VCU

VIRGINIA COMMONWEALTH UNIVERSITY

Integrity and Compliance

Annual Report

2014

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INTRODUCTION

Welcome to the Annual Report of VCU's Integrity and Compliance Efforts for FY 2014. Since the creation of this Annual Report in 2012, the goal has been to enhance the contents of the report each year; building on a solid foundation for a compliance and ethics program, modeled and supported by the Federal Sentencing Guidelines (FSG). This report now goes well beyond basic misconduct reporting statistics by providing a Board-level report of universitywide compliance and ethics matters. Accordingly, this report is presented to the Board of Visitors' Audit, Integrity, and Compliance Committee. We welcome all feedback and inquiries on the contents and your suggestions for future reports.

The purpose of this report is to support the Committee in fulfilling its obligation as the university's governing authority by providing information about various aspects of the university's integrity and compliance activities, and to report to the Board of Visitors. This charge comes directly from the Federal Sentencing Guidelines and is addressed with the following language, "[The] Governing authority shall be knowledgeable of and exercise reasonable oversight with respect to the implementation and effectiveness of the compliance and ethics program."

We hope this report provides awareness of VCU's integrity and compliance activities, events, and resources. It is intended as a supplement to the quarterly dashboard updates and will permit more discussion time for highlights of timely activities and events throughout the year. In addition, the FSG state, "The organization shall take reasonable steps to communicate periodically and in a practical manner its standards and procedures, and other aspects of the compliance and ethics program, to the individuals referred to in a subparagraph (B) [the governing authority] by conducting effective training programs and otherwise disseminating information appropriate to such individuals' respective roles and responsibilities."

Some of the sections may look familiar as we transition into an appropriately timed cycle of providing the necessary information needed in carrying out the duties as a BOV member and as a member of the Audit, Integrity, and Compliance Committee. While we will continue to bring you important updates throughout the year, this report represents a summary of the prior fiscal year's activities. We hope you find this information useful and look forward to continuing the dialogue about important integrity and compliance matters at the university.

The new sections and updates added this year:
- Government Reviews
- Risk Assessment Activity Update
- Title IX Program
- Training and Education

The updated sections reflecting FY 2014 activities:
- FY 2014 Issues and Events – Compliance Effectiveness Metrics
- Compliance Partners – Ombuds Services; OEHS; Clery Act

- Policy Program Updates
- Integrity and Compliance Office Effort Highlights

Sections previously presented to you throughout FY 2014:
- Compliance and Ethics Program Overview
- Compliance and Ethics Program Effectiveness
- Conflict of Interest Act (Interest Disclosure)
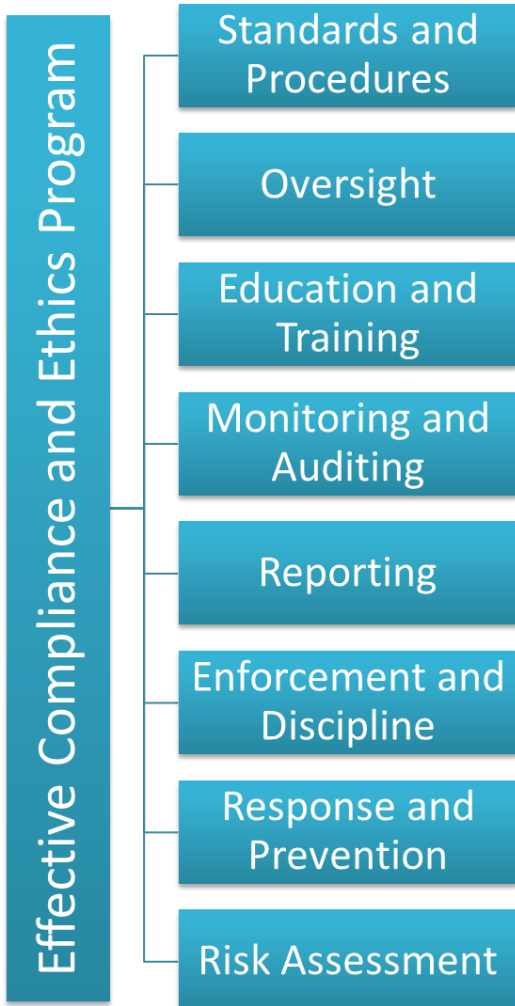- FY 2015 Compliance Program Initiatives

COMPLIANCE AND ETHICS PROGRAM OVERVIEW

Maintaining an effective compliance and ethics program in an ever-changing regulatory landscape, while facing competing interests in the current economy, are major concerns for organizations, including Virginia Commonwealth University. Developing and supporting an approach that permits dedicated resources to systematically translate obligations and expectations into appropriate actions by responsible institutional departments requires sustained commitment at the highest levels.

The following questions and answers will provide the Board of Visitors an overview of the university's commitment to the compliance and ethics program.

Effective Compliance and Ethics Program

- Standards and Procedures
- Oversight
- Education and Training
- Monitoring and Auditing
- Reporting
- Enforcement and Discipline
- Response and Prevention
- Risk Assessment

What are the elements of an effective compliance program?

To demonstrate effectiveness, organizations should meet the requirements from the seven elements, and the additional requirement of assessing risk, from Chapter 8 of the Federal Sentencing Guidelines. These elements are provided in the graphic to the left and selected highlights of universitywide efforts that demonstrate effectiveness are found on page 11. It is expected that a compliance and ethics program be reasonably designed, implemented, and enforced so that the program is generally effective in preventing and detecting patterns or practices of misconduct. Additional information is provided in the effectiveness assessment section beginning on page 7.

What is the Board of Visitors' responsibility for the compliance program?

The Board should be knowledgeable about the content and operation of the compliance and ethics program and should exercise reasonable oversight with respect to implementation and effectiveness of the program.

How does organizational culture impact compliance?

An organizational culture that encourages ethical conduct and a commitment to compliance with not only "the letter of the law," but also "the spirit of the law" is mission critical and significantly enhanced by engaged stakeholders. Board members and senior management taking an active role in the implementation of the compliance and ethics program set the tone that an organization's expectations are an individual responsibility and management's accountability. Understanding the importance and benefit of maintaining an effective program promotes that this endeavor is a journey not a destination that is incumbent upon every individual.

What are the benefits of maintaining a compliance program?

Establishing and maintaining an effective compliance and ethics program provides several benefits to the university.

Ethical Standards

- Furthers the university culture that does not permit or promote illegal or actionable behavior and prompts university employees to consider the potentially adverse legal consequences of certain misconduct.

- Enhances the institutional communication and reporting by educating employees about their responsibility for compliance and the resources available.

- Increases the likelihood of early detection if potentially illegal or actionable conduct does occur, thus creating the opportunity to correct or self-report as required.

- Serves as a basis to persuade governmental authorities to decline prosecution or initiation of a civil or regulatory action.

- Potentially reduces penalties or fines assessed and avoids the imposition of a government-mandated Corporate Integrity Agreement if misconduct does occur.

Compliance and ethics programs, driven by the Federal Sentencing Guidelines, are gaining prominence and attention not only because they make good business sense, but also because they are proving to be beneficial when penalties or prosecution decisions are considered by federal agencies. The Internal Revenue Service, Federal Bureau of Investigation, and Department of Justice, to name a few, acknowledge the value of these programs, if effective.

What recent events have impacted compliance programs?

In 2013, the Principles of Federal Prosecution of Business Organizations were widely discussed in public forums and revealed language related to showing leniency to organizations with effective compliance programs:

> **§9-28.800 Principles of Federal Prosecution of Business Organizations** – Where compliance programs exist and are designed to detect particular types of misconduct in a particular organization's line of business, prosecutors should consult with state and federal agencies with the expertise to evaluate the adequacy of a program's design and implementation.

