UNIVERSITY OF CENTRAL FLORIDA

Board of Trustees
Audit and Compliance Committee
November 30, 2017, 2:45 – 3:45 pm
President's Board Room
Conference Call-In Phone #1-800-442-5794, passcode 463796

AGENDA

I.	**CALL TO ORDER**	Beverly Seay *Chair, Audit and Compliance Committee*
II.	**ROLL CALL**	Margaret Melli *Executive Administrative Assistant of University Compliance, Ethics, and Risk*
III.	**MEETING MINUTES**	
	• Approval of the October 11, 2017, Audit and Compliance Committee meeting minutes	Chair Seay
IV.	**NEW BUSINESS**	Chair Seay
	• University Audit Report (INFO-1)	Robert Taft Chief Audit Executive
	• Report on Conflict of Interest and Commitment Initiatives (INFO-2)	Rhonda L. Bishop *Chief Compliance and Ethics Officer*
	• 2017-18 Work Plan Status of All Activities (INFO-3)	Rhonda L. Bishop
	• 2016-17 Compliance and Ethics Program Annual Report (INFO-4)	Rhonda L. Bishop
	• University Compliance, Ethics, and Risk Program update	Rhonda L. Bishop

- Overview of Title IX (INFO-5)   Rhonda L. Bishop
                                                    Nancy Myers
                                                    Director
                                                    Office of Institutional Equity
                                                    Dawn Welkie
                                                    Assistant Director
                                                    Title IX Coordinator
                                                    Office of Institutional Equity

V.   CLOSING COMMENTS   Chair Seay

Board of Trustees
Audit and Compliance Committee Meeting
October 11, 2017
President's Board Room

MINUTES

CALL TO ORDER

Trustee Beverly Seay, chair of the Audit and Compliance Committee, called the meeting to order at 4:30 p.m. by teleconference call. Committee members Ken Bradley, William Self, and Bill Yeargin attended by teleconference call. Trustee Lord and Chairman Marcos Marchena attended by teleconference call.

MINUTES APPROVAL

The minutes from the August 11, 2017, meeting were approved unanimously.

NEW BUSINESS

Compliance and Ethics Program Plan (AUDC-1)
Rhonda L. Bishop, Chief Compliance and Ethics Officer, presented for approval the Compliance and Ethics Program Plan. The committee unanimously approved the Program Plan.

Chair Seay adjourned the Audit and Compliance Committee meeting at 4:40 p.m.

Respectfully submitted: _____   _____
                        Robert Taft   Date
                        Chief Audit Executive

Respectfully submitted: _____   _____
                        Rhonda L. Bishop   Date
                        Chief Compliance and Ethics Officer

ITEM: INFO-1

University of Central Florida
Board of Trustees
Audit and Compliance Committee

SUBJECT: University Audit Report

DATE: November 30, 2017

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PROPOSED COMMITTEE ACTION

Information only.

BACKGROUND INFORMATION

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Supporting documentation: Attachment A: University Audit Report

Prepared by: Robert Taft, Chief Audit Executive

Submitted by: Robert Taft, Chief Audit Executive

Attachment A

University Audit Report

November 30, 2017

UCF

Agenda

1. update on completed and active audits

2. upcoming audits

3. overview of new audit methodology

4. audit risk analysis process

5. update from State University System Audit Council (SUAC) meeting

6. serving as a Trusted Advisor

Recently Completed Audits

3

▶ **Exempted and Sole Source Procurement Audit**

▶ Audit Client: UCF Procurement Services

▶ No recommendations made!

Other Completed Audits

4

Audit Name	Number of Recommendations
UCF Athletics Association (Direct Support Organization)	12

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Audits In Progress

5

Audit Name	Status
Board of Governors Performance-based Funding Data Integrity	Draft Report
Environmental Health and Safety	Fieldwork
Health Insurance Portability and Accountability Act of 1996 (HIPAA)	Fieldwork
Real Estate Lease Management	Planning
UCF Research Foundation (Direct Support Organization)	Planning

Next Scheduled Audits

6

Audit Name	Scheduled Kickoff
College of Nursing	First Quarter 2018
Research Incubators	Second Quarter 2018
Financial Aid	Second Quarter 2018
Academic Advising	Fourth Quarter 2018 (Deferred)
Board of Governors Performance Based Funding review	Ongoing

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Audit Methodology Revisions

7

Objective-based Auditing:

1) Evaluation of program performance and effectiveness
2) Evaluation of compliance with external regulation and internal UCF policies
3) Evaluation of the effectiveness of current workflow processes including internal control design and implementation
4) Calibration of the audit client's initiatives, objectives, and output with the values and priorities of the UCF Strategic Plan
5) IT General Controls
6) Evaluation of the sourcing, monitoring, and reporting of financial transactions

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Why are we making these changes now?

8

1) evolution of internal auditing

2) auditing at a higher strategic and organizational level

3) consistency of audit scoping

4) audit client's understanding of success beyond day-to-day focus and activities

5) opportunity to better evaluate overall university performance

6) software implementation

"Sometimes your only transportation is a leap of faith."

~ Margaret Shepherd

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9

Process Walkthrough of Academic Advising

▶ <u>What is Advising?</u>

➢ Assisting with selection of majors

➢ Schedule reviews to accelerate graduation

➢ Reducing the risk of academic probation

➢ Support to resolve students' personal issues

➢ Career preparation and job search

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Process Walkthrough of Academic Advising

▶ <u>Considerations</u>

➢ Student touchpoints: where, when, and timing of interactions and handoffs?

➢ Who serves as advisors?

➢ The role of faculty?

➢ Advisor training requirements?

➢ Desired student-to-advisor ratio?

➢ Centralized versus decentralized approach?

➢ Appropriate use of technology?

➢ Does the program have a positive impact on student success?

Objective by Objective Analysis

11

Objective 1--Evaluation of program performance and effectiveness

a) What is the best design for the UCF Academic Advising program?

b) What are the goals of this program?

c) Does everyone involved agree with these goals? Are the right people involved?

d) Are there program metrics and Key Performance Indicators?

e) How do we know that Academic Advising is a successful program?

f) Do students who meet with advisors frequently or periodically perform significantly better than students who don't meet with advisors in terms of graduation rate, GPA, etc.?

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Objective by Objective Analysis

Objective 2--Evaluation of compliance with external regulations and/or internal UCF policies

a) FERPA

b) HIPAA

c) Internal Academic Advising policies, procedures, handbooks

d) Any regulatory investigations, student and parent complaints or litigation?

e) Is there a tone at the top for ethics and compliance?

f) Does the organizational structure lend itself to escalation and resolution of regulatory issues?

g) Is there knowledge of key regulations across the audit client and other relevant personnel?

h) Is there any independent oversight provided by the BOT or management?

i) Are compliance efforts periodically reported?

j) What incentives and disciplinary measures have been established related to encouraging compliance?

Objective by Objective Analysis

13

Objective 3--Evaluation of the effectiveness and efficiency of current workflow processes including internal control design and implementation

➢ Processes specifically relevant to Academic Advising

1) Student evaluation and progress tracking

2) Scheduling and prioritization of advising appointments

3) Advisor workloads

4) Documentation of activity and interactions

5) Handoffs between advisors, faculty, and other specialists

6) Escalations of issues

7) Data analysis

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Objective by Objective Analysis

Objective 4-- Calibration of the audit client's initiatives, objectives and output with the values and priorities of the UCF Strategic Plan

a) How does Academic Advising impact the BOG Performance Metrics?

b) How are Academic Advising's goals and metrics calibrated with the UCF Strategic Plan?

c) Are there potential conflicts of interest between Academic Advising's goals and metrics and those of the overall UCF Strategic Plan?

d) What impact does Academic Advising have on the Performance Unit Plan?

Objective by Objective Analysis

15

Objective 5--IT General Controls (ITGC)

Examples of ITGC

a) Physical and system access security

b) Segregation of duties

c) Limit system administration rights to least number of individuals required ("Least Privileges")

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Objective by Objective Analysis

16

Objective 6--Evaluation of the sourcing, budgeting/monitoring and reporting of financial transactions

1) How much does UCF spend on Academic Advising on an annual basis?

2) Who controls the budget and how have budget amounts and allocations changed over the years?

3) Are the correct fund types used to pay for Academic Advising resources?

4) Are there specific plans for carryforward funds and or chargeback opportunities?

5) Are the authority levels for expense approval reasonable?

6) Are sole source purchasing opportunities used properly?

7) Are there qualified finance and accounting personnel performing this activity?

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Objective Scoring Scale
(the lower the score the better)

➢ 0 **Fully Acceptable** - Composite residual risk status is acceptable.

➢ 1 **Low** - Inaction could result in very minor negative impacts.

➢ 2 **Minor** - Inaction or unacceptable terms could result in minor negative impacts.

➢ 3 **Moderate** - Inaction could result in or allow continuation of mid-level negative impacts.

➢ 4 **Advanced** - Inaction could allow continuation of or exposure to serious negative impacts..

➢ 5 **Significant** - Inaction could result in or allow continuation of very serious entity level negative impacts.

➢ 6 **Major** - Inaction could result in or allow continuation of very major entity level negative consequences.

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Objective Scoring Scale
(the lower the score the better)

18

> 7 **Critical** - Inaction virtually certain to result in or allow continuation of very major entity level negative consequences.

> 8 **Severe** - Inaction virtually certain to result in or allow continuation of very severe negative impacts.

> 9 **Catastrophic -** Inaction could result in or allow the continuation of catastrophic proportion impacts.

> 10 **Terminal** - The current composite residual risk status is already extremely material and negative and having disastrous impact on the organization.

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Let's talk about Human Resources

19

- ▶ employee versus independent contractor

- ▶ duplicate or overlapping positions

- ▶ matrix reporting structures

- ▶ market rate compensation

- ▶ unpaid leave of absence monitoring

- ▶ incomplete or obsolete job descriptions

- ▶ funding sources for faculty versus faculty administrators

- ▶ time tracking software and usage

- ▶ tax treatment and purpose of "blended" business and personal travel

- ▶ tax withholding and unemployment compensation for employees living outside of Florida

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State University System Audit Council (SUAC)

20

October 2017 meeting

- performance metrics

- whistleblower determination process

- roles of audit and compliance functions

- Board of Governors Enterprise Risk Management survey and role of Internal Audit

- hot audit topics

- staffing levels

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Serving as a Trusted Advisor

21
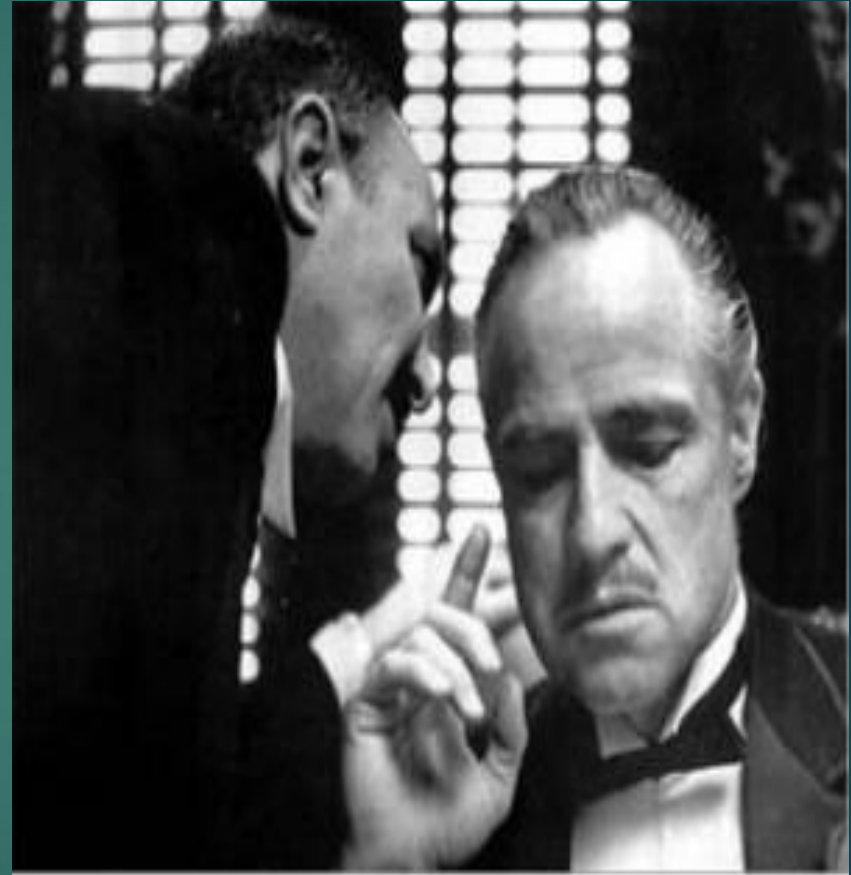
Becoming a Trusted Advisor 22

ATTRIBUTES OF OUTSTANDING TRUSTED ADVISORS

PERSONAL	Ethical Resilience	Results Focused	Intellectually Curious	Open-Mindedness
RELATIONAL		Dynamic Communicators	Insightful Relationships	Inspirational Leaders
PROFESSIONAL		Critical Thinkers	Technical Expertise	
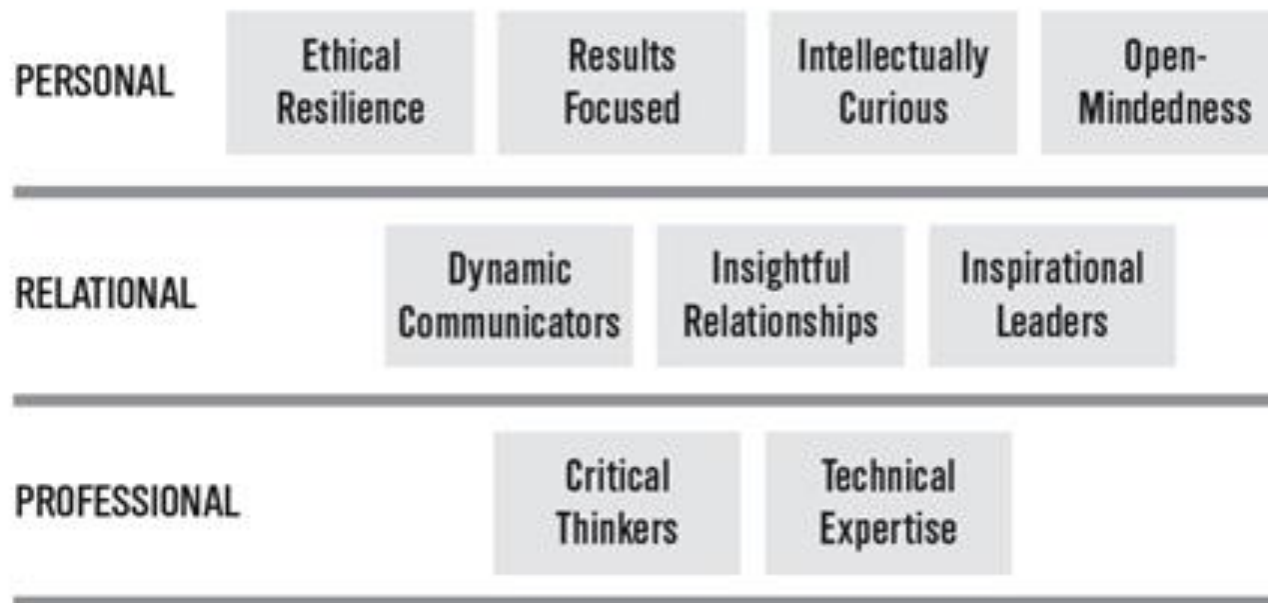
Questions?

