confidentiality are maintained consistent with MSU Texas' obligation under the Texas Public Information Act**

c. **Participation of human subjects must be voluntary and the information provided to gain subject consent must be adequate and appropriate. The Provost and Vice President for Academic Affairs may require additional safeguards be taken to protect the rights and welfare of vulnerable populations.**

D. **Applicability: Human Subjects Research Defined and Who Must Submit Protocols**

1. The federal code defines research as: a systematic investigation, including research development, testing, and evaluation, designed to develop or contribute to generalizable knowledge.

2. The federal code defines a human subject as: a living individual about whom an investigator conducting research obtains data through intervention or interaction with the individual or identifiable private information.

3. The IRB policies and procedures apply to all research involving human participants performed by Midwestern State University faculty, students, or staff under University auspices, whether carried out solely with University resources or with assistance of outside funds. Research is considered to be under University auspices if it involves one or more of the following:

   a. The research is sponsored by the University.
   b. The research is conducted by, or under the direction of, any employee or agent of the University in connection with his or her employment with the institution, including the use of institutional letterhead.
   c. The research is conducted by, or under the direction of, any employee or agent of the University using any property or facility of the institution.
   d. The research involves the use of this institution’s non-public information to identify or contact human research participants or prospective participants.

4. Student research that involves human participants and is intended to result in generalizable knowledge must also be submitted for review. For example, any student research intended for publication or dissemination such as presentation outside of the classroom, i.e., at a conference, must be reviewed. Student research involving human subjects must be supervised by a Midwestern State University faculty advisor who will assume responsibility for ensuring that all research procedures comply with all federal, state, and university policies designed to protect human subjects.
5. Instructors who routinely implement class projects which are not meant to result in publication nor wide dissemination, and involve no greater than minimal risk, do not need to have these protocols reviewed by the IRB. However, if the instructor believes that one or more of the projects may result in publication or wide dissemination, a blanket IRB approval may be requested for the class as a whole.

E. Criteria for Categorization of Research

F. The IRB has incorporated into this policy the federal regulation’s designations of “Research Exempt from Review” and “Research Suitable for Expedited Review.” The category of “Research Subject to Full Committee Review” remains for research not suited to Exempt or Expedited Review. Information on the circumstances that qualify a research study for a particular review category is listed in the Code of Federal Regulations, Title 45, sections 46.101.2(b) and 46.110. The following criteria describe research to be considered in each of these categories:

1. Research Exempt from Review

G. The primary investigator and the department chair, in consultation with the IRB, are responsible for determining whether a research project falls within one of the following exempted categories:

   a. The research will be conducted only in established or commonly accepted educational settings (like classrooms) and it involves normal educational practices such as research on regular and special education instructional strategies, or research on the effectiveness of, or the comparison among instructional techniques, curricula, or classroom management methods.

   b. The research will be conducted using only questionnaire or interview survey methods and the subjects are elected or appointed public officials or candidates for public office.

   c. The research is limited to the collection and study of data, documents, records, pathological or diagnostic specimens that are available to the public.

   d. The research is limited to the collection and study of data obtained using only the following techniques and the data or information obtained will be recorded in such a manner that subjects cannot be identified, directly or indirectly, through identifiers linked with the subjects:

      (1) The data will be obtained through the use of educational tests (cognitive, diagnostic, aptitude, achievement, etc.); or

      (2) The data will be obtained by observing the public behavior of subjects; or

      (3) The data will be obtained using survey or interview procedures; or

      (4) The data will be obtained from existing documents, records, and pathological or diagnostic specimens.

   e. The research is limited to the collection and study of data obtained by:

      (1) Observing the public behavior of the participants; or using survey or interview procedures.
(2) The information collected about the subjects' behavior does not involve sensitive subjects such as illegal or immoral conduct, drug or alcohol abuse, sexual behavior, mental illness, or other possible personally embarrassing subjects;

(3) The information collected about subjects, if it became known to outsiders, could not reasonably be expected to place the subject at risk of civil or criminal liability, or be damaging to the subjects' social or financial standing or employability.

2. Examples of Research Suitable for Expedited Review

H. Most of the research projects that fall into this category of research have minimal or no risk for the subjects. Research suited for expedited review includes but is not limited to:

a. Clinical studies of drugs and medical devices only when condition (1) or (2) is met. (1) Research on drugs for which an investigational new drug application (21 CFR Part 312) is not required. (Note: Research on marketed drugs that significantly increases the risks or decreases the acceptability of the risks associated with the use of the product is not eligible for expedited review.)

(2) Research on medical devices for which (i) an investigational device exemption application (21 CFR Part 812) is not required; or (ii) the medical device is cleared/approved for marketing and the medical device is being used in accordance with its cleared/approved labeling.

b. Collection of blood samples by finger stick, heel stick, ear stick, or venipuncture as follows:

(1) from healthy, nonpregnant adults who weigh at least 110 pounds. For these subjects the amounts drawn may not exceed 550 ml in an 8-week period and collection may not occur more frequently than 2 times per week; or

(2) from other adults and children, considering the age, weight, and health of the subjects, the collection procedure, the amount of blood to be collected, and the frequency with which it will be collected. For these subjects, the amount drawn may not exceed the lesser of 50 ml or 3 ml per kg in an 8-week period and collection may not occur more frequently than 2 times per week.

c. Prospective collection of biological specimens for research purposes by noninvasive means. Examples: (a) hair and nail clippings in a nondisfiguring manner; (b) deciduous teeth at time of exfoliation or if routine patient care indicates a need for extraction; (c) permanent teeth if routine patient care indicates a need for extraction; (d) excreta and external secretions (including sweat); (e) unamplified saliva collected either in an unstimulated fashion or stimulated by chewing gum base or wax or by applying a dilute citric solution to the tongue; (f) placenta removed at delivery; (g) amniotic fluid obtained at the time of rupture of the membranes prior to or during labor; (h) supra- and subgingival dental plaque and calculus, provided the collection procedure is not more invasive than routine prophylactic scaling of the teeth and the process is accomplished in accordance with accepted prophylactic techniques; (i)
mueosal and skin cells collected by buccal scraping or swab, skin swab, or mouth washings; (j) sputum collected after saline mist nebulization.

d—Collection of data through noninvasive procedures (not involving general anesthesia or sedation) routinely employed in clinical practice excluding procedures involving x-rays or microwaves. Where medical devices are employed, they must be cleared/approved for marketing. (Studies intended to evaluate the safety and effectiveness of the medical device are not generally eligible for expedited review; including studies of cleared medical devices for new indications.) Examples: (a) physical sensors that are applied either to the surface of the body or at a distance and do not involve input of significant amounts of energy into the subject or an invasion of the subject’s privacy; (b) weighing or testing sensory acuity; (c) magnetic resonance imaging; (d) electrocardiography, electroencephalography, thermography, detection of naturally occurring radioactivity, electroretinography, ultrasound, infrared imaging, doppler blood flow, and echocardiography; (e) moderate exercise, muscular strength testing, body composition assessment, and flexibility testing where appropriate given the age, weight, and health of the individual.

e—Research involving materials (data, documents, records, or specimens) that have been collected, or will be collected solely for nonresearch purposes (such as medical treatment or diagnosis). (NOTE: Some research in this category may be exempt. This listing refers only to research that is not exempt.)

f—Collection of data from voice, video, digital, or image recordings made for research purposes.

g—Research on individual or group characteristics or behavior including, but not limited to, research on perception, cognition, motivation, identity, language, communication, cultural beliefs or practices, and social behavior or research employing survey, interview, oral history, focus group, program evaluation, human factors evaluation, or quality assurance methodologies. (NOTE: Some research in this category may be exempt. This listing refers only to research that is not exempt.)

