FLORIDA INTERNATIONAL UNIVERSITY  
BOARD OF TRUSTEES  
AUDIT AND COMPLIANCE COMMITTEE

FIU, Modesto A. Maidique Campus, Graham Center Ballrooms  
Livestream: http://webcast.fiu.edu/

Tuesday, December 6, 2022  
8:30 AM

Chair: Carlos A. Duart  
Vice Chair: Carlos Trujillo  
Members: Deanne Butchey, Natasha Lowell, Cristhofer E. Lugo

AGENDA

1. Call to Order and Chair’s Remarks  
   Carlos A. Duart

2. Approval of Minutes  
   Carlos A. Duart

3. Discussion Items (No Action Required)  
   Carlos A. Duart

   3.1 Office of Internal Audit Status Report  
      Trevor L. Williams

   3.2 Office of University Compliance and Integrity Quarterly Report  
      Jennifer LaPorta

4. New Business  
   Carlos A. Duart

   4.1 Office of Internal Audit Discussion of Audit Processes

5. Concluding Remarks and Adjournment  
   Carlos A. Duart
# FIU Board of Trustees Audit and Compliance Committee Meeting

**Time:** December 06, 2022 8:30 AM - 9:15 AM EST

**Location:** FIU, Modesto A. Maidique Campus, Graham Center Ballrooms, Livestream: [http://webcast.fiu.edu/](http://webcast.fiu.edu/)

<table>
<thead>
<tr>
<th>Section</th>
<th>Agenda Item</th>
<th>Presenter</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td><strong>Call to Order and Chair’s Remarks</strong></td>
<td>Carlos A. Duart</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td><strong>Approval of Minutes</strong></td>
<td>Carlos A. Duart</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Minutes: Audit and Compliance Committee meeting, September 22, 2022</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>3.</td>
<td><strong>Discussion Items (No Action Required)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.1</td>
<td>Office of Internal Audit Status Report</td>
<td>Trevor L. Williams</td>
<td>6</td>
</tr>
<tr>
<td>3.2</td>
<td>Office of University Compliance and Integrity Quarterly Report</td>
<td>Jennifer LaPorta</td>
<td>12</td>
</tr>
<tr>
<td>4.</td>
<td><strong>New Business</strong></td>
<td>Carlos A. Duart</td>
<td></td>
</tr>
<tr>
<td>4.1</td>
<td>Office of Internal Audit Discussion of Audit Processes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Concluding Remarks and Adjournment</td>
<td>Carlos A. Duart</td>
<td></td>
</tr>
</tbody>
</table>
Subject: Approval of Minutes of Meeting held September 22, 2022

Proposed Committee Action:
Approval of Minutes of the Audit and Compliance Committee meeting held on September 22, 2022, at the FIU, Modesto A. Maidique Campus, Graham Center Ballrooms and via Zoom.

Background Information:
Committee members will review and approve the Minutes of the Audit and Compliance Committee meeting held on September 22, 2022, at the FIU, Modesto A. Maidique Campus, Graham Center Ballrooms and via Zoom.

Supporting Documentation: Minutes: Audit and Compliance Committee meeting, September 22, 2022

Facilitator/Presenter: Carlos A. Duart, Chair, Audit and Compliance Committee
Audit and Compliance Committee
September 22, 2022
FIU, Modesto A. Maidique Campus, Graham Center Ballrooms and via Zoom

MINUTES

1. Call to Order and Chair’s Remarks
The Florida International University Board of Trustees’ Audit and Compliance Committee meeting was called to order by Committee Chair Carlos A. Duart at 8:38 a.m. on Thursday, September 22, 2022.

General Counsel Carlos B. Castillo conducted roll call of the Audit and Compliance Committee members and verified a quorum. Present were Trustees Carlos A. Duart, Chair; Carlos Trujillo, Vice Chair (via Zoom); Deanne Butchey; Natasha Lowell; and Cristhofer E. Lugo.

Board Chair Dean C. Colson, Board Vice Chair Roger Tovar, and Trustees Cesar L. Alvarez and Jose J. Armas and Interim University President Kenneth A. Jessell also were in attendance.

Committee Chair Duart welcomed all Trustees and members of the University administration. He also welcomed the University community and general public accessing the meeting via the University’s webcast.

Committee Chair Duart also welcomed Faculty Senate Chair and faculty Trustee, Deanne Butchey as a member of the Committee.

2. Approval of Minutes
Committee Chair Duart asked if there were any additions or corrections to the minutes of the Audit and Compliance Committee meeting held on June 16, 2022. Hearing none, a motion was made and unanimously passed to approve the minutes of the Audit and Compliance Committee meeting held on June 16, 2022.

3. Discussion Items
3.1 Office of Internal Audit Status Report
Chief Audit Executive Mr. Trevor L. Williams presented the Office of Internal Audit Status Report and commented on recently completed audits pertaining to admissions policy compliance, personal data security controls related to the Department of Motor Vehicle-provided data, and export control and foreign influence compliance. He remarked that the audit of admissions policy compliance reviewed first-time-in-college students admitted during the Summer 2020 and Spring 2021 terms. He indicated that controls were generally adequate and no instances of circumvention or breach of controls were found. Mr. Williams pointed out that the audit resulted in nine (9) recommendations where opportunities for improvement were identified, including: formalizing the process for...
establishing the effective implementation date for Admit Grids to ensure a seamless and consistent application; inclusion of all relevant notes and documentation in PantherSoft and ImageNow to support the decision to admit a student who does not meet the University’s minimum requirements via a permissible alternate admission protocol; ensuring that each admitted student has submitted his/her final transcript and meets Florida Board of Governors requirements; developing a quality control process to review manual entries and override changes to data for accuracy and/or proper documentation of rationale and support changes made; and designing a student role within the Admissions pages of Campus Solutions that would limit student-employee access.

Mr. Williams commented on the audit of admissions operations’ internal controls over personal data related to a signed memorandum of understanding with the Florida Department of Highway Safety and Motor Vehicles. He stated that the audit covered the period from January 1, 2021, to March 31, 2022. He noted that Enrollment Services uses the Florida Department of Highway Safety and Motor Vehicles’ Driver and Vehicle Information Database (DAVID) to lookup information for the purposes of verifying residency. Mr. Williams pointed out that there is the system dependent upon there being adequate controls in place to safeguard data and information retrieved from the system. He indicated that the audit concluded that the internal controls over personal data obtained by Admissions Operations through DAVID are adequate to protect the personal data from unauthorized access, distribution, use, modification, or disclosure and is in compliance with the governing memorandum of understanding. He stated that no deficiencies or issues were found.

