May 25, 2022 Audit and Compliance Committee Meeting

Board of Trustees
UCF Live Oak Center | 4115 Pyxis Ln, Orlando, FL 32816
May 25, 2022 1:00 PM - 2:00 PM EDT

Table of Contents

Board of Trustees Meeting
Audit and Compliance Committee
May 25, 2022, 1:00-2:00 pm
(or upon adjournment of previous meeting, and at the Chair's discretion)

Live Oak Event Center | UCF Main Campus

Livestream: https://ucf.zoom.us/j/93233428251?pwd=QjNjOThWL3dqTktDZkJ6dFVmWmNyZz09
Webinar ID: 932 3342 8251
Conference call number: +1 929 205 6099; Meeting ID 932 3342 8251

AGENDA

1. Call to Order and Welcome   Bill Christy, *Chair, Audit and Compliance Committee*

2. Roll Call   Margaret Melli, *Executive Assistant*
                                                 University Compliance, Ethics, and Risk

3. Minutes of the February 22, 2022, meeting   Chair Christy

4. Reports   Chair Christy

5. Discussion

        DISC – 1   University Audit Update
        (20 Minutes)   Robert Taft, Chief Audit Executive

        DISC – 2   Enterprise Risk Update - Cybersecurity
        (20 Minutes)   Rhonda L. Bishop, Vice President, *University Compliance, Ethics, and Risk*
                             Matthew Hall, *Vice President for Information Technology and Chief Information Officer*

        DISC – 3   University Compliance, Ethics, and Risk Update
        (20 Minutes)   Rhonda L. Bishop

6. New Business   Chair Christy

7. Adjournment   Chair Christy

Board of Trustees
Audit and Compliance Committee Meeting
February 22, 2022
UCF Downtown Campus, DPAC 106/106A

MINUTES

CALL TO ORDER

Trustee Bill Christy, Chair of the Audit and Compliance Committee, attended virtually and called the meeting to order at 10:00 a.m. Board Chair Alex Martins (ex-officio), Vice Chair Tiffany Altizer and Committee members Joseph Harrington, Harold Mills, and Beverly Seay were present. Committee member Danny Gaekwad attended virtually.

Trustee Michael Okaty was present.

MINUTES APPROVAL

Vice Chair Altizer made a motion to approve the minutes from the November 16, 2021, Audit and Compliance Committee meeting. Trustee Harrington seconded the motion. The minutes were unanimously approved.

ACTION

Board of Governors' Performance-based Funding Data Integrity Certification Audit Report (AUDC-1)
Robert Taft, Chief Audit Executive reported on the results of the Board of Governors' Performance-based Funding Data Integrity Certification Audit. Vice Chair Altizer made a motion to accept the report, Trustee Harrington seconded the motion; the report was unanimously accepted by the Committee.

Performance-based Data Integrity Certification Form (AUDC-2)
Taft gave an update on the Performance-based Data Integrity Certification Form. Trustee Mills made a motion to approve the form, Vice Chair Altizer seconded the motion; the form was unanimously approved by the Committee.

DISCUSSION

Audit and Compliance Committee Charter (DISC-1)
The Committee completed the annual review of its charter and determined that no changes were warranted at this time.

University Compliance, Ethics, and Risk Update (DISC-2)
Rhonda Bishop, Vice President, University Compliance, Ethics and Risk gave the Compliance, Ethics, and Risk Update. She provided updates on the 2020-21 Compliance and Ethics Work Plan Status with a summary of activities completed during October 1, 2021, through December 31, 2021. Bishop announced the launch of the 2022 Compliance and Ethics Culture Survey, gave an update on statutes covering foreign influence and an update on the Board of Governor's review of Chapter 4 regulations.

University Audit Update (DISC-3)
Robert Taft, Chief Audit Executive, provided the University Audit Update. Taft gave a status update on completed and ongoing projects including the Direct Support Organization financial controls review initiated by the Board of Governors. Taft also provided a department staffing update and a list of upcoming projects along with Audit Committee benchmarking information from a recent national survey.

INFORMATION

Direct Support Organization External Audit Reports (INFO-1)
Taft informed the committee of an upcoming university policy change where all DSO's will use the same external auditor for their financial statement audits. He also stated that the Direct Support Organization External Audit Reports are available for review and that no issues were found.

ADJOURNMENT

Chair Christy adjourned the Audit and Compliance Committee meeting at 10:52 a.m.

Reviewed by: _____   _____
         Bill Christy
         Chair, Audit and Compliance Committee   Date

Respectfully submitted: _____   _____
         Michael Kilbride   Date
         Associate Corporate Secretary

Board of Trustees
Audit and Compliance Committee | May 25, 2022

DISC- 1: University Audit Update

☐ **Information** ☒ **Discussion** ☐ **Action**

Meeting Date for Upcoming Action: _____

Purpose and Issues to be Considered:
The Committee should review the attachment in advance to prepare for any discussion among committee members, UCF's Chief Audit Executive, and other members of UCF management. This discussion may relate to completed activities and proposed future activities of the internal audit function along with management's plans for changes to their objectives, key processes, and related internal control activities.

Background Information:
In accordance with the UCF Audit and Compliance Committee Charter, the Committee will meet on a periodic basis to fulfill their oversight responsibilities. The attached document is intended to provide the committee with information regarding the work of University Audit to assist the committee in successfully completing their oversight duties.

Recommended Action:
No recommended actions required.

Alternatives to Decision:
N/A

Fiscal Impact and Source of Funding:
N/A

Authority for Board of Trustees Action:
N/A

Contract Reviewed/Approved by General Counsel ☐ **N/A** ☒

Committee Chair or Chair of the Board has approved adding this item to the agenda ☒

Submitted by:
Robert Taft, Chief Audit Executive

Supporting Documentation:
Attachment A: University Audit Update

Facilitators/Presenters:
Robert Taft, Chief Audit Executive

University Audit Update
May 25, 2022

Agenda

1. Project status update
2. Upcoming schedule
3. Staffing update
4. Fraud prevention, detection and mitigation program
5. Internal Audit Awareness Month

7

Project status update

Audits

- Vendor and Contract Management (draft report issued-final report to be issued by end of month)

- Faculty Clusters (in progress)

- Data Centers (in progress—two memos issued)

- UCF Libraries (completed-working with new Dean on action plan)

- UCF Downtown (deferred until January 2023 per mutual agreement)

Reviews

- CARES Act (in progress- focusing on tiers 2 and 3)

- Knight Vision (project participation until go-live and beyond)

- Direct Support Organization (DSO) Internal Controls review (project monitoring through completion – estimated June 2022)

- Contract & Grants – compliance reviews

8

Next:

Planned audit cycles Two & Three

- **Cycle Two**

- Career Services (to begin in May 2022)
- Miscellaneous Advisory reviews:
  - Sustainability Tracking, Assessment & Rating System (STARS)
  - Room Rental Revenues

- **Cycle Three**

- Workday Training
- Export Controls (defer to plan year 2023)
- College of Engineering and Computer Sciences (defer to plan year 2023)
- UCF Foundation (defer to plan year 2023)

9

4

Audits on Watch List

- UCF Global
- Academic Advising
- Direct Connect

❖ *Impact of Knight Vision on audit selection process*

10

External Audit Activities

- Auditor General Financial Audit (4/19 kickoff meeting)
- Board of Governors Crowe DSO internal controls project (in progress)
- Start of DSO financial statement audits (June/July timetable)

6

Staffing update

INDIVIDUALLY,
WE ARE ONE DROP.
TOGETHER,
WE ARE AN OCEAN.

Ryunosuke Satoro

12
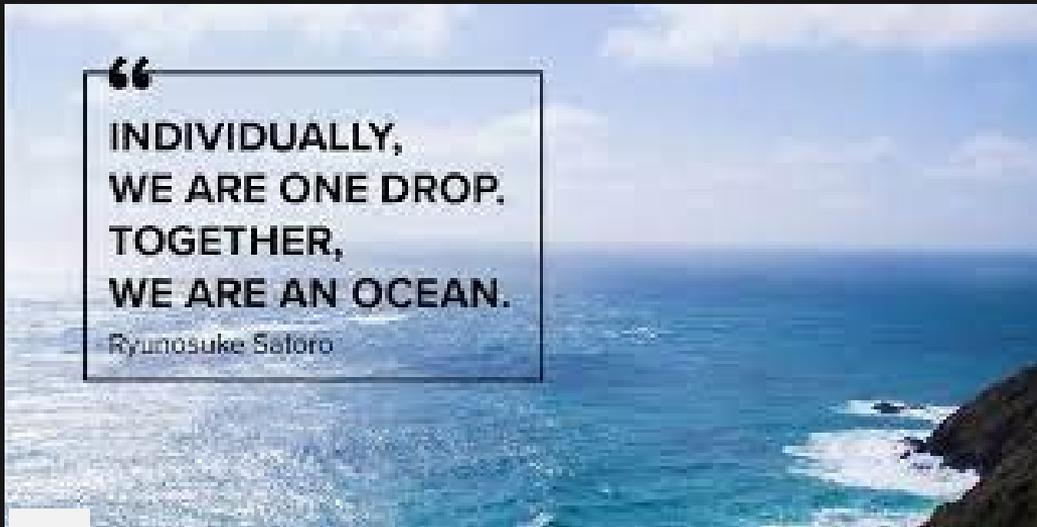
- Auditor II search in progress
- IT Auditor I search successful (Isabelle Newcomb)
- Tina Maier and Chase Jicha will be presenting at the ACFE International Conference on whistle-blower determination process
- Mary Dailey is matriculated in UCF's Master's of Public Administration program
- Adam Glover is serving as Treasurer of ISACA Central Florida Chapter
- Robert Taft named to Board of Directors of IIA Central Florida Chapter

Florida Board of Governors Regulation 3.003 Fraud Prevention and Detection

- Each university board of trustees shall adopt a regulation establishing criteria related to appropriate institutional controls and risk management framework that provide reasonable assurance that fraudulent activities within the university's areas of responsibility are prevented, detected, reported, and investigated.

- Fraud is defined as an intentional misrepresentation or concealment of a material fact for the purpose of obtaining a benefit that would not otherwise be received, or inducement of another to act upon the intentional misrepresentation or concealment to his or her detriment.