More specifically, the most significant case involving compliance programs in the higher education setting involves the University of Tennessee and Professor Roth. After an export controls violation situation was discovered by the FBI, an external government investigation at the University of Tennessee was conducted and revealed that the professor was at fault for non-compliance and therefore held liable as an individual. This finding shifted all liability from the university to the individual because the university's compliance and ethics program was deemed "effective" and specifically noted as the reason for shifting the liability and preventing penalties that otherwise would have been imposed on the university. Today Professor Roth remains in prison and the University of Tennessee remains a model case as a proven benefit to maintaining an effective compliance and ethics program.
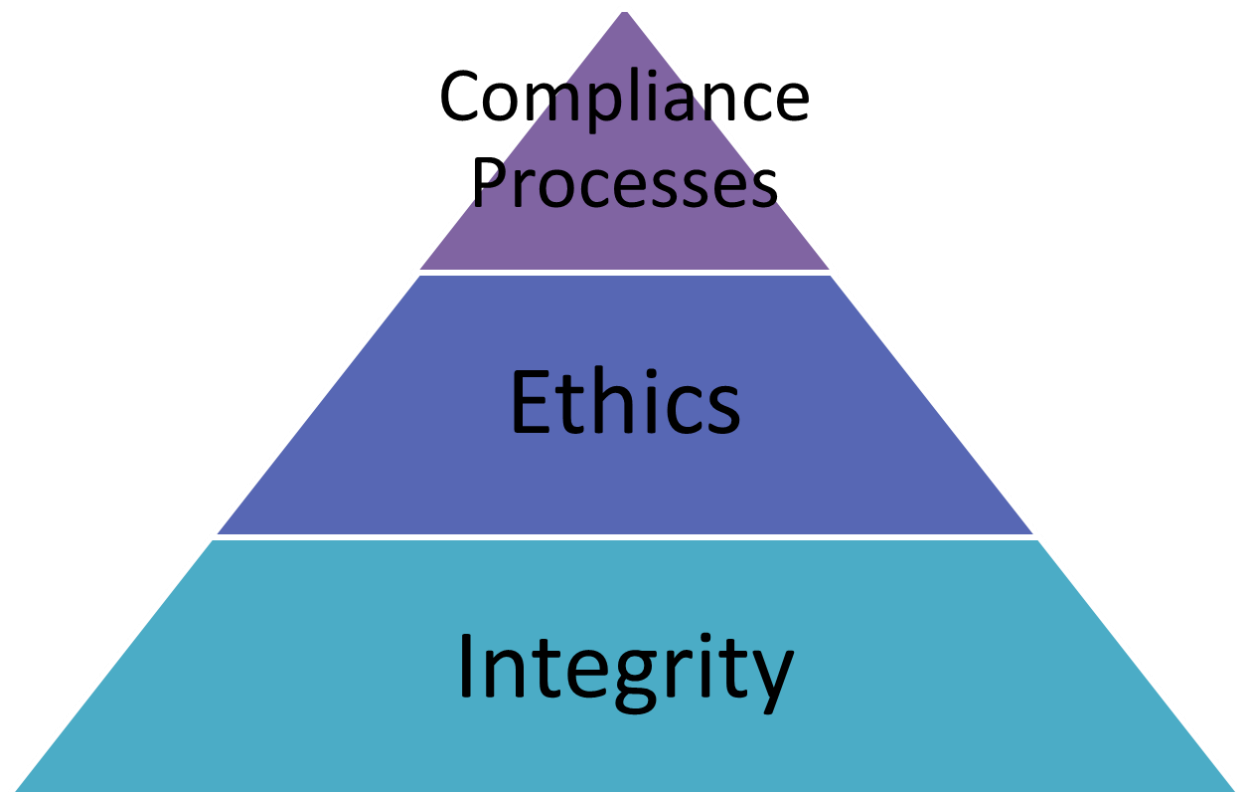
COMPLIANCE PROGRAM EFFECTIVENESS

In defining program effectiveness, it is important that as the program grows in strategic importance, empirical ways of testing the value of the current program and the activities pursued are needed. Common expectations of critical stakeholders (government regulators; Virginia citizens; the organization; and employees) must be met while improving overall program effectiveness.

A formal third party review of the program's effectiveness is slated for FY 2016. The rationale for this timeline is due to the industry standard of allowing programs under newer leadership to build on a foundation created by predecessors and permit adequate time to assess the current state and address changing needs. VCU had two key leadership positions newly in place as of Fall 2011, which directly affected the compliance and ethics program; therefore, this slated review will be a reflection of the progress over 4 years.

This section provides the Board of Visitors with a self-assessed effectiveness update for VCU's compliance and ethics program.

Defining Effectiveness and a Note Concerning Ethics:

To have an effective compliance program, an organization must establish and maintain an organizational culture that "encourages ethical conduct and a commitment to compliance with the law." - *U.S. Federal Sentencing Guidelines §8B2.1(a)(2)*

It is expected that a compliance and ethics program be reasonably designed, implemented, and enforced so that the program is generally effective in preventing and detecting patterns or practices of misconduct. In sum, the core elements of an effective program modeled after the U.S. Federal Sentencing Guidelines are:

- Oversight Function
- Standards and Procedures
- Education and Training
- Monitoring and Auditing
- Reporting
- Enforcement and Discipline
- Response and Prevention

Ethics are based in fairness, truth, and justice and should be communicated as responsibility driven. More specifically, "ethics" is what an individual should do because it is the right thing to do. Ethics is not just a factor to consider, it is a ground rule. Understanding the importance and benefit of maintaining an effective compliance and ethics program promotes that this endeavor is a shared responsibility incumbent upon every individual. The results shared from the biennial Compliance and Ethics Culture Survey and the Annual Report demonstrate the tone of

our culture and the reported concerns our culture is comfortable raising. Additionally, the following industry-wide measurements are considered when assessing compliance culture and are slated for incorporation into the compliance program's risk assessment activities:

- Leadership Commitment
- Mandatory Training Compliance
- Interactions with the Integrity and Compliance Office (ICO)
- Enforcement for Non-Compliance

The visual below illustrates VCU's framework for demonstrating effectiveness; specific details are provided at the end of this section.

What Drives Program Effectiveness?

Improving Relationships & Partnerships
- Focus on internal and external relationships
- Lines of Communication clear with a common ethics and compliance vision
- Develop critical ethics and compliance competencies

Increasing Risk Visibility
- Increase employee reporting
- Clarify risk management responsibilities
- Report cultural data to the Board

Encouraging and Supporting Adherence
- Tailoring training initiatives to individual needs
- Foster individual accountability
- Organizational justice at all levels

What is the Board of Visitors' responsibility for the compliance and ethics program?

The Board should be knowledgeable about the content and operation of the compliance and ethics program and should exercise reasonable oversight with respect to implementation and effectiveness of the program. The Annual Report and presentation provided to the Audit, Integrity, and Compliance Committee and annual Board Member Orientation presentations to the full Board assist in meeting this standard.

Board members may ask these basic questions focused on effectiveness:[1]

- Is the organization's program well designed?
- Is the program being applied earnestly and in good faith (i.e.; is it more than a paper program)?
- Does the compliance program work?

How would VCU's compliance program be viewed for effectiveness?

While there are opportunities for growth in our program, VCU is able to demonstrate effectiveness of its universitywide compliance and ethics program. VCU is operating from a position of moderate strength and recognizes there is growth potential.

Communication remains the number one challenge to reaching all employees with set standards, requirements, and expectations. This challenge is addressed with a multi-layered approach.

Currently, the university does not have a centralized learning management system to demonstrate comprehension of mandatory training material; therefore, this is an area for improvement. An advisory Training Council is being assembled to address this issue universitywide.

Compliance risk assessment activities, currently underway, and bolstering relationships universitywide with key compliance partners will provide data and support to assist in future initiative setting and accomplishment. Reports from these activities will be shared with the Board of Visitors.

What is VCU doing to maintain an effective compliance program?

The ICO, within the Department of Assurance Services, works with the Board of Visitors, management, and departments to develop and implement appropriate compliance and ethics initiatives aligned with both the university's strategic plan and discovered areas of opportunity. Pages 13-14 provide a detailed visual representation of highlighted efforts in place that demonstrate effectiveness. In addition to focusing on the elements of a program and the indicators of effectiveness, VCU's compliance and ethics program most closely supports two of the University Leadership Initiatives and select respective focused priorities listed below:

ULI 2: Attract, retain and support a nationally competitive and diverse faculty and staff
- Resources for faculty hires
- Great Place Initiative: Achieving place and service excellence
- Define and support faculty excellence

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[1]Questions from the Department of Justice as codified in instructions to federal prosecutors in the U.S. Attorney's Manual in 2010, provided in reference to determining whether to bring charges against organizations for the offenses of their employees, and agents.

ULI 5: Be responsible stewards of resources
- Fundraising
- Reallocation of resources
- Review and assess tuition model

In summary, compliance program initiatives, partners, and advisory committees exist at VCU to assist in demonstrating effectiveness of the university's overall compliance and ethics Program. Additionally, the University Integrity and Compliance Officer provides reports on university compliance and ethics program efforts to the Board of Visitors Audit, Integrity, and Compliance Committee to demonstrate the program's effectiveness.