Mr. Williams remarked on the audit related to export controls and selected foreign influence compliance. He explained that export control laws prohibit the export of certain items and information, or the export of items and information to certain destinations, without a license. He added that, recently, the Legislature passed House Bill CS/HB 7017, Foreign Influence, which placed additional emphasis over export controls, as well as the University’s relationships with foreign entities or persons. He mentioned that with the passing of the bill, the University created the Foreign Influence Task Force. Mr. Williams described areas that were found to be adequately designed and functioning, including a robust export control program, international travel and approval program, export control training, restricted party screening, sponsored research pre-award expense control, FIU Foundation foreign gift reporting, aggregate analysis of foreign gifts and contracts, and review of potential foreign influence disclosure. He stated that the audit offered eight (8) recommendations: adding language to competitively solicited contracts of $100,000 or more that asks suppliers if they have received any foreign gifts, grants, or contracts from foreign countries of concern within the previous five (5) years; developing a mechanism to assess whether sponsored research projects are timely and correctly input into PantherSoft; establishing a timeframe by which foreign travelers should create their Travel Authorization (TA) requests in advance of their trip to ensure that the Office of Export Controls can approve the TA prior to travel; updating the University’s Office of the Controller Travel and Other Expenses Manual to require foreign travelers to complete expense reports; and evaluating and developing mechanisms to assess whether the current process for international shipping is effective and provides reasonable assurance that employees are complying with University policies.
Mr. Williams indicated that there are currently seven (7) audits in various stages of completion. He reported that of the 39 recommendations that were due for implementation during the six (6) months ended July 31, 2022, 29 or 74% were completed and 10 or 26% were partially implemented. He mentioned that any complaints of alleged fraud, waste, abuse, and mismanagement that the Office of Internal Audit has received have been evaluated, investigated, and/or referred to the appropriate University department. Mr. Williams pointed out that there are two vacant positions within the Office of Internal Audit.

In response to Trustee Natasha Lowell, Mr. Williams indicated that certain recommendations have a high level of complexity and will require a longer implementation period. Committee Chair Duart urged that high-impact/priority recommendations be implemented within a reasonable period of time. In response to Board Vice Chair Roger Tovar, Mr. Williams commented on high priority audit recommendations that are pending implementation, including the implementation of a universal contract management system to facilitate management of all healthcare affiliated agreements for student placement/rotation and the automation of the bank reconciliation process.

Mr. Williams explained that the Florida Board of Governors requires that the Chief Audit Executive complete and file an annual report with the Florida Board of Governors Office of Inspector General by September 30 of each year. He noted that the annual report is part of the agenda materials and satisfies said reporting requirement. He commented that the Florida Board of Governors engaged Crowe LLP to assess the financial internal controls for university direct support organizations (DSO) across the State University System’s 12 universities. Mr. Williams stated that five (5) FIU DSOs were reviewed. He added that the findings related to responsiveness, lack of documented review and approvals, and supporting documentation. Interim University President Kenneth A. Jessell pointed out that FIU was among the first universities to undergo the review process and as such, once the preliminary report was issued, Crowe provided the University with the opportunity to provide additional documentation related to the recommendations.

3.2 Office of University Compliance and Integrity Quarterly Report
Chief Compliance and Privacy Officer Jennifer LaPorta presented the University Compliance and Integrity Quarterly Report. She explained that new foreign influence statutes required that FIU establish an approval and monitoring program for international travel by January 1, 2022. She added that, as part of said requirement, FIU must also provide an annual report of any foreign travel to countries of concern, including Russia, China, Cuba, North Korea, Iran, Syria, and Venezuela. Ms. LaPorta stated that the Florida Board of Governors issued guidance indicating that said report must be submitted to each institution’s board of trustees. She pointed out that, as required by the Florida Board of Governors, FIU’s report was submitted to the Board of Trustees in July. She added that FIU had no information to report.

Ms. LaPorta commented on the Office of Compliance supporting the Office of General Counsel by coordinating FIU’s response to the foreign source reporting requirements. She pointed out that the 2020-2021 training campaigns achieved a 99.9% completion rate across the University. She remarked on the enhanced design for the fall training campaigns and on the development of a comprehensive foreign influence webpage that would more effectively facilitate access to FIU’s resources and programmatic solutions in said area.
Ms. LaPorta remarked on the annual report. She noted that said report provides metrics, benchmarking, and details the Compliance Program activities throughout the 2021-2022 fiscal year. She commented on the positive results of the five-year review of the Compliance Program, including being ranked as a best-in-class program for two of the seven compliance program elements, program structure and resources and measuring ethical culture. Ms. LaPorta pointed out that the recommendations resulting from said review informed 2022-2023 workplan activities. She commented on the launch of the first FIU Employee Code of Conduct. She noted that the Code is a resource designed to reinforce the University’s values.

Ms. LaPorta commented on foreign influence and global risk activities. She remarked on a collaborative approach to implement workflows to address the Florida State Foreign Influence Statutes, including launching a comprehensive foreign travel system for all University employees, creation of a screening process for all foreign research related roles and foreign graduate students, and creation of an information gathering and data analysis process for reporting foreign gifts and agreements. She stated that the Compliance Requirements Matrix was launched in January 2022 and creates an auditable record of required state, federal, and Florida Board of Governors submissions and allows for compliance oversight and escalation to leadership if a required submission is overdue. Ms. LaPorta added that in 2021-2022, Compliance issued reminders and verified completion of 115 submissions required by regulators. She reported that executive leadership, comprised of deans and vice presidents, achieved a 100% training completion rate.

4. Reports
There were no questions from the Committee members in terms of the 2021-22 University Compliance Program Annual Report, 2021-22 Office of Internal Audit Annual Report, and the State University System of Florida Board of Governors | Review of Financial Internal Controls for University Support Organizations.

5. New Business
5.1 Senior Management Discussion of Audit Processes
Committee Chair Duart noted that, as is stipulated in the Audit and Compliance Committee Charter, the Committee must meet with the Office of Internal Audit and senior management, separately, to discuss the audit process. He further noted that because this meeting is conducted in the Sunshine, no one present or participating via Zoom or accessing the meeting via the webcast was required to exit during the discussion with senior management. He added that this was strictly voluntary. Interim University President Jessell commented on the positive working relationship with the Office of Internal Audit and noted that Mr. Williams was invited to participate in the panel discussion of university chief audit executives at the September Florida Board of Governors Audit and Compliance Committee meeting.

6. Concluding Remarks and Adjournment
With no other business, Committee Chair Carlos A. Duart adjourned the meeting of the Florida International University Board of Trustees Audit and Compliance Committee on Thursday, September 22, 2022, at 9:29 a.m.
Date: December 6, 2022

To: Board of Trustees Audit and Compliance Committee Members

From: Trevor L. Williams, Chief Audit Executive

Subject: OFFICE OF INTERNAL AUDIT STATUS REPORT

I am pleased to provide you with our quarterly update on the status of our Office’s activities. Since our last update to the Board of Trustees Audit and Compliance Committee on September 22, 2022, we have completed the following projects:

Projects Completed

Audit of Student Safety – Hazing Prevention

We have completed an audit of student safety as it relates to hazing prevention for the period January 1, 2021, through December 31, 2021, and have assessed the current practices through August 2022.

