# Faculty Departure Procedures

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This document is intended to provide a standardized checklist that must be completed for faculty who end their employment with Boston University or Boston Medical Center, whether through resignation, retirement, or termination. The checklist provides the steps the faculty member and the department will need to complete in order for the faculty member to officially exit from BU or BMC and to allow for reallocation of space in an orderly manner. This checklist includes important Human Resources information, departmental logistics, and procedures for faculty involved with active research projects. Following the steps outlined in the checklist will facilitate the transition of the faculty member from active employment to her/his eventual departure date. This process is intended to assist University departments and schools to be in compliance with state and federal guidelines, providing an efficient and effective means to close out projects and resources associated with sponsored research.

Section I is to be provided by the designated department representative to the faculty member departing the University.

Section II should be completed by the faculty member with the designated department representative to ensure all appropriate University entities are notified of the faculty member departure. Items within the document should be completed 90 days prior to departure, making them time critical. The Form should be reviewed and signed by the Department chair once completed. If a faculty member departs BU or BMC involuntarily, unexpectedly, is deceased or otherwise is unable to carry out their responsibilities, the Departmental Administrators should complete both Section I and II, as best as possible.

The appendices contain the close out procedures and contact information for specific areas within research such as human subjects, animal subjects, patents, equipment and/or data transfer, hazardous materials etc. These Forms should be given to the faculty member as soon as notification of their departure is received. Completion of an appendix is required only if it is applicable to the work of the individual faculty member. Departments may add their own specific appendices tailored to their needs as appropriate.

Boston University acknowledges the University of Virginia for their kind permission to use the materials developed for their program.
FACULTY MEMBER EXIT CHECKLIST
BOSTON UNIVERSITY and BOSTON MEDICAL CENTER

Instructions: Department is responsible for coordinating with departing faculty member on completion of this checklist and notifying appropriate BU departments. Upon completion of form, retain original in department files and forward a copy to Dean’s office.

_________________________________________    _____________________________________________
Department             Department Chair
_____________________________________________________________________________________
Department Administrator (name and email address) responsible for coordinating exit process

___________________________________________________ _______________________________
Faculty Member Name (Last, First, Middle)            Faculty Member Title

Check One:  [  ] Resigning Boston University/Boston Medical Center for another position (letter or resignation required)
[  ] Transferring to another BU department (Optional)
[  ] Retiring
[  ] Terminated
[  ] Other: __________________________________________________________________________

____________________
Date of Departure
_____________________________________________________________________________________
Faculty Member – Current Contact Information: email; tel #; business address

SECTION I:    TO BE COMPLETED BY DEPARTMENT

N/A  YES  DATE

☐ ☐ _________ Complete HR ‘Departing Faculty Checklist’ (Appendix A)

☐ ☐ _________ Provide copy of this checklist to faculty member and coordinate with faculty member on its completion and notification of appropriate departments of faculty member’s pending departure and effective date of departure

☐ ☐ _________ If BU or BMC employees are terminating or moving with Faculty member, contact the appropriate HR Office

☐ ☐ _________ If Faculty member is part of a Faculty Practice Plan (FPP), contact the appropriate FPP for information regarding terminating FPP employment
SECTION II: TO BE COMPLETED BY FACULTY MEMBER OR DEPARTMENT IN CONSULTATION WITH FACULTY MEMBER

N/A  YES  DATE

☐ ☐ _________ Notify any committees of which you are a member or any committees that are dependent on you for information or assistance

☐ ☐ _________ Notify students whom you advise and coordinate with Department Chair on a replacement mentor

☐ ☐ _________ Notify and coordinate with Department Chair/Department Administrator and HR (BU or BMC) regarding the disposition of personnel (post-docs, technicians, administrative staff, etc.) for whom you are responsible

☐ ☐ _________ Complete ‘Grants and Contracts Exit Checklist’ (Appendix B) if you are a PI on a grant or contract

☐ ☐ _________ Complete ‘Research Lab/Hazardous Materials Exit Checklist’ (Appendix C) if you conduct, maintain or work in a research lab or if you otherwise are responsible for the safe disposition of hazardous materials

☐ ☐ _________ Complete ‘Human Subject Research Exit Checklist’ (Appendix D) if you conduct human subject (clinical) research

☐ ☐ _________ Complete ‘Animal Research Exit Checklist’ (Appendix E) if you conduct research on animals

☐ ☐ _________ Complete ‘Removal / Transfer of Equipment, Data, Records or Other Items Exit Checklist’ (Appendix F) if you are responsible for equipment, specimens, cell lines etc. that you do not intend to leave in place

☐ ☐ _________ Complete ‘Patent/Inventions Exit Checklist’ (Appendix G) regarding invention disclosure, pending/issued patents, intellectual property, etc.