Demonstrated Effectiveness
Preventing and Detecting Misconduct – Avoiding Patterns and Practices

Oversight

- Direct reporting relationship to the Board of Visitors' Audit, Integrity and Compliance Committee
- President and Senior Management
- Centralized University Integrity and Compliance Office gathers and reports information necessary to demonstrate effective compliance program

Standards and Procedures

- Unified Code of Conduct focusing on clear expectations supportive of a civil, professional, and ethical teaching, working, and learning environment - in progress
- Policy Program
  - Centralized Policy Library - www.policy.vcu.edu
  - Dedicated resource for policy assessment and development
  - Policy updates communicated by policy owners and in various newletters (HR, Research, ICO); "Policy Points" Communication Notification

Education and Training

- *The Compass* e-Newsletter
- Educational and Training Resources page - web-based resources for employee development
- Point of Hire Compliance and Ethics Education for Classified Staff at New Employee Orientation - Human Resources
- Annual Training for Department Chairs - Office of the Provost
- Welcome Letter to new Faculty at Orientation - Office of the Provost
- Annual Employee Compliance Education - Initial focus on new Code of Conduct
- VCU Sponsored Projects Administration Certification Program

Monitoring

- Compliance Advisory Committee - tracking non-compliance issues and government reviews
- Compliance Responsibility Matrix
- Compliance Calendar populated with responsible parties
- Conflicts of Interest - reporting, disclosure analysis, and management plans
- Research: Office of Sponsored Programs and Grants and Contracts
- Athletics Department - NCAA Compliance Efforts - Eligibility and Self Reporting Violations

Demonstrated Effectiveness
Preventing and Detecting Misconduct – Avoiding Patterns and Practices

Reporting

- VCU Helpline
- *Duty to Report* Policy
- Annual Report to the Board of Visitors' Audit, Integrity and Compliance Committee
- Compliance Partners - identified trusted advisors

Enforcement and Discipline

- Partnerships for consistent application
  - President and Senior Management
  - Human Resources
  - Office of the Provost
  - Office of University Counsel

Response and Prevention

- All reported issues shared with management to prevent recurrence
- Workplace Investigation Reports to Senior Leadership
- Incentivize ethical behavior with Employee Recognition Awards - Human Resources

Assessing Risk

- University Compliance Risk Assessment - Regulatory Reporting Calendar and Regulatory Grid populated with responsible parties
- Enterprise Risk Management Program
- Internal Audit Annual Workplan Risk Assessment
- Information Technology Audit Annual Workplan and Risk Assessment
- Agency Risk Management and Internal Control Standards - state requirement

FY 2014 Issues and Events: Compliance Effectiveness Metrics

REPORTING OVERVIEW

The Integrity and Compliance Office (ICO) maintains reporting mechanisms available to all university employees, including third party affiliates. Additionally, several compliance partners are identified throughout the university as able to receive and address reports of concern.[1] The purpose of these reporting mechanisms and identification of personnel is to demonstrate VCU's commitment to promoting a culture of integrity and compliance by facilitating an environment of open communication wherein employees are encouraged to ask for clarification of expectations and to bring forth any good faith concerns. Providing and maintaining these mechanisms assists in complying with the Federal Sentencing Guidelines for effective compliance programs and upholds the integrity of the institution's expectations expressed in policy, procedure, and applicable laws and regulations. The ICO analyzes relevant data centrally to create this collaborative report and to assure effectiveness of internal response mechanisms. The reported concerns raised this year, and subsequently utilized for this report's statistics, were received and addressed from the following university areas:

- Athletics
- Department of Human Resources (Employee Relations)
- University Integrity and Compliance Office
- Institutional Equity Office (EEO/AA Compliance)
- Office of Vice President for Research (Office of Research Integrity)
- University Audit and Management Services

The confidential reporting mechanisms include the VCU Helpline, a telephone and web-based service administered by a third-party vendor offering optional anonymity; a locally hosted email account; campus and US mail; direct reporting to Integrity and Compliance Office personnel and any other so designated personnel able to receive reported concerns, examples of which include compliance partners in the VCU Police Department, Office of Institutional Equity, Ombudsperson, Office of Environmental Health and Safety, Human Resources and Athletics.

Overall, the university received and managed a total of 276 reported concerns in FY 2014, an increase of 37% from 202 reported concerns in FY 2013.

The topics listed below are the data metrics tracked and divided into subsections contained in this report:

- Report Intake Method
- Reporter Type and Anonymity
- Allegation Type by General Topic
- Report Outcome
- Unique Trends[2]

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[1]Additional summaries of statistics covering Ombuds Services, Clery Act Compliance, and the Office of Environmental Health and Safety are also included this year in the Compliance Partners Section of this Report.

[2]Unique Trends or special points of interest from specific areas are identified in footnotes throughout.

In summary, highlights from this report demonstrate that VCU employees are the most common reporter type, with an 78% preference for reporting directly to the ICO or compliance partner and thereby choosing to disclose their identity. The most reported allegation type is *Human Resource/EEO related* reports at 73% followed by *Financial related* reports at 12%. Thirty-nine percent of reports had an outcome determination of *Unsubstantiated*, 33% of reports were *Substantiated,* while the outcome of the remaining 28% could not be substantiated due to lack of information or other reasons.

The metrics collected and analyzed in this report will continue as a foundational building block of an effective compliance program, allowing targeted training and education for appropriate audiences throughout the university and highlighting opportunities for improvements. This report is made annually to the Board of Visitors' Audit, Integrity, and Compliance Committee. The following pages contain detailed information and conclusions.

REPORT INTAKE METHOD

Overview

The university community is provided with multiple reporting mechanisms to report concerns or make inquiries related to VCU's expectations.

The VCU Helpline, available by telephone or website, is hosted by EthicsPoint, a third-party vendor specializing in a higher education client base. The phone number and web address for the Helpline are posted on every webpage of the Assurance Services website; advertised on Helpline posters placed in employee "break or kitchen areas" throughout VCU; included in all Integrity and Compliance employees' email signatures; communicated through new employee and welcome back coaches letters from the university compliance officer; on business cards; brochures; and also linked on ICO's *The Compass* eNewsletter and other VCU department websites. Specifically, various operations require content specific compliance education modules to be completed annually by all employees which reiterate the university's reporting expectations and increases awareness of available reporting options such as the Helpline.

Reporting Mechanisms

- Call the VCUHelpline
- Submit to the VCUHelpline online
- Contact ICO staff or compliance partners directly
- Email the general ICO email address
- U.S. Postal Service and campus mail

While university employees are encouraged to contact their supervisor, other compliance partners, or Integrity and Compliance Office staff directly to voice concerns, a general ICO email address; U.S. Postal mail; and campus mail options are also available. Reports may also be referred to the ICO by other university departments and/or the Office of the State Inspector General (OSIG) Fraud, Waste and Abuse Hotline.

Below, the *Report Intake Method* metrics illustrate the utilization of every available reporting mechanism.

Report Intake Method
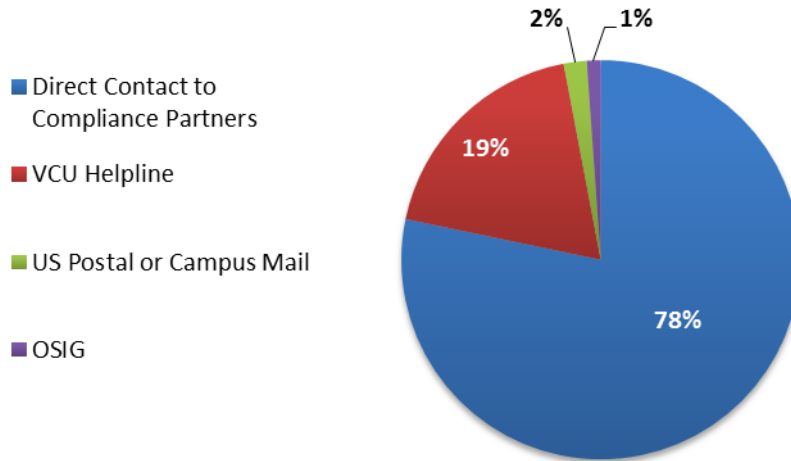
Conclusion

Directly reporting to an ICO employee or compliance partner was the most commonly used report intake method at 78% of reports and the VCU Helpline was the second most utilized method at 19% of reports. Being that an overwhelming majority of reporters directly contacted a recognized compliance partner, anonymity is not a major concern. Often, confidentiality is requested but notations of retaliation are rare (expressed in 10% of reports) and it is concluded that a majority of our university community does not fear being identified when raising concerns. This contributes to VCU maintaining an effective compliance and ethics program.

The Helpline, unlike other more traditional, anonymous reporting mechanisms, has the functionality to provide feedback to the reporter. This aids in setting out proper expectations for the reporter and often results in providing objective source materials, such as policies, as additional information.
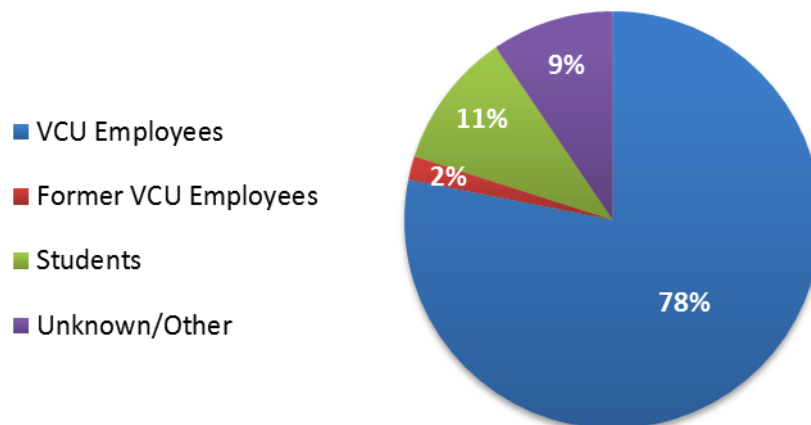
REPORTER TYPE
AND ANONYMITY

Overview

Reporting mechanisms are available to all university employees, including contractors and visitors. Reporters have the option of remaining anonymous or providing their name and contact information. In some cases, a reporter later reveals their identity to the ICO as the inquiry or investigation continues. The disclosure of identity is evidence of employee confidence in the ICO's commitment to confidentiality and the university's policy of non-retaliation for those who report concerns in good faith.

