Appendix Book - February 22, 2024 Board of Regents Meeting

UNT System Acronym List

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

ASF   Assignable Square Feet

AUX   Auxiliary Reserves

BOR   Board of Regents

BSC   Business Service Center

BSS   Business Support Services

CAE   Chief Audit Executive

CAFR   Comprehensive Annual Financial Report

CIA   Chief Internal Auditor

CIP   Capital Improvement Plan

CIP   Construction in Progress

CM   Construction Manager

CMAR   Construction Manager at Risk

CO   Change Order

COL   College of Law

CP   Commercial Paper

DEI   Diversity, Equity and Inclusion

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

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

FTSE	Full Time Student Equivalent: is computed by dividing headcount enrollment by a set number of semester credit hours based on the rank of the student (Undergraduate FTSE = 15 SCH; Masters and Special Professional FTSE = 12 SCH; Doctoral FTSE = 9 SCH). FTSE is generally lower than headcount enrollment because of part time students.
FTFE	Full Time Faculty Equivalent: a measure of instructional faculty calculated from the percent of time directly related to teaching.
FY	Fiscal Year
GAI	General Academic Institution
GMAT	Graduate Management Admission Test: a standardized test for admission into graduate programs of business schools.
GME	Graduate Medical Education: clinical training following graduation from medical school leading to specialty certification. Texas, like most states, requires one year of graduate medical education to be eligible for state licensure. Also called residency training.
GSF	Gross Square Feet
HEAF	Higher Education Assistance Fund (also known as HEF)
HERRF	Higher Education Emergency Relief Fund
HR	Housing Reserve
HR	Human Resources
HRI	Health-Related Institution
HSC	Health Science Center
HUB	Historically Underutilized Business
IA	Internal Audit
LAR	Legislative Appropriations Request
MCAT	Medical College Admission Test: a standardized test for admission into medical school
MP	Master Plan

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

Southern states.

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

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

SF   Student Fees

SF   Square Feet

SFP   Statement of Financial Position

SRECNP   Statement of Revenues, Expenses and Changes in Net Position

STEM   Science, Technology, Engineering and Math

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

THC   Texas Historical Commission

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

TRB   Tuition Revenue Bond

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

VC   Vice Chancellor

Executive Report

To: UNT System Board of Regents

From: Susan Alanis, Deputy Chancellor

Department: Finance and Operations

PURPOSE:

The Finance and Operations Department strives to provide transparent and informative financial reporting to the Board of Regents, leadership, and all constituents of UNTS. The Quarterly Financial Update and the Quarterly Operations Report contain summary information on the FY2024 year-end forecasted performance compared to budget, quarterly actual expenses and revenues, quarterly financial statements, and investment returns.

SUMMARY:

The FY2024 year-end forecast as of the 1st Quarter anticipates a net contribution to fund balances of $26m across the UNT System due to positive performance compared to the adopted budget. The key drivers are:
- Tuition and fee revenues greater than the 3% budgeted growth projections, due primarily to UNT undergraduate enrollment growth of 5.8% from the prior year. UNT Dallas is also serving more students with a 5.6% increase in semester credit hours from the prior year.
- Investment returns continue to be strong. Treasury operations have continued to actively manage liquidity to allow the inclusion of more funds in the long-term investment pool.

Note that the current year consolidated budget increased by $76m over the FY2023 adopted budget due to the increase in State Appropriations and anticipated tuition increases, partially offset by reductions in other categories. These increases funded growing expenses associated with personnel, other operating costs, and capital investments. Increased cost drivers include service to more students, inflation and a competitive labor market.

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Executive Report

To: University of North Texas System Board of Regents, Audit Committee

From: Clay Simmons, Vice President and Chief Integrity Officer

Dept.: University of North Texas, University Integrity and Compliance

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SUMMARY:

This serves as the UNT FY24 First Quarter compliance report on the effectiveness of its compliance and ethics program. University Integrity and Compliance (UIC) continues to build out the compliance and ethics function at UNT and conduct ongoing training, monitoring, and reviews across UNT.

PURPOSE:

The purpose of this report is to demonstrate progress of identified areas noted in the Compliance Program Effectiveness Assessment provided by Protiviti. See Appendix for Definitions.