ITEM: INFO-2

University of Central Florida
Board of Trustees
Audit and Compliance Committee

SUBJECT: Report on Conflict of Interest and Commitment Initiatives

DATE: November 30, 2017

PROPOSED COMMITTEE ACTION

Information only.

BACKGROUND INFORMATION

Supporting documentation: Attachment B: Report on Conflict of Interest and Commitment Initiatives

Prepared by: Rhonda L. Bishop, Chief Compliance and Ethics Officer

Submitted by: Rhonda L. Bishop, Chief Compliance and Ethics Officer

Attachment B

University Compliance, Ethics and Risk Office
UCF

Report on Conflict of Interest and Commitment Initiatives

October 31, 2017

Conflict of Interest and Commitment Initiatives

As a state institution and recipient of federal funds, the university must comply with state and federal requirements regarding the disclosure and management of conflicts of interest and commitment. The university is committed to conducting university business and activities with integrity and has developed policies and procedures to identify, manage, and when appropriate, remove potential and actual conflicts of interest and commitment.

This report contains conflict of interest and commitment initiatives completed from the date of our last report, August 8, 2016, to August 7, 2017.

1. **Compliance review.** The final compliance review report on the conflict of interest and commitment policies, procedures, and processes for the university, direct support organizations, and component unit was issued on September 19, 2014. The report contained improvement items; most were action items for our office with a few recommendations for other departments. The following is an update on the remaining items from the last report.

Item	Responsible Office	Status
Research exemption report to the governor and state legislature	Office of Research and Commercialization	Completed. The exemption report was prepared and submitted by our office to the governor and legislature prior to the March 2017 deadline. The process for preparing and submitting the report annually is now in place.
University policy addressing outside activities	Academic Affairs	In process.
University policy on receipt of gifts and honoraria	University Compliance, Ethics, and Risk	Completed. The policy was approved in June 2017 and distributed to all employees.
UCF Policy 2-202.1 Foundation Solicitation of Charitable Gifts edit to include a process for employees accepting gifts on behalf of the university	UCF Foundation	In process.

2. **Compliance with online disclosure reporting.** The 2016-17 conflict of interest and commitment online disclosure year ended with 100 percent completion by all faculty and staff required to submit an online disclosure. We reached the highest compliance rates with our submission and reviewer responses this year with a record:
   - ✓ **96 percent compliance rate with the 30-day submission requirement**
   - ✓ **95 percent compliance rate with disclosures reviewed and closed within 60-days**

As the final reviewer for all disclosures with reported outside activities, our office reviewed 1,056 disclosures (an increase from 999 last year) and identified 100 disclosures requiring implementation of a monitoring plan (an increase from 60 last year). Additionally, we reviewed 262 disclosures of employment of relatives for conflicts of interest (an increase from 77 last year).

University Compliance, Ethics, and Risk 2

3. **Potential conflict reviews.** In addition to the online review of disclosures, our office received 125 requests to review potential conflicts of interest from employees (an increase from 96 conducted last year). We conducted these reviews and provided guidance to the requesting employees and departments.

   We also received and completed 118 reviews of potential conflicts of interest associated with the attendance at events sponsored by vendors (almost twice as many as the 68 reviews performed last year). This includes vendor forms that require approval by the chief compliance and ethics officer when the vendor offers reduced or free conference fees, meals, or items provided by the vendor.

4. **Identification of reporting individuals under Florida statutes.** Individuals appointed or hired into positions that meet the state definition of a reporting individual are required to submit their first Statement of Financial Interest (Form 1) within 30 days of hire or appointment. We continued our efforts with Human Resources this year to identify appointments and hires as they occur and provide employees with the first Form 1.

   This year we also identified a new group of employees meeting the state's definition of a reporting individual and worked with UCF Procurement Services, Finance and Accounting, the Office of the General Counsel, and Human Resources to either reduce the individual's purchasing card threshold or require the Form 1.

   The process of obtaining UCF employees' and trustees' Form 1 and collaborating with UCF Procurement Services for evaluation of potential conflicts of interests related to contracts and purchasing activities continued this year with no identified conflicts.

   Additional support activities for reporting individuals during this report year included:
   - distributing awareness emails regarding registered lobbyists' attendance at an employee event with a reminder that the state ethics laws prohibit accepting promotional items from registered lobbyists, and
   - monitoring the Form 1 delinquent list posted on the Commission on Ethics' website and providing support until all forms were submitted to prevent employees from accruing fines.

5. **Process and system improvements.** Partnered with the Office of Research and Commercialization Compliance to strengthen the process for identifying and addressing conflicts requiring research exemptions that resulted in an increase in the number of exemptions this year. We reviewed and provided advice on 30 research exemption requests prior to sending to the provost, president, and chairman of the board of trustees for approval as required by state statute.

6. **New or revised university regulations and policies**.
   - Implemented UCF 2-009 Gifts and Honoraria policy that was approved in June 2017 by the University Policies and Procedures Committee. Distributed an announcement to all employees through the July edition of the *IntegrityStar* newsletter.
   - Revised university regulation UCF-3.018 Conflict of Interest or Commitment; Outside Activity or Employment to align with state statutes and submitted edits for review and approval. Revisions were accepted and the revised regulation became effective in June 2017.

7. **Awareness and training.** The following conflict of interest and commitment awareness and training activities were completed.
   - Developed and implemented a detailed communication plan for the 2016-17 conflict of interest and commitment online disclosure process that included guidance, training, and response to non-compliance.

University Compliance, Ethics, and Risk 3

- Revised six training modules to reflect updates for the 2016-17 conflict of interest and commitment disclosure year and provided them to faculty and staff members as an online resource.
- Delivered customized conflict of interest and state ethics laws overview to the new director of the Nicholson School of Communication in September 2016.
- Provided conflict of interest training to research administrators in a joint effort with the Office of Research and Commercialization in September 2016. Training materials were posted online as part of an e-learning program for research administrators that continued throughout 2017.
- Issued the annual communication to all faculty and staff members to remind them of the standards of conduct and reporting responsibilities under Florida ethics laws in October 2016.
- Revised and launched the 2017 version of the web course titled *Gifts and Honoraria* based on Florida's gift and vendor relationship laws for public officers and employees.
- Developed and launched a new web course titled *Potential Conflicts – Florida Code of Ethics for Public Officers and Employees* to educate all employees on the state ethics laws.
- Developed and delivered conflict of interest training to the Chairs and Directors Council in April 2017.
- Published the following articles in the July 2017 *IntegrityStar* newsletter addressing conflicts of interest:
  - article titled *Relationships that Can Create Conflicts* included the 2017 annual reminder on the standards of conduct and reporting responsibilities under Florida ethics laws and promoted the office's web courses titled *Potential Conflicts – Florida Code of Ethics for Public Officers and Employees* and *Gifts and Honoraria,*
  - article titled *University Policies on Amorous Relationships and Employment of Relatives* provided an overview of the university policies with links to read the full policy, and
  - article titled *Personal Relationships in the Workplace* included examples of how personal relationships in the workplace can become a conflict. Also included a training video and cartoon on conflicts arising from amorous relationships and the employment of relatives.

University Compliance, Ethics, and Risk 4

ITEM: INFO-3

University of Central
Florida Board of Trustees
Audit and Compliance Committee

SUBJECT: 2017-18 Work Plan Status of All Activities

DATE: November 30, 2017

PROPOSED COMMITTEE ACTION

Information only.

BACKGROUND INFORMATION

Supporting documentation: Attachment C: 2017-18 Work Plan Status of All
Activities

Prepared by: Rhonda L. Bishop, Chief Compliance and Ethics Officer

Submitted by: Rhonda L. Bishop, Chief Compliance and Ethics Officer

Attachment C

University Compliance, Ethics and Risk Office

2017-18 Work Plan Status of Activities
July 1, 2017 – October 31, 2017

UCF's comprehensive compliance and ethics program is based on the elements of an effective compliance program set forth in Chapter 8 of the Federal Sentencing Guidelines. These requirements set forth an effective compliance and ethics program for organizations and require not only promoting compliance with laws, but also advancing a culture of ethical conduct. Federal agencies use these guidelines to determine the effectiveness of a compliance and ethics program, and to determine whether the existence of the program will provide safe harbor in the event of noncompliance.

1. **Provide Oversight of Compliance and Ethics and Related Activities**
   Promote accountability among UCF employees for compliance with applicable federal, state, and local laws and regulations, and appoint knowledgeable individuals responsible for developing and implementing a comprehensive compliance and ethics program.

2. **Develop Effective Lines of Communication**
   Create communication pathways that allow the dissemination of education and regulatory information and provide a mechanism for reporting compliance activities or concerns.

3. **Conduct Effective Training and Education**
   Educate the UCF community on its compliance responsibilities and regulatory obligations, and on the university compliance and ethics program.

4. **Revise and Develop Policies and Procedures**
   Revise or develop university regulations along with policies and procedures that reflect UCF's commitment to ethical conduct and compliance with applicable laws and regulations.

5. **Conduct Internal Monitoring and Compliance Reviews**
   Identify and remediate noncompliance through proactive review and monitoring of risk areas.

6. **Respond Promptly to Detected Problems and Undertake Corrective Action**
   Conduct timely investigations of allegations of noncompliance and provide guidance on corrective actions.

7. **Enforce and Promote Standards through Appropriate Incentives and Disciplinary Guidelines**
   Promote the compliance and ethics program and university regulations, policies and procedures, and the consequences of noncompliance.

8. **Measure Compliance Program Effectiveness**
   Evaluate the overall compliance and ethics culture of UCF and the performance of the University Compliance, Ethics, and Risk office.

9. **New Regulations and Special Projects**

2017-18 Compliance and Ethics Work Plan
Status of Activities – November 2017

1. Provide Oversight of Compliance and Ethics and Related Activities
Coordinate and conduct bi-monthly meetings of the University Compliance and Ethics Advisory Committee
➢ Developed materials and chaired the Compliance and Ethics Advisory Committee meeting in July. ➢ Outlined the requirements for an effective compliance and ethics program and discussed how compliance partners should be implementing the requirements within their programs. ➢ Provided an update on the status of the Employee Code of Conduct and annual report, gave an overview of the Department of Education Office of Civil Rights complaints against the university, and discussed the new committee formed for addressing minors on campus. ➢ Discussed articles planned for the July and October *IntegrityStar* newsletter edition and received updates from members on their compliance and ethics efforts.
Conduct quarterly meetings with compliance partners and senior leadership
➢ Met with vice presidents, key administrators, and compliance partners to provide updates on compliance and ethics initiatives and discuss any concerns or issues. ➢ Provided quarterly Athletics compliance update to the president and vice president and executive chief of staff.
Serve on and provide compliance guidance to the Title IX workgroup
➢ Provided guidance and support to the Title IX coordinator and served on and provided compliance guidance to the Title IX workgroup and Title IX policy committee.
Serve as a member of the Security Incident Response Team and provide guidance
➢ Served as a member of the Security Incident Response Committee and provided review and guidance associated with federal and state privacy and data breach requirements.

2

2. Develop Effective Lines of Communication

Prepare and distribute *IntegrityStar*, the compliance and ethics newsletter

- ➢ Developed and issued the July 2017 edition of the *IntegrityStar* covering the theme of personal relationships in the workplace.
  - o Article titled *Relationships that Can Create Conflicts* included the 2017 annual reminder on the standards of conduct and reporting responsibilities under Florida ethics laws and promoted the office's web courses titled *Potential Conflicts – Florida Code of Ethics for Public Officers and Employees* and *Gifts and Honoraria*.
  - o Article titled *University Policies on Amorous Relationships* and *Employment of Relatives* provided an overview of the university policies with links to read the full policy.
  - o Article titled *Personal Relationships in the Workplace* included examples of how personal relationships in the workplace can become a conflict and included a short training video on conflicts with the employment of relatives and a cartoon covering amorous relationships in the workplace.
- ➢ Developed and issued the October 2017 edition of the *Integrity Star* announcing the university's first UCF Employee Code of Conduct.
  - o Article titled *Announcing the UCF Employee Code of Conduct* provided information on how to access the Code of Conduct and enroll in online training.
  - o Article titled *UCF IntegrityLine Cases on Civility* provided data on reports of suspected or actual misconduct or ethical concerns.
  - o Article titled *Celebrate Compliance and Ethics Week* announced the activities scheduled for the first week of November.

Administer and promote the UCF IntegrityLine

- ➢ Continued administration of the UCF IntegrityLine to include review and tracking of all reports, data compilation, trend review, and reporting.
- ➢ Continued promoting the UCF IntegrityLine in the *IntegrityStar* newsletter; through ethical leadership training; in compliance videos; in the Compliance, Ethics, and Risk pamphlet; on the Compliance, Ethics, and Risk website; on the websites of all compliance partners; tabling events; and through distribution of custom IntegrityLine earbuds and wallet cards.
- ➢ Continued providing UCF IntegrityLine wallet cards and pamphlets to all new employees during orientation.

3

Coordinate timely responses to regulatory and other external agencies

➢ Completed the *2017 SUS ERM Practices Survey* and submitted to the Board of Governors.

Maintain and promote the compliance and ethics website

➢ Promoted the compliance and ethics website in the University Compliance, Ethics, and Risk pamphlets distributed to all new employees.
➢ Updated the website to include the July and October edition of the *IntegrityStar* newsletter, added additional videos to the training page, and added the UCF Employee Code of Conduct online training module; updated the organizational chart and revised the compliance matrix to include changes to compliance partners.

3. Conduct Effective Training and Education

Provide training on ethical leadership and avoiding conflicts of interest to the Student Government Association, Leadership Enhancement Program, and the Leadership Development program

➢ Served as a mentor in the Leadership Enhancement Program hosted by the Office of Diversity and Inclusion, attended Program meetings, and met with the Program mentee.
➢ Provided Ethical Leadership training for the Leadership Development Program in Human Resources.

Conduct Clery Act compliance training and promote newly launched online Clery training module

➢ Developed and conducted a session of Clery Act training for coaches and administrators in Athletics and the Student Government Association Cabinet members.

4

Deliver in-person Gifts and Honoraria training

➢ Developed and delivered customized Gifts and Honoraria training at the Human Resources hosted meeting for the State University System College University Human Resources Executives in July 2017.
➢ Developed and delivered Gifts and Honoraria training for faculty and staff at the College of Medicine in September and October 2017.

Launch third annual Compliance and Ethics week awareness campaign

➢ Planned activities for the annual Compliance and Ethics week awareness campaign that occurs during November 6-9, 2017, to include hosting three brown bag lunch and learn training sessions and distributing an online word scramble.
➢ Distributed all employee email in October announcing the activities planned in anticipation of Compliance and Ethics week.