Overall, our audit concluded that the University adopted an anti-hazing policy as required but noted some instances of noncompliance and opportunities for process improvements to the University’s hazing prevention efforts. The audit resulted in 23 recommendations, which management has agreed to implement. Some examples of how controls could be strengthened include:

- Requiring all student organizations and groups to register with Campus Life and identifying a department or person to centrally manage the University’s hazing prevention efforts.
- Developing a records maintenance and retention plan and ensuring proper storage pursuant to FIU Regulation 2501.
- Creating an anti-hazing attestation requirement and agreement form for all members of student organizations and groups and monitoring its completion.
• Ensuring proper dissemination of the anti-hazing policy and that all student organizations and groups include the required information in their bylaws.
• Revising and expanding the University’s hazing prevention education plan.

Examination of the Department of Parking, Sustainability, and Transportation’s Compliance with Contract Number HSMV 0185-22

We have completed the examination of FIU Department of Parking, Sustainability, and Transportation’s (“Parking”) compliance with the Florida Department of Highway Safety and Motor Vehicles (“HSMV”) Memorandum of Understanding (MOU) 0185-22, Contract Number HSMV-0185-22 as it relates to internal controls and data security governing the use of personal data for the period between July 1, 2021, and September 28, 2022. As a basis for performing this examination, the management of Parking attested that internal controls are in place to protect data received from the HSMV and are adequate to protect data from unauthorized access, distribution, use, modification, or disclosure, and policies and procedures in place during the attestation engagement period are approved by a Risk Management IT Security Professional and meet the requirement listed in the MOU.

Overall, our examination disclosed deviations in Parking’s internal controls subject to this examination, that if not corrected, could diminish the controls’ effectiveness in protecting data from unauthorized access, distribution, use, modification, or disclosure. The deviations were related to the absence of user’s documented acknowledgment of their understanding of the confidential nature of the data accessed and the civil and criminal sanctions for disclosing this information, and users not completing Cybersecurity Awareness Training, among other matters, which due to their sensitive nature, we have chosen not to provide details herein. We offered recommendations to address the observed conditions, verified that management took corrective actions, and applied appropriate examination procedures to ensure that the implementation and effectiveness of the corrective actions taken by Parking prevent recurrence.

We concluded that, except for the deviations from the criteria noted during our examination, the attestation made by Parking is presented in accordance with the criteria listed in the MOU, in all material respects.

Audit of Office of Research and Economic Development – Research Training and Policy Compliance

We performed this audit to determine if the Office of Research and Economic Development’s (ORED) research-related policies were enacted according to University Policy and whether
they, along with research-related trainings, are adequate and adhere to applicable federal and state regulations.

ORED provides leadership in research administration, supports the endeavors of the University’s research community, and ensures the responsible stewardship of research activities. ORED accomplishes this by minimizing impediments to research activity, promoting research conduct that meets the highest standards of ethical integrity, and ensuring that research activity is compliant with all local, state, and federal regulations. During the 2021 fiscal year, the University’s research activities included proposal submissions equaling $848 million, awards received totaling $310 million, expenditures totaling $246 million, 107 invention disclosures, and 74 U.S. patent applications.

We found no adverse reportable conditions and concluded that ORED has effective process controls for creating and maintaining research related-policies and ensuring research-related training is adequate and completed timely. We commended the department for achieving a “clean” audit based upon the scope of our audit testing.

We performed this audit of Cybersecurity Prevention and Detection Controls – Ransomware, to assess FIU’s readiness for preventing and detecting ransomware cyberthreats by applying the National Institute of Standards and Technology (NIST) Cybersecurity Framework. Using a rating system we developed to translate the level of alignment for the five in-scope units with the NIST Cybersecurity Framework, we have assessed their collective overall readiness against ransomware a score of 2.69 out of 3.00, which translates to a state of needing improvement.

For the 45 subcategories comprising the three functional areas of the NIST Cybersecurity Framework audited (Identify, Protect, and Detect) that were applied across the five units in scope, we found that all five units maintained a satisfactory cybersecurity posture for 53 percent (24 of 45) of the subcategories reviewed. Further, we found that for 16 of the 45 subcategories (36 percent), there were varying degrees of achievement between satisfactory and needs improvement across the five units. Our audit found an even wider span of representation across the five units within the remaining five subcategories, including assessments of satisfactory, needs improvement, and inadequate. This variation suggests the need to prioritize mitigation actions whereby urgent attention is given to critical processes and actions to harden systems and improve the University’s cybersecurity posture.

Due to the sensitive nature of the subject matter audited, we have omitted details related to the specific areas where opportunities for greater alignment with the Cybersecurity Framework exist. We have communicated those details to the appropriate levels of
management. The audit resulted in 38 recommendations, which management has agreed to implement.

**Work in Progress**

The following ongoing audits are in various stages of completion:

<table>
<thead>
<tr>
<th>Audits</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Robert Stempel College of Public Health and Social Work</td>
<td>Fieldwork in Progress</td>
</tr>
<tr>
<td>College of Arts, Sciences, and Education</td>
<td>Fieldwork in Progress</td>
</tr>
<tr>
<td>Performance Based Funding and Emerging Preeminent Metrics Data Integrity (2022)</td>
<td>Fieldwork in Progress</td>
</tr>
<tr>
<td>Plant Operations and Maintenance</td>
<td>Planning</td>
</tr>
</tbody>
</table>

**Investigation and Consulting Activities**

The Office of Internal Audit receives complaints of alleged wrongdoing, including suspected fraud, waste, and abuse. We have evaluated the complaints received and are currently investigating those deemed appropriate for our office to investigate and have referred the others to other appropriate units within the University for investigations. Substantiated allegations that are deemed to be significant and credible will be reported to the University President and Board of Trustees. We have no such results to report currently.

Our office continues to provide support to University departments and Direct Support Organizations in responding to the Florida State University System Board of Governors’ monitor of past audit findings from the State of Florida Auditor General and Crowe, LLP.

**Professional Development**

Our staff members continue to take advantage of professional development opportunities that are available to them, including completing courses in IT controls and cybersecurity awareness.

**Other Matters**

The CAE attended a State University Audit Council (SUAC) meeting of fellow CAEs on November 2 – 3, 2022, on the campus of Florida State University. This was the first in-person SUAC meeting held since 2019. The Council members discussed various audit-related topics, including the emerging threat of foreign influence on federally funded research, payroll risks
and inefficiencies, whistle-blower guidance and investigative procedures, Direct Support Organizations financial internal controls follow-up, and legislative updates.