Category	Ongoing Process	Maturity Progress
Ongoing Process: Compliance Program Elements **Maturity Progress:** Framework Assessment Reporting		
Risk Assessment		X
Policies and Procedures		X
Training and Communications		X
Reporting and Accountability		X
Third Party Management	X	
Commitment by Senior/Middle Mgmt.	X	
Autonomy and Resources		X
Incentives and Disciplinary Measures	X	
Periodic Testing and Review		X
Investigations of Misconduct	X	
Analysis and Remediation		X

ASSESSMENT:

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Risk Assessment

UIC continues to monitor risks previously identified in the annual risk assessment while monitoring the institution and environment for emerging issues.

UIC has completed implementation of the OneTrust GRC tool in coordination with the other UNT System Enterprise compliance offices and System IT Information Security. UIC is now uploading risk descriptions and ranking information to improve the ability to effectively monitor risks across the institution. UIC is also documenting the risks and associated workplan in the GRC tool.

Policies and Procedures

UNT reviews policies on a regular basis (at least every 6 years) to ensure they incorporate changes in law and regulation and accurately reflect current business practices. Currently, 92% of UNT policies are up to date, leaving only 17 total policies overdue for review. 28 policies are in the review process, including all 17 overdue policies. UIC continues to work with policy partners to revise these last overdue policies and we believe that all will be up to date or retired by the end of the calendar year.

UIC also continues to look for ways to reduce the total number of policies through retirement or consolidation. Since UIC assumed responsibility for policy management a little over two years ago, approximately 17% of UNT policies have been retired. Information formerly contained within those policies has been transferred to procedural documents or other non-policy documents, such as the Campus Master Plan.

Training and Communications

Completion percentages for the four required training modules have recovered from our summer low rates in the low to mid 90s to mid and upper 90s. This is the typical rates we expect to see this time in the academic year. Faculty employees are averaging 94% completion and Staff 97%.

The Code of Conduct for UNT employees has been completed and is titled *Professional Standards in the Workplace*. This revised version of the Code is more user friendly and modern, with an attractive interface and ease of use improvements and incorporates the UNT System values in a comprehensive manner. The online module will be rolled out in February and included as a required training for all employees under the requirement to annually train employees on ethics.

Reporting and Accountability

UIC received 28 reports for the 1st quarter, similar to the 25 we received in the 4th Quarter of FY23. Of the reports submitted in the 1st quarter, 27 are closed, leaving only 1 still under review. Of the 27 closed, 15 were queries, 1 was substantiated in full, 1 substantiated in part, and 9 unsubstantiated. The final report was unable to be determined as all involved parties had left the university.

Autonomy and Resources

UIC has completed the hiring of a compliance coordinator to assist with monitoring and other compliance review activities.

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Periodic Testing and Review

UIC continues testing and reviews of visiting scholars and the scholarship award process across the institution. Recommendations for visiting scholars processes are completed and will be presented to the relevant parties in the 2nd quarter.

Analysis and Remediation

UIC, in coordination with the Vice President for Research and Innovation, has established the International Compliance Coordination Committee to assist in the control of international compliance risks across the institution. UIC and Research Integrity and Compliance are developing a plan for ranking current international compliance risks and we will present this ranking to the ICCC in the 2nd Quarter. The ICCC members will help finalize the risk ranking and provide advice on how to best control the identified risks going forward.

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Appendix

Category	Definition
Risk Assessment	*Does the Institution have a comprehensive risk assessment process?*
Policies and Procedures	*Has the Institution established standards and procedures to prevent and detect misconduct, including criminal conduct?*
Training and Communications	*Do Institution employees receive training regarding ethical conduct and compliance with regulations and policies, and procedures?*
Reporting and Accountability	*Does the Institution take reasonable steps to communicate aspects of the compliance and ethics program to the appropriate individuals?*
Third Party Management	*Does the Institution have a process to identify and proactively monitor high-risk vendor relationships (e.g., business associates, etc.)?*
Commitment by Senior /Middle Mgmt.	*How has the Institution responded to specific instances where compliance raised concerns?*
Autonomy and Resources	*Has there been sufficient staffing for compliance personnel to effectively audit, document, analyze, and act on the results of the compliance efforts?*
Incentives and Disciplinary Measures	*Does the Chief Compliance Officer promote and enforce the Program consistently through appropriate incentives and disciplinary measures to encourage a culture of compliance and ethics?*
Periodic Testing and Review	*What testing of controls, collection and analysis of compliance data, and interviews of employees and third parties does the Institution undertake?*
Investigations of Misconduct	*How has the Institution ensured that the investigations have been properly scoped, and were independent, objective, appropriately conducted, and properly documented?*
Analysis and Remediation	*When noncompliance, unethical behavior, or criminal conduct has been detected, does the Institution reasonably prevent further similar behavior?*