Develop and launch online Employee Code of Conduct training

➢ Finalized the Employee Code of Conduct training and launched the training in October 2017 to all existing employees. Worked with Human Resources to implement training for all new employees beginning on November 9.
➢ Added the Employee Code of Conduct online training module to our website and featured the new training in our October edition of the *IntegrityStar.*
➢ Customized "Know the Code" mini courses on the following topics: *Communications with the Public and Media, Conflicts of Interest, Fraud, Gifts and Honoraria, Harassment in the Workplace, Reporting Violations, Sexual Harassment*, and *University Resources.*

Promote Gifts and Honoraria and Potential Conflicts online training modules and track employee completion

➢ Promoted the office's web courses titled *Potential Conflicts – Florida Code of Ethics for Public Officers and Employees* and *Gifts and Honoraria* in the July edition of the *IntegrityStar*.
➢ Distributed an all employee email in October 2017 promoting the *Potential Conflicts – Florida Code of Ethics for Public Officers and Employees* training.

5

Identify additional opportunities to develop and deliver compliance and ethics training

➢ Hosted a table at the New Faculty Orientation in August 2017 and the employee benefits fair in October 2017 to raise awareness of the office and provide education on the UCF IntegrityLine and the conflict of interest and commitment reporting; featured the newly available online UCF Employee Code of Conduct training module in our *IntegrityStar* newsletter.

➢ Developed and provided grant and contracts award administration training sessions to faculty and administrators within the College of Nursing. This is an ongoing training effort with the Research Compliance Office within Research & Commercialization to ensure all research faculty receive training in federal compliance requirements.

➢ Delivered specialized training to the Faculty Conflict of Interest Committee members in the Office of Research and Commercialization.

➢ Distributed University Compliance, Ethics, and Risk pamphlets and IntegrityLine wallet cards to employees during new employee orientation.

Issue additional regulatory alerts and updates as appropriate

➢ Issued the annual communication to all faculty and staff members to remind them of the standards of conduct and reporting responsibilities under Florida ethics laws in October 2017.

4. Revise and Develop Policies and Procedures

Chair the University Policies and Procedures Committee and provide guidance on policy development

➢ Chaired the University Policies and Procedures Committee. Provided coordination of the committee and management of the online Policies and Procedures Manual.

➢ Reviewed and edited policies and procedures prior to submission for approval to the committee. Worked directly with departments, provided guidance, and when needed revised policies to improve content and the communication of expectations to the university community.

Serve as members of the HIPAA Collaborative to develop university policies and procedures on HIPAA compliance

➢ Served on the UCF Health Sciences HIPAA Collaborative, a university-wide task force involved with the development of a single set of HIPAA Privacy and Security policies for the university. Provided guidance and communicated compliance expectations for development of policies.

6

5. Conduct Internal Monitoring and Compliance Reviews

Manage university-wide conflict of interest and commitment processes

- ➢ Developed and issued the annual conflict of interest and commitment report dated October 2017 to the Board of Trustees Audit and Compliance Committee covering the office's activities from August 8, 2016, to August 7, 2017.
- ➢ In preparation for the 2016-17 conflict of interest and commitment disclosure process, revised seven training modules to reflect updates from the previous year and provided the trainings to faculty and staff members as an online resource.
- ➢ Implemented communication plan for the 2017-18 conflict of interest and commitment online disclosure process and launched the new disclosure year on August 14, 2017.
- ➢ Distributed a number of communications, monitored online disclosure submissions, conducted reviews, and worked with faculty and administrators to resolve potential conflicts. Tracked compliance rates and worked with Academic Affairs to address noncompliance.
- ➢ Notified 2,586 employees by email to submit an online disclosure and 2,545 submitted within the deadline (extended by two weeks due to Hurricane Irma), achieving a 98.4 percent compliance rate with employee submissions prior to the deadline.

Continue compliance partner reporting

- ➢ Compliance partners provided updates on their program activities during committee meetings and, when significant issues and challenges arose, through separate meetings and discussions.

Conduct risk assessment

- ➢ Will begin the risk assessment in spring 2018.

Review UCF IntegrityLine and department database for trends, risk areas, and address appropriately

- ➢ Based on an identified trend, distributed an awareness email to deans and directors regarding substantiated cases concerning professors offering extra credit in exchange for a positive rating and requested that the deans and directors incorporate information on the topic during new faculty onboarding and to existing faculty members as a reminder.

7

6. Respond Promptly to Detected Problems and Undertake Corrective Action

Receive and evaluate UCF IntegrityLine reports and allegations of misconduct made directly to the office and conduct investigations

➢ Provided administration and oversight of the UCF IntegrityLine to include review and tracking of all reports until completion, data compilation, trend review, and reporting.
➢ Received 37 reports through the UCF IntegrityLine alleging misconduct. Coordinated triage of reports with University Audit. When appropriate, reports were referred to a compliance partner for review or investigation. During this time, eight cases were investigated and closed.
➢ Received six allegations of misconduct directly to University Compliance, Ethics, and Risk, which are currently under investigation.

Provide recommendations for corrective actions and improvement of ethical conduct

➢ Continued providing recommendations for corrective actions and improvements of ethical conduct to the appropriate authorities following investigations or requests for guidance.

7. Enforce and Promote Standards through Appropriate Incentives and Disciplinary Guidelines

Develop and promote compliance and ethics incentive opportunities

➢ Recognized employees for their outstanding efforts in compliance and ethics in the July and October editions of the *IntegrityStar* newsletter.

Promote awareness of UCF regulations, policies and procedures, and regulatory requirements

➢ Highlighted new and revised UCF policies and regulations in the July and October 2017 editions of the *IntegrityStar* newsletter.

8

Promote accountability and consistent discipline
➢ Recommended to the appropriate authorities consistent discipline to ensure accountability following investigations with outcomes of substantiated employee misconduct.

8. Measure Compliance Program Effectiveness

Develop and issue the University Compliance, Ethics, and Risk Annual Report
➢ Finalized the combined annual report for 2016-17.
Launch second Compliance and Ethics Culture Survey to benchmark results against first survey
➢ Developed the communication plan for launching the survey and met with the Office of Excellence and Assessment Support to discuss timing.
Develop, measure, and track department process improvement efforts using the university assessment process
➢ Prepared the 2016-17 Assessment Results Report documenting the outcome of the office's efforts in improving the online conflict of interest and commitment disclosure process. Achieved the highest compliance rates with employee submissions and reviewer responses for online disclosure reporting with a record 96 percent compliance rate with the 30-day employee submission requirement and 95 percent compliance rate with disclosures reviewed and closed within 60-days. ➢ Prepared the 2017-18 Assessment Plan focused on increased employee awareness of the UCF IntegrityLine and University Compliance, Ethics, and Risk, both identified in the first Culture Survey as requiring improvement.

9

9. New Regulations and Special Projects
Manage compliance efforts with National Institute of Standards and Technology 800-171 (NIST) federal requirements
➢ Coordinated bi-weekly meetings and tracked progress of the workgroup's efforts, providing guidance and support. ➢ Provided senior leadership with an overview of requirements, the potential impact and risks to the university, and the resources needed to develop a NIST compliance program and infrastructure.
Chair Minors on Campus Committee
➢ Hired a part-time employee to work on the creation of policies and awareness campaign for minors on campus. ➢ Coordinated meetings and provided guidance to the Minors on Campus Committee.

10

ITEM: INFO-4

University of Central Florida
Board of Trustees
Audit and Compliance Committee

SUBJECT: 2016-17 Compliance and Ethics Program Annual Report

DATE: November 30, 2017

PROPOSED COMMITTEE ACTION

Information only.

BACKGROUND INFORMATION

Supporting documentation: Attachment D: 2016-17 Compliance and Ethics Program Annual Report

Prepared by: Rhonda L. Bishop, Chief Compliance and Ethics Officer

Submitted by: Rhonda L. Bishop, Chief Compliance and Ethics Officer

45

University Compliance, Ethics and Risk Office

UNIVERSITY OF CENTRAL FLORIDA

Annual Report 2017

EXECUTIVE SUMMARY

The number of regulatory agencies overseeing the university's compliance efforts is enormous. This past year alone, we witnessed an increase in the regulatory landscape from the wide reach of the National Institute of Standards and Technology 800-171 (NIST) federal requirements affecting processes across the university, to the approval of the Board of Governors Regulation 4.003 State University System Compliance and Ethics Programs requiring compliance programs in all of the state universities. With the size and prominence of UCF, having an effective compliance and ethics program is vital. While the University Compliance, Ethics, and Risk office has already focused efforts on building an effective compliance and ethics program, there are still many compliance risks to address. As we continue to work towards those efforts, we take a moment to acknowledge the many accomplishments achieved thus far, from both this office as well as our compliance partners. To that end, I am pleased to share in this year's annual report, a comprehensive look at the numerous activities occurring across campus that meet the various regulatory and compliance requirements, and that focus on building and sustaining a strong compliance and ethics culture at UCF. Also highlighted are the achievements shared by our compliance partners which demonstrate the results of these collective efforts.

Rhonda L. Bishop
Chief Compliance and Ethics Officer

CONTENTS

ABOUT THE OFFICE

3

HISTORY

In May 2011, the University of Central Florida formed the University Compliance, Ethics, and Risk (UCER) office and appointed Ms. Rhonda Bishop as the university's first Chief Compliance and Ethics Officer. Ms. Bishop was charged with developing and implementing a comprehensive compliance and ethics program based on key elements of the Federal Sentencing Guidelines, Chapter 8, Part B, Section 2.1(b) and the Florida Code of Ethics for Public Officers and Employees contained in Florida Statutes, Part III, Chapter 112. The Board of Governors passed Regulation 4.003 State University System Compliance and Ethics Programs, requiring all state universities to have compliance programs built on the same standards. Of the 19 measured regulatory components, UCF was proud to report having 16 components already in place.
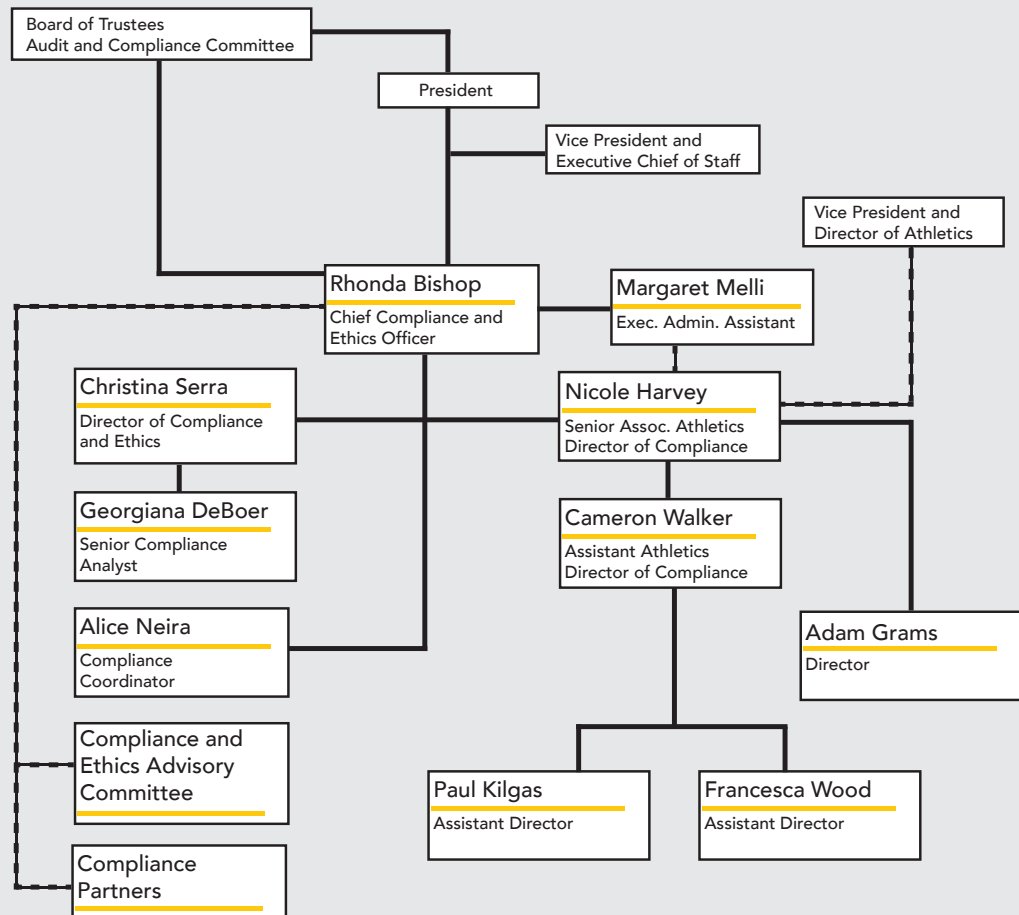
PURPOSE

The office provides centralized and coordinated oversight of the university's ethics, compliance, and risk mitigation efforts through the ongoing development of effective policies and procedures, education and training, monitoring, communication, risk assessment, and response to reported issues. It also established the Compliance and Ethics Advisory Committee, tasked with assisting in the development of the comprehensive compliance and ethics program and mitigating the compliance and ethics risks at UCF, and works with a team of compliance partners who lead the targeted compliance programs across the university.

STRUCTURE

Board of Trustees
Audit and Compliance Committee

President

Vice President and
Executive Chief of Staff

Vice President and
Director of Athletics

Rhonda Bishop
Chief Compliance and
Ethics Officer

Margaret Melli
Exec. Admin. Assistant

Christina Serra
Director of Compliance
and Ethics

Nicole Harvey
Senior Assoc. Athletics
Director of Compliance

Georgiana DeBoer
Senior Compliance
Analyst

Cameron Walker
Assistant Athletics
Director of Compliance

Alice Neira
Compliance
Coordinator

Adam Grams
Director

Compliance and
Ethics Advisory
Committee

Paul Kilgas
Assistant Director

Francesca Wood
Assistant Director

Compliance
Partners

5

UCER HIGHLIGHTS

- Developed the UCF Employee Code of Conduct, the final element of a comprehensive compliance and ethics program. The code of conduct summarizes the compliance and ethics program, outlines expectations for ethical behavior, and highlights important UCF policies and regulations in a reader-friendly format.

- Received closure on two regulatory investigations: 1) the Department of Education issued its final letter closing their Clery Act review with no findings; and 2) the NCAA issued a close out letter removing UCF from probation.

- Finalized and launched the Potential Conflicts: Florida Code of Ethics for Public Officers and Employees training, and offered additional training on topics of respecting others, phishing, retaliation, and employment of relatives.

- Established the Minors on Campus Committee, consisting of representatives from various university departments that will work to develop a university-wide minors protection program and a university policy.

- Received approval for the UCF 2-009 Gifts and Honoraria policy, which supports the office's efforts to raise awareness and compliance as well as complements the training provided on this subject since 2015.

- Developed a new training program on grant research awards in collaboration with the Research Compliance Office, and delivered it to 14 colleges across campus to ensure research faculty members understand federal compliance requirements.

- Achieved a 96 percent compliance rate with the 30-day deadline for employees submitting a conflict of interest disclosure and a 95 percent compliance rate with the 60-day reviewer.

- The Board of Governors (BOG) passed Regulation 4.003 State University System Compliance and Ethics Programs, requiring all state universities to have compliance programs built on the same standards. Of the 19 measured regulatory components, UCF was proud to report having 16 components already in place.