1—Informed Consent

a—No human subject research (including research deemed exempt from continuing IRB review) may be conducted without informing the human subject or the legally authorized representative of the risks, procedures, and discomforts of the research. Subjects should be clearly informed that their participation is voluntary. When appropriate, a statement illustrating the voluntary nature of the project should be included on written questionnaires. When research involves the use of minor participants, consent must be obtained from a parent or legal guardian. In addition, the minor participants over the age of 6 must provide their assent to participate, using a form appropriate for their age level.

b—Voluntary informed consent assures a person’s right to exercise free power of choice regarding participation in research. The basic elements of information necessary for voluntary informed consent are:
(1) a clear, responsible explanation of procedures and purpose in language appropriate for the subject group (with experimental procedures specifically identified);
(2) a description of expected risks or discomforts;
(3) a description of expected benefits;
(4) a disclosure of alternative procedures available;
(5) an offer to answer any questions raised by a subject regarding procedure, concerns, complaints, etc.;
(6) freedom to withdraw/discontinue participation at any time, especially when the subjects are students enrolled in a class; (Discontinuing participation will be without penalty and without loss of benefits which the subject is otherwise due.);
(7) appropriate contact information for the researcher;
(8) maintenance of anonymity of subjects;
(9) maintenance of the confidentiality of subjects; and
(10) an explanation that any concerns regarding rights of the research subject should be directed to the chairperson of the IRB.

Protocol Submission and Processing for Review

a. Investigators must submit, at minimum, the following items for review as part of a standard protocol submission:
   (1) application for Use of Human Subjects in Research protocol form;
   (2) advertisement/recruitment materials that will be used to solicit participation in the study;
   (3) informed Consent documents reflecting the exact language that will be used to obtain participant consent. (See IRB website for guidance on informed consent issues.);
   (4) printed materials used for data collection (such as survey instruments or measures); and
   (5) any relevant grant applications tied to the protocol request.

b. To facilitate the transfer of proposals, investigators are required to consolidate all of their material into one electronic file (completed application, any recruitment materials, consent form, and instruments such as interview questions, surveys, tests, experimental manipulations, etc.)

c. The College IRB representative serves as the intake point for protocol submission, and forwards protocols to the IRB Chairperson for review. The IRB will review the protocol to confirm the research is exempt, eligible for expedited review, or subject to full board review.

d. The Chair of the IRB, upon receipt, will record the application and notify the principal investigator regarding the status of the proposal.
e. Data collection may begin as soon as the investigator has received committee approval. In the event that the reviewers do not approve the proposal, it will be forwarded to the full committee for review.

2. Research Subject to Full Committee Review

(1) Research projects not eligible for either exemption or expedited review under 45 CFR 46 guidance, will be subject to full committee review.

(2) The committee meets on a monthly basis during each long semester to review proposals and policies. Additional meetings may be called as needed. The committee does not routinely meet or accept applications for full review during the summer.

(3) The investigator(s) may choose to be available for the committee meeting at which the project proposal will be reviewed in order to answer any questions the committee may have regarding the proposal. Attendance by the investigator(s) at this committee meeting is not required.

3. Continuation or renewal

(1) A project that has been determined to be exempt from IRB review does not require further review (e.g. annual continuing review) unless the relevant details of the project change and/or federal regulations are revised in a way that makes the project ineligible for the exemption. categories above.

(2) Continuing review of research and other scholarly activities that were approved by the IRB is conducted at intervals appropriate to the degree of risk, but no less than once per academic year. Projects that were approved under expedited or full review require annual renewal. Approval of research is good for a one year period. If the research is to continue beyond the approved time the researcher must request an extension. The request for extension must be reviewed according to 45 CFR 46 guidance, at the same level of review as the original proposal. The researcher’s request must include the following information:

a) the name of principal investigator(s) and title of the research project;

b) the number of participants that have been tested to date and the number of additional participants needed;

c) a description of any modifications that will be made to the procedures;

d) any changes in anticipated risks or benefits;

e) a description of any adverse effect or participant complaints to date; and

f) a brief summary of the findings to date.

(3) If the investigator, during the course of conducting the research or scholarly activities, revises the protocol (e.g. makes changes to the informed consent form, survey instruments used, or number and nature of participants), he/she must submit immediately an addendum to the approved protocol for review by the IRB.

K. Training
All individuals conducting research or other scholarly activity (including faculty, staff, students, etc.) that involve human subjects must complete a training course approved by the Provost and Vice President for Academic Affairs and endorsed by Midwestern State University's IRB and provide documentation of certification. Alternate courses may be accepted, but only at the discretion of the committee. Online training from the National Institute of Health is available at http://phrp.nihtraining.com. A certificate of completion must be submitted for each of the primary investigators. Approval of an IRB application will be withheld until all project personnel have completed the course. It is recommended that all research assistants who will interact with participants or have access to identifiable data must also complete the training. Training is required regardless of whether the project is internally funded, externally funded, or unfunded. Although subject to modification based on changing federal guidelines, training is currently required annually for each student investigator and recommended every three years for faculty/staff.

L. Records

In accordance with federal regulations, all IRB records are to be retained for at least three years, and records relating to the human subjects research conducted are to be retained for at least three years after completion of the research. All records will must be made accessible for inspection and copying by authorized federal officials at reasonable times and in a reasonable manner.

M. Midwestern State University IRB Procedural Manual

Federal regulations at 45 CFR 46.103(b) (4) and (5) require institutions to establish and follow have written IRB procedures for each of the following 7 areas:

a. procedures which the IRB will follow for conducting its initial review of research;
b. procedures which the IRB will follow for conducting its continuing review of research;
c. procedures which the IRB will follow for reporting its findings and actions to investigators and the institution;
d. procedures which the IRB will follow for determining which projects require review more often than annually;
e. procedures which the IRB will follow for determining which projects need verification from sources other than the investigators that no material changes have occurred since previous IRB review;
f. procedures which the IRB will follow for ensuring prompt reporting to the IRB of proposed changes in a research activity, and for ensuring that such changes in approved research, during the period for which the IRB approval has already been given, may not be initiated without IRB review and approval except when necessary to eliminate apparent immediate hazards to the subject; and
g. procedures for ensuring prompt reporting to the IRB, appropriate institutional officials, any department or agency head, and the Office of Human Research Protections (OHRP), HHS, or any successor office, or the equivalent office within the appropriate federal agency of:

(1) any unanticipated problems involving risks to subjects or others (hereinafter referred to as unanticipated problems);
(2) any serious or continuing noncompliance with 45 CFR Part 46 or the requirements or determinations of the IRB; and
(3) any suspension or termination of IRB approval.

h. Midwestern State University's IRB processes and procedures are described in the IRB Guidelines document available on the IRB page on MSU's website.