- Periodic evaluation and reporting to the board of trustees, at least annually, of the status of the antifraud framework used and any necessary revisions to improve the framework.

14

UCF Regulation 4.015 (Fraud Protection and Detection)

- The Board of Trustees is committed to creating an organizational culture that proactively identifies potential fraud scenarios, discourages the commitment of fraud, and provides encouragement to report potential fraud.

- This Regulation establishes University criteria related to appropriate institutional controls and risk management framework to provide reasonable assurance that fraudulent activities within the University's areas of responsibility are prevented, detected, reported, and investigated.

10

2016 COSO Fraud Risk Management Guidelines

1) Establishment of a Fraud Risk Management Program
2) Performs comprehensive fraud risk assessments
3) Selects, develops and deploys preventative and detective fraud control activities
4) Investigation program
5) Ongoing evaluations and corrective action of the overall program

Source: 2016 COSO Fraud Risk Management Guidelines

Page 4

EY

16

COSO Framework Components and Principles	Fraud Risk Management Principles
Control Environment 1. The organization demonstrates a commitment to integrity and ethical values. 2. The board of directors demonstrates independence from management and exercises oversight of the development and performance of internal control. 3. Management establishes, with board oversight, structures, reporting lines, and appropriate authorities and responsibilities in the pursuit of objectives. 4. The organization demonstrates a commitment to attract, develop, and retain competent individuals in alignment with objectives. 5. The organization holds individuals accountable for their internal control responsibilities in the pursuit of objectives.	1. The organization establishes and communicates a fraud risk management program that demonstrates the expectations of the board of directors and senior management and their commitment to high integrity and ethical values regarding managing fraud risk.
Risk Assessment 6. The organization specifies objectives with sufficient clarity to enable the identification and assessment of risks relating to objectives. 7. The organization identifies risks to the achievement of its objectives across the entity and analyzes risks as a basis for determining how the risks should be managed. 8. The organization considers the potential for fraud in assessing risks to the achievement of objectives. 9. The organization identifies and assesses changes that could significantly impact the system of internal control.	2. The organization performs comprehensive fraud risk assessments to identify specific fraud schemes and risks, assess their likelihood and significance, evaluate existing fraud control activities, and implement actions to mitigate residual fraud risks.
Control Activities 10. The organization selects and develops control activities that contribute to the mitigation of risks to the achievement of objectives to acceptable levels. 11. The organization selects and develops general control activities over technology to support the achievement of objectives. 12. The organization deploys control activities through policies that establish what is expected and procedures that put policies into action.	3. The organization selects, develops, and deploys preventive and detective fraud control activities to mitigate the risk of fraud events occurring or not being detected in a timely manner.
Information & Communication 13. The organization obtains or generates and uses relevant, quality information to support the functioning of other components of internal control. 14. The organization internally communicates information, including objectives and responsibilities for internal control, necessary to support the functioning of internal control. 15. The organization communicates with external parties regarding matters affecting the functioning of other components of internal control.	4. The organization establishes a communication process to obtain information about potential fraud and deploys a coordinated approach to investigation and corrective action to address fraud appropriately and in a timely manner.
Monitoring Activities 16. The organization selects, develops, and performs ongoing and/or separate evaluations to ascertain whether the components of internal control are present and functioning. 17. The organization evaluates and communicates internal control deficiencies in a timely manner to those parties responsible for taking corrective action, including senior management and the board of directors, as appropriate	5. The organization selects, develops, and performs ongoing evaluations to ascertain whether each of the five principles of fraud risk management is present and functioning and communicates fraud risk management program deficiencies in a timely manner to parties responsible for taking corrective action, including senior management and the board of directors.

Principle 1 - Fraud Risk Governance

Board and Senior Management:

► Makes an organizational commitment to fraud risk management.

► Supports fraud risk governance.

► Establishes a comprehensive fraud risk management policy.

► Establishes fraud governance roles and responsibilities throughout the organization.

► Documents the fraud risk management program.

► Communicates fraud risk management at all organization levels.

EY

19

Principle 2 – Fraud Risk Assessment

► Involves the appropriate level of management

► Includes entity, subsidiary, division, operating unit and functional levels

► Analyzes internal and external factors

► Considers various types of fraud

► Specifically considers the risk of management override of controls

► Estimates the likelihood and significance of risks identified

► Assess personnel or departments involved and all aspects of the fraud triangle

► Identifies existing fraud control activities and assesses their effectiveness

► Determines how to respond to risks

► Uses data analytics techniques for fraud risk assessment and fraud risk responses

► Performs periodic risk assessments and assess changes to fraud risk

Principle 3 – Fraud Control Activities

► Promotes fraud deterrence through **preventive** and **detective** control activities

► Integrates with the fraud risk assessment

► Considers organization-specific factors and relevant business processes

► Considers the application of control activities to different levels of the organization

► Utilizes a combination of fraud control activities

► Considers management override of controls

► Uses *proactive* data analytics procedures

► Deploys control activities through policies and procedures

Source: 2016 COSO Fraud Risk Management Guidelines

Page 15

EY

21

16

Principle 4 - Fraud Investigation and Corrective Action

► Establishes fraud investigation and response protocols
  ► Confidentiality, urgency, evidence preservation, legal protections, forensic support, investigation protocols, reporting process, root cause and mitigating controls, etc.

► Conducts investigations

► Communicates investigation results

► Takes corrective action

► Evaluates investigation performance

Principle 5 - Fraud Risk Management Monitoring Activities

► Considers a mix of ongoing and separate evaluations

► Considers factors for setting the scope and frequency of evaluations

► Establishes appropriate measurement criteria

► Considers known fraud schemes and new fraud cases

► Evaluate, communicates and remediates deficiencies

23
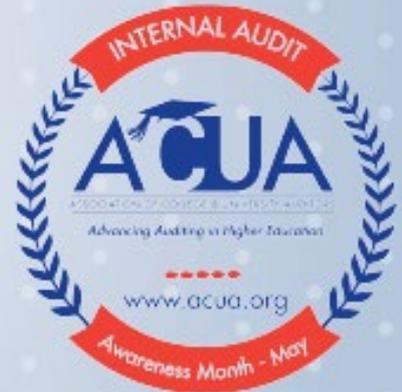
Another Urban Legend

BYU | MARRIOTT SCHOOL

Another Perspective…

An internal auditor is someone who watches the battle from the safety of the hills and once all the fighting is finished, comes down and bayonets the wounded.

Internal Audit Myths

1. All Internal Auditors are accountants by training.

2. Internal Auditors are nit-pickers and fault finders.

3. It's best not to tell the Internal Auditors anything unless they specifically ask.

4. Internal Auditors follow a cycle in selecting their audit "targets" and use standard checklists so they can audit the same things the same way each time.

- *(Source - Institute of Internal Auditors webpage)*

26

The Institute of Internal Auditors (The IIA)

The internal audit profession's most widely recognized advocate, educator, and provider of standards, guidance, and certifications.

Established in 1941, The IIA today serves more than 200,000 members from more than 170 countries and territories.
www.theiia.org.

The Institute of
Internal Auditors
Elevating Impact

What do Internal Auditors do?

- Evaluate risks
- Assess controls
- Improve operations
- Review processes & procedures
- Assure safeguards
- Provide insight & foresight
- Communicate results & recommend action

The Institute of
Internal Auditors
Elevating Impact

Value of Internal Auditors

- Find out what's working and what's not

- Keep an eye on the corporate culture

- Look at the organization objectively

- Bring organization-wide perspective

- Advocate improvements

- Raise red flags

- Tell it like it is

- Trusted advisor

The Institute of
Internal Auditors
Elevating Impact

24

The Possibilities are Endless for Individuals Entering the Field of Internal Auditing

One of the Top Five In-demand Professions Throughout the World

Although internal auditing is one of the most misunderstood professions, it is one of the top five highest professions in demand throughout the entire world. So much so, organizations are paying higher entry level salaries, providing challenging and diversified projects, and offering more flexible schedules to entice future employees. Whether you're just starting out or making a career change, the internal audit profession deserves a closer look.

The Future Is Yours to Command
The IIA Is Here to Help

One of the best ways to find out more about internal auditing is to join your local IIA chapter. Membership in The IIA can provide you with valuable opportunities to meet with those already practicing in the profession and to learn what you can do now to prepare yourself for a dynamic career. Many IIA chapters plan activities specifically for students and faculty.

Join The IIA Today!
Student Membership – Only $50 Per Year

Don't wait until you graduate —join now to gain an advantage over your peers competing for the same jobs. Enjoy full professional member benefits at a discounted rate.

Take control of your future by identifying and selecting a profession offering a great starting salary, opportunities for fast-paced advancement, work-life balance, and more. Take a closer look at internal auditing now, before you graduate. Talk to your professors and faculty advisors, attend a chapter meeting, or contact us, The Institute of Internal Auditors.

To learn more about internal audit education, please visit **www.theiia.org/Academic** or email us at **Academic@theiia.org.**

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The Institute of
**Internal
Auditors**

INTERNAL AUDIT:
Profession of the Future

ACADEMIC RELATIONS

The Institute of
**Internal
Auditors**

Final Thoughts & Comments?

Agenda Memo

Board of Trustees
Audit and Compliance Committee | May 25, 2022

DISC- 2: Enterprise Risk Update - Cybersecurity

☐ **Information**   ☒ **Discussion**   ☐ **Action**

Meeting Date for Upcoming Action:
_____

Purpose and Issues to be Considered:
The Enterprise Risk Update will provide a brief overview of the Enterprise Risk Management program and will specifically address risks associated with cybersecurity. The discussion will include updates on the current risk assessment and cybersecurity risk mitigation efforts.

Background Information:
Risk is defined as uncertainty of outcomes, whether positive opportunity or negative threats, of actions and events. Enterprise risk management is a holistic approach to managing risks which can impact the successful execution of the university's mission and objectives.

The goal of the UCF Enterprise Risk Management (ERM) program is to provide a systematic approach to identifying and managing various types of risk, regardless of the origin. Risks can include those affecting the whole of higher education, risks specific to the UCF, or risks related to certain units and processes.

The risks associated with cyber threats continue to increase across all industries and higher education institutions are not exempted from this growing world-wide trend. Cybersecurity risk is the probability of a loss or exposure that occurs through a cyber-attack typically from outside an organization that is often referred to as a data breach. To mitigate the risks associated with cyber related threats, organizations must have a good understanding of where vulnerabilities may reside and take steps to mitigate those risks and sufficiently protect data assets.