53

8

University Compliance, Ethics, and Risk Report

Compliance and Ethics Program Development:
Developing and sustaining an effective compliance and ethics culture.

- Developed the UCF Employee Code of Conduct, the final element of a comprehensive compliance and ethics program. The code of conduct summarizes the compliance and ethics program, outlines expectations for ethical behavior, and highlights important UCF policies and regulations in a reader-friendly format.

- Spearheaded compliance efforts with the National Institute of Standards and Technology 800-171 (NIST) in collaboration with campus partners.

- Developed and disseminated three editions of the compliance and ethics newsletter, *IntegrityStar.* Information of featured articles are below:

July 2016	October 2016	April 2017
Featured articles on gifts and honoraria, culture survey results, the university policy on reporting misconduct and protection from retaliation, and included a video and cartoon on retaliation.	Featured articles on Compliance and Ethics Week 2016, revisions to the Fair Labor Standards Act, and an article on ethics with a video and cartoon.	Featured articles by the chief diversity officer and the director of the Office of Institutional Equity, and included a video and cartoon on creating a respectful culture.

- Chaired three Compliance and Ethics Advisory Committee meetings and discussed BOG regulation 4.003, NIST, Department of Education civil rights complaints, minors on campus, Compliance and Ethics week, and provided updates on the annual report, culture survey, annual work plan, and training developed.

- Served on the Security Incident Response Team and provided guidance associated with federal and state privacy and data breach requirements.

- Met with vice presidents, key administrators, and compliance partners to provide updates on compliance and ethics initiatives and respond to any concerns or issues.

- Continued to serve as chair of the Florida State University System Compliance and Ethics Consortium by providing leadership on the development of the consortium and coordinating quarterly meetings.

- Established the Minors on Campus Committee, consisting of representatives from various university departments that will work to develop a university-wide minor protection program and a university policy.

- Revised charters for the UCF Audit and Compliance Committee and University Compliance, Ethics, and Risk to incorporate requirements in BOG regulation 4.003.

9

Education and Training: Educating the UCF community about compliance responsibilities, regulatory obligations, and the university's compliance and ethics program.

- Launched the second annual Compliance and Ethics Week awareness campaign, in which compliance partners helped execute trainings titled, "Respecting Others" and "Information Security."

> **12** employees won customized UCF padfolios and UCF IntegrityLine candy jars after participating in an online crossword puzzle during the annual Compliance and Ethics Week.

- Finalized and launched the Potential Conflicts: Florida Code of Ethics for Public Officers and Employees training, and offered additional training on topics of respecting others, phishing, retaliation, and employment of relatives.

- Developed and delivered two sessions of Ethical Leadership training to the Student Government Association.

- By invitation, developed and delivered conflict of interest training to research administrators in a joint effort with the Office of Research and Commercialization and provided materials for use in an e-learning program.

- By invitation, developed and delivered an overview of the university's conflict of interest program and the state ethics laws to the director of the Nicholson School of Communication and conflict of interest training to the Chairs and Directors Council.

- Developed and delivered two open sessions of Ethical Leadership training, one hosted by Human Resources and the other by the College of Medicine Faculty and Academic Affairs.

- Developed the Board of Trustees orientation training summary on compliance and ethics at UCF and distributed office pamphlets to all new employees and faculty during their respective orientations.

- Hosted tabling events for new faculty during orientation in August and at the employee benefits fair in October, offering materials on conflicts of interest and commitment, the UCF IntegrityLine, and the *IntegrityStar* newsletter.

- Developed a new training program on grant research awards in collaboration with the Research Compliance Office, and delivered it to 14 colleges across campus to ensure research faculty members understand federal compliance requirements.

- Revised six online conflict of interest and communication training modules and posted to the website as a resource to faculty and staff.

- Presented program overview during the Compliance Wave webinar, highlighted our compliance partners and resources, and networked with compliance offices around the country.

10

Policy Review and Development: Ensuring policies and procedures reflect UCF's commitment to ethical conduct and compliance with applicable laws and regulations.

- Served as chair of the University Policies and Procedures Committee to provide coordination of the committee and management of the online Policies and Procedures Manual.

- Reviewed and provided feedback directly to departments on 12 draft policies prior to submission to the committee.

- Served on the UCF Health Sciences Health Insurance Portability and Accountability Act (HIPAA) Collaborative and reviewed 16 draft policies, and communicated compliance expectations for the development of policies.

- Revised university regulation UCF-3.018 Conflict of Interest or Commitment; Outside Activity or Employment to align with state statutes, which became effective June 2017.

- Received approval for the UCF 2-009 Gifts and Honoraria policy, which supports the office's efforts to raise awareness and compliance as well as complements the training provided on this subject since 2015.

- Promoted university policies and regulations in all *IntegrityStar* editions.

11

Government Reporting and Regulatory Activities:
Supporting reports and activities related to government and regulatory agencies.

- Coordinated with the Office of Institutional Equity (OIE) and the Office of the General Counsel to assess and respond to complaints received from the Department of Education's Office for Civil Rights (OCR). This is an ongoing review and the office will continue to work with OIE and OCR and provide the final response within the deadline set by OCR.

- Developed the process for the president and Board of Trustees to report research exemptions granted by UCF annually to the governor and legislature as required by state statute.

- Issued an annual memo regarding the Vulnerable Persons Act, requirements of mandatory reporters, and compliance guidance.

- Issued an annual memo reminding all faculty and staff members about the standards of conduct and reporting responsibilities under Florida ethics laws.

- The NCAA issued a close out letter removing UCF from probation.

- Received a positive outcome from the Department of Education's review of the university's compliance with the Clery Act, and communicated this to university stakeholders.

- Organized and chaired the Biennial Review Committee for the federal Drug-Free Schools and Communities Act to assess UCF's Alcohol and Other Drug prevention program effectiveness and the consistency of policy enforcement.

- Responded promptly to public records requests for information on closed IntegrityLine cases, partnered with UCF News and Information and the Office of the General Counsel on cases published in in the media, and communicated outcomes with Board of Trustees members.

Research Compliance: Supporting the university's research compliance program.

- Served as a resource to research compliance on issues related to award management, scientific misconduct, export controls, conflict of interests, and development of policies and procedures.

- Supported the chair of the research Financial Conflict of Interest Committee to strengthen its charter and enforce consequences for non-compliance.

- Served on the Invitation to Negotiate committee for the Independent Review of Sponsored Programs and Research Compliance.

- Collaborated with the Research Integrity Compliance Office to strengthen the process for identifying and addressing conflicts requiring research exemptions. Reviewed and provided input on 30 research exemption requests.
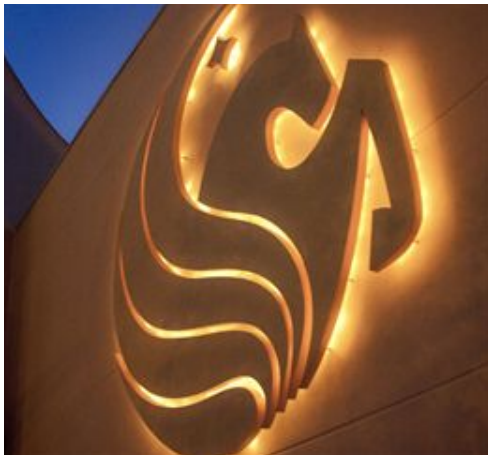
UCF IntegrityLine and Investigations: Responding to detected problems and undertaking corrective actions.

- Provided administration and oversight of the UCF IntegrityLine (anonymous reporting line for alleged misconduct) to include review and tracking of all reports until completion, data compilation, trend review, and reporting.

- Received 121 reports of alleged misconduct (99 via the IntegrityLine). When appropriate, UCER conducted investigations and provided recommendations for corrective actions or referred to University Audit, a compliance partner, or a college for review or investigation. Closed 88 cases.

- Identified through trend analysis, low employee awareness of the state ethics laws prohibiting employees from having an ownership interest, employment, or contractual relationship with a business entity doing business with UCF and implemented measures to increase awareness.

- Promoted the UCF IntegrityLine through the *IntegrityStar* newsletter, compliance videos, office pamphlets and website, compliance partners' websites, and distribution of custom IntegrityLine earbuds and wallet cards.

13

Conflict of Interest and Commitment: Ensuring compliance with state and federal requirements on disclosing and managing conflicts of interest and commitment.

- Announced a 100 percent completion rate for the conflict of interest and commitment disclosure process at the close out of the 2015-16 reporting year.

- Implemented the online conflict of interest and commitment disclosure process for 2016-17, which includes monitoring online submissions, conducting reviews, and working with employees to resolve potential conflicts.

This year, the office reviewed and approved **1,056** online disclosures (a slight increase from the 999 last year), with potential conflicts identified in **100** that require a monitoring plan (an increase from 60 last year).

Received and completed **118** reviews of potential conflicts of interest associated with the attendance at conferences or events sponsored by vendors (an increase in requests from 68 last year).

Completed **262** online reviews for the employment of relatives (a significant increase from 77 last year).

Conflict of interest reviews outside the online system were also tracked and included **125** requests for review of potential conflicts and guidance provided to employees and departments (an increase from 96 last year).

- Supported those who met the state definition of a reporting individual complying with the state ethics law by taking the following actions:
  - Coordinated with Human Resources to identify and notify reporting individuals of the mandatory filing requirements.
  - Distributed awareness emails regarding registered lobbyists' attendance at an employee event and reminder that accepting promotional items from registered lobbyists is prohibited.
  - Monitored the Commission on Ethics' website and provided support until all mandatory filings were submitted to prevent employees from accruing fines.

15

CLERY, VAWA, and Title IX Compliance: Mitigating one of the university's most significant compliance risks.

- Developed and conducted Clery Act training for Housing and Residence Life, Daytona Beach regional campus leadership, and athletics coaches throughout the year.

- Purchased Campus Security Authority and Responsible Employee Training videos for use in Clery Act and Title IX training.

- Provided guidance and support to the Title IX coordinator. Promoted Green Dot training, a nationally known Bystander Intervention program, and featured an article by the Title IX coordinator in an edition of the *IntegrityStar*.

- Served on and provided compliance guidance to the Title IX workgroup and Title IX policy committee.

- Chaired the search committee for the Office of Institutional Equity director position.

Athletics Compliance: Providing oversight and management of the athletics compliance program.

- Maintained effective communication with the president, vice president and director of athletics, and faculty athletic representative on the athletics compliance program.

- Organized, reviewed, and submitted to the NCAA the annual compliance report documenting the university's progress with its athletics compliance and educational programs and corrective actions as required by the NCAA's Infractions Committee.

- Provided quarterly athletics compliance updates to the president and vice president and executive chief of staff.

- Managed and provided guidance to the senior associate athletics director for compliance and staff to address improvements to the program.

- The NCAA issued a close out letter removing UCF from probation.

17

SUCCESS STORIES
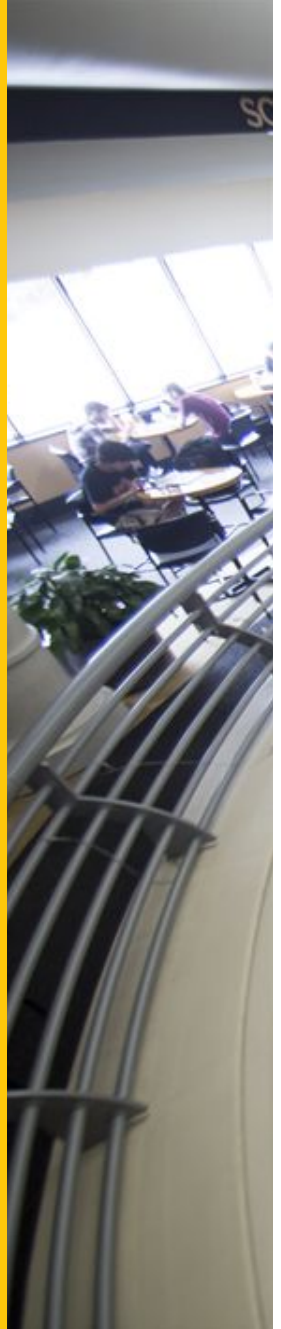
Department of Security and Emergency Management (DSEM)

- Earned national accreditation by the Emergency Management Accreditation Program. The accreditation evaluates and distinguishes emergency management programs for compliance with standards certified by the American National Standard Institute and recognized by the industry through credible standards of excellence.

- Purchased and installed a new camera server to consolidate all security camera recordings. This enabled the university to consolidate 58 servers across different colleges and departments, to a single resource in the College of Sciences Data Center, and provided for a higher level of security, protection of recorded images, and management of the data.

Environmental Health and Safety (EHS)

- Continued to revamp the automated external defibrillators (AED) program with the addition of 56 new units, bringing the total of wall-mounted units to 134. The office collaborated with a consultant on locational signage for the new units and with Orange County Fire and Rescue on a smart phone application, which shows users the nearest AED.

Human Resources (HR)

- HR Leave Administration collected data on 613 Family Medical Leave Act (FMLA) leaves making changes to the FMLA process, which resulted in a 3.34 percent reduction in the number of Certifications of Health Care Provider Forms (CHCP) submitted to colleges and departments.

- HR Compensation dedicated 2,418 personnel hours to designing, developing, testing, and training in order to comply with the Fair Labor Standards Act (FLSA) new exempt employee minimum salary rule affecting 543 UCF non-exempt or exempt employees.

Office of Integrity and Ethical Development (OIED)

- The Student Government Association (SGA) recognized the hard work of OIED and the need for expanding its programs and services. As a result, SGA granted the office funding for a second full-time professional staff person.

Office of Institutional Equity (OIE)

- Investigated a claim, in collaboration with UCER, of sex-based harassment against a long-standing member of the faculty (respondent). The university issued discipline against the respondent, who challenged this decision through various levels of appeal, including arbitration. The arbitrator found that the university's decisions were supported by the evidence and were not arbitrary or capricious. This finding will be a helpful precedent in cases moving forward.

Quality Management and Improvement (QMI)

- Improved the warranty and asset data collection process for construction and repair warranties, improving the ability to track assets that fail while under warranty, and ensuring that warranty claims are identified and settled. The office also standardized the contracted maintenance services template for consistency.

Registrar's Office (RO)

- Due to recent events involving students stealing faculty login credentials, RO developed an automatic notification tool to alert faculty members when there is unauthorized activity on their grade rosters. Additional communication and education will focus on reminding faculty members that this is an important safety measure.

19

Resource Management (RM)

- RM Surplus Property presented, "The Making of a Successful University Surplus Program," to the Association of Physical Plant Administrators at the Florida Chapter's annual conference. The presentation included UCF's achievements in surplus property and informed other universities how they can employ accountability in their surplus processes.

Student Accessibility Services (SAS)

- Served 2,301 unique students, which is an 11 percent increase from 2015-16 and a 91 percent increase from 2012-13. This number represents three percent of the UCF student population, which aligns with the national average range of three to five percent of the overall campus population connected to the disability office.

- Proctored 9,983 accommodated exams, which is a 22 percent increase from last year and a 98 percent increase from 2012-13.