Currently, there are two vacancies in the Office of Internal Audit—one Senior Information Systems Auditor II and one Audit Project Manager. Recruitment for both positions is ongoing. We endeavor to fill these positions with qualified candidates at the earliest date that time and circumstances permit.
The purpose of the Florida International University (“University”) institutional Compliance and Ethics Program (“Program”) is to promote and support a working environment which reflects the University’s commitment to operating with the highest level of integrity while maintaining compliance with applicable laws, regulations, and policies. The Program is designed to prevent, detect, and correct misconduct within the University based on the elements of an effective compliance program as set forth in Chapter 8 of the U.S. Federal Sentencing Guidelines and as required by Florida Board of Governors Regulation 4.003.

The Office of University Compliance and Integrity (the “Compliance Office”) is pleased to present the status update for the 2022 – 2023 Compliance Work Plan. The information reflects progress on the key action items and other compliance activities for the first quarter of fiscal year 2022 - 2023 (July 1 – September 30).

1. **Provide Program Structure and Oversight of Compliance and Ethics and Related Activities**
   The Compliance Office serves as a point for coordination of and responsibility for activities that promote an organizational culture that encourages ethical conduct and a commitment to compliance with applicable federal, state, and local laws, as well as regulations, rules, policies, and procedures.

2. **Standards of Conduct and Policies**
   The Compliance Office oversees the Florida International University Policies and Procedures Library as well as the University-wide policy development and management process. The Compliance Office provides support to the offices responsible for developing, updating, administering, communicating, training, monitoring, and ensuring compliance with University policy.
3. **Training, Education and Communications**
   The Compliance Office trains, educates, and creates communication pathways to inform the Florida International University Community of its compliance responsibilities, regulatory obligations, and the University compliance and ethics program.

4. **Measurement and Monitoring**
   The Compliance Office identifies and remediates noncompliance through proactive review and monitoring of risk areas. The monitoring plan is typically determined by the evolving risks, new laws, and regulations as well as trends identified by the Compliance Office in partnership with other units. The Compliance Office also measures and evaluates the overall compliance and ethics culture of Florida International University.

5. **Enforce and Promote Standards through a System of Investigations, Discipline, Incentives and Corrective Actions**
   The Compliance Office, in consultation with the University President and FIU Board of Trustees and in partnership with Human Resources, promotes and enforces the Program and University regulations, policies and procedures consistently through appropriate incentives and consequences for noncompliance. The Compliance Office conducts timely reviews and coordinates investigations of allegations of noncompliance and misconduct and provides guidance on corrective actions.

6. **Risk Management**
   The Compliance Office partners with the Office of Internal Audit through the Enterprise Risk Assessment to identify areas of compliance risk for further monitoring and to assist risk owners in mitigating and managing risk.
Office of University Compliance & Integrity Quarterly Report

PROGRAM STRUCTURE & OVERSIGHT

The 2022-2023 Annual Work Plan includes continuation of the multitude of Program activities conducted, coordinated, and facilitated by the Compliance Office that promote an organizational culture and that encourage ethical conduct.

Compliance Internal Operating Procedures

- Continue to engage in process improvement assessment, development, testing, and evaluation of the following internal operating procedures to document and streamline the various processes, programs, and functions undertaken to effectuate the Program:
  - Compliance Requirements Matrix (under development)
  - Visual Compliance (under development)

Foreign Influence and Global Risk Governance Activities

- Facilitated the Florida Statute Foreign Influence Sub-committee meetings (Sub-committees: 286.101 Foreign Gifts and Contracts; 288.860 International Cultural Agreements; 1010.25 Foreign Gift Reporting; 1010.35 Screening foreign researchers; 1010.36 Foreign travel; research institutions):
  - Launched updated post trip reporting TAR process for Foreign Travel.
  - Worked with Office of Controller to determine appropriate Travel Training Procedures.
  - Met with FIU Global to discuss International Travel Query process
  - Submitted Annual Report of Foreign Travel to Countries of Concern to the FIU BOT
- In cooperation with the Office of Research and Economic Development, the Division of Human Resources, the Office of the General Counsel, and the Office of the Provost, continued development of workflows, job postings and screening processes to incorporate mandates of the Florida State Statute regarding foreign influence.
- In cooperation with FIU Global and the Office of the Controller, oversaw the redesigned Travel Authorization Request (TAR) process with respect to the mandates of the Florida State Statute regarding foreign influence. Continued to make process improvements to effectuate the statutory requirements across all foreign travel destinations. Drafted updates to International Travel Policy. Continued to monitor results of Qualtrics survey to serve as post travel data gathering tool prior to the update of the Expense Report.
In cooperation with Global Affairs, the Office of the General Counsel, and Academic Affairs, continued to develop workflows to assess existing agreements with foreign institutions and establish new agreement process flows to incorporate the mandates of the Florida State Statute regarding foreign influence.

In cooperation with the Office of the General Counsel, met to determine appropriate resources to effectuate the mandates of the Foreign Source Reporting requirements.

Worked with export control consultant to review and approve international shipments through a centralized international shipping review process that is designed to systematically and timely address export licensing requirements while ensuring that routine (non-controlled) shipping transactions occur without delay.

Continued to work with Office of Research and Economic Development and the Division of Human Resources to implement an Intellectual Property (IP) protection agreement to ensure that FIU’s IP is fully protected with respect to exposure by individuals who (unlike employees) are not otherwise subject to FIU’s standard IP ownership policy pursuant to an employment agreement. Collaborated with key stakeholders to establish distribution workflows.

Managed and reviewed international shipment forms and workflows.

Managed international shipment workflow for departments who routinely mail bulk shipments to international locations.

Supported visual compliance screening efforts for visiting Foreign Researchers.

Held Foreign Source Reporting after action meeting to determine process improvements for subsequent reporting periods.

Submitted status memo required by the Board of Governors regarding foreign travel to Countries of Concern.

Collaborated with consultant to develop substantive data to populate the new Foreign Influence Web Page.

Met with export controls consultants to discuss the specific layout and content of pages for the development of the new foreign influence website.

The Export office classified research projects and developed technology control plans as required to comply with export regulations for a specific project.

Conducted 262 visual compliance research reviews during the reporting period as part of the Visa Applicant Questionnaire Screening, International Agreement Screening, International Shipping Review, and Travel Authorization review processes.

Participated in Export Controls and Foreign Influence Internal Audit and assisted stakeholders with developing systems to address findings and recommendations.