Recommended Action:
N/A

Alternatives to Decision:
N/A

Fiscal Impact and Source of Funding:
N/A

Authority for Board of Trustees Action:
N/A

Contract Reviewed/Approved by General Counsel   ☐   **N/A** ☒

Committee Chair or Chair of the Board has approved adding this item to the agenda ☒

Submitted by:
Rhonda L. Bishop, Vice President University Compliance, Ethics, and Risk

Supporting Documentation:
Attachment A: Enterprise Risk Update: Cybersecurity

Facilitators/Presenters:
Rhonda L. Bishop, Vice President University Compliance, Ethics, and Risk
Matthew Hall, Vice President for Information Technology and Chief Information Officer

Enterprise Risk Update: Cybersecurity

Rhonda L. Bishop, VP Compliance, Ethics, and Risk
Matt Hall, VP for Information Technology and Chief Information Officer

Board of Trustees
Audit and Compliance Committee
May 25, 2022

34

UCF

Enterprise Risk Management (ERM)

Holistic, portfolio approach to managing the university's risks; risks which can impact the achievement of the university's strategic objectives

Value of ERM

- ✓ Better align UCF's strategy and objectives to its risk appetite

- ✓ Identify and manage risk enterprise-wide

- ✓ Improve resource deployment

- ✓ Enhance resilience

Principles of ERM

- ✓ Integral part of organization's processes

- ✓ Systematic, structured, timely

- ✓ Tailored to university

- ✓ Transparent and inclusive

- ✓ Facilitates continual improvement and enhancement of the university

- ✓ Creates value

Principles of ERM are an abbreviated list from ISO 31000, the only international standard on the practice of risk management.

Phased ERM Approach

Phase 1: Targeted risk assessment and education

Phase 2: Program foundation

Phase 3: Full program implementation

2022 Cyber Risk Assessment

UCF IT
Leadership

National
Trends

Risk Assessment

IT Personnel

University
Audit

Research

SIRT

Emergency
Management
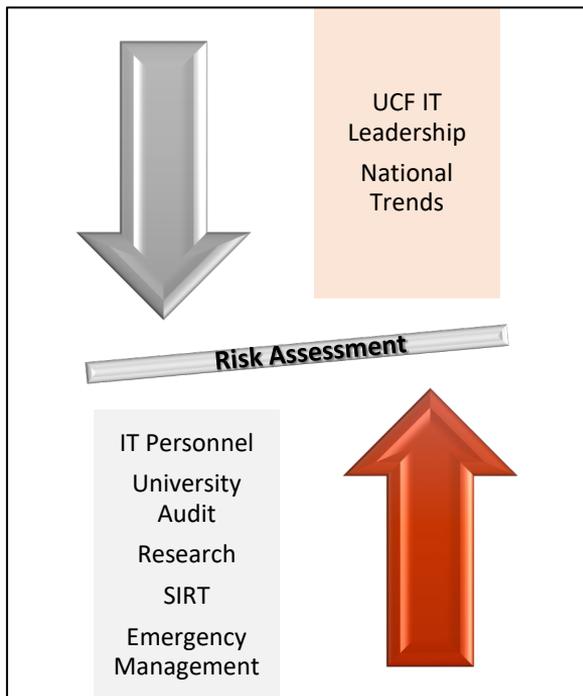
Initial Risk Themes

- ✓ Talent management

- ✓ Ransomware

- ✓ 3rd party breaches

- ✓ Threat actors

Risk Assessment Process

- ✓ Key business processes

- ✓ Compliance requirements

- ✓ Major initiatives

- ✓ Key vendor relationships

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Information Assurance and Knight Shield
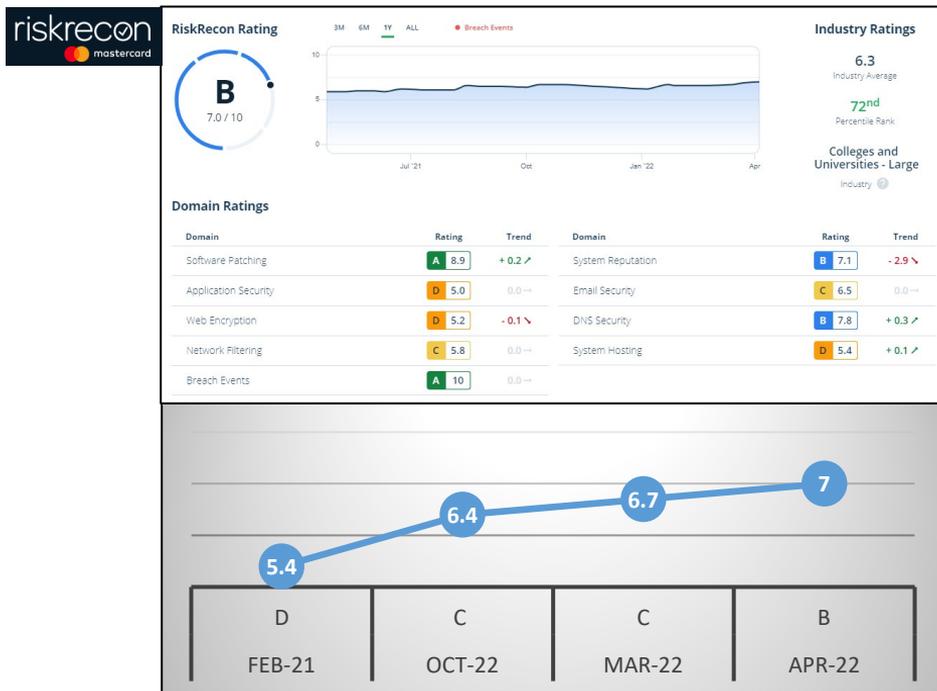
Board of Trustees

Agenda Memo

DISC- 3: University Compliance, Ethics, and Risk Update

☐ **Information**   ☒ **Discussion**   ☐ **Action**

Meeting Date for Upcoming Action: _____

Purpose and Issues to be Considered:
The Compliance, Ethics, and Risk update and any discussion will cover changes in federal or state requirements impacting the university, current or pending external compliance activities, and updates to the committee on key compliance, ethics, and risk initiatives at UCF.

Background Information:
Annually, University Compliance, Ethics, and Risk performs an analysis on all UCF IntegrityLine reports submitted and closed during the calendar year and prepares a report on the outcomes including any trends identified. A report covering the data and trends from the IntegrityLine during the period of January 1, 2021, to December 31, 2021, is provided and outcomes will be discussed.

The Compliance and Ethics 2021-22 Work Plan - Status of All Activities Report contains a summary of projects and activities completed from January 1, 2022, through March 31, 2022.

Recommended Action:
N/A

Alternatives to Decision:
N/A

Fiscal Impact and Source of Funding:
N/A

Authority for Board of Trustees Action:
N/A

Contract Reviewed/Approved by General Counsel ☐ **N/A** ☒

Committee Chair or Chair of the Board has approved adding this item to the agenda ☒

Submitted by:
Rhonda L. Bishop, Vice President University Compliance, Ethics, and Risk

Supporting Documentation:
Attachment A: University Compliance, Ethics, and Risk Update
Attachment B: UCF IntegrityLine Report 2021
Attachment C: Compliance and Ethics Work Plan Status January 1, 2022 - March 31, 2022

Facilitators/Presenters:
Rhonda L. Bishop, Vice President University Compliance, Ethics, and Risk

University Compliance, Ethics, and Risk Update

Board of Trustees
Audit and Compliance Committee
May 25, 2022

UCF IntegrityLine Report

2021 UCF IntegrityLine Report
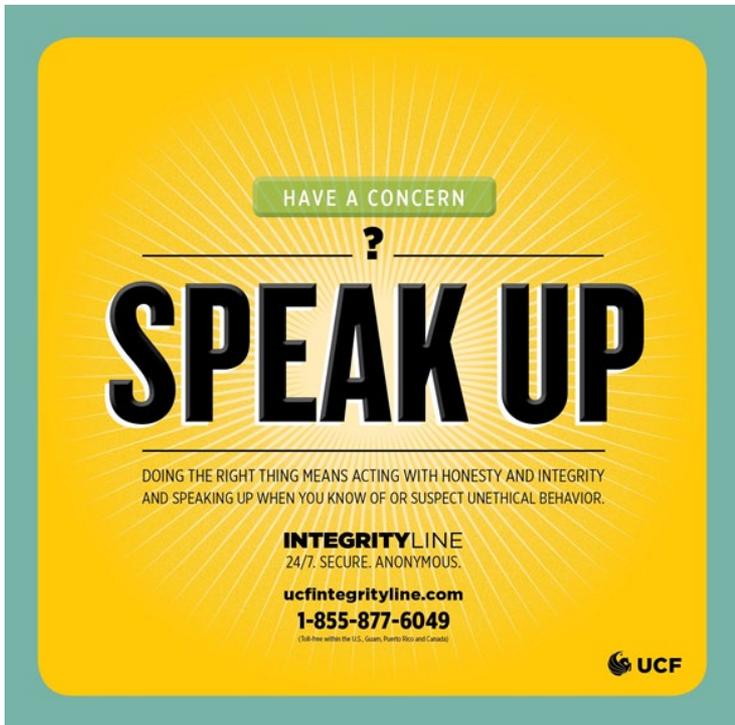
346 Total Reports Received

Highest Reported Issue Types:

27% Environmental and Safety Matters

25% Offensive or Inappropriate Communication

10% Other Human Resources Matters

IntegrityLine Reports Submitted By Year

Year	Reports
2015	65
2016	77
2017	117
2018	213
2019	188
2020	608
2021	346
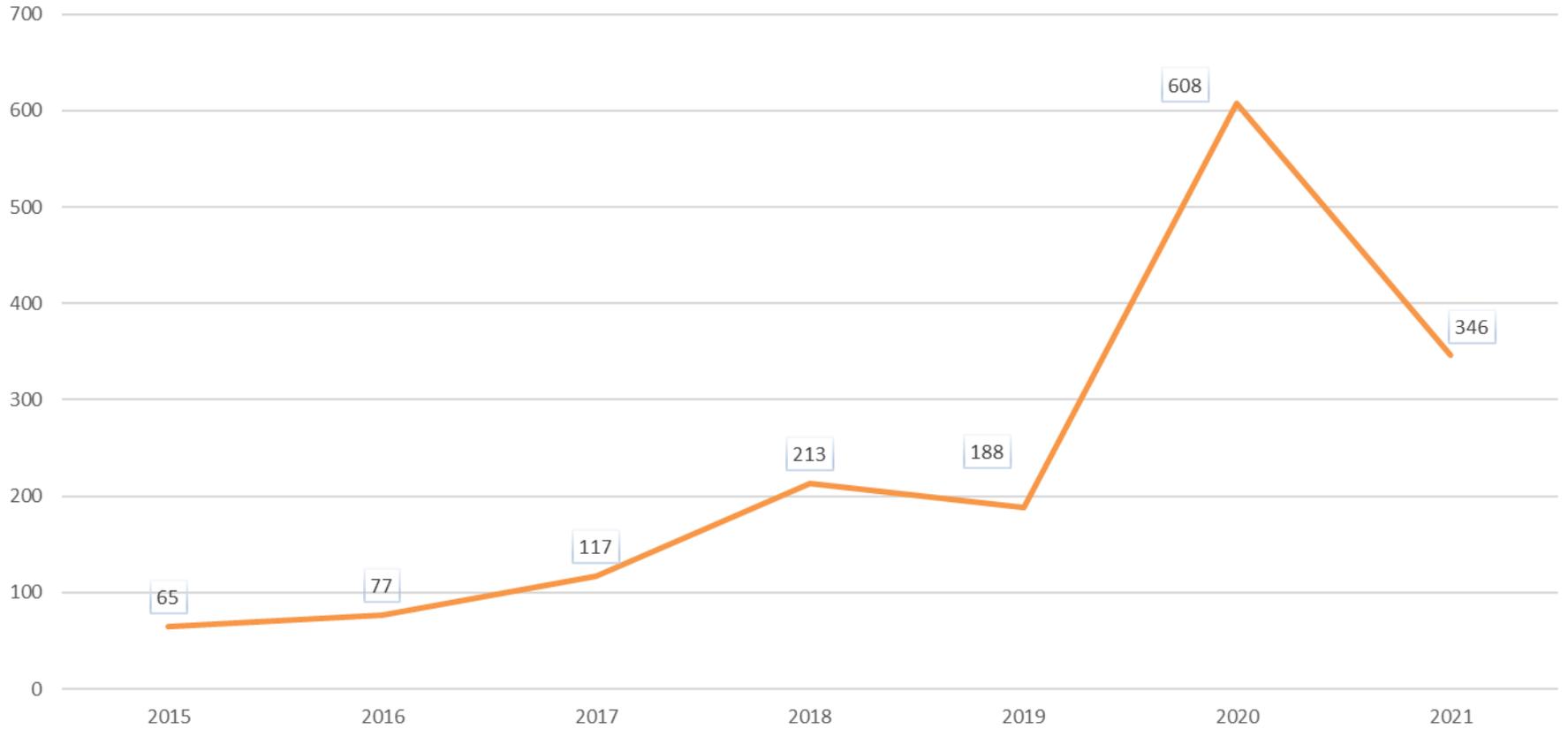
IntegrityLine
Case Outcomes

483 Cases Closed in 2021

215 Investigated

Investigative Results:

- 130 Substantiated
- 85 Unsubstantiated

Action Taken:

- Termination
- Discipline
- Policy / Process Review

Offensive or Inappropriate Communication 7%
Other Academic Affairs Matters 2%
Other Financial Matters 1%
Other Human Resource Matters 2%
Theft / Embezzlement 1%
Academic Misconduct 1%
Other 1%
Environmental and Safety Matters 2%
Data Privacy / Integrity 1%
Employee Misconduct 1%
Discrimination or Harassment 81%

Discipline 1%
No Action Necessary 1%
Policy / Process Review 8%
Termination 90%

44

IntegrityLine Referred Cases

Referred 94 IntegrityLine cases to a college or department for internal review and to report back their findings

Referred Case Results:

- 47 Substantiated
- 47 Unsubstantiated

Action Taken:

• Policy / Process Review
• Discipline
• Training
• Termination

Pie chart: Other Financial Matters 2%, Other Human Resource Matters 2%, Data Privacy / Integrity 2%, Other Academic Affairs Matters 2%, Environmental and Safety Matters 32%, Offensive or Inappropriate Communication 60%

Pie chart: Termination 6%, Training 11%, Discipline 30%, No Action Taken 2%, Policy / Process Review 51%

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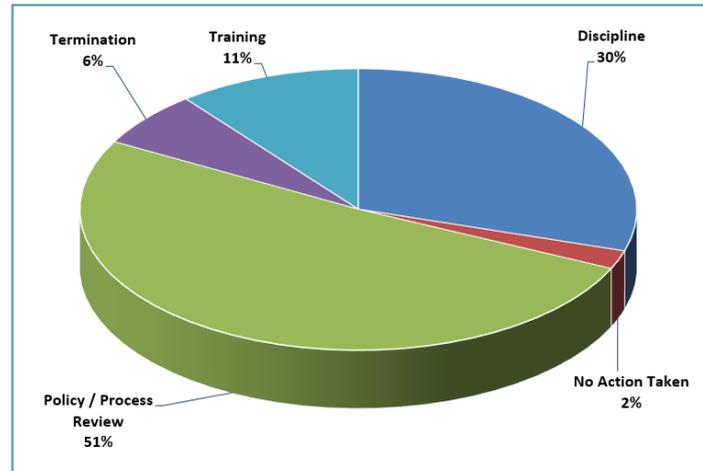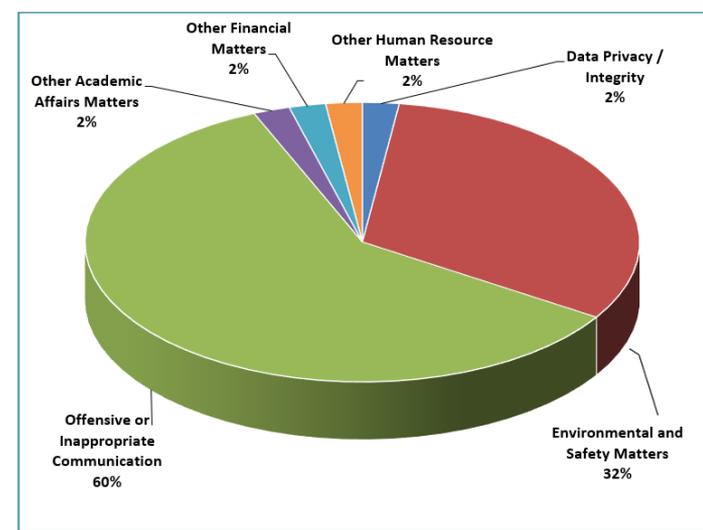
Compliance and Ethics Work Plan

Compliance and Ethics Annual Work Plan Status 2021-22

Activities completed January 1, 2022, to March 31, 2022

Oversaw full implementation of foreign influence statutes; prepared and submitted first foreign source report to the BOG by January deadline

Completed 2022 Compliance and Ethics Culture Survey with results report in progress

Increased outreach and training on ethics, gifts, conflicts of interest, foreign influence, privacy, youth protection, and resources for supervisors

Responded to requests for data and met with the OFCCP

Insurance Management Update

- Completed Broker Selection:

  Gallagher
  - World's Most Ethical Companies
  - Team in Orlando
  - Software
  - Security Scorecard Reports

- Cybersecurity Insurance Renewal

UCF IntegrityLine Report

January 1, 2021, to December 31, 2021

University Compliance, Ethics, and Risk
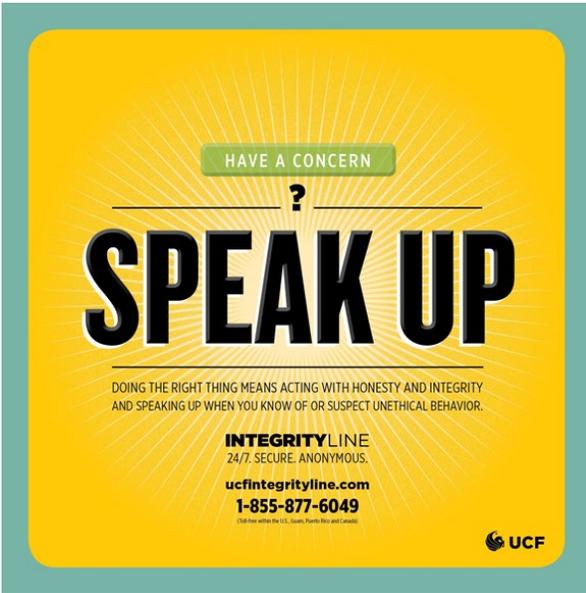
IntegrityLine Reports Submitted in 2021

During the 2021 calendar year, the UCF IntegrityLine received a total of 346 reports. Of these reports 344 contained allegations of suspected misconduct or ethical concerns and two reports were inquiries. Reports containing allegations of misconduct were triaged between University Compliance, Ethics, and Risk and University Audit. Based on the nature of the report, it was either investigated by University Compliance and Ethics, the Office of Institutional Equity, University Audit, or referred to the appropriate compliance partner for review. Reports involving students under the UCF Golden Rule were referred to the Office of Student Rights and Responsibilities. Reports criminal in nature were referred to the UCF Police Department.

Highest Number of Reports by Issue Type

|	
27% Environmental and Safety Matters	The highest number of reports made to the IntegrityLine in 2021 were categorized as Environmental and Safety Matters with 94 reports representing 27% of the total reports submitted. This issue type includes any concern regarding health and safety including all COVID-19 related concerns.
25% Offensive or Inappropriate Communication	The second highest number of reports made to the IntegrityLine in 2021 were categorized as Offensive or Inappropriate Communication with 88 reports representing 25% of the total reports submitted. This issue type includes concerns related to inflammatory, derogatory, unduly critical or insulting communication, and failure to treat one another with respect in accordance with the UCF Ethical Standards outlined in the UCF Employee Code of Conduct.
10% Other Human Resource Matters	The third highest number of reports made to the IntegrityLine in 2021 were categorized as Other Human Resource Matters with 33 reports representing 10% of the total reports submitted. This issue type includes interpersonal type matters that should be addressed by leaders and supervisors through UCF's expectation of an open-door policy and may include assistance from Human Resources. We may also refer the complainant to speak with the Ombuds Office as another resource.