N. Non-Compliance
In accordance with 45 CFR Part 46, the IRB shall have the right to suspend or terminate approval of research that is not being conducted in accordance with the IRB's requirements or that has been associated with unexpected serious harm to subjects. Any suspension or termination of approval shall include a statement of the reasons for the IRB's action and shall be reported promptly to the investigator, the Provost and Vice President for Academic Affairs, and, in the case of externally funded research, to the cognizant department or agency head.
Midwestern State University
Policies and Procedures Manual

University Policy and Procedure (UPP)
UPP 2-515: Protection of Animals in Research

Approval Authority: Board of Regents
Policy Type: University Policy and Procedure
Policy Owner: Provost and Vice President for Academic Affairs
Responsible Office: Director of Sponsored Programs and Research
Next Scheduled Review: 01/07/2020

I. Policy Statement

Midwestern State University ("MSU" or "University") recognizes the scientific and ethical responsibility for the humane care and use of animals involved in research, education, and testing and enjoins all individuals involved to the highest standards of care and consideration. Safeguarding the welfare of animals involved in research, testing and teaching is of prime concern to MSU, and this policy provides guidance in complying with federal laws and regulations and University rules and regulations relating to research involving animals. All personnel engaged in any given study are accountable for any actions or inactions that might contribute to harm of any animals placed at risk. The University will maintain such reviews as necessary to minimize discomfort to animals and to ensure protection of their welfare. The fundamental responsibilities outlined above are meant to suggest a preventive attitude with respect to potential harm to animals. However, to ensure that all animals are adequately protected, authority is delegated and responsibilities are fixed as indicated below.

II. Reason for Policy

The purpose of this policy is to allow for the protection of animals involved in research conducted by MSU faculty, staff, and students in a manner consistent with federal regulations as stated in U.S. Code (USC) Title 7 Chapter 54 Animal Welfare Act (AWA) (7 USC § 54) and Code of Federal Regulations (CFR) CFR Subchapter A Animal Welfare (9 CFR A), Animal Welfare Regulations (42 USC § 289d) and any other current or future federal regulation relating to the protection of animals in research. In conjunction with 9 CFR 2.31, MSU has established an Institutional Animal Care and Use Committee (IACUC). Additional standards on the humane care and use of animals established by the Public Health Service (PHS) Public Law 99-158 Health Research Extension Act of 1985 includes vertebrate animals and will also guide animal care and use at MSU.
III. Application of Policy

All research and scholarly activity conducted under the auspices of MSU that involves animals must be reviewed and approved by the IACUC before the research begins and any data are collected. This includes research conducted by students, faculty, or staff, and both internally and externally funded research.

IV. Definitions

Activity—Means elements of research, testing, or teaching procedures that involve the care and use of animals.

Animal(s)—The AWA defines “animal” as any live or dead dog, cat, nonhuman primate, guinea pig, hamster, rabbit, or any other warm-blooded animal, which is being used, or is intended for use for research, teaching, testing, experimentation, or exhibition purposes, or as a pet. This term excludes birds, rats of the genus Rattus, and mice of the genus Mus, bred for use in research; horses not used for research purposes; and other farm animals, such as, but not limited to, livestock or poultry used or intended for use as food or fiber, or livestock or poultry used or intended for use for improving animal nutrition, breeding, management, or production efficiency, or for improving the quality of food or fiber. With respect to a dog, the term means all dogs, including those used for hunting, security, or breeding purposes.

Animal use—Means the proper care, use, and humane treatment of animals produced for or used in research, testing, or teaching.

APHIS—The Animal and Plant Health Inspection Service, an agency of the United States Department of Agriculture tasked with the authority to regulate and enforce the AWA

Euthanasia—Means the humane destruction of an animal accomplished by a method that produces rapid unconsciousness and subsequent death without evidence of pain or distress, or a method that utilizes anesthesia produced by an agent that causes painless loss of consciousness and subsequent death

Field study—Means any study conducted on free-living wild animals in their natural habitat, which does not involve an invasive procedure, and which does not harm or materially alter the behavior of the animals under study.

Handling—Means petting, feeding, watering, cleaning, manipulating, loading, crating, shifting, transferring, immobilizing, restraining, treating, training, working, and moving or any similar activity with respect to any animal.

Housing facility—Means any land premises, shed, barn, building, trailer or other structure or area housing or intended to house animals.

Humane care—Means all actions taken to ensure that animals are treated according to high ethical and scientific standards.
Institutional Animal Care and Use Committee (IACUC)—Means an administrative body established by the University to protect the welfare of animal research subjects obtained for research activities conducted under the auspices of the University.

Investigator—Means an employee of a research facility, or other person associated with a research facility, responsible for a proposal to conduct research and for the design and implementation of research involving animals.

Noncompliance—Means that researchers or individuals other than researchers, such as research staff, IACUC staff, or IACUC members, did not adhere to federal regulations and/or MSU rules, regulations, policies, procedures, requirements, or IACUC determinations for conducting research involving animals.

Program—Means the activities conducted by and at an institution that have a direct impact on the well-being of animals, including animal and veterinary care, policies and procedures, personnel and program management and oversight, occupational health and safety, IACUC functions, and animal facility design and management.

Research facility—As defined by the AWA this is any school (except an elementary or secondary school), institution, organization, or person that uses or intends to use live animals in research, tests, or experiments, and that (1) purchases or transports live animals in commerce, or (2) receives funds under a grant, award, loan, or contract from a department, agency, or instrumentality of the United States for the purpose of carrying out research, tests, or experiments: Provided, that the Administrator may exempt, by regulation, any such school, institution, organization, or person that does not use or intend to use live dogs or cats, except those schools, institutions, organizations, or persons, which use substantial numbers (as determined by the Administrator) of live animals the principal function of which schools, institutions, organizations, or persons, is biomedical research or testing, when in the judgment of the Administrator, any such exemption does not vitiate the purpose of the Act.

Standards—The requirements with respect to the humane housing, exhibition, handling, care, treatment, temperature, and exportation of animals

V. Procedures and Responsibilities
A. General principles

MSU will follow the principles as specified in the Guide for the Care and Use of Laboratory Animals 8th edition, by the Committee for the Update of the Guide for the Care and Use of Laboratory Animals, Institution for Laboratory Animal Research, Division on Earth and Life Studies. In the guide, the following principles are endorsed:

- Consideration of alternatives (in vitro systems, computer simulations, and/or mathematical models) to reduce or replace the use of animals;
- Design and performance of procedures on the basis of relevance to animal or human health, advancement of knowledge, or the good of society;
- Use of appropriate species, quality, and number of animals;
- Avoidance or minimization of discomfort, distress, and pain;
- Use of appropriate sedation, analgesia, and anesthesia;
• Establishment of humane endpoints;
• Provision of adequate veterinary care;
• Provision of appropriate animal transportation and husbandry directed and performed by qualified persons;
• Conduct of experimentation on living animals exclusively by and/or under the close supervision of qualified and experienced personnel.

