Appendix - November 18-19, 2021 Regular Board of Regents Meeting

UNTS Acronym List

UNTS Acronym List rv 3.3.21.docx

AUDIT AND FINANCE COMMITTEE

FY21 Consolidated Annual Financial Report and FY22 Early
Insights Report

FY21 Consolidated Annual Financial Report and FY22 Early
Insights Backup

Consolidated Compliance Background Report June 2021-August
2021

Consolidated Compliance Background Report

UNT System Acronym List

ACT   American College Testing: a standardized test used for college admissions

ASF   Assignable Square Feet

AUX   Auxiliary Reserves

BOR   Board of Regents

BSC   Business Service Center

BSS   Business Support Services

CAE   Chief Audit Executive

CAFR   Comprehensive Annual Financial Report

CIA   Chief Internal Auditor

CIP   Capital Improvement Plan

CIP   Construction in Progress

CM   Construction Manager

CMAR   Construction Manager at Risk

CO   Change Order

COL   College of Law

CP   Commercial Paper

DEI   Diversity, Equity and Inclusion

FTE   Full Time Equivalent: generally used in reference to Full Time Student Equivalent (FTSE) but can also be used in reference to Full Time Faculty Equivalent (FTFE). See FTSE or FTFE below for definitions.

FTIC   First Time in College: a student who has never enrolled in a college or university. Students who have earned college credits only through dual credit courses are still considered FTIC.

FTSE   Full Time Student Equivalent: is computed by dividing headcount enrollment by a set number of semester credit hours based on the rank of the student (Undergraduate FTSE = 15 SCH; Masters and Special Professional FTSE = 12 SCH; Doctoral FTSE = 9 SCH). FTSE is generally lower than headcount enrollment because of part time students.

FTFE   Full Time Faculty Equivalent: a measure of instructional faculty calculated from the percent of time directly related to teaching.

FY   Fiscal Year

GAI   General Academic Institution

GMAT   Graduate Management Admission Test: a standardized test for admission into graduate programs of business schools.

GME   Graduate Medical Education: clinical training following graduation from medical school leading to specialty certification. Texas, like most states, requires one year of graduate medical education to be eligible for state licensure. Also called residency training.

GSF   Gross Square Feet

HEAF   Higher Education Assistance Fund (also known as HEF)

HERRF   Higher Education Emergency Relief Fund

HR   Housing Reserve

HR   Human Resources

HRI   Health-Related Institution

HSC   Health Science Center

HUB   Historically Underutilized Business

IA   Internal Audit

LAR   Legislative Appropriations Request

MCAT   Medical College Admission Test: a standardized test for admission into medical school

MP   Master Plan

NACUBO	National Association of College and University Business Officers
OBS	Office of the Board Secretary
OGC	Office of General Counsel
OGCA	Office of Grants & Contract Administration
OFPC	Office of Facilities Planning and Construction
P3	Public-Private Partnership (also known as PPP)
PM	Project Manager
PP	Private Placement
PUF	Permanent University Fund: a sovereign wealth fund created by the State of Texas to support higher education at the University of Texas System and Texas A&M System, but not other public higher education systems or institutions in Texas
PSAT	Preliminary Scholastic Aptitude Test: used to prepare high school students who plan to take the SAT for admission to college. (See SAT below)
QEP	Quality Enhancement Plan: required for reaffirmation of accreditation by SACSCOC. The QEP describes a carefully designed and focused course of action that addresses a well-defined topic or issue(s) related to enhancing student learning.
RB	Revenue Bonds
RFP	Request for Proposal
RFQ	Request for Qualifications
RFS	Revenue Financing System Bonds
RPTC	Reappointment, Promotion, and Tenure Committee
RR	Regents Rules
SACS	Southern Association of Colleges and Schools: a shortened abbreviation for "SACSCOC." (See below).
SACSCOC	Southern Association of Colleges and Schools Commission on Colleges: the recognized regional accrediting body for institutions of higher education that

award associate, baccalaureate, masters or doctoral degrees in eleven U.S. Southern states.

SAT   Scholastic Aptitude Test: A standardized test for college admissions.

SCH   Semester Credit Hour: the unit of measuring educational credit, usually based on the number of classroom/instructional hours per week throughout a term.

SF   Student Fees

SF   Square Feet

SFP   Statement of Financial Position

SRECNP   Statement of Revenues, Expenses and Changes in Net Position

STEM   Science, Technology, Engineering and Math

TAMS   Texas Academy of Mathematics and Science: the nation's first early college entrance residential program for gifted high school aged students

THC   Texas Historical Commission

THECB   Texas Higher Education Coordinating Board: a nine member board appointed by the Governor that provides coordination of higher education in Texas and was created by the Texas Legislature in 1965.

TRB   Tuition Revenue Bond

T/TT   Tenured/Tenure Track Faculty: faculty who hold the ranks of assistant professor, associate professor, and professor prior to or after the awarding of tenure.

VC   Vice Chancellor

Backup Materials

Note: Dollars in thousands

	FY21 Budget	FY21 Actuals	FY22 Budget	FY23 Plan	FY24 Plan	FY25 Plan	FY26 Plan
Revenues	1,082,091	1,175,975	**1,149,199**	1,208,346	1,244,646	1,265,657	1,313,992
COVID-19 Relief Funding	11,500	49,600	**61,391**	-	-	-	-
Total Revenues	1,093,591	1,225,575	**1,210,590**	1,208,346	1,244,646	1,265,657	1,313,992
Expenses	962,168	983,108	**1,035,154**	1,047,540	1,074,331	1,100,114	1,124,080
COVID-19 Relief Funding	11,500	49,600	**61,391**	-	-	-	-
Total Expenses	973,668	1,032,708	**1,096,545**	1,047,540	1,074,331	1,100,114	1,124,080
Total Net Transfers	(99,827)	(128,689)	**(108,040)**	(107,173)	(109,859)	(111,780)	(113,879)
Est. Impact on Fund Balances	**20,096**	**64,178**	**6,006**	**53,633**	**60,456**	**53,763**	**76,034**

In future annual budget presentations we will provide detail for net transfers — Highlighting transfers for capital projects and debt service

Debt Service	$	(80,332)
Capital Projects	$	(31,196)
Legislative	$	1,321
Other	$	2,167
Total Net Transfers	**$**	**(108,040)**
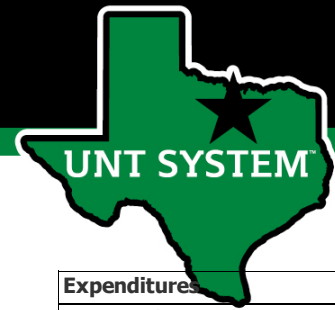
Expenditures						
Capital Expenditures	600,000	-	105,096,068	105,696,068		141,111,179
Scholarships, Exemptions & Financial Aid	-	37,000	-	37,000		142,013,094
Cost of Goods Sold	-	-	-	-		9,693,441
Debt Service - Principle	-	-	48,970,000	48,970,000		48,970,000
Debt Service - Interest	-	-	32,025,839	32,025,839		32,356,814
Federal and State Pass-Through Expense	-	-	-	-		8,482,633
Other Expenditures	-	336,000	-	336,000		43,835,858
Expenditures	**1,209,300**	**392,000**	**186,091,907**	**187,693,207**		**1,284,237,824**

FY22 Noncurrent Budget as presented at Aug. Board Meeting

Expenditures						
Capital Expenditures - Non-CIP	600,000	-	626,068	1,226,068		36,641,179
Capital Expenditures - CIP			104,470,000	104,470,000		104,470,000
Scholarships, Exemptions & Financial Aid	-	37,000	-	37,000		142,013,094
Cost of Goods Sold	-	-	-	-		9,693,441
Debt Service - Principle	-	-	48,970,000	48,970,000		48,970,000
Debt Service - Interest	-	-	32,025,839	32,025,839		32,356,814
Federal and State Pass-Through Expense	-	-	-	-		8,482,633
Other Expenditures	-	336,000	-	336,000		43,835,858
Expenditures	**1,209,300**	**392,000**	**186,091,907**	**187,693,207**		**1,284,237,824**

FY22 Noncurrent Budget in new format

UNT System FY2022 Capital Improvement Plan

	# of Projects	Total Project Budget Authorization (millions)	Prior Year Budget Authorization (millions)	Planned FY2022 Expenditures (millions)
Previously Approved	23	$ 273.16	$ 160.94	$ 93.82
FY2022	7	$ 27.15	$ -	$ 10.65
Total	**30**	**$ 300.31**	**$ 160. 94**	**$ 104.47**

FY22 CIP as presented at Aug. Board Meeting

In future annual budget presentations we will identify CIP in the noncurrent budget

All $ presented as thousands

Q4 Revenue

7.8% increase

- Total revenue increased by $64.5m/7.8%.
  - Tuition and Fees increased by $14.9m/4.1%; spring enrollment up 2.3% in SCH;
  - Sale of Goods and Services decreased by $8.2m/10.9%; housing & dining, parking, and on-campus retail lower due to reduced campus presence for COVID-19;
  - Grants and Contracts increased by $65.8m/33.0% due to Governor's Emergency Education Relief fund (GEER), CARES Act funding and increased grant activity.

Q4 Expenses

3.9% increase

- Total expenses increased by $26.1m/3.9%.
  - Personnel Costs slightly decreased;
  - Maintenance & Operation Costs decreased by $1.5m/1.4% due to COVID-19 related cost curtailment;
  - Scholarships and Financial Aid increased by $28.0m/20.8% due to awards via GEER and CARES funding.

	FY21 Budget	FY21 Actuals	FY20 Actuals	21 Actuals vs. 20 Actuals Variance ($000's)	21 Actuals vs. 20 Actuals Variance (%)
REVENUES					
Net Tuition and Fees	327,461	363,140	348,191	14,949	4.1%
Sales of Goods and Services	97,487	75,140	83,358	(8,218)	-10.9%
Grants and Contracts	118,439	199,490	133,737	65,753	33.0%
State Appropriations	141,495	134,981	142,611	(7,630)	-5.7%
All Other Revenue	55,140	58,415	58,791	(375)	-0.6%
Total Revenues	**740,022**	**831,167**	**766,687**	**64,480**	**7.8%**
EXPENSES					
Personnel Costs	402,737	405,736	406,807	(1,071)	-0.3%
Maintenance & Operation Costs	117,899	109,700	111,234	(1,535)	-1.4%
Scholarships, Exemptions and Financial Aid	92,715	134,476	106,462	28,013	20.8%
All Other Expenses	13,921	15,217	14,523	694	4.6%
Total Expenses	**627,272**	**665,128**	**639,026**	**26,102**	**3.9%**
TRANSFERS					
Total Net Transfers	**(108,277)**	**(121,378)**	**(115,340)**	**(6,037)**	**5.0%**
Estimated Budgeted Impact on Fund Balances	**4,474**	**44,661**	**12,321**	**32,340**	**72.4%**

All $ presented as thousands

Q4 Revenue

6.6% increase

- **Total revenue increased by $19.3m/6.6%.**
  - Tuition and Fees increased by $2.8m/8.5%;
  - Sales of Goods and Services decreased by $1.5m/2.9% but ended better then budget due to 1115 Waiver Program;
  - Grants and Contracts increased by $16.4m/26.6% due to Tarrant County contract.

Q4 Expenses

7.4% increase

- **Total expenses increased by $17.9m/7.4%.**
  - Personnel Costs increased slightly by $1.2m/0.9%;
  - Maintenance & Operations increased by $15.3m/17.1% due to higher grant and contract activity;
  - Scholarships increased $0.5m/107.1%.

	FY21 Budget	FY21 Actuals	FY20 Actuals	21 Actuals vs. 20 Actuals Variance ($000's)	21 Actuals vs. 20 Actuals Variance (%)
REVENUES					
Net Tuition and Fees	34,750	33,150	30,327	2,822	8.5%
Sales of Goods and Services	46,500	53,552	55,089	(1,538)	-2.9%
Grants and Contracts	47,500	61,421	45,061	16,360	26.6%
State Appropriations	108,158	108,522	108,866	(344)	-0.3%
All Other Revenue	29,251	37,072	35,081	1,992	5.4%
Total Revenues	**266,159**	**293,718**	**274,425**	**19,293**	**6.6%**
EXPENSES					
Personnel Costs	143,100	144,985	143,750	1,236	0.9%
Maintenance & Operation Costs	73,843	89,413	74,094	15,319	17.1%
Scholarships, Exemptions and Financial Aid	850	471	-34	504	107.1%
All Other Expenses	8,200	8,367	7,499	868	10.4%
Total Expenses	**225,993**	**243,236**	**225,309**	**17,927**	**7.4%**
TRANSFERS					
Total Net Transfers	**(24,544)**	**(39,685)**	**(7,988)**	**(31,698)**	**79.9%**
Estimated Budgeted Impact on Fund Balances	**15,621**	**10,796**	**41,128**	**(30,332)**	**-280.9%**

All $ presented as thousands

Q4 Revenue `17.0% increase`

- Total revenue increased by $15.2m/17.0%.
  - Tuition and Fees increased by $3.0m/9.9% despite negative impacts due to COVID-19;
  - Grants and Contracts increased $12.3m/46.6% due to CARES II funding;
  - All other revenue increased by $1.6m/32.2%.

Q4 Expenses `11.5% increase`

- Total expenses increased by $7.9m/11.5%.
  - Personnel Cots increased by $2.8m/7.4% in order to support enrollment growth;
  - Maintenance & Operations increased $1.9m/15.8% due to Winter storm repairs;
  - Scholarships and Financial Aid increased by $2.2m/13.3% due to increased CARES funding.

	FY21 Budget	FY21 Actuals	FY20 Actuals	21 Actuals vs. 20 Actuals Variance ($000's)	Variance (%)
REVENUES					
Net Tuition and Fees	28,016	30,362	27,342	3,019	9.9%
Sales of Goods and Services	870	1,137	1,295	(158)	-13.9%
Grants and Contracts	15,866	26,478	14,137	12,341	46.6%
State Appropriations	26,796	26,574	28,205	(1,631)	-6.1%
All Other Revenue	4,506	5,050	3,426	1,624	32.2%
Total Revenues	**76,054**	**89,600**	**74,405**	**15,195**	**17.0%**
EXPENSES					
Personnel Costs	35,536	38,117	35,290	2,827	7.4%
Maintenance & Operation Costs	11,394	12,245	10,308	1,938	15.8%
Scholarships, Exemptions and Financial Aid	13,713	16,444	14,260	2,184	13.3%
All Other Expenses	1,842	1,709	793	916	53.6%
Total Expenses	**62,485**	**68,514**	**60,650**	**7,864**	**11.5%**
TRANSFERS					
Total Net Transfers	**(13,569)**	**(13,712)**	**(13,482)**	**(230)**	**1.7%**
Estimated Budgeted Impact on Fund Balances	**0**	**7,374**	**273**	**7,101**	**96.3%**

Q4 Revenue

26.4% increase

- Total revenue increased by $2.9m/26.4%.
  - Sales of Goods and Services increased by $0.6m/20.5% due to Dallas ISD revenue;
  - State Appropriations increased by $2.4m/29.7% due to changes benefit appropriations.

Q4 Expenses

On Plan

- Total expenses are on plan.
  - Personnel Costs increased by $0.9m/1.9% due to higher benefit costs than expected;
  - Maintenance Costs decreased by $1.5m/16.0% due to COVID-19 cost containment actions;
  - Other Expenses increased by $0.5m/25.0% due to higher capital expenses.

All $ presented as thousands

	FY21 Budget	FY21 Actuals	FY20 Actuals	21 Actuals vs. 20 Actuals Variance ($000's)	Variance (%)
REVENUES					
Net Tuition and Fees	0	0	0	0	
Sales of Goods and Services	2,857	2,786	2,213	572	20.5%
Grants and Contracts	0	0	0	0	
State Appropriations	8,093	7,903	5,552	2,351	29.7%
All Other Revenue	406	402	402	0	0.0%
Total Revenues	**11,356**	**11,090**	**8,167**	**2,923**	**26.4%**
EXPENSES					
Personnel Costs	43,803	44,269	43,413	856	1.9%
Maintenance & Operation Costs	12,149	9,545	11,072	(1,526)	-16.0%
Scholarships, Exemptions and Financial Aid	0	0	0	0	
All Other Expenses	1,966	2,015	1,511	505	25.0%
Total Expenses	**57,918**	**55,829**	**55,995**	**(166)**	**-0.3%**
TRANSFERS					
Total Net Transfers	**46,563**	**46,085**	**45,701**	**385**	**0.8%**
Estimated Budgeted Impact on Fund Balances	**0**	**1,347**	**(2,127)**	**3,474**	**257.9%**

Committee: Audit & Finance

Date Filed: October 22, 2021

Title: UNT System Consolidated Quarterly Compliance Report June 2021-August 2021

Background:

This report presents the quarterly compliance program activities for the University of North Texas System, University of North Texas, University of North Texas Health Science Center and the University of North Texas at Dallas from June 1, 2021 through August 31, 2021. Regular reporting of compliance program content and operations to the UNT System Board of Regents is required by the United States Sentencing Commission's Federal Guidelines §8B2.1(b)(2)(A).

This quarterly report has been consolidated to reflect the compliance activities for all UNT System components. This report reflects the actions that management and each compliance function has taken to manage their highest compliance risks.

Financial Analysis/History:

This is a report item only.

Dan Tenney
Digitally signed by Dan Tenney
Date: 2021.11.09 14:54:51 -06'00'

Vice Chancellor for Finance

Legal Review:

This item has been reviewed by General Counsel.

Alan Stucky
Digitally signed by Alan Stucky
Date: 2021.11.10 08:58:59 -06'00'

Vice Chancellor/General Counsel

Schedule: N/A

No action required. Information only. Submitted by:

Tim Willette

Chief Compliance Officer

Ninette Caruso
Digitally signed by Ninette Caruso
Date: 2021.11.10 11:04:53 -06'00'

Chief Audit Executive

Lesa B. Roe
Digitally signed by Lesa B. Roe
Date: 2021.11.09 18:20:07 -06'00'

Chancellor

Attachments Filed Electronically:

- UNT System Consolidated Quarterly Compliance Report: June 2021-August 2021

UNIVERSITY OF NORTH TEXAS®

UNIVERSITY COMPLIANCE AND ETHICS

SUBMITTED BY

CLAY SIMMONS
CHIEF COMPLIANCE OFFICER

OVERVIEW

FY2021 Compliance Program Projects and Deliverables	Target
Develop metrics for each compliance risk priority	Q4
Develop metrics that effectively measure key aspects of the compliance and ethics program	Q2
Develop tool for reporting CEP metrics to ECC and board	Q3
Complete ethics and compliance training module	Q1
Work with HR to develop training module on frequent compliance-related management issues (e.g. FMLA, ADA, etc.)	Canceled
Engage UBSC in internal marketing campaign for trust line and compliance program, including revisions/additions to website	Q2
Revise all UCE policies	Q3
Conduct and complete annual risk assessment	Q4

Not started	On time	Delayed	Missed Target	Complete

EXECUTIVE SUMMARY

- UNT assisted in the development and roll-out of required FERPA training for all employees.

- UCE conducted the FY22 risk assessment. No new risk priorities were established.

- COVID-19 response activities are still ongoing as UNT reopened for the Fall semester.

INTRODUCTION

Our main efforts during the quarter included conducting the annual risk assessment, collaborating with offices across the institution to respond to Department of Education inquiries into accessibility,

and participating in COVID-19 response activities. UCE also continued its efforts to expand our office as our responsibilities have grown.

COMPLIANCE PROGRAM

Policies and Procedures

No new information to report this quarter.

Compliance Officer and Compliance Committee

COVID-19 related tasks continued to be a major effort for UCE in the 4th Quarter. Focus has shifted to managing testing and containment on campus given the return to in-person classes.

UCE began conducting risk assessment interviews with university leadership, subject matter experts, and managers with significant compliance responsibilities. The chief compliance officer held 66 risk assessment meetings, evaluating risks across the institution. While several new risks were surfaced through these activities, none rose to the level of displacing the risk priorities identified for FY21. In addition to this review, UCE will recommend that training be removed from the risk priorities list. Extensive progress has been made in improving training across the institution, including implementation of an effective Learning Management System, required training mandates promulgated across the employee base, and an inventory of training required of UNT personnel. This will be the only change proposed to the Executive Compliance Committee for FY 22.

UCE continued hiring efforts to fill two positions, compliance analyst and policy director. Both positions were successfully filled and the new hires began work on October 1, 2021.

Education and Training

UCE assisted the Dean of Students and the Registrar's Offices in rolling out a new FERPA training module which was assigned to employees in August 2021. The module was successfully launched and training is underway.

Effective Communication/Trust Line

UCE received 6 reports for the 4th Quarter (see Appendix for chart). All reports have been closed. UCE referred three allegations to the appropriate offices for investigation, none required further

3

action. Two cases were determined to have insufficient information. The remaining case was unsubstantiated.

Auditing and Monitoring

UCE's review of HIPAA covered components at UNT for compliance with UNT's Protected Health Information Privacy policy is still on hold. The UCE compliance manager in charge of the project left the university due to a reduction in force and necessitated the pause. Initial review indicates that UNT covered components are compliant with the policy at this time, and OGC has been informed of our findings of new covered components. We will complete this project as time is available.

UCE has completed its work regarding the coordination of investigation reports. Offices on the UNT campus with investigatory duties will report ongoing and closed investigations to UCE on a quarterly basis. UCE will then be able to use this information for trend analysis and issue spotting. UCE will also be better positioned to follow up on sanctioning across the institution.

Disciplinary Guidelines

No new information to report this quarter.

Response and Corrective Action

No new information to report this quarter.

FY20 RISK ASSESSMENT- Q4 PROGRESS

UCE has modified its work plan for the additional burden involved with the COVID-19 pandemic response. However, The University's response to the COVID-19 pandemic may require changes in risk priorities. The office will continue to prioritize significant compliance issues. Currently, all activities are on target.

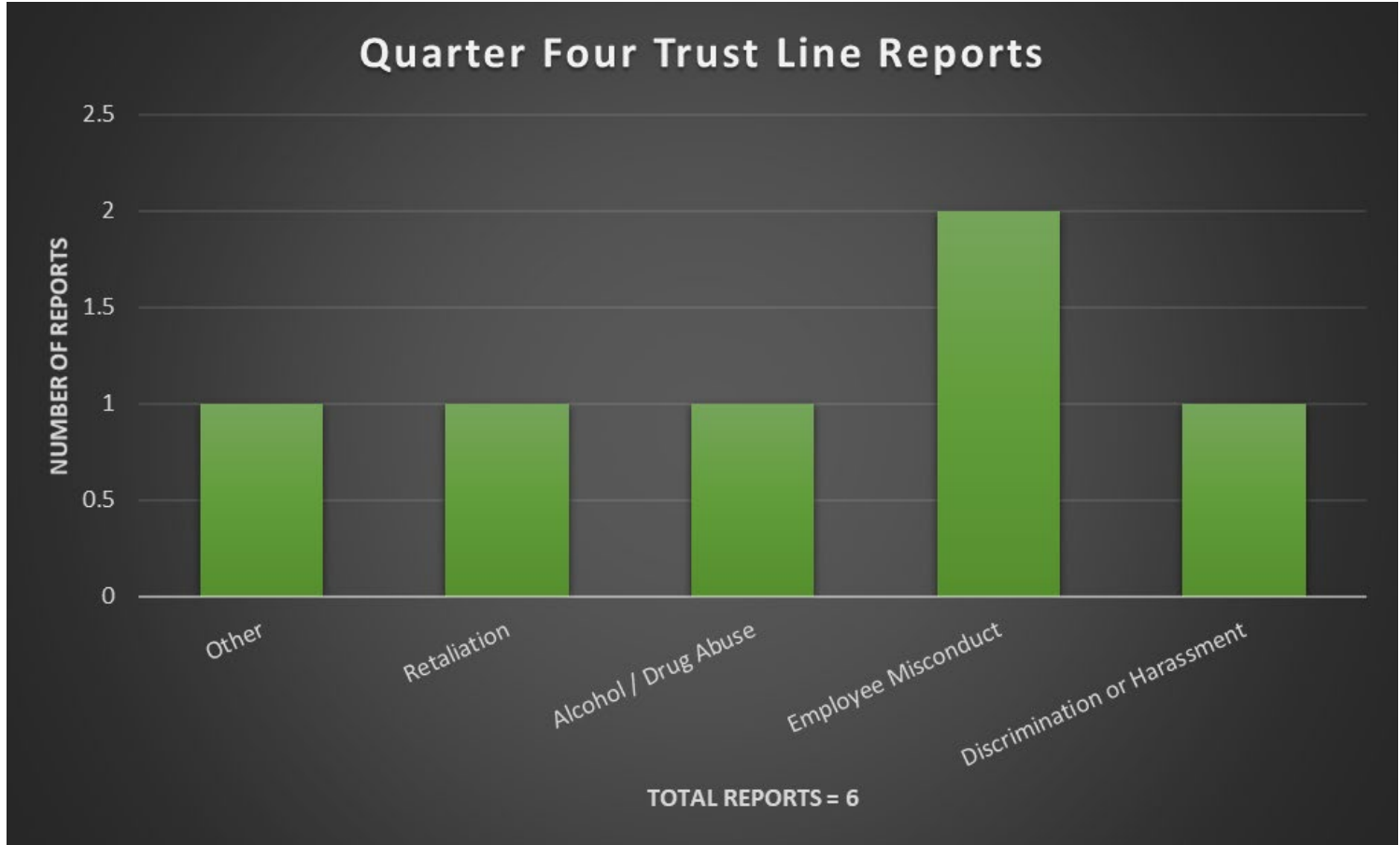| FY2021 Risk Priorities	Q1	Q2	Q3	Q4
1. Employee training				
2. University policies				
3. International regulatory compliance				
4. Accessibility of online programs				
5. Conflicts of interest and commitment				
6. Prevention of sexual discrimination and violence & Title IX compliance				
7. COVID-19 related compliance				

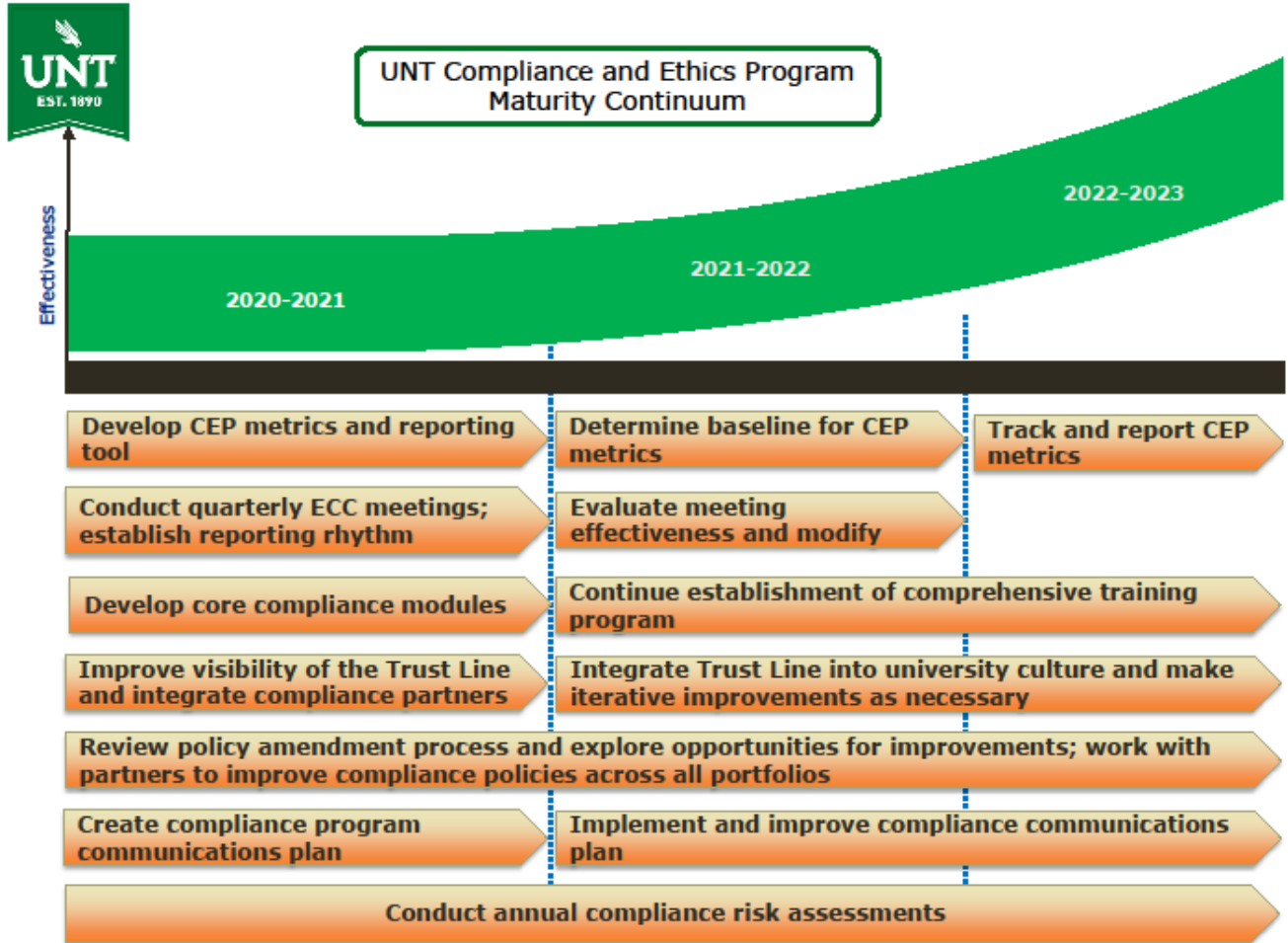## ADDITIONAL CAMPUS INFORMATION

A. COVID-19 Response

UCE has been heavily involved in the university's COVID-19 response, working with policy, safety, research, and athletics groups to modify work and learning environments on campus. UCE continues to be very involved in COVID-19 related issues during the fall semester, such as mandatory testing and other response issues. This heavy volume of work may result in delays to planned program improvements.

ASSOCIATED CHARTS/APPENDIX

UNT Compliance and Ethics Program Maturity Continuum

Effectiveness

2020-2021

2021-2022

2022-2023

Develop CEP metrics and reporting tool

Determine baseline for CEP metrics

Track and report CEP metrics

Conduct quarterly ECC meetings; establish reporting rhythm

Evaluate meeting effectiveness and modify

Develop core compliance modules

Continue establishment of comprehensive training program

Improve visibility of the Trust Line and integrate compliance partners

Integrate Trust Line into university culture and make iterative improvements as necessary

Review policy amendment process and explore opportunities for improvements; work with partners to improve compliance policies across all portfolios

Create compliance program communications plan

Implement and improve compliance communications plan

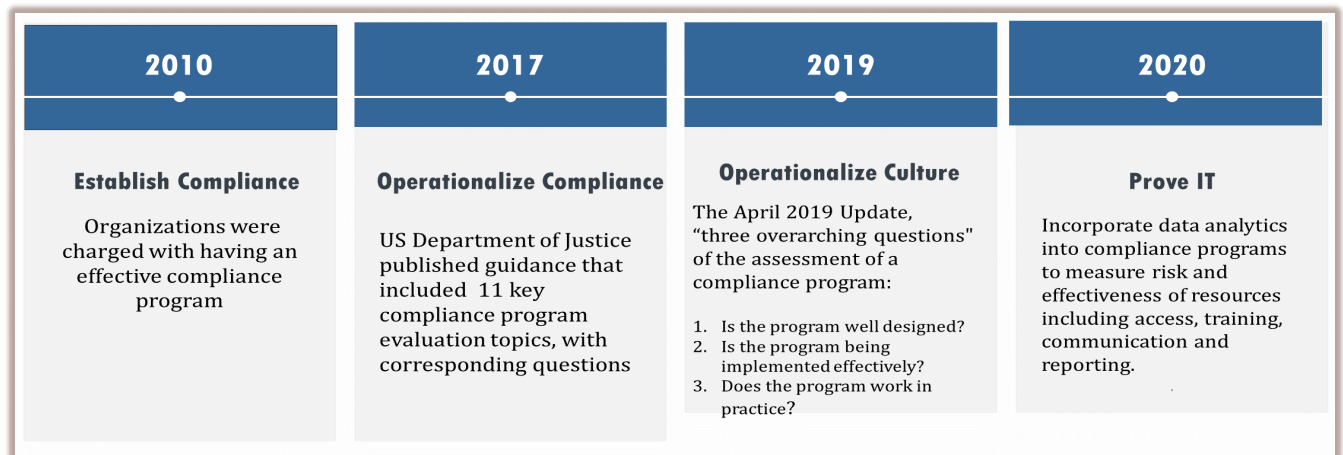Conduct annual compliance risk assessments

Quarterly Compliance Report

FOURTH QUARTER FY 2021

Submitted by
Desiree Ramirez, CCEP, CHC
Senior Vice President and Chief Integrity Officer

INTRODUCTION

THE EVOLUTION OF AN EFFECTIVE INTEGRITY PROGRAM

2010	2017	2019	2020
Establish Compliance	**Operationalize Compliance**	**Operationalize Culture**	**Prove IT**
Organizations were charged with having an effective compliance program	US Department of Justice published guidance that included 11 key compliance program evaluation topics, with corresponding questions	The April 2019 Update, "three overarching questions" of the assessment of a compliance program: 1. Is the program well designed? 2. Is the program being implemented effectively? 3. Does the program work in practice?	Incorporate data analytics into compliance programs to measure risk and effectiveness of resources including access, training, communication and reporting.

In last November's Board of Regents Compliance Presentation, we discussed that the Department of Justice's (DOJ) June 2020 update reflected a continued emphasis on a pragmatic yet vital approach to evaluating the effectiveness of compliance programs. The update seeks to ensure not only that the program is in place, but that it is working. For example, they changed the second overarching question ("**Is the program being implemented effectively**?"), to asking instead whether it is "a**dequately resourced and empowered to function effectively.**" This change established the DOJ's foundation for an effective compliance program.

According to the publication, *Scientific Research* (July 2017)*,* Integrity-based programs produce employees that are more prone to being committed to their organizations, more aware in an ethical sense and more willing to [voice concerns]…

HSC's integrity-based compliance program utilizes Our Values as a guiding principle. Effectiveness will be reflected in the interpretation of how and why we follow policies; the importance of education and training to mitigate potential misconduct and the freedom to voice concerns when we witness potential violations of policy and law. More importantly, the integrity-based approach gives employees and students the opportunity to be proactive in making the right decisions that may affect them as an individual, their fellow team members and HSC.

HSC and The Office of Integrity and Awareness is committed to the integrity-based approach, that allows us to continually affirm that the institution has an effective compliance program that functions as more than "checking a box".

COMPLIANCE PROGRAM ELEMENTS

Effective Communication

- **A one-question survey was administered to employees regarding quarterly compliance training vs an annual suite of training**
- **46% of employees responded**
- **Slightly under 50% felt 1-3 training modules quarterly would be more effective than a suite of annual training once per year**

Policies and Procedures

- **Additional Procedures being updated to support policies**
- **Concealed Handgun policy in process of update to align with State law**
- **Updates to Effort Reporting and Intellectual Property policies**
- **Distance Education policy added**

Training and Educations

- **Records management training added as required training for all employees**
- **Student training administered July-August; with overall completion rate of 88% at the end of training period**
- **New employees continue to fully complete their training within 30 days of hire with a 100% completion rate**
- **Policy attestation to be added to training in the future**

Reporting/TrustLine

- **HSC received 5 Trust Line calls/ Inquiries during the fourth quarter**
- **All cases were reviewed and four are closed**
- **There were 6 cases and 1 closed in the third quarter of 2020**
- **We will continue to monitor trends and changes for proactive intervention**

CLINICAL COMPLIANCE

In the fourth quarter, no routine documentation audits were conducted to accommodate the implementation of the updated clinical compliance software MDaudit . The updated version, MDaudit Enterprise is a single platform auditing solution that enables billing compliance and revenue integrity professionals to continuously monitor risk, detect anomalies and automate workflows in a single, secure **cloud-based** platform. The platform provides all the necessary tools to minimize billing compliance risks, optimize revenue and robust reporting.

A focused audit was conducted that included multiple providers. This audit provided insight into documentation of FY21 Medicare Physician Fee Schedule Final Rule changes; this audit will continue annually.

FY 21 COMPLIANCE WORKPLAN UPDATE

The FY21 Compliance Workplan risks are monitored throughout the fiscal year; the updated chart reflects progress to mitigate the identified risk*. (See appendix for details)*

CONCLUSION

Throughout FY21, the Office of Integrity and Awareness continued to strengthen engagement with the campus and gained significant insight into the impact an integrity-based program would have on the campus. Many felt that this aligned with HSC's values and would assist in highlighting expectations of behaviors of HSC team members. Utilizing our Code of Culture as a guide and with increased awareness of diversity, equity and inclusion, many felt this the Office of Integrity and Awareness enhances a culture of mindfulness and personal accountability in how we serve and experience each other day-to-day.
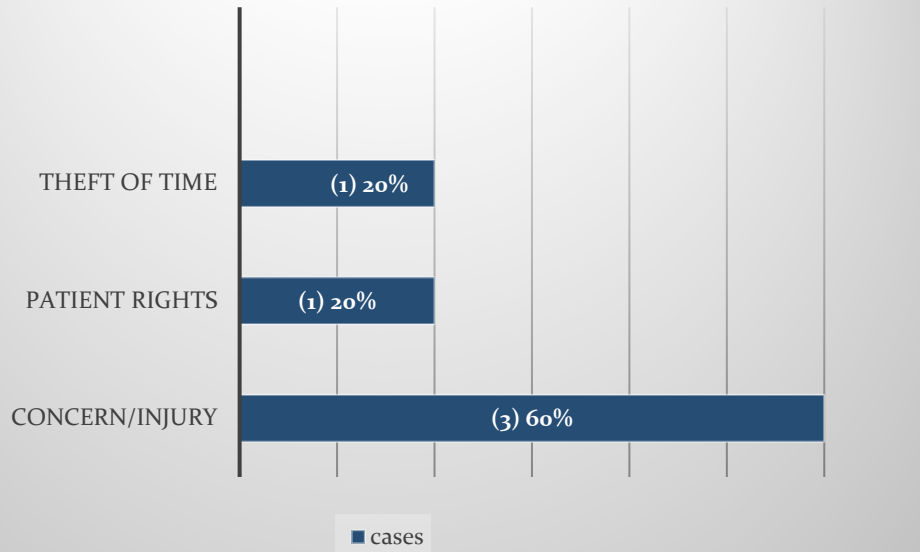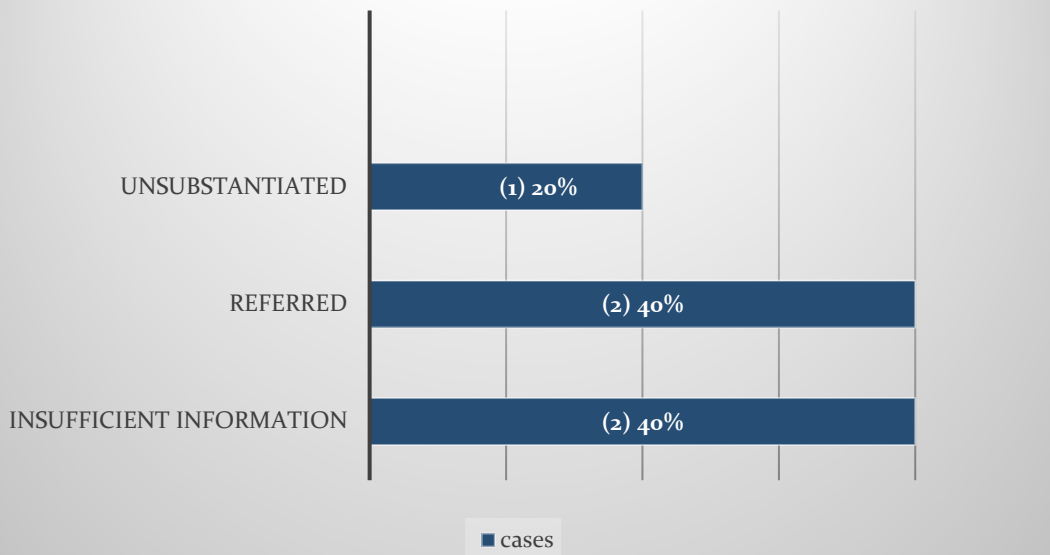
Appendices

Student Annual Training

PROTECTING MINORS ON CAMPUS — 87% Completed, 13% Overdue
HIPAA — 91% Completed, 9% Overdue
SEXUAL ASSUALT PREVENTION — 86% Completed, 14% Overdue
ACTIVE SHOOTER PREPAREDENESS — 86% Completed, 14% Overdue

■ Completed ■ Overdue
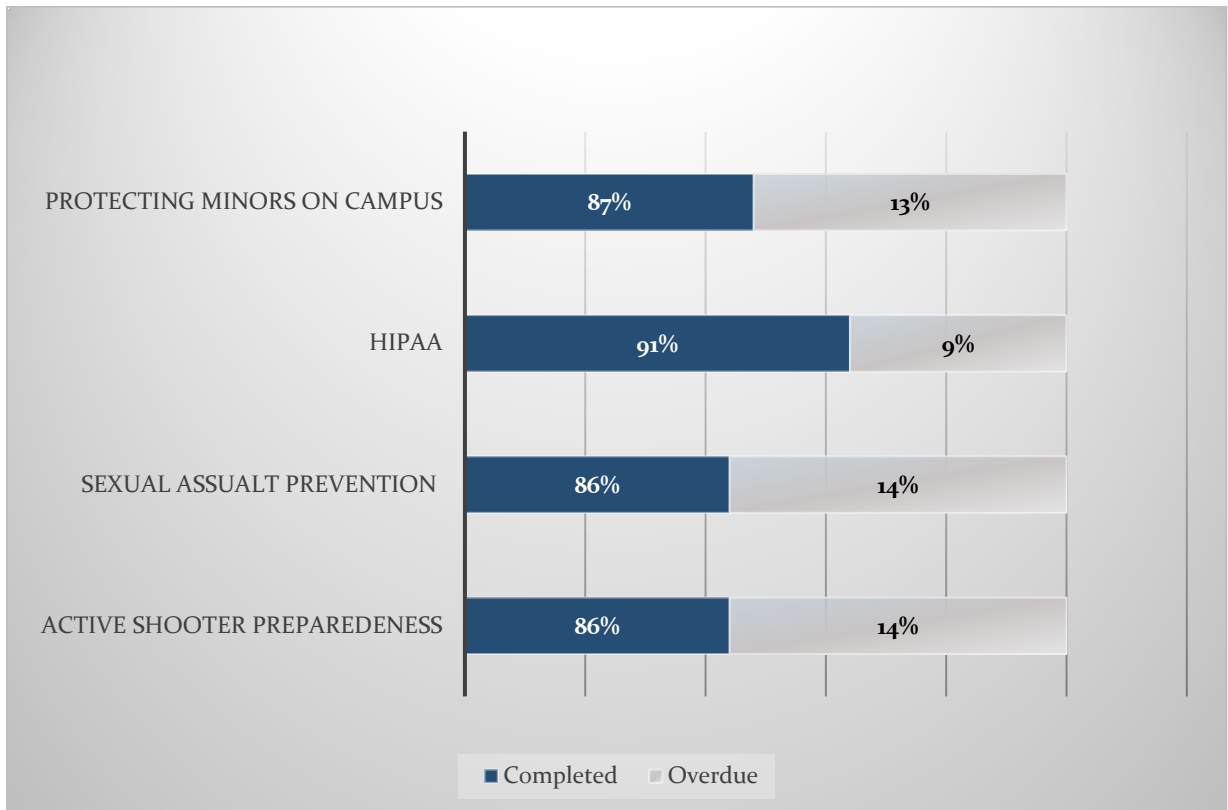
Employee Trainng

4th Quarter-New Hire Training

	Completed
WORKPLACE VIOLENCE PREVENTION	100%
FERPA BASICS	100%
HARRASMENT AND DISCRIMINATION	100%
RIGHT TO KNOW: HAZARD COMPLIANCE	98%
UNTHSC CODE OF CULTURE	100%
PROTECTING MINORS ON CAMPUS	100%
CODE OF CONDUCT	100%
RECORDS MANAGEMENT	100%

Fourth Quarter Investigations FY 2021

- THEFT OF TIME: (1) 20%
- PATIENT RIGHTS: (1) 20%
- CONCERN/INJURY: (3) 60%

■ cases

Fourth Quarter Outcomes FY 2021

- UNSUBSTANTIATED: (1) 20%
- REFERRED: (2) 40%
- INSUFFICIENT INFORMATION: (2) 40%

■ cases

FY21 Workplan

IDENTIFIED RISK			FY21	Mid Year Progress	Current Inherent Risk			CONTROLS		Current Residual Risk	
Risk Name	Inherent Risk Rating	Residual Risk Rating	Controls		Consequence	Likelihood	Inherent Risk Rating	Existing Controls	Controls Rating	Likelihood	Residual Risk Rating
Campus Off Boarding Process	high	high	FY20 Review; Controls not adequate	Review and update of policy(ies). Discussion re: automated asset tracker from onboarding to termination	3. Moderate	4. Likely	high	Controls Updated-more consitent approach to exit interviews; Documented procedures and online forms currently in process of development; working with procurement on onboarding asset management	Adequat	3. Possible	medium
Unauthorized Access to Protected Institutional Data	high	high	FY20 Review; Department continuing to implement controls identified from ERM results	Significant progress throughout FY20 and continued in FY21 for targeted/prioritized areas. External Vulnerability Scanning indicates marked reduction in vulnerability exposure to public internet Internal Phishing Program tests all users quarterly.	4. Major	3. Possible	high	FY20 Review; Department continuing to implement controls; robust annual training implemented. Continued integrity testing; Update Information Security Policy	Adequat	3. Possible	high
HIPAA and HITECH	high	high	FY20 Review. Adequate controls in place; Privacy audit planned. Targeted education being reviewed. Review of COVID-19 guidance for any unseen risk	Privacy Audit requires physical review- assessing best practice to conduct	4. Major	3. Possible	high	Targeted education to vulnerable areas; physical controls for implemented. Facilities staff greater awareness. Stricter corrective action taken for policy violations. Updated privacy policy. Privacy audit postponed; plan for FY22	Adequat	3. Possible	high
Export Control	high	high	FY20 Review; International Compliance Officer working on additional controls. Review of increased governmental risk	Significant progress with export issues has been made with education and process improvement, but more work to do on foreign influence in this area. Needs more development of permanent processes.	4. Major	4. Likely	high	FEducated high risk research components regarding export regulations and the need for reviews of all foreign engagements; Perform Restricted Party Screenings on all foreign entities identified to the IC Officer as associated with HSC.; Perform export control reviews on all foreign collaborations and transactions involving the potential for export-controlled items or information; Added resources for guidance and education on the HSC IC website; Review all HSC employee visa applications and renewals for export control risk; Formed an HSC International Compliance Committee; Export control reviews on all known international travel and foreign	nadequa	3. Possible	high
Telemedicine (COVID-19 guidance); Resident Telemedicine Billing	medium	medium	Focused audit for documentation during COVID-19 under updated guidance. Plans to continue service in clinic	Audit complete; findings reviewed with leadership	2. Minor	2. Unlikely	low	Clinical documentation audit conducted;Aggregate 94% accuracy rate	Excellen	2. Unlikely	low
DEI Training (Executive order 139)	medium	medium	Review of current and future training development; Executive order audit	Executive Order suspended; assessment of D&I education of campus ongoing	1. Insignificant	1. Rare	low	Vendor issues were minimal in relation to executive order; Depatmental training reviewed for potentia violations order; Executive Order revoked	Excellen	1. Rare	low

Integrity Based Approach

Element	Compliance Approach	Integrity Approach
Objective	**Prevent criminal misconduct** and reduce organizational risk through compliance with legal and market standards.	**Ensure responsible conduct** through the development of company values and aspirations, and social obligations including legal compliance
Organizational Commitment	**Mission statement and policies** drives compliance	**Code of Culture** that highlights **guiding values and commitments** that make sense and are clearly communicated and align with policies
Ethos/Character of the Organization	Conformity with **imposed standards**	Governance according to **organizational standards**
Leadership	Committed to **ensuring compliance with internal and external standards**	**Personally committed**, credible, and willing to take **action on the values** they espouse
Methods	**Prescriptivism**, organizational systems and decision processes, auditing and control, sanctions, training	**Leadership, accountability**, organizational systems and decision processes, auditing and control, sanctions, training
Systems and Procedures	Support and reinforce the need for **compliance with requirements**	Support and reinforce the **organizational values**
Decision-Making	Managers have the decision-making skills, knowledge, and competencies to make **compliance orientated decisions** on a day-to-day basis	Espoused values are integrated into management channels for decision-making and are reflected in the organization's critical activities. Managers have the decision-making skills, knowledge, and competencies to make **ethically sound decisions** on a day-to-day basis
Reporting and Investigation	Mechanisms are in place for reporting and investigating noncompliance	Mechanisms are in place for reporting and investigating noncompliance
Verification	Implemented to ensure compliance, i.e audits	Implemented to ensure compliance, i.e audits

Table adapted from Paine (1994)

UNT | DALLAS

UNIVERSITY OF NORTH TEXAS AT DALLAS

OFFICE OF INSTITUTIONAL COMPLIANCE

QUARTERLY COMPLIANCE REPORT

4TH QUARTER FY21

SUBMITTED BY

TIM WILLETTE

CHIEF COMPLIANCE OFFICER

BOARD OF REGENTS MEETING

NOVEMBER 18TH & 19TH, 2021

Unless Otherwise Noted: Activities reflected are as of August 31st, 2021

Introduction

The University of North Texas at Dallas (UNT Dallas) Office of Institutional Compliance (OIC) functions to provide regulatory oversight, as well as institute a compliance program that fosters a culture of ethical, lawful, and responsible conduct of every employee. To that end; the OIC identifies and analyzes a wide range of existing and emerging compliance risks. Working closely with key campus stakeholders is critical, requiring the Chief Compliance Officer (CCO) to partner with each of the organizational leaders serving on the President's Cabinet, as well as key stakeholders. The organizational structure of the UNT Dallas Compliance and Integrity Program (Program) is provided in Appendix A.

Executive Summary

This quarterly report provides a summary and highlights of compliance activities that have taken place during the fourth quarter (Q4) of Fiscal Year 2021(FY21) at UNT Dallas. It is divided into six sections.

- Introduction
- Executive Summary
- Compliance Integrity Program
- FY21 Compliance Risk Work Plan (CRWP) End of Year Recap
- Emerging Risks for FY22

Compliance & Integrity Program

The OIC at UNT Dallas is responsible for maintaining an effective Program that includes, but is not limited to: 1) serving as a resource to address compliance concerns and communicate emerging risks; 2) facilitating the identification, prioritization, and mitigation of compliance risk focus areas; 3) assisting in determining risk mitigation strategies and how to assess their effectiveness; 4) reviewing and-as needed-updating campus policies; 5) assisting in identifying and monitoring training requirements; and 6) helping with the implementation of corrective actions, as appropriate. The Program identifies, assesses, monitors, oversees, and helps ensure UNT Dallas complies with applicable laws and regulations, Regents rules, System regulations, and campus policies. The CCO is responsible for managing and overseeing the UNT Dallas Program.

Throughout FY21, the OIC focused on the impact of the COVID-19 pandemic at UNT Dallas. Because most operations-since the middle of March-have been remote, the President has instituted daily briefings that include key stakeholders. These briefings have served to keep all members of the campus community informed of federal, state, and local requirements, focusing on risks brought on by the COVID-19 pandemic. Toward that end; the Program has served to help ensure on-going awareness of and adherence to UNT System Regulation 02.1000; Compliance and Integrity Program, as well as the seven Federal Sentencing Guideline Objectives (FSGOs) listed below.

- Active Oversight
  All members of the President's Cabinet and key stakeholders are kept current on the overall effectiveness of the Program. The OIC has provided quarterly updates of the annual CRWP to senior leadership. Throughout FY21, members of the President's Cabinet, along with other stakeholders, have been actively engaged in identifying, communicating, and assessing emerging risks—especially those brought on by the COVID-19 pandemic. The commitment to fostering a culture of compliance is prevalent in all operations at UNT Dallas. In their leadership roles, members of the President's Cabinet are committed to championing a culture of compliance, founded on principles of personal integrity and ethical behavior. This has never been more apparent than during this fiscal year when the majority of staff and faculty members have been working remotely. Leadership continues to be actively engaged in an evolving operational environment that is supportive of the efforts put forth by faculty and staff. Additionally, members of the President's Cabinet have been actively engaged in the monitoring of the four risk focus areas identified in the FY21 CRWP.

- Policies, Standards, and Code of Conduct
  UNT Dallas is committed to the implementation and maintenance of policies that facilitate the detection and prevention of unethical and illegal conduct at the University. These policies promote integrity, principled behavior, and compliance with federal and state laws, Regents rules, System regulations, and the standards of all applicable accrediting bodies. During FY21, the Policy Director has revamped the policy process, as well as oversee the transition of the policy database from a legacy system to the Policy Tech platform. This effort has provided the Policy Director and the CCO the opportunity to collaborate with the UNT System Administration Policy Manager. The migration from the legacy database to the Policy Tech application is currently in progress. Policy management will continue to be a risk focus area for the campus FY22 CRWP.

- Education and Training
  All UNT Dallas employees must successfully complete training identified in the Program, as well as compliance elements that are key in the conduct of their position. Additionally, employees must be trained and periodically reminded of the ways to report suspected misconduct. During FY21, the purchase of Bridge for the LMS at UNT, UNT SA, & UNT Dallas, provided a great opportunity to have each institution build their own unique training requirements. That noted; it also provided all three institutions the opportunity to leverage the training already in place at other institutions. An SLA was drafted by Procurement to ensure that requirements and resources properly align. During FY21, UNT Dallas employees completed three mandated compliance courses. Required completion rates for these three courses exceeded 75%.

- Open Communications
All UNT Dallas employees must not only be aware of, but also understand the rules that govern, their respective roles and the values underpinning UNT World. Stakeholders, both, internal and external, need assurances that UNT Dallas is committed to ethical and responsible behavior. Communication is key to a culture of compliance. During FY21, the efforts put forth in addressing compliance education and training has required the active participation of Marketing & Communications. Throughout FY21, the OIC worked closely with Marketing & Communications to provide timely compliance information, including announcements regarding upcoming mandated training.

- Monitoring and Auditing
UNT Dallas is committed to continuous monitoring by implementing internal controls that allow for early detection and remediation of non-compliance within an organization. Audit activities serve to help ensure that operational management has in place internal controls that do not improperly bias the assessment of business processes. A number of audits took place during the FY21. The OIC has worked closely with key stakeholders to ensure audit finding are being addressed in a timely and thorough manner.

- Enforcement Tools
UNT Dallas, through the Program, incorporates measures that help ensure employees understand the consequences of engaging in unethical behavior or participating in non-compliant activities. This includes procedures for enforcing and disciplining employees who violate compliance standards or fail to report non-compliant activities. Disciplinary provisions equitably enforced are critical to the credibility and integrity of the Program. A review of investigation processes continues to be an on-going risk focus area to be included in the FY22 CRWP.

- Responsive Initiatives
Keeping in mind that a Program should be scalable, affordable, feasible, and enforceable, the OIC evaluates the effectiveness of the program and the seven FSGOs on a regular basis. This evaluation also examines emerging compliance challenges. During FY21, a number of areas were reviewed, including the need to assess and, as applicable, refine key components of the Program.

Summary of FY21 Compliance & Integrity Program

Objectives	FY21 Summary & Highlights of Compliance Activities
Active Oversight	• Engaged leadership focused on responsive & supportive guidance • Cabinet & Executive Council regularly updated on progress of CRWP
Policies, Standards, & Code of Conduct	• Policy Tech prepared for live use with migration from legacy database • Policy Director revamped policy review process • Policy Advisory Group actively engaged in review of updates to policies
Education & Training	• Coordinating implementation of annual C&E training curriculum • Establishing process to assign mandated training to designated employees • Put in place tools to monitor & record course activities • Tracking completion rates for C&E/PDH/TIX training with follow up
Open Communications	OIC collaborates with Marketing & Communications in providing timely compliance information, including announcements regarding upcoming mandated training.
Monitoring & Auditing	• OIC working with stakeholders in successfully responding to audit recommendations. • Compliance engaged with implementation of system-wide COI/COC application.
Enforcement Standards & Disciplinary Guidelines	OIC is conducting annual review of investigation processes.
Response & Prevention	10 Trust Line Cases/2 Substantiated Cases/3 Closed Cases

- Compliance & Integrity Program

Goal	Initiatives	Progress				Comments
		Q1	Q2	Q3	Q4	
Enhance Effectiveness of Compliance & Integrity Program	• Review federal & state regulations, THECB sections, Regent rules, System regulations, & University policies					**Regents Rules:** 04.120; Compliance & Ethics Programs **System Regulations:** 02.100; Compliance & Integrity Program
	• Identify gaps in System Administration regulations, University policies, & associated processes					**Campus Policies:** 04.013; Employee Rights & Responsibilities Under Institutional Compliance & Ethics Program
	• Implement plans to address areas of improvement & establish metrics to track progress					05.007; Employee Ethics & Standards of Employee Conduct 05.041; Compliance & Integrity Program
	• Assess Effectiveness of CIP					Survey of Compliance/Questions Drafted & Ready for Review
	• Develop, maintain, & publish annual compliance calendar					Developing List of Compliance Requirements & Due Dates
	• Update Compliance website to be more interactive with links to additional resources					Review of other IHE Compliance websites conducted Coordinate efforts with Communications & Marketing

Comments:

The Compliance & Integrity Program (Program) was identified as a risk focus area & a management response to an SB 20 audit recommendation. The Offices of Compliance at UNT, UNTSA, & UNTD took a close at their respective policies, as well as the System regulation.

Specifically, each CCO looked at the Program to ensure the following areas are adequately covered with current policies & training.

- Ethics & Standards of Conduct;
- Conflict of Interest Disclosures;
- Background Checks;
- Dual & Outside Employment & Outside Activities;
- Prohibition Against Sexual Assault/ Sexual Harassment;
- Reporting Suspected Misconduct;
- Rights & Responsibilities of Employees under the Program; &
- Fraud, Waste, & Abuse

These elements, as well as the entire Program, continue to be reviewed. There have been areas of improvement that include:

- Close monitoring of required compliance training
- Improved communications of compliance requirements
- On-line dynamic forms for Dual/Outside Activities reporting
- Re-structuring of University PAG
- Drafting of Program Survey
- Building more robust training portfolio
- On-going collaboration among institutional CCOs
- On-going collaboration with key SA stakeholders

These are all areas that continue to be refined.

Key Risk Category: Compliance/Regulatory
Key FSGO: Active Oversight

- Compliance & Ethics Training

Goal	Initiatives	Progress				Comments
		Q1	Q2	Q3	Q4	
Review & Update Compliance & Ethics Training	• Assess education & training efforts & resources • Tailor Compliance & Ethics Training module for UNTD employees • Enhance quality & increase number of course offerings • Communication & Marketing actively engaged in messaging training requirements • Ensure mandatory training is assigned & tracked • Identify resources to translate course offerings to meet the needs of our diverse staff • Coordinate development & publishing of list of Compliance training modules offered in LMS • Collaborate with other instititions to share resources • Update Compliance website to be more interactive with links to additional resources					**Mandatory Compliance Training** All employees are required to complete ethics & compliance training, as well as training related to their positions There are emerging compliance topics, as well as other compliance training related to their positions UNTD C&E Training Module Assigned to All UNTD Employees in May Procurement implemented SLA for Bridge contract to serve all Institutions with each maintaining their own training library CCOs working together to help ensure compliance requirements for training are properly vetted UNTSA &UNTD working together & UNT is serving as CoE with SLA to Ensure Resources are Properly Allocated In Discussions with Marketing & Communications to Update Compliance website & include links to training tools

Comments:

The SB20 audit recommended a review of Compliance & Ethics training. Compliance & Ethics training is an essential element of the Program. In each of the areas previously mentioned, training is required. Additionally, the training must be taken &, more importantly, reviewed annually. This review must include an assessment of the training effectiveness.

All members of the University were advised of the need to satisfactorily complete this annual training. Training completion rates were tracked.

The efforts put forth in addressing this risk focus area required the active participation of Marketing & Communications, as well as the full endorsement of leadership. The purchase of Bridge for the LMS at UNT, UNT SA, & UNT Dallas, provided a great opportunity to have each institution build their own unique training requirements. That noted; it also provided all three institutions the opportunity to leverage the training already in place at other institutions. Finally, in continuing to seek best practices that provided operational efficiency, UNT is serving as the Center of Excellence for the LMS Bridge platform. UNT Dallas & UNTSA can leverage the training expertise already in place at UNT. An SLA was drafted by Procurement to ensure that requirements & resources properly align.

Key Risk Category: Compliance
Key FSGO: Education & Training

- NAIA Compliance

Goal	Initiatives	Progress Q1	Q2	Q3	Q4	Comments
Implement Intercollegiate Athletics Compliance Program	• UNTD President appoint Intercollegiate Athletics (IA) Compliance Director to work with Athletics Director (AD)					Completed
National Association of Intercollegiate Athletics (NAIA)	• UNTD President establish Athletics Oversight Committee					Completed
	• IA Compliance Director identify & understand NAIA Compliance requirements & protocols					IA Compliance Director works closely with NAIA Compliance & other IHEs with NAIA programs
	• IA Compliance Director work with faculty athletics representative & Athletics Director to establish environment of education & adherence to institutional policies, conference guidelines, & NAIA regulations					On-going Process
	• Athletics Oversight Committee draft Student-Athlete handbook					UNTD President received draft in early April 2021
	• Develop portfoilo of NAIA compliance requirements					IA Compliance Director has created & is building a portfolio of activities with compliance implications
	• IA Compliance Director meet with key stakeholders to identify resources to assist student-athletes					IA Compliance Director meets with student services that provide a host of resources for students
	• IA Compliance Director meet with key stakeholders to identify education & training resources					IA Director meets with CCO, Director of Risk Services, & other key stakeholders

Comments:
With the introduction of women's & men's cross-country, track, & basketball, UNT Dallas entered the world of intercollegiate athletics. This milestone was championed & marshalled along by Jack Allday. The active engagement of the SGA was also critical. With this achievement came a myriad of requirements. Hiring competent & committed coaches, recruiting student-athletes, identifying financial & physical resources, & making sure a strong commitment to compliance were all important & played a part in having the NAIA recently grant the University full member status.

Like all endeavors, resting on these laurels is not an option. There is yet much to be done.

Markus Harris has done a remarkable job in putting together an effective intercollegiate athletics compliance program. The active engagement of an Intercollegiate Athletics committee has also helped ensure that compliance issues are brought to the forefront. As intercollegiate athletics grows at UNT Dallas so will the responsibilities of the intercollegiate athletics compliance director.

Key Risk Category: Compliance/Regulatory
Key FSGO: Active Oversight/Policies/Education & Training

- Title IX Program

Goal	Initiatives	Progress Q1	Q2	Q3	Q4	Comments
Enhance Title IX Program Oversight	Designate Title IX Coordinator to establish & oversee University Title IX Program					Title IX Coordinator meets with members of UNTD community to increase visibility & enhance understanding of program
	Maintain up-to-date education & training resources					Training modules are being closely reviewed & updated Completion rates are provided below for PDH & TIX training
	Coordinate investigations, responses, & resolutions of reported incidents alleging sexual harassment or other sexual misconduct					Title IX Coordinator is reviewing files & setting up protocols
	Ensure appropriate actions are taken to eliminate sexual harassment & other sexual misconduct, prevent recurrence, remedy effects, & updates UNTD President					Title IX Coordinator completed & submitted SB 212 FY21 Q3 report
	Ensure mandatory training is assigned & tracked					On-going evolution with engagement coming from ODE Completion rates (PDH/TIX) are being tracked monthly
	Identify resources to translate course offerings to meet the needs of our diverse staff					Title IX Coordinator, working with campus stakeholders, compiling list of training
	Coordinate development & publishing of list of TIX training modules					On-going evolution with all UNT World institutions involved
	Collaborate with other institutions to share resources					All UNT World institutions committed to sharing best practices & limited resources as required
	Update TIX website to be more interactive with links to additional resources					Collaborative effort with Communications is progressing with migration of TIX website & inclusion of links to training tools

To ensure compliance with Title IX & other federal & state civil rights laws, the University designated a Title IX Coordinator to monitor compliance with Title IX & ensure that reports of sexual or gender-based harassment or misconduct are appropriately investigated and addressed.

The University charged the Title IX Coordinator with overseeing University compliance of the Title IX Program; ensuring appropriate education & training for students, employees, & certain third-party enterprises. The Title IX Coordinator also oversees investigations, responses, & resolutions of all reports, ensuring appropriate actions is taken to eliminate conduct that violates Title IX, prevent its recurrence, & remedy its effects. The Title IX Coordinator reports regularly to the University President.

With the on boarding of our University Title IX Coordinator, great strides have been made in putting together a Title IX Program that is responsive. Our Title IX Coordinator has met with key stakeholders throughout the University & the entire system. She has implemented & conducted training for students, staff, & others. She has taken over the SB 212 reporting requirements & reports to President Mong regularly.

There is much yet to be done in putting in place an infrastructure that meets federal & state requirements. To that end, the Title IX Coordinator is working with colleagues throughout UNT World.

Key Risk Category: Compliance/Regulatory
Key FSGO: Active Oversight/Policies/Education & Training/Monitoring

Emerging Risks

Assessing the Impact of COVID-19 Moving Forward

In drafting the FY22 CRWP, UNT Dallas must remain vigilant and monitor for emerging risks brought to bear by the COVID-19 pandemic. Below provides the results of the assessment process.

FY22 Top Ten CRWP Risk Focus Areas

- Community & Campus Well-Being
- Policy Management
- Investigation Processes
- ADA Accommodations
- Compliance & Integrity Program
- Institutional Training
- Records Retention Management
- NAIA Compliance
- Title IX Program
- Events Management
- Physical Infrastructure

This is third year this compliance risk assessment has been used in drafting and submitting a CRWP on behalf of UNT Dallas. Conducting a compliance risk assessment has been an on-going evolution throughout this FY. Because of the dynamic nature of the COVID-19 pandemic, compliance risk focus areas ran the gambit. In putting together the information gathered through on-going meetings with key stakeholder, these risk focus areas were identified as the top ten (really eleven) in this compliance risk assessment for FY22.

The three italicized risk focus areas indicate they have been included the FY22 Internal Audit Plan. They should be a part of the FY22 CRWP.

- Community & Campus Well-Being is a broad area that will be refined as the FY22 Strategic Plan is put in place.
- Policy Management is listed to stress the dynamics of a comprehensive review that includes the migration of policies into Policy Tech.
- Investigations Processes is identified in order to refine & document a host of investigations that impact the University.
- ADA Accommodations is fast becoming an issue with many facets that impact the entire campus community.
- Compliance & Integrity Program is on the Internal Audit Plan for FY22.
- Institutional Training is in response to the current audit being conducted by Internal Audit.
- Record Retention Management is an area that is ripe for review with the growth of the University.
- NAIA Compliance should remain an area to focus on as the program grows.
- The Title IX Program has been identified on the Internal Audit Plan for FY22.

- Events Management is identified as an area of concern as the University returns to a "new norm."
- Physical Infrastructure is identified as space requirements increase & accurate reporting is essential.

Tracking and reporting on eleven risk focus areas in a CRWP does not provide an effective means for leadership to actively engage in the CRWP. Accordingly, the list has been narrowed down to seven. Again, those in italics are part of the Internal Audit Plan for FY22. The training could be included in the Program risk focus area. The Title IX Program could be included in investigation processes. That provides for five distinct risk focus areas for the FY22 CRWP.

- Compliance & Integrity Program
- Institutional Training
- Title IX Program
- Investigation Processes
- ADA Accommodations
- Records Retention Management
- NAIA Compliance

Tracking five risk focus areas is one more than what was tracked and reported on for FY21. However, there is already processes in place that are addressing three of the risk focus areas. The inclusion on an additional risk focus area should not be all that more onerous to report on.

The UNT Dallas Cabinet, in their role as the Executive Compliance Committee, has reviewed and endorsed the tracking and reporting of these five risk focus areas. Of course—as with any plan, the CRWP can be modified as new risks emerge or existing risks increase in their impact on the University.

- Compliance & Integrity Program/Institutional Training
- Investigation Processes/Title IX Program
- ADA Accommodations
- Records Retention Management
- NAIA Compliance

Summary of Proposed FY21 CRWP Risk Focus Areas

Compliance Targeted Areas	Commitment & Initiatives
Compliance & Integrity Program / Institutional Training	UNT Dallas is committed to effectively addressing compliance issues, tracking changes, conflicting or unclear or inappropriate requirements, internal audit recommendations, trained staff & adequate financial resources, reporting & oversight, consitent & equitable enforcement, adequate processes & controls, & robust training.
Investigation Processes/ *Title IX Program*	UNT Dallas is committed to the highest ethical standards in its internal/external dealings; whistleblower process that include multiple reporting options; effective investigations & report tracking; retaliation against those reporting potential instances of violation of laws, rules, policies, or improper activities.
ADA Accommodations	UNT Dallas is committed to establishing responsive programs for students & employees with special needs, providing oversight & timely case reviews. This is area of particular concern because of the impact the COVID-19 pandemic has had on evey member of the UNT Dallas community.
NAIA Compliance	With the introduction of women's & men's cross-country, track, & basketball, the University entered the world of intercollegiate athletics. UNT Dallas is committed to hiring competent & committed coaches, recruiting eligible student-athletes, identifying & effectively deploying financial & physical resources, & making sure a strong commitment to ethical behavior remains at the forefront. These all play a part toward ensuring the University remains in good stead with the NAIA.
Records Retention Management	UNT Dallas is committed to having in place an effective records retention management program. To that end; the OIC is conducting a review of records retention management to include, but not limited to: policies & procedures; training; list of designated records retention managers; retention schedules; open record laws; access to information; confidentiality; destruction of records; & litigation production requests

Appendix A:

Compliance & Integrity Program (Program) Organizational Overview

| UNT Dallas Compliance & Integrity Program - Campus Structure (FY21 Q4)		
Campus Oversight & Accountability		
President Bob Mong		
Campus Chief Compliance Officer		
Tim Willette		
Institutional Executive Compliance Committee		
President Bob Mong		
Betty Stewart, Provost & EVP	Tim Willette, CCO	Arthur Bradford, CFO & EVP
President's Cabinet		
President Bob Mong		
Betty Stewart, Provost & EVP	Arthur Bradford, CFO & EVP	Monica Williams, VP-UA
Stephanie Holley, VP-SA&S	José da Silva, AVP & Dean of Students	Wanda Boyd, AVC-EDI/HR Director
Michael Williams, Distinguished Leader in Residence	Angie Castillo, Executive Assistant to President	Tim Willette, Chief Compliance Officer
Compliance Coordinating Committees/Other Operational Committees		
Employee Training	Monitoring & Auditing	Reporting/Investigating
Principles of Community/Code of Conduct/Policies & Procedures/Standards		
Day-to-Day Operations/Preventive & Corrective/Works In Progress/Emerging Concerns		

OFFICE OF INSTITUTIONAL COMPLIANCE

QUARTERLY COMPLIANCE REPORT
FY21 Q3

SUBMITTED BY
TIM WILLETTE
CHIEF COMPLIANCE OFFICER
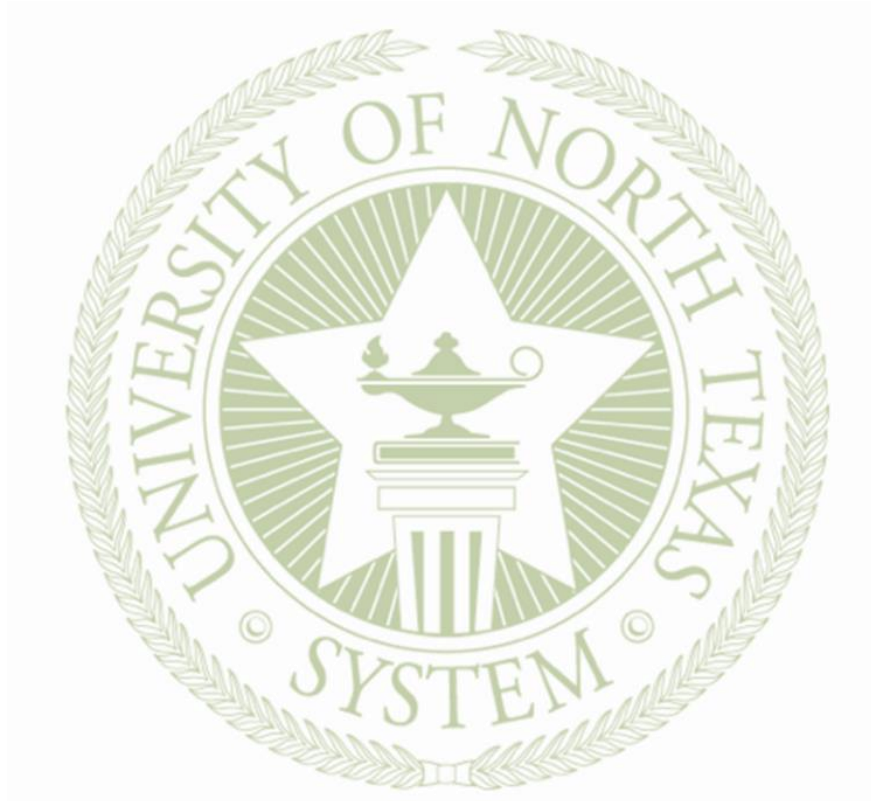
BOARD OF REGENTS MEETING
NOVEMBER 18TH & 19TH, 2021

Unless Otherwise Noted: Activities reflected are as of August 31st, 2021

Introduction

The Office of Institutional Compliance (OIC) at the University of North Texas (UNT) System Administration (SA) functions to assist in regulatory oversight, a compliance program that fosters a culture of ethical, lawful, and responsible conduct of every employee. To that end; the OIC identifies, assesses, and monitors a wide range of existing and emerging compliance risks. Working closely with leadership is critical, requiring the Chief Compliance Officer (CCO) to actively engage each of the organizational leaders serving on the Chancellor's Cabinet, as well as key stakeholders at each of the three institutions. The organizational structure of the UNT SA Compliance and Integrity Program (Program) is provided in Appendix A.

Executive Summary

Each Chief Compliance Officer (CCO) reports to the Board of Regents (Board), at a minimum, quarterly. These reports update the Board on the effectiveness of the Program at each of the institutions, as well as their own unique compliance concerns.

This report summarizes key compliance activities that have taken place during FY21 at UNT SA. It is divided into five sections with one appendix.

- Introduction
- Executive Summary
- Compliance Integrity Program
- FY21 Compliance Risk Work Plan (CRWP) End of Year Recap
- Emerging Risks for FY22

Compliance and Integrity Program

The OIC at UNT SA is responsible for maintaining a Program that includes, but is not limited to:

1. serving as a resource to address compliance concerns and communicate emerging risks;
2. facilitating the identification, prioritization, and mitigation of compliance risks;
3. assisting in determining risk mitigation strategies and how to measure their effectiveness;
4. continuously monitoring compliance requirements of applicable external authorities and periodically reviewing Regents rules and System regulations;
5. assisting in identifying, assessing, and monitoring training requirements; and
6. pro-actively engaging leadership in post-incident reviews to determine the need to implement corrective actions.

The primary objective of the Program is to foster a culture of collaborative compliance. The CCO is responsible for managing and overseeing the Program at UNT SA.

Since mid-March of 2020, the OIC has focused primarily on those compliance risks associated with the impact of the COVID-19 pandemic. During this quarter, most operations function remotely. Chancellor Roe continues to hold daily briefings with key stakeholders, sharing information about emerging federal, state, and local requirements. All these requirements affect operations. Having an informed and engaged organization has been key in continuing to meet the mission of the University. This includes communicating an on-going awareness of and adherence to UNT System Regulation 02.1000; Compliance and Integrity Program, as well as the seven Federal Sentencing Guideline Objectives (FSGOs) listed below.

- **Active Oversight**
  The OIC strives to engage leadership in promoting a culture of compliance throughout the University. Meeting weekly, the Chancellor's Cabinet identifies, communicates, and assesses emerging risks. These meetings may include periodic discussions touching on key elements of the Program, as well as the annual CRWP. Quarterly, the Chancellor's Cabinet, Chancellor's Council, and the Board, are provided updates of the annual CRWP, along with emerging compliance concerns.

  Since mid-March of 2020, the OIC has focused primarily on those compliance risks associated with the impact of the COVID-19 pandemic at UNT System Administration. During FY21, most operations continue to be conducted remotely. Chancellor Roe leads daily briefings with key stakeholders, keeping members of UNT SA informed of evolving federal, state, and local guidance. Having an informed and engaged organization remains key in continuing to effectively serve the mission of UNT World. This includes communicating an on-going awareness of and adherence to UNT System Regulation 02.1000; Compliance and Integrity Program, as well as the seven Federal Sentencing Guideline Objectives (FSGOs) listed below. The OIC is confident that leadership continues to recognize their key role in an effective Compliance and Integrity Program.

- **Policies, Standards, and Code of Conduct**

  UNT SA is committed to implementing and maintaining rules, regulations, and policies that facilitate the detection and prevention of unethical and illegal conduct throughout the UNT SA. The rules, regulations, and policies promote integrity, principled behavior, and compliance with federal, state, and local regulations, Regents rules, System regulations, and the standards of all applicable accrediting bodies.

  During FY21, the CCO continues to work closely with the UNT SA Policy Manager to fully implement the Policy Tech application and the policy review. This application will be used by all four institutions. The UNT SA Policy Manager and the CCO continue to collaborate in revising a policy review process that will be more expeditious and timelier. The migration of the policies is on-going. Policy management is a risk focus area with a great deal of upside to all institutional operations. All UNT World institutions, by the fall of 2021, will use the Policy Tech application. Policy management will continue to be a risk focus area for the campus FY22 CRWP.

- **Education and Training**

  All UNT SA employees must successfully complete mandated training related to the Program, as well as compliance elements that are key in the effective conduct of their position. Additionally, all UNT World employees must successfully complete training and be reminded twice a year of the ways to report suspected misconduct.

  From the Internal Audit Review of Senate Bill 20, UNT System Administration took steps to:

  o *Coordinate development of an annual compliance and ethics training curriculum; and*
  o *Establish a process to assign certain compliance and ethics training modules to designated employees, with tools in place to monitor and record compliance.*

  During FY21, working with UNT Dallas and the UNT flagship, UNT SA developed and implemented a compliance & ethics training module. Every UNT SA employee was charged with completing the annual course before the end of May. The completion percentage is being tracked on a monthly basis. As of the end of FY21, over 95% successfully completed the training, are being sent reminders with follow up from the CCO.

- **Open Communications**

  All UNT SA employees must not only be aware of, but also understand the rules that govern their respective roles and the values underpinning UNT World. Stakeholders, both, internal and external, need assurances that UNT SA is committed to ethical and responsible behavior. Communication is key to a culture of compliance.

  During FY21, the efforts put forth in addressing compliance education and training has required the active participation of Marketing & Communications. Throughout FY21, the OIC worked closely with Marketing & Communications to provide timely compliance information, including announcements regarding upcoming mandated training.

- **Monitoring and Auditing**

  UNT System Administration is committed to continuous monitoring by implementing internal controls that allow for early detection and remediation of non-compliance within an organization. Audit activities serve to help ensure that operational management has in place internal controls that do not improperly bias the assessment of business processes. *During FY21, the Office of Internal Audit met on several occasions with each institutional CCO to discuss:*

  - *the status of audits;*
  - *emerging risks impacting operations;*
  - *the risk assessment process; and*
  - *current and upcoming engagements by, both, private and public enterprises.*

  A number of audits took place during the FY21. The OIC has worked closely with key stakeholders to ensure audit finding are being addressed in a timely and thorough manner.

- **Enforcement Tools**

  UNT SA, through the Program, incorporates measures that help ensure employees understand the consequences of engaging in unethical behavior or participating in non-compliant activities. This includes procedures for enforcing and disciplining employees who violate compliance standards or fail to report non-compliant activities. Disciplinary provisions equitably enforced are critical to the credibility and integrity of the Program. *A review of investigation processes continues to be an on-going risk focus area to be included in the FY22 CRWP.*

- **Responsive Initiatives**

  Keeping in mind an effective compliance program should be scalable, affordable, feasible, and enforceable, the OIC evaluates the effectiveness of its Program and the seven FSGOs on a regular basis. This evaluation also examines emerging compliance challenges. Providing information to leadership that is relevant and timely is an on-going concern as the OIC continues its efforts to identify and communicate emerging compliance concerns to not only key stakeholders, but all UNT SA employees.

  For FY21, all aspects of the Program continue to be reviewed for gaps, with action plans being drafted in those areas in need of strengthening, including efforts to refine key components of the Compliance and Integrity Program. A draft compliance assessment survey is completed.

Summary of FY21 Compliance & Integrity Program

Compliance & Integrity Program Objectives	FY21 Summary & Highlights of Compliance Activities
Active Oversight	OIC is confident that leadership continues to recognize their role in an effective Compliance & Integrity Program. Meeting weekly, Cabinet assesses emerging risks. Quarterly, the Cabinet, Council, & Board, are provided updates.
Policies, Standards, & Code of Conduct	The Policy Manager & CCO are revising the policy review process. Effective policy management is an element with a great deal of upside to all institutional operations. Every UNT World institution is committed to using the Policy Tech application.
Education & Training	OIC coordinated the development & implementation of an annual compliance & ethics training curriculum & established a process to assign certain training modules to designated employees, with tools in place to monitor & record compliance.
Open Communications	OIC is working closely with Marketing & Communications in providing timely compliance information, including announcements regarding upcoming mandated training.
Monitoring & Auditing	OIC continues to work closely with key stakeholders to assist in successfully addressing audit findings & recommendations in a timely & thorough manner.
Enforcement Standards & Disciplinary Guidelines	OIC is reviewing investigation processes on an annual basis.
Response & Prevention	10 Trust Line Cases/2 Substantiated Cases/3 Closed Cases

CRWP FY21 Compliance Risk Work Plan (CRWP) End of Year Recap
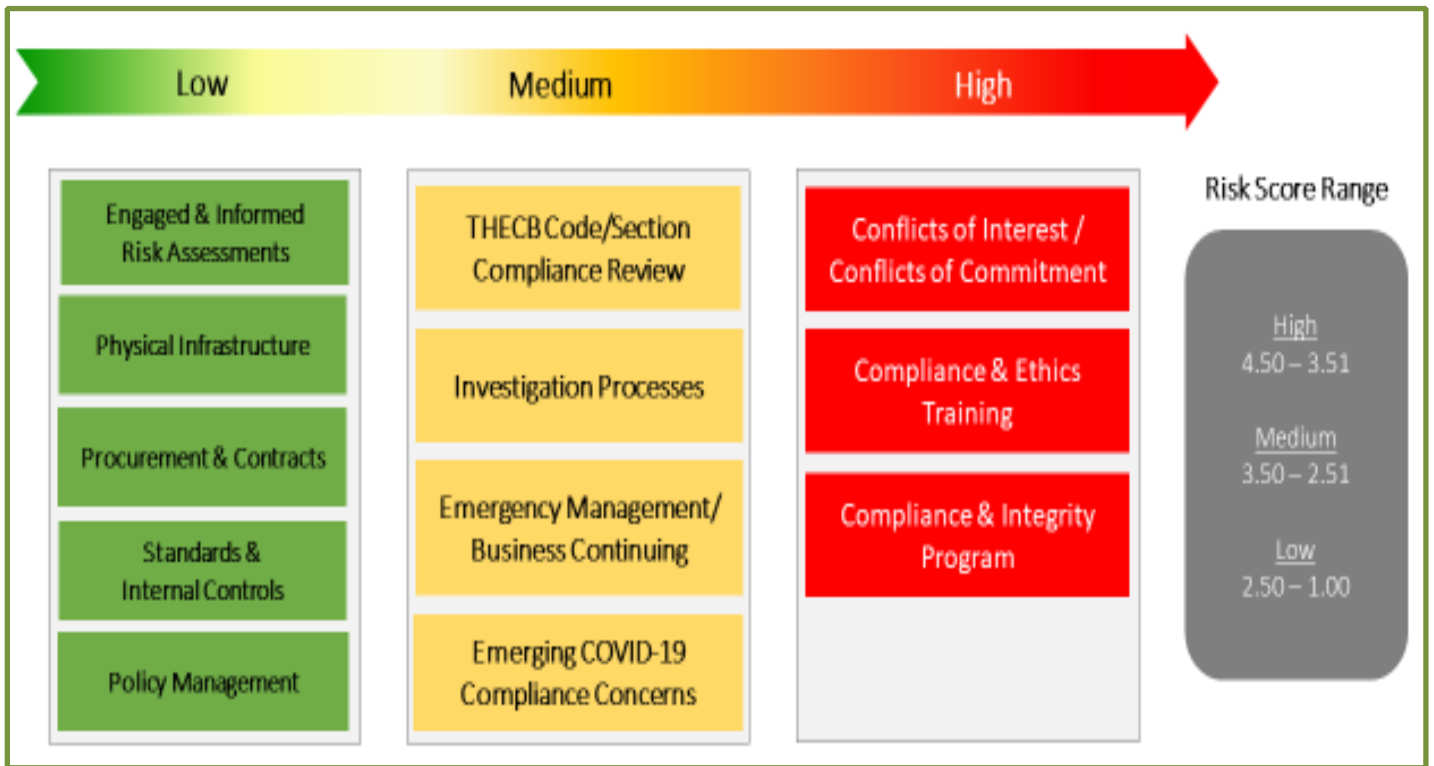
Comments:

The 12 UNT SA-specific compliance risks reviewed for FY21 are displayed in their respective categories. Details of each of the risks are available by contacting the OIC. An update of the efforts in addressing the three compliance risks categorized as "High" follows.

Risk Focus Area: Compliance and Integrity Program
Key Risk Category: Compliance
Key FSGO: Active Oversight

Commitment & Focus:

The Program was identified as a risk focus area and a management response to an SB 20 audit recommendation. The Offices of Compliance at UNT, UNT SA, and UNTD took a close at their respective policies, as well as the System regulation.

The Program is designed to ensure all individuals and enterprises conducting business on behalf or with UNT SA comply with applicable laws, Regents rules, and System regulations & policies.

  a. Ethics and Standards of Conduct;
  b. Conflict of Interest Disclosures;
  c. Background Checks;
  d. Dual/Outside Employment and Outside Activities;
  e. Prohibition Against Sexual Assault/Sexual Harassment;
  f. Reporting Suspected Misconduct;
  g. Rights & Responsibilities of Employees under the Program; and
  h. Fraud, Waste, and Abuse

Goal	Initiatives	Progress Q1	Q2	Q3	Q4	Comments
Enhance Effectiveness of Compliance & Integrity Program	• Review applicable federal & state regulations, THECB sections, Regent rules, System regulations & policies					**Regents Rules:** 04.120; Compliance & Ethics Programs
	• Identify gaps in System Administration regulations, policies, & processes					**System Regulations:** 02.100; Compliance & Integrity Program
	• Implement plans to address areas of improvement & establish metrics to track progress					**System Policies:** 02.403; Compliance & Integrity Program 02.403.2; Mandatory Compliance & Integrity Program Policies 02.403.4; Compliance & Integrity Program Education & Training 02.403.12; Assessment of Compliance & Integrity Program
	• Assess Effectiveness of Compliance & Integrity Program					Survey of Compliance/FSGO Questions Drafted & Under Review
	• Develop, maintain, & publish annual compliance calendar					Develop List of Compliance Requirements & Due Dates
	• Update Compliance website to be more interactive with links to additional resources					Review of other IHE Compliance websites Coordinate efforts with Communications & Marketing

The Program continues to be reviewed. Areas of that have shown improvement include:
- Tracking and monitoring of required compliance training with regular reports
- Improved communications of compliance requirements
- On-line dynamic forms for Dual/Outside Activities reporting
- Establishment of System Administration Policy Review Team
- Drafting of Program Survey
- Building more robust training portfolio
- On-going collaboration among institutional CCOs
- On-going engagement with key SA stakeholders

These are all areas that continue to be refined.

Other areas of the Program that can be improved include:
- Developing and publishing annual compliance calendar
- Updating the Compliance website
- Continued engagement of senior leadership

Risk Focus Area: Compliance and Ethics Training
Key Risk Category: Compliance
Key FSGO: Education & Training

Commitment & Focus:
The SB 20 audit also recommended a review of Compliance & Ethics training. Compliance & Ethics training is an essential element of the Program. In each of the areas previously mentioned, training is required. Additionally, the training must be taken and, more importantly, reviewed annually. This review must include an assessment of the training effectiveness.

All members of UNT SA were advised of the need to satisfactorily complete this annual training. Training completion rates were tracked.

This has provided an opportunity to have each institution build their own unique training requirements. That noted; it also provided all three institutions the opportunity to leverage the training already in place at other institutions.

Finally, in continuing to seek best practices that provided operational efficiency, UNT is serving as the Center of Excellence for the LMS Bridge platform. UNT Dallas and UNT SA can leverage the training expertise already in place at UNT. An SLA was drafted by Procurement to ensure that requirements and resources properly align.

Goal	Initiatives	Progress				Comments
		Q1	Q2	Q3	Q4	
Review & Update Compliance & Ethics Training	• Assess education & training efforts & resources • Tailor Compliance & Ethics Training module for UNTSA employees • Enhance quality & increase number of course offerings • Engage Communications & Marketing in messaging training requirements • Ensure mandatory training is assigned & tracked • Identify resources to translate course offerings to meet the needs of our diverse staff • Coordinate development & publishing of list of Compliance training modules offered in LMS • Collaborate with other institutions to share resources • Update Compliance website to be more interactive with links to additional resources					**Compliance Training Guidance** **System Regulation** 02.1005.4; Mandatory Education & Training All employees are required to complete ethics & compliance training, as well as training related to their positions There are emerging compliance topics, as well as other compliance training related to their positions UNTSA Compliance & Ethics Training module sent to UNTSA employees for completion by end of May Procurement Task Force drafted Bridge contract to serve all institutions with separate training library for each institution CCOs working together to ensure compliance requirements for training are properly vetted UNTSA &UNTD collaborating with guidance from UNT to build training library

Risk Focus Area: Conflicts of Interest/Conflicts of Commitment (COI/COC)
Key Risk Category: Compliance
Key FSGO: Active Oversight

Commitment & Focus:
Develop a Conflict of Interest Disclosure Statement form and procedures to ensure the following:

- Form and detailed instructions are distributed to all individuals required to report financial IAW TGC Section 2261.252 (b.).
- Each Disclosure Statement is reviewed for potential conflict of interest is identified and recorded.
- UNT System Procurement receives reports on potential conflicts of interest for reference during vendor selection procedures.
- Review applicable TEC Chapter 51. *Provisions Generally Applicable to Higher Education* sections to identify and address potential gaps in System Administration policies and processes.

ITSS and Procurement are leading a cross-functional team to implement a centralized system for the processing and maintenance of COI/COC disclosure. With all institutions agreeing upon the use Huron as an application that will serve the needs of many stakeholders, a phased implementation of an administrative COI/COC module is in the works.

Goal	Initiatives	Progress				Comments
		Q1	Q2	Q3	Q4	
Review & Update Compliance & Ethics Training	• Assess education & training efforts & resources • Tailor Compliance & Ethics Training module for UNTSA employees • Enhance quality & increase number of course offerings • Engage Communications & Marketing in messaging training requirements • Ensure mandatory training is assigned & tracked • Identify resources to translate course offerings to meet the needs of our diverse staff • Coordinate development & publishing of list of Compliance training modules offered in LMS • Collaborate with other institutions to share resources • Update Compliance website to be more interactive with links to additional resources					**Compliance Training Guidance** **System Regulation** 02.1005.4; Mandatory Education & Training All employees are required to complete ethics & compliance training, as well as training related to their positions There are emerging compliance topics, as well as other compliance training related to their positions UNTSA Compliance & Ethics Training module sent to UNTSA employees for completion by end of May Procurement Task Force drafted Bridge contract to serve all institutions with separate training library for each institution CCOs working together to ensure compliance requirements for training are properly vetted UNTSA &UNTD collaborating with guidance from UNT to build training library

The Huron COI (ICOI,RCOI) Module implementation is being managed by ITSS with engagement from key stakeholders, including each institutional CCO. It is anticipated that the project will be conducted over approximately a 21-week period.

Emerging Risks
Assessing the Impact of COVID-19 Moving Forward

This is third year this compliance risk assessment has been used in drafting and submitting a CRWP on behalf of UNT SA. Conducting a compliance risk assessment has been an on-going evolution throughout this FY. Because of the dynamic nature of the COVID-19 pandemic, compliance risk focus areas ran the gambit. To say it has and continues to be an evolving project, would be an understatement—especially this FY.

In putting together the information gathered through on-going meetings with key stakeholder, these risk focus areas were identified as the top five in the compliance risk assessment for FY22.

- Policy Management
- Investigation Processes
- ADA Accommodations
- *Compliance & Integrity Program*
- Records Retention Management

The italicized risk focus area indicates that it has been included in the FY22 Internal Audit Plan.

- Policy Management is listed to stress the dynamics of a comprehensive review of the policy review process, including using Policy Tech to its fullest capabilities.
- Investigations Processes is identified in order to review, refine,and document a host of investigations that impact the University.
- ADA Accommodations is fast becoming an issue with many facets that impact the entire campus community.
- The Compliance & Integrity Program is on the Internal Audit Plan for FY22.
- Record Retention Management is an area that is ripe for review.

Tracking five risk focus areas is two more than what was tracked and reported on for FY21. However, there are already processes in place that address two of these risk focus areas. The inclusion on two more risk focus areas should not be all that more onerous to report on.

The UNT SA Cabinet, in their role as the Executive Compliance Committee, has reviewed and endorsed the tracking and reporting of these five risk focus areas. Of course—as with any plan, the CRWP can be modified as new risks emerge or existing risks increase in their impact on UNT SA.

Summary of Proposed FY21 CRWP Risk Focus Areas

Compliance Targeted Areas	Commitment & Initiatives
Policy Management	UNT SA is committed to fostering a culture of compliance in accordance with the Compliance & Integrity Program, including the management of an effective policy library by: • continuing to migrate Regent rules, System regulations, & policies to Policy Tech • coordinating efforts with UNTSA, UNT, & UNTHSC • implementing standard templates • actively engaging a Policy Review Team • developing standard review protocols • coordinating with Communications to provide timely updates • updating the website for easier access, as well as informational resources & links
Investigation Processes	UNT SA is committed to the highest ethical standards in its internal/external dealings; whistleblower process that include multiple reporting options; effective investigations & report tracking; retaliation against those reporting potential instances of violation of laws, rules, policies, or improper activities.
ADA Accommodations	UNT SA is committed to establishing responsive programs for students & employees with special needs, providing oversight & timely case reviews. This is area of particular concern because of the impact the COVID-19 pandemic has had on evey member of the UNT SA community.
Compliance & Integrity Program	UNT SA is committed to effectively addressing compliance issues, tracking changes, conflicting or unclear or inappropriate requirements, internal audit recommendations, trained staff & adequate financial resources, reporting & oversight, consitent & equitable enforcement, adequate processes & controls, & robust training.
Records Retention Management	UNT SA is committed to having in place an effective records retention management program. To that end; the OIC is conducting a review of records retention management to include, but not limited to: policies & procedures; training; list of designated records retention managers; retention schedules; open record laws; access to information; confidentiality; destruction of records; & litigation production requests

Appendix A:
Compliance and Integrity Program Organizational Overview

System Administraton Compliance & Integrity Program (2021-2022)

System Administration Oversight and Accountability
Chancellor Lesa Roe

System Administration Chief Compliance Officer
Tim Willette

Chancellor's Cabinet/Institutional Executive Compliance Committee

Jamaica Chapple, *(Interim)* VC-Acad Affairs & Student Success		Dan Tenney, EVC-Finance/Chief Financial Officer		Steve Maruszewski, VC-Strategic Infrastructure
Sheraine Gilliam-Holmes, VC-HR & Chief HCO	Dannetta Bland, VC-Chief Diversity Officer	Jack Morton, VC-Govt Relations & Policy		Alan Stucky, VC-General Counsel
Chris McCoy, VC-Chief Information Officer	Ninette Caruso, Chief Audit Executive	Paul Corliss, VC-Chief Communications Officer		Tim Willette, Chief Compliance Officer

Compliance Coordinating Committee(s)

Employee Training & Development	Monitoring & Auditing	Investigations & Reporting

Principles of Community/Code of Conduct/Policies & Procedures/Standards

Day-to-Day Operations/Preventive & Corrective Efforts/Works In Progress/Emerging Concerns

Auditing Controls
Auditing Responsibilities

Operating Controls
Employee Responsibilities

Federal Sentencing Guidelines
1. Active Oversight
2. Policies, Standards, & Code of Conduct
3. Education & Training
4. Open Communications
5. Monitoring & Metrics
6. Enforcement Tools
7. Responsive Approaches

Oversight Controls
Compliance Responsibilities

Monitoring Controls
Supervisory Responsibilities