Participation in Task Forces, Committees and Other Compliance-Related Initiatives

The Compliance Office continues to lead and/or participate in several task forces, committees and initiatives including, but not limited to:

- Chair of the State University System Compliance Consortium
- Chair of the Global Risk and Foreign Influence Task Force
Chair of the Institutional Conflict of Interest Committee
Chair of the Policy Committee
Chair of the Compliance Liaison Committee
Co-Chair of the Health Insurance Portability and Accountability Act Committee
Co-Chair of the FERPA (Family Educational Rights and Privacy Act) Committee
Co-Chair of the Enterprise Risk Management Group
Member of the Dean’s Advisory Council
Member of Civil Discourse Taskforce
Member of the Operations Committee
Member of the National Collegiate Athletic Association Oversight Committee
Member of the International Travel Committee
Member of the University Building Access Controls Committee
Member of the Drug and Alcohol Task Force
Member of the Digital Accessibility Working Group
Member of the Professional Licensure Disclosure Committee
Member of the Outside Activity/Conflicts of Interest Workgroup
Member of the Digital Accessibility and Service Committee (DASC)
Participant in the Biscayne Bay Leadership Team meetings
Participant in Emergency Operations Committee COVID-19 Response Planning Briefings
Participant in Information Technology Administrators Committee (ITAC)
Participant in Veteran’s Affairs Workgroup
Participant in FIU Communicators Committee
Compliance Assistant Director graduated from the Leadership Education Advancement Program (LEAP)

Athletics Compliance Oversight and Initiatives

Conducted beginning of year compliance meetings for each team
Submitted Bulk Verification for each student-athlete for NIL/INFLCR
Conducted certification meetings for fall sports
Provided financial aid spreadsheet with room/board/miscellaneous expenses to international tax office
Attended practice (3 teams/week) to ensure compliance with related NCAA rules
Worked with Executive Leadership for strategic plan
- Conducted New Hire Orientation
- Sent out adopted new legislation
- Booster Education preparation for football suites
- Conducted audit of CA Financial Aid
- Collected and reviewed practice logs
- Participated in NCAA Oversight meeting
- Provided updates on CUSA compliance review
- Prepared Squad Lists for 2022-23 academic year
- Confirmed Office of Student Financial Assistance completed scholarship information
- Verified grant-in-aid limits by sport and finalized squad lists with coaches
- Confirmed initial amounts of Special Assistance Fund Amounts
- Confirmed all initial counters for football
- Sent list of student-athletes on meal plans to Aramark before dining hall opened
- Verified full-time status of all managers and practice players
- Completed Pre-Season Per Diem Requests
- Confirmed On Campus housing allotments/Room assignments
- Notified SAAC of athletics aid posting
- Conducted Financial Aid Clean Up
- Reviewed outside scholarships for spring semester.
- Sent signed squad lists to sports supervisors and coaches
- Ensured that SAAC sent lists of student-athletes by major to the home college for confirmation of PTD processing
- Updated and printed squad lists by sport prior to first competition
- Ensured anyone below full-time has a letter on file from the home college regarding remaining hours
- Provided walk-on procedures/forms to head coaches and sport supervisors
- Generated academic eligibility lists before the first competition
- Reviewed continuing eligibility (ongoing)
- Requested all JUCO/4-Yr Transfer Forms
- Logged SA's 45-day certification limitations
- Generated practice and competition memos to coaches and sports supervisors
- Generated a list of all volunteers, graduate assistants
- Sent Major/Home College Advisors Reminder to process PTC's for eligibility purposes
- Requested list of home college advisors from SAAC to be able to schedule educational sessions/communications
- Ensured completion of men's basketball schedule and approved by the FAR before the first day of class per (3.2.4.13)
Held both Men’s and Women’s Soccer ticket meeting
Ensured certification of all coaches intending to recruit off-campus
Reviewed recruiting log procedures with coaches
Generated participation lists for fall sports (GA responsibility)
Send out evaluation days count to teams
Ensured all staff signed certification of compliance
Set up rules education meetings for on-campus constituents (Admissions, Housing, Dining Services, Registrar, Financial Aid, Police Department, etc.)

Health Affairs Compliance Oversight and Initiatives

Led HIPAA (Health Insurance Portability and Accountability) Privacy discussion as part of the monthly HIPAA committee meeting.
Continued to work with the CynergisTek, Intruno, and FIU staff on the implementation of the Privacy Rule Patient Monitoring Audit tool.
Continued working with HWCOM staff for the standardization of all HWCOM Privacy Rule associated forms and letters and consolidation of HWCOM Faculty Practice and NeighborhoodHELP Program medical records.
Continued development of Privacy Rule PowerPoint voiceovers and additional PowerPoint Presentations.
Assisted the Division of IT with their investigation into the unauthorized deactivation of Billing Tool.
Continued working with the Alcohol and Other Drug (AOD) Taskforce in meetings and outreach efforts.
Remained available to the Risk, Medical Records, etc. to address Privacy Rule concerns and questions.
Initiated investigations into possible breaches.
Prepared and conducted live HIPAA Privacy Rule training tailored for graduate psych students associated with the Center for Children and Families.
Initiated discussions with the College of Law to identify students and staff interested in providing legal services to indigent patients and families of the Faculty Group Practice in need of assistance in obtaining a Guardianship.
Continued development of standardization of Privacy Rule forms and documents with the Faculty Practice, NeighborhoodHELP, and the Center for Children and Families.
Developed two additional HIPAA Privacy Policies and Procedures regarding Workforce members accessing their own medical records and accessing family member medical records without authorization and a job-related function. Additionally, I developed a Sanction specific Policy and Procedure regarding the same activity.
Began working with the HIPAA Security Officer (Division of IT), the HWCOM Director of Medical Records, and the Chair of the NeighborhoodHELP to review and understand the “Portal” used by the NeighborhoodHELP Program for the collection and sharing of patient information.
Presented to HWCOM and NeighborhoodHELP health care providers and the Director of Medical Records the requirements of the Cures Act – Information Blocking Rules.

Released a HIPAA Privacy Investigative Report to the Dean of HWCOM, HR, and other HWCOM staff regarding a recent HIPAA Privacy Rule violation committed by a NeighborhoodHELP employee. Participated in meetings regarding the same.

**Oversight and Accountability**

- Compliance Liaison Dashboard – Met with key liaisons to address compliance related issues and initiatives within their division.
- Executive Dashboard – Presented the Vice President/Dean Executive Scorecard each month at the Operations Committee and Deans Advisory Board Meetings indicating the status of required compliance tasks for University leadership (trainings and policy attestations). Developed updated dashboard for 2022-2023 Plan year.
- Policy Working Group Scorecard – Continued assessment of policy development framework with planned updates to be reviewed and considered by the Policy Workgroup.

**Operationalize FIU’s Core Values**

- Launched training for FIU’s Employee Code of Conduct which serves as guidance and governance document organized to tie Key University policies to FIU’s values (Truth, Freedom, Respect, Responsibility and Excellence). The Employee Code of Conduct outlines our institution’s guiding principles and standards, supports ethical decision-making, and provides information about where to find answers to questions about responsible and ethical practices and conduct.