Federal regulations and guidelines dealing with animal welfare focus mainly on biomedical and behavioral research, teaching and testing that takes place in the laboratory on animals as defined by the AWA. In 9 CFR 2.31 part d, some vertebrates and non-laboratory (field) studies are exempt from the IACUC review requirement, but are included under the Health Research Extension Act of 1985. Additionally, the Guide for the Care and Use Of Laboratory Animals states that zoonoses should be reviewed by the institution’s health and safety committee or office, with assurances to the IACUC that the field study is designed to minimize risks to the health and safety of either animals or persons in the field. Many taxon-specific organizations have published guidelines for responsible use of animals in research, including:

• The Ornithological Council Guidelines to the Use of Wild Birds in Research;
• American Fisheries Society Guidelines for the Use of Fishes in Research;
• American Society of Ichthyologists and Herpetologists Guidelines for the Use of Live Amphibians and Reptiles in Field and Laboratory Research
• Guidelines of the American Society of Mammalogists for the use of wild mammals in research
• The Wildlife Society Wildlife Techniques Manual

These guidelines are the primary means for the IACUC to evaluate field protocols. Researchers who are planning field studies should consult one or more of these references. IACUC review does not free the field study from other regulatory requirements nor does acquisition of permits or approval from any management agency supersede IACUC review.

B. Review

1. This policy will be reviewed no later than February 1 of each odd-numbered year by the Chair of the IACUC and the Provost and Vice President for Academic Affairs, with recommendations for revision presented to the President no later than March 1.

2. Institutional Animal Care and Use Committee (IACUC)
   a. Institutional Animal Care and Use Committee Composition and Appointment
      (1) Members of the IACUC will be appointed by the Provost and Vice President for Academic Affairs, in accordance with requirements for composition and qualifications for membership set forth in 9 CFR 2.31. Committee membership will include:
         (a) At least two faculty members, of whom:
            i. One must be a scientist experienced in laboratory animal procedures;
            ii. One must be a non-scientist;
iii. A veterinarian with training or experience in laboratory animal science and medicine;
iv. One public member with no affiliation with MSU other than as a member of the Committee;
v. Not more than three members from the same administrative unit.

Members are appointed for two-year terms.

(2) The IACUC chairperson will be selected from IACUC members with at least one year of experience serving on the board and appointed by the Provost and Vice President for Academic Affairs.

(3) Members will complete the training described in Section 3 (Training) below prior to serving.

b. Review

(1) The IACUC will establish procedures for, oversee, and regularly evaluate the animal care and use program. The IACUC will meet semi-annually and more often if needed and will keep accurate and timely records of its deliberations.

(2) Research or scholarly activity protocols involving the use of animals must provide evidence of the following:

(a) Procedures involving animals will avoid or minimize discomfort, distress, and pain to the animals.

(b) The principal investigator has considered alternatives to procedures that may cause more than momentary or slight pain or distress to the animals, and has provided a written narrative description of the methods and sources used to determine that alternatives were not available.

(c) The principal investigator has provided written assurance that the activities do not unnecessarily duplicate previous experiments.

(d) Procedures that may cause more than momentary or slight pain or distress to the animals will:
   i. Be performed with appropriate sedatives, analgesics or anesthetics, unless withholding such agents is justified for scientific reasons, in writing, by the principal investigator and will continue for only the necessary period of time;
   ii. Involve, in their planning, consultation with the attending veterinarian or designee; and
   iii. Not include the use of paralytics without anesthesia.

(e) Animals that would otherwise experience severe or chronic pain or distress that cannot be relieved will be painlessly euthanized at the end of the procedure or if appropriate, during the procedure.

(f) The animals’ living conditions will be appropriate for their species in accordance with 9 CFR 2.31 part 3 and contribute to their health and comfort. The housing, feeding and nonmedical care of the animals will be directed by the attending veterinarian or other scientist trained and experienced in the proper care,
handling and use of the species being maintained or studied.

(g) Medical care for animals will be available and provided as necessary by a qualified veterinarian.

(h) Personnel conducting procedures on the species being maintained or studied will be appropriately qualified and trained in those procedures.

(i) Activities that involve surgery include appropriate provision for pre-operative and post-operative care of the animals in accordance with established veterinary medical and nursing practices.

(j) No animal will be used in more than one major operative procedure from which it is allowed to recover, unless:
   i. Justified for scientific reasons by the principal investigator, in writing;
   ii. Required as routine veterinary procedure or to protect the health or well-being of the animal as determined by the attending veterinarian; or
   iii. In other special circumstances as determined on an individual basis.

(k) Methods of euthanasia used must be in accordance with the definition of the term set forth in 9 CFR part 1, § 1.1 unless a deviation is justified for scientific reasons, in writing, by the investigator.

c. Research Subject to Full Committee Review

   (1) Research projects not eligible for either exemption under 9 CFR 2.31 guidance will be subject to full committee review.

   (2) The committee meets semi-annually to review proposals and policies. Additional meetings may be called as needed. The committee does not routinely meet or accept applications for full review during the summer.

   (3) The investigator(s) may choose to be available for the committee meeting at which the project proposal will be reviewed in order to answer any questions the committee may have regarding the proposal. Attendance by the investigator(s) at this committee meeting is not required.

   (4) Research projects involving vertebrate animals that qualify under Health Research Extension Act of 1985 will be subject to expedited review by a subset of the IACUC that includes the Chair and at least one other board member.

d. Continuation or Renewal

   (1) A project that has been determined to be exempt from IACUC review does not require further review (e.g. annual continuing review) unless the relevant details of the project change and/or federal regulations are revised in a way that makes the project ineligible for exemption.

   (2) Continuing review of research and other scholarly activities that were approved by the IACUC is conducted at intervals appropriate to the
degree of risk, but no less than once per academic year. Approval of research is good for a one year period. If the research is to continue beyond the approved time the researcher must request an extension. The request for extension must be reviewed according to 9 CFR 2.31.

(3) If the investigator, during the course of conducting the research or scholarly activities, revises the protocol (e.g. makes changes to the informed consent form, survey instruments used, or number and nature of participants), she/he must submit immediately an addendum to the approved protocol for review by the IACUC.

3. Training

a. All individuals conducting research or other scholarly activity (including faculty, staff, students, etc.) that involve animals must complete a training course approved by the Provost and Vice President for Academic Affairs and endorsed by MSU's IACUC and provide documentation of certification. Alternate courses may be accepted but only at the discretion of the committee. A certificate of completion must be submitted for all project personnel. Approval of an IACUC application will be withheld until all project personnel have completed the course. All research assistants who will interact with animals must also complete the training. Training is required regardless of whether the project is internally funded, externally funded, or unfunded. Although subject to modification based on changing federal guidelines, training is currently required annually for each student investigator and every three years for faculty/staff.

b. As stipulated in 9 CFR 2.31 training and instruction of personnel must include guidance in at least the following areas:

(1) Humane methods of animal maintenance and experimentation, including:
   (a) The basic needs of each species of animal;
   (b) Proper handling and care for the various species of animals used by the facility;
   (c) Proper pre-procedural and post-procedural care of animals;
   (d) Aseptic surgical methods and procedures.

