THE
UNIVERSITY
OF RHODE ISLAND

PROCEDURES for the Policy on Reporting Violations of Law, Regulations, or University Policy and Procedure

Policy Number: 01.013.1

Introduction

The University's Policy on Reporting Violations of Law, Regulations, or University Policy and Procedure, encourages all University Employees, students, and Affiliates, including members of the University of Rhode Island Board of Trustees, to report, in good-faith, serious concerns about violations of any federal or state law or regulation, or any University policy or procedure, that occurs in connection with the University's activities or operations. Examples of these violations include but are not limited to: misappropriation or misuse of University resources; misuse of government funding; fraud, forgery, or the alteration of documents; fraudulent financial reporting; bribery.

This procedure is intended to complement and supplement existing University policies and procedures. This procedure does not provide an avenue for expressing general workplace complaints and sentiments; addressing problems with colleagues, co-workers, or supervisors; or reporting alleged employment discrimination, sexual misconduct, or any other form of unlawful harassment. General workplace complaints and sentiments should be directed to a supervisor/manager or the Office of Human Resource Administration. All complaints of alleged discrimination, sexual misconduct, research misconduct, and student misconduct shall be handled under the terms of existing University policies covering those allegations and their associated procedures. Additionally, reports against an individual in the Public Safety Department shall be handled under the terms of the existing policies and procedures for that department.

This procedure, as amended from time to time, has been established to ensure compliance with the above policy.

Questions regarding these procedures should be directed to the Enterprise Compliance office at uri-enterprise-compliance-group@uri.edu.

I. Reporting Violations

Any individual who has reasonable grounds for believing that a violation has or is about to occur should file a report immediately in accordance with the Policy and report all they know. Although the individual reporting is not expected to prove the truth of an allegation, they should demonstrate sufficient grounds for concern in their report.

II. Responding to a Violation Report

A. Upon receipt of an allegation of a violation of law, regulation, or University policy and procedures, the manager, supervisor, Office of General Counsel, or Office of Human Resource Administration, must notify the Enterprise Compliance Office (uri-enterprise-compliance-group@uri.edu). Notification must be made within five (5) business days of the date the violation report is received.

B. The Enterprise Compliance Office will open a new case in the Mitratech Case Management System.

1. The office will strive to setup a case within two (2) business days of notification to the Enterprise Compliance Office.
2. A case number will be assigned.
3. The Enterprise Compliance Office is responsible for administering the Case Management System for tracking and monitoring timely review and investigation of violation reports received.

C. Individuals who make a report through the Ethics & Compliance Hotline via the website or telephone, will receive a case number and PIN at the time of their report.

   1. The Case Management System can be accessed online or by phone, using the unique case number and PIN, to view the report.
   2. Individuals that choose to remain anonymous will use the Case Management System as the primary means of communication with the investigator.

      a. The investigator can leave messages, request further information, or ask additional questions in the system.
      b. The individual reporting can access the system anytime to answer questions, provide more detail, or ask additional questions.
      c. It is recommended that the individual reporting return to the site regularly to check for messages.

   3. Reports of alleged discrimination, sexual misconduct, research misconduct, student misconduct, any complaint or grievance, or any other type of concern received outside the scope of this policy shall be transferred to the responsible department.
   4. Reports against an individual in the Public Safety Department will be transferred to the Assistant Vice President of Public Safety & Chief of Police.

D. An acknowledgment communication confirming receipt of the violation report will be sent to the individual reporting within two (2) business days of notification to the extent reasonably practicable to the Enterprise Compliance Office.

III. Preliminary Review of Violation Report

Upon receipt of the violation report, a preliminary review is performed. The review may include interviewing the individual reporting and/or any witnesses to the alleged violation.

A. The preliminary review will determine whether the report:

   1. falls within the scope of the Policy and applicable laws and regulations;
   2. has a foundation or basis on fact;
   3. contains, or is reasonably likely to yield, sufficient information, records, and evidence to support an effective investigation; and
   4. is sufficiently creditable and specific so that the potential evidence of violation may be identified.