All Issue Types

Reports submitted to the UCF IntegrityLine in 2021 spanned a total of 24 issue types.

Primary Issue	Total Reports	Percentage of Reports (Rounded)
Environmental and Safety Matters	94	27%
Offensive or Inappropriate Communication	88	25%
Other Human Resource Matters	33	10%
Discrimination or Harassment	32	9%
Other Academic Affairs Matters	31	9%
Conflict of Interest	9	3%
Employee Misconduct	9	3%
Other Financial Matters	8	2%
Academic Misconduct	8	2%
Data Privacy / Integrity	8	2%
Alcohol / Drug Abuse	5	1%
Sexual Harassment	5	1%
Equal Employment Opportunity Commission or Americans with Disabilities Act Matters	4	1%
Waste, Abuse or Misuse of Institution Resources	2	0.5%
Inquiry	2	0.5%
Credentials Misrepresentation	1	0.2%
Cheating / Plagiarism Inquiry	1	0.2%
Fraud	1	0.2%
Improper Giving or Gifts	1	0.2%
Other	1	0.2%
Other Risk and Safety Matters	1	0.2%
Retaliation	1	0.2%
Time Abuse	1	0.2%
Grand Total	**346**	

Closed Cases

University Compliance, Ethics, and Risk closed 483 IntegrityLine cases during the 2021 calendar year, an increase (6%) from the 453 cases closed in 2020. Closed cases include a combination of reports received in 2021 as well as those submitted in a previous year. Below are the outcomes for all cases closed in 2021.

Closed Case Outcomes	Total
Referred	209
Substantiated	130
Unsubstantiated	85
Insufficient Information	59
Grand Total	**483**
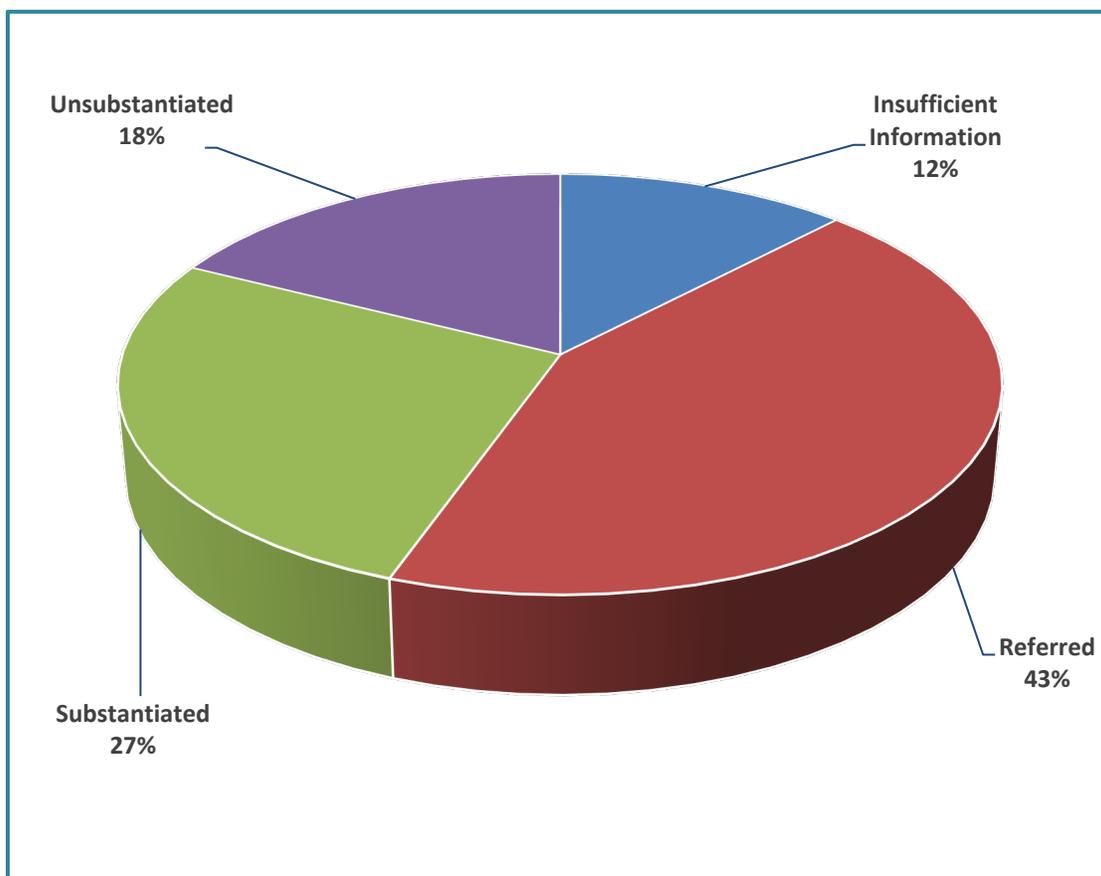
Closed Cases – Investigations with Substantiated and Unsubstantiated Findings

In 2021, a total of 215 of the 483 cases were closed after an investigation was conducted by University Compliance and Ethics, the Office of Institutional Equity, or University Audit with the following outcomes:

Substantiated Cases

One hundred and thirty (130) cases investigated resulted in a substantiated finding (representing 27% of all closed cases) where investigations yielded evidence to support the complaint and a finding that misconduct occurred. The substantiated cases spanned a range of topics, with the highest in the category of Discrimination or Harassment at 81% (of which involved multiple cases concerning the same employee).

Primary Issue	Total
Discrimination or Harassment	106
Offensive or Inappropriate Communication	9
Environmental and Safety Matters	3
Employee Misconduct	2
Other	2
Other Academic Affairs Matters	2
Other Human Resource Matters	2
Academic Misconduct	1
Data Privacy / Integrity	1
Other Financial Matters	1
Theft / Embezzlement	1
Grand Total	**130**
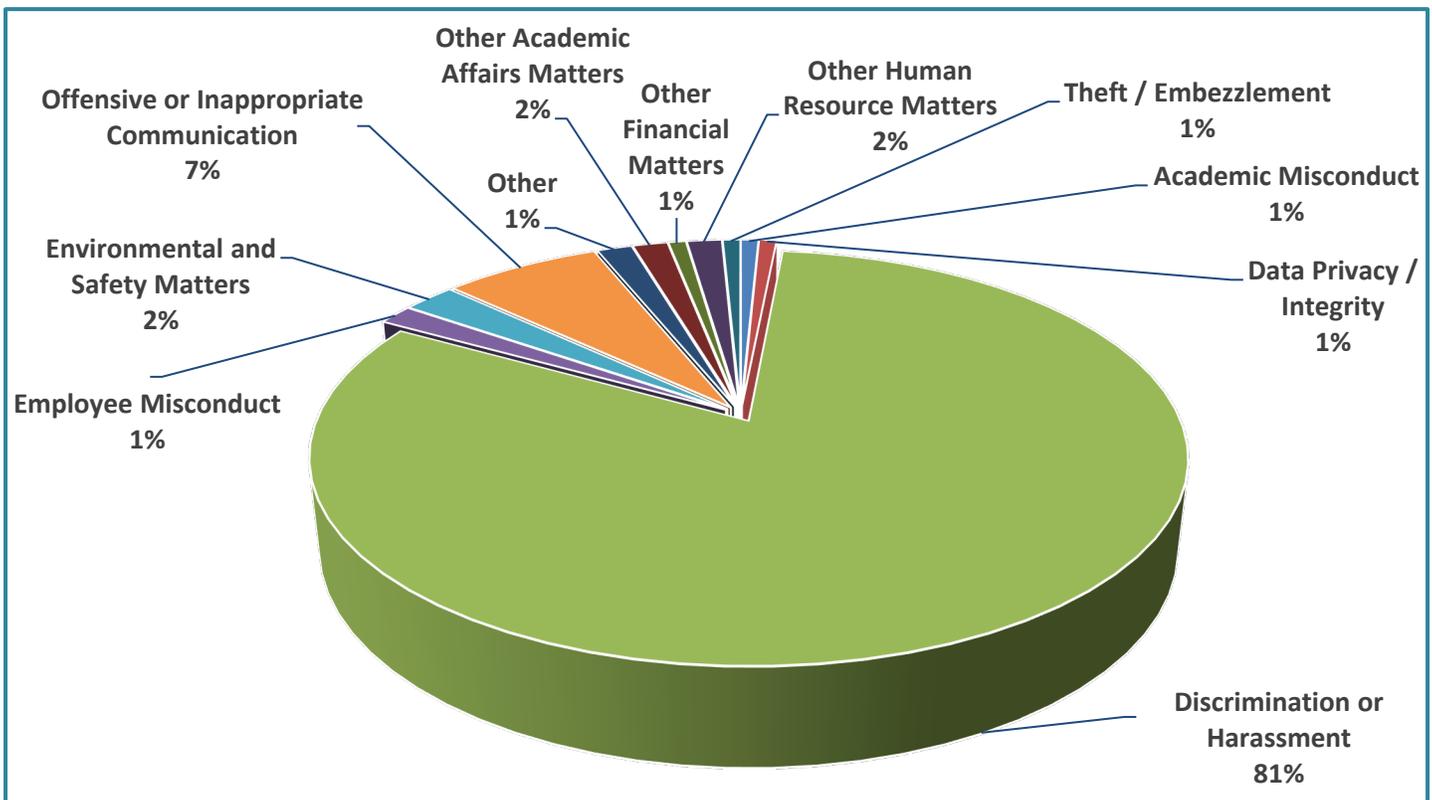
Substantiated Cases – Action Taken

For the 130 cases investigated that resulted in substantiated findings, the university took the appropriate action. Those actions included policy / process reviews, disciplinary action, and termination.