The *Reporter Type* metrics illustrate which individuals utilize available reporting mechanisms.

Reporter Type

Legend:
- VCU Employees
- Former VCU Employees
- Students
- Unknown/Other

Conclusion

Overall, the VCU employee was the number one reporter type, this is consistent with prior years. Additionally, 19% of all reporter types chose to remain anonymous. While this reflects an increase in utilizing the anonymous option [compared to 12% selecting anonymity in FY 2013], this overall percentage demonstrates a level of comfort in raising known, or suspected, concerns. This increase has resulted in a decision to periodically monitor this metric throughout the year for significant variances.
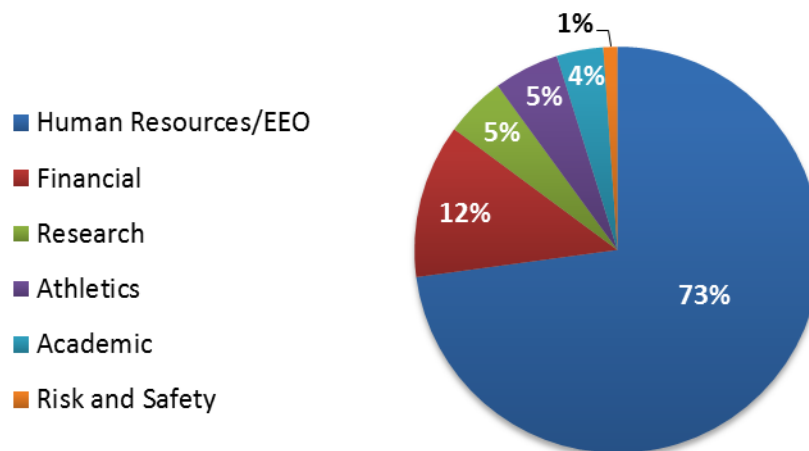
ALLEGATION TYPE

Overview

Report allegations are generalized into six major categories listed below. Examples of each are provided.

- Human Resources/Equal Employment Opportunity[4]: *Failure to Report All Leave Taken; Employee Misconduct; Threat or Inappropriate Supervisor Directive; Nepotism; Discrimination or Sexual Harassment; Bullying*
- Financial: *Fraud, Waste, Abuse or Misuse of Resources; Falsification of Records; Improper Disclosure of Financial Records; Conflict of Interest - Financial*
- Research: *Scientific Misconduct including Falsification, Fabrication and/or Plagiarism*
- Athletics[5]: *NCAA Violations; Improper Giving of Gifts; Misconduct in VCU Athletics*
- Academic: *Academic Regulations; Program and Degree Requirements; Admission, Enrollment and Transfer of Students to the University*
- Risk and Safety: *Unsafe Working Conditions; Environmental and Safety Matters*

The *Allegation by General Topic* metric illustrates the general nature of reported concerns.

Allegation Type by General Topic

Legend:
- Human Resources/EEO — 73%
- Financial — 12%
- Research — 5%
- Athletics — 5%
- Academic — 4%
- Risk and Safety — 1%

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[4]Fourteen allegations in the HR/EEO category, one allegation in the Research category and one allegation in the Financial category remain in process and have not yet reached final outcome status.

[5]Athletics statistics include six NCAA violations that were discovered through routine monitoring activities. All nine violations were self-reported to the NCAA as required. On average, between eight and twelve violations per year are expected by the NCAA at institutions similar in size and scope to VCU.

Conclusion

Overall, 73% of allegations raised are related to the general category of Human Resources and Equal Employment Opportunity [an increase of 2 percentage points from FY 2013].

Notably, the subcategory of *Discrimination/Harassment* related allegations has increased, while the *Bullying* and *Threat* related allegations has decreased compared to being a more commonly reported allegation in past years. Additionally, the substantiation rate for the subcategories of *Discrimination/Harassment; Bullying*; and *Threat* is 13%, or 87% unsubstantiated. It is suspected that this is likely due to an increase in awareness of reporting expectations and available resources along with individuals not understanding the definitions, or elements, of the terms *Discrimination*, *Harassment* or *Threat*. In most cases, these allegations were due to a combination of employees being disciplined for inappropriate behaviors, for performance issues, and some instances of lack of respect and breakdowns in communication.

Specifically noted is a slight decrease in allegations received related to an extremely unprofessional/uncomfortable working environment (i.e., bullying). Nine percent of all reported concerns contain elements of behaviors and encounters related to extremely unprofessional/ uncomfortable working environment [compared to 11% from FY 2013].

REPORT OUTCOME

Overview

All reports result in classification of *Substantiated, Unsubstantiated, Other,* or *Not Enough Information*.

A report is classified as **Substantiated** when, after inquiry or investigation, violations of expectations, policy, regulation, or law are found. When this occurs, the ICO is available to consult in the development of a corrective action plan for appropriate parties.
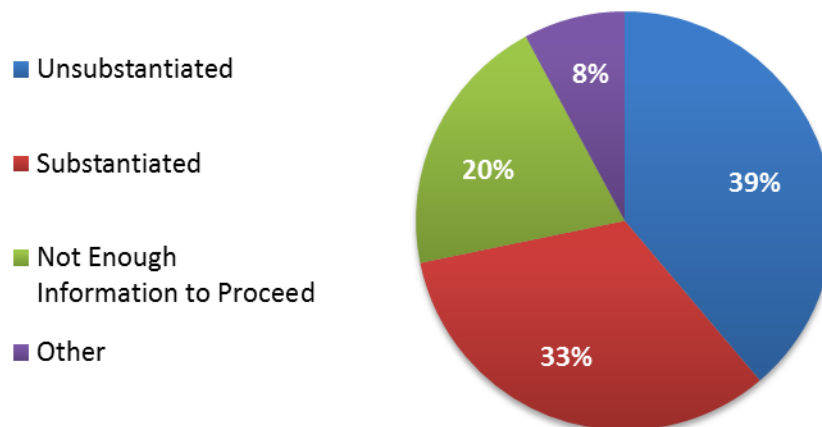
A report is classified as **Unsubstantiated** when, after inquiry or investigation, no violations of expectations, policy, regulation, or law exist.

Reports that contain general questions rather than concerns or specific allegations; are not related to current VCU employees or during employment with VCU; or include allegations later withdrawn by the reporter and ICO determines that no further investigation is necessary are classified as **Other**.

Reports that contain insufficient information to proceed with additional inquiry or investigation are classified as **Not Enough Information**.

The Report Outcome metrics illustrate the validity of the allegations raised.

Report Outcome

- Unsubstantiated
- Substantiated
- Not Enough Information to Proceed
- Other

39%
33%
20%
8%

Conclusion

Overall, 39% of reports were classified as *Unsubstantiated*, suggesting that once an individual makes an allegation to a central office indicating they suspect something is "not quite right", after initial vetting and investigation, in a majority of cases, no misconduct is identified.[6] Accounting for another 28% of the substantiation rate is attributed to "Not enough information to proceed" and the "other" outcomes. "Other" as an outcome indicates an inquiry or question was raised, not an allegation of misconduct.

Further details based on general allegation type are as follows: :

- Human Resources / Equal Employment Opportunity - 61% unsubstantiated/other
- Financial - 70% unsubstantiated/other
- Research - 73% unsubstantiated/other
- Academic - 80% unsubstantiated/other
- Athletics - 21% unsubstantiated/other
- Risk and Safety - 50% unsubstantiated/other

[6]At the time of data collection for this report, 16 allegations were in progress; therefore, an outcome had not yet been reached.

Compliance Partners:
Those that make it real

VCU OMBUDS SERVICES

Overview

Having an Ombuds Services function provides informal, confidential, impartial, and independent services that supplement, not replace, the formal administrative processes at the university.[7] The Ombuds Services Program was created in 2008 and is run by one compliance partner, the University Ombudsperson, or "Ombuds."[8] Efforts are dedicated to facilitating professional communication and developing productive and positive options that address concerns. Specific services include alternative dispute resolution opportunities, mediation, coaching, and problem solving. The Ombuds focuses on the needs and skills of an individual as opposed to reported misconduct. Once misconduct is identified in a session with the Ombudsperson, encouragement is given to the individual to make a report with the University Compliance Officer, the Research Integrity Officer, or other appropriate compliance partner. Noteworthy highlights for an 11 month time period follow below.[9]

Conclusion

- 98.3% of reporters are *employees*; 1.7% are *students* (specifically graduate and post-doctoral)
    - 85.8% are from the Monroe Park Campus
    - 13.1% are from the Medical Campus
    - 1.1% are from the Qatar Campus
- The concerns (195) addressed by the Ombudsperson are as follows:

Category	Number	Percentage
Compensation and Benefits	9	4.6%
Evaluative Relationships	92	47.2%
Peer and Colleague Relationships	46	23.7%
Career Progression and Development	39	20.0%
Safety, Health and Physical Environment	3	1.5%
Service/Administrative Issues	3	1.5%
Values, Ethics and Standards	3	1.5%
Total	195	100%

[7]Due to the nature of VCU's Ombuds Services, metrics tracked are not aligned with this report format; therefore, a separate section highlighting the value add and unique metrics of this program is provided.