☐ ☐ _________ Finalize / settle any financial matters with Office of Financial & Business Affairs, e.g., outstanding advances, pending reimbursements, accounts for which you are an authorized signature, etc.

Signatures:

Faculty Member: ___________________________  Date

Department Administrator: ___________________________  Date

Department Chair: ___________________________  Date
APPENDIX A – HR DEPARTING FACULTY EXIT CHECKLIST  
(To be completed by the supervisor of the faculty and the department head)

Checklist is completed by the supervisor of the terminating employee.  
Checklist is approved and signed by the department head.  
Checklist is completed prior to the terminating employee’s last day of work.  
Send the completed signed checklist to the Employee Relations Representative in Human Resources.

Employee Name: ___________________________________________________________

Department: __________________________________________________________________

Position: ____________________________     Last Day of Work: ________________

U Number: _____________________________

Type of Termination
☐ Voluntary
  ☐ Employee provides resignation letter, send copy to Employee Relations Rep in HR
  ☐ Verbal resignation - supervisor should provide to employee confirmation of resignation
    in writing and send copy to Employee Relations Rep in HR
☐ Involuntary

Department/Payroll Info
☐ Determine effective date of resignation
☐ Calculate accrued unused vacation time to be paid in final pay check
☐ Generate Termination Turnaround Form
☐ Inform employee to contact Employee Relations Rep regarding Benefits status
☐ If employee is on H-1 Visa, notify HR and ISSO
☐ To fill vacancy: Generate a PS1 and submit with justification memo through appropriate process

Access Information
Yes  N/A
☐ ☐ Disable email account
☐ ☐ Remove employee’s name from:
  ☐ email group lists
  ☐ distribution lists
  ☐ internal/office phone list
  ☐ website
  ☐ building directory
☐ ☐ Close computer access
☐ ☐ Disable access to UIS
☐ ☐ Disable Kerberos password
☐ ☐ Change or transfer phone extension
☐ ☐ Change voicemail
☐ ☐ Deactivate long distance access code

Office Access

Last Modified: 12/21/2010
Yes  N/A
☐ ☐ Disable security codes if necessary
☐ ☐ Change office mailbox
☐ ☐ Clean work area and remove personal belongings

Collect the following Items by Last Day of Work:
Yes  N/A
☐ ☐ Keys (____office, ____building, ____desk, ____file cabinets, ____other____)
☐ ☐ BU Terrier ID Card
☐ ☐ SecurID
☐ ☐ Business cards
☐ ☐ Nameplate
☐ ☐ Name badge
☐ ☐ P-card
☐ ☐ Diner’s Card
☐ ☐ Cell phone
☐ ☐ Beeper
☐ ☐ PDA
☐ ☐ Laptop
☐ ☐ Uniforms
☐ ☐ Tools
☐ ☐ Other ______________________
☐ ☐ Other ______________________
☐ ☐ Other ______________________

Form Completed by: ___________________________ Date: ___________________________

Approved by: ___________________________ Date: ___________________________
Department Head
APPENDIX B – GRANTS and CONTRACTS EXIT CHECKLIST  
(To be completed by a Principal Investigator on a Grant or Contract)

Because grants and contracts are made to the Trustees of Boston University or Boston Medical Center and not to individuals, they must be closed out by Boston University and/or Boston Medical Center before they are relinquished (transferred) to another institution. The requirements vary but generally include financial, technical and patent reporting. BU/BMC will relinquish the award or contract back to the sponsor and the sponsor will then make a new award or enter into a contract with the new institution. All items listed below should be completed PRIOR to departing BU/BMC.

BU Office of Sponsored Programs:
OPS-MED: 617-638-4600  
OSP-CRC: 617-353-4365

BU Post Award Financial Operations  
(617) 353-4555

BMC Grants Administration:  
Pre-Award Associate Director:  617-414-5646  
Post-Award Associate Director:  617-414-2880

90 Days Prior to Departure Date:  
Alert your School or Departmental Administrator, the Office of Sponsored Programs (OSP) and Post Award Financial Operations and/or BMC Grants Administration of your intent to transfer a grant or contract to another institution.