Action Taken	Total
Termination	117*
Policy / Process Review	11
No Action Necessary	1
Discipline	1
Grand Total	**130**

*The 117 cases involved multiple reports regarding the same two employees which resulted in termination.
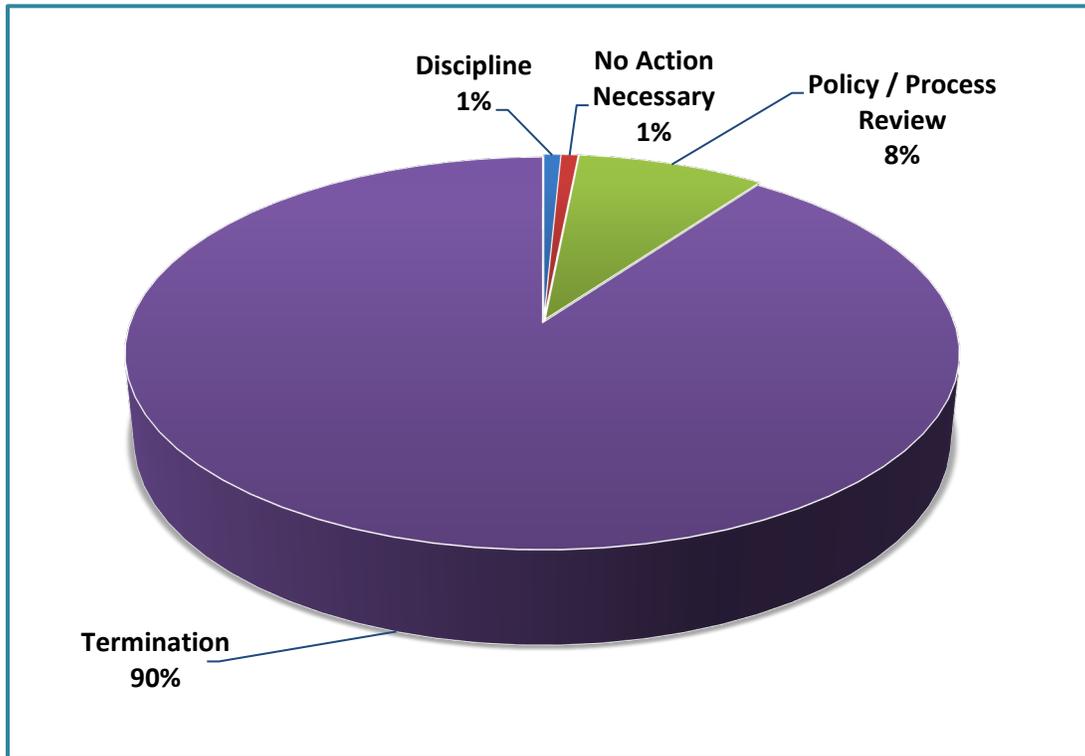
Unsubstantiated Cases

The remaining 85 cases (17% of closed cases) investigated by University Compliance, Ethics, and Risk, University Audit, or the Office of Institutional Equity yielded insufficient or no evidence to support that misconduct occurred and were closed with an unsubstantiated outcome. Despite the unsubstantiated finding, 21 of the cases resulted in recommendations for improvements such as a review in a policy, process, or training due to identified weaknesses.

Closed Cases – Referred or Insufficient Information

Two hundred and sixty-eight (268) cases were not investigated by University Compliance, Ethics, and Risk, University Audit, or the Office of Institutional Equity and were either referred out of the system or to another office or closed due to insufficient information.

Referred

A total of 209 cases (43% of all closed cases) were referred as follows:

- **One hundred and fifteen** (115) cases were referred to the UCF Police Department, Student Conduct, or another college or department to address through the appropriate university process and closed out in the IntegrityLine system. These cases span the range of issues involving student misconduct such as alleged alcohol or drug abuse, grade disputes, COVID-19 policy violations, and interpersonal conflicts. Once the report is referred to the appropriate office, it is closed in the IntegrityLine system with a message posted back to the complainant.

- **The remaining 94** cases were referred to a college or department to conduct an internal review and report back their findings.

    ### Referred - Substantiated
    Forty-seven (47) of the 94 cases reviewed internally by a college or department resulted in a **substantiated** finding with the following issue types.

Primary Issue	Total
Offensive or Inappropriate Communication	28
Environmental and Safety Matters	15
Data Privacy / Integrity	1
Other Academic Affairs Matters	1
Other Financial Matters	1
Other Human Resource Matters	1
Grand Total	**47**
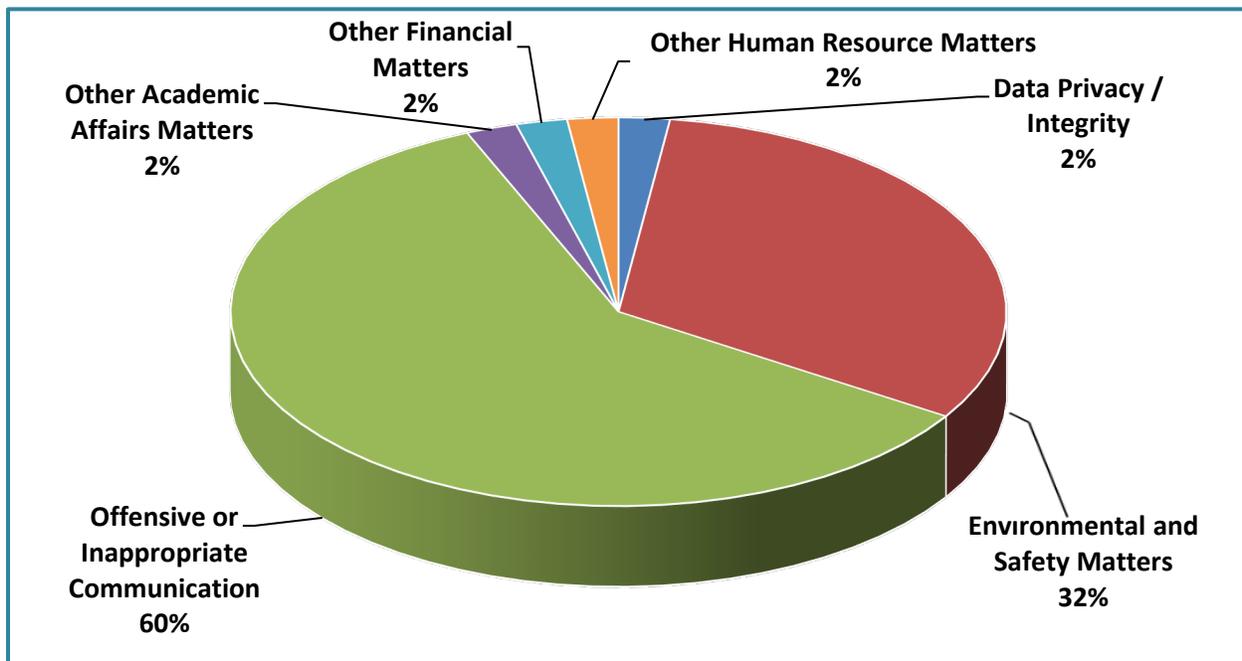
Referred – Substantiated - Action Taken

The actions taken for the 47 referred cases that were **substantiated** were as follows:

Action Taken	Total
Policy / Process Review	24
Discipline	14
Training	5
Termination	3
No Action Taken	1
Grand Total	47
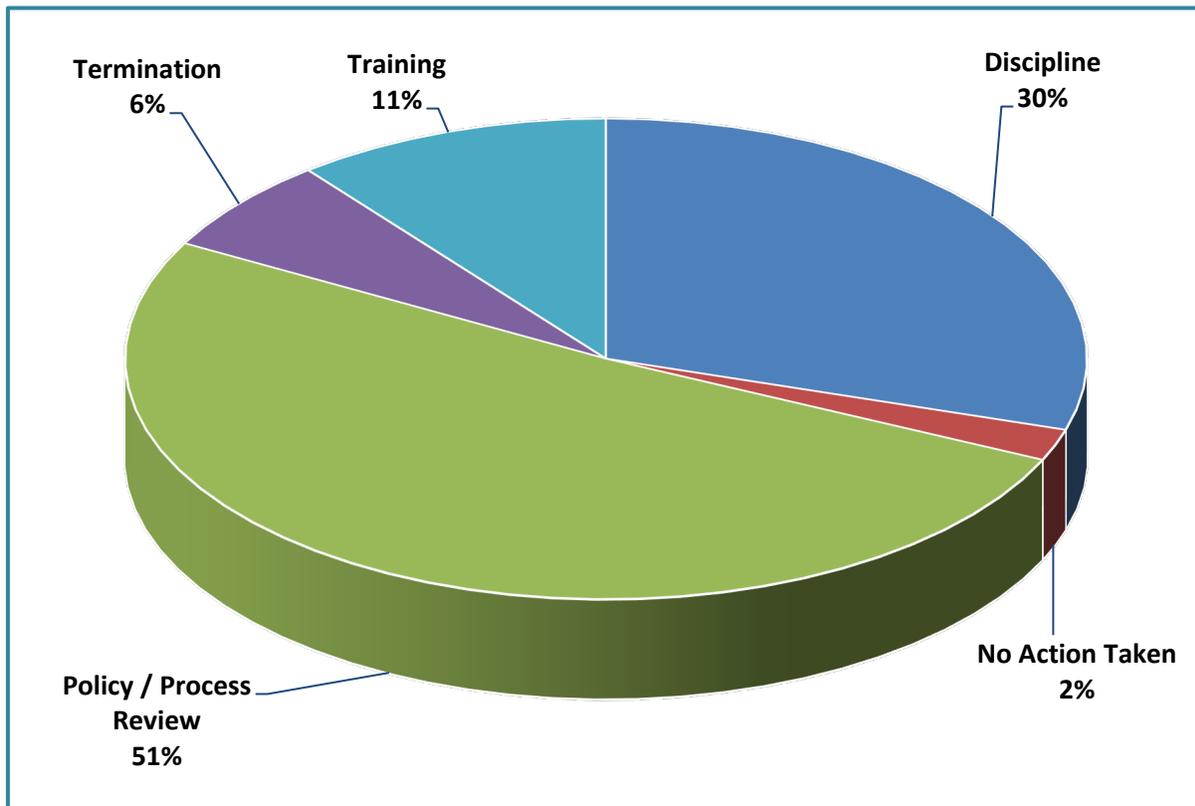
Referred - Unsubstantiated

The remaining 47 referred cases were **unsubstantiated**. However, 24 required improvements due to identified weaknesses which included policy or process reviews.

Insufficient Information

For 59 cases (12% of all closed cases), questions were posted to the complainant requesting additional information with no response. These cases were closed due to insufficient information.