**Five Year Review of Compliance Program**

- Leveraged the recommendations of the External Program Report of the Florida International University Compliance Program, prepared by an external assessor, to inform the priorities and initiatives in the 2022-2023 Compliance Office workplan.
STANDARDS OF CONDUCT & POLICIES

The 2022-2023 Annual Work Plan includes continuation of the support and resources the Compliance Office provides to Policy Owners in enforcing University policies and procedures, launch of the updated Code of Conduct, oversight of the Policy Working Group and updates to the University Policy Framework and the University’s ethics policies related to State Employee responsibilities and obligations.

2022-2023 Policy Development Process

- Managed the Policy Development Process, including ushering five new policies through the appropriate review process by the Deans Advisory Council and the Operations Committee prior to posting.
- Consulted with policy owners during various stages of the policy development process.
- Worked with Policy owners to update existing policies and develop procedures and communication campaigns.
- Worked with Internal Audit, and OGC to usher FIU - 117 Regulation - Fraud Prevention and Detection through the formal regulation process.
- Continued development of Intimate Relationship Regulation with work group.
- Intimate Relationship Regulation work group coordinated to usher Regulation through the formal regulation process and approval by the BOT.
- Worked with Human Resources to incorporate updates to the Conflict-of-Interest Policy.
- Met with OGC to discuss next steps for the updating of the Identify Theft Prevention Program for the University.
- Met with key stakeholders to discuss Regulation 10.004 - Prohibition of Discrimination in University Training or Instruction.
- Worked with Athletics and the OGC to make updates to the NIL Policy
- Worked with SACSOC to develop process to give SACSOC access to tracking of new and updated policies.
- Worked with Internal Audit to illustrate policy development, review, and endorsement procedures.

Risk Management approach to University Policies

- Continued to incorporated data analysis from the University-wide policy review and the FIU Risk Assessment to determine breadth and frequency of individual policy communication campaigns and whether associated training is necessary.
- Identified and coordinated policy campaigns with policy owners using a risk profile lens as new policies are created or substantively updated.
Increase University Policy Awareness

- Continued to work with policy owners to determine the frequency and appropriate audience for policy campaigns.
- Continued to work with policy owners to identify various new methods of communicating policy.
- Continued to work with the Division of Human Resources to utilize its newsletter as a policy communication tool.

New University Policies Reviewed and Endorsed by the Operations Committee and Deans Advisory Counsel

The Office of University Compliance ushered one new policy through the New Policy Framework endorsement process:

- • 1705.021 Limited English Proficiency
- • 380.0449 Incomplete Grades (IN) for Graduate and Undergraduate Students
- • 300.012 Discipline-Specific (Specialized) Accreditation
- • 380.0448 Graduate Faculty
- • 380.030 Doctoral Dissertation and Committee

TRAINING, EDUCATION & COMMUNICATIONS

The 2022-2023 Annual Work Plan includes continuation of robust training, education and communication activities conducted, coordinated, and facilitated by the Compliance Office to increase employee awareness. Efforts include information communicated through mandatory compliance training campaigns, self-enrollment educational opportunities, FIU’s Compliance Newsletter, the Compliance and Integrity and Export Control Websites, time-sensitive communications, presentations and compliance updates, and participation in New Employee Orientation.

2022–2023 Annual and Scheduled Training, Education, and Communication

Designed, developed, and launched five compliance Policy Acknowledgement/Training Campaigns to University faculty and staff including:

- FIU Clery Act Basics Training
  - TBD % completion
- Export Control for Health Sciences Professionals
  - TBD % completion
- Export Control for Research and Operations Personnel
  - TBD % completion
FERPA Basics
• TBD % completion rate
Employee Code of Conduct
• TBD % completion rate

Designed, developed, and issued ten Training Campaigns that are ongoing and open for self-enrollment:

HIPPA Basics (enrollment required for access to protected health information)
• Rolling enrollment
• Employees and students trained: 1,559 (CY 2022)
Payment Card Industry Data Security Standard Training for Merchants (enrollment required for access to certain privacy-controlled data)
• Rolling enrollment
• Employees trained: 237 (CY 2022)
Payment Card Industry Data Security Standard Training (PCI-DSS) for IT (enrollment required for access to certain privacy-controlled data)
• Rolling enrollment
• Employees trained: 42 (CY 2022)
FERPA Basics (enrollment required for Campus Solutions Access)
• Rolling enrollment
• Employees trained: 117
FERPA Annual Training (enrollment required for Campus Solutions Access)
• Rolling enrollment
• Employees trained: 5,004
Export Controls
Export Control Basics
• Open for self-enrollment
• Employees trained: 370 (CY 2022)
The FIU Chosen First Name and Pronoun Use Training
• Open for self-enrollment
Records Management Compliance Training
• Open for self-enrollment
New Employee Experience Compliance and Ethics training
- Conduct live bi-weekly trainings for new employees as they are onboarded

**Communications Campaigns and Coordination with Key Stakeholders:**

- Red Flags – Preventing ID Theft with Data Security
- Coordinated with the Division of Information Technology to leverage Data/Cyber Security Course. Collaborated with OGC on the development of new Red Flag training module.
- Coordinated with the Office of General Counsel, the Office of Research and Economic Development, the Division of Human Resources, and the Office of the Provost, to create University-wide communications and training campaign to align with the next Annual Outside Activity/Conflict of Interest Disclosure cycle
- Worked with Student Affairs and Human Resources to develop communications plan for Dall Drug-Free Campus/Workplace Drug and Alcohol Abuse Prevention communication.
- Coordinated with the Office of General Counsel, the Office of Research and Economic Development, the Division of Human Resources, and the Office of the Provost, to create University-wide communications and training campaign to align with the next Annual Outside Activity/Conflict of Interest Disclosure cycle
- Worked with FIU Global and Office of the Controller to develop communication regarding international travel.
- Worked with Human Resources, to develop communication regarding Political Activity/Political Participation.

**Training and Education Program Activities**

- Prepared the Escalation Protocol for Fall Campaigns to maximize completion rates for required training.
- Continued to work with Human Resources to utilize the HR Newsletter as a new/updated policy and process communication tool (e.g., code of conduct and international shipping processes).
- Tracked and disseminated weekly training completion report for all the Health Affairs units.
- Continued to train new hires bi-weekly through participation in the New Employee Experience orientation session.
- Designed and curated courses for upcoming training and policy acknowledgment campaigns, including Code of Conduct policy acknowledgement training.
- Met with Registrar to develop FERPA training plan, including issuing a targeted communication with regard to the upcoming Microsoft transition.
- Met with Registrar and IT Team to automate Campus Solutions training.
- Disseminated communication to faculty and staff regarding requirement for FERPA training for Campus Solutions access.
- Continued to communicate with the FIU Develop team and training vendor, Vector Solutions, to work through and troubleshoot the platform migration of the site utilized for compliance trainings.
- Continued coordination with the Office of Civil Rights Compliance and Accountability on the upcoming platform migration of the training vendor, Vector Solutions, as their group also utilizes the vendor for compliance training.
- Continued the design and curating of content for the Foreign Influence Website.
Continued development of ethics-specific training to support the Code of Conduct policy acknowledgement course being developed on FIU Develop.