- Created the Faculty Liaison Project to attain feedback from faculty members throughout the year. The initial feedback was very positive since faculty were able to learn about the behind-the-scenes operations and brainstorm ways to better collaborate and share information with the office.

- Awarded $211,350 in scholarships to 38 students via Johnson Foundation funds and total matching funds. This scholarship purse was larger than normal, and each student received just under $6,000 for the year.

Student Health Services (SHS)

- Provided Green Dot training to 105 SHS staff members at the annual Student Health Services Kick-Off to educate them about patients who may have been involved in sexual, domestic, and interpersonal violence situations.

- Collaborated with Victim Services to place a permanent Victim Services advocate in the Health Center to help patients involved in intimate partner violence. The advocate is located in a non-clinical private space making it convenient for patients to meet with her in a non-threatening area.

UCF Global

- Collaborated with several university departments and appropriate government agencies to ensure that an employee, who was inadvertently out of compliance, received employment authorization requirements.

20

Compliance Partner Reports

The following are summaries of the annual reports received by the compliance partners supporting UCF's comprehensive compliance and ethics program. From July 1, 2016, to June 30, 2017, the compliance partners completed the following compliance and ethics activities in support of the comprehensive compliance and ethics efforts at UCF.

Adminstration and Finance

Debt Management

The associate vice president for Debt Management (DM) served on the University Compliance and Ethics Advisory Committee and worked with UCER, University Audit, and Finance & Accounting departments on a regular basis regarding debt-related compliance and ethics issues. This year, DM conducted internal training of DM's Compliance Delegates and support staff on debt management procedures, guidelines, audit, and compliance-related projects. Additionally, DM developed a desk manual on the appropriate policies, procedures, and contacts for debt management, monitored and maintained required compliance reports related to existing debt, and coordinated appropriate strategies for compliance and reporting when new debt was established.

Department of Security and Emergency Management and University Police

The associate vice president and Chief of Police served on the University Compliance and Ethics Advisory Committee.

Department of Security and Emergency Management

The Department of Security and Emergency Management (DSEM) director served on the Continuity of Operations (COOP) Space Planning and Allocations Committee and communicated compliance and ethics topics at monthly staff meetings, such as changes to the Clery Act as referenced in the Handbook for Campus Safety and Security Reporting. DSEM delivered a number of training and awareness programs, including: Criminal Justice Information Systems Security and Awareness, Health Insurance Portability and Accountability Act (HIPAA), Active Shooter/Shots Fired, Protecting Critical Infrastructure Information Program, Suspicious Activity Reporting, Open Options/dnaFusion Training for End Users (Access Control Software), Milestone Training (Video Management Software) for End Users, and four Incident Command System Courses covering topics on incident management. Additionally, DSEM developed the Emergency Guides for emergency response compliance and completed the following monitoring, compliance reviews, and program effectiveness reviews this year:

- Emergency Management Accreditation Program (EMAP) self-review
- UCF COOP plan review and submitted to the state within the annual deadline
- Debris Management Plan updated to ensure compliance with federal debris management laws
- Participated in a Business Impact Analysis to identify IT-dependent systems in order to enhance recovery in a COOP incident
- Conducted regular exercises across a broad spectrum of functions, threats and hazards in accordance with the Homeland Security Exercise and Evaluation Program
- Underwent EMAP Compliance Audit, resulted in accreditation

23

Police Department
The University Police Department (UCFPD) members served on the following compliance and ethics committees and work groups in support of the program:
- University Compliance and Ethics Advisory Committee
- Title IX Workgroup
- Drug and Alcohol Biennial Review Committee
- Red Flag Committee
- Florida Crisis Response Team
- Student of Concern Committee
- National Organization for Victims Assistance
- Commission for Florida Law Enforcement Accreditation
- Several sub-committees to include policy development

The UCFPD created or updated 13 compliance and ethics policies and procedures including topics on early intervention, stalking, missing persons, and social media. Additionally, UCFPD conducted educational and awareness events including the Town Hall Meeting, Courageous Conversations and Implicit Bias Town Hall Meeting and led training on the following topics:
- Clery training
- Public Records, Biased-based profiling, and ethics and general compliance training for newly hired personnel
- Green Dot Training
- SAFE (Self-Defense Awareness & Familiarization Exchange) classes
- Response to Interpersonal Violence
- Patrol Response to Sexual Violence

The UCFPD also conducted the following internal monitoring and compliance reviews this year:
- Unannounced property and evidence audits
- Quarterly Special Events time keeping audits
- Fiscal Criminal Investigative Funds quarterly audits
- Administrative review on agency confidential informants
- Audits verifying all passwords, access codes and security breaches
- Holding cell inspection
- Review of Agency practices and Citizens' Concerns Related to Bias Based Profiling
- Review and Analysis of Response to Resistance Reports
- Evaluation of Citations
- Annual inspection of all weapons issued to personnel
- Submission of the Victim's Rights Pamphlet to the Office of the Governor for approval

Facilities and Safety
The associate vice president for Facilities and Safety (FS) served on the University Compliance and Ethics Advisory Committee, Student Athlete Advisory Committee and as a member of the Institutional Safety Council. FS created a Quality Management and Improvement Department to provide checks and balances for FS departmental operations, review and audit business plans and processes, report findings to management, and make recommendations for efficiencies. This year, FS developed overarching policies and procedures covering topics of eligibility for rehire, asset collection and warranty claims, and university policy 3-106, Maintenance, Repair, and Housekeeping (to facilitate a standardized asset management and code compliance of university assets).

Downtown Campus Facilities
The compliance and ethics activities performed this year by the Downtown Campus Facilities included:
- Hosted UCF Downtown Campus Facilities Community Outreach Plan Meeting with the Downtown and Parramore communities in preparation for the new downtown campus
- Developed UCF Downtown Facilities Design Development Review
- Hosted Dr. Phillips Academic Commons Construction Pre-Bid Meeting for Foundations and Site/Civil

24

Environmental Health & Safety (EHS)

The Environmental Health and Safety (EHS) director served on the University Compliance and Ethics Advisory Committee and as a member of the Institutional Safety Council. Additionally, staff within EHS served as members of the following:

- FS Safety Committee
- Institutional Animal Care and Use Committee
- Institutional Biosafety Committee
- Institutional Safety Council
- Laboratory Safety Committee
- Radiation Safety Committee

EHS participated in campus outreach events this year including New Faculty Orientation, faculty meetings, Human Resources Benefits Fair, KnightShare Expo, and New Employee Orientation to promote awareness of EHS-related compliance programs. Additionally, written and electronic communications to promote awareness of EHS-related compliance programs were provided on the EHS website, in promotional handouts and EHS bookmarks, and through quarterly reports.

The EHS Research Safety Team trained 3,164 individuals in mandatory research safety topics and nine special topic classes requested by individual laboratory groups. The EHS Workplace Safety Team facilitated training for 1,717 individuals on special topics.

The following university policies, procedures, and standards were developed or revised in support of compliance and ethics:

- Five-year review of university policy 3-402.1 Response to Job-Related Employee Illness or Injury in collaborated with Resource Management (RM) and Human Resources
- Five-year review of university policy 3-107 Procurement Use and Possession of Hazardous Materials and Regulated Devices and Equipment and university policy 3-122 Campus Safety and Health in collaborated with RM
- LES-24-001, Possession of Prescription Drugs and Controlled Substance Procedure reviewed
- Open Flame policy developed with RM submitted to the University Policy and Procedures Committee for review and implementation university-wide
- Facility-specific biosafety manual for the high containment laboratory and assisted faculty in the development of a research-specific biosafety manual
- Policy regarding university volunteers developed and approved
- Procedure for obtaining a construction building permit approved and implemented an online process for requesting a construction inspection
- Procedures for ensuring participation by all affected employees and researchers in the medical surveillance program updated
- Institutional Biosafety Committee's Standard Operating Procedures revised
- Collaborated with Florida Hospital Centra Care to update Occupational Health Medical Surveillance Program

Additionally, EHS conducted the following internal monitoring, compliance, and program effectiveness reviews:

- 422 laboratory inspections completed in support of OSHA's Laboratory Standards (29 CFR 1910.1450 and Prudent Practices in the Laboratory Handling and Management of Chemical Hazards
- Annual audit of the UCF broad scope radiation license 4187-1
- Safety assessments for over 750 campus events
- Laboratory building assessments in the Engineering I and Chemistry buildings
- Fire Code team reviewed the Hot Works program to ensure compliance, reviewed permit conditions for accuracy, and reissued permits
- Inspections of 4,215 fire extinguishers, 70 fire drills, issued 84 Hot Works permits, and corrected 177 violations noted by the State Fire Marshal
- Seven laboratory inventory closeouts, 11 chemical inventory compliance audits, and identified more than 400 containers needing to be entered into the database
- Reviewed Certificates of Insurance and other insurance documents to ensure university compliance
- Implemented third-party audit recommendations of the High Containment Laboratory, and received verification that the facility is compliant with Center for Disease Control and National Institutes of Health Guidelines
- Internal review of the chemical inventory process and outlined behavioral difficulties within the colleges that result in non-compliance
- Commissioned Quality Management & Improvement to perform internal audits in the Building Code Office and the Workplace Safety and Training Programs
- Biomedical Waste and X-ray Programs reviewed and found to be in compliance with state regulations after several inspections by the Florida Department of Health
- Industrial User Discharge Permit found to be in compliance with permit conditions after inspection by the City of Orlando
- Used a Building Permit database to record the day-to-day timeline of construction projects, ensuring compliance with all permitting and contract requirements

25

Facilities Operations

The director for Facilities Operations (FO) served on the Institutional Safety Council and implemented mandatory daily team and weekly meetings for senior management and mandatory all-staff meetings annually where compliance and ethics topics were discussed. In support of the compliance and ethics program, FO developed and updated 16 Standard Operating Procedures and implemented process compliance reports to aid supervision in team management. This year, FO implemented the following changes in the work management system to improve tracking and execution of Life Safety and Fire Marshall-cited work with results noted:

- Established a Coding System to identify Life Safety work orders, and a performance report was created to communicate the importance of performing work orders to the maintenance zones, supervisors, EHS, and executive leadership
- Designated one Life Safety maintenance planner to schedule Life Safety work orders, including collaborating with EHS to ensure successful resolution of any issues
- Improved tracking and correct identification of assets
- Increased the compliance and performance goals for code-required inspections on Life Safety systems to 99 percent, achieving 98 percent compliance

Facilities Planning and Construction

The Facilities Planning and Construction (FPC) office developed the following processes and standards this year:

- Process for Advertisement and Selection of Design Professionals and Construction Firms
- Project Management Performance Standard

26

Landscape and Natural Resources
The Landscape and Natural Resources (LNR) office conducted the following compliance and ethics activities:
- Performed weekly monitoring of all active construction sites on campus to ensure that they complied with UCF's National Pollutant Discharge Elimination System storm water permit
- Inspected major landscape installations to ensure that contractors were complying with our standard operation procedures and other requirements for landscape installations
- Worked with FPC to repair several storm drains on campus that caused land subsidence and safety risks near pedestrian areas
- Hired an outside consultant to inventory and assess the condition of the campus storm water drainage infrastructure to identify any areas needing corrective action, and to create a comprehensive database for tracking any changes and assessing future risks
- LNR staff members received training from the Office of Institutional Equity to help them understand the office's functions, and to receive guidance on issues related to workplace harassment and discrimination

Quality Management and Improvement
The Quality Management and Improvement (QMI) office conducted the following monitoring and compliance reviews:
- Regulatory permits
- UCF requirements for project management
- Computerized Maintenance Management System AiM data and processes
- Contracted maintenance services
- Departmental compliance in using Continuing Service Vendors
- Departmental compliance with the Building Inspection and Plan Review Consulting Services contract

Additionally, QMI completed annual condition inspections of 50 multi-campus Educational & General buildings and submitted work orders for identified maintenance needs. The office also assessed contracted maintenance-services for fuel tanks and fire hydrants, revealing systemic issues with recordkeeping and compliance resulting in improvement actions that were completed. QMI also facilitated project management improvements in contract and standards compliance, oversight, and clarification of roles within FS departments, which included:
- Facilities Planning & Construction Project Management Handbook and provided recommendations
- Defined expectations for deviation from the UCF Design, Construction, and Renovation Standard
- Assessed design and construction standards roles and responsibilities

27

Resource Management
The Resource Management (RM) office participated in a task force to develop a policy and procedure for use of research space by third-parties. Additionally, RM developed the Campus Water Activities Regulation and university policy 3-125 Real Estate Transactions. RM provided support to the UCF Police Department with its Florida Department of Laws Enforcement Criminal Justice Information Security Audit, resulting in no compliance issues. RM Information Technology also redesigned the UCF Parking Services credit card payment portals to comply with new security mandates set forth by the Payment Card Industry Security Standards Council. Additionally, RM audited contractors' Guaranteed Maximum Prices for construction contracts, resulting in cost savings of more than $19,000 for the District Energy Plant and the Mathematical Sciences Building.

Sustainability Initiatives
The Sustainability Initiatives office completed the commuter emissions report to assess UCF's compliance with President Hitt's Climate Action Plan. Partnered with LNR and FO Recycling Services to update the vendor solicitation for 2017 Game Day clean-up operations to ensure appropriate collection of recyclable materials, in order to work toward statewide recycling mandates.

Utilities & Energy Services
The Utilities & Energy Services (UES) office maintained compliance with Florida Department of Environmental Protection requirements by distributing the water quality Consumer Confidence Report results by email to the UCF campus community and to promote transparency, posted the report on the UES website. The office used trend data from the Combined Heat and Power Plant's operator station to ensure exhaust gas temperatures and flow rates for emissions were within permit parameters, this data is submitted annually to Orange County's Department of Environmental Protection to support UCF's air permit documentation and compliance testing. UES created and updated eight department compliance policies and procedures and worked with EHS to develop and implement a policy to verify that any reportable domestic or industrial wastewater spills are reported promptly, and that the appropriate regulatory agencies are notified.

Finance and Accounting

Finance and Accounting
The Finance and Accounting (F&A) staff served on the following compliance and ethics committees:
- University Compliance and Ethics Advisory Committee
- Merchant Services Committee for Payment Card Industry Data Security Standards (PCI DSS) Compliance
- Federal Trade Commission's Red Flags Compliance
- State University System Inter-Institutional Committee on Finance & Accounting
- University Tax Peer Group

Financial Support Services hosted monthly meetings where Financials users were informed of any policy and procedure updates or new compliance requirements relating to F&A. Budget, Planning and Administration reviewed salary information for all administrative employees to ensure compliance with salary cap limitations pursuant to Florida Statutes 1012.975; 1012.976. Additionally, the office monitored vendor creation throughout the year to ensure employees and students were not established as suppliers of the university without additional reviews by the tax department.