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Executive Report

To: University of North Texas System Board of Regents, Audit Committee

From: Desiree K. Ramirez, CCEP, CHC, Executive Vice President, Chief Integrity and Privacy Officer

Dept.: University of North Texas Health Science Center at Fort Worth
Office of Institutional Integrity and Awareness

SUMMARY:

This serves as the HSC FY24 First Quarter compliance report on the effectiveness of compliance program to UNT Board of Regents Audit Committee. This is provided in accordance with the UNT System Audit Committee charter

PURPOSE:

The purpose of this report is to demonstrate progress of identified areas noted in the Compliance Program Effectiveness Assessment provided by Protiviti. As a reminder, the table below reiterates the categories and relevant information from the assessment. Please see appendix for definitions. Bolded categories are reported for this quarter.

Ongoing Process: Compliance Program Elements Maturity Progress: Framework Assessment Reporting		
Category	**Ongoing Process**	**Maturity Progress**
Risk Assessment	X	
Policies and Procedures	X	
Training/Communication	X	
Reporting and Accountability	X	
Third Party Management		X
Commitment by Mgmt.	X	
Autonomy and Resources	X	X
Incentives/ Disciplinary Measures	X	
Periodic Testing and Review	X	X
Investigations of Misconduct	X	X
Analysis and Remediation	X	X

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Risk Assessment

Internal Control Assessments were reviewed for the compliance risk areas identified in FY23. The Internal Control Assessments were evaluated based on the following five components:

Assessment Component	Definition
Control Environment	Governance and Culture
Risk Assessment	Strategies and Objectives
Control Activities	Performance and supported actions
Information and Communication	Documented and communicated information
Monitoring	Ongoing monitoring activities

The components were rated on a 1-5 (Weak-Strong) scale. All risk areas concluded their control environment was strong- the correct organizational structure and operating in value-based culture help to appropriately control the identified risk. Risk areas continue to improve their control activities and monitoring. The newly implemented Governance, Risk and Compliance (GRC) Tool will assist in monitoring progress and identify any emerging compliance risks based on the Enterprise Risk Management definitions and methodology.

Training and Communication

HSC Annual Integrity Education Suite mandatory education and training for employees concluded in last quarter of FY23 with a **99.8% completion rate**. New hire **(84%)** and student training **(78%)** are ongoing.

In November, HSC celebrated Integrity and Awareness Week. Our theme this year was "Celebrating the Timeless Art of Doing the Right Thing." There were in-person and digital activities. Utilizing the HSC Simulation Center the campus "discovered" the Integrity Framework, by fully immersing themselves in the captivating illustrations that vividly represent the various aspects of how to incorporate the integrity framework into daily activities and operations. During that day we also announced the winners the winners of our integrity art contest from the Young Women's Leadership Academy in Fort Worth, with their art pieces that depicted "What Does Integrity Look Like to Me", having input from our community partners helps us to build a better integrity program. Employees and Students also participated in our "Riskapalooza" event, a festival where we utilized games and incentives to learn about risk terms and how to recognize risk at HSC, Riskopoly, a human game board was a popular attraction. **More than 10%** of campus team members participated in these activities. One of the greatest compliments received was from a student who stated "I didn't win any prizes, but I learned a lot"

Reporting and Accountability

Our Drive Analytics solution continues to provide insight into HSC Code of Culture effectiveness and policy access. The analytics track organic access (via the HSC webpage) and access from our Learning Management System (LMS) to these resources.

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During the first quarter there were over 350 visits to the Code from more than 284 unique visitors, marking a sustained daily visitor increase across reporting periods. Additionally, more than 21% returned to the Code during this reporting period, a continued increase over the first (16%) and second (17%) reports. 91% of new hires completed the Code's Certification of Commitment.

It was also noted that the Code of Culture continues to help connect employees to policies. 31 policies were accessed during the quarter with Employee Ethics and Standards of Conduct, Student Code of Conduct, and Non-Retaliation continuing to be amongst the top 5 accessed.

Investigations of Misconduct

The compliance and integrity program must have an efficient and trusted mechanism by which employees and students can anonymously or confidentially report allegations of a breach of the company's code of conduct, policies, or suspected or actual misconduct. HSC encourages employees and students to report any suspected compliance concerns. FY24 first quarter yielded **8** Trustline calls. Six issues were closed, 1 currently under review by the Office of Integrity and 1 under review by the UNT System Office of Equal Opportunity.