Worked with the FIU Develop team to perform a refresh of courses for the 2022-2023 Academic Year. Curated and updated recurring courses to be made available to faculty and staff.

Transferred Travel at FIU training to Office of the Controller for dissemination and monitoring by their team in conjunction with other training managed by their team.

Met with key stakeholders to discuss Digital Accessibility Training Course and Communications Campaign.

Presented updates at July Executive Committee Meeting

Worked with various campaign owners to determine audiences for Fall training courses (five total courses).

Coordinated with DEI and OCRCA to decide on renewal options for third-party training courses from training vendor, Vector Solutions.

Meet with OGC and other key stakeholders to develop appropriate communication regarding voter registration opportunities for students.

Met with Student Conduct to conduct targeted FERPA training session

MEASUREMENT & MONITORING

The 2022-2023 Annual Work Plan includes continuation of regular measurement and monitoring program elements in addition to conducting several identified assessments informed by evolving risks, new laws, and regulations, as well as trends identified by the Compliance Office in partnership with other units.

Measurement and Monitoring Activities

- Developed Internal Operating Procedures for Compliance Matrix Platform.
- Worked with IT to start development of reports and dashboards within the platform for compliance matrix reporting.
- Oversight and management of the new Compliance Requirements Matrix Platform.
- Worked with Information Technology to incorporate process improvements identified by Requirement Contacts into the Compliance Requirements Matrix.
- Participated in providing relevant information for the Export Controls and Selected Foreign Influence Compliance Internal Audit.
- Worked with the travel team to finalize post-trip travel system requirements for implementation into the PantherSoft TAR process.
- On a monthly basis, meet with Gartner, third party compliance consultant services, to discuss and utilize advisory services and resources for ongoing compliance initiatives (e.g., training, communications, and policy development and framework).
- Coordinated with the Office of General Counsel on process improvements over the collection of information for the biannual reporting of Foreign Gifts and Contracts. Implemented improved guidance and tracking documentation to gain efficiencies over the process.
- Met with Civil Discourse Taskforce to develop plan in response to BOG recommendations.
- Met with workgroup to conduct Civil Rights Compliance Review in preparation for USDA on-site Audit.
- Met with Building Access Controls Committee to design oversight program regarding permissions. Developed Internal Operating Procedures for Compliance Matrix Platform.
- Participated in providing relevant information and supporting documentation to Internal Audit in conjunction with their audit of ORED policies and the policy development and approval process.
- Met with members of HR and Benefits Administration to provide additional information regarding the compliance matrix functions and their role as they transition positions.
- Coordinated with FIU Global to evaluate PantherSoft queries for travel post-trip reporting data collected as part of the TAR process.
- Met with the SACSCOC Accreditation team to implement additional monitoring procedures to effectively communicate policy changes and approvals by DAC and OPS.
- Various meetings with FERPA team regarding potential breaches, guidelines for cross listed courses and sharing of information for clinical rotations.

### Scheduled Compliance Reviews and Assessments

- **Outside Activities/Conflict of Interest Disclosure Assessment** - Met with the Outside Activities/Conflict of Interest Workgroup, including participation from the Office of General Counsel, the Office of Research and Economic Development, the Division of Human Resources, and the Office of the Provost, to assess and make process improvements to conflict-of-interest workflows, communications, training, and portal questions.
- **Employee Excellence Program Assessment Tool** – Continued collaboration with the Division of Human Resources to integrate employee appraisal measurements against compliance requirements to allow supervisors to assess compliance and ethics more accurately as a performance metric.

### Ongoing Measurement and Monitoring Program Elements

- **Outside Activities/Conflict of Interest Disclosure Process** - Continued to work with University partners through this review process to assess risk exposures posed by certain disclosures and take proactive steps to address those risks.
- **Ethical Panther Hotline Case Review** – Continued to provide administration and oversight of the Ethical Panther Hotline to include review and tracking of all reports submitted. Collaborated with Employee and Labor Relations to identify additional methods for improving the populating of information in the case management system.
Travel Authorization Monitoring - In cooperation with Global Affairs, the Compliance Office monitors and assesses export control and other risks associated with international travel as a member of the International Travel Committee and as an approver for an export control questionnaire for all international travel authorizations. The Compliance Office reviewed and responded to 99 travel authorization foreign travel considerations and export control approvals.

External Compliance Requests or Investigations - Continued to provide support, coordination, and oversight of external inquiries into compliance with federal and state laws and NCAA requirements.

Participation in Task Forces, Committees and Other Compliance Initiatives - Continued participation in a wide variety of groups to both contribute compliance guidance into University operations and to monitor operational activities for risk mitigation purposes.

Partnership and Coordination with Internal Audit - Continued to provide guidance to the Office of Internal Audit regarding compliance-related audits and matters. Based on audit findings, (which are communicated as a matter of course to the CCO), the Compliance Office provides guidance, training, and/or assists departments with policy and procedure development and other mitigation strategies. Discussed Office of Compliance contribution to the Risk Assessment.

Compliance Requirements Matrix - Administered the Compliance Requirements Matrix which includes deadlines for items requested of business partners throughout the campus by regulators and a verification process for required submissions.

Risk Assessment - The enterprise risk assessment conducted by the Office of Internal Audit continued to serve as a guide for the Compliance Office’s risk-based approach to prioritizing and addressing University policy and other Compliance requirements.

Payment Card Industry Training and Approval - Trained and approved 71 individuals to work as merchants accepting credit cards for payment and for Information Technology personnel to gain access to sensitive information.

Export Control Visual Compliance Screenings - Conducted 262 visual compliance research reviews during the reporting period as part of the Visa Applicant Questionnaire Screening, International Agreement Screening, International Shipping Review, and Travel Authorization review processes.

International Travel Committee - Reviewed and provided recommendations for 0 international travel petitions.

International Shipment Review - Conducted 5 International Shipping Reviews during the reporting period as part of the international shipping review process.

Medical Records Access Monitoring Tool - The Director of Compliance and Privacy for Health Affairs collaborated with key stakeholders to coordinate the externally staffed access auditing tool with the Medical Records Applications utilized by the Faculty Group Medical Practice, NeighborhoodHELP, the Center for Children and Families, and Student Health.