Contracts & Grants Division
The Contracts and Grants Division (C&G) participated in "Exchanging Ideas and Tips for Research Administrators" meetings facilitated by the Office of Research and Commercialization and the annual A-133 audit process. C&G conducted group presentations at quarterly staff meetings on Uniform Guidance topics such as indirect costs, closeouts, sub-recipients and contractors, retention, and program income. As part of UCF's project Wahoo, C&G business processes were reviewed, updated, and submitted to Attain consulting firm for best practice review. C&G monitored the billing, financial reporting and project closeout processes for timeliness, accuracy and completeness of sponsored research awards, which included:
- Periodic review of overhead calculations for accuracy
- Monthly reviews of accounts receivable items on projects conducted with ORC
- Distributed departmental reports to the Deans noting the collection progress and outstanding AR amounts
- Established a monthly monitoring process to identify and address expenses posted prior to the project start date
- Responded promptly to agency inquiries regarding billing, financial reporting, and project closeout

Merchant Services
The Merchant Services (MS) office offered an online training class, FSC111: Credit Card Information Security, to maintain PCI DSS compliance and updated university policy 3-206.5: Credit Card Merchant Policy. MS monitored and reviewed the annual Self-Assessment Questionnaire for all departments processing credit cards in order to maintain PCI DSS compliance, and underwent a University Audit for PCI DSS vendor management strategies in October 2016, which identified the need for a dedicated PCI Security Analyst position to assist with contract management, due diligence, compliance monitoring and requirement management.

Red Flags Identity Theft
The Red Flags Identify Theft office distributed communication via the Red Flags email list of required annual meetings, assessment reviews and updates on Red Flags best practices. The office hosted annual meeting to discuss Red Flag requirements, updates to the Red Flags program and trends in identity theft, and reviewed annual assessments submitted by departments who interact with information subject to identity theft.

Student Accounts
The Student Accounts (SA) office communicated with the Office of Student Financial Assistance (OSFA) and the F&A Vendor's Payable department to ensure financial aid disbursements were processed within the federal aid guidelines. SA conducted three trainings with the OSFA and the Registrar's Office to ensure staff members were informed of new policies and procedures and participated in student orientations to assist students with myUCF usability. Additionally, SA updated university policy 3-200.1: Receipt and Deposit of Funds by Departments and obtained approval in May. SA also implemented changes to IRS Form 1098-T reporting in anticipation of upcoming Treasury Regulations.

Tax
The Tax office reviewed independent contractor payments to identify potential worker misclassification and reviewed departmental financial statements annually to identify any non-reported unrelated business income activities.

29

Human Resources

The associate vice president for Human Resources (HR) and chief HR officer served on the University Compliance and Ethics Advisory Committee, the UCF Student Conduct Board, participated in Title IX Committee meetings, and collaborated with the Office of Institutional Equity in clarifying and providing information for the university's Non-Discrimination policy. Compliance and ethics communications included:

- Human Resources (HR) Talent Acquisition distributed quarterly newsletter to inform colleges and departments of policy changes and compliance concerns
- HR Employee Relations corresponded on the Employment of Relatives Policy via one-on-one communications regarding submissions, the HR Advisory Council, and the quarterly HR Liaison Network meetings
- Created and distributed booklets of the required annual state and federal compliance notices to all UCF employees
- HR Compensation communicated the importance of equitable pay and on writing accurate position descriptions representing the duties of the employee's job
- HR Leadership held meetings with the UCF Advisory Council to enhance communications between central HR Department and the university's colleges and departments

HR training and education on compliance and ethics topics:

- Included introductory information on compliance and Title IX training during bi-weekly New Employee Orientations
- HR Talent Acquisition facilitated quarterly "Interviewer Certification Workshops". This workshop covered UCF policy, state and federal regulations outlining free of bias or discrimination hiring, and state statutes regarding Florida Veteran's Preference
- Completed EEOC Training with the Office of the General Counsel
- Scheduled the university ombuds officer to speak at the April 4, 2017, UCF HR Liaison Network meeting about using the Ombudsmen Office as a resource
- HR Compensation Section dedicated 2,418 personnel hours designing, developing, testing, and training in order to comply with the Fair Labor Standards Act (FLSA) new exempt employee minimum salary rule affecting 543 UCF non-exempt or exempt employees
- HR Payroll Services ensured the education of the university colleges and departments addressing problems or questions and providing regular, ongoing training. Applicable items are posted on the HR website under General Payroll Information
- Scheduled the Office of Diversity and Inclusion to present on "Micro-Messages" at the HR Liaison Network meeting
- Scheduled the Leave Administration Manager to present a Family Medical Leave Act (FMLA) workshop to the HR Liaison Network
- Held an "Enhancing Communications between the Generations" workshop
- Held a session on "Ethical Leadership" by the chief compliance and ethics officer

HR revised, submitted and received approval on the following university policies:

- Policy 3-003.3 Deductions from Salary of Exempt Employees
- Policy 3-010.1 Eligibility for Overtime Compensation
- Policy 3-112.2 Additions to Salary of Exempt Employees for Special Events

31

Additionally, HR updated Policy 3-402.1 in partnership with EHS in order to require an Accident-Incident Report campus wide for safety. HR Talent Acquisition collaborated with leadership and other stakeholders, including UCF Audit to develop a background check policy to submit during 2017-18.

HR conducted the following internal monitoring, compliance, and program effectiveness reviews:

- HR Leave Administration Section reduced the number of medical certifications received by the university's colleges and departments; monitoring HIPAA and Certification of HealthCare Provider (CHCP) forms
- Activated the Health & Safety module in PeopleSoft to replace a stand-alone Work Comp database. The PeopleSoft module improves efficiency by reducing data entry time and accessing data according to the Florida Statutes Chapter 440 for Work Comp
- HR Employee Relations supervised compliance for the university's Employment of Relatives Policy regarding OPS, USPS, and A&P employees of which 118 submissions were reviewed
- HR Benefits Section conducted an ongoing compliance watch with regard to all federal and state laws pertaining to insurance and retirement matters, including the Affordable Care Act
- The HR department, in partnership with IT, implemented the use of secure eFax allowing for medical certifications and other personal protected information limiting the liability to the university
- HR Leave Administration met quarterly with Environmental Health & Safety to review workers' compensation cases over 90 days old and discuss compliance questions or concerns
- HR Payroll Services performed the critical role of ensuring the university colleges and departments payroll processing are in compliance with all applicable regulations, policies, procedures, and processes
- HR Compensation worked closely with UCER assisting in employee investigations by researching compensation and position activity
- HR Leave Administration collected data on 613 FMLA leaves and made changes to the FMLA process which resulted in a 3.34% reduction in the number of Certifications of Health Care Provider Forms (CHCP) being sent to departments
- HR Talent Acquisition assisted University Audit, Office of Institutional Equity, and UCER by researching, providing documentation, and assisting with interpretation of the PeopleAdmin system to support appropriate actions regarding any concerns, complaints, investigations with the UCF hiring policies and recruitment searches
- HR Compensation found that the justification for various compensation actions had become informal resulting in questions, "why some people received pay changes or bonuses and not others". HR Compensation communicated with all colleges and departments the importance of the written justification and designed a template. This new process provided a formal process to document detailed justification for any pay changes or one-time-payment requests.
- HR Payroll levied the Salary Overpayment Penalty 3-002.2, which serves to charge departments 25 percent of any gross overpaid amount as a deterrent to their causing overpayments. In addition, departments pay a $50 fee for late timesheet submittal, which results in an out-of-cycle payroll check request.
- HR Compensation monitored pay and position matters and consulted with leaders and HR Liaisons on issues that could be perceived as illegal, against university policy, or unfair based on university practices and policies.

32

University Services

Business Services

In support of the compliance and ethics program this year, UCF Business Services participated in the Annual Red Flags Compliance Meeting and collaborated with the Information Security Office to strengthen UCF's vendor payment card industry (PCI) compliance efforts. In response to an identified weakness, Business Services established university standards for PCI compliance for university third-party vendors, requiring each vendor to run a system security scan and provide UCF with validation of their system security.

The office conducted Red Flags training, increasing the number of trained employees in the department from eight to 32. The office also distributed the compliance and ethics training videos posted on the University Compliance, Ethics, and Risk website to all staff within the department.

Procurement Services

The director of Procurement Services (PS) served on the University Compliance and Ethics Advisory Committee and Minors on Campus Committee. Training and communication efforts included:

- Distributed multiple notifications to the university on regulatory updates and best practices to facilitate cost savings, efficient requisition submittals, and compliance with established policy and procedures
- Sent notices to requestors and approvers informing of important changes to the Board of Governors' procurement regulation 18.001(1)(h) and (1)(i) pertaining to contract renewals and extensions
- Distributed numerous emails to the Office of the Provost and other pertinent vice presidents to verify and update departmental contractual signature authority delegate
- Notified vice presidents and deans of unauthorized contractual actions committed within their departments and colleges
- Conducted two training sessions attended by 35 users from 13 different departments. Compliance and ethics were discussed during both trainings as it relates to adhering to procurement guidelines such as unauthorized contractual actions, vendors writing specifications, illegitimate sole sources and competition waivers, etc.
- Presented an overview to the Board of Trustees, showing training to departments, regulation updates, refreshers and changes to our guidelines, internal checks and balances as well as internal monthly audit of purchase orders exceeding $10,000

Procurement Services policies and procedures activities included:

- Assisted the Office of the General Counsel in briefing the UCF Board of Trustees on changes to UCF's Regulation 7.130 to reflect changes to BOG Regulation 18.001
- Created procedures for using the new university-wide temporary labor services contract and updated the procedural manual to incorporate those guidelines
- Revised formal solicitations' boilerplates, standard agreement, and purchase order terms and conditions documents to include legal language concerning protection of minors on campus
- Assisted University Compliance, Ethics, and Risk in editing the Employee Code of Conduct
- Revised UCF-7.203 Real Property Leasing to reflect appropriate signature authorities
- Updated UCF Regulation 7.130, formal solicitations and the standard contract boilerplates to include important Board of Governor's regulation changes regarding renewals and extensions

Monitoring, compliance and effectiveness reviews for PS included:

- Reviewed each formal solicitation's evaluation committee member for conflict of interest
- Logged findings for each committee member per solicitation on the Conflict of Interest and Commitment System spreadsheet
- Reviewed conflict of interest system (ARGIS) for potential conflicts of interest; reduced liability and risk
- Monitored unauthorized procurement actions and reports violations to the Office of the General Counsel and the departments' administrators
- Conducted a monthly audit of all purchase orders that exceeded $10,000; ensured adherence to competition and exemption requirements
- Conducted internal reviews of all formal solicitations before issuance
- Conducted internal review processes of sole source and waiver to competition requests prior to approving the action
- Conducted review of all web-posted documents for sensitive information

33
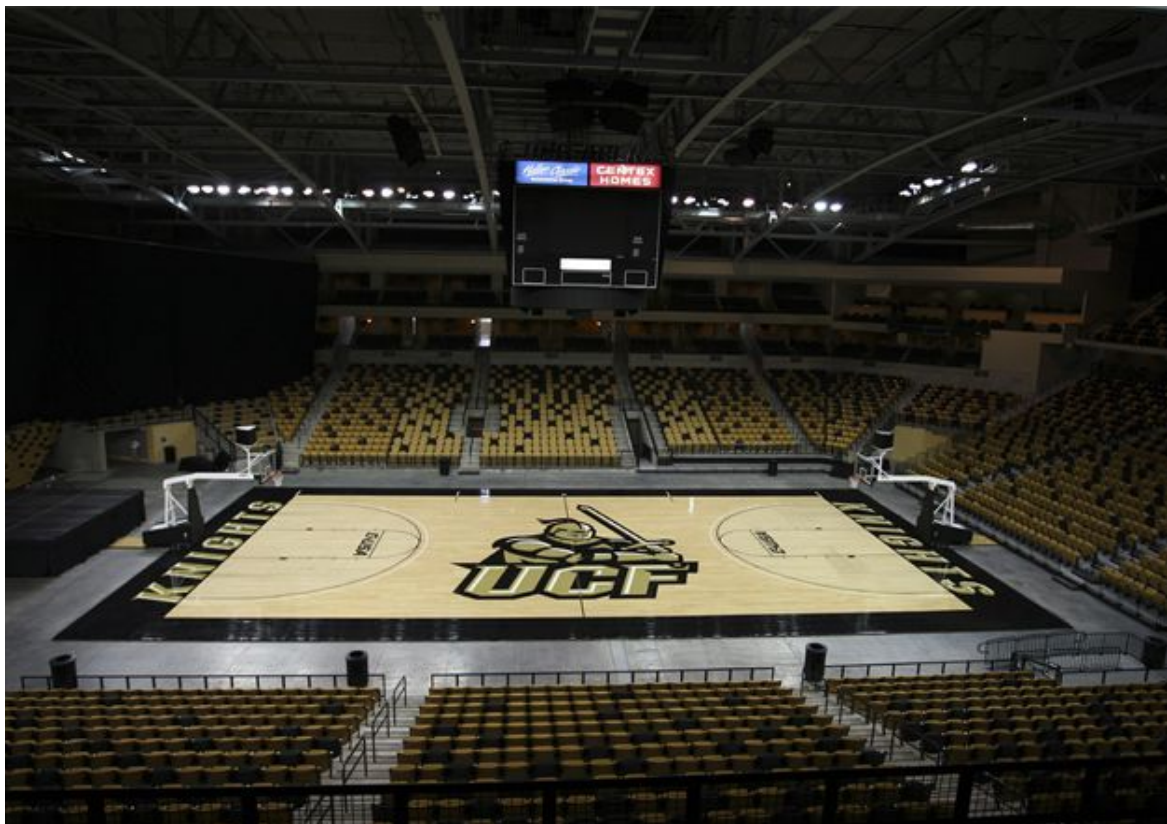
Athletics Compliance Office

The Athletics Compliance Office (ACO) served on the University Compliance and Ethics Advisory Committee and participated in the following meetings in support of the compliance and ethics program: UCF Board of Directors meetings, Athletic Directors Town Hall meeting, Athletics Compliance Office Rules Education meetings, and NCAA Compliance Liaisons meetings.

ACO communicated compliance efforts and training this year through Rules Education meetings (e.g. student-athletes, coaches, staff, administrators, booster, alumni, fans, and parents), issuing ACO "Friendly Reminders", distributing Booster, Alumni, and Fan Information Sheets, and through Campus Liaisons (e.g. Undergraduate Admissions, Office of Student Financial Assistance, Housing and Residence Life, and Registrar's Office). The ACO structured the department to assign Compliance Advisors to specific sport(s) departments to allow for efficient and consistent communications and support.
ACO revised and developed the following compliance policies and procedures this year:
- ACO Policies and Procedures Manual, Bylaws 11-17;
- ACO Ethical Conduct Policy
- ACO Rules Education Policy
- ACO Rules Interpretation Policy
- ACO NCAA Violation Self Reporting Policy
- Athletics Department Jump Forward Policy

Additionally, ACO conducted four internal monitoring and compliance reviews; NCAA Level III Violations, Recruiting Activities, Certifications of Eligibility, and Playing and Practice Seasons.

Information Security Office

The Information Security Office (ISO) served on the University Compliance and Ethics Advisory Committee, the Red Flags Committee, and the PCI DSS Committee. ISO provided compliance guidelines on NIST 800-171 standards for the Office of Research and Commercialization and compliance requirements for key research projects. Provided compliance guidelines on PCI DSS to F&A and UCF merchant community; contributed in the COHPA TAC Committee and the Classroom Technology Committee meetings. Communicated information security best practices through the Information Technologies and Resources newsletter, the UCF HR Annual Notice to employees. Through campus-wide emails communicated information security best practices, information on staying safe from cybersecurity threats, and promoted the ISO website that contains best practices and standards for UCF IT and employees.

