

# **BOARD of REGENTS**



## **AUDIT AND COMPLIANCE COMMITTEE MEETING**

*Wednesday, April 22, 2015 at 9:00 am  
Scholes Hall, Roberts Room*

The University of New Mexico  
Board of Regents' Audit and Compliance Committee  
*April 22, 2015 – 9:00 AM*  
*Roberts Room*  
**Agenda**

**ACTION ITEMS**

1. Confirmation of a Quorum and Adoption of Agenda
2. Approval of Meeting Minutes from December 4, 2014
3. Audit Committee Meeting Calendar for Fiscal Year 2015. The following proposed meeting dates are being presented for Committee approval. The Committee meets at 9:00 AM in the Roberts Room. This schedule will accommodate the exit conference for the FY15 financial statements audit.

June 18, 2015

August 13 or 18, 2015 or September 3, 2015

October 15, 2015

**INFORMATION ITEMS**

4. Advisors' Comments
5. Follow-Up Items from