(2) The concept, availability, and use of research or testing methods that limit the use of animals or minimize animal distress.

(3) Proper use of anesthetics, analgesics, and tranquilizers for any species of animals used by the facility.

(4) Utilization of services available to provide information:
   (a) On appropriate methods of animal care and use;
   (b) On alternatives to the use of live animals in research;
   (c) That could prevent unintended and unnecessary duplication of research involving animals;
   (d) Regarding the intent and requirements of the Animal Welfare Act.

4. Records

In accordance with federal regulations, all IACUC records are retained for at least
three years, and records relating to the animal research conducted are retained for at least three years after completion of the research. All records will be made accessible for inspection and copying by authorized federal officials at reasonable times and in a reasonable manner.

Specific recordkeeping requirements are stipulated under 9 CFR 2.35, and include records retention for IACUC committee activities, including meeting minutes, proposed activities and their associated approval decisions, semiannual IACUC reports, purchase records of animals used in research.

5. Midwestern State University IACUC Procedure Manual

Federal regulations at 9 CFR Subchapter A require institutions to establish and follow written IACUC procedures for each of the following areas:

a. conducting its initial and continuing review of research and reporting its findings and actions to the investigator and institution;

b. procedures which the IACUC will follow for conducting its continuing review of research;

c. procedures which the IACUC will follow for reporting its findings and actions to investigators and the institution;

d. procedures which the IACUC will follow for determining which projects require review more often than annually;

e. procedures which the IACUC will follow for determining which projects need verification from sources other than the investigators that no material changes have occurred since previous IACUC review;

f. procedures which the IACUC will follow for ensuring prompt reporting to the IACUC of proposed changes in a research activity, and for ensuring that such changes in approved research, during the period for which the IACUC approval has already been given, may not be initiated without IACUC review and approval except when necessary to eliminate apparent immediate hazards to the subject; and

g. procedures for ensuring prompt reporting to the IACUC, appropriate institutional officials, any department or agency head, and the Animal and Plant Health Inspection Service (APHIS), an agency of the United States Department of Agriculture, or any successor office, or the equivalent office within the appropriate federal agency of:

h. MSU's IACUC processes and procedures are described in the IACUC Guidelines document available on the IACUC page on MSU's website.

6. Noncompliance

In accordance with 9 CFR 2.31, the IACUC shall have the right to suspend or terminate approval of research if it determines that the activity is not being conducted in accordance with the description of that activity provided by the principal investigator and approved by the Committee. If the IACUC suspends an activity involving animals, the Provost and Vice President for Academic Affairs, in consultation with the IACUC, shall review the reasons for suspension, take appropriate corrective action, and report that action with a full explanation to APHIS and any Federal agency funding that activity.
VI. Related Statutes, Rules, Policies, Forms, and Websites

Related Statutes/Rules:

Related Policies:
MSU Policy 3.142: Faculty Research

Related Forms:

VII. Responsible Office(s)

Director of Sponsored Programs and Research
Phone: (940) 397-4315
E-mail: kathryn.zuckweiler@msutexas.edu

VIII. History

05/16/2013 Academic Council approval of the Creation of an Institutional Animal Care and Use Committee
University Policy and Procedure (UPP)

UPP 3-470: Chemical Safety

Approval Authority: Board of Regents
Policy Type: University Policy and Procedure
Policy Owner: Provost and Vice President for Academic Affairs
Responsible Office: Dean, McCoy College of Science, Mathematics and Engineering
Next Scheduled Review: 11/07/2020

I. Policy Statement

It is the policy of Midwestern State University ("MSU" or "University") to protect the health and safety of students, staff and faculty while engaged in the educational and research activities of the University. To this end, it is the intent of the University to maintain laboratory exposures to hazardous chemicals as low as reasonably achievable. All faculty, staff, and students who enter any laboratory utilizing hazardous chemicals as defined in this policy shall comply with the Chemical Safety Policy and Chemical Hygiene Plan.

II. Reason for Policy

The purpose of this policy is to ensure compliance with Occupational Safety and Health Administration (OSHA) Regulation "Occupational Exposure to Hazardous Chemicals" codified as 29 CFR 1910.1450(e) pertaining to the Chemical Hygiene Plan (CHP) and 29 CFR 1910.1200(z) Hazard Communication, also known as the "Right To Know Law". This policy also ensures compliance with Environmental Protection Agency (EPA) Resource Conservation and Recovery Act (RCRA – Title 40 of the Code of Federal Regulations (40 CFR) Parts 260-272). Applicable state law includes The Texas Administrative Code, Industrial Solid Waste and Municipal Hazardous Waste Title 30, Part I, Chapter 335. Applicable local law includes the City of Wichita Falls, Texas Code of Ordinances Article VII Division 4 Subdivision II Sections 106.816-823.

III. Application of Policy

The rules and procedures contained in this policy shall apply to all MSU facilities in which there is laboratory use of hazardous chemicals.
I. Policy Statement

It is the policy of Midwestern State University ("MSU" or "University") to protect the health and safety of students, staff and faculty while engaged in the educational and research activities of the University. To this end, it is the intent of the University to maintain laboratory exposures to hazardous chemicals as low as reasonably achievable. All faculty, staff, and students who enter any laboratory utilizing hazardous chemicals as defined in this policy shall comply with the Chemical Safety Policy and Chemical Hygiene Plan.

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III. Application of Policy

The rules and procedures contained in this policy shall apply to all MSU facilities in which there is laboratory use of hazardous chemicals.
IV. Definitions

**Hazardous chemical**—Means a chemical for which there is a statistically significant evidence, based on at least one study conducted in accordance with established scientific principles that acute or chronic health effects may occur in exposed persons or a chemical that is considered a health hazard.

**Laboratory**—Means any facility where the “laboratory scale use of hazardous chemicals” occurs or a workplace where relatively small quantities of hazardous chemicals are used on a non-production basis.

**Particularly Hazardous Substances (PHS)**—The OSHA Laboratory Standard defines Particularly Hazardous Substances as chemicals that are either carcinogen, reproductive toxin, or highly toxic on immediate contact.

**Personal Protective Equipment (PPE)**—Means equipment worn to minimize exposure to hazards that cause serious workplace injuries and illnesses, and may include (but is not limited to) gloves, safety goggles, and lab coats.

**Safety Data Sheets (SDS)**—Means a document containing information such as the properties of each chemical; the physical, health, and environmental health hazards; protective measures; and safety precautions for handling, storing, and transporting the chemical. The SDS provides guidance for each specific chemical on recommended PPE, first aid procedures, and spill clean-up procedures. The SDS were formerly known as Materials Safety Data Sheets (MSDS).

**Use of hazardous chemicals**—Means handling or use of such chemicals in which all of the following conditions are met:

1. Chemical manipulations are carried out on a laboratory scale;
2. Multiple chemical procedures and/or chemicals are used;
3. The procedures involved are not part of a production process, nor in any way simulate a production process; and
4. Protective practices and equipment are available and in common use to minimize the potential for exposure to hazardous chemicals.