JumpForward Compliance Platform - The Athletics Compliance Office leveraged the JumpForward platform to automate and monitor key compliance functions such as recruiting activities, ticket management and financial aid. The platform integrates an NCAA rules engine and flexible workflows to effectuate communication and education with athletic staff members.
Compliance Calendar Monitoring

- Administered the Compliance Requirements Matrix, an automated platform that includes deadlines for items requested of business partners throughout the campus by regulators and a verification process for required submissions.
- Continued to work with Information Technology to address improvements to the Compliance Requirements Matrix Platform to support this Compliance monitoring function.
- Communicated with business partners to remind them of deadlines and to seek verification of submissions for the following compliance items within this reporting period:
  - Federal Tax and FICA Tax Remittance
  - Student Right to Know Act Publication Requirement
  - Voter Registration Provision in Higher Education Amendments of 1998
  - Florida Bar Membership Dues
  - Student Right to Know Act Publication Requirement
  - Legal Requirements Relating to Social Security Number (SSN)
  - Florida Commission on Ethics Financial Disclosure
  - Compliance Annual Work Plan Submittal to BOG
  - Student Right to Know Act Publication Requirement
  - 2022-23 Legislative Budget Request (LBR) Instructions for Fixed Capital Outlay
  - Tuition and Fee Information
  - Institutional Biosafety Committee (IBC)
  - Southern Association of Colleges and Schools (SACS) Accreditation Financial Profile and Indicators
  - Office of Federal Affairs Federal Lobbying Disclosure Reports
  - NCAA Sports Sponsorship Demographics Report
  - Board Regulation Review (6.0105)
  - Internal Revenue Code (IRC) Employer’s Quarterly Federal Tax Return (Form 941)
  - Patient Protection and Affordable Care Act Requirements
  - Student Exchange and Visitor Information System (SEVIS)
  - Southern Association of Colleges and Schools (SACS) Accreditation Annual Dues
  - Foreign Source Reporting
  - Annual report of foreign travel to countries of concern to the Board of Governors
  - Student Assistance Fund (formerly the Special Assistance Fund and Student-Athlete Opportunity Fund) Report
  - 4TH Q: Shared Initiatives University Savings Report
- NCAA Report of Uses for Revenue Distributions
- Higher Education Opportunity Act of 2008 Program Participation Agreement
- Student & Employee Drug-Free Campus/Workplace Drug and Alcohol Abuse Prevention Annual Notification
- NCAA Membership Dues
- Statement of Financial Interests
- Year-End Financial Reporting Instructions - Universities and Component Units
- Political Activity and Political Participation University-Wide Communication
- 2022 Schedule of Expenditures of Federal Awards (SEFA) Submission
- Annual Benefits Open Enrollment
- Constitution Day
- Fall Johnson Enrollment Verification
- FL Equity Report
- Compliance Annual Report Submittal to BOG
- Higher Education Act: Federal Supplemental Educational Opportunity Grant Program
- Annual Equity Report
- Federal Contractor Veterans Employment Report (VETS-100) (VETS 4212)

**ENFORCE AND PROMOTE STANDARDS THROUGH A SYSTEM OF INVESTIGATIONS, DISCIPLINE, INCENTIVES AND CORRECTIVE ACTIONS**

The 2022-2023 Annual Work Plan includes continuation of the Compliance Office assisting in investigations and reviews, overseeing the Ethical Panther Hotline, making effective use of “Scorecards” to highlight accountability, awarding professional development credits for completion of compliance tasks, and providing oversight and guidance to compliance partners regarding corrective actions.

**Align Completion of Compliance Tasks with the Performance Excellence Process (PEP)**

- Continued work with the Division of Human Resources to ensure consequences for employees who fail to complete required compliance tasks following the Escalation Protocol.
- Continued work with the Division of Human Resources to implement a system to inform supervisors of employees who have not completed compliance tasks for inclusion in the Performance Excellence Process (PEP).
Administer, Support, and Promote the Florida International University Ethical Panther Hotline

- Continued administration of the FIU Ethical Panther Hotline to include assignment, review, and tracking of 39 open reports through the end of September (including 37 new reports from July-September), data compilation, trend review, and reporting.
- Continued to partner with the Division of Human Resources to improve case management workflows.
- Coordinated the triage of reports by the Hotline Reports Review Committee, consisting of the Chief Compliance Officer, the Senior Vice President for Human Resources, and the Chief Audit Executive, tasked with reviewing all reports to determine the University’s immediate and initial response, whistleblower status, and what other University personnel, if any, must be involved in the investigation and the ultimate resolution of each report.
- Responded or facilitated response to each identified reporter to confirm that the report had been received, was being reviewed, and to point the reporter to additional support and resources at FIU that may be relevant given the specific nature of the report.
- Continued regular monitoring of the status of hotline reports and follow up with assigned investigators to ensure reports are assessed and addressed.
- Continued to promote the FIU Ethical Panther Hotline on the Compliance Website, the new Export Control Website, the Policy Library, and in various communications.
- Reviewed automated weekly reports to monitor progress on investigations stemming from Ethical Panther Hotline cases.
- Worked with Human Resources Information Systems to create reports and dashboards to illustrate reporting trends for submissions included in the iSight case management system for Ethical Panther Hotline reports received.
- Met with FIU Police Department, Internal Audit, Office of Student Conduct and Academic Integrity, and the Office of the Registrar to coordinate case closures originating with Ethical Panther Hotline Reports.
- Worked with the HRIS to grant access to the Office of the Registrar to the iSight Case Management System for tracking of potential FERPA related violations within a centralized system. Created an account to be used by the Registrar to have access to and input cases.
- Drafted an operating procedure for the recording of potential FERPA cases within the iSight case management system to guide the consistent documentation of FERPA cases by the Registrar.
- Trained Registrar to use the iSight case management system for the inclusion of FERPA violations. Initiated the inputting of past FERPA violations into the system on behalf of the Registrar.

Provide Recommendations for Corrective Actions and Improvement of Ethical Conduct

- Continued providing recommendations for corrective actions and improvements of ethical conduct to the appropriate authorities following investigations or requests for guidance.
- Worked with Human Resources to develop appropriate corrective actions for failure to complete required compliance tasks.
- Met with FERPA Workgroup to investigate and recommend corrective action (if appropriate) for all reported FERPA violations.
- Integrated FERPA complaint management into the new case management system.
- Collaborated with the Registrar and Human Resources to develop matrix to support consistent enforcement and consequences for FERPA violations.
- Worked with Associate Athletic Director of University Compliance to ensure compliance with all NCAA regulatory obligations.

### RISK MANAGEMENT

The 2022-2023 Annual Work Plan includes continuation of the Compliance Office making effective use of the Enterprise Risk Management Framework, including assisting risk owners in making risk informed decisions and responding to key identified risks by implementing proper controls and mitigating measures and facilitating continuous learning.

#### Educate Risk Owners Regarding Risk Management Principles

- Continued to meet with the Chief Audit Executive to further develop a process for mitigating identified risk across the enterprise by educating risk owners and risk managers and developing a system of accountability.
- Continued to meet with Internal Audit to discuss development and management of the Panther Enterprise Risk Management Platform.
- Continued to review and address emerging risks in partnership with the Office of the General Counsel and other key stakeholders as they occur through new legislative requirements and institutional initiatives and obligations.