

four-year terms if at least four years has passed since the end of the previous consecutive four-year term ([Va. Code §23.1-1300 B](#)).

ARTICLE IV
Committees

§ 4.02. Health Sciences Center /CS1 c (s)-1 (T-nd of)3 (c)-10 Diet

Athletics Committee, Audit, Compliance and Human Resources Committee, Governance Committee, Student Enhancement and Engagement and Digital Learning Committee, and University Advancement and University Communications Committee. Except as otherwise set forth in the Code of Virginia or these bylaws, the chairs and members of the standing committees shall be appointed by the Rector, after consultation with the parties involved, and shall serve until their successors have been duly appointed. The Rector should consider rotating board members through various committees and leadership positions to plan for board officer succession. All members may be reappointed from year to year. Board members shall typically serve on two or more standing committees. Standing Committee chair vacancies (versus temporary absences) may be filled at any time by appointment of the Rector. A quorum of each of the standing committees shall consist of three voting Visitors who are committee members. The Rector and Vice Rector are deemed committee members for all purposes, including a quorum. The agenda for each regular Board meeting shall include reports by committees to the Board. Unless otherwise specifically provided by the Board, decisions/ recommendations of standing committees (except decisions by the Academic and Research Advancement Committee on review of negative tenure decisions) are advisory and must be ratified and approved by the Board of Visitors.

BOARD OF VISITORS POLICY 1220 – STANDARDS FOR THE SAFE USE OF ARTIFICIAL INTELLIGENCE

Mr. Wilson explained the need for this new Board policy, noting the Governor issued an Executive Order requiring governing boards to codify an acceptable use policy for Artificial Intelligence in

B. AUTHORITY

[Virginia Code Section 23.1-1301, as amended](#), grants authority to the Board of Visitors to make rules and policies concerning the institution. Section 7.01(a)(6) of the [Board of Visitors Bylaws](#) grants authority to the President to implement the policies and procedures of the Board relating to university operations.

Executive Order w (l)-ug (O)2 (t)Ti0 639.84 1g39.84 1g39.85(r)3 (d)4 (r)3 ()32024 (BT/P A/CID 1D 5

1. Ensure Ethical Use: Prioritize ethical considerations and ethical use in AI deployment, in teaching, learning, research, and administration, promoting fairness, accountability, transparency and respect for human rights in all AI applications and AI related activities conducted within the University.

- b. Contracts with AI vendors should include provisions for data protection, privacy safeguards, in addition to clauses for non-compliance and dispute resolution by consulting with Procurement Services and following the software decision analysis process to ensure compliance.
 - c. Conduct regular audits and assessments in collaboration with ITS to monitor the performance and security of third-party AI solutions.
4. Protection of Student and Employee Data:
- a. Implement robust data privacy and security measures to safeguard sensitive information collected or processed by AI systems.
 - b. Ensure that AI systems comply with applicable laws and regulations governing the collection, storage, and use of student data, including the Family Educational Rights and Privacy Act (FERPA), the General Data Protection Regulation (GDPR), Health Insurance Portability and Accountability Act (HIPAA), and other relevant state and federal privacy laws.
5. Protection of Research Data:
- a. Strengthen provisions related to data privacy and security when using AI technologies, adhering to best practices for protecting sensitive information and obtaining informed consent for data collection and analysis.
 - b. Implement measures to ensure that confidential, sensitive, and other protected data are not entered into any AI research tool without proper risk analysis. Protected data may include information protected by FERPA, HIPAA, confidential personnel records, intellectual property, Human and Animal Subject data, and other sensitive or confidential institutional research data.
 - c. Any use of AI tools in the research process using humans or animals should be disclosed in the Institutional Review Board (IRB) application and address potential ethical considerations.
6. Implementation: The implementation of AI Policy Standards within Old Dominion University will be supported by the following strategies:
- a. **Training and Capacity Building:** Provide training and professional development opportunities for faculty, staff, and administrators on AI ethics, best practices, and compliance requirements. Foster a culture of responsible AI usage through awareness campaigns, workshops, and educational resources.
 - b. **Collaboration and Partnerships:** Forge partnerships with industry stakeholders,

- c. **Monitoring and Evaluation:** Establish mechanisms for ongoing monitoring, evaluation, and review of AI initiatives to ensure alignment with AI Policy Standards and educational objectives. Solicit feedback from stakeholders and incorporate lessons learned into future AI projects and policies.
7. **Community Engagement:** Engage students, faculty, staff, and the broader community in discussions and forums on AI ethics, privacy, and societal implications. Foster dialogue and collaboration with local stakeholders to address community concerns and priorities related to AI integration.
8. The specific standards to be utilized for compliance with this policy are published on the [Information Technology Services Computing Policies and Standards website](#). Additional guidelines are available on the [University Web and Digital Communication](#) website.

G. REGULAR POLICY REVIEWS

The Division shall conduct annual reviews of this policy to ensure its alignment with evolving regulations and best practices. These reviews shall involve consultation with experts, and other relevant stakeholders.

H. RECORDS RETENTION

Applicable records must be retained and then destroyed in accordance with the [Commonwealth's Records Retention Schedules](#).

I. RESPONSIBLE OFFICER

Vice President for Digital Learning

J. RELATED INFORMATION

[University Policy 3505 - Information Technology Security Policy](#)

