

University of Kentucky
Management Plan Related to Employing Relatives
(Employee) – (Job Title)
Date

Reporting lines

See attached organizational charts.

Compensation

All pay decisions impacting (lower-level relative) shall be approved by the HR Compensation Director and (assigned administrator). These include but are not limited to pay changes as a result of merit or salary increases, promotions, lateral transfers and/or demotions (voluntary or involuntary), market adjustments, overload assignments, and one-time payments.

Work assignments and duties

All work assignments and duties will be directed by (assigned administrator) in alignment with the current position description with no direct or undue influence from the higher-level relative.

Any questions/concerns related to work assignments and duties (including scheduled work hours, shift assignments, paid and unpaid leave approvals, training opportunities, business travel, etc.) may be directed to (assigned administrator).

Communication

(Assigned administrator's name), (assigned administrator's job title), will serve as (lower-level employee's) direct supervisor. To ensure proper communication, (assigned administrator) will (insert details-attend staff meetings, communicate with department contact, etc. which will satisfy the requirement to notify all employees in the unit of the potential conflict of interest in employment and the plan to ensure no advantage or disadvantage to either relative or others employed in the unit). This notification will occur at least annually.

Performance evaluation and performance issues

An annual evaluation of (lower-level employee) will occur. Normally, the evaluation of (job title) is completed by (evaluator and job title). (Assigned administrator) will conduct the evaluation of (lower-level employee) with (first neutral supervisor or another department contact).

If (lower-level employee's) performance needs to be discussed prior to the annual evaluation, (assigned administrator) will bring the issue to (first neutral supervisor or other department contact). If the issue is one that needs to be addressed directly, (insert details, who will be involved).

Concerns

It should be clearly communicated to (insert appropriate colleagues etc.) that (lower-level employee) is reporting to (assigned administrator). Any concerns involving (lower-level employee) should be directed to (assigned administrator). It will be emphasized that there will be no repercussions for bringing forward any issues involving (lower-level employee).

Submitted by:

Signature of assigned administrator:

Signature of first neutral supervisor:

Signature of department head:

I have reviewed and agree to this plan and, also, understand I will be expected to review and sign this plan at least annually.

Signature of higher level relative:

Signature of lower level relative:

Senior administrator approval

I certify that:

1. The decision to employ the related individual is in the best interest of the university; and,
2. I have been informed of the selection process (if management plan was due to a hiring decision); and,
3. I have reviewed and approve this written management plan and believe the plan will ensure all employment decisions are made impartially and neither related employee will be or has been disadvantaged.

Signature of senior administrator:

Director of HR Employee Relations or Associate Provost for Faculty Advancement

By signing below, I am finalizing this management plan with an understanding all requirements per Governing Regulations X and HR Policy and Procedure #19: Nepotism are satisfied per this plan.

Signature of Director of HR Employee Relations or Associate Provost for Faculty Advancement: