Appendix - May 14, 2020 Regular Board Meeting

FULL BOARD

Full Board Annual Calendar

Full Board Schedule - Annual, by Committee

STUDENT SUCCESS, ACADEMIC AND CLINICAL AFFAIRS
COMMITTEE

Academic Quality Measures

UNT Student Access & Success Measures

UNT Academic Quality Measures

UNT Research Measures

UNT Dallas Student Access & Success Measures

UNT Dallas Academic Quality Measures

UNTHSC Student Access & Success Measures

Academic Quality Measures Definitions Page

AUDIT AND FINANCE COMMITTEE

Quarterly Audit Report

UNTS Quarterly Report of Audit Activities Follow up Activity

Q2 Compliance Report

BR. UNTS Consolidated Compliance Report Q2

Annual UNTS Board of Regents Calendar by Committee

	FEBRUARY		MAY		AUGUST		NOVEMBER	
	Briefings	Action	Briefings	Action	Briefings	Action	Briefings	Action
FULL BOARD						Appoint the Chair and Vice Chair of the Board (odd numbered yrs only) (RR 03.202)		
AUDIT & FINANCE	Quarterly Financial Update - Fiduciary responsibility for mgmt of funds (RR 03.702); Quarterly Report of Audit Activities (RR 04.501.6.d); ERM Briefing - Oversight of Annual Risk Assessment Process (Charter); Annual review of Regents Rule 04.1200, Compliance and Ethics Program, and System Regulation 02.1000, Compliance and Integrity Program (RR 04.1204)	Acceptance of the Externally Audited CAFR and Independent Auditor's Report (A&F Charter)	Quarterly Financial Update - Fiduciary responsibility for mgmt of funds (RR 03.702); Quarterly Report of Audit Activities (RR 04.501.6.d)	Holiday Schedule (TX Gov Code 662.011); Annual Review of External Auditor: proposed audit scope and approach, independence, internal quality control program and results, audit engagement fees and terms of audit services (Charter)	Quarterly Financial Update - Fiduciary responsibility for mgmt of funds AND Key Financial Indicators (RR 03.702; 10.304.2); Quarterly Report of Audit Activities (RR 04.501.6.d)	Approval of Request to Exceed FTE Limitation - Consent (Article IX, Section 6.10 of Gen. App. Act); Approval of Intercomponent Transfers of State Appropriations - Consent; Annual Approval of Capital Improvement Plan (RR 11.206); Review and Approve Annual Consolidated Budget (RR 03.511; 10.204); Self-Insurance Fund Report - UNTHSC; Approval of the internal audit risk-based audit plan, budget, staffing, and organizational structure (Charter); Internal Audit Charter (RR 04.501.4(a)(i))	Quarterly Financial Update - Fiduciary responsibility for mgmt of funds (RR 03.702); Quarterly Report of Audit Activities (RR 04.501.6.d); Consolidated Annual Financial Report (RR 10.202); Ensure Mgmt of Endowment Funds (RR 09.303); Approve Investment Policies and Strategies, incl goals, model asset allocations, distribution policies, and performance benchmarks (RR 10.101; Charter); Endowment Policy Review (RR 09.303)	Tuition and Fees, if needed (RR 07.402; 07.403)
STRATEGIC INFRASTRUCTURE	Campus Master Plan Update - UNTD (Action is required for change - RR 11.103)				Annual Approval of Capital Improvement Plan (RR 11.206); Campus Master Plan Update UNTHSC (Action is required for change - RR 11.103)		Campus Master Plan Update - UNT (Action is required for change - RR 11.103)	
STRATEGIC & OPERATIONAL EXCELLENCE	Strategic Plan Review		Strategic Plan Review		Strategic Plan Review		Strategic Plan Year-End Review and Plan for Following Year - establish goals for each institution (RR 03.701.2a)	Approval of Strategic Plan as Presented with Accompanying Scorecard (per BOR Chair and Committee Chair)
STUDENT SUCCESS, ACADEMIC AND CLINICAL AFFAIRS		Faculty Development Leaves - RR 06.701 (Consent Agenda)		Approval of Admission Standards (RR 07.202; 07.204; 03.801 2f; 03.701.2d); Tenure Appointments (RR 06.1001; RR 03.802.5)	Regents Professorships (RR 06.304) - Consent			Confer Faculty Emeritus Appointments and Honorific Designations (RR 06.303) - Consent
EXECUTIVE SESSION - REGULARLY SCHEDULED ITEMS	Annual evaluation of Board Secretary (RR 03.207.1)		Tenure for Action (if applicable)		Title IX - Annual Briefing (SB 212); Chief Audit Executive Evaluation and Compensation; IT Security Briefing		Chancellor Performance Evaluation (RR 03.701.2b; RR 03.512; RR 03.802.2); Presidential Performance Evaluation - All Campuses (RR 04.910; 03.701.2c)	
INFORMATION	Quarterly Operations Report* (SOE, SI, A&F); Academic Measures Report - (SS, A&CA Charter); Quarterly Compliance Report (RR 04.1202.2 - A&F)		Quarterly Operations Report* (SOE, SI, A&F); Academic Measures Report - (SS, A&CA Charter); Quarterly Compliance Report (RR 04.1202.2 - A&F)		Quarterly Operations Report* (SOE, SI, A&F); Academic Measures Report - (SS, A&CA Charter); Quarterly Compliance Report (RR 04.1202.2 - A&F); Faculty Workload Report (RR 06.602 - shared via BE)		Quarterly Operations Report* (SOE, SI, A&F); Academic Measures Report - (SS, A&CA Charter); Quarterly Compliance Report (RR 04.1202.2 - A&F); Annual report of all licensing agreements (RR 08.107.2 - shared via BE, SS, A&CA); Annual report listing titles & brief description of each disclosure of IP (RR 08.107.1 - shared via BE, SS,A&CA); Affordability and Access Report (TEC 51.4031; RR 07.206 - shared via BE, SS,A&CA)	

*Quarterly Operations Report should include:
Endowment Report (RR 09.303)
Report on Investment Transactions (RR 10.102)

Audit & Finance Committee - Items "As Needed"

Regents Rule / Source	Requirement
03.802.4	Appoint Chief Internal Auditor (A.K.A. Chief Audit Executive)
03.904.1	Approve contracts in accord with Regent's Rules
03.904.3	Approve agreements with affiliated entities
03.1003	Approve legal settlements > $500K
04.1001.2	Adopt plan documents for benefit plans
04.1003.2	Adopt master plan for 457(f)
05.602	Approval of any changes to leave policy
06.1302	Declaration of financial exigency

Strategic Infrastructure Committee - Items "As Needed"

Regents Rule / Source	Requirement
03.804	Execute power of eminent domain
03.811	Authorize establishment of Research Park
09.106	Approve gifts of real property
09.203.1	Approve honorific namings
09.203.2	Approve building namings
09.203.3	Approve namings of areas within buildings in accordance with Regents Rules
09.203.5	Approve naming of streets on campus
09.203.6	Approve all naming of real property
11.302	Approve acquisition of real property and leased real property in accordance with Regents Rules
11.401	Exercise power of eminent domain
11.503.2	Approve taking final action that constitutes a "taking"

Student Success, Academic and Clinical Affairs Committee - Items "As Needed"

| Regents Rule / Source	Requirement
03.904.3	Approve contracts involving athletic conference membership
04.402	Confer honorary degrees
06.304	Award designation of "Regents Professor"
06.305	Approve named professorships & chairs
06.1001	Confer academic tenure or continuing appointment
06.1002	Confer Faculty Tenure
06.1102	Approve policy for periodic performance evaluation process for all tenured faculty
06.1201	Termination of tenured faculty
06.1203	Review recommendations for termination of tenured faculty
06.1209	Terminate tenured faculty due to financial exigency
06.211	Terminate tenured faculty due to discontinuation of academic program
07.202	Set admission standards for each institution
07.204	Approve changes to admissions standards
09.203.7	Approve naming of programs, institutes, centers, etc.
09.203.8	Approve naming of colleges & schools
09.602	Approve any System Advisory Council
09.603	Approve institution Advisory Council
SS, A & CA Charter	Approve new degree programs
SS, A & CA Charter	Review significant findings and recommendations received from SACSCOC and specialized accrediting agencies and implementation of recommendations and requirements
SS, A & CA Charter	Reviewing significant findings received from the American Bar Association (ABA) for the UNT Dallas College of Law
SS, A & CA Charter	Reviewing significant findings received from the Liaison Committee on Medical Education
SS, A & CA Charter	Reviewing of institution data and peer institution data regarding comparative status, performance, quality, and value

Student Access & Success Metrics
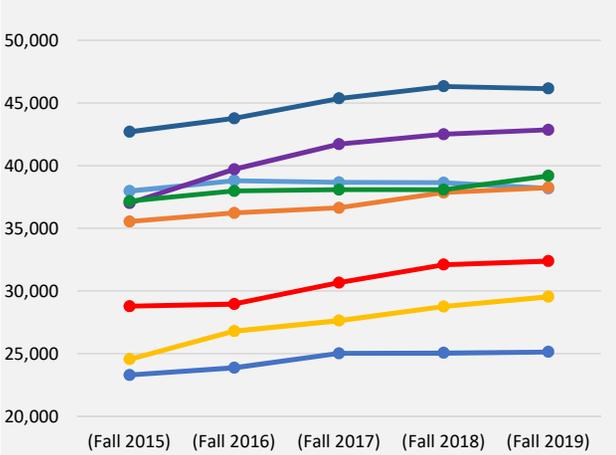
UNT | UNIVERSITY OF NORTH TEXAS®

Total Headcount Enrollment

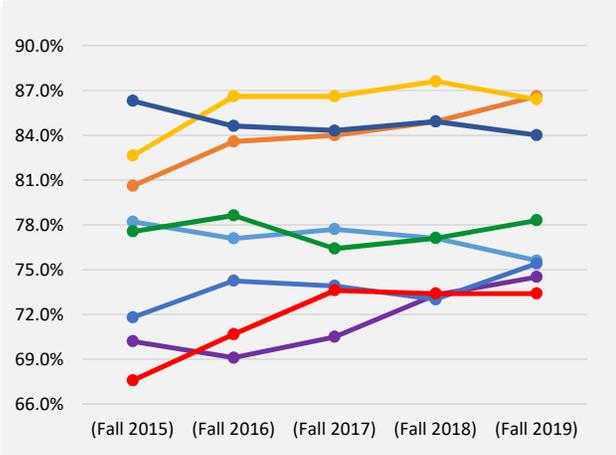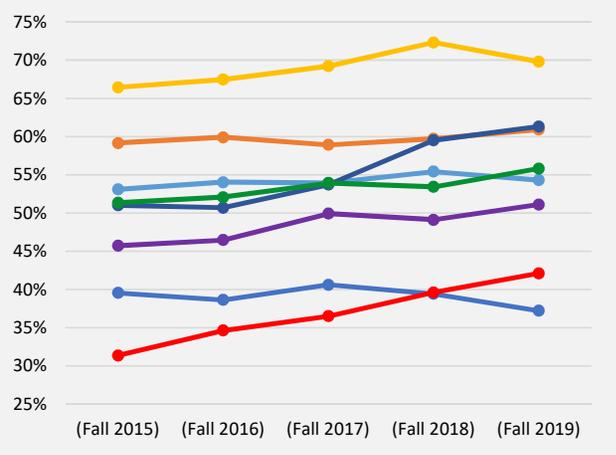## Total Full Time Student Equivalent
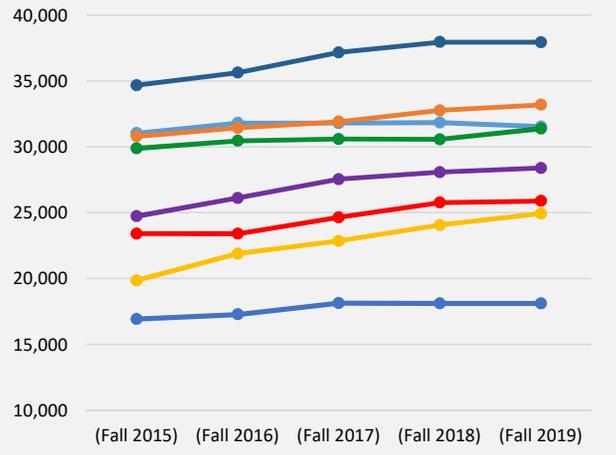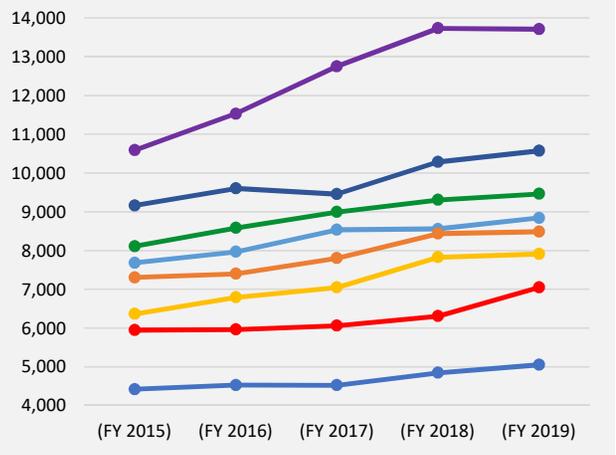
Time-to-Degree, Bachelors
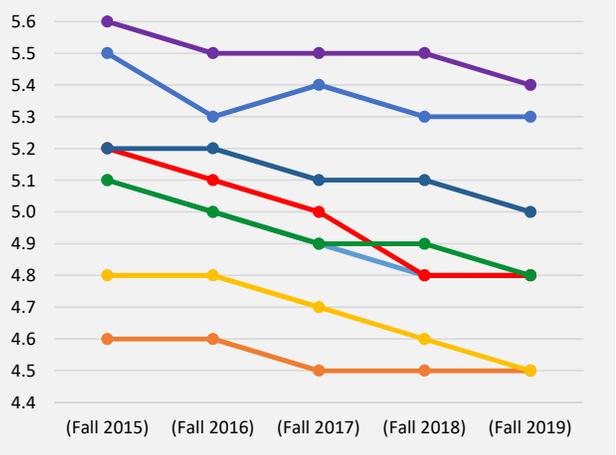
1st to 2nd Year Retention Rate
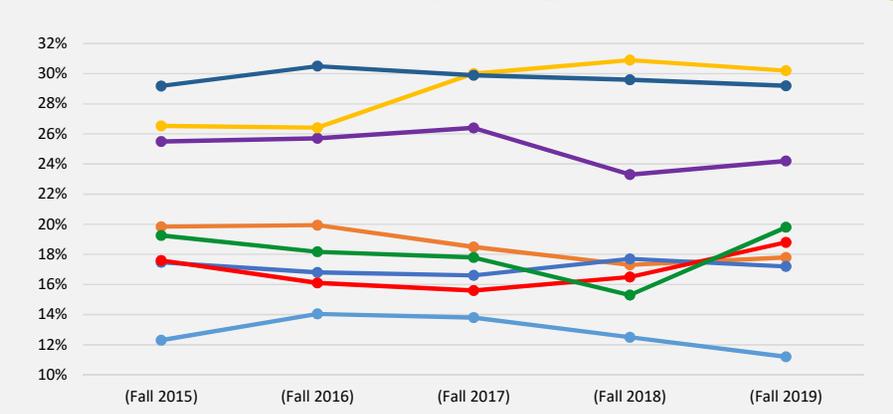
Six Year Graduation Rate
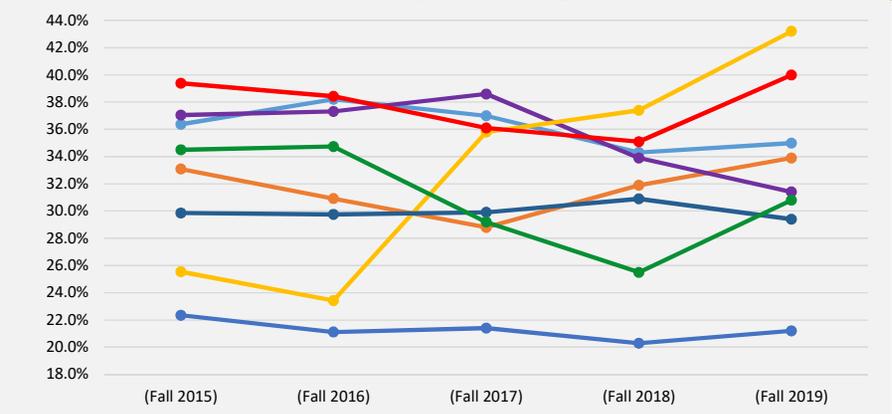
Total Degrees & Certificates Awarded

Legend:
- Texas State University
- Texas Tech University
- The University of Texas at Arlington
- The University of Texas at Dallas
- The University of Texas at El Paso
- The University of Texas at San Antonio
- University of Houston
- University of North Texas

Board of Regents
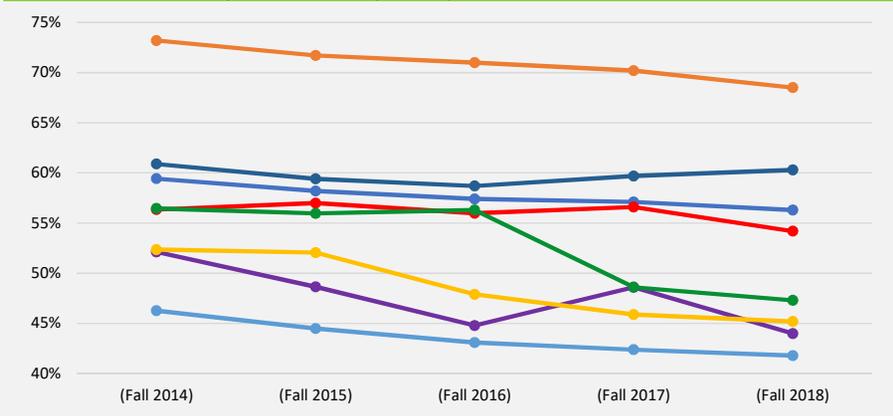May 2020

Academic Quality Metrics

First Time Students in Top 10% of High School Class
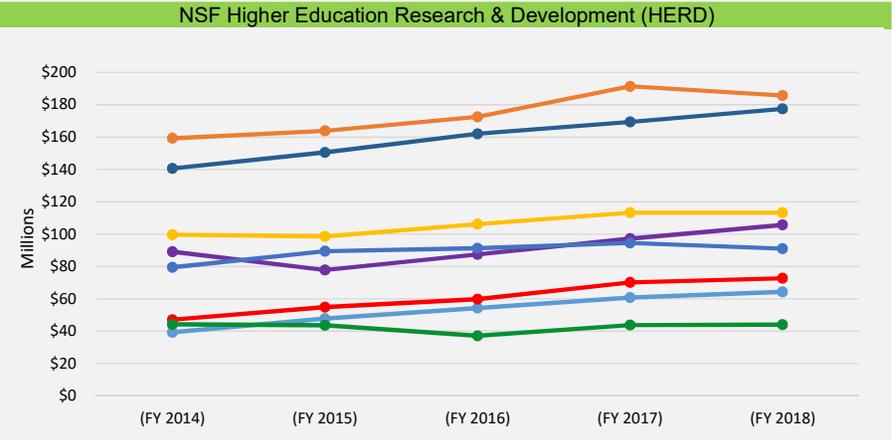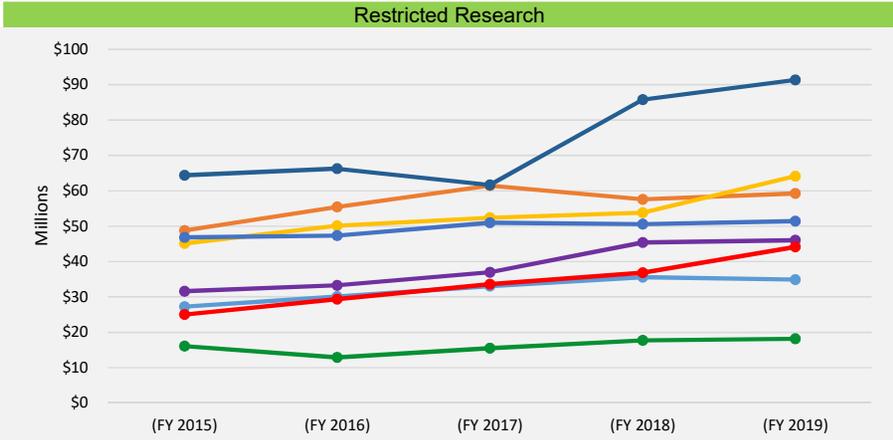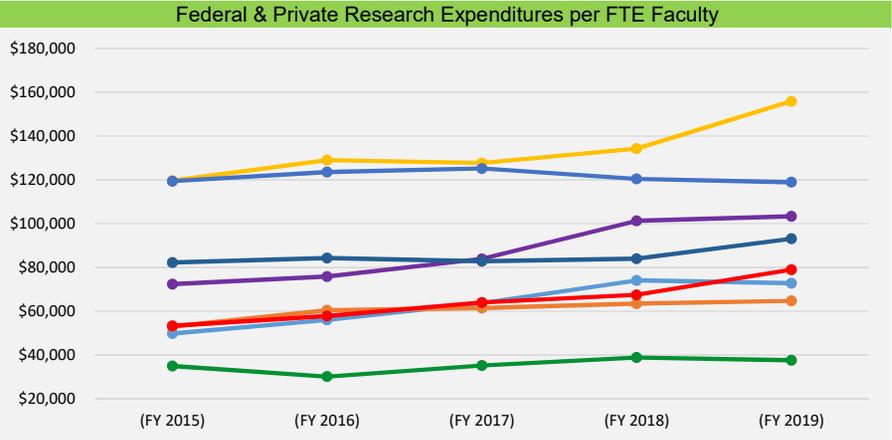

First Time Students in Top 11-25% of High School Class

Percentage FTE Teaching Faculty Who Are Tenured/Tenure Track

Legend:
- Texas State University
- Texas Tech University
- The University of Texas at Arlington
- The University of Texas at Dallas
- The University of Texas at El Paso
- The University of Texas at San Antonio
- University of Houston
- University of North Texas

Research Metrics

UNT UNIVERSITY OF NORTH TEXAS®

Total Research Expenditures

Federal & Private Research Expenditures per FTE Faculty

Restricted Research

NSF Higher Education Research & Development (HERD)

Legend:
- Texas State University
- Texas Tech University
- The University of Texas at Arlington
- The University of Texas at Dallas
- The University of Texas at El Paso
- The University of Texas at San Antonio
- University of Houston
- University of North Texas

Student Access & Success Metrics
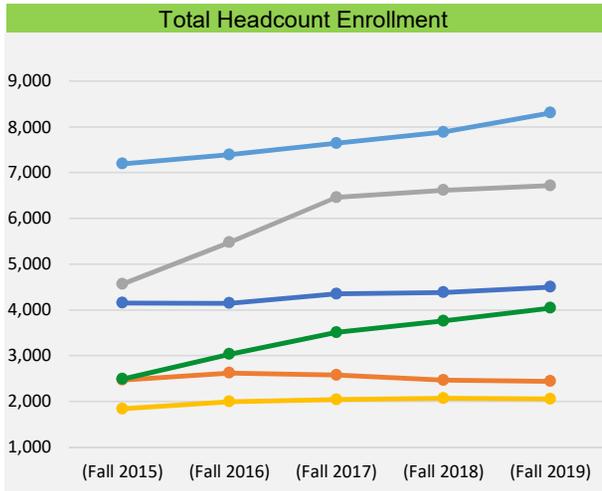
UNT|DALLAS
UNIVERSITY OF NORTH TEXAS AT DALLAS

Total Headcount Enrollment

Total Full Time Student Equivalent

Time-to-Degree, Bachelors

1st to 2nd Year Retention Rate

Total Degrees & Certificates Awarded

Legend:
- Texas A&M International University
- Texas A&M University-Central Texas
- Texas A&M University-San Antonio
- Texas A&M University-Texarkana
- University of Houston-Victoria
- University of North Texas at Dallas

Board of Regents
May 2019

Academic Quality Metrics

First Time Students in Top 10% of High School Class
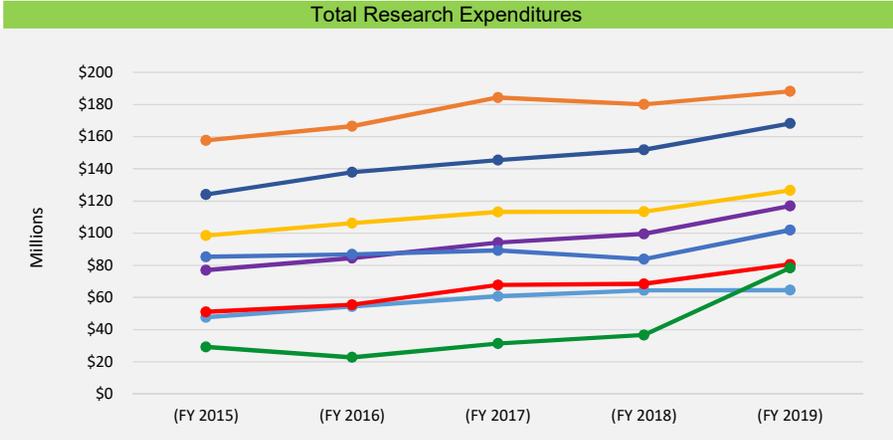

First Time Students in Top 11-25% of High School Class
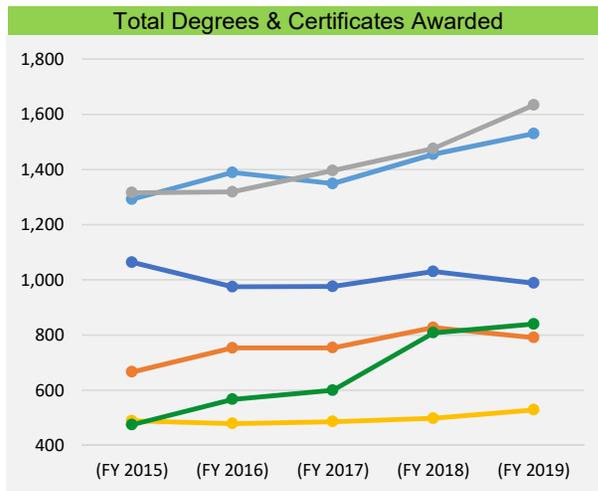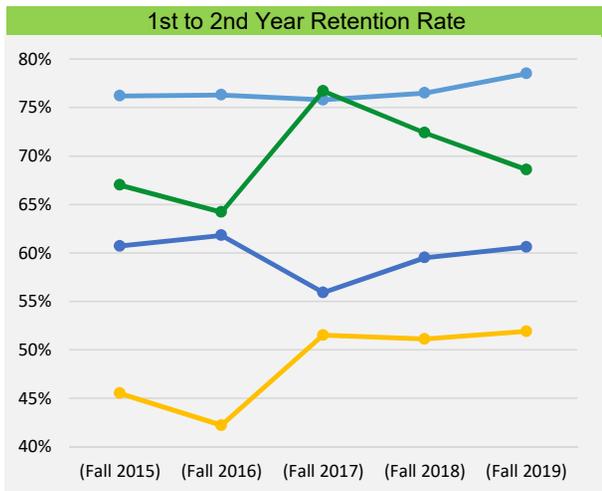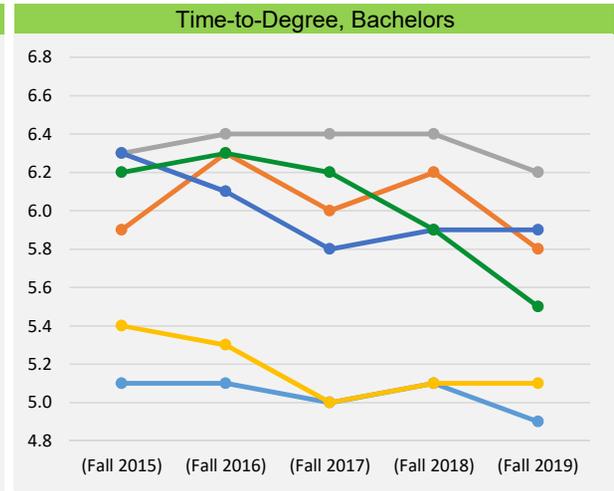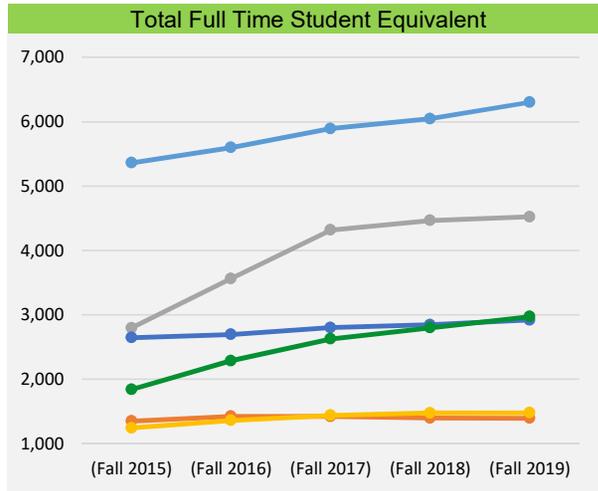

Percentage FTE Teaching Faculty Who Are Tenured/Tenure Track

Legend:
- Texas A&M International University
- Texas A&M University-Central Texas
- Texas A&M University-San Antonio
- Texas A&M University-Texarkana
- University of Houston-Victoria
- University of North Texas at Dallas

Board of Regents
May 2020
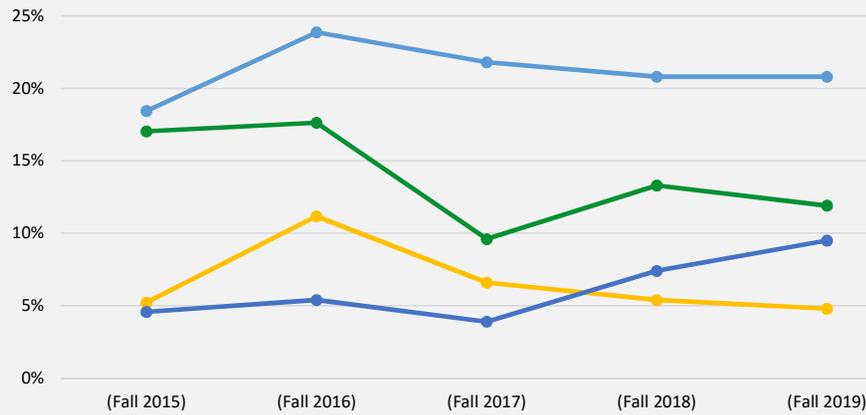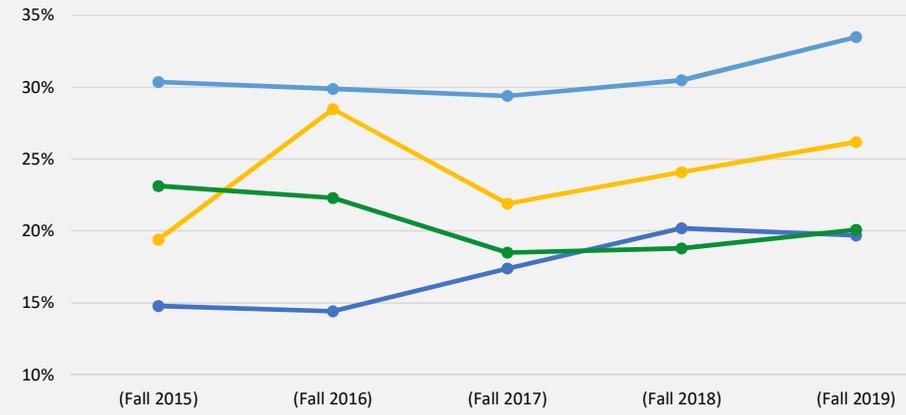
Student Success and Research Metrics

Total Headcount Enrollment

Total Degrees Awarded

Total Research Expenditures

Federal Research Expenditures per FTE
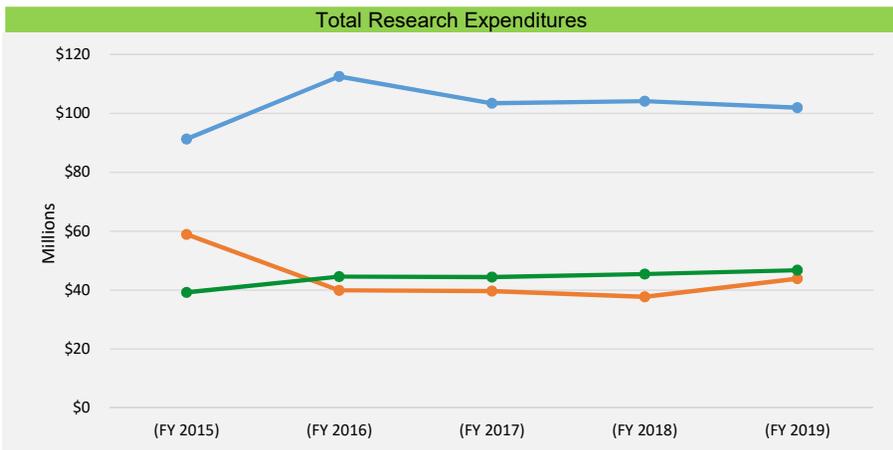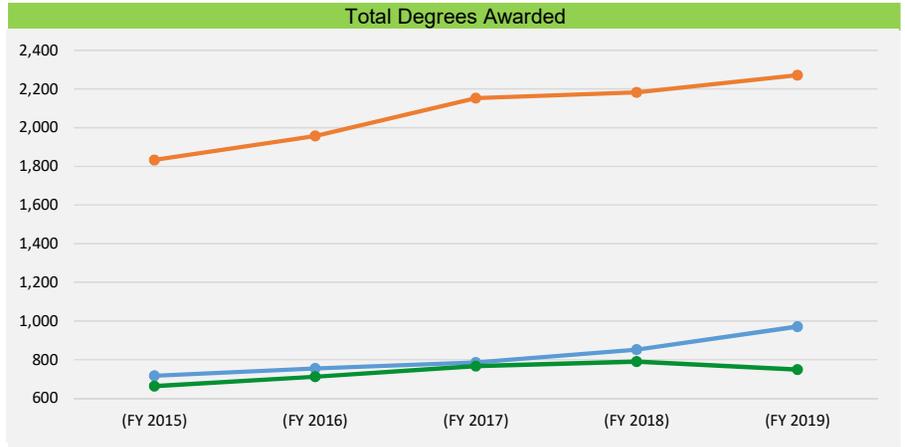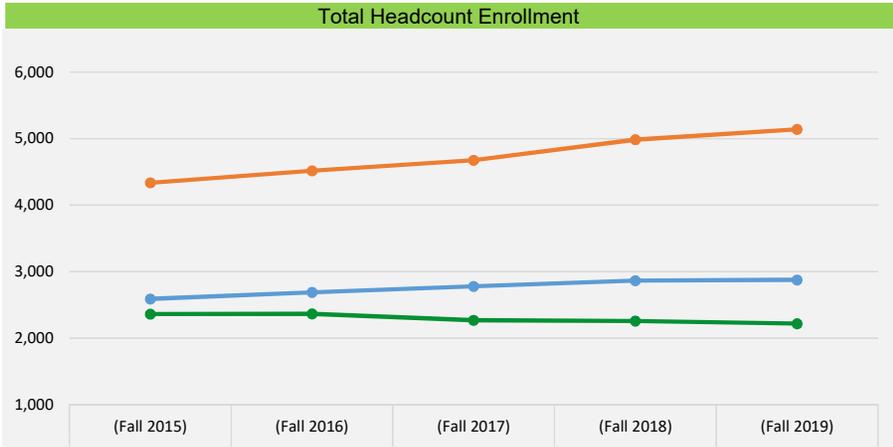
Texas A&M Health Science Center — Texas Tech University Health Sciences Center — University of North Texas Health Science Center

Board of Regents
May 2020

UNT SYSTEM ACADEMIC METRIC DEFINITIONS

Academic Quality:

First Time Students in Top 10% of High School Class
Definition: Percent of first-time undergraduates entering summer/fall class who ranked in the top 10 percent of their Texas public high school classes.
Source: THECB Accountability System

First Time Students in Top 11-25% of High School Class
Definition: Percent of first-time undergraduates entering summer/fall class who ranked in the top 11-25 percent of their Texas public high school classes.
Source: THECB Accountability System

Percentage FTE Teaching Faculty Who Are Tenured/Tenure Track
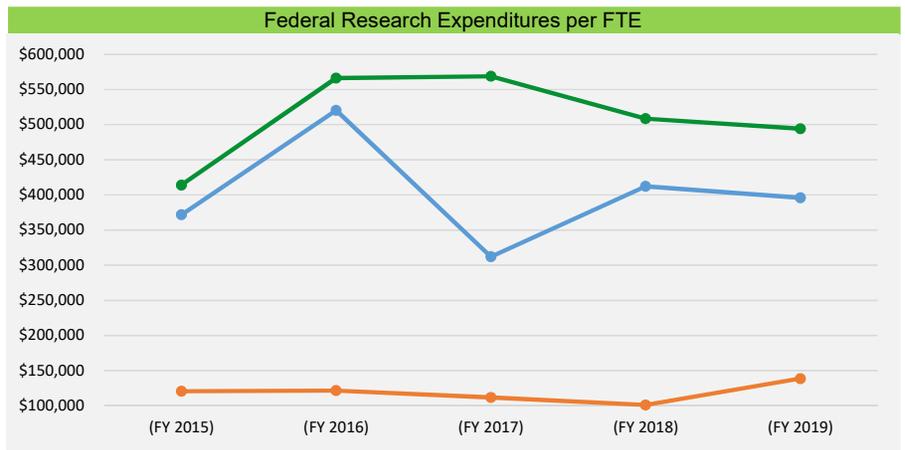Definition: Percent of all FTE faculty with teaching responsibility who are tenured or tenure-track. Faculty of all FTE faculty, rank codes 1 through 5, with teaching responsibility (appointment codes 01 and 02 and are reported during the fall semester as the teacher of record on the CBM004) who are tenured or tenure-track. Teaching assistants are not included, to match LBB measure.
Source: THECB Accountability System

Full Time Student Equivalent per Full Time Faculty Equivalent
Definition: Full-time student equivalents (FTSE) divided by full-time equivalent (FTE) faculty. Undergraduate full-time-student-equivalents (FTSE's) are calculated on 15 semester credit hours; master's, pharmacy, law, and other special profession FTSEs are calculated on 12 semester credit hours; optometry is calculated on 17 semester credit hours; and doctoral FTSEs are calculated on 9 semester credit hours. All semester credit hours, not just state-funded hours, are included. FTE (full-time equivalent) faculty are instructional faculty with rank codes 1-5 and appointment codes 01 and 02. Faculty must be teaching a course reported on the CBM004. Only the percent time in appointment codes 01 and 02 are counted. Faculty members without a salary are included. Teaching assistants are not included to match LBB measure.
Source: THECB Accountability System

UNT SYSTEM ACADEMIC METRIC DEFINITIONS

Student Access & Success

Total Headcount Enrollment
Definition: Unduplicated fall enrollment. Dual credit students are included in the total; flex entry students are not.
Source: THECB Accountability System

Total Full Time Student Equivalent
Definition: Fall semester credit hours (SCH), includes (funded and non-state-funded) calculated by dividing undergraduate/15, master's/12, doctoral/9, special-professional/12, and optometry/17.
Source: THECB Accountability System

Time-to-Degree, Bachelors
Definition: Average time in years spent to earn bachelor's degree.
Source: THECB Higher Education Almanac

First to Second Year Retention Rate
Definition: Percent of first-time entering, degree-seeking undergraduates enrolled in at least 12 SCH in the fall semester who are still enrolled at the same institution the following fall. All public and independent institutions are included in the persistence rate. This metric includes Social Security Number (SSN) changes submitted on the CBM00N.
Source: THECB Accountability System

Six Year Graduation Rate
Definition: First-time, full-time entering degree-seeking students who enrolled in a minimum of 12 SCH their first fall semester who graduated from the same institution after six academic years. This metric includes Social Security Number (SSN) changes submitted on the CBM00N. First-time determined by the "first-time student flag" on CBM001.
Source: THECB Accountability System

Total Degrees & Certificates Awarded
Definition: Number of degrees and certificates awarded, not including graduate certificates.
Source: THECB Accountability System

UNT SYSTEM ACADEMIC METRIC DEFINITIONS

Research:

Total Research Expenditures

Definition: Total research expenditures, including all subcategories of sources of funds (federal, state, private, and institutional). Restricted research expenditures are a subset of total research expenditures. To qualify as research, the primary purose of the contract, gift, or grant must be research.

Source: THECB Accountability System

Restricted Research Expenditures

Definition: Restricted research expenditures are a subset of total research expenditures. They are expenditures of funds on which an external entity (such as government agencies, philanthropic organizations, or individuals) has placed limitations and for which the use the use of the funds qualifies as research and development. To qualify as research, the primary purpose of the contract, gift, or grant must be research. The Coordinating Board collects restricted research expenditures for formula distribution or Research Development Funds (RDF) and as criterion for the National Research Universities Fund (NRUF). The collection of restricted research expenditures includes a public procedure assuring transparency and commonality between institutions. The definition of restricted research expenditures is more narrowly defined than restricted research expenditures that are listed in institutions' Annual Financial Reports (AFRs). Accountability system estimates for restricted research expenditures for institutions that are not participating in RDF or NRUF (e.g. Texas A&M University, The University of Texas at Austin, and health-related institutions) are research expenditures minus state appropriated funds, institutional funds, and indirect cost. Estimated restricted research expenditures and data from institutions AFR must not be compared directly with restricted research expenditures collected for RDF and NRUF.

Source: THECB Accountability System

Federal and Private Research Expenditures per FTE Faculty

Definition: Federal and private research expenditures divided by the number of fall tenured/tenure-track full-time-equivalent faculty (ranks 1-5) with teaching responsibilities (01 and 02).

Source: THECB Accountability System

Summary of Follow-up Activity

	Beginning Balance Open Recommendations (Past Due and Not Yet Due)	New Recommendations During this Quarter	Total Closed Recommendations During this Quarter	Total Current Open Recommendations	Open Recommendations (Not Yet Due)	Open Recommendations (Past Due)
UNTS	24	0	(5)	19	14	5
UNT	12	0	(12)	0	0	0
UNTHSC	15	0	(7)	8	8	0
UNTD	15	27	(25)	17	10	7
Total	66	27	(49)	44	32	12

Questions?

UNT System-Detail for Follow-up Activity

Audit Information	Finding and Recommendation(s)	Management Response(s)	Status	Date History
Auditor: Internal **Reporting Agency:** UNT System Internal Audit **Risk Category:** Government and Regulatory Compliance **Risk Level:** High **Report Name:** EIS Roles Based Access **Report Number:** 19-026 SYS **Component Institution:** UNT System **Department**: Administrative IT Services **Brief Description of Audit**: UNT System Internal Audit completed a review of EIS FS Roles Based Access. This audit was part of the Board of Regents approved FY2019 annual audit plan.	Segregation of Duties (SOD) is not documented. SOD interrelationships are not reviewed. Recommendation for Financial Analysis and Planning: 1.1.b. Document what constitutes SOD for EIS FS processes.	1b. FSS will work with the data owners to identify what constitutes SOD for EIS FS processes. **Party Responsible for Implementation**: Jim Gross, Senior Director of Financial Planning and Analysis at UNT System, manager for the Financial System Support (FSS) Team.	11 months past due July 16, 2019: This issue relies of the Smart ERP tool for resolution, for which verbal approval has been obtained. They are waiting until next Fiscal Year to purchase this service, and will be able to submit the requisition for Smart ERP once the budget is loaded in mid-August. Plans call for the initial scan to take place in October 2019, review results in November 2019, and refine SOD rules and procedures for three months, ending in February 2020. April 6, 2020: This issue is being extended until 12/15/2020 because evaluation of the first data scan provided more extensive SOD data than was originally thought, resulting in the need for FSS to evaluate the results from three scans, the last of which will take place in October 2020.	**Original Expected Implementation Date:** • May 31, 2019 **Revised Implementation Date:** 1) February 29, 2020 2) December 15, 2020

UNT System-Detail for Follow-up Activity

Audit Information	Finding and Recommendation(s)	Management Response(s)	Status	Date History
Auditor: Internal **Reporting Agency:** UNT System Internal Audit **Risk Category:** Government and Regulatory Compliance **Risk Level:** High **Report Name:** EIS Roles Based Access **Report Number:** 19-026 SYS **Component Institution:** UNT System **Department**: Administrative IT Services **Brief Description of Audit**: UNT System Internal Audit completed a review of EIS FS Roles Based Access. This audit was part of the Board of Regents approved FY2019 annual audit plan.	Segregation of Duties (SOD) is not documented. SOD interrelationships are not reviewed. Recommendation for Financial Analysis and Planning: 1.1.d. Establish a procedure to evaluate the output of the SOD automated solution, and take appropriate action to mitigate or accept any conflicts identified.	1d. FSS will create procedures to address potential SOD violations/exceptions. The procedures will include remediation, as necessary. **Party Responsible for Implementation**: Jim Gross, Senior Director of Financial Planning and Analysis at UNT System, manager for the Financial System Support (FSS) Team.	11 months past due July 16, 2019: This issue relies of the Smart ERP tool for resolution, for which verbal approval has been obtained. They are waiting until next Fiscal Year to purchase this service, and will be able to submit the requisition for Smart ERP once the budget is loaded in mid-August. Plans call for the initial scan to take place in October 2019, review results in November 2019, and refine SOD rules and procedures for three months, ending in February 2020. April 6, 2020: This issue is being extended until 12/15/2020 because evaluation of the first data scan provided more extensive SOD data than was originally thought, resulting in the need for FSS to evaluate the results from three scans, the last of which will take place in October 2020.	**Original Expected Implementation Date:** • May 31, 2019 **Revised Implementation Date:** 1) February 29, 2020 2) December 15, 2020

UNT System-Detail for Follow-up Activity

Audit Information	Finding and Recommendation(s)	Management Response(s)	Status	Date History
Auditor: Internal **Reporting Agency:** UNT System Internal Audit **Risk Category:** Government and Regulatory Compliance **Risk Level:** High **Report Name:** EIS Roles Based Access **Report Number:** 19-026 SYS **Component Institution:** UNT System **Department**: Administrative IT Services **Brief Description of Audit**: UNT System Internal Audit completed a review of EIS FS Roles Based Access. This audit was part of the Board of Regents approved FY2019 annual audit plan.	Terminated people have access to EIS information. Persons who transfer positions retain their access from previous roles. Recommendation for Financial Analysis and Planning: 5.1.c. Establish procedures whereby persons who transfer to another position, within or across UNT entities, have their EIS FS access removed and access appropriate to their new role granted.	1c. FSS will submit to the IT Priority and Planning (ITPP) committee to broaden the scope of the Role Removal program to capture employees that require a removal of access. **Party Responsible for Implementation**: Jim Gross, Senior Director of Financial Planning and Analysis at UNT System, manager for the Financial System Support (FSS) Team.	12 months past due May 7, 2019: The actions regarding employees that transfer will be wrapped into the SOD project they will be presenting in May. The goal is to get SOD maintained through role-based security. SOD issues are scheduled to be implemented 5/31/2019, so the implementation date of this issue has been changed to reflect that. July 22, 2019: The due date of this item is being extended due to the resource issues in ITSS and complexity of the scenarios involved in processing transfers. The automated transfer process will rely on the use of Smart ERP. August 6, 2019: FSS is actively working with ITSS to develop a report to identify employees that have moved departments so that their security permissions may be manually removed. We anticipate that to be in use by 9/1. At this point we have to investigate on a case by case basis what should actions should be taken. Since this is the first time this information will be made visible, we need to craft a business process that is understood and hopefully agreed upon by each campus. FSS will be working with ITSS and HRIS to refine the role removal process to make the process automatic.	**Original Expected Implementation Date:** • April 30, 2019 **Revised Implementation Date:** 1) May 31, 2019 2) July 31, 2020

UNT System-Detail for Follow-up Activity

Audit Information	Finding and Recommendation(s)	Management Response(s)	Status	Date History
Auditor: Internal **Reporting Agency:** UNT System Internal Audit **Risk Category:** Government and Regulatory Compliance **Risk Level:** High **Report Name:** Correcting Journal Entries Audit **Report Number:** 19-060 HSC **Component Institution:** UNT System **Department**: Finance & Planning **Brief Description of Audit:** UNT System Internal Audit completed a review of Correcting Journal Entries for UNT Health Science Center (UNTHSC). This audit was performed at the request of UNTHSC senior management.	UNTHSC PeopleSoft Financial budget balances cannot be relied upon to be balanced or accurate because the Office of Finance & Planning as well as the Office of Sponsored Programs use one-sided Budget Journal Entries for the transfer of budget amounts from one account to another. Such treatment also eliminates the trail to identify the incoming and outgoing budget transactions between the accounts. Recommendation for the Vice Chancellor of Finance in coordination with Associate Vice Chancellor of Budget & Planning and the Senior Director of Budget & Planning: 5.1.b. Where needed, collaborate with the Institution CFO's to re-train the Budget Office on the UNT System Budget Manual guidelines. During the training, discuss at a minimum the following: - Purpose of budget entry types - Implications of using incorrect budget entry types - Instructions on how to identify an error and the approach to fix the discrepancy.	1b. Management agrees to where needed, collaborate with the Institution CFO's to re-train the Budget Offices on the UNT System Budget Manual guidelines. During the training, discuss at a minimum the following: - Purpose of budget entry types - Implications of using incorrect budget entry types - Instructions on how to identify an error and the approach to fix the discrepancy. **Party Responsible for Implementation**: Jim Gross – Senior Director of Budget and Analytics	1 month past due April 2, 2020: Trainings will be postponed due to Covid-19. Training is ideally done in person at each Campus. This ensures the staff is at ease on home campus as well as strengthens the relationship between UNTS and the Component Budget Offices. However, due to Covid-19 online training is being assessed at this time.	**Original Expected Implementation Date:** • March 31, 2020 **Revised Implementation Date:** 1) July 31, 2020

UNT System-Detail for Follow-up Activity

Audit Information	Finding and Recommendation(s)	Management Response(s)	Status	Date History
Auditor: Internal **Reporting Agency:** UNT System Internal Audit **Risk Category:** Government and Regulatory Compliance **Risk Level:** High **Report Name:** Correcting Journal Entries Audit **Report Number:** 19-060 HSC **Component Institution:** UNT System **Department**: Finance & Planning **Brief Description of Audit**: UNT System Internal Audit completed a review of Correcting Journal Entries for UNT Health Science Center (UNTHSC). This audit was performed at the request of UNTHSC senior management.	UNTHSC PeopleSoft Financial budget balances cannot be relied upon to be balanced or accurate because the Office of Finance & Planning as well as the Office of Sponsored Programs use one-sided Budget Journal Entries for the transfer of budget amounts from one account to another. Such treatment also eliminates the trail to identify the incoming and outgoing budget transactions between the accounts. Recommendation for the Vice Chancellor of Finance in coordination with Associate Vice Chancellor of Budget & Planning and the Senior Director of Budget & Planning: 5.1.c. Work with Institutional CFO's to implement monitoring procedures to ensure ongoing compliance with UNT System Budget Manual guidelines.	1c. Management agrees to work with Institutional CFO's to implement monitoring procedures to ensure ongoing compliance with UNT System Budget Manual guidelines. **Party Responsible for Implementation**: Jim Gross – Senior Director of Budget and Analytics	1 month past due April 2, 2020: Trainings will be postponed due to Covid-19. Training is ideally done in person at each Campus. This ensures the staff is at ease on home campus as well as strengthens the relationship between UNTS and the Component Budget Offices. However, due to Covid-19 online training is being assessed at this time.	**Original Expected Implementation Date:** • March 31, 2020 **Revised Implementation Date:** 1) August 31, 2020

UNT Dallas-Detail for Follow-up Activity

Audit Information	Finding and Recommendation(s)	Management Response(s)	Status	Date History
Auditor: Internal **Reporting Agency:** UNT System Internal Audit **Risk Category:** Government and Regulatory Compliance **Risk Level:** High **Report Name:** UNT Dallas Financial Aid Processes Audit **Report Number:** 19-058 DAL **Component Institution:** UNT Dallas **Department:** Student Financial Aid & Scholarships **Brief Description of Audit:** UNT System Internal Audit completed a review of financial aid processes at UNT Dallas. Financial aid at UNT Dallas is administered by Student Financial aid & Scholarships (SFAS). SFAS works with current and prospective students to secure the necessary funding for their education at UNT Dallas. SFAS reports to the Vice President of Student Access and Success. This audit was performed using unallocated hours available on the FY2019 audit plan.	Student Financial Aid and Scholarships (SFAS) does not have a written Business Continuity Plan (BCP) for mission critical information resources. Recommendation for Garrick Hildebrand, Director of Financial Aid: 7.1.a. Develop a written Business Continuity Plan (BCP) for mission critical resources.	1a. Management agrees with this recommendation. Management will work with UNTD Risk Management Officer to development a Business Continuity Plan. **Party Responsible for Implementation**: Garrick Hildebrand, Director of Financial Aid	5 months past due January 17, 2020: The BCP plan is still being worked on but is in the stages of a draft report. Some areas will have to go through the Office Management Team before the BCP is finalized. A revised implementation date of May 31, 2020 is requested.	**Original Expected Implementation Date:** • December 1, 2019 **Revised Implementation Date:** 1) May 31, 2020

UNT Dallas-Detail for Follow-up Activity

Audit Information	Finding and Recommendation(s)	Management Response(s)	Status	Date History
Auditor: Internal **Reporting Agency:** UNT System Internal Audit **Risk Category:** Government and Regulatory Compliance **Risk Level:** High **Report Name:** College of Law Business Processes Audit **Report Number:** 19-021 DAL **Component Institution:** UNT Dallas **Department:** College of Law **Brief Description of Audit:** UNT System Internal Audit completed a review of various business processes within the UNT Dallas College of Law. The audit scope period was fiscal year 2019. This audit is part of the Board of Regents approved FY 19 annual audit plan. The audit objective was to review and determine if processes, procedures and controls related to cash handling, purchasing, travel expenses, asset inventory, and gifts complied with System and University policies.	University assets in the College of Law (COL) were not managed in compliance with UNT Dallas Policy 11.005. Recommendation for Felecia Epps, Dean of the College of Law: 1.1.a. Identify an individual at the College of Law to be the designated liaison with UNT Dallas Property Control.	As liaison, Dean Valencia will be responsible for the overall property control at the College of Law. Dean Valencia will contact the UNT Dallas Property Control Manager by January 13, 2020 to plan further steps. **Party Responsible for Implementation**: Reynaldo Valencia, Associate Dean for Administration and Finance	4 months past due IA reached out to the COL several times, but we were not provided any information to validate or a status update prior to the required BOR submission deadlines.	**Original Expected Implementation Date:** • January 13, 2020 **Revised Implementation Date:** 1) See Status

UNT Dallas-Detail for Follow-up Activity

Audit Information	Finding and Recommendation(s)	Management Response(s)	Status	Date History
Auditor: Internal **Reporting Agency:** UNT System Internal Audit **Risk Category:** Government and Regulatory Compliance **Risk Level:** Moderate **Report Name:** College of Law Business Processes Audit **Report Number:** 19-021 DAL **Component Institution:** UNT Dallas **Department:** College of Law **Brief Description of Audit:** UNT System Internal Audit completed a review of various business processes within the UNT Dallas College of Law. The audit scope period was fiscal year 2019. This audit is part of the Board of Regents approved FY 19 annual audit plan. The audit objective was to review and determine if processes, procedures and controls related to cash handling, purchasing, travel expenses, asset inventory, and gifts complied with System and University policies.	The College of Law does not have a written Emergency Preparedness Plan. Recommendation for Felecia Epps, Dean of the College of Law: 6.1.a. Develop an Emergency Preparedness Plan for the College of Law's new location at 106 South Harwood Street.	1a. Dean Valencia will work with Risk Management Services and the UNT Dallas Police to develop an Emergency Preparedness Plan. The plan will include a schedule for emergency drills. **Party Responsible for Implementation**: Reynaldo Valencia, Associate Dean for Administration and Finance	3 months past due IA reached out to the COL several times, but we were not provided any information to validate or a status update prior to the required BOR submission deadlines.	**Original Expected Implementation Date:** • February 15, 2020 **Revised Implementation Date:** 1) See Status

UNT Dallas-Detail for Follow-up Activity

Audit Information	Finding and Recommendation(s)	Management Response(s)	Status	Date History
Auditor: Internal **Reporting Agency:** UNT System Internal Audit **Risk Category:** Government and Regulatory Compliance **Risk Level:** Moderate **Report Name:** College of Law Business Processes Audit **Report Number:** 19-021 DAL **Component Institution:** UNT Dallas **Department:** College of Law **Brief Description of Audit:** UNT System Internal Audit completed a review of various business processes within the UNT Dallas College of Law. The audit scope period was fiscal year 2019. This audit is part of the Board of Regents approved FY 19 annual audit plan. The audit objective was to review and determine if processes, procedures and controls related to cash handling, purchasing, travel expenses, asset inventory, and gifts complied with System and University policies.	The College of Law does not have a written Emergency Preparedness Plan. Recommendation for Felecia Epps, Dean of the College of Law: 6.1.b. Review the revised plan with Risk Management Services, UNT Dallas Police department and College of Law personnel.	1b. Dean Valencia will work with Risk Management Services and the UNT Dallas Police to develop an Emergency Preparedness Plan. The plan will include a schedule for emergency drills. **Party Responsible for Implementation**: Reynaldo Valencia, Associate Dean for Administration and Finance	3 months past due IA reached out to the COL several times, but we were not provided any information to validate or a status update prior to the required BOR submission deadlines.	**Original Expected Implementation Date:** • February 15, 2020 **Revised Implementation Date:** 1) See Status

UNT Dallas-Detail for Follow-up Activity

Audit Information	Finding and Recommendation(s)	Management Response(s)	Status	Date History
Auditor: Internal **Reporting Agency:** UNT System Internal Audit **Risk Category:** Government and Regulatory Compliance **Risk Level:** Moderate **Report Name:** College of Law Business Processes Audit **Report Number:** 19-021 DAL **Component Institution:** UNT Dallas **Department:** College of Law **Brief Description of Audit:** UNT System Internal Audit completed a review of various business processes within the UNT Dallas College of Law. The audit scope period was fiscal year 2019. This audit is part of the Board of Regents approved FY 19 annual audit plan. The audit objective was to review and determine if processes, procedures and controls related to cash handling, purchasing, travel expenses, asset inventory, and gifts complied with System and University policies.	The College of Law does not have a written Emergency Preparedness Plan. Recommendation for Felecia Epps, Dean of the College of Law: 6.1.c. Prepare and drill College of Law for emergency type events.	1c. Dean Valencia will work with Risk Management Services and the UNT Dallas Police to develop an Emergency Preparedness Plan. The plan will include a schedule for emergency drills. **Party Responsible for Implementation**: Reynaldo Valencia, Associate Dean for Administration and Finance	3 months past due IA reached out to the COL several times, but we were not provided any information to validate or a status update prior to the required BOR submission deadlines.	**Original Expected Implementation Date:** • February 15, 2020 **Revised Implementation Date:** 1) See Status

UNT Dallas-Detail for Follow-up Activity

Audit Information	Finding and Recommendation(s)	Management Response(s)	Status	Date History
Auditor: Internal **Reporting Agency:** UNT System Internal Audit **Risk Category:** Government and Regulatory Compliance **Risk Level:** Moderate **Report Name:** Residence Hall Key Card Access **Report Number:** 19-055 DAL **Component Institution:** UNT Dallas **Department:** Safety and Emergency Services **Brief Description of Audit:** UNT System Internal Audit completed a review of the UNT Dallas Residence Hall Key Card Access process. Also included in this audit was Wisdom Hall's fire safety and emergency preparedness and a review of access controls for other restricted areas on campus. This audit was part of the Board of Regents approved FY2019 annual audit plan. The objective of this audit was an assessment of the security posture and readiness of these systems.	A Service-Level Agreement (SLA) with the vendor supporting the access system did not exist. Recommendation for the Office of IT Director: 3.1.a. Establish a service-level agreement with the vendor supporting the door access system that outlines uptime expectations, updates, patches, and a maintenance schedule and submit for contract approval.	1a. We agree with this recommendation and will include these service-level agreement terms in the contract addendum for the new card access system with the requisition. **Party Responsible for Implementation**: Kevin Rocha, Office of IT Director	7 months past due September 27, 2019: IT Director Kevin Rocha has been attempting to get an SLA in place with DAC, however he is very unpleased with their responsiveness and is considering switching to a new vendor because of it. He will continue to try to get an SLA with DAC or push to select a new vendor and get an SLA with them. Revised due date is 05/31/20 due to issues with response time and delays from the vendor regarding the establishment of a service level agreement and considering switching to a new support vendor. This information was sent to CFO Jim Main on September 27, 2019.	**Original Expected Implementation Date:** • September 30, 2019 **Revised Implementation Date:** 1) May 31, 2020

UNT Dallas-Detail for Follow-up Activity

Audit Information	Finding and Recommendation(s)	Management Response(s)	Status	Date History
Auditor: Internal **Reporting Agency:** UNT System Internal Audit **Risk Category:** Government and Regulatory Compliance **Risk Level:** Moderate **Report Name:** Residence Hall Key Card Access **Report Number:** 19-055 DAL **Component Institution:** UNT Dallas **Department:** Safety and Emergency Services **Brief Description of Audit:** UNT System Internal Audit completed a review of the UNT Dallas Residence Hall Key Card Access process. Also included in this audit was Wisdom Hall's fire safety and emergency preparedness and a review of access controls for other restricted areas on campus. This audit was part of the Board of Regents approved FY2019 annual audit plan. The objective of this audit was an assessment of the security posture and readiness of these systems.	The username and/or ID number in the door access software system did not match the data in the central database. Recommendation for the Office of IT Director: 4.1.a. Create a direct feed from EIS to populate users in the door access software system or train and establish procedures for the ID Center staff to manually populate users in the door access system with data that parallels EIS.	1a. A direct feed will be part of the new card access system as much as possible. 3rd party vendor access will need to be a manual feed still in some cases. We are correcting the user data identified during the audit and the ID Center staff will continue to cross-check new user data with DS Tools. **Party Responsible for Implementation**: Kevin Rocha, Office of IT Director	7 months past due September 27, 2019: IT Director Kevin Rocha, a direct feed from EIS will be setup on the install of the new software, however there are issues with contract. The requisition is currently on the desk of the UNT Dallas President. Once that is approved, the project can move forward to purchase the new vendor and then begin the installation process. The revised due date is 07/31/20 due to extended negotiations with new vendor. Once the new system is installed a direct feed from EIS will load all of the user data. This information was sent to CFO Jim Main on September 27, 2019.	**Original Expected Implementation Date:** • September 30, 2019 **Revised Implementation Date:** 1) July 31, 2020

Background Report

Title: UNT System Consolidated Quarterly Compliance Report December 2019 through February 2020

Background:

This report represents the quarterly compliance actions 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 December 1, 2019 through February 29, 2020. Regular reporting of compliance actions 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 actions 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.

Vice Chancellor for Finance

Legal Review:

This item has been reviewed by General Counsel.

Vice Chancellor/General Counsel

Schedule: N/A

No action required. Information only.

Submitted by:

_____
Tim Willette
UNT System Chief Compliance Officer

_____
Chief Audit Executive

_____
Chancellor

Attachments Filed Electronically:

- UNT System Consolidated Quarterly Compliance Report: December 2019 – February 2020

UNT System Administration
Office of Institutional Compliance
FY20 Q2 Report

Board of Regents Meeting
May 14th, 2020

Introduction

Each Chief Compliance Officer (CCO) reports to the Board of Regents, at a minimum, quarterly. These reports update Board members on the effectiveness of the Compliance and Ethics Program at each of the institutions. This quarterly report provides a summary and highlights of compliance activities that have taken place during the second quarter (Q2) of Fiscal Year 2020 (FY20) at UNT System Administration. It is divided into four sections and two appendices. There are sections in the narrative that are bolded to allow readers to focus on key components of the report.

- **Introduction**
- **Executive Summary**
- **Investigations**
- **Compliance Risk Work Plan Updates**
- **Emerging Risks**

At UNT System Administration, the Office of Institutional Compliance (Office) provides centralized oversight and substantive support toward the ethical, lawful, and responsible conduct of all operations. The Office identifies and analyzes a wide range of existing and emerging compliance concerns. It works closely with key administration stakeholders to foster a culture of compliance that supports the mission of the University. This requires a resilient partnership between the CCO and each of the organizational leaders who serve on the Chancellor's Cabinet. The organizational structure of the UNT System Administration Compliance and Integrity Program is provided in Appendix A.

Compliance and Integrity Program

The Office of Institutional Compliance at UNT System Administration is responsible for maintaining an effective Compliance and Integrity Program that includes, but is not limited to: 1) serving as a resource for addressing compliance concerns and communicating 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 policies and procedures; 5) assisting in identifying and monitoring training requirements; and 6) helping with the implementation of corrective actions, as appropriate. The Compliance and Integrity Program identifies, assesses, monitors, oversees, and helps ensure that all UNT System Administration operations comply with applicable laws and regulations, Regents Rules, System Regulations, and System Administration policies. The CCO is responsible for the effective implementation and management of the Compliance and Integrity Program.

Executive Summary

During FY20 Q2, the CCO continued reviewing and assessing the effectiveness of the System Administration Compliance and Integrity Program per the guidance provided in UNT System Regulation 02.1000; *Compliance and Integrity Program*, dated 10/17/2017. Referencing the seven Federal Sentencing Guideline Objectives (FSGOs) listed below, the following efforts are serving to sustain, enhance, and improve the UNT System Administration Compliance and Integrity Program. Again, noteworthy efforts are **bolded**.

- **Active Oversight**
  Every member of the Chancellor's Cabinet is kept up-to-date on the overall effectiveness of the Compliance and Integrity Program for UNT System Administration. The CCO provides quarterly updates of the annual Compliance Risk Work Plan to this senior leadership team. Meeting weekly, the members of the Chancellor's Cabinet are actively engaged in identifying, communicating, and assessing emerging risks. **Currently, this have evolved into a "Daily Tag" that serves to coordinate collaborative responses to emerging risks brought about by the universal impact of the COVID-19 virus pandemic.**

This includes identifying evolving compliance requirements. The commitment to fostering a culture of compliance is pervasive throughout all UNT System Administration operations. **In their roles as leaders, each Cabinet member is actively encouraging all members of the UNT System to comply with the guidance from federal, state, and local government agencies.** Each member of the Chancellor's Cabinet has been provided an update of the Compliance Risk Work Plan for FY20 Q2.

- **Policies, Standards, and Code of Conduct**
  UNT System Administration is committed to the implementation and maintenance of regulations and policies that facilitate the detection and prevention of unethical and illegal conduct throughout the UNT System. These 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 FY20 Q2, all UNT System Administration regulations and policies are being reviewed as part of the Policy Management Initiative. Highlights of the efforts during this period are provided as progress of the annual Compliance Risk Work Plan risk focus area. UNT System Administration continues to transition to a new policy management system. This includes collaborative engagement among several of the institutional to draft and implement a standard policy template.**

- **Education and Training**
  All UNT System Administration employees must successfully complete training related to the Compliance and Integrity Program, as well as compliance elements that are key in the effective conduct of their position. Additionally, all employees must be educated and periodically made aware of the ways to report suspected misconduct. **During this FY20 Q2, a new Learning Management Service (LMS) application was implemented. Additionally, UNT System employees were advised of a requirement to successfully complete two training modules. More information about this training requirement are provided as progress of the annual Compliance Risk Work Plan.**

- **Open Communications**
  All UNT System Administration 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 System Administration is committed to ethical and responsible behavior. Communication is key to a culture of compliance. **During FY20 Q2, members of the UNT System Administration community were notified of training requirements, provided daily COVID-19 virus pandemic updates, and encouraged to tap into a host of resources to address concerns about working remotely and sheltering in place.**

- **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 FY20 Q2 Internal Audit performed several audits of UNT System Administration operations. Information about these audit reports are provided by the Chief Audit Executive.**

- **Enforcement Tools**
  UNT System Administration, through the Compliance and Integrity 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 Compliance and Integrity Program. Information about investigations. **During this reporting period information about investigations are provided as progress of the annual Compliance Risk Work Plan included in this report.**

- **Responsive Initiatives**
  Keeping in mind that the Compliance and Integrity Program should be scalable, affordable, feasible, and enforceable, the UNT System Administration Office of Institutional Compliance evaluates the effectiveness of its Compliance and Integrity Program and the seven FSGOs on a regular basis. This evaluation also examines emerging compliance challenges. During FY20 Q2, a number of areas were reviewed to identify the need to incorporate new internal controls or enhance existing internal controls. **Providing information to leadership that is relevant and timely is an on-going concern as this Office continues its efforts to identify and communicate emerging compliance to not only key stakeholders, but all members of the UNT System community. The COVID-19 virus pandemic has served to assist in this objective.**

Investigations

On a monthly basis, the Chancellor receives an investigation summary log from each UNT institutions. The information is reviewed focusing in on any categorical trends among the institutions. As of March 31st, 2020, the UNT System Administration Office of Institutional Compliance has eight open Trust Line cases. **Below is a summary of Trust Line activities for the FY20 Q2 that includes data from the month of March. Including the data for March serves to recognize the impact of the COVI-19 virus pandemic on operations. It should be noted that immediate action has been taken to address the two Trust Line concerns about "Environmental/Safety Matters."**

Investigation Summary Log (December 2019 - March 2020)						
Source						
Type/Period	**12-2019**	**01-2020**	**02-2020**	**03-2020**	**YTD**	**%**
Anonymous	1	0	1	3	**5**	100%
Identified	0	0	0	0	**0**	0%
Intake Method						
Type/Period	**12-2019**	**01-2020**	**02-2020**	**03-2020**	**YTD**	**%**
TrustLine Web	1	0	1	3	**5**	100%
Issue Type Summary (If Mulitple, Predominate Cited)						
Type/Period	**12-2019**	**01-2020**	**02-2020**	**03-2020**	**YTD**	**%**
Environmental/Safety Matters	0	0	0	2	**2**	40%
Misuse of Resources	1	0	0	0	**1**	20%
Inappropriate Communications	0	0	0	1	**1**	20%
Other HR Concerns	0	0	1	0	**1**	20%
Outcome						
Type/Period	**12-2019**	**01-2020**	**02-2020**	**03-2020**	**YTD**	**%**
In Progress	1	0	1	3	**5**	100%
Closed	**0**	**0**	**0**	**0**	**0**	0%
Open	**1**	**0**	**1**	**3**	**5**	100%

Compliance Risk Work Plan

The UNT System Administration Office of Institutional Compliance, drafted proposed mitigation plans for each of the risk focus areas identified on its FY20 Compliance Risk Work Plan. This plan was approved by the Chancellor's Cabinet and submitted to the UNT Board of Regents at the quarterly meeting in August 2020. The four risk focus areas identified in the UNT System Administration FY20 Compliance Risk Work Plan are provided below:

- Allegations/Whistleblowers
- Physical Infrastructure/Conditions and Maintenance
- Emergency Management/Business Continuity Plan
- Policy Management Initiative

The following provides an update of the Compliance Risk Work Plan for the FY20 Q2.

Allegations/Whistleblowers Updates

Risk Focus Area:	Allegations/Whistleblowers
Commitment & Focus:	Verify allegations are being processed in accordance with applicable federal and state regulations, as well as applicable Regental and system-wide guidance. Verify System Administration has in place programs to provide staff the means to report concerns without fear of retaliation.

Outcome Metrics/Tracking Indicators	Progress			
	Q1	Q2	Q3	Q4
1. Review System Administration grievance procedures and processes for addressing ADA, Title VI, other discrimination concerns.				
2. **Title IX: Review policy and adjudication frameworks and implement local changes, as needed.**				
3. **Review System Administration policies, procedures, protocols, and best practices for whistleblower complaints.**				
4. Determine means to foster better coordination and collaboration throughout UNT World.				
5. Review current complaint processes to assess whether investigations are thorough, complete, timely, and fair.				
6. **Provide periodic status reports to senior leadership.**				

Activities of Note:

Title IX Requirements	
Action	**Status**
Training (Mandatory) • Preventing Discrimination & Harassment • Preventing Sexual Misconduct/Title IX	In Progress +95%
Reports (Submitted by UNTSA Title IX Compliance Officer) • Title IX Coordinator Report (S.B. 212)	In Progress
Policy Updates 03.705 *Prohibition of Sexual Assault and Retaliation*	In Progress

Physical Infrastructure/Conditions & Maintenance Updates

Risk Focus Area:	Physical Infrastructure/Conditions & Maintenance				
Commitment & Focus:	Verify System Administration has effective processes and decision support methods in place to address prioritization and impact on facilities maintenance, including new construction and renovations.				

Outcome Metrics/Tracking Indicators	Progress			
	Q1	Q2	Q3	Q4
● Review and assess System Administration current protocols, decision support methods, and metrics that address prioritization of physical infrastructure, including maintenance requirements that support on-going and emerging operational requirements, as well as emerging business development opportunities.	▓	▓		

Activities of Note:

Commitment & Focus/Action Taken & Planned

Verify System Administration has effective processes and decision support methods in place to address prioritization of requirements at all facilities. During this reporting period, key stakeholders throughout the UNT System focused on:

1. **Main Street Assets**
2. **BSC**
3. **Campus Support Services**

Emergency Management/Business Continuity Planning Updates

Risk Focus Area:	Emergency Management/Business Continuity Planning				
Commitment & Focus:	Provide leadership with educational and informational opportunities to prepare in effectively responding to emergencies. Draft and implement business continuity plans to build and maintain and update the System Administration Contingencies of Operations (COOP) for submission to the State Office of Risk Management (SORM).				

Outcome Metrics/Tracking Indicators	Progress			
	Q1	Q2	Q3	Q4
1. Review, update, and execute Emergency Management Plan.	▓	▓		
2. Draft and implement a plan to build and maintain System COOP for submission to SORM.	▓	▓		

Activities of Note:

Commitment & Focus/Actions Taken & Planned

1. **Prepare System Administration leadership to effectively respond to system-wide, community, regional, state, national, and international emergencies.**

2. **Update and maintain System Administration COOP for applicable units to be incorporated into the UNT System Administration COOP for submission to the State Office of Risk Management (SORM), as well as applying the lessons learned from the impact of the COVID-19 virus pandemic on operations COVID-19.**

3. **COOP Plan Actions are provided in Appendix B.**

Policy Management Initiative/Updates

Risk Focus Area:	Policy Management
Commitment & Focus:	System Administration and each institution must have in place policies and procedures that comply with federal and state laws and regulations and provide guidance to employees. The system developed to implement these policies must be clear and efficient.

	Progress			
Outcome Metrics/Tracking Indicators	Q1	Q2	Q3	Q4

• Promote an active culture of compliance in accordance with the System Administration CIP, System Administration is:
  a. **updating policy on policies.**
  b. drafting standard review protocol.
  c. **drafting standard policy template.**
  d. developing and executing a comprehensive review of regulations and policies.
  e. **purchasing and installing new policy management system.**
  f. reviewing and revising website resources that provide for easier accessibility, as well as links to resources.				

Activities of Note:

Commitment & Focus/Action Taken & Planned

1. **Periodic Meetings with System-Wide Policy Leads**

2. **Implementing Standard Policy Template**

3. **Coordinated Plan for Implementation of Policy Tech**

Emerging Risks

Resources in Assessing the Impact of COVID-19

UNT System Administration is vigilant and actively monitoring the impact of the COVID-19 virus pandemic, within and throughout the system and the respective local communities. Below are two resources to assist in assessing the impact of COVID-19. The first focuses on federal compliance concerns. The second provides guidance to Institutions of Higher Education in Texas.

Federal Guidance

- Department of Education's DeVos Announces $3 Billion Relief Grant for Governors

- Higher Education Relief in the CARES Act

- COVID-19 and Higher Education: Handling Title IX Issues in the Wake of the Pandemic

- COVID-19 Resources and Guidance for Higher Education InstitutionsCOVID-19 and Considerations for Construction Projects in Higher Education

- In Midst of COVID-19, Universities Must Remain Compliant with Clery Act

- Immigration Considerations in Higher Education in Response to COVID-19

- US Department of Education Issues COVID-19 Guidance: The Impact on Federal Student Financial Aid Programs

State Guidance

60x30TX

Visit Coronavirus Update for Higher Education

Preparing Annual Compliance Risk Work Plan for FY21
During this reporting period--as an integral part of the Compliance and Integrity Program, the UNT System Administration Office of Institutional Compliance has been begun conducting a comprehensive compliance risk assessment, interviewing key stakeholders. The information will be summarized and presented to the Chancellor's Cabinet for review and approval.

Appendix A: Compliance and Integrity Program Organizational Overview

UNT System Administraton Compliance & Integrity Program (2020)

System Administration Oversight and Accountability
Chancellor Lesa Roe

System Administration Chief Compliance Officer
Tim Willette

Chancellor's Cabinet/
Institutional Executive Compliance Committee

Rosemary Haggett, VC-Academic Affairs & Student Success	**Dan Tenney,** VC-Finance/Chief Financial Officer	**Steve Maruszewski,** VC-Facilities Planning & Construction
Barbara Abercrombie, VC-OE/Chief Human Capital Officer	**Jack Morton,** VC-Govt Relations & Policy Operations	**Alan Stucky,** VC-General Counsel

Chris McCoy, Chief Information Officer	**Tracy Grunig,** Chief Audit Executive	**Paul Corliss,** 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

Appendix B: COOP Plan

Milestone/Event	Driver(s)
Review SORM COOP to Assess Scope & Level of Effort in Meeting Requirements	CCO; VC-FAC; VC-FIN
Review Current System Administration BCPs & Other Applicable Documents	CCO; VC-FAC; VC-FIN
Advise Chancellor's Cabinet & Key Steholders of COOP Requirements	CCO
Identify Key Units & Assigns COOP Liaison	CCO; VC-FAC; VC-FIN
Create COOP-Specific Email Address & COOP Repository	CIO; CCO
Notify COOP Unit Liaisons, Providing Access to "Kuali" Tool & Access to Repository	CCO
Conduct In-Depth Training of "Kuali" Tool & Share Key Dates & Deliverables	CCO
Progress Meetings (as required)	CCO; Liaisons
Track Progress & Report to Chancellor's Cabinet & BOR (RFA: EM/BCP)	CCO
All Unit COOP Drafts Completed & Ready for Review	CCO; Liaisons
Submit for Review & Approval to Chancellor's Cabinet System Administration COOP	CCO
Provide Approved System Administration COOP to OGC for Legal Review & Comment	CCO
Return Reviewed Campus COOP with Comments	OGC
Incorporate OGC Comments & Submit for Final Approval to Chancellor	CCO
Review, Approve, & Sign System Administration COOP for Submission to SORM	Chancellor
Submit Completed Campus COOP to SORM	System Administration
Report on Final Submission to Cabinet & BOR (RFA: EM/BCP)	CCO

University of North Texas

University Compliance and Ethics

Quarterly Report to the Finance and Audit Committee

Board of Regents of the University of North Texas System

May 14, 2020

Executive Summary

In the second quarter of the 2020 fiscal year, University Compliance and Ethics ("UCE") continued to develop the compliance and ethics program at UNT while also addressing specific compliance reviews and initiatives.

Workplan Update

These activities are conducted in support of the UNT FY2020 Compliance Workplan, which remains on track, although I anticipate some goals may not be met as Compliance pivots to support COVID 19 response activities.   Emerging risks include the response to and recovery from COVID 19 pandemic and international regulatory compliance.

Program Development

UNT's first online required training module, covering the university's policy on discrimination and sexual misconduct, was pushed out to the entire campus. Leadership determined that this training would serve as a requirement for merit raises, which led to a major effort designed to inform employees of this new requirement.   UCE participated in modifications to the university's free speech policy in response to state law changes, and coordinated development of expanded sexual misconduct reporting as required by state law.

Compliance Reviews and Initiatives

UCE continued efforts to improve export control and international regulatory compliance by improving the controls over international visiting scholars to campus. Activities to improve online accessibility continued. The Digital Accessibility Committee was formed to provide oversight of online accessibility of university offerings, and new software was brought online to assist with identifying non-accessible websites. Additionally, the university began a review of how third-party applications are acquired and reviewed for accessibility. Finally, UCE began its annual risk assessment that will review compliance risks facing the university and determine where to focus university resources in the coming year.

TrustLine Reports

Nineteen TrustLine reports were received in the second quarter, a similar number of reports to the previous two quarters. The majority of these reports (68%) are still under investigation.

FY2020 Workplan Update

Work on the FY2020 Compliance Workplan is progressing well, but I anticipate that some risks areas will receive less attention than previously planned due to the COVID 19 event and response.

Program Elements

All elements of the Compliance Program that were planned for FY2020 are still on track to be accomplished by the end of the Fiscal Year. Required training was successfully implemented for all employees, the policy amendment process has been reviewed, and quarterly ECC meetings have been held as scheduled. I anticipate that the CEP metrics and communications plan will be completed before the end of the year.

Compliance Risk Priorities

Activity in this area has been focused on the highest risk priorities. Due to the demands of the COVID 19 event and subsequent response, not as much progress will be made in this area as expected. Additionally, I believe that too many risk priorities were included for this Fiscal Year and UCE does not have the capability to address all the issues identified. That said, I believe that good progress has been made by management responsible for the risk areas UCE was unable to spend much time on.

The most pressing issues have been addressed. UNT has created a compliance program to control youth programs. The Youth Protection Program is now in place, with an accompanying policy, and is serving the university well in providing advice, assistance and oversight to youth programs. Title IX issues have taken a large amount of UCE work over this year as we implemented new state laws and regulations related to sexual misconduct. Additionally, work is progressing in training, policy, research compliance, conflicts of interest and commitment, and IT systems. UCE has not reviewed Time and Effort Reporting, but a recent Internal Audit review returned no significant recommendations for improvements.

Hazardous materials transportation and disposal has received little work, but I believe management

responsible for this risk area has implemented sufficient improvements to reduce this risk going forward.

<u>Emerging Risks</u>

COVID 19 and the accompanying response will pose a serious risk to the university across an array of areas, from policy adherence to human resources issues, to compliance with federal and state relief efforts. UCE has participated heavily in the response and will similarly be heavily involved in recovery efforts. Another major emerging risk is that of international regulatory compliance, which is receiving a significant amount of attention from the federal government. This broad bucket of related risks encompasses export controls, foreign influence, visting foreign scholars, and conflicts of commitment. Some areas of this risk were already on the workplan as research compliance, but this is a larger issue that spans the institution.

Compliance and Ethics Program Development

<u>Training</u>

UNT implemented its first required online training module, covering discrimination and sexual harassment topics. This requirement was rolled out to all employees in the fall. After the rollout, President Smatresk decided that, in an effort to improve compliance, employee merit raises would be based on completing the training. UCE spent a significant amount of time communicating with UNT employees in conjunction with University Business Communications and Marketing and working closely with Administrative Services and Equal Opportunity to ensure all employees were notified and trained. The training was completed in February, 2020 with very few full-time employees failing to complete the required trainings. A review of employees who have not completed the training indicates that student workers made up the majority of those who are non-compliant.

<u>Policy</u>

UCE was involved in the development of several important policies. Policy changes were mandated by the Texas Legislature in the areas including Free Speech on campus. UCE worked with partners across the organization to ensure university policy complied with state law and served the needs of the institution.

Further effort was dedicated to compliance with policy aspects of Senate Bill 212, which expands reporting requirements on sexual misconduct reports from university employees. UCE worked with the Title IX Coordinator and Dean of Students to ensure compliance with the expanded requirements and development of reporting formats and planning. UCE also coordinated with other UNT institutions and System offices to ensure a coordinated approach across the System

Reviews and Initiatives

Export Controls

UCE continued to work with various university partners to address export controls and associated international laws. The FBI made several visits to campus over the last year to discuss Federal concerns regarding foreign influence and industrial espionage, with an emphasis on Chinese actions. UNT had previously identified a lack of controls over Visiting Scholars on campus, and UCE worked with university partners in Academic Affairs, Research, and the International Office to improve controls over foreign visiting researchers while allowing for continued collaborations with those individuals. This work also assisted with improvements to UNT's export control program by ensuring visiting scholars are not being allowed to work on projects that meet certain criteria for controlled data.

Accessibility Review

UCE continued its efforts to conduct an accessibility review of all online programs and websites. The goal of the review is to ensure UNT is providing accessible information for those with disabilities in its online programs and websites. Offices engaged include System IT Shared Services, the Center for Learning Experimentation, Application, and Research, Administrative IT Services, the Division of Enrollment, System Office of General Counsel, and others. UCE continues to execute the plan developed earlier in the year. A Digital Accessibility Committee has been formed to review accessibility issues and determine how to overcome any identified. UNT has implemented new software, SiteImprove, to review all existing UNT websites and ensure they meet accessibility standards. Finally, UNT is investigating the use of non-accessible third-party applications to determine how these programs are purchased and reviewed for accessibility. Additional work will focus on current third-party applications which may not be accessible to determine if they can be made accessible or whether those applications should be prohibited. Further actions to implement the accessibility improvement plan will continue.

Risk Assessment

UCE began work on the annual risk assessment in February. This effort is intended to identify major compliance risks present within the institution and identify areas in need of resources or support. This project generally lasts two months and consumes a significant amount of UCE effort. However, the issues identified are well worth the expenditure of effort and allow the university to act in a proactive manner to shore up problem areas and reduce risk significantly. Interviews with relevant officers and subject matter experts will occur in February and March, with final reviews with executive leadership occurring in April. The final assessment should be ready in time to coordinate with Internal Audit in their annual risk assessment, which usually occurs in early summer. The final risk assessment has historically been presented to the Board in August.

Trust Line Activity Report

During the second quarter, UNT received nineteen reports through the EthicsPoint system. Of those reports received, five have been closed, while fourteen remain under review with the appropriate units. All compliance reports and inquiries were referred to the appropriate unit for investigation and consideration. Once a report is referred for investigation, UCE retains oversight of the investigation and obtains periodic updates from the investigatory unit until it is completed. All non-compliance reports received via the Trust Line were referred to the appropriate units for investigation. UCE provides updates to the investigation and outcomes to the reporting party, if possible.

UNT Trust Line Reports
December 1, 2019 - February 29, 2020

TOTAL = 19
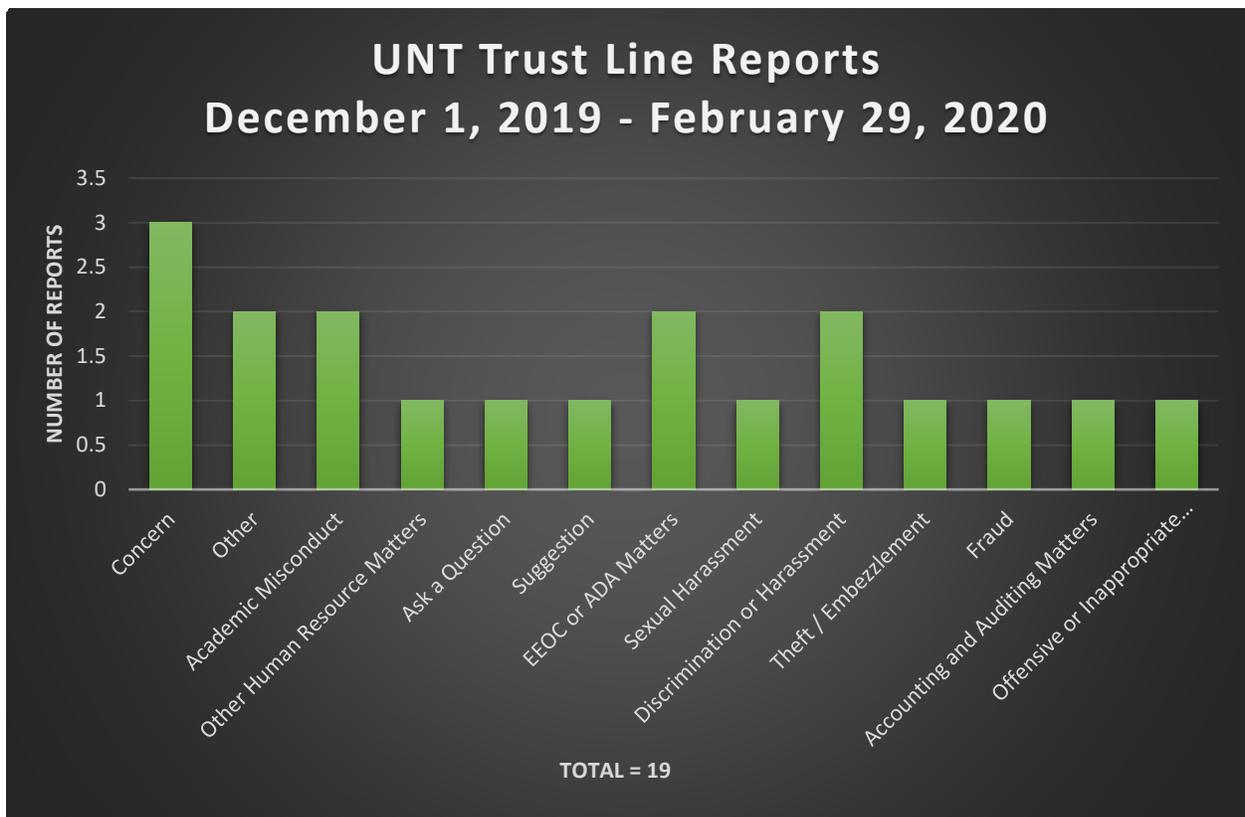
Office of Institutional Compliance

FY20 Q2 Report

Board of Regents Meeting

May 14ᵗʰ, 2020

Unless otherwise noted, activities reflected within are as of February 29, 2020

Introduction

Each Chief Compliance Officer (CCO) reports to the Board of Regents, at a minimum, quarterly. These reports update Board members on the effectiveness of the Compliance and Ethics Program at each of the institutions. This quarterly report provides a summary and highlights of compliance activities that have taken place during the second quarter (Q2) of Fiscal Year 2020 (FY20) at UNT System Administration. It is divided into six sections and two appendices. There are sections in the narrative that are **bolded** to allow readers to focus on key components of the report.

- **Introduction**
- **Executive Summary**
- **Investigation Updates**
- **Risk Focus Area Highlights**
- **Audit Updates (Compliance Review)**
- **Policy Updates**
- **Emerging Risks**

 At UNT Dallas, the Office of Institutional Compliance (Office) provides centralized oversight and substantive support toward the ethical, lawful, and responsible conduct of all operations. The Office identifies and analyzes a wide range of existing and emerging compliance concerns. It works closely with key campus stakeholders to foster a culture of compliance that supports the mission of the University. This requires a resilient partnership between the CCO and each of the organizational leaders who serve on the President's Cabinet. The organizational structure of the UNT Dallas Compliance & Integrity Program is provided in Appendix A.

Compliance & Integrity Program

The Office of Institutional Compliance at UNT Dallas is responsible for maintaining an effective Compliance and Integrity Program (Program) that includes, but is not limited to: 1) serving as a resource for addressing compliance concerns and communicating 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 policies and procedures; 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 that all UNT Dallas operations comply with applicable laws and regulations, Regents Rules, System Regulations, and campus policies. The CCO is responsible for the effective implementation and management of the Compliance and Integrity Program.

Executive Summary

During FY20 Q2, the CCO continued reviewing and assessing the effectiveness of the campus Compliance and Integrity Program per the guidance provided in UNT System Regulation 02.1000; *Compliance and Integrity Program*, dated 10/17/2017. Referencing the seven Federal Sentencing Guideline Objectives (FSGOs) listed below, the following efforts are serving to sustain, enhance, and improve the UNT Dallas Compliance and Integrity Program. Again, noteworthy efforts are **bolded**.

- **Active Oversight**

  The commitment to fostering a culture of compliance is pervasive throughout all UNT Dallas operations. All members of the President's Cabinet are kept up-to-date on the overall effectiveness of the campus Compliance and Integrity Program. The CCO provides quarterly updates of the annual Compliance Risk Work Plan to this senior leadership team. Meeting weekly, the members of the President's Cabinet are actively engaged in identifying, communicating, and assessing emerging risks. **Currently, this have evolved into a daily "Touch Base" that serves to coordinate collaborative initiatives in response to the impact of the COVID-19 virus pandemic on students, faculty, and staff, as well as the surrounding community. This includes identifying evolving compliance requirements. In their roles as leaders, each member of the UNT Dallas Executive Committee is actively engaged , encouraging all members of the campus community to comply with guidance from federal, state, and local government agencies.** Each member of the President's Cabinet has been provided an update of the Compliance Risk Work Plan for FY20 Q2.

- **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 FY20 Q2, UNT Dallas policies are being reviewed and updated as needed. Highlights of the efforts during this period are provided in the Policy Updates section. UNT Dallas is beginning the transition to a new policy management system. This includes collaborative engagement among several of the institutional to draft and implement a standard policy template.**

- **Education and Training**

  All UNT Dallas employees must successfully complete training related to the Compliance and Integrity Program, as well as compliance elements that are key in the effective conduct of their position. Additionally, all employees must be educated and periodically made aware of the ways to report suspected misconduct. **During this FY20 Q2, a new Learning Management Service (LMS) application was implemented. Additionally, UNT Dallas employees were advised of a requirement to successfully complete two training modules. More information about this training requirement are provided as progress of the annual Compliance Risk Work Plan.**

- **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 the UNT System. 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 FY20 Q2, members of the UNT Dallas were notified of training requirements, provided daily COVID-19 virus pandemic updates, and encouraged to tap into a host of resources to address concerns about working remotely and sheltering in place. The UNT Dallas Communications & Marketing department have been integral in getting information out to a wide and varied audience, using a host of social media tools.**

- **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. **During FY20 Q2 Internal Audit performed several audits of UNT Dallas operations. Information about these audit reports are provided in the Audit Update section of this report.**

- **Enforcement Tools**

  UNT Dallas, through the Compliance and Integrity Program, incorporates measures that 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 Compliance and Integrity Program. **During FY20 Q2, a number of areas were reviewed to identify the need to incorporate new internal controls or enhance existing internal controls.**

- **Responsive Initiatives**

  Keeping in mind that the Compliance and Integrity Program should scalable, affordable, feasible, and enforceable, the UNT Dallas Office of Institutional Compliance 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 this Office continues its efforts to identify and communicate emerging compliance issues to not only key stakeholders, but all members of the UNT Dallas community. The COVID-19 virus pandemic has served to assist in this objective.**

![UNT DALLAS - UNIVERSITY OF NORTH TEXAS AT DALLAS]

Investigations

As of March 31st, 2020, the UNT Dallas Office of Institutional Compliance received 11 compliance concerns. Nine of these concerns were received through the UNT System Trust Line. Below is a summary of those cases. Including the data for March serves to recognize the impact of the COVID-19 virus pandemic on operations.

Investigation Summary Log (December 2019 - March 2020)

Anonymous/Identified						
Type	**12-2019**	**01-2020**	**02-2020**	**03-2020**	**Total**	**%**
Anonymous	3	0	2	4	**9**	82%
Identified	1	0	1	0	**2**	18%

Intake Method						
Type	**12-2019**	**01-2020**	**02-2020**	**03-2020**	**Total**	**%**
TrustLine Web	4	0	2	3	**9**	82%
Email	0	0	0	1	**1**	9%
Phone	0	0	1	0	**1**	9%

Issue Type Summary (If Mulitple, Predominate Cited)						
Type	**12-2019**	**01-2020**	**02-2020**	**03-2020**	**Total**	**%**
Discrimination In General	1	0	0	0	**1**	9%
EEOC/ADA	1	0	0	0	**1**	9%
Conflict of Interest	0	0	1	1	**2**	18%
Employee Misconduct	0	0	1	0	**1**	9%
Unsafe Work Conditions	0	0	0	2	**2**	18%
Misuse of Resources	2	0	1	0	**3**	27%
Financial Concerns	0	0	0	1	**1**	9%

Outcome						
Type	**12-2019**	**01-2020**	**02-2020**	**03-2020**	**Total**	**%**
Unsubstantiated	1	0	1	0	**2**	18%
In Progress	2	0	1	1	**4**	36%
Referred to Other	1	0	1	3	**5**	45%
Closed	2	0	2	3	**7**	29%
Open	2	0	1	1	**4**	17%

Risk Focus Area Highlights

The UNT Dallas Office of Institutional Compliance, drafted proposed mitigation plans for each of the risk focus areas identified on its FY20 Compliance Risk Work Plan. This plan was approved by the UNT Dallas Executive Compliance Committee and submitted to the UNT Board of Regents at the quarterly meeting in August. The five risk focus areas identified in the FY20 Compliance Risk Work Plan are provided below:

- Allegations/Whistleblowers
- Community Well-Being
- Minors on Campus
- Physical Infrastructure/Conditions & Maintenance
- Emergency Management/Business Continuity Plan

The following provides an update of the Compliance Risk Work Plan for the FY20 Q2.

Allegations/Whistleblowers Updates

Risk Focus Area:	Allegations/Whistleblowers				
Commitment & Focus:	Verify allegations are being processed in accordance with applicable federal and state regulations, as well as applicable Regental, system-wide, and campus guidance. Verify campus has in place programs to provide students, faculty, and staff the means to report concerns without fear of retaliation.				

Outcome Metrics/Tracking Indicators	Q1	Q2	Q3	Q4
1. Review campus grievance procedures and processes for addressing ADA, Title VI, other discrimination complaints.	■	■		
2. **Title IX: Review policy and adjudication frameworks and implement local changes, as needed.**	■	■		
3. Review campus policies, procedures and protocols/practices for whistleblower complaints	■	■		
4. Determine means to foster better coordination and collaboration among campus units and system.	■	■		
5. Review current complaint processes to assess whether investigations are thorough, complete, timely, and fair.	■	■		
6. **Provide periodic status reports to senior leadership.**	■	■		

Activities of Note:

Title IX Requirements	
Action	**Status**
Training (Mandatory) • Preventing Discrimination & Harassment • Preventing Sexual Misconduct/Title IX	In Progress • 80% • 84%
Reports • Title IX Coordinator Report (S.B. 212)	In Progress
Policy Updates • 16.005; *Prohibition of Sexual Assault & Retaliation*	In Progress

Community Well-Being Updates

Risk Focus Area:	Community Well-Being				
Commitment & Focus:	Detect and prevent activities that compromise health and safety. Provide the campus and neighboring community with the support needed to nurture a sense of security and safety. Determine, provide, and distribute to members of the campus community the resources and support to effectively address existing and emerging health and safety concerns.				

Outcome Metrics/Tracking Indicators	Progress			
	Q1	Q2	Q3	Q4
1. **Provide campus and neighboring communities with the support to foster and maintain a safe environment.**				
2. **Promote campus awareness of VAWA, focusing on the safety of females on campus.**				
3. Promote a culture of safety on campus that addresses all modes of transportation.				
4. **Provide campus community with the resources and support to effectively address mental health concerns.**				

Activities of Note:

Community Well-Being

Action	Key Stakeholder(s)	Status
Provide campus community with the necessary resources and support to help address nutritional concerns of students and members of the local community. • Campus Pantry • NTFB Partnership (Monthly Engagement)	• VP-University Advancement • Dean of Students • UNTD PD • Director of Risk Services • Marketing & Communications • Veteran's Success Center	In Progress

Minors on Campus Updates

Risk Focus Area:	Minors on Campus & University-Sponsored Activities				
Commitment & Focus:	Comprehensive protocols must be in place with collaborative engagement to protect the health, safety, and welfare of minors on campus who are engaged in University-sponsored activities. Policies, protocols, and best practices, including training requirements, need to be monitored and reviewed on a routine basis, with updates, as needed.				

Outcome Metrics/Tracking Indicators	Progress			
	Q1	Q2	Q3	Q4
1. Create database for University-Sponsored activities of minors that monitors and tracks compliance requirements.				
2. Maintain and update, as necessary, campus guidance for University-Sponsored activities for minors.				
3. Assess protocols and practices, including required training, related to University-Sponsored activities for minors.				
4. Create and/or update websites involving Events Management and University-Sponsored activities for minors.				

Activities of Note:

Minors on Campus

Action	Key Stakeholder(s)	Status
1. Identify & create database for University-sponsored activities involving minors that tracks risk & compliance concerns.	• Director of Risk Services • IT Support Director	In Progress
2. Review & update campus guidance for University-sponsored activities involving minors.	• Director of Risk Services • Chief Compliance Officer	In Progress
3. Review & update applicable campus policies.	• Policy Manager • Policy Owner(s)	In Progress
4. Review & update websites involving Events Management & University-sponsored activities involving minors.	• Events Management Coordinator • Marketing & Communications	In Progress

Physical Infrastructure/Conditions & Maintenance Updates

Risk Focus Area:	Physical Infrastructure/Conditions & Maintenance				
Commitment & Focus:	Verify UNT Dallas has effective processes and decision support methods in place to address prioritization and impact on facilities maintenance, including new construction and renovations.				

Outcome Metrics/Tracking Indicators	Progress			
	Q1	Q2	Q3	Q4
• Review and assess current protocols, decision support methods, and metrics that address prioritization of physical infrastructure, including maintenance requirements that support on-going and emerging operational requirements, as well as emerging business development opportunities.	■	■		

Activities of Note:
COOP Timeline & Milestones (See Appendix B)

Emergency Management/Business Continuity Plan Update

Risk Focus Area:	Emergency Management/Business Continuity Planning				
Commitment & Focus:	Provide leadership with educational and informational opportunities to prepare in effectively responding to emergencies. Draft and implement business continuity plans to build and maintain and update the UNT Dallas Contingencies of Operations (COOP) for submission to the State Office of Risk Management (SORM).				

Outcome Metrics/Tracking Indicators	Progress			
	Q1	Q2	Q3	Q4
1. Review, update, and execute Emergency Management Plan.	■	■		
2. Draft and implement a plan to build and maintain System COOP for submission to SORM.				

Activities of Note:

Physical Infrastructure/Conditions & Maintenance		
Action	**Key Stakeholder(s)**	**Status**
Assess & document space usage and work request requirements, as well as current & projected construction projects.	• Campus Project Manager • Director of Risk Services • Director of Facilities	In Progress

Audit Updates (Compliance Review)

Internal Audit Updates

The information below lists those audits that saw activity.

| Identification & Title	Activities/Recommendations	Status
• UNTD 18-412; *Security Camera System*	• Business Continuity & Disaster Recovery Plan	• Response Provided
• UNTD 19-021; *Business Processes*	• Asset Management • Business Continuity Plan • Emergency Preparedness Plan • Elevator Outage Policy	• Response In Process • Response In Process • Response In Process • Draft with OGC
• UNTD 19-037; *Grants & Contracts Compliance*	• Business Continuity Plan	• Response Provided
• UNTD 19-055; *Residence Hall Card Access*	• Service-Level Agreement • User ID Data Consistency	• Response Provided • Response Provided
• UNTD 19-058; *Financial Aid Processes*	• Business Continuity Plan	• Response Provided
• UNTD 19-062; *CPI Transition*	• Three (03) Items	• Action Plans in Place (03)
• UNTD 20-002; *Student Fees*	• Thirteen (13) Items	• Updated Responses Provided
• UNTD 20-015; *School of Education Transition*	• Active	• IA Providing Updates
• UNTD 20-016; *School of LA & S Transition*	• Active	• IA Providing Updates

Policy Updates

Campus Policy Review & Implementation of Policy Tech Application

Milestone/Event	Driver	Status	Projected Completion
Benchmark Campus Policies	CCO	In Progress	04/30/2020
Review Current Status of Policy Database	CCO	In Progress	04/30/2020
Identify Policy Owners & Associated Policies	CCO	In Progress	04/30/2020
Draft Revised Policy on Policies Statement	CCO	In Progress	04/30/2020
Provide Reviewing Guidelines & Checklists	CCO	Yet to Begin	05/15/2020
Conduct Needs Assessment	Policies Owners	Yet to Begin	05/15/2020
Review & Provide Input on Current Policies	Policies Owners	In Progress	06/15/2020
Identify Gaps & Issues	Policies Owners CCO	In Progress	06/15/2020
Remedial Actions (Phase I)	Policies Owners CCO	Yet to Begin	06/30/2020
Remedial Actions (Phase II)	Policies Owners CCO	Yet to Begin	07/15/2020
Provide Periodic Updates to UNTD Cabinet	CCO	In Progress	Multiple
Migrate Policies to Policy Tech Application	CCO	In Progress	08/15/2020
Train Key Personnel on Policy Tech Application	CCO	Yet to Begin	Mulitple

Emerging Risks

Assessing the Impact of COVID-19 Moving Forward

UNT Dallas must remain vigilant and monitor for COVID-19 virus outbreaks in the local community and for individual exposure events that may occur on campus, regardless of the level of community transmission. **The following decision tree, provided by the CDC, is a useful guide in helping UNT Dallas leadership determine which set of mitigation strategies may be most appropriate during this period of uncertainty.**
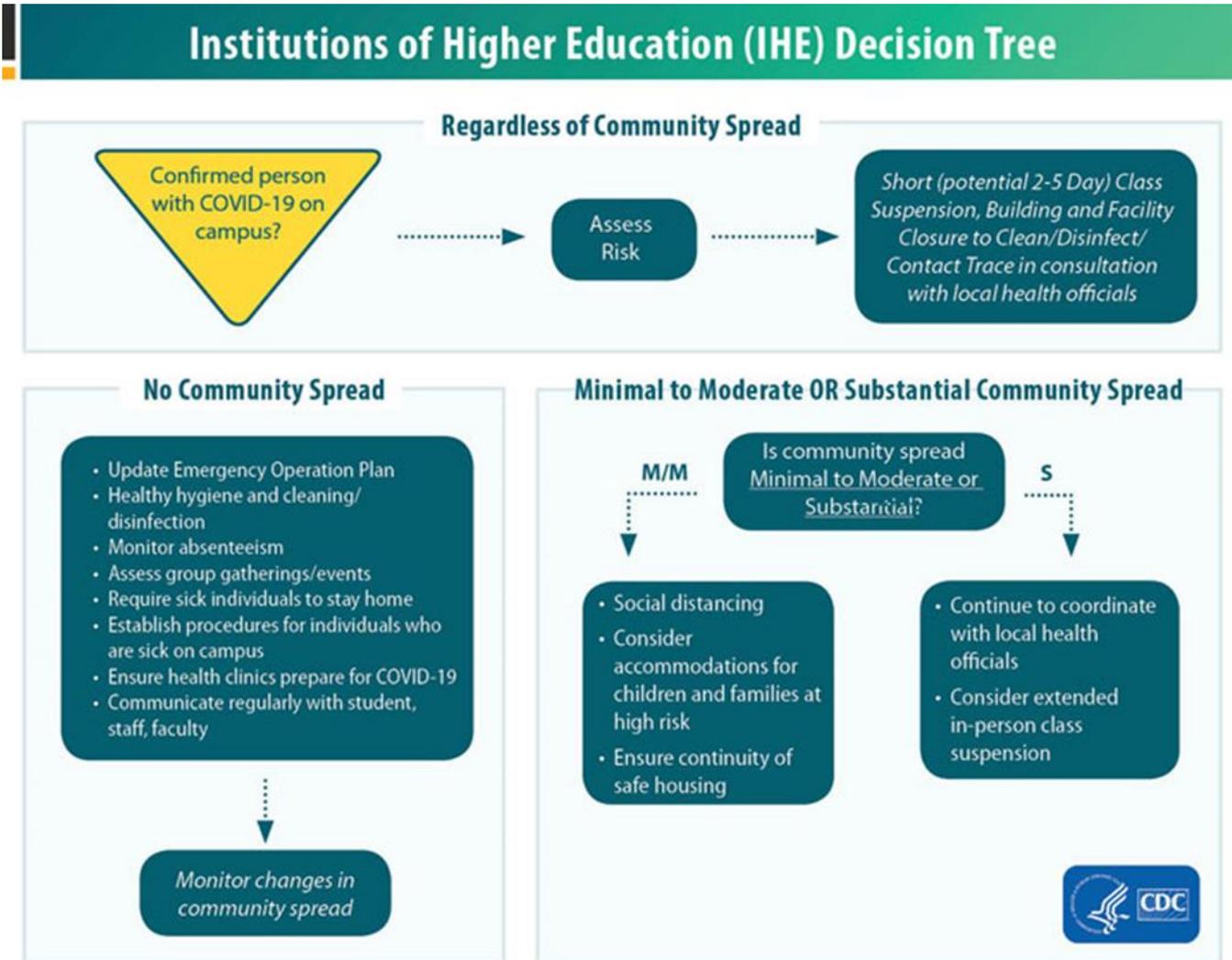
Preparing Annual Compliance Risk Work Plan for FY21

During this reporting period--as an integral part of the Compliance and Integrity Program, the UNT Dallas Office of Institutional Compliance has been begun conducting compliance risk assessments, interviewing key stakeholders and gathering information for the risk registry. The information will be summarized and presented to the President's Executive Compliance Committee for review and approval.

Appendix A: Compliance & Integrity Program Organizational Overview

UNT System Administraton Compliance & Integrity Program (2020)

System Administration Oversight and Accountability
Chancellor Lesa Roe

System Administration Chief Compliance Officer
Tim Willette

Chancellor's Cabinet/
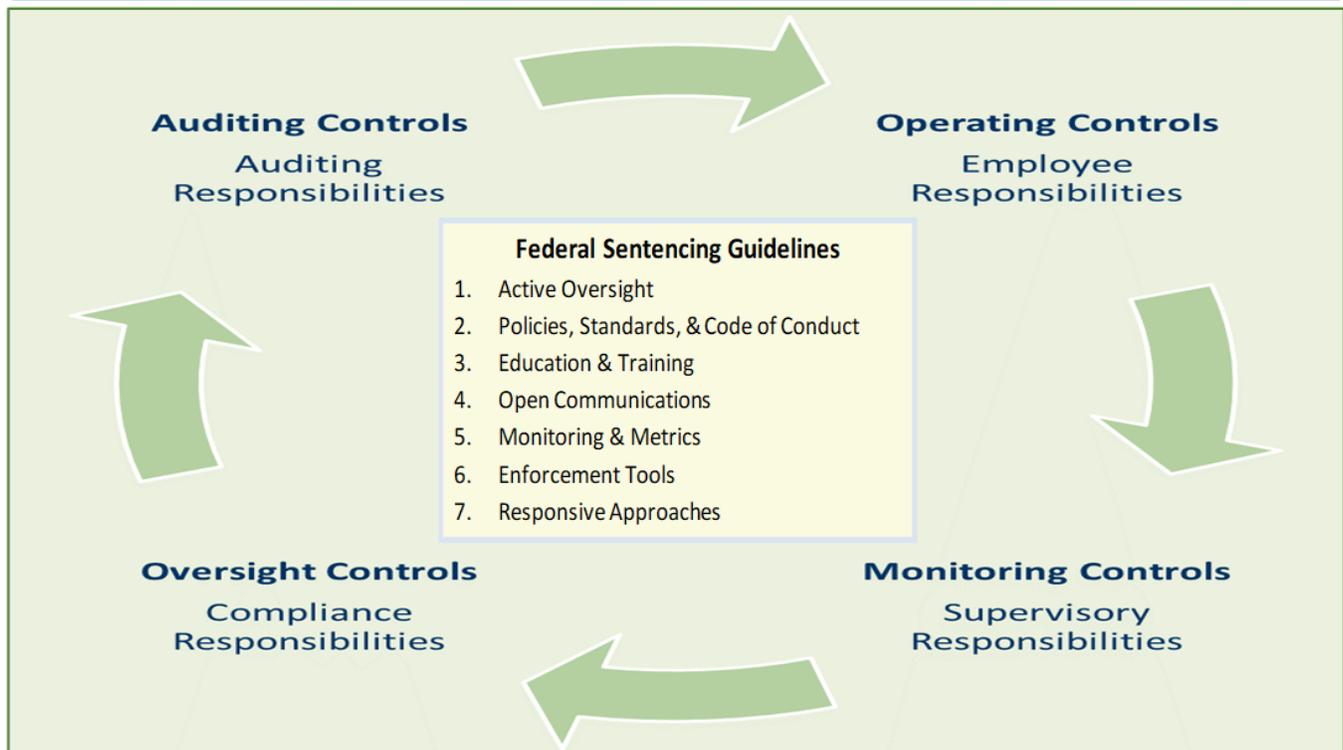**Institutional Executive Compliance Committee**

Rosemary Haggett, VC-Academic Affairs & Student Success	**Dan Tenney,** VC-Finance/Chief Financial Officer	**Steve Maruszewski,** VC-Facilities Planning & Construction
Barbara Abercrombie, VC-OE/Chief Human Capital Officer	**Jack Morton,** VC-Govt Relations & Policy Operations	**Alan Stucky,** VC-General Counsel
Chris McCoy, Chief Information Officer	**Tracy Grunig,** Chief Audit Executive	**Paul Corliss,** 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

Appendix B: COOP Plan

Milestone/Event	Driver	Status	Critical Date(s)
1. Review SORM COOP to Assess Scope & Level of Effort in Meeting Requirements	Director, RS	Complete	
2. Review Current Campus BCP & Other Applicable Documents	Director, RS/CCO	Complete	
3. Identify & Notify Campus Leadership of Campus COOP Requirements	Director, RS/CCO	Complete	
4. Campus Leadership Identifies Key Units & Assigns COOP Liaison	Cabinet	Complete	
5. Create COOP-Specific Email Address & COOP Repository	Directors, RS & ITS	Complete	
6. Provide CCOP Unit Liaisons Access to "Kuali" Application	Director, RS	Complete	
7. Conduct "Kuali" Training & Identify Other Resources	Director, RS	Complete	
8. Complete COOP Unit Drafts & Beging Review	Director, RS/ Liaisons	Update / In Progress	02/03/2020 / 05/01/2020
9. Track Progress & Report to Cabinet & BOR (RFA: EM/BCP)	CCO	Complete / In Progress	Q1: 02/15/2020 / Q2: 05/15/2020
10. Submit for Review & Approval to Cabinet COOP	Director, RS	Not Yet Started	03/23/2020
11. Provide Approved COOP to OGC for Legal Review & Comment	Director, RS	Not Yet Started	03/30/2020
12. Return Reviewed UNTD COOP with Comments	OGC	Not Yet Started	04/27/2020
13. Incorporate OGC Comments & Submit to for Approval by President	Director, RS	Not Yet Started	05/04/2020
14. Review, Approve, & Sign COOP for Submission to SORM	President	Not Yet Started	05/07/2020
15. Submit Completed UNTD COOP to SORM	Director, RS	Not Yet Started	05/28/2020
16. Report on Final Submission to Cabinet & BOR (RFA: EM/BCP)	CCO	Not Yet Started	TBD

THE UNIVERSITY of NORTH TEXAS
HEALTH SCIENCE CENTER at FORT WORTH

OFFICE OF INSTITUTIONAL COMPLIANCE
AND INTEGRITY

QUARTERLY COMPLIANCE REPORT

2ND QUARTER FY20

SUBMITTED BY

DESIREE RAMIREZ, CCEP, CHC
CHIEF COMPLIANCE AND INTEGRITY OFFICER

INTRODUCTION

At the beginning of each calendar year, many compliance resources list the top ten to twenty risk and compliance trends compliance officers should be aware of and review for the upcoming year. Over the last 10 years these compliance areas have consisted of culture and conduct risk, personal liability and technology. No one could have predicted after a few months at the beginning of a new year how the compliance landscape would change and risk turn into issues such as

- Are our policies relevant, up-to-date, and thorough?
- How do we protect our company culture during this crisis?
- How can the Compliance department be a partner to the organization during a crisis like COVID-19?

Additionally, we are seeing change and updates to federal regulations such and HIPAA privacy and Center for Medicare and Medicaid Services (CMS) guidance in relation to patient care.