[8]Individuals utilizing this reporting mechanism are 100% identified and receive confidentiality as a matter of process.

[9]These statistics do not include the period from July 1-31, 2013 due to a change in Ombudsperson personnel.

OFFICE OF ENVIRONMENTAL HEALTH AND SAFETY

Overview

The Office of Environmental Health and Safety (OEHS) is highlighted in this year's report because it is one of the most heavily regulated and compliance-focused functions of the university. The primary mission of OEHS is providing the VCU and the VCUHS community with a safe and healthful environment. OEHS acts proactively through surveys, consultation, teaching, advising, and monitoring of the environment to fulfill this mission. OEHS supports both the university's and health system's Radiation, Chemical/Biological, Fire and Occupational Safety needs. Each year OEHS produces an Annual Report of activities (including services, investigations and emergency responses) based on the calendar year.[10]

Conclusion

The University and Health System are complying with the major environmental and occupational regulations. In CY 2013, there were no significant findings against either the University or Health System by any outside agencies.

- ❖ **Radiation Safety Section:**
  - Conducted quarterly surveys of required records, signage, equipment calibrations, contamination and exposure risks, labeling, use, and storage surveys – 1,100 surveys in laboratories and radioisotope use areas
  - Reported annual inventory of certain sealed sources to the Nuclear Regulatory Commission
  - Conducted nine trustworthiness and reliability reviews for individuals requesting unescorted access to certain quantities of radioactive material (Cesium-137 irradiator) as required by the security plan. All nine individuals were approved.
  - Approved a statement of work for the National Nuclear Security Administration's (NNSA) Global Threat Reduction Initiative (GTRI) team to install security enhancements in areas surrounding the Cesium-137 irradiator in the Massey Cancer Center. Final testing is scheduled for completion in Spring 2014.

- ❖ **Chemical and Biological Safety Section:**
  - Conducted 1,608 Laboratory inspections - 595 are specifically for biosafety concerns – total space standing at 1,608 laboratory spaces

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[10]Efforts are underway to track future statistics in line with the universitywide effort to be on a fiscal year for consistent reporting.

- Conducted 156 vivarium inspections, in support of the Institutional Animal Care and Use Committee (IACUC) facility inspections program

- Conducted 66 mold inspections

- Responded to 43 requests for industrial hygiene inspections

- Conducted monthly inspections of all university autoclaves – total of 324 inspections

- Conducted 914 research protocol reviews. The number of protocols increased significantly, and are becoming increasingly complex, occupy larger portions of laboratory space per protocol, and are more time intensive in appropriately assessing for compliance with NIH rDNA Guidelines and other regulatory requirements

- Hazardous Communication Standard (HAZCOM), commonly known as Worker's Right to Know (WRTK), enforced by Occupational Safety and Health Administration (OSHA) – supervisors are now required to maintain a copy of each of their employee's WRTK statement as well as send a copy to OEHS where the information is accumulated in a specialty data base.

- Created OSHA Global Harmonization System (GHS) awareness training for laboratory and facility employees – 253 employees completed and passed the training

- Environmental Protection Agency currently considers the university to be an indirect discharger of wastewater; therefore, disposal practices must be in compliance with the Clean Water Act. There were no waste water samples taken by the City of Richmond in 2012

- Under the Federal Resource Conservation and Recovery Act (RCRA) of 1976, the university is considered a large quantity generator of hazardous waste; therefore, the Chemical and Biological Safety Section (CBSS) established a comprehensive Chemical Waste Management Plan that saw the university manage 135,088 pounds of waste in 2013

- Monitored 123 asbestos abatement projects, inspected 143, and prepared 57 removal project designs

❖ **Fire and Occupational Safety Section:**

- VCU Fire Safety works closely with contractors and VCU Facilities Management to pre-test and pre-inspect fire systems and life safety code issues in order to expedite SFMO approval and acceptance during construction and renovation of all VCU properties

- 156 Life Safety Inspections; a minimum of 1 unannounced fire drill in every university, health system, and foundation owned building

- Respirator Fit Testing and Training - 51 training sessions, 1,150 employees fit-tested, and 5,000 were assessed for Personal Protective Equipment

THE CLERY ACT

Overview

VCU has the responsibility for implementing universitywide "Clery Compliance". In 1990, Congress enacted the Crime Awareness and Campus Security Act which required all higher education institutions to disclose campus crime statistics and security information.[11] The act was amended several times thereafter with the 1998 amendment renaming the law the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act. It is generally referred to as The Clery Act. The goal of VCU's Clery compliance efforts is to maintain current and comprehensive records and to prepare annual reports containing information on a number of security-related protocols and policy statements. As part of the university's comprehensive compliance program, Clery compliance includes awareness and monitoring of specific requirements by the Clery Compliance Workgroup. In addition, external monitoring is possible through U.S. Department of Education investigation or audit.

In January 2013, a consultant visited the campus to conduct a mock audit of Clery Compliance requirements. No significant failures were noted at that time. All requirements are now met and work continues to implement recommendations for best practices utilizing the members of the Clery Compliance Workgroup, representative of those areas most affected by the Clery Act, with additional reporting through the Presidential Safety Committee.

Conclusion

This year, the first phase of the Clery Compliance Monitoring Protocol was implemented to assess compliance. Recommendations were made to management regarding enhancement of documentation maintenance procedures and compliance tool development to ensure accurate reporting of disciplinary referral statistics.

The October 1, 2013 deadline for reporting to Department of Education and publication of the report to the university community and prospective students and employees was met. The university is currently on target to meet the October 1, 2014 deadline.

There were 20 Crime Alerts sent to the university community due to events on, or near, campus classified as having potential to present serious and/or an on-going threat to the campus community. These are timely warnings required to be sent in support of safety.

Lastly, the 2013 calendar year closed out with a Department of Education, Clery Act Compliance Division, non-routine review prompted by a reported attempted abduction - which was later deemed unfounded. See the Government Reviews section of this report for additional details.

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[11]See Higher Education Act §485(f), (i), and (j) – Clery Act and Related Campus Security Provisions for full details.

TITLE IX PROGRAM

Title IX is one of the top issues of concern facing organizations receiving financial aid from the Department of Education. Compliance with this gender equity based regulation has become increasingly challenging due to recent headlines in the news; expansion of coverage and lowered standard of proof outlined in the Dear Colleague Letter of April 2011; additional guidance from the Department of Education's Office of Civil Rights (OCR) released April 29, 2014; and an increase in reports to the OCR from a more educated public. The new regulatory guidance presents opportunities and challenges for all institutions, especially in higher education. VCU continues to improve processes and recent changes, outlined in the Government Reviews Section of this report, position the university to respond on an improved basis.

Currently, VCU proactively identifies possible survivors of sexual misconduct, including sexual violence, by way of an integrated Police Department, trained residential staffing personnel, and collaborative working relationships. Additionally, Maxient, the student affairs and conduct electronic system of record, houses documentation necessary to track and retain information used to enhance safety efforts on campus. The Office of Institutional Equity addresses those matters falling under Title IX's purview that involve both students and employees.

Training needs to be, and will be, enhanced moving forward for both employees and students. This endeavor is being addressed by the Title IX Leaders Group and enjoys support from Dr. Rao and senior leadership. See the Training and Education Section of this report for additional information.

CONFLICT OF INTEREST ACT

Each year, the state requires reporting related to Conflicts of Interest. As required by the state, all board members complete a Financial Disclosure form and all employees determined to be in a position of trust complete the Statement of Economic Interest form. Human Resources, Office of Research, and Department of Assurance Services assist in compiling the list of employees who hold a position of trust. The Integrity and Compliance Office assists with timely filing as the agency liaison with the state.

All Financial Disclosure forms and Statement of Economic Interests forms were due to the Integrity and Compliance Office by January 9, 2014. Three notifications to complete this requirement were disseminated December through January. The due date to the state was January 15 at which time VCU's overall compliance rate was 49% for timely filing. Except for the Institutional Review Board (IRB) and Biotech Board, all administrative and academic areas have achieved a 100% compliance rate.

Concurrent with the efforts to achieve our mission and strategic initiatives, as stewards of public resources, VCU must maintain oversight of external relationships and the potential for conflicts of interest. In the normal course of university business, conflicts of interest will arise. Not all conflicts of interest signify an act of wrongdoing, but all conflicts must be identified, disclosed and managed, or removed, when appropriate.