2021 IntegrityLine Trends

Due to the ongoing pandemic, it was not surprising that the highest number of reports submitted to the IntegrityLine in 2021 were categorized as Environmental and Safety Matters with a total of 94 reports representing 27% of all reports submitted. Consistent communications from leadership, increased awareness surrounding the COVID-19 website and the UCF COVID Line attributed to reporting of allegations regarding non-compliance with COVID-19 emergency policies.

With 88 reports, representing 25% of all reports submitted, the second highest reported issue type was Offensive or Inappropriate Communication. This issue type includes concerns related to inflammatory, derogatory, unduly critical, or insulting communication and failure to treat one another with respect in accordance with the UCF Ethical Standards outlined in the UCF Employee Code of Conduct. This increased trend in reporting was identified in 2019 and again in 2020. In response, the office has worked with Human Resources to develop training and awareness on civility and respect for employees and supervisors as outlined in the 2020 UCF IntegrityLine report. Additional actions taken this year towards this effort include:

- ✓ Adding a module titled *Respecting Others* to the annual 2021 Code of Conduct refresher training required of all non-student employees
- ✓ Featuring in the October 2021 edition of the *IntegrityStar* articles that highlight the need for respectful interactions which included an article titled *Resolving Workplace Conflicts* and a "Case Corner" investigation article summarizing outcomes from a harassment and bullying case
- ✓ Launching a superhero theme training on civility titled, *Civility Superheroes*, during Compliance and Ethics Week held in November, 2021 and awarded prizes for completion

The Compliance and Ethics Culture Survey will be repeated in the spring of 2022 to gauge the current compliance and ethical culture at UCF. Results from this survey will help to inform our continued efforts towards improving civil and respectful workplace interactions.

University Compliance, Ethics and Risk Office

2021-22 Work Plan Status
January 1, 2022 – March 31, 2022

UCF's comprehensive compliance and ethics program is based on the elements of an effective compliance program as set forth in Chapter 8 of the Federal Sentencing Guidelines, and as required by Board of Governors Regulation 4.003 State University System Compliance and Ethics Programs. The Guidelines and Regulation establish the minimum standards for effective programs. Each year, University Compliance, Ethics, and Risk submits an Annual Workplan to the Audit and Compliance Committee of the Board of Trustees detailing the office's efforts that support an effective program. This report contains the activities committed to in the office's 2021-22 Compliance and Ethics Annual Work Plan and includes the status of the activities during the period January 1, 2022, through March 31, 2022.

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.

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 January.
➢   Provided updates on international travel procedures and the online travel registration and tracking system; the compliance and ethics culture survey; information submitted to the Office of Federal Contract Compliance Programs; changes to UCF Regulation 4-015 Fraud Prevention and Detection; and the development of the draft Health Insurance Portability and Accountability Act Policy Manual.

CONDUCT QUARTERLY MEETINGS WITH COMPLIANCE PARTNERS AND SENIOR LEADERSHIP
➢   Met with vice presidents, key administrators, the faculty athletics representative, and compliance partners to provide updates on compliance and ethics initiatives and discuss any concerns or issues.

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.

1

SERVE ON AND PROVIDE GUIDANCE TO THE SECURITY INCIDENT RESPONSE TEAM AND INFORMATION SECURITY AWARENESS ADVISORY BOARD

➢ Continue to serve as members of the Security Incident Response Committee and the Information Security Awareness Advisory Board to provide guidance on federal and state privacy and data breach requirements.

➢ Continue to lead (co-chair) the Information Security & Privacy Advisory Committee and serve as a member of the Data Governance Team.

SERVE AS MEMBERS OF AND PROVIDE GUIDANCE TO THE CLERY ACT COMPLIANCE COMMITTEE

➢ Provided guidance and support to the Clery Compliance Analyst and served on the Clery Act Compliance Committee.

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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.

PREPARE AND DISTRIBUTE *INTEGRITYSTAR*, THE COMPLIANCE AND ETHICS NEWSLETTER

➢ Developed and issued the March 2022 edition of the *IntegrityStar* featuring articles that highlight ethics, the compliance and ethics culture survey, and the appropriate use of the IntegrityLine. The edition also included a cartoon, a video, and FAQs on the topic. The "Case Corner" article covered two IntegrityLine reports submitted by students that resulted in a positive outcome.

ADMINISTER AND PROMOTE THE UCF INTEGRITYLINE, REINFORCE EXPECTATIONS FOR NON-RETALIATION, AND CONTINUE COMMUNICATIONS DURING AND AFTER INVESTIGATIONS

➢ Continued administration of the UCF IntegrityLine to include review and tracking of all reports, data compilation, trend review, and reporting.

➢ Promoted the UCF IntegrityLine in the March 2022 edition of the *IntegrityStar* newsletter; continued promoting efforts in compliance videos; on the University Compliance, Ethics, and Risk website; and on the websites of all compliance partners.

➢ Continued to serve on the Student Reporting workgroup to discuss reporting options for students, including the IntegrityLine, and to further enhance the student reporting options website.

COORDINATE TIMELY RESPONSES TO REGULATORY AND OTHER EXTERNAL AGENCIES

➢ On behalf of the president and Board of Trustees, prepared the annual research exemption report and submitted it in February 2022 to the governor and legislature as required by state statute.

➢ Received notification that UCF was selected for an Institutional Compliance Program review for compliance with the Department of Defense (DOD) Voluntary Education Programs Memorandum of Understanding (MOU) signed in 2019. DOD policy requires educational institutions that wish to participate in the Tuitional Assistance program to sign an MOU. As part of the MOU, UCF agrees to heightened oversight and compliance with

2

rules specific to service members and their families. Worked with DOD personnel, met with internal stakeholders to update points of contact, the MOU, and to begin preparing the self-assessment due in April.

➢ In response to Senator Rubio's letter regarding inappropriate foreign influence, drafted with the Office of International Collaboration and Export Control, an overview of the university's efforts in the last two years to strengthen the foreign influence program and compliance with the new statutes implemented in 2021.

➢ As required by Section 117 of the Higher Education Act, compiled a list of 31 foreign gifts and contracts, and reported those exceeding $250,000 to the Federal Department of Education due January 2022.

➢ Met with the Office of Federal Contract Compliance Programs and provided requested compensation and data clarifications and scheduled compensation decision maker interviews.

➢ Worked with the Office of the General Counsel and provided a response to the U.S. Department of Energy and National Science Foundation's Title IX Compliance Investigation findings.

MAINTAIN AND PROMOTE THE COMPLIANCE AND ETHICS WEBSITE

➢ Updated the website to include the March 2022 edition of the *IntegrityStar*, updated links to conflict-of-interest forms, updated faculty/staff and student travel insurance summaries, added "buttons" to important links to make them more visible, updated the UCF Employee Code of Conduct to ensure compliance with the Americans with Disabilities Act, posted all previously published newsletters since 2016, and uploaded additional resources to the Youth Protection Resources webpage

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.

DELIVER AND TRACK NEW EMPLOYEE COMPLETION OF MANDATORY CODE OF CONDUCT AND POTENTIAL CONFLICTS – FLORIDA CODE OF ETHICS FOR PUBLIC OFFICERS AND EMPLOYEES TRAINING
➢ Total number of new employees who took the online courses and passed the final quiz:
  o Employee Code of Conduct / Speak Up! = 501
  o Potential Conflicts – Florida Code of Ethics for Public Officers and Employees = 536

PROMOTE GIFTS AND HONORARIA AND POTENTIAL CONFLICTS ONLINE TRAINING MODULES FOR CURRENT EMPLOYEES AND TRACK EMPLOYEE COMPLETION
➢ Continue to promote the online training modules to employees.
➢ Total number of existing employees who took the online courses and passed the final quiz:
  o Gifts and Honoraria = 11
  o Potential Conflicts – Florida Code of Ethics for Public Officers and Employees = 197

3

ISSUE ANNUAL MEMO ON VULNERABLE PERSONS ACT
➢ Annual memo was distributed in March 2022.

DEVELOP AND LAUNCH MANDATORY ANNUAL CODE OF CONDUCT TRAINING WITH CERTIFICATIONS FOR NON-STUDENT EMPLOYEES AND MONITOR COMPLIANCE FOR COMPLETION
➢ The 2021 Annual Code of Conduct refresher training reached 100% employee completion.
➢ Office preparing materials for the 2022 Code of Conduct refresher training that will be launched in September 2022.

MONITOR COMPLIANCE WITH COMPLETION OF THE YOUTH PROTECTION ONLINE TRAINING MODULE AS REQUIRED BY POLICY
➢ As required, Youth Protection training was completed by 212 program staff working with minors.

IN PARTNERSHIP WITH THE INFORMATION SECURITY OFFICE, DELIVER MANDATORY SECURITY AND PRIVACY AWARENESS TRAINING, TRACK EMPLOYEE COMPLETION, AND LOOK FOR OTHER AVENUES TO RAISE SECURITY AND PRIVACY POSTURE
➢ Continued working with the Information Security Office to finalize the mandatory security and privacy awareness training and discussed implementation.
➢ With the Information Security Office, presented privacy guidance and related awareness information to students, staff, and faculty for Data Privacy Day 2022.
➢ Participated in a panel discussion live on LinkedIn covering How to Grow Your Privacy Career on Data Privacy Day.

IDENTIFY ADDITIONAL OPPORTUNITIES TO DEVELOP AND DELIVER COMPLIANCE AND ETHICS TRAINING
➢ Delivered the first session of the UCF Resources for Supervisor series in January 2022.
➢ Upon invitation, with the Office of International Collaboration and Export Control and Research Compliance Office, joined the Materials Science & Engineering/Advanced Materials Processing and Analysis Center faculty meeting to discuss outside activities and engagements with foreign entities.
➢ Upon invitation, joined the Provost's Council Meeting to discuss implications of a revised policy that would increase signing authority which would activate specific provisions in the state ethics laws.
➢ Upon invitation, delivered in-person Gifts training to the president and his cabinet.
➢ With the Office of Institutional Equity, Office of Diversity and Inclusion, Student Care Services, Counseling and Psychological Services, and Student Health Services participated in a Mardi Gras golf cart "parade" as an outreach to the campus community.
➢ Provided Youth Protection Program overview training to new UCF Conference Housing staff.
➢ Upon invitation, joined the Counseling and Psychological Services leadership team to discuss and answer questions regarding conflicts of interest and commitment.
➢ Upon invitation provided Ethics and Decision-Making training to the Lead Scholars Academy.