The ISO conducted training and education on various security awareness notifications to the general IT community and employees regarding cybersecurity threats and information security best practices; new security awareness presentations at HR New Employee Orientations; and presented to HR Liaisons on cybersecurity threats and multifactor authentication.

The ISO published university policy 4-014 Procurement and Use of Cloud Computing and Data Storage Services. Drafted Email Provisioning, De-provisioning, and Use; Enterprise Directory Services policy; the security policy on PeopleSoft/ERP (Enterprise Resource Planning); and established the Vendor Risk Management (VRM) program procedures and processes.

In addition, the ISO conducted the following internal monitoring and compliance reviews:

- Continued efforts to assess, report and mitigate compliance issues on internet facing servers – Vulnerability Management Program which involves dozens of departments and hundreds of systems - all assessments and scans were automated and reports generated for owners
- Reviewed and addressed university IT risk areas
- Worked with F&A on PCI DSS compliance reviews for departments
- Coordinated a penetration testing assessment against a key website for PCI DSS compliance
- Worked with ORC on NIST 800-171 compliance reviews for applicable projects
- Implemented a Security Information and Event Management (SIEM) system for better internal monitoring capabilities

35

Legal Affairs and Health Care Compliance for College of Medicine

The associate general counsel, Legal Affairs and Special Projects and the manager of Legal Affairs and Health Care Compliance of the College of Medicine (COM) served on the University Compliance and Ethics Advisory Committee, the Security Incident Response Team, and appointed Compliance Committee for UCF Health Clinical Services Compliance Program. The department has led and supported the Health Sciences HIPAA collaborative efforts to develop a uniform set of HIPAA Privacy and Security policies for relevant component parts of the university and supported compliance and ethics programs with the UCF IntegrityLine on the COM website, promoted compliance during UCF Health physician and staff meetings, and communicated available resources for compliance questions. The department regularly advised COM employees, in coordination with university's office of compliance, ethics and risk, on gifts and reporting obligations. Additionally, the department offered guidance and advice about Industry Relations, patient privacy and fraud and abuse involving arrangements with health care providers and HIPAA questions and incidents. The department conducted the following training:

- HIPAA training, online training required COM-wide, including senior leadership, faculty and staff members, MD students, and Burnett Biomedical Science students as needed; and Graduate Medical Education program core participants
- COM Industry Relations training, online required COM-wide, including senior leadership, faculty and staff members, MD students, and Burnett Biomedical Science students as needed; and Graduate Medical Education program core participants
- COM Code of Ethics and Conduct, all employees required to review, acknowledge receipt and agree to comply during COM new employee orientation
- Acceptance of Gifts, in-person training to COM Health Information Technology department
- HIPAA in-person training to COHPA and UCF Health staff

In support of compliance and ethics programs, the department:
- Participated in the university's annual Conflict of Interest disclosure reviews
- Conducted HIPAA incident investigations, management and provided advice
- Coordinated with ORC and COM leadership regarding research compliance
- Updated COM Industry Relations policy as needed and COM HIPAA Privacy and Security Policies while developing as uniform set of HIPAA Privacy and Security policies for relevant component parts of the university
- Conducted annual review of COM HIPAA Policies
- Directed and supported the annual UCF Health coding and billing audits by external consultants
- Directed and supported the periodic COM HIPAA security audits by external consultants
- Assisted in tracking compliance with university audit findings
- Conducted annual check of Center for Medicare and Medicaid Services' Open Payments database containing information on payments, if any, made by pharmaceutical companies to COM physicians
- Assisted with assessment of research compliance issues and coordinate with ORC
- Oversaw HIPAA Security Risk Assessment conducted by Security Compliance Associates, quarterly reviews of security access controls conducted on UCF Health systems and implementation of EHR audit log solution

36

Office of Compliance, Office of Research and Commercialization

The director of the Office of Compliance, in the Office of Research and Commercialization (ORC) served on the University Compliance and Ethics Advisory Committee. The ORC delivered the following training:

- Compliance training for university departmental and unit administrators with updates and changes as needed at the monthly EXChanging Ideas and Tips for Research Administrators meeting
- Up-to-date training for university departmental and unit administrators managing university service centers
- One-on-one training with new effort coordinators regarding time and effort reporting
- Export Control training for faculty members and students with research projects requiring a Technology Control Plan or data management plan as required under the Export Administration Regulations/International Traffic in-Arms (EAR)/(ITAR)
- Engaged and trained College of Engineering faculty members with interactions with students located in a sanctioned country
- Conflict of Interest training for faculty members and administrators on an as needed basis
- Facility Security training and awareness for cleared employees as required under the Department of Defense 5220.22-M, National Industrial Security Program Operating Manual
- Research faculty members training on Federal Programs Award Management from October 2016-June 2017 ORC drafted a policy covering postage, printing, and copying expenditures on sponsored projects; revised university policy 4-209 Export Control to reflect denied entities; and revised the Export Control Management Program manual to reflect new procedures. The office also adopted the Financial Conflict of Interest Committee Guidelines and revised the Conflict of Interest (COI) Exemption and Monitoring Plan, the COI Annual Update, and the IRB Exempt and Expedited/Full Board Assessment Forms.

The ORC monitoring efforts included:

- Financial bi-annual reconciliation for service center rates and rate renewal proposals
- Time and effort certification statements
- Reviewed sponsored and unsponsored research activities to ensure compliance with the EAR/ITAR, as applicable
- Monitored H1-B and J-1 visa applications related to sponsored project personnel assignments
- Monitored Conflict of Interest disclosures, human subject research on a monthly basis, cleared employee's personnel security clearance, and classified document control, including responsibility for receipt, accountability, derivative classification determinations, transmission, and destruction

The ORC measured compliance program effectiveness and maintained metrics regarding quality assurance and quality review outcomes; reviewed IRB Effectiveness as required by the Association for the Accreditation of Human Research Protection and ORC guidelines, and conducted a Vulnerability Assessment as required by the Defense Security Service. Additionally, ORC instituted disclosure of conflicts of interest for laboratory, program personnel and students supervised by UCF employees that have monitored conflict of interest via Exhibit A, and engaged third party consultants to conduct independent review of processes and recommend improvements to ensure consistency with best practices.

Office of Institutional Equity

The director of the Office of Institutional Equity (OIE) served on the University Compliance and Ethics Advisory Committee and staff members of OIE served on the:

- Bias Incident Communications Group
- Diversity & Inclusion Working Group
- Minors on Campus Committee
- HR Advisory Council
- HR Compensation Committee
- President's Advisory Staff Council

The assistant director and Title IX Coordinator chaired and coordinated monthly meetings with the University's Title IX Advisory Council, as well as periodic meetings with its Athletics, Data Analysis, Marketing, Outreach & Prevention, and Policy subcommittees.

37

OIE conducted the following in-person trainings:
- Search guidelines to search committees to four departments;
- Training regarding diversity, nondiscrimination and the ADA in six departments;
- Compliance with Title IX and employees' reporting responsibilities with students, as well as in the following departments/committees: Housing and Residence Life (including Resident Assistants), Orientation Team, Department of Health Professions, Student Development & Enrollment Services (this includes training for student conduct hearing panels, Housing and Residence Life, and Admissions), Admissions and Standards Committee, Psychology Department, Student Union Housekeeping unit, Student Health Center, Athletics, Department of Legal Studies, Criminal Justice Department, Philosophy Department, Alcohol and Other Drug Prevention Programming Office, Victim Services, Graduate Studies program directors, School of Social Work

OIE assisted Human Resources with three sessions of in-person trainings regarding search interviews, and participated in the three trainings in the Orlando community.

OIE oversaw and managed the implementation of required on-line training for all undergraduate students (Haven) for the 2016-17 academic year. With regard to graduate students, OIE oversaw and implemented an on-line web course. OIE currently is in the process of launching required on-line training for graduate students (Haven Plus) for the 2017-18 academic year.

OIE created the University Policy 2-004, Prohibition of Discrimination, Harassment and Related Interpersonal Violence and developed, revised, and facilitated the following regulations, policies, and procedures to support compliance efforts:
- Procedure between Human Resources and OIE to research and process employees' ADA accommodation requests that result in exploration of reassignment to ensure compliance with EEOC guidance regarding ADA compliance
- Procedure between OIE and General Counsel regarding University responses to external agency complaints
- Collaborated with HR to create vehicle for employees to self-report disability and veteran information in compliance with OFCCP Section 503 Disability Self-Identify and Veterans Self-Identify Regulations
- Regulation UCF-3.001 (proposed revisions pending BOT approval)
- Regulation UCF-3.0134 (proposed revisions pending BOT approval)
- OIE's Investigation Procedures
- ADA Accommodation Form (to include GINA statement)
- Genetic Information Guidelines (proposed revisions pending HR approval)
- In collaboration with SDES, UCF's Golden Rule: Introduction, Section 5.006, Section 5.007, Section 5.008, Section 5.010, and Section 5.012
- Faculty Handbook
- Undergraduate Catalog and Graduate Catalog

OIE conducted the following internal monitoring and compliance reviews:

Search and Hiring: During the 2016-17 fiscal year, OIE handled approximately 500 search and hiring inquiries, which included a review of about 300 search packages to ensure compliance with EO and OFCCP laws and regulations. Although a majority of these matters were faculty hiring packages, these inquiries also included approval of requests for exemptions from postings, exemptions from search committee and applicant pool diversity requirements, and approval of candidates for the Targeted Opportunity Program (TOP).

In addition, OIE collaborated (and will continuing collaborating) with an external resource (Berkshire Associates) and Human Resources to prepare annual Affirmative Action plans for the University in compliance with OFCCP regulations.

Accommodation Requests: During 2016-17, OIE assisted with and/or facilitated more than 50 requests for accommodations in the workplace or accommodations needed because of pregnancy. HR and OIE have created a work group to examine the processes related to leaves of absences, benefits and requests for employee accommodations based on disabilities to analyze the current case flow and how the processes can be improved and streamlined.

Student Development and Enrollment Services (SDES)

The associate vice president and dean of students, the associate vice president for Enrollment Services, the associate vice president for Student Success, and assistant vice president for Learning Support Services served on the University Compliance and Ethics Advisory Committee.

Academic Services for Student-Athletes

The Academic Services for Student-Athletes (ASSA) department members served on the University Athletics Advisory Committee, Student Development and Enrollment Services Academic Advising Council, and participated in bi-monthly meetings with the Athletics Compliance Office and frequent meetings with the Registrar's Office in support of the compliance and ethics program. ASSA conducted compliance training and education through partnerships with the Athletics Compliance Office and the Registrar's Office, offering Family Educational Rights and Privacy Act (FERPA) and National Collegiate Athletic Association (NCAA) rules education training. ASSA performed an annual update of all ASSA policies in the student-athlete handbook and posted the policies on the UCF Athletics Association website and developed the ASSA Standard Operating Procedures. Additionally, ASSA conducted the following internal monitoring and compliance review activities:

- Managed textbook returns for scholarship student-athletes and reported receipts and documentation to the Athletics Compliance Office for monitoring and oversight.
- Collaborated with the Athletics Compliance Office to build a flow chart to understand when it is permissible to purchase academic materials, per the syllabus, for student-athletes based on scholarship status.
- Monitored weekly reports from the Registrar's Office for student-athletes that change their major or drop below full-time status.
- Collaborated with the Registrar's Office to compile Academic Progress Rates using ASSA developed forms.

Office of Integrity and Ethical Development

The director of the Office of Integrity and Ethical Development served on the University Compliance and Ethics Advisory Committee and the Financial Conflict of Interest Committee. Training led by the department included:

- 91 workshops for UCF faculty associated with Academic Integrity
- 21 workshops for UCF students associated with College Life Skills
- Nine workshops on Ethics in Graduate School and Beyond for incoming graduate students through a partnership with Graduate Studies
- Received numerous requests from the UCF community to present to specific student populations on academic integrity, personal integrity, and professionalism

The director assisted the Office of Student Conduct with updating language in the Golden Rule to include Contract Cheating. Continued to monitor academic self-help websites to evaluate student violations of the UCF Rule of Conduct Collaborated with General Counsel in identifying a vendor, promoting study guides, could cause a student to be found in-violation of academic misconduct.

The department served as the educational sanctioning services office for the Office of Student Conduct, Housing and Residence Life, and Fraternity and Sorority Life and provided 222 students one-on-one coaching sessions, academic integrity seminars and workshops, and excellence in decision-making seminars. Also developed two new online academic integrity sanctions: Reality of Perfectionism – Exercises on How NOT to be Perfect and Defining Academic Misconduct, specific to computer science majors. The department developed a new program, Action Plan, which was designed to assist students found in-violation of academic misconduct and suspended for a semester. The Action Plan allows students to participate in personal and professional development activities while maintaining a connection to UCF throughout their suspension period. From fall 2016 to spring 2017, 40 students participated in an Action Plan and 39 returned to UCF the following semester.

39

40

Office of Student Rights and Responsibilities

The Office of Student Rights and Responsibilities (OSSR) staff served on the Title IX Workgroup and as an advisor to the Golden Rule Review Committee; a committee of students established for the purpose of responding to the changing needs of the student body with regard to the policies, procedures, regulations for students. The office was also responsible for ensuring student conduct review process and Rules of Conduct were in compliance with Board of Governors student discipline section. OSSR staff were responsible for assembly, dissemination and continuing education to students, faculty, and staff members and for the Golden Rule Student Handbook and UCF Creed. OSSR provided leadership to the division of Student Development and Enrollment Services regarding the promotion and actualization of integrity and ethical development. The office oversaw and supported the Office of Integrity and Ethical Development by providing educational resources for students, faculty and staff members in promoting academic success through integrity, ethical decision-making, conflict resolution and supportive communication. Additionally, OSSR oversaw compliance for the Admission Clearance process, which involved the review of applicants seeking admission to UCF with a prior criminal background or educational disciplinary history. (Florida Board of Governors Regulation 6.001 authorizes universities to refuse admission to applicants due to past misconduct.) OSSR reviewed all applications where prior violations of law were disclosed (including but not limited to criminal charges, convictions, or pending charges), other than a minor traffic violation, or any conduct problem at another institution and made a decision as to whether the admission of the applicant would be in the best interest of the university. The office also oversaw compliance of the Discipline Clearance process for students seeking admission into a graduate program, studying abroad, applying to the bar, having a background check completed for employment with the federal government, transferring to another institution, etc. OSSR additionally managed Title IX cases involving student respondents and coordinated investigations of hazing allegations through hazing response protocol.