VCU has three core processes for identifying, evaluating, managing, and removing conflicts of interest. They include:

- The state required annual interest disclosure;
- Researcher conflict of interest reporting; and
- University regulations governing outside professional activity and employment, research, and continuing education.

Interest disclosure reporting and processes have been a continuing project topic for FY 2014, from both a state requirement perspective; a federal regulation requirement in the research context; and a university interest in the risk assessment and efficiency contexts. Endeavors initiated and continuing include: maintaining an electronic solution for submission of interest disclosure; determining strengthened criteria for who is in a position of trust; performing a structured analysis of data collected and management plans once conflicts are identified; analysis of university's position on this topic in relation to Southern Accreditation of Colleges and Schools (SACS) requirements; policy gap assessment and development; and annual education to new board members concerning interest disclosure at New Member Orientation and fulfilling the training requirement required by the state this year for applicable employees. These accomplishments have been collaborative in nature with many compliance partners. Updates will continue to be provided to this Committee specific to policy creation and implementation and the university's approach to identifying and managing interests.

GOVERNMENT REVIEWS

This section highlights significant non-routine government reviews (investigations or inquiries) conducted; the results of the reviews; and university remediation plans to prevent recurrence of any identified issues. In the future, this report will include statistics and analysis related to external government reviews, both routine and non-routine, as improvements are made to track and collect relevant data for this purpose. Based on this year's events, the overall compliance dashboard color has been changed from green to yellow indicating "Challenges encountered that have an impact on resolution or implementation."

Drug Enforcement Agency (DEA), Controlled Substances Regulatory Compliance:
During a routine inspection, it was identified that significant challenges existed in maintaining compliance with the Controlled Substances Act. The result of this inspection prompted further and extensive review by the Richmond District Office and garnered some attention at the Washington D.C. headquarters. In summary, both VCU and the DEA have exchanged learning opportunities and VCU has come into compliance after finding material defects in operations related to compliance with the Controlled Substances Act. The research environment presents challenges to both VCU and the DEA and constructive dialogue has afforded opportunities to avoid fines, reputational harm, and time to cultivate a new focus on compliance activities under the Controlled Substances Act. Significant changes in individual operations; policy; education; internal review processes; and overall research operations have resulted in meeting the proposed remediation plan's elements and places VCU in a position of strength moving forward.

Department of Education, Office of Civil Rights (OCR):
The university is currently under a resolution agreement stemming from multiple complaints.

In summary, several complaints were made to the Office of Civil Rights which prompted an inquiry related to the university's Title IX compliance activities. Since the inquiry, the OCR has conducted a day long training event on campus and continues a dialogue with the University Counsel related to handling current complaints. The resolution agreement covers required policy and training enhancements and expects internal coordination and timeliness of investigative work. Prior to signing the agreement, efforts have been underway since January 2014 to align with the spirit of the resolution agreement which was signed by President Rao April 2014. The resolution agreement imparts significant additional administrative work on already strained dedicated equity resources. Recently, the equity function was moved from the Division of Inclusive

Excellence to the Finance and Administration Division. Currently, the equity function is being overseen by the University Integrity and Compliance Officer in conjunction with Vice President for Finance and Administration and in collaboration with University Counsel. In support of the work needing attention, two positions are open for hire: a Director and an additional investigator and temporary resources have been retained and additional resources have been relocated to support this pressing need.

Department of Education, Office of Federal Student Aid - Financial Aid Review: During a routine review for compliance with the Higher Education Opportunity Act, the agency reviewed financial aid matters, as well as Clery Act compliance. No issues were found with Clery Act compliance and minor clarification matters have since resolved which were related to internal operations.

Department of Education, Clery Act Compliance Division - Clery Act Review:
A non-routine review was prompted by a required Timely Warning Notification sent to the university community of an attempted abduction. While the abduction was soon after deemed unfounded, this Clery Act Division proceeded with this review by interviewing the Assistant Chief of Police and by requesting crime logs for last 3 months; all timely warning notification for previous 6 months; and all unredacted reports related to the attempted abduction. After review of records and the interview with VCU Police, the federal agents were satisfied with compliance efforts and praised the internal operations regarding these matters.

POLICY PROGRAM UPDATE

The Integrity and Compliance Office (ICO) has the responsibility for maintaining a universitywide Policy Program. The goal of this program is to maintain current and comprehensive policies and procedures conveying the expectations of VCU. The responsibility for the Policy Program and the centralized Policy Library are in place to meet industry best practices; contribute to a culture of ethics and compliance; and to meet the Southern Association of Colleges and Schools (SACS) and federal requirements. In accordance with SACS requirements, policies and procedures are to be in writing, approved through appropriate university processes, published and accessible to university employees, and implemented and enforced by the university.

The Policy Program most significantly supports the element of *Setting Standards and Procedures* for the organization, as outlined in Chapter Eight of the Federal Sentencing Commission's Guidelines (FSG) for an effective compliance program. The Program also provides for demonstrated FSG compliance with *Education and Training; Monitoring; Response and Prevention;* and *Enforcement and Discipline* elements. Below are details, outlining how this new universitywide endeavor contributes to each of these elements.

In support of *Setting Standards and Procedures*, the ICO maintains a centralized Policy Library housing all universitywide policies. An enhanced, user-friendly Policy Library is slated for availability in Fall 2014 that will allow for continued centralization and data normalization. Additionally, the ICO also has accepted responsibility for being the university's regulatory policy liaison with the Commonwealth.

The element of *Education and Training* is supported by communication of new and revised policies to the university community and by guiding policy owners (authors or responsible parties for content) through all stages of the creation, maintenance, and approval processes. This process entails providing significant resources to policy owners and results in obtaining a centralized, version controlled document in the expected format. Additionally, the first issue of *Policy Points,* a semiannual policy notification tool, has been developed and distributed universitywide communicating policy updates. The inaugural issue of *Policy Points* is provided on page 37. Further, all policy owners are provided a policy development tool and offered personal one-on-one sessions for assistance and maintenance of their policy. Journeying through this formal process educates all policy owners on appropriate and transparent policy development for the university. Discussions are ongoing concerning potential changes to the formal approval process and will be brought to the Board of Visitors for formal approval at the appropriate time.

The *Monitoring* element is enhanced by the Policy Program through the communication and monitoring of triennial timely review of existing policies and an ongoing analysis of need to

further develop existing policies or create new policies.

The element of *Response and Prevention* is furthered by clarifying VCU expectations in formal written policies, and identifying a need for creation of new policies to prevent misconduct. Gap assessment is ongoing and takes into consideration trends in higher education, current topics in the national landscape, and the needs of the university.

The element of *Enforcement and Discipline* is better demonstrated by adding the following language consistently to all policies routing through the Policy Program:

Noncompliance with this policy may result in disciplinary action up to and including termination. VCU supports an environment free from retaliation. Retaliation against any employee who brings forth a good faith concern, asks a clarifying question, or participates in an investigation is prohibited.

Some highlights are as follows:

Forty-four policies have been tracked and managed in FY 2014. Of the 44 policies:

- Ten were newly created;
- Two had substantive revisions;
- Three have resulted in an in-depth analysis and assistance with further development;
- The remaining 29 resulted in routine assistance navigating program requirements; and
- Nine have completed the full policy approval process and have been added to the Policy Library.

Key policies developed this past year include:
Board of Visitors' Ethical Leadership
Board Member Benefits
Compliance with US Export Controls Laws
Using Controlled Substances for Research
Safety and Protection of Minors
Early Course Registration for Military-Related Students
Student Code of Conduct

Lastly, a Policy Writer's Workshop slated for FY 2014, was held in August. This was an educational event detailing classification of policies; the importance of consistency in development; drafting and writing tips; and internal requirements related to policy creation and maintenance.

VCU Integrity and Compliance

Make it real.

The Policy Program is pleased to bring you *Policy Points!* This publication is a new biannual notification bringing awareness to all universitywide policy updates. All policies are located in the policy library, providing centralization and data normalization.

This 1st edition *of Policy Points* reflects recent updates through June 2014. If you have questions, please don't hesitate to email policy@vcu.edu or call 828-3982 to reach Senior Policy Analyst, Audrey Michael.

Please visit *www.policy.vcu.edu* to access current versions of all university-wide policies.

POLICY POINTS

HAVE YOU HEARD?

NEW POLICIES:

Clinical Trials Registration - The importance of Clinical Trials registration under Title VIII of FDAAA (Public Law 110-85) as it applies to ClinicalTrials.gov registry is explained.

Early Course Registration For Military Related Students-Interim - Check out the new process for military related students; a SCHEV requirement.

Outgoing Sponsorships, Advertising and Endorsement - Seeking university sponsorships or endorsement of your organization or programs? See what's required.

Payment Card - University merchants who accept payment cards must be compliant with PCI DSS for secure handling of payment card information. Read all about it here.

Student Code of Conduct - Outlines all student expectations & adjudication processes.