V. Procedures and Responsibilities

A. **Chemical Hygiene Plan**

The OSHA Regulation “Occupational Exposure to Hazardous Chemicals” 29 CFR 1910.1450(e) requires creation and implementation of a Chemical Hygiene Plan (CHP). The CHP should cover at minimum:

- Labels and other forms of warnings
- Safety Data Sheets (SDS)
- Employee information and training
MSU also requires that the CHP (1) educate and protect students, faculty, and staff from health concerns associated with the use of hazardous laboratory chemicals; (2) assure that chemical exposures are not in excess of the permissible exposure limits adopted by OSHA; and (3) protect college visitors and property against potentially dangerous accidents associated with the handling, storage and disposal of hazardous chemicals.

B. Chemical Safety Responsibilities

1. The MSU Environmental, Health, Safety and Risk Management (EHSRM) Committee is charged with the responsibility for health, safety and risk management. This includes meeting quarterly to discuss issues of health, safety, and risk management concern.

2. The Dean of the McCoy College of Science and Mathematics has the ultimate responsibility for chemical safety at MSU and provides, along with other offices and department chairs, support for efforts to improve chemical safety and health. The Dean supervises and authorizes the Chemical Safety Manager.

3. The Chemical Safety Manager (also listed as Chemical Safety Officer in the CHP) is responsible concurrently for the management of the university's chemical usage in the McCoy College of Science, Mathematics and Engineering and across the university's other colleges and non-academic departments. The Chemical Safety Manager has responsibility for:
   a. Management and technical service in the purchase, stocking, distribution, use and disposal of chemicals and chemical laboratory supplies;
   b. Maintaining a complete chemical inventory for MSU;
   c. Developing, managing and implementing university chemical hygiene plans (CHPs) to ensure compliance with EPA regulations, OSHA laboratory standards and the University Crisis Management Plan; and
   d. Serving as an ex officio member of the EHSRM Committee.

4. Faculty and staff are tasked with:
   a. Informing and training students and workers on chemical and operational procedure safety as it applies to activities in their areas, and being aware of hazardous properties of chemicals stored and used in the area;
   b. Evaluating and limiting an experiment's potential for environmental emissions;
   c. Implementing and enforcing rules and standards concerning health and safety for laboratory, classroom, and support facilities;
   d. Ensuring student and lab worker compliance with the CHP;
   e. Ensuring that proper protective equipment is available and is in working order, and that individuals in the laboratory have been trained in the proper use of such equipment;
   f. Ensuring that all containers of hazardous waste are properly labeled and stored according to the Waste Management Plan;
   g. Understanding planned experimental activities and the hazardous chemicals used, including special personal protective equipment that may be required for those activities; and
h. Maintaining a current understanding of chemical safety through annual training and certification.

5. Lab workers and students are tasked with:
   a. Indicating by signature that they have been notified of the location(s) of the CHP and understand all safety locations and are willing to abide by them;
   b. Following all health and safety standards, standard operating procedures (SOP) and rules established in the CHP as communicated by staff and faculty;
   c. Reporting all hazardous conditions to the supervising faculty or staff;
   d. Wearing and using prescribed PPE;
   e. Reporting any illness or job-related injuries to the supervising faculty or staff;
   f. Requesting information and training of not sure about proper operational procedures; and
   g. Monitoring the workplace to identify environmental health and safety concerns.

C. Review

1. This policy will be reviewed no later than February 1 of each odd-numbered year by the EHSRM and the Dean of the McCoy College of Science, Mathematics and Engineering, with recommendations for revision presented to the Provost and Vice President of Academic Affairs no later than March 1.

2. Chemical Safety Committee (CSC)
   a. Chemical Safety Committee Composition and Appointment
      (1) Members of the CSC will be appointed by the Dean of the McCoy College of Science, Mathematics and Engineering. At least one faculty member will be appointed from each department in the McCoy College using hazardous chemicals. At least one faculty member from other colleges using hazardous chemicals will be appointed by the respective dean of the college;
      (2) The CSC chairperson will be selected from CSC faculty members appointed to the committee
      (3) The Chemical Safety Manager will be an ex officio member of the CSC;
      (4) The Risk Management and Safety Manager will be an ex officio member of the CSC;
      (5) The committee shall at least meet annually; and
      (6) The committee shall review and grant approval and disapproval on the basis of chemical safety requests for the use of PHS within the institution prior to being brought on campus.

3. Review and approval for use of particularly hazardous substances (PHS)
   a. Any person wishing to work with PHS shall first obtain permission from the CSC. The application submitted to the Committee shall contain the following information:
      (1) Names of the faculty or staff who will be responsible for the safe use of the PHS;
      (2) Location of use, including building and room number;
      (3) List of PHS to be used, including physical form and maximum amount in possession at any one time;
      (4) A description of how the PHS are to be used;
(5) A description of the equipment and facilities including a floor sketch;
(6) A description of containment devices, such as fume hoods or spill trays;
(7) Procedures for safe removal of contaminated wastes; and
(8) Decontamination procedures.

b. Approval for use entails annual reporting to the Chemical Safety Manager on any remaining PHS in the laboratory for inventory updating and/or termination of the PHS approval upon completion of the work with PHS.

4. Training
a. All individuals using hazardous chemicals in any laboratory as defined in this policy shall undergo training annually.

b. As stipulated in 29 CFR 1910.1450(e) and 29 CFR 1910.1200(z) training and instruction of personnel must include guidance in at least the following areas:
   (1) Background information on the OSHA Laboratory Standard;
   (2) MSU Chemical Hygiene Plan (CHP) and where to find it;
   (3) Responsibilities of MSU personnel and students under the CHP;
   (4) General information regarding hazards from chemicals;
   (5) Sources of information regarding hazardous chemicals;
   (6) MSU chemical inventory;
   (7) SDSs;
   (8) Container labels;
   (9) How to minimize exposure to hazardous chemicals; and
   (10) What to do in an emergency.

5. Records
In accordance with federal regulations, all CSC training and approval records are retained for at least three years. Chemical inventories are updated when any new chemical is acquired or an inventoried chemical is depleted. The inventory is reviewed annually for accuracy. All records will be made accessible for inspection and copying by authorized federal officials at reasonable times and in a reasonable manner.

VI. Related Statutes, Rules, Policies, Forms, and Websites

Related Statutes/Rules:
OSHA Regulation 29 CFR 1910.1450(e)
OSHA Regulation 29 CFR 1910.1200(z)
Texas Administrative Code Title 30, Part I, Chapter 335
City of Wichita Falls, Texas Code of Ordinances Article VII Division 4 Subdivision II Sections 106.816-823.

Related Policies:
MSU Policy 3.142: Faculty Research

Related Forms:

VII. Responsible Office(s)
McCoy College of Science, Mathematics and Engineering
Phone: (940) 397-4253
E-mail: margaret.brownmarsden@msutexas.edu

VIII. History

01/23/2013 Chemical Hygiene Plan provided to MSU by HRP Associates, Inc. went into effect.
RULES AND REGULATIONS
OF MIDWESTERN STATE UNIVERSITY

The Texas Legislature has delegated the organization, control, and management of Midwestern State University ("MSU" or "University") to the Board of Regents ("Board"). The Board is vested by law with the authority to promulgate rules and regulations and to provide the policy direction for the University in accordance with the laws of the State of Texas for the safety and welfare of students, employees, and property (buildings and grounds), and for the governance of the institution. See Texas Education Code Section 103.03; Section 51.202; and Section 51.352.