B. The Director of Enterprise Compliance may assign an investigator to perform the preliminary review.

C. If the conditions are not met, the individual reporting will be notified, and the case closed. If applicable, a report may be transferred to another department.

D. If the conditions are met, an Investigation will be conducted, and investigator assigned.

IV. Review of Alleged Violation

All University officials involved in investigations must handle the violation report and allegations, and the investigation and communications surrounding the report and allegations, with sensitivity and discretion. Sufficient care must be taken to avoid incorrect accusations, alerting suspected Employee that an investigation is under way, or violating any person’s right to due process, or making statements that could lead to claims of false accusations or other civil rights violations.

A. The investigation may include meeting with sources who may have knowledge of the alleged violation, the individual reporting, and any witnesses for the purposes of establishing necessary facts of the violation in question.

B. The investigator may collect information and documentation relevant to the alleged violation. The burden of gathering evidence lies with the University and not with the individual reporting.

C. The investigation should be performed within a reasonable timeframe not to exceed sixty (60) days. All reasonable efforts will be made to complete the investigation timely however, if additional time is needed, an extension of this timeframe may be granted.

V. Preliminary Findings Report

A. The investigator will prepare a preliminary written report of findings. The preliminary report will contain the following:

1. Summary of the alleged violation
2. Summary of the scope of the investigation
3. Summary of the relevant evidence and findings
4. Proposed disposition and recommendations. Dispositions include:
    a. Founded: Reasonable cause exists to believe that violation has taken place.
    b. Sustained: Insufficient evidence to either prove or disprove that violation has taken place.
    c. Exonerated: Violation occurred but was lawful and within policy.
    d. Unfounded: Allegation is false or not factual or the Employee was not involved.
    e. Policy or Procedural Failure: The violation occurred but was lawful and proper in accordance with policy and procedure; however, a review of such policies and/or additional training is necessary to prevent future allegations of violations. The Employee is considered exonerated.

B. The report will be provided to the Director of Enterprise Compliance, Office of General Counsel, the Office of Human Resource Administration, and as appropriate, a University Official with Authority (University officer who has authority to institute corrective measures).

VI. Final Report

A final report shall be prepared which sets forth the compliance review findings, disposition, and recommended actions. Unless otherwise indicated in the report, the report's date shall be considered the investigation closure date upon which the results of the investigation become final, and case closed.

A. If violation allegations are sustained, the University Official with authority to institute corrective measures will be responsible for promptly acting.

B. If the investigation determines that a policy failure occurred, any necessary policy or procedural review and updates may be communicated to the Policy Development Coordinator, Administrative Policy Committee, or the policy and procedures owner.

C. If violation allegations are not sustained, exonerated, or unfounded, the case will be closed.

D. At the discretion of the University and subject to legal and other constraints, the individual reporting may receive information about the outcome of the investigation.

VII. Disciplinary Action

Employees who are found responsible for violations are subject to the full range of discipline including, but not limited to, verbal reprimand; written reprimand; mandatory training, coaching, or counseling; mandatory monitoring; partial or full probation; partial or full suspension; permanent separation from the institution (i.e., termination or dismissal); physical restriction from University property; cancellation of contracts; and any combination of the same. Disciplinary sanctions for Employee violations of the Policy are imposed in accordance with applicable Human Resources policies and collective bargaining agreements.

VIII. Monitoring Violation Reports

The Enterprise Compliance Office will monitor to confirm timely resolution of any required or agreed upon remediation steps identified in a Final Investigation report. The Office will also monitor for overall negative patterns and trends relating to violations reported and make recommendations, as needed, to the University officer(s) who has authority to institute corrective measures.

IX. Record Keeping

A confidential record of any violation report, informal or formal, including any resolution or disciplinary actions, will be filed in the Enterprise Compliance Office for seven (7) years from the investigation closure date.

X. Exceptions

None.

PROCEDURES Version Table

Procedures Version Issue Date	Corresponding Policy Version	Reason for Update
November 4, 2022	01.013.1	Inaugural Version
November 13, 2026	01.013.1	Corrections to office names, email addresses, and timelines based on current process.