University Trademarks and Licensing - Printing a new VCU T-shirt or creating a bumper sticker? Read this policy first before doing so.

Using Controlled Substances for Research - Are you conducting research with controlled substances? Authorized university members must comply with federal & state laws. Read it here.

SUBSTANTIVE REVISIONS:

Alcohol and Other Drug Policy - Read about the new requirements if you are planning an on campus event that serves alcohol.

Authority to Execute Contracts and Other Documents - *Who* can execute contracts? Read here. *(Formerly Resolution Authorizing Certain University Officers and Employees to Execute Contracts and Other Documents)*

MINOR REVISIONS:

Academic Rights and Responsibilities

Faculty Bonus Award

Faculty Roles and Rewards

Prohibition Against Sexual Harassment

Textbook Sales

Title IX Student Harassment and Sexual Misconduct Anti-Discrimination Policy (Formerly Student Sexual Misconduct policy)

Please see policy updates in the *Compass*, VCU's compliance and ethics themed e-newsletter, during the alternating quarters of *Policy Points*.

UPDATE

TRAINING AND EDUCATION

This section provides timely updates to universitywide training and education efforts and does not yet include information related to specialty training requirements such as research activity related, OSHA related, operating internal systems, or information security training.

Enhancements:

An electronic policy based notification tool was developed this year to update the university community on newly created or significant and minor revisions to VCU policies. More information and a sample of this tool, Policy Points, is located in the Policy Program Update section of this report.

Compliance Week—a week of education and awareness:

In recognition of National Compliance and Ethic's Week in May 2014, the ICO conducted a week of ethics based e-mail activities for all employees. Activities included an opportunity to recognize a colleague for their commitment to integrity and compliance; a 30-second poll assessing familiarity with the Code of Conduct and the Policy Library; submission of employees' personal workplace mottos; and an ethical decision-making quiz. In addition, approximately 8,100 posters were mailed to employees highlighting the resources offered by the ICO; and copies of the Code of Conduct were distributed to all Compliance Partners and key compliance stakeholders, including Cabinet members and the Deans. Throughout the week, 2,114 employees participated in broadcast email activities with 4,035 total submissions and 215 employees completing all four activities.

Required Annually:

The unveiling of the Code of Conduct in April 2013 provided the needed basis and framework for Annual Compliance and Ethics Training for all employees. The intent of this required annual training is to convey annual reminders to all employees that compliance and ethics are at the forefront of all business-related decision making and to provide reminders of both the clarity and challenges the workplace brings. The training module provided clarity on VCU's ethical standards and resources available for challenges encountered. The inaugural training took approximately one hour or less to complete and contained a comprehension quiz with an 85% pass rate required.

The inaugural module included the following topics, based on the Code of Conduct:
- Ethical decision making – Theme: If you don't know or aren't sure = use a resource or ask!
- VCU's expectations for an ethical culture – Theme: Our Ethical Standards
- VCU's expectation for a compliant culture – Theme: Compliance with Laws, Regulations, Policies
- Emphasized topics: Safety; Stewardship; Awareness of Conflict of Interest and of Commitment; Competing Interests; Privacy; Document Retention/Destruction
- Resources available to all employees: Policy Library; Chain of Command; Independent Reporting Mechanisms; Anonymity if necessary

The slated second iteration of Annual Employee Compliance and Ethics Training contains:

- Content specific coverage of sexual misconduct – harassment, discrimination, violence – Title IX
- Content specific coverage of privacy – specifically student information and other sensitive information
- Content specific coverage of retaliation – highlighting VCU's zero tolerance policy

The outcome of this inaugural training requirement did not meet anticipated expectations; therefore, enhancements have been made for the upcoming training announcement for Fall 2014. The decision was made to increase efforts that will enhance reporting to appropriate management for compliance rates in their area of responsibility for Fall 2014. This decision was primarily based on competing priorities and limited resources.

Routine:

Live, in-person training has been conducted with all new faculty hires attending new faculty orientation (voluntary) for the last three years; all new classified staff hires for the last 15 months; and all current Chairs, who have completed the university's Chair Training Certification Program conducted out of the Office of the Provost, have received training related to existence of resources; clarity of expectations; where to locate standards and procedures; and how to set appropriate tone of ethical based decision making in daily operations.

Upon Request / Need Based:

- Periodic training occurs at various routinely held meetings as well as in response to any requested training for local areas, divisions, or units throughout the year. Currently all requests are being met.
- Specialty training sessions may be conducted by in-house talent or may be coordinated by VCU personnel but conducted by outside experts. This past year several sessions were held focused on the requirements of Title IX. There has been an increase in training requests related to the topic of Title IX – sexual misconduct. Several sessions will occur in the fall.
- Remedial training sessions are also available as an option to areas experiencing a need for reminders of standards or recovering from situations of founded misconduct.

INTEGRITY AND COMPLIANCE OFFICE EFFORT HIGHLIGHTS

Overview

While the Integrity and Compliance Office (ICO) is not revenue producing, it is penalty preventing and, therefore strives to provide significant service-centered value to the organization. Time devoted for universitywide compliance efforts is tracked by all ICO employees. The intent of including this section is to further assure the Board of Visitors that the compliance program aims to function in an effective manner and provide an overview of total effort expended by these employees on those requests, inquiries, and necessities presented to the ICO throughout the year.

Conclusion

Currently, 75% of ICO FTEs maintain current professional certifications in Compliance and Ethics Professional Standards or in Health Care Compliance. ICO resources, in terms of human capital, demonstrate more than 7,453 hours worked. All ICO FTEs are exempt, and not all leave is taken. Effort reflected below is represented by 4 FTEs and is exclusive of shared Executive Director, who also maintains a professional certification, and administrative efforts expended which are in existence. Efforts this past year were expended as follows:

- ❖ **Special Investigations Work and Assistance**: 1,053 hours, or 14% [up from prior FY @ 619 hours, or 10%]
- ❖ **Utilization of ICO as an Inquiry / Review Resource**: 774 hours, or 10%
- ❖ **Program Development / Accomplishing Annual Initiatives**: 5,495 hours, or 74% [remains steady from prior FY @ 4,932 hours or 73% - change note: inquires included here and broken out above for this FY] - this includes:
  - Policy Program Work: 1,993 hours, or 36% of this category's effort and 27% of all effort expended
  - Education and Training Initiatives
  - Monitoring and Risk Assessment Activities
  - Compliance Partner Meetings/ Relationship Management

The chart below reflects analytics on webpage traffic. It demonstrates approximate visitors and visits as well as highlights some of the more frequented web resources. A comparison of the last two fiscal years demonstrates the increased utilization of the ICO and provides details on the specific use of available web resources. Overall, the statistics show approximately 26,000 additional page views for all webpages with almost doubled traffic to the Code of Conduct; Policy Library; and Reporting Concerns pages. Additionally, the amount of time spent on webpages has increased slightly; likely demonstrating time to read and comprehend material. A steady increase in visits to all other web resources continues as anticipated as the compliance and ethics program is woven into the fabric of the university community.

Webpage	FY 2013			FY 2014		
	Pageviews	Unique Pageviews	Average Time on Page (min)	Pageviews	Unique Pageviews	Average Time on Page (min)
Policy Program/Library	11,965	8,595	2 min 30 sec	20,095	14,164	2 min 58 sec
Integrity and Compliance Program	5,675	4,543	1 min 36 sec	6,420	5,078	0 min 58 sec
Code of Conduct	774	613	4 min 12 sec	11,826	9,055	4 min 59 sec
Reporting Concerns	765	577	2 min 0 sec	1,466	1,137	1 min 51 sec
All other ICO pages	2,731	2,148	0 min 6 sec	3,801	3,096	2 min 54 sec
Compliance Week	N/A	N/A	N/A	2,211	1,963	6 min 49 sec
	24,640	19,092	2 min 33 sec	45,819	34,493	3 min 24 sec

Increased attention to monitoring activities has produced ongoing risk assessment. The development of an Institutional Regulatory Accountability Grid is in process and will lay the foundation for future monitoring activities. This project was slated for completion in FY 2014; however, it has been delayed due to competing priorities and limited resources. A Regulatory Reporting Calendar affirmation process has been implemented with Compliance Partners to ensure timely compliance with required reporting to outside agencies.

Lastly, significant effort went into the establishment and implementation of an interdisciplinary Minors on Campus Workgroup. In collaboration with Dr. Catherine Howard, Vice Provost for Division of Community Engagement (the home division of The Mary and Frances Youth Center), and the ICO, this workgroup was tasked with identifying and managing issues related to minors on campus. The workgroup's efforts resulted in a framework focused on appropriate responsibility and accountability; screening and selection; training; and supervision and monitoring of personnel and activities involving minors. This framework is currently documented in a draft policy addressing the nuances associated with the involvement of minors in university activities. The draft policy's requirements were piloted as a framework in the Athletics Department and in the School of the Arts during Summer 2014. The feedback from Summer 2014 will permit any necessary adjustments before the policy enters the formal approval process in the Fall.