Rule- and regulation-making within the University is divided three ways: (1) The Bylaws of the Midwestern State University Board of Regents ("Bylaws"); (2) University policies and procedures ("UPPs") initiated by subordinate University authorities that become effective only upon approval by the Board of Regents; and (3) standard operating procedures ("SOPs") adopted by subordinate University authorities, under delegated legislative powers, that become effective as provided by such subordinate authorities and although subject to the ultimate authority of the Board, they are not approved by the Board. Texas court cases construing Texas Education Code Section 51.352 have held that the Board has wide discretion in exercising its power and authority and that the rules and regulations adopted by the Board have the same force as statutes.

The Bylaws of the Midwestern State University Board of Regents

Good governance begins with good governing documents, and the Bylaws are the starting point. They establish the rules by which the Board of Regents organizes itself. They are the vehicle by which the Board implements the authority delegated to it by the Texas Legislature and, in collaboration with the President and the administration, leads the University.

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Article I: The University
Article II: The Board of Regents
Article III: Student Regent
Article IV: Board Meetings
Article V: Board Officers
Article VI: Board Committees
Article VII: University Executive Officers
Article VIII: Indemnification
Article IX: Miscellaneous Rules and Regulations
Article X: Amendments of Bylaws
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Article X: Amendments of Bylaws
University Policies and Procedures (UPP)

At the next level below the Bylaws are University-wide policies and procedures that prescribe day-to-day operations that become effective only upon approval by the Board of Regents. UPPs must not conflict with the Bylaws, or requirements imposed by federal or state laws or implementing regulations.

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Chapter 8: Information Technology
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Standard Operating Procedures (SOP)

Standard operating procedures are established by academic or administrative units of the University to facilitate day-to-day business operations of and within a particular unit. SOPs are distinguished from UPPs because they do not directly or substantially affect procedural or substantive rights or duties of units or individuals outside the adopting unit. These procedures are adopted, amended, or repealed according to the procedures established by the particular unit and although subject to the ultimate authority of the Board, they are not approved by the Board.

SOPs may supplement but must not conflict with the Bylaws, UPPs, or requirements imposed by federal or state laws or implementing regulations. Although not required, the assistance of the University’s general counsel may be requested by the academic or administrative unit and/or its supervisory authority in drafting and revising SOPs to ensure conformity with the Bylaws, UPPs, and state and federal law/regulations. SOPs are not posted to the official Policy website, but are appropriately recorded and typically housed on the unit’s website and/or distributed within the unit as hard copies and filed with the Office of the Secretary of the University.
University Policies and Procedures (UPP)

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University Policy and Procedure (UPP)

**UPP 3-420: Reporting Abuse and Neglect of Child, Elder, or Disabled Person**

- **Approval Authority:** Board of Regents
- **Policy Type:** University Policy and Procedure
- **Policy Owner:** Vice President for Administration and Finance
- **Responsible Office:** Human Resources Director
- **Next Scheduled Review:** 11/07/2020

I. **Policy Statement**

Midwestern State University ("MSU" or "University") is committed to protecting children, elderly, and disabled persons as vulnerable members of society and in fulfilling the institution’s obligation to report suspected abuse or neglect as required by Texas law.

II. **Reason for Policy**

This policy defines the responsibility for reporting suspected abuse or neglect of children or an elderly or disabled person and complying with state law and applicable training requirements.

III. **Application of Policy**

This policy applies to all members of the MSU community, including but not limited to faculty, students, staff, individuals authorized to act on behalf of MSU, and independent contractors and third-party vendors and their employees/volunteers who have direct contact with children, elderly, or disabled persons.

IV. **Definitions (specific to this policy)**

For purposes of this policy:

*Abuse:* "Abuse" means the following acts or omissions by a person:

a. Mental or emotional injury to a child that results in an observable and material impairment in the child’s growth, development or psychological functioning;
b. Causing or permitting a child to be in a situation in which the child sustains a mental or emotional injury that results in an observable and material impairment in the child’s growth, development or psychological functioning;

c. Physical injury that results in substantial harm to the child, or the genuine threat of substantial harm from physical injury to the child, including an injury that is at variance with the history or explanation given and excluding an accident or reasonable discipline by a parent, guardian, or managing or possessory conservator that does not expose the child to a substantial risk of harm;

d. Failure to make a reasonable effort to prevent an action by another person that results in physical injury that results in substantial harm to the child;

e. Sexual conduct harmful to a child’s mental, emotional, or physical welfare, including conduct that constitutes the offense of continuous sexual abuse of a young child or children, indecency with a child, sexual assault, or aggravated sexual assault;

f. Failure to make a reasonable effort to prevent sexual conduct harmful to a child;

g. Compelling or encouraging a child to engage in sexual conduct, including conduct that constitutes an offense of trafficking of persons, prostitution, or compelling prostitution;

h. Causing, permitting, encouraging, engaging in, or allowing the photographing, filming, or depicting of the child if the person knew or should have known that the resulting photograph, film, or depiction of the child is obscene, or pornographic;

i. The current use by a person of a controlled substance in a manner or to the extent that the use results in physical, mental, or emotional injury to a child;

j. Causing, expressly permitting, or encouraging a child to use a controlled substance;

k. Causing, permitting, encouraging, engaging in, or allowing a sexual performance by a child; or

l. Knowingly causing, permitting, encouraging, engaging in, or allowing a child to be trafficked in a manner punishable as an offense, or the failure to make a reasonable effort to prevent a child from being trafficked in a manner punishable by law.

Abuse of an Elderly or Disabled Person: “Abuse of an elderly or disabled person” means:

a. the negligent or willful infliction of injury, unreasonable confinement, intimidation or cruel punishment with resulting physical or emotional harm or pain to an elderly or disabled person by the person’s caretaker, family member or other individual who has an ongoing relationship with the person, or

b. sexual abuse of an elderly or disabled person, including any involuntary or nonconsensual sexual conduct that would constitute indecent exposure, or

c. assaultive offenses committed by the person’s caretaker, family member, or other individual who has an ongoing relationship with the person.

Campus Law Enforcement: “Campus law enforcement” means any of the law enforcement agencies of the MSU campuses including the MSU Police Department and the North Central Texas College Police Department at the Flower Mound Center.

Child: “Child” means a person under 18 years of age.

Employee: “Employee” means anyone employed by MSU, including staff and faculty, including
full and part-time employees, employees in a temporary capacity, and student employees. The term includes employees who do not regularly come into contact with minors in the course of their employment. The term does not include independent contractors.

**Elderly Person:** “Elderly person” means a person 65 years of age or older.

**Disabled Person:** “Disabled person” means a person with mental, physical or developmental disability that substantially impairs the person’s ability to provide adequately for the person’s care or protection and who is 18 years of age or older or under the age of 18 and who has had the disabilities of minority removed.