OSSR disseminated communications on the following compliance and ethics topics:
- Updates and access to the UCF Golden Rule Student Handbook to all students, faculty, and staff members
- Information to complainants and respondents involved in Title IX related cases on interim measures, appropriate resources and process involved for Title IX incidents
- Periodic communication to students, faculty, and staff members and regarding resources, reporting options and prevention and outreach efforts related to Title IX issues

OSSR led the following training on compliance and ethics topics:
- Annual training of the Student Conduct Review Board on compliance with university student conduct review processes and procedures
- Training of the Death Protocol Procedures Committee, the Student of Concern and Threat Assessment Teams, Homelessness Waiver Committees
- Title IX Trainings for students organizations and student leaders
- Annual Training to Student Development and Enrollment Services staff on Title IX Compliance
- Student Care Services staff provided training to UCF employees on the Student of Concern process, which included education about Mandated Assessment procedures for involuntary hospitalizations and reporting procedures for the Student of Concern process

OSSR revised the following university regulations, policies, department procedures, or handbooks:
- Golden Rule Student Handbook
- Office of Student Rights and Responsibilities websites
- University Regulations: UCF-5.006; UCF-5.007; UCF-5008: UCF-5009; UCF-5010; UCF-5011; UCF-5012; UCF-5013; UCF-5015; UCF-5016
- Reviewed and maintained UCF-5.006: Student Rights and Responsibilities, Golden Rule Review Committee, Title IX, Student Care Services, Student of Concern Team, Mandated Assessment, Involuntary Withdrawal, University Crisis Team components

The office also responded to the Title IX internal audit report issued by University Audit by rewriting the UCF Title IX compliance process, creating a bifurcated and comprehensive response plan between SDES and Office in Institutional Equity for the management of Title IX cases, with full implementation of recommendations by fall 2017. Additionally, the office assisted with compilation of materials associated with Title IX complaints generated by OCR and received by UCF in spring 2017.

41

Registrar's Office

The university registrar served on the University Compliance and Ethics Advisory Committee and was an active participant on the Security Incident Response Committee on breaches and potential FERPA violations. To raise awareness on compliance and ethics, the office:

- Posted the "Speak Up" link and logo on the Registrar's Office websites and kiosk computers
- Wrote an article for the Faculty Focus Newsletter on handling grade rosters and monitoring for unauthorized access
- Sent annual FERPA Notification to students alerting them about their rights, resources related to FERPA, and contact information for filing a complaint

The Registrar's office led trainings on the following compliance and ethics topics:

- Faculty FERPA Training
- FERPA Education to students via the SLS 1501 classes. The Registrar's Office staff visited every section of SLS 1501 for the summer admits to help students understand their rights and safeguarding responsibilities related to their records
- Face to face Student Records Training I and II for all new staff seeking security to PeopleSoft Campus Solutions Student Records Module
- Provided Excess Hours Training to advisors and departments to ensure correct advisement in accordance to 1009.286 F.S.
- PeopleSoft Student Records Training (includes FERPA and information security best practices) University regulations, policies, department procedures or handbooks developed or revised to support compliance efforts:
- Added language to Regulation 2.012 that students admitted as limited non-degree students will be subject to undergraduate and graduation admission policies and procedures based on the level of the coursework and program
- Added business process for auditing of grade rosters that searched for certain factors that would flag a roster for potential breach

The Registrar's office monitored, reviewed, and investigated the following to ensure compliance with federal, state, and university regulations, policies, procedures, and processes:

- Audit query of "Other Career" record changes to ensure that they are supported by proper paperwork and signatures
- Regular auditing of academic record changes by a staff member not involved with the business process to confirm that all record changes are supported by proper documentation
- Late degree certification forms – submission of a request form from the college that requires signature of the advising unit, the dean, and registrar
- Residency Committee ensured consistency with compliance to 1009.21 F.S.
- Revenue and expenditure reconciliation business process monthly
- Hours to Degree Report – submitted after each degree certification period
- Communicated grade roster approval alerts to faculty

Effectiveness reviews conducted:

- Internal audit of grade roster activity for unusual patterns of grade roster approvals
- Review of all record changes by a second person in the Registrar's Office to ensure that updates in PeopleSoft were properly supported with proper documentation
- Degree Certification validation – All degrees awarded were verified against degree audit data to ensure that all requirements were met
- Audit of record changes on students in the "Other Career" to ensure that those updates were backed up with proper approvals and documentation
- FERPA Training utilized pre-test and post-test assessments for online and face-to-face to measure the effectiveness of the trainer and the content
- Conducted semester audit of PeopleSoft security roles with security authorizers

42

Student Accessibility Services

The assistant vice president for Learning Support Services served on the University Compliance and Ethics Advisory Committee representing Student Accessibility Services (SAS) and met with the Office of Institutional Equity on a regular basis to discuss compliance issues related to individuals with disabilities on campus. Additionally, staff within SAS facilitated faculty liaison committee meetings and university wide educational programming to help reduce learning and physical barriers on campus for students with disabilities. SAS conducted the following training:

Session	Number of Times Offered	Collective Attendance
The Real Disability Barriers Workshop	16	307
Digital Media Training	6	88
Inclusive Education Services Overview	6	118
Video Captioning Training	2	19
Number of specific attendees for at least 1 session	422	
Total number of attendees for all sessions	532	

SAS used the AIM database system to allow students to specify which accommodation they wished to use per specific class, updated all SDES websites to include an Accessibility Statement, and most SDES offices added a Report Accessibility Barriers button on websites so individuals could report accessibility concerns. SAS responded to all ADA compliance issues reported through this system in a timely and thorough manner.

SDES implemented a Digital Media Accessibility Advisory Council to enhance the accessibility of SDES websites. An online accessibility team was established and trained to make all SDES websites and digital content fully accessible including not placing any new videos uncaptioned on websites.

SAS and the Division of SDES worked collaboratively with other university offices to address investigatory efforts to ensure federal, state, and university regulations were being met. Additionally, SAS worked with the Office of Institutional Equity (OIE) on a regular basis to review policies, practices, and processes, and discussed revising the course accommodation appeal process.

Student Financial Assistance and Undergraduate Admissions

The associate vice president for Enrollment Services served on the Compliance and Ethics Advisory Committee representing the office of Student Financial Assistance (SFA) and Undergraduate Admissions (UA).

Student Financial Assistance
The director of the Office of Student Financial Assistance also serves on the Compliance and Ethics Advisory Committee. Compliance and ethics communications were posted on the office's Dashboard (online intranet site) on updates to processes and important information weekly. SFA conducted training on 11 topics including the Department of Education Federal Update and Red Flags Financial Aid Training. The director, in partnership with the administrative team, reviewed and revised policies and procedures. In terms of monitoring, the office ran various queries for the purpose of identifying potential problems to processes and ensured compliance was being maintained. Staff were provided ongoing training to ensure they were kept abreast of the most current regulations and compliance was addressed during performance evaluations. SFA underwent an annual state audit and the State of Florida Bright Futures Audit.

Undergraduate Admissions
UA staff chaired and served on the Admissions and Athletics Subcommittee working with the Athletics Compliance Office (ACO) to support and implement admission policies and procedures for student-athletes. UA served as members of the University Residency Appeal Committee and met annually with the Athletic Compliance Office to be trained on and discuss compliance issues as they related to the recruitment and admission of student-athletes. Updated the UA Recruitment Training Manual. UA created and filled a senior assistant director position to focus on the admission of student-athletes and to ensure that all university policies and procedures were followed in the admission and enrollment of student-athletes. Additionally, UA drafted a comprehensive Admissions and Athletics Handbook to include areas such as the NCAA initial eligibility process. PeopleSoft queries were used throughout the year to ensure all state and university regulations, policies and procedures were being followed including keeping current on all Florida Board of Governor Regulations and Florida Statutes affecting university admission and residency for tuition purposes classification

43

Student Health Services

Student Health Services (SHS) staff served on the following compliance committees and workgroups:

- UCF Title IX
- UCF Student of Concern
- SHS Breach
- SHS Patient Advocate Reporting

SHS provided education and training on the following compliance and ethics topics:

- HIPAA and Risk Management, signing of the SHS Confidentiality Agreement, SHS Code of Conduct Agreement, and SHS Security Agreement for new hires
- HIPAA and Risk Management, signing the SHS Confidentiality Agreement, SHS Code of Conduct Agreement, and SHS Security Agreement for annual employee performance reviews, which required to maintain AAAHC accreditation
- University Title IX Advanced training for 97 staff
- Lab proficiency training
- Immunization compliance with the Florida Board of Governors requirements and the ACIP and CDC recommendations provided to regional campuses
- Green Dot Training for 105 staff

SHS maintained 24 policies and procedures in support of compliance efforts. Efforts to monitor, review, and investigate compliance activities included:

- Annual Security Risk Assessment (conducted by a third party) for the physical, technical, and administrative structure of the organization
- HIPAA internal audits included access and authorization audit (quarterly), user access audit (quarterly), provider sign-off (weekly)
- Accreditation Association for Ambulatory Health Care (AAAHC): UCF SHS participated in on-going self-evaluation including defined policies and procedures, peer review and education to continuously improve its care and services. Every three years (since 2000 the inaugural accreditation award) SHS undergoes a thorough, on-site survey conducted by AAAHC surveyors, who are themselves health care professionals. Standards address 22 different areas of operation and practice, to include credentialing and privileging of the clinical staff, required annual training, adverse incident reporting, risk management, clinical records, and security, privacy, and confidentiality
- Department of Children and Families: accrediting agency for Alcohol and Other Drugs treatment facility
- Office of Inspector General (OIG) completed annual review as required by and then annually thereafter as required by the US Department of Health and Human Services: This is a requirement as part of insurance contracts that annually search each employee individually in the "exclusions database" (i.e., Medicare and Medicaid fraud incidences); verify monthly all employees are excluded from conducting any fraudulent activity (i.e., Medicare and Medicaid)
- Monitored all clinical staff as required by appointment and reappointment policy (completion of attestation form, American Medical Association, National Practitioner data bank)
- SHS Security Officer provided a report as part of the SHS Performance Improvement Plan for "Electronic Medical Record Confidentiality" and "Breach Determination and Documentation."
- SHS Performance Improvement Plan outlined various assessment requirements necessary for maintaining the highest quality of health care service. The plan was spear-headed by a committee consisting of the SHS director; medical director; associate director, Operations; associate director, Accreditation, Marketing & Research; assistant director, Nursing; assistant director Clinical Services; risk manager; coordinators from Women's Health, Alcohol and Other Drug Prevention, Health Information Management; and Infection Control Chair. Each member was responsible for monitoring and reporting of studies conducted in their area of supervision with 24 reports given each year.

45

UCF Global

The assistant vice president, UCF Global served on the Compliance and Ethics Advisory Committee. The Leadership Team regularly met with both the assistant vice president and vice provost to discuss matters.

UCF Global participated in a one-day training workshop regarding 1042-S & Tax Withholding on Non-U.S. Persons; Budget Directors meetings; the Employment and Taxation (E&T) Team attended online National Association of Foreign Student Advisers webinar related to international vendor processing and online Thomson Reuters webinar related to completing the end-of-year IRS 1042-S filing. The department hosted several workshops with UCF's immigration attorney regarding H-1B policy changes. Outreach conducted to UCF departments and colleges via email and in-person meetings regarding updated immigration regulations. Attended NAFSA national and regional conferences, which offer compliance-related workshops and a forum hosted by the National Center for Campus Public Safety on reducing the criminal victimization of international students. Revised university policy 2-901 UCF Policy for All Foreign Nationals and E&T Team created new Green Card processing guide and updated H-1B processing guidelines.

Additionally, UCF Global conducted the following monitoring, compliance and program activities:

- Improved UCF Global forms and website to include updated immigration compliance information for students.
- Implemented an online (paperless) "DS-2019 request process" to improve efficiency, transparency, and compliance with immigration regulations.
- International Student and Scholar Services (ISSS) executed regular SEVIS database and PeopleSoft reports ensuring students are in good immigration standing.
- Reviewed H-1B personnel files bi-weekly to ensure H-1B compliance.
- Administration regularly observes English Language Institute classrooms for appropriate student/teacher conduct.
- Ad-hoc review of data entry in PeopleSoft and SEVIS for continuing staff.
- SEVP field representatives visit UCF Global to review procedures.
- Data entry audits preformed in preparation for the implementation of SEVIS batch.
- H-1B site visits are done by U.S. Citizenship and Immigration Services/Department of Homeland Security periodically.
- UCF Global International Student and Scholar Services (ISSS) Team regularly discuss ethics standards for the field of international education during staff meetings.

ITEM: INFO-5

University of Central Florida
Board of Trustees
Audit and Compliance Committee

SUBJECT: Overview of Title IX

DATE: November 30, 2017

PROPOSED COMMITTEE ACTION

Information only.

BACKGROUND INFORMATION

Supporting documentation: Attachment E: Overview of Title IX

Prepared by: Nancy Myers, Director, Office of Institutional Equity

Submitted by: Rhonda L. Bishop, Chief Compliance and Ethics Officer

Attachment E

Office of Institutional Equity

Nancy Fitzpatrick Myers
Director of Office of Institutional Equity

Dawn M. Welkie
Title IX Coordinator and Assistant Director of Office of Institutional Equity

UCF

Title IX Compliance Audit
Finding No. 1 – Title IX Administration Recommendations

- Title IX reports from online reporting mechanisms and responsible employees are immediately forwarded to the Title IX Coordinator.
  - UCF has developed a process for all reports to be forwarded to the Title IX Coordinator.
  - UCF has created a Title IX Response Team.
- Title IX investigations should be performed within the Office of Institutional Equity (OIE).
  - OIE continues to handle the response to all reports related to employees and third parties.
  - Effective August 1, 2017, OIE investigates all reports related to students.

2

Finding No. 2 – Policies and Procedures Recommendations

Recommendations:

- Review and revise draft policy to ensure it is consistent with the Office for Civil Rights and other federal guidance.

- Develop appropriate procedures for Title IX process.

Status:

- *No. 2-004 Prohibition of Discrimination, Harassment and Related Interpersonal Violence Policy*

- Updated Regulations 3.001 and 3.0134

- *OIE Investigation Procedures* and *Golden Rule Student Handbook* updated

- President Hitt announcement

4

Prohibition of Discrimination, Harassment, and Related Interpersonal Violence Policy

- Employee Reporting Obligations
  - Definition of Responsible Employee
  - Duty to Report
  - Exceptions to Duty To Report
  - Supervisors' Duty to Report
  - Failure to Report = Violation

- Amorous Relationships
  - Undergraduate Students
  - Graduate Students
  - Workplace
  - Duty to Disclose
  - Failure to Disclose or Report = Violation

http://policies.ucf.edu/documents/2-004ProhibitionOfDiscriminationHarassmentAndRelatedInterpersonalViolence.pdf

5

UCF

Finding No. 3 – Marketing and Communication Plan Recommendations

- Title IX Coordinator and Communications and Marketing develop single comprehensive marketing and communications campaign for entire university community.

- University should allocate adequate resources for marketing and communication plan.

6

7

Finding No. 4 – Training and Education Recommendations

Recommendations:

- Allocate resources to OIE for a coordinator of prevention and outreach to facilitate training and education for responsible employees.

Status:

- OIE hired Deputy Title IX Coordinator-Training Specialist.

- During 2017 Fall, OIE provided training to employees.

- January 2018, OIE is launching campus-wide training to faculty in conjunction with launching of marketing campaign.

8

Finding No. 5 – Intercollegiate Athletics Recommendations

- Title IX Coordinator and UCF Athletics Association should coordinate to ensure that all files used to report equity data related to student-athletes are retained for the appropriate timeframe.

- Title IX Coordinator should develop a continuous monitoring plan for all provisions of Title IX specific to athletics programs.

9

Questions?

10