N/A  YES  DATE

☐ ☐ ___________ Share Departmental Administrator and OSP or BMC Grants Administration contact information with the institution that you intend to transfer your grants and contracts to and provide their information to Departmental Administrator or OSP or BMC Grants Administration.

☐ ☐ ___________ Complete and submit final invention statements to sponsor as required, also see Appendix G.

☐ ☐ ___________ Ensure that all required progress reports and final reports have been prepared and submitted.

☐ ☐ ___________ Request that your administrator (department or school as appropriate) prepare a relinquishing statement or similar sponsor document. They will work with OSP or BMC Grants Administration for final approval.

☐ ☐ ___________ Prepare request to sponsor as required for the transfer of any equipment, also see Appendix F.

☐ ☐ ___________ Ensure that all original documents are given to the appropriate department administrator and inform that administrator about any copies of documents that will be leaving the University.

☐ ☐ ___________ Ensure, if transferring a grant or contract, that your school or department’s Grants and Contracts office or Administrator and OSP, or BMC Grants Administration have an up-to-date copy of all proposals and reports.

☐ ☐ ___________ Notify collaborating institutions in writing on any awards with subcontracts that the award will be transferring. If you have a Certificate of Confidentiality, notify the issuing office of your new institutional affiliation.

☐ ☐ ___________ Financial Responsibilities: With the help of the appropriate administrator, prepare budget for remaining months at the University or Hospital and ensure the correct amounts of funds are left at the University to cover any outstanding balances.
☐ Review and certify final expenditures made to grant or contract and work with Research Accounting to complete all sponsor-required financial reports and closeout activities.

☐ Resolve any outstanding commitments and budget deficits.

☐ Contact Post Award Financial Operations to make arrangements to review and certify final effort reports for you and your lab personnel.

☐ Material Transfer Agreements (MTA): Coordinate with Sponsored Program Contracting staff to ensure proper closeout of existing material transfer agreements. (Appendix F)

☐ Review terms of MTA and ensure materials are handled accordingly. Materials to be transferred to another institution will likely require a new MTA to be processed between the providing entity and the receiving entity.

☐ Before Materials are transferred, permission must be granted by the provider.

☐ Confidentiality Agreements: Coordinate with Sponsored Program Contracting staff or BMC Grants Administration to ensure proper closeout of existing confidential disclosure agreements.

☐ Review terms of confidentiality agreement to ensure that any information provided is handled accordingly. Information to be transferred to another institution will likely require a new MTA to be processed between the providing entity and the receiving entity.

☐ Before provided information is transferred, permission must be granted by the provider.

☐ Research Contracts: Coordinate with Sponsored Program Contracting staff or BMC Grants Administration to ensure proper closeout of contracts.
APPENDIX C- RESEARCH LAB/HAZARDOUS MATERIALS EXIT CHECKLIST
(To be completed by an Investigator responsible for closing down a laboratory)

Because laboratories often contain hazardous materials and equipment and other supplies obtained through several sources, coordination and care must be taken when either closing a lab completely or transferring some or all of the contents to another institution. To fully comply with health, safety and ownership requirements, the following actions may be required. All items listed below should be completed PRIOR to departing BU.

Environmental Health and Safety (EHS)
CRC: 617-353-4094
MED: 617-638-8830

60-90 Days Prior to Departure Date:

Alert your Unit Administrator or School Administrator and Environmental Health and Safety (as specified below) of your intent to close down a research laboratory to ensure the orderly cataloguing of equipment and the disposal of any hazardous materials.

N/A YES DATE

☐ ☐ __________ Coordinate with your Department Administrator to verify ownership of all equipment and materials, and make arrangements for disposal or transfer. For transfer requirements – see Appendix F. Note: If the lab contains hazardous materials, all unwanted items MUST be decontaminated. Contact the Environmental Health and Safety (EHS) for instructions. Completion of EHS Certificate of Decontamination Form (available from EHS) may be required.

☐ ☐ __________ Contact Environmental Health and Safety to make arrangements for removal or disposal of chemicals, biological materials, ‘sharp’ items, all radioisotopes and related samples/specimens, and unknown/unidentified containers. Ensure that the lab is free of all these materials before departure, and/or that the department chair has authorized leaving them in the lab.