The Office of Integrity is in the implementation phase of a case management software as continuous improvement to our investigations process. This software will assist with streamlined investigation reports, documentation, workflow and analytics.

Analysis and Remediation

Integrity and Awareness staff are currently completing Root Cause Analysis Training. This training will assist us to proactively identify risk and create education and training for emerging and trending issue from investigations and reporting.

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Reference

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Autonomy and Resources	*Has there been sufficient staffing for compliance personnel to effectively audit, document, analyze, and act on the results of the compliance efforts?*
Incentives and Disciplinary Measures	*Does the Chief Compliance Officer promote and enforce the Program consistently through appropriate incentives and disciplinary measures to encourage a culture of compliance and ethics?*
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Analysis and Remediation	*When noncompliance, unethical behavior, or criminal conduct has been detected, does the Institution reasonably prevent further similar behavior?*

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Executive Report

To: Laura Wright, Chair, UNT System Board of Regents
           Melisa Denis, Chair, Audit Committee

From: Renaldo Stowers, Deputy General Counsel & Chief Compliance Officer
           Steve Hill, Director of Compliance

Dept.: UNT System Administration Compliance & Ethics Program

SUMMARY: This serves as the FY24 Second Quarter compliance report on the effectiveness of the System Administration Compliance & Ethics Program. The Program is in the implementation phase of a redesign of the compliance program infrastructure.

PURPOSE: To inform the Board of progress made in achieving the desired level of maturity of the System Administration compliance program, including implementation of recommendations from the 2022 external compliance program assessment.

The table below summarizes compliance framework categories where a defined initiative is ongoing and those where notable progress toward maturity was made this quarter:

> **Framework Category:** Compliance Program Elements/Compliance Program Assessment Categories.
> **Ongoing Process:** Framework Categories where compliance program initiatives are ongoing.
> **Maturity Progress:** Framework Categories where maturity initiatives are described in detail in this report.

	Framework Category	**Ongoing Process**	**Maturity Progress**
1	Risk Assessment	X	X
2	Policies & Procedures	X	X
3	Training & Communications	X	X
4	Reporting & Accountability	X	X
5	Third-Party Management	-	-
6	Management Commitment	X	-
7	Autonomy & Resources	X	-
8	Incentives & Discipline	-	-
9	Continuous Improvement, Periodic Testing & Review	X	X
10	Investigation of Misconduct	X	-
11	Analysis & Remediation of Underlying Misconduct	X	X

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The following is a summary of the activities toward the desired compliance program maturity level reported this quarter:

Risk Assessment. The program's first strategic compliance risk survey is underway. The survey, which is different from the annual compliance risk assessment, is intended to identify inherent activities performed by each System Administration business unit that expose the organization to criminal, civil and regulatory sanctions. Among other things, the information obtained through the survey will be used to identify gaps between business functions and policies and training related to these functions; identify opportunities to improve specific policies and training from an operational and compliance perspective; and identify opportunities to develop or enhance the System Administration's process for managing changes in state and federal laws. Programmatically, the survey results will enable the program to establish baselines in specific compliance activities to use in assessing program effectiveness and improvement.

Policies & Procedures. The program began addressing deficiencies identified in the compliance policy infrastructure. The current infrastructure consists of four policies: (1) Compliance and Ethics Program; (2) Ethics and Standards of Conduct; (3) Reporting Suspected Wrongdoing; and (4) Gifts and Honoraria. The Reporting Suspected Wrongdoing policy is critical to establishing a "speak-up" culture where reporting suspected wrongdoing is recognized as a form of employee engagement. This policy also is essential to the defined anti-retaliation (whistleblower protection) program being implemented in the System. The policy has been revised to align with the System Compliance and Integrity Regulation, clarify mandatory reporting obligations, align the reporting avenues with the System Administration's organizational structure, and emphasize the steps the System Administration will take to protect confidentiality. The System Administration currently lacks a policy that provides a uniform approach for responding to government investigations, which is a potential high-risk compliance activity. A draft policy is being circulated to key stakeholders before presentation for adoption in the upcoming quarter.

Training & Communications. Emphasis is being placed on learning first-hand about System Administration day-to-day operations and communicating how the compliance program can contribute directly to the operations. The compliance team met with each Vice Chancellor to educate them about the Program and how their representative(s) on the Compliance Workgroup will translate into an enterprise approach to compliance and ethics. Emphasis also is being placed on increasing the System Administration Compliance & Ethics Program's visibility at all levels of the System Administration, and to making more compliance and ethics educational material available. The practice of writing and publishing opinions on actual ethics issues System management and employees experience has been implemented in conjunction with the Office of General Counsel. These opinions will be accessible on the Compliance and Ethics Program webpage. As part of the initiative to increase the Compliance & Ethics Program's visibility, the compliance team has worked with System Administration Communications & Marketing and the Chancellor's office to develop communications promoting the importance of the compliance Trust Line and the Compliance & Ethics Program.