FY 2015 COMPLIANCE PROGRAM INITIATIVES

Maintenance of VCU's compliance program is predominantly driven by Chapter 8 of the Federal Sentencing Commission's Sentencing Guidelines which provides the elements of an effective compliance and ethics program. It is also driven by excellent business sense and the needs of the organization. To continue to play an integral role in VCU's overall risk mitigation processes, the compliance program provides advisory resources to all departments; reports mechanisms to all employees; and solicits interactions from a cross section of the university. Based on providing these services, interactions, and projects throughout FY 2014, the Initiatives for FY 2015 reflect identified areas and topics where a devotion of additional time and attention are necessary to address, or continue, assurance of compliance requirements; ethical behaviors; and overall institutional integrity.

FY 2015 Initiatives:

Annual Report to BOV Audit, Integrity, and Compliance Committee – September Meeting

- Expand this report to include more monitoring of currently established processes
- Assist with development of additional monitoring processes
- Incorporate special reports of mention of retaliation, media, lawyer in reports made
- Incorporate universitywide training endeavors and results
- Incorporate effectiveness report into annual report

Annual Employee Compliance and Ethics Education (throughout university)

- Execution of Second Cycle Annual Employee Compliance Education – includes documentation of comprehension; revisit focus of topics
- Continued participation in Human Resources New Employee Orientation Process
- Participation in Employee Education and Training Advisory Council, supporting role in collaboration with Human Resources
  - To include establishing mandatory requirements and informational only education/training; establishment of employee classification and any requirements based on classifications; consolidation of required training if possible; monitoring and consequences for non-compliance

Conflicts of Interest

- Creation and implementation of Institutional Conflict of Interest, Board of Visitors level and administrative level policies, to include:
  - set expectations; required reporting; compliance with required committee review process (research); and managing of identified conflicts
- Continued service as liaison to Commonwealth for state's requirements

- Continued utilization of structured process addressing interest disclosure reporting by certain individuals
- Continued questions posed and answers analyzed to avoid institutional conflicts and conflicts of commitment; establish consistent approach to consequences for non-compliance
- Assist with creation of proactive conflicts review infrastructure in Procurement Services regarding contracts by providing tools for operations - in consultation with the Office of University Counsel
- Review of Conflicts of Interest in Research Committee Protocols and Operations

Ethics

- Consider hosting Ethics Forum
- Consider enhancements to current employee exit interview process
- Enhance compliance and ethics eNewsletter, *The Compass*, with Ethical Comic Strip to assist employees with interpretation of expectations
- Develop ethical education to include consideration of pilot group for *A Leader's Guide to Integrity*

Export Controls (universitywide)

- Continued support to Office of Research, as needed
- Creation of monitoring plan

Gap and Risk Assessment Activities

- Monitoring of compliance obligations through responsible parties outlined in *Compliance Calendar: Federal Regulatory Reporting Requirements* – collaborative approach with Compliance Partners
- Monitoring of compliance obligations through responsible parties for Regulatory Grid - Federal specific obligations for higher education public institutions - collaborative approach with Compliance Partners
- Identification of responsible parties for Regulatory Grid - State specific obligations - collaborative approach with Compliance Partners

Internal Staff Development

- Train additional employee in internal workplace investigations technique, approach, and internal protocol
- Continued memberships with Society of Corporate Compliance and Ethics, Health Care Compliance Association, Open Compliance and Ethics Group, and Systems Research and Applications (SRA) International
- Employees supported in obtaining professional certification in Compliance and Ethics

Monitoring - Clery Act Compliance

- Fully execute second cycle of semi-annual monitoring plan of requirements
- Continued support in monitoring of Campus Security Authority (CSA) Training
- Assist with meeting new compliance obligations under Campus SaVE Act (Sexual Violence Elimination), in accordance with the Violence Against Women Act

Monitoring - Controlled Substances Compliance – in collaboration with the Office of Research

- Creation of monitoring plan to ensure appropriate activities in follow up to prior issue
- Potential implementation of monitoring plan

Social Media Presence

- Research and consider a social media presence for compliance and ethics program

Title IX

- Support to Title IX Coordinator and Title IX Leaders Group, in collaboration with Division of Inclusive Excellence, including:
  - operations review and consultation;
  - training to appropriate audiences regarding best practices in investigative techniques, documentation, and report writing; and
  - timely knowledge of national trends and compliance with requirements affecting Title IX obligations
- Monitoring assistance with resolution agreement requirements

Youth on Campus

- Support communication and implementation of new approach to managing minor on campus, including:
  - enhancing administrative practices, communicating new screening and selection, training and supervision requirements;
  - considering development of feedback mechanisms; and
  - establishing consumer participation and response plans

<u>ONGOING</u>

Policy Program

- Continued gap assessment based on size, scope and complexity of university
- Maintain obligations for Regulatory Policy creation and maintenance per VA Code
- Enhance universitywide communication of policy updates
- Enhance website design and operability for users
- Research potential app development for policy access on mobile devices
- Propose edits to governing policy on creating and maintaining policies and procedures
- Continued centralization and data normalization
- Continued monitoring of triennial timely review for all universitywide policies
- Continued support in policy creation, revision and formal approval processes

Continued Participation and Resource Support and Assistance to various compliance-oriented groups and committees:

- Clery Compliance Workgroup
  - Annual review of Security and Fire Report
  - Monitoring of process creation and maintenance for requirements
  - Education of regulatory changes
- Communication Network

- Compliance Advisory Committee (CAC), leadership role
- Faculty Search Committees
- Higher Education Opportunity Act - monitoring for compliance requirements and join existing university workgroup
- Industry Relations Committee
- Internal Workplace Investigations –
    - Oversight of Alleged Misconduct / Non-compliance issues
    - Conduct investigations when suspected patterns or practices of misconduct, non-compliance, or unduly sensitive issues arise
- Minors on Campus Workgroup, leadership role
- Partnership Assessment Taskforce
- Execute Quest Innovation Fund Committee, chair role transition plan
- Research Administrators Meeting
- Title IX Leadership Group, leadership role
- Continued tracking of Office of Inspector General's Annual Work Plan for topics affecting the university
- Participation in Tabling and Speaking Events on Campus o Tech Fair
    - HR Partners Fair
    - Cybersecurity Fair

The committee will receive the report of *Annual Compliance Program Accomplishments* at the September 2014 Meeting. The anticipated effect of providing FY Annual Compliance Program Initiatives at the May Board Meeting and the Annual Activities and Events Report at the September Meeting is to assure that mechanisms exist to keep the Committee abreast of continued compliance efforts that demonstrate effectiveness of the compliance and ethics program. The committee should continue to monitor the compliance and ethics program's effectiveness. If there are suggestions or recommendations from the committee, please contact the Executive Director of Assurance Services or the University Integrity and Compliance Officer.

ACKNOWLEDGEMENTS

Finally, a word of acknowledgement is appropriate for several individuals whose collaborative and collegial, "do the right thing attitude and approach" cannot go unmentioned, for without these individuals and their teams there would be no Annual Report. Thank you and greatest appreciation to: Kawana Pace Harding, Department of Human Resources; Amy Unger, Office of the Provost - Faculty Recruitment and Retention; William King, University Ombudsperson; Susan Robb and Dr. Monika Markowitz, Office of Vice President for Research; Dr. Dean Broga, Office of Environmental Health and Safety; Jaycee Dempsey and Ashley Greene, Integrity and Compliance Office; Jonathan Palumbo and Vera Chistova, Athletics Department; Dolores Carrington-Hill, Office of Institutional Equity; and Craig Anderson and John Musgrove, University Audit and Management Services.

In addition to the compliance partners listed above, the daily efforts of all compliance partners and members of the Compliance Advisory Committee are to be recognized, for without this interdisciplinary and collaborative network of peers, VCU would not benefit near as greatly as it does from having this communicative group of dedicated and trusted advisors.

Department of Assurance Services: Bill Cole, David Litton

Controller's Office: Tricia Perkins, Angela Davis

Office of Institutional Equity: Paula McMahon

Faculty Senate Representative: Robert Andrews

Financial Aid Office: Brenda Burke

Global Education Office: Paul Babbits

Grants and Contracts Office: Mark Roberts

Office of the Vice President for Health Sciences: Quincy Byrdsong, Cindy Cull

Department of Human Resources: Brenda Alexander, Laurie Bourne

Integrity and Compliance Office: Jacqueline Kniska, Audrey Michael

School of Medicine: Amy Sebring, Tricia Zeh

VCU Police Department: Chief John Venuti, Connie Davidson, Shauna Mell

Office of the Provost: Heidi Jack, Kathleen Shaw

University Relations: Kasey Odom

Office of University Counsel: Martha Parrish

Registrar's Office: Anjour Harris

Risk Management: David Mattox

Office of Student Affairs: Kendall Plageman

Technology Services: Alex Henson, Dan Han

Treasury Services: Kevin Davenport

VCU Integrity and Compliance

VIRGINIA COMMONWEALTH UNIVERSITY