☐ ☐ __________ If you are a generator of hazardous waste, contact Environmental Health and Safety to verify the disposal of your wastes and confirm proper labeling of all hazardous materials that will not be disposed.

☐ ☐ __________ Notify Environmental Health and Safety if you plan to ship or transport any chemical, biological or radioactive materials to another institution. They will provide you with required regulations.

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APPENDIX D - HUMAN SUBJECT RESEARCH EXIT CHECKLIST

(To be completed by an Investigator working on a human subject protocol)

It is imperative that proper steps be taken with regard to the disposition of human subject protocols prior to departure from the University. All items listed below should be completed PRIOR to departing BU.

IRB Offices:
Med campus: 617-638-7207
Charles River campus: 617-358-6115

60-90 Days Prior to Departure Date:

Contact the appropriate IRB office overseeing protocols/ grants to identify open protocols/grants and provide IRB with departure date.

For all human subjects protocols that will be closed a Final Report will be required.

- The CRC Final Report can be found on the CRC IRB website www.bu.edu/irb.
- Medical Campus Final Reports are submitted via INSPIR.

For each human subjects protocol that will remain open, the Principal Investigator role must be delegated to a new, appropriate Faculty/staff member. This is done by submitting a protocol Amendment to the IRB.

- The CRC Amendment request form is found at www.bu.edu/irb.
- The Medical Campus Amendment form is located in INSPIR.

*Principal Investigator must complete Section I (below) for each protocol for which you are responsible.

SECTION I

Projects to be Transferred

N/A YES DATE

☐ ☐ Assess transferability of research to new institution (e.g., geographic proximity for human subjects, resources at the new institution, confidentiality limitations on the BU/BMC protocol/consent, etc.)

☐ ☐ Submit application through new institution’s IRB.

☐ ☐ Submit Amendment or Final Report for each protocol to the IRB. Must include a management plan for any currently enrolled research subjects (e.g., withdrawing subjects from research who do not wish to be transferred to the new institution, process for informing subjects of study changes and new contact information, plan for reconsenting subjects if necessary, etc.).

☐ ☐ Consult with IRB if you will be transferring health information ABOUT subjects. Please note that the IND and the Certificate of Confidentiality, if applicable, may transfer with the protocol but additional HIPAA issues (i.e. limited data set, HIPAA waivers, new HIPAA Authorizations, may be required).

☐ ☐ Submit IRB Amendment or Final Report for each protocol.

Projects to be Retained at BU

N/A YES

☐ ☐ If you will remain the PI on the project, apply for Voluntary or Adjunct Faculty Appointment through Chair. (May be done via Resignation Letter)

☐ ☐ If a new PI will be appointed at BU, work with Department to identify new PI. Note: Special Considerations for Industry Sponsored Research – Industry sponsor has final approval over change of PI and/or Institution, and will modify any Clinical Trial agreement. **Note: the IRB must also agree that the

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proposed new PI has the appropriate qualifications, credentials and resources to take over the research project.

**IRB Tasks, to be completed to transfer protocol to a different PI:**

- Complete Amendment request.
- Modify protocol using tracked changes.
- Modify consent form to indicate the name of the new PI.
- Medical campus- new PI must “submit” the protocol in INSPIR after he/she is named in Section A as the PI. On the Charles River Campus- New PI must submit the amendment indicating his /her willingness to take over the study and comply with Investigator requirements.
- Submit all documents to IRB.

**Projects to be Terminated**

*If the PI is leaving but co-investigators /sub-investigators plan to continue to work on the project then the protocol should not be closed but instead, in most cases, it should be transferred to one of the co-investigators. Please contact the IRB office for additional assistance.*

**N/A  YES**
- Submit Final Report to IRB. (med campus via INSPIR, CRC-via Amendment request at www.bu.edu/irb.
- Be sure to include in Final Report the plans for the locking, storage, destruction of data and study identifiers.
APPENDIX E - ANIMAL RESEARCH EXIT CHECKLIST
(To be completed by an Investigator using animals as research subjects)

It is imperative that proper steps be taken with regard to the disposition of animal subjects prior to departure from the University. All items listed below should be completed PRIOR to departing BU. Failure to adhere to these procedures will result in the following:

1. A Letter of reprimand will be sent to the principal investigator with a copy sent to the department chair and to the IACUC at the new institution.
2. Any expenses, including per diems, will be billed to your department chair for the recovery of costs incurred.
3. Euthanasia of animals may be conducted at the discretion of the IACUC.