4

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.

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 revised ten policies.

CONTINUE TO ENFORCE UCF POLICY 2-001 UNIVERSITY POLICY DEVELOPMENT, WHICH REQUIRES ANNUAL POLICY REVIEWS BY DEPARTMENT AND MANDATORY FIVE-YEAR REVIEWS BY THE UNIVERSITY POLICIES AND PROCEDURES COMMITTEE

➢ Continued progress on the five-year review project in compliance with UCF 2-001.5 University Policy Development to ensure that policies continue to communicate expectations effectively and are current.

SERVE AS MEMBERS OF THE HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) COLLABORATIVE TO DEVELOP UNIVERSITY POLICIES AND PROCEDURES ON HIPAA COMPLIANCE

➢ Continued to serve on the UCF Health Sciences HIPAA Collaborative.

5. Conduct Internal Monitoring and Compliance Reviews

Identify and remediate noncompliance through proactive review and monitoring of risk areas.

MANAGE UNIVERSITY-WIDE CONFLICT OF INTEREST AND COMMITMENT PROCESS

➢ Continued to monitor outside activity submissions for the 2021-22 conflict of interest and disclosure reporting year and when necessary, conducted the appropriate red flag reviews for those that were not submitted within 90 days. No foreign influence red flags were identified, and no further action was required from a foreign influence perspective for three research employees who failed to submit AA-21 forms within 90 days. The three employees submitted their disclosures after 90 days with no conflicts identified.
➢ Foreign influence red flag reviews were completed for each positive response to questions regarding financial interests and outside activities with foreign entities. During this review period, a total of 13 red flag reviews were conducted. One is pending review. Three contained at least one red flag or potential risk which resulted in additional awareness provided to the employee. One employee ceased the activity based on the risks identified.
➢ Received and completed 27 reviews of potential conflicts of interest associated with the attendance at conferences or events sponsored by vendors or receiving discounts or gifts.
➢ Reviewed and provided feedback on six research exemption requests prior to

5

coordinating with the provost, president, and Chair of the Board of Trustees for approval as required by state statute.

➢ Received and completed 65 conflict of interest requests for employee and department assistance.

MANAGE UNIVERSITY-WIDE YOUTH PROTECTION PROGRAM

➢ Processed seven registration submissions (seven in-person) approving six registrations and returning one registration back to the department to provide additional information.

➢ Distributed notification of updated UCF Policy 2-005 requirements, effective January 2022, to all previous program sponsors and provided assistance and guidance on the updated requirements to departments upon request.

➢ Discussed overnight camp protocols with UCF Conference Housing to prepare for the upcoming summer camp season.

➢ Drafted university-wide messaging on the Youth Protection Program to be distributed during Child Abuse Prevention Month in April.

➢ Updated the Squire registration pre-screening questions to include additional clarifying information on each of the questions to assist youth programs with completion.

DEVELOP AND MANAGE UNIVERSITY-WIDE PRIVACY PROGRAM

➢ Processed 28 Data Subject Access Requests.

➢ Met with Communications and Marketing leads, the College of Medicine's IT lead, and UCF IT's salesforce lead to view and analyze demonstrations of industry-leading solutions that handle Customer Consent & Preference Management.

➢ Reviewed, provided guidance, and approved 45 contracts, including several Reciprocal Student Exchanges.

➢ Met frequently with the chief information officer's executive team to provide privacy updates and guidance and continue with IT-related projects involving data.

➢ Reviewed and processed 19 Vendor Risk Management requests.

➢ Performed 12 Institutional Review Board ancillary reviews.

➢ Issued and reviewed two Data Protection Impact Assessments.

➢ Updated UCF's HIPAA Collaborative Roster.

➢ Worked with the university registrar on three Family Educational Rights and Privacy Act-related reports/issues.

➢ Participated in Data Governance Implementation meetings as the privacy compliance subject matter expert.

CONTINUE COMPLIANCE PARTNER REPORTING

➢ Compliance partners continued to provide updates on their program activities during committee meetings and through separate meetings and discussions when significant issues and challenges arose.

REVIEW UCF INTEGRITYLINE AND DEPARTMENT DATABASE FOR TRENDS AND RISK AREAS AND ADDRESS APPROPRIATELY

➢ Prepared the annual UCF IntegrityLine report for calendar year 2021 which identified trends and action items to address those trends.

6

REVIEW AND PROVIDE GUIDANCE ON THE ANNUAL SECURITY REPORT IN COMPLIANCE WITH THE CLERY ACT
➢ Participated in a comprehensive review of the Annual Security Report conducted by the Clery Center in collaboration with the Clery Coordinator, OIE, and General Counsel Staff.

6. Respond Promptly to Detected Problems and Undertake Corrective Action

Conduct timely investigations of allegations of noncompliance and provide guidance on corrective actions.

RECEIVE AND EVALUATE UCF INTEGRITYLINE REPORTS AND ALLEGATIONS OF MISCONDUCT MADE DIRECTLY TO THE OFFICE; 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 77 new reports through the UCF IntegrityLine alleging misconduct in this reporting period.
➢ Coordinated triage of reports with University Audit and the Office of Institutional Equity. When appropriate, reports were referred to a compliance partner or University Audit for review or investigation. During this time, 91 IntegrityLine cases were investigated and closed.
➢ University Compliance, Ethics, and Risk received one new report of potential misconduct made directly to the office and three cases that were under review were completed and closed.

PROVIDE RECOMMENDATIONS FOR CORRECTIVE ACTIONS AND IMPROVEMENT OF ETHICAL CONDUCT
➢ Continued providing recommendations for corrective actions and improvements of ethical conduct following investigations or requests for guidance.

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.

DEVELOP AND PROMOTE COMPLIANCE AND ETHICS INCENTIVE OPPORTUNITIES
➢ Highlighted in the March 2022 edition of the *IntegrityStar* an employee from Facilities and Safety for her support of the compliance and ethics program by translating important university policies, training, and more recently, the 2022 compliance ethics culture survey.
➢ Developed and implemented the *IntegrityStar* Award, a signed certificate of acknowledgement that is presented to those individuals recognized in each *IntegrityStar*.

7

PROMOTE AWARENESS OF UCF REGULATIONS, POLICIES AND PROCEDURES, AND REGULATORY REQUIREMENTS

➢ Highlighted in the March 2022 edition of the *IntegrityStar* a total of six new and revised UCF policies and two new and revised regulations that had been implemented.

➢ Distributed three campus emails to all employees alerting them of the approval of new or revised and emergency policies.

PROMOTE ACCOUNTABILITY AND CONSISTENT DISCIPLINE

➢ Continue to provide recommendations for appropriate discipline for substantiated cases to ensure accountability and consistency in corrective actions.

➢ Continued serving as the point of contact and source for guidance to research compliance related to scientific misconduct, export controls, conflict of interest, and development of policies and procedures.

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.

IMPLEMENT IMPROVEMENT MEASURES IDENTIFIED IN THE FIVE-YEAR COMPLIANCE AND ETHICS PROGRAM REVIEW

➢ Continued progress on the implementation of action plan to address recommendations.

LAUNCH FOURTH COMPLIANCE AND ETHICS CULTURE SURVEY TO BENCHMARK RESULTS AGAINST PRIOR YEAR'S RESULTS IN 2016, 2018, AND 2020

➢ Survey was launched on March 1 and remained open until March 31. Results are being analyzed by the Office of Excellence and Assessment Support.

DEVELOP, MEASURE, AND TRACK DEPARTMENT PROCESS IMPROVEMENT EFFORTS USING THE UNIVERSITY ASSESSMENT PROCESS

➢ The 2020-21 results report, and 2021-22 assessment plan were approved by the Divisional Review Committee.

9.   *New Regulations and Special Projects*

OVERSEE COMPLIANCE EFFORTS WITH NATIONAL INSTITUTE OF STANDARDS AND TECHNOLOGY 800-171 (NIST) FEDERAL REQUIREMENTS

➢ Continue as an active participant within UCF's NIST working group.

➢ Continue as an active participant in the NIST Privacy Workforce Public Working Group (PWWG).

8

OVERSEE COMPLIANCE EFFORTS WITH THE ACCEPTANCE OF CARES ACT FUNDING
- ➢ Continued periodic follow-ups to obtain updates to the matrix containing the requirements associated with the acceptance of CARES Act funding and the plan for addressing each.

OVERSEE COMPLIANCE EFFORTS WITH EUROPEAN UNION GENERAL DATA PROTECTION REGULATION (GDPR)
- ➢ Worked with several departments and individuals, including the Office of Research and our Institutional Review Board, to provide guidance on appropriate consent and data transfer language and personal data handling best practices for research projects and agreements involving GDPR as well as similar international regulations and domestic laws.

WORKING WITH THE OFFICE OF RESEARCH COMPLIANCE, CUSTOMIZE HURON SOFTWARE TO ACCOMMODATE ONLINE OUTSIDE ACTIVITY AND CONFLICT OF INTEREST AND COMMITMENT REPORTING
- ➢ Continued efforts to finalize the reporting template while also working with faculty to obtain feedback.
- ➢ Working with the College of Medicine (COM) and Huron, evaluating options for the Huron module to accommodate the COM specific Industry Relations Policy disclosure and review process.

OVERSEE COMPLIANCE EFFORTS WITH THE IMPLEMENTATION OF HB 7017 FOREIGN INFLUENCE
- ➢ Fully implemented the required sections of each statute within the deadlines set.
- ➢ Prepared and submitted the first foreign source report and required supporting materials for 53 foreign source contracts exceeding $50,000 to the Board of Governors in January 2022.

WORKING WITH HUMAN RESOURCES, CONTINUE TO EVALUATE AND DEVELOP A COMMUNICATION, EDUCATION, AND AWARENESS CAMPAIGN TO ADDRESS INCREASED REPORTS OF OFFENSIVE OR INAPPROPRIATE COMMUNICATION
- ➢ Activities completed during this reporting period to support this initiative:
  - o Evaluated trends for the 2021 Annual IntegrityLine Report
  - o Launched the 2022 Compliance and Ethics Culture Survey to gauge the effectiveness of the efforts conducted thus far.

9