During a time of crisis, Compliance Officers and their teams must step outside of their traditional roles. As Compliance Officers we have visibility into the entire organization's operations and can assist the organizations in mitigating the business impact of COVID-19 by utilizing existing tools and resources to track essential and evolving information. We must also use this time to remind employees and student of our institutional values. Ethical leadership is more important than ever during a crisis; trustworthiness, responsibility and respect will set the tone for institutionally resiliency as we begin the return to a "new normal".

KEY REPORT HIGHLIGHTS

- Education and Training continues with our new hires; the decrease in completion is due to the holiday break and is typical in this quarter.

- We have seen an increase in TrustLine calls this quarter which is attributed to outreach by our compliance staff to establish trust amongst faculty, staff and students; recognition of behaviors that may not align with our Code of Culture and access to resources such as PolicyTech, our policy and procedure repository.

- Ongoing auditing, monitoring and education in our clinical practice has seen an increase accuracy of documentation.

- We have provided more direct education regarding the disposal of PHI as well as a review of HIPAA privacy rules and HSC policy.

- We continue our outreach with our federal agency partners inviting the Drug Enforcement Agency to provide updates and education to our faculty.

- We continue to stay on track with our FY20 Risk Assessment plan (see details in the report) Our IT risks have moved from red to yellow and are expected to be green before the end of the fiscal year. However, please note that there is expected change in progress of all risks in the upcoming quarters because of shift in priorities due to COVID-19.

- The development of a Compliance Strategy that aligns with the HSC Strategic Plan/Roadmap will assist the department in meeting objectives and key results that promote values and behaviors that are expected of HSC team members in doing things right.
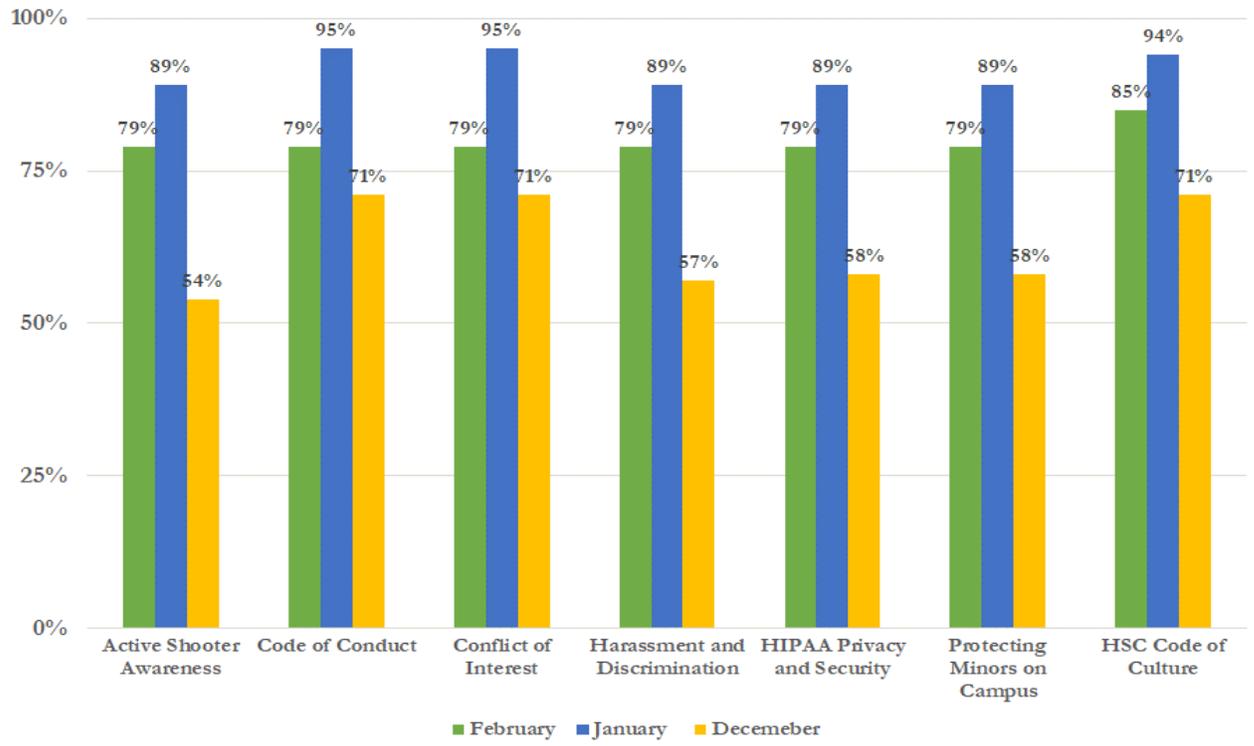

COMPLIANCE PROGRAM

Education and Training

The Integrity Education(Training) Program was implemented in November, 2018 with six required modules for all HSC employees. Since the initial launch, new employees are entered into the Learning Management System, LearnHSC, once their hiring information is submitted, they are required to complete their training within 30 days. Additionally, we have employees who may require refresher training as directed by management or the Office of Compliance and Integrity. The charts below reflect completion rates for FY20, Quarter 2 and completion rates from the launch of the education modules in FY19.

Integrity Education Suite
FY20 Q2

Category	February	January	December
Active Shooter Awareness	79%	89%	54%
Code of Conduct	79%	95%	71%
Conflict of Interest	79%	95%	71%
Harassment and Discrimination	79%	89%	57%
HIPAA Privacy and Security	79%	89%	58%
Protecting Minors on Campus	79%	89%	58%
HSC Code of Culture	85%	94%	71%

■ February ■ January ■ Decemeber

Integrity Education Suite Completion Rates FY19-FY20 to date

100%

96%

94%

97%

81%

78%

100%

80%

60%

40%

20%

0%

FY19 Q1

FY 19 Q2

FY19 Q3

FY19 Q4

FY20 Q1
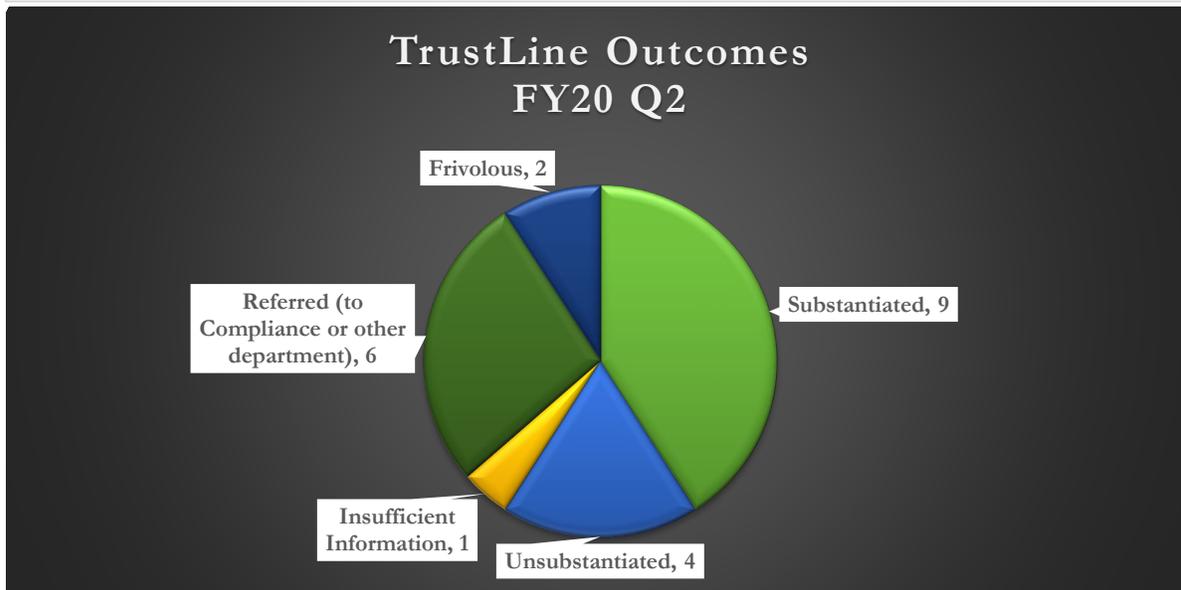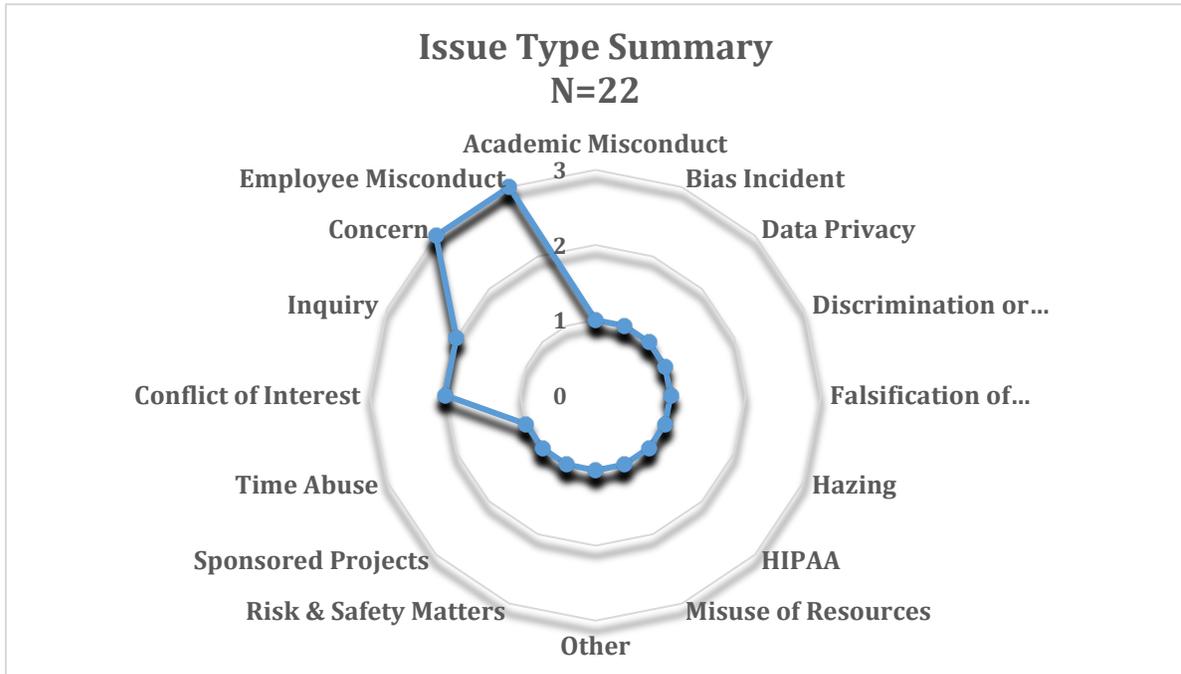
FY20 Q2

Trust Line

HSC received 22 **Trust Line calls/inquiries** during the 2nd quarter; a 50% increase from the 1st Quarter. This is attributed to an increase in employees and students submitting inquiries and concerns and recognition of behaviors that may not align with our Code of Culture. Nine (9) of the cases were substantiated and 64% of the cases were closed.

Issue Type Summary
N=22

- Academic Misconduct
- Bias Incident
- Data Privacy
- Discrimination or…
- Falsification of…
- Hazing
- HIPAA
- Misuse of Resources
- Other
- Risk & Safety Matters
- Sponsored Projects
- Time Abuse
- Conflict of Interest
- Inquiry
- Concern
- Employee Misconduct

TrustLine Outcomes
FY20 Q2

- Frivolous, 2
- Substantiated, 9
- Referred (to Compliance or other department), 6
- Insufficient Information, 1
- Unsubstantiated, 4

Auditing and Monitoring

In the 2nd Quarter, 14 providers were audited in the Department of Family Medicine (Osteopathic Manipulative Medicine (OMM) services were not included). With continued discussions and meetings with our revenue cycle team, we have made significant changes to assist with improving documentation through increased samples, continued education and collaboration with the coders. With these changes we saw a 10% increase in documentation accuracy rates from last year for the Family Medicine Department. We hope to see this continued progression in the audits for the remainder of the fiscal year.

HIPAA AND PRIVACY

The Office of Institutional Compliance and Integrity is responsible for the adherence of HIPAA privacy rules. We have made some recent changes that include more stringent guidance regarding the use of shredding bins which are utilized throughout the campus for the disposal of Personally Identifiable Information (PII), Personal Health Information (PHI) and proprietary information. We have provided education to various departments explaining the risk to retrieving information that has been disposed, what information should be shredded and timeliness of disposing this information. Campus wide education will be forthcoming in the latter part of the spring.

FEDERAL AGENCY OUTREACH AND EDUCATION

In our continued efforts to be proactive with our federal agency partners, the Drug Enforcement Agency (DEA) was invited in January to provide education regarding DEA regulations. We had over 90 attendees from research and the clinical practice as well as representation from the Office of General Counsel. Topics of discussion included:

- Maintaining controlled substance records.
- General recordkeeping requirements.
- Basic inventory requirements.
- Identifying and understanding DEA resources,

Identified Risk	Q1 Progress		Q2 Progress	
Campus Off boarding	Through the Policy Transformation project, areas of vulnerability have been addressed through the revision of the policy. Additionally, discussions and policy updates regarding Intellectual Property have been identified and reflected in the updated policies	🟩	The President Council on Built Environment continues their efforts on space allocation as well as lab relocation. These efforts have assisted with identifying substances and information that will be inventoried and tracked to assist with off boarding. For employees, there have been concerted efforts to schedule exit interviews and included are questions regarding any compliance concerns that they may have observed. We are working to make this a more formal process without adding additional burdens to the employee	🟩
Unauthorized Access to Protected Institutional Data	The Office of Institutional Compliance continues to meet with the Information Security Officer to identify procedures that will assist. The IT department is making significant progress on security controls currently deployed to protect Institutional data. The campus has recently been administered Security Awareness training which will assist with education to the campus on InfoSec issues	🟥	Efforts continue with IT to put controls in place. The launch of IT Security Awareness training has seen a significant increase in employees and students identifying spam and being mindful to bring this to the attention of out IT department. We will need to continue efforts in physical security and authentication.	🟨
Identified Risk	Q1 Progress		Q2 Progress	
HIPAA/HITECH	Mandatory Training for clinical and research personnel was conducted in the summer. The Office of Institutional Compliance is resuming HIPAA walkthroughs in the winter to monitor. The Office of Civil Rights has also provided the institution with an authorized copy of their HIPAA education presentation	🟩	Recent changes to include more stringent guidance regarding the use of shredding bins which are utilized throughout the campus for the disposal of Personally Identifiable Information (PII), Personal Health Information (PHI) and proprietary information. Education to various departments explaining the risk to retrieving information that has been disposed, what information should be shredded and timeliness of disposing this information.	🟩
Export Control (International Compliance)	Export Control Officer position posted. Continued dialogue with Department of Justice for monitoring of export control issues	🟩	The Deputy Compliance Officer has added International Compliance duties to his role, encompassing the export control position that was posted in the last quarter. His additional duties include the tracking and monitoring of international travel as well as guidance on foreign scholars and research activities. A registration site is currently in development	🟩
Conflict of Interest (Outside Employment)	Institutional Conflict of Interest and Research Conflict of Interest forms combined for submission of one electronic form. Conflict of Interest Disclosure forms assigned on September 1; 30 days to disclose. Conflict of Interest and Outside Employment policies combined to ensure adherence to requirements	🟩	The COI Disclosure process revealed 33 instances of outside employment reported. The information was discussed with the managers to ensure the correct permissions and documentation was in place.	🟩

Post COVID-19 may see some change in risk priorities that may shift to business continuity, data protection, health and safety, ethics and culture, etc. By utilizing compliance resources such as the LMS (Bridge/LearnHSC), PolicyTech/policies, TrustLine, etc. the compliance officers can give insight to leadership about the concerns of employees and students and can assist in mitigating the business impact of COVID-19.

In Quarter 1, the Office of Compliance and Integrity held a retreat with our partners across the campus to assist us in formulating a strategy for the Compliance Program that aligns with the Strategic Plan/Roadmap of the Health Science Center. We wanted to ensure the mission, vision,

Office of Institutional Compliance and Integrity- Strategic Plan 2025

MISSION

The mission of the Office of Institutional Compliance and Integrity is to create solutions that build and preserve an ethical culture and encourages team members in doing what is right

VISION

To build and create purpose-inspired team members that promote our institution's values under One University

Target Customers	Customer Needs	Communication Channels
Students, Employees, Vendors, Agents and external Community Members.	To maintain a Compliance and Integrity Program that will enable our customers to better succeed in their operations, management of risks and decision-making of which they are individually and collectively responsible.	We will communicate to our customers by utilizing university resources, engagement, education and outreach throughout the campus.

Strategic Goals

- Communicate departmental philosophy- education and awareness on doing things right
- Foster Relationships with schools and programs
- Shift the narrative to change the culture-

and goal were aligned in order to meet the objectives and key results; objectives and key results will be updated annually as we progress to the strategic goals.