**Exploitation:** “Exploitation” means the illegal or improper act or process of a caretaker, family member or other individual who has an ongoing relationship with an elderly or disabled person that involves using, or attempting to use, the resources of the elderly or disabled person, including the person’s social security number or other identifying information, for monetary or personal benefit, profit or gain without the informed consent of the elderly or disabled person.

**Neglect:** “Neglect” means:

a. The leaving of a child in a situation where the person knows or should know that the child would be exposed to a substantial risk of physical or mental harm, without arranging for necessary care for the child, and the demonstration of an intent not to return by a parent, guardian, or managing or possessory conservator of the child; or

b. The following acts or omissions by a person who knows or should know that:

i. Placing a child in or failing to remove a child from a situation that a reasonable person would realize requires judgment or actions beyond the child's level of maturity, physical condition, or mental abilities and that results in bodily injury or a substantial risk of immediate harm to the child;

ii. Failing to seek, obtain, or follow through with medical care for a child, with the failure resulting in or presenting a substantial risk of death, disfigurement, or bodily injury or with the failure resulting in an observable and material impairment to the growth, development, or functioning of the child;

iii. The failure to provide a child with food, clothing, or shelter necessary to sustain the life or health of the child, excluding failure caused primarily by financial inability unless relief services had been offered and refused;

iv. Placing a child in or failing to remove the child from a situation in which the child would be exposed to a substantial risk of sexual conduct harmful to the child; or

v. Placing a child in or failing to remove the child from a situation in which the child would be exposed to acts or omissions that constitute abuse committed against another child; or

c. The failure by the person responsible for a child's care, custody, or welfare to permit the child to return to the child’s home without arranging for the necessary care for the child after the child has been absent from the home for any reason, including having been in residential placement or having run away.

**Neglect of An Elderly or Disabled Person:** “Neglect of an elderly or disabled person” means the failure to provide for one's self the goods or services, including medical services, which are
necessary to avoid physical or emotional harm or pain, or failure of a caretaker to provide such goods or services.

**Professional Employee:** “Professional employee” means an employee who is certified by the state who, in the normal course of official duties for which a license or certification is required, has direct contact with children.

**Student:** “Student” means anyone actively enrolled in at least one SCH (semester credit hour) during a given enrollment term. Student also includes individuals between academic terms that completed the most recent term and registered for the upcoming term.

V. **Procedures and Responsibilities**

   **A. Reporting Obligations**

   1. An individual who has cause to believe that a child’s physical or mental health or welfare has been or will be adversely affected by abuse and/or neglect by any person must immediately report his or her belief to:

      a. Any local or state law enforcement agency, including campus law enforcement, especially in situations requiring an immediate response; or

      b. The Department of Family and Protective Services (“DFPS) or the agency designated by a court as responsible for the protection of children.

   2. A report must be made to DFPS if the suspected child abuse or neglect involves a person responsible for the care, custody or welfare of the child.

   3. A professional employee who has cause to believe that a child has been abused or neglected or may be abused or neglected, or that a child is the victim of the offense of indecency with a child also must make a report not later than 48 hours after the time the professional first suspects that the child has been or may be abused or neglected, or is the victim of child abuse or neglect or the offense of indecency with a child.

   4. An individual who witnesses, either a child in imminent danger or a crime against a child in progress should immediately call 911 to make a report.

   5. Reporting suspected child abuse or neglect is mandatory and cannot be delegated to another individual or MSU official. Reporting suspicion to another MSU official or employee or to the MSU Hotline does not satisfy the reporting requirement.

   6. An individual whose personal communications might otherwise be privileged including an attorney, a medical practitioner, a social worker or a mental health professional must still make a report.

   7. A report must be made in good faith. Confirmed evidence or proof of child abuse or neglect is not required prior to making a report. Uncertainty should be resolved in favor of making a report.

   8. Suspected child abuse or neglect must be reported when an individual learns of an allegation regardless of the alleged date of the incident.
9. An individual who makes a good faith report will not be retaliated against for making a report, even if the report is unfounded.

10. Failure to immediately report suspected child abuse or neglect is a violation of state criminal law and may subject faculty, staff, or students to disciplinary action, up to and including termination or expulsion.

B. Duty to Report Abuse, Neglect or Exploitation of an Elderly or Disabled Person

1. An employee or student shall make a report to the Department of Protective and Regulatory Services ("DPRS") if the employee or student has cause to believe that an elderly or disabled person is in the state of abuse, neglect or exploitation, including a disabled person receiving services in:

a. A mental health facility operated by the Department of State Health Services.

b. A licensed intermediate care facility for the mentally retarded.

c. in or from a community center, a local mental health or mental retardation authority, or;

d. Through a program providing services by contract with a mental health facility, community center or local mental health or retardation authority.

C. Internal Reporting Obligations

1. Students and other individuals who suspect child abuse or neglect occurring on any property owned, leased or controlled by any component campuses of MSU, or at any activity or event sponsored by MSU are strongly encouraged to report to his or her suspicions to the appropriate MSU official or office.

2. Upon receiving a report, the University will take appropriate action in cooperation with DFPS and/or law enforcement and will not take any action which might otherwise compromise a criminal investigation.

3. Unless waived in writing by the person making the report, the identity of a reporting individual will be confidential and may only be disclosed in accordance with law.

D. Training

1. All Professional Employees and Independent Contractors who are licensed or certified and who will come in contact with minors will be provided training in child abuse prevention techniques and the recognition of sexual abuse and other maltreatment of children and the responsibility and procedure of reporting suspected occurrence of sexual abuse and other maltreatment.

a. Techniques for reducing a child’s risk of sexual abuse or other maltreatment.

b. Factors indicating a child is at risk for sexual abuse or other maltreatment.

c. The warning signs and symptoms associated with sexual abuse and other maltreatment and recognition of those signs and symptoms.
d. The requirements and procedures for reporting suspected sexual abuse or other maltreatment as provided by state law and this policy.

2. Employees are required to complete Sexual Abuse and Child Molestation Training within 30 days from the first day of employment. Employees who fail to complete training by the deadline are subject to disciplinary action, up to and including termination.

VI. Related Statutes, Rules, Regulations, Policies, Forms, and Websites

Related Statutes/Rules:
- *Texas Education Code*, Title 3 Subchapter Z (Miscellaneous Provisions), Section 51.9761 (Child Abuse Reporting Policy and Training).
- *Texas Family Code*, Chapter 261, Subchapter B.

Related Regulations:
- *Texas Administrative Code*, Title 25, Part 1, Chapter 265, Subchapter N (Campus Programs for Minors), Rule §265.401 - §265.4015.

Related MSU Policies:
MSU UPP 3-410: Youth Protection Program

Related Forms:

Related Websites/Hotlines:
MSU UPP 3-410: Youth Protection Program
Texas Abuse Hotline: 1-800-252-5400 available 24-hours-a-day / 7 days a week
For secure website reporting to DFPS: [https://txabusehotline.org](https://txabusehotline.org)

VII. Responsible Office

Contact: Human Resources Director
Phone: (940) 397-4787
Email: dawn.fisher@msutexas.edu

VIII. Revision History