Institutional Animal Care and Use Committee (IACUC)
617-638-4263

Laboratory Animal Science Center (BUMC)
617-638-4086

Laboratory Animal Care Facility (CRC)
617-353-2463

At Least 90 Days Prior to Departure Date:

N/A YES DATE
☐ ☐ __________ Send written notification to the Institutional Animal Care and Use Committee (IACUC) Office and the LASC or LACF informing them of your intent to leave the University. The notification must include: exact date of departure, date of termination of protocols, intended disposition of any remaining animals, new contact information.

☐ ☐ __________ If you intend to transfer any animals remaining in inventory to another investigator’s protocol or have the animals transferred to the new institution, you must contact the Director of LASC or LACF to obtain approval and to complete the appropriate transfer forms. Note: Animals transferring to another institution will likely need to be placed in quarantine, so adequate lead time must be taken.

☐ ☐ __________ If you plan to continue collaborative research with another qualified BU faculty member, the collaborating BU faculty member must agree to accept responsibility for any ongoing research and animals in inventory. The departing faculty member’s protocol will be terminated. Therefore, the collaborator must submit a NEW animal use protocol under his/her name to the IACUC Office together with a cover letter that clearly details:
  • The nature of the collaborative work,
  • His/her willingness to accept the research project and the extent of his/her experience with the research of the departing investigator
  • The timetable for completion of the collaborative project.

☐ ☐ __________ Verify that any qualified BU collaborator(s) has received full IACUC approval for the new protocol. Otherwise, they may not be allowed to continue or initiate the departing investigator’s research.
APPENDIX F – REMOVAL/TRANSFER OF EQUIPMENT, DATA, RECORDS OR OTHER ITEMS EXIT CHECKLIST

(To be completed by a Faculty Member intending to transfer materials to another institution)

In many cases, faculty will have equipment, data, records or such things as specimens, cell lines or reagents that they would like to take with them when they leave the University. The ownership of these items may be unclear. It is best to clarify these issues prior to your departure or the transfer of these items. All items listed below should be completed PRIOR to departing BU.

Property Management: (617) 353-4555

60-90 Days Prior to Departure Date:

☐ ☐ ___________ Data or Records
If you will be transferring data or records please see the Data Retention Policy (http://www.bu.edu/policies/pdf/Record_Retention_Policy_1-27-10.pdf). Please note that this policy applies to all research data or records even if they were not collected in a "lab."

☐ ☐ ___________ Human Subject Data Records and HIPAA Regulations
If you will be transferring human subject data or records please see the Data Retention Policy (http://www.bu.edu/policies/pdf/Record_Retention_Policy_1-27-10.pdf) and HIPAA regulations regarding Research and Protected Health Information (PHI). http://www.bumc.bu.edu/hipaa/ and http://www.bu.edu/policies/administrative.html

☐ ☐ ___________ Equipment (Transfer of equipment requires Department Chair approval)
Contact Property Management to receive complete information on capital equipment and title.

If you will be transferring equipment out of BU space, please see the BU Transfer of Research Equipment Policy. (http://www.bu.edu/cfo/post-award-financial-operations/departments/property-management-pm/resources-overview/movable-capital-equipment-manual)

If you are transferring Research Equipment out of BMC space, please see BMC Grants Administration Research Equipment Policy (http://internal.bmc.org/grants/post_policies.htm then select Equipment Management)

☐ ☐ ___________ Other Items- Including Such Things as Specimens, Cell Lines or Reagents
If you will be transferring items such as specimens, cell lines or reagents, please contact OSP
APPENDIX G – PATENTS/INVENTIONS EXIT CHECKLIST

(To be completed by a Faculty Member who has patent or invention activity)

In order to ease your departure, it is important to communicate with the Patent Foundation regarding any potential issues that may arise related to your patents and/or inventions. All items listed below should be completed PRIOR to departing BU.

Office of Technology Development: (617) 353-4550

60-90 Days Prior to Departure Date:

N/A   YES   DATE

☐ ☐ _________ Forward information for patent prosecution, help in licensing activities and change in royalty flow to the Office of Technology Development.