Reporting & Accountability. The compliance governance framework is in place with the finalization of the Compliance & Ethics Program, Compliance Workgroup, and System Executive Compliance Committee charters. The Vice Chancellors and their key reports have received education on how this framework will contribute to a culture of compliance, and ethical and values-based decision-making and conduct, and a more enterprise approach to identifying and managing compliance risks. The framework also will assist in consistently providing complete and timely compliance and compliance program information to the Board.

Continuous Improvement, Periodic Testing & Review. The Compliance & Ethics Program is finalizing a compliance complaint intake process in collaboration with IT that will establish uniformity among the two System Administration defined compliance activities. This uniformity will provide data that enables the Program to review and test the effectiveness of responses to compliance complaints.

Analysis & Remediation of Underlying Misconduct. The Program also is collaborating with System Human Resources to develop a process for collecting information on how the System responds to employee wrongdoing. A process is required by the System compliance regulation and has been recommended by the Protiviti and the Texas Workforce Commission external reviews.

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Executive Report

To: University of North Texas System Board of Regents, Audit Committee

From: Arthur Bradford, Executive Vice President & Chief Financial Officer
              and Interim Chief Compliance Officer

Dept.:   University of North Texas at Dallas
              Office of Institutional Compliance

SUMMARY:

This serves as the Dallas FY24 First Quarter compliance report on the effectiveness of the compliance program to UNT Board of Regents Audit Committee. This is provided in accordance with the UNT System Audit Committee charter.

PURPOSE:

The purpose of this report is to demonstrate the progress of identified areas noted in the Compliance Program Effectiveness Assessment provided by Protiviti. During the first quarter of FY24, UNT Dallas prioritized identifying its next Chief Compliance Officer (CCO). A search committee was convened where several qualified candidates from around the country were considered. After careful consideration, three candidates made it to the final round. We are pleased to report that an offer has been extended and accepted and that the new CCO will be announced soon. In the meantime, the interim CCO, Arthur Bradford, Executive Vice President & Chief Financial Officer (CFO), continues to work with Protiviti to help advance the maturity of the program, including developing processes, policies, and procedures to ensure an effective compliance program per the Department of Justice guidance and the previous Protiviti review.

Risk Assessment

The foundation of an effective compliance program is an annual Compliance Risk Assessment. The UNT Dallas program is currently undergoing a Compliance Risk Assessment, aligning with the Enterprise Risk Management (ERM) methodology and other Institution Compliance programs. The Compliance Risk Assessment (CRA) will now be reviewed and approved by the appropriate stakeholders during the second quarter of FY24 once the new CCO onboards. The results of the CRA will inform a Compliance Work Plan (CWP) for the program, which will also now be reviewed and approved during the second quarter of FY24 once the new CCO onboards.

Department of Justice (DOJ) Element Status

Compliance Process	Status
DOJ Guidance Question 1: Is the Compliance Program Well Designed?	
Risk Assessment	In progress – drafting Dallas-specific compliance risk universe.
Policies and Procedures	Started – included in consultant proposal scope of services – UNT Dallas finalized the recording of the President's introductory video for the updated code of conduct policy materials scheduled for publication in Q2 FY24.

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Training and Communications	Not started – included in consultant proposal scope of services – Now expected to start in Q2 FY24 once the new CCO onboards.
Reporting and Accountability	In progress – new process will include resources consistent across the System.
Third-Party Management	Not started – System-level efforts underway.

DOJ Guidance Question 2: Is the Compliance Program implemented effectively?	
Commitment by Senior and Middle Management	In progress – drafting compliance committee charter
Autonomy and Resources	In progress – search for new CCO completed Q1 FY24
Incentives and Disciplinary Measures	Not started – now expected to start in Q2 FY24 once the new CCO onboards.

DOJ Guidance Question 3: Does the Compliance Program Work in Practice?	
Continuous Improvement, Periodic Testing, and Review	Not started – work plan will result from Compliance Risk Assessment
Investigation of Misconduct	Not started – analysis of process enhancements included in consultant proposal scope of services
Analysis and Remediation of Any Underlying Misconduct	Not started – analysis of process enhancements included in consultant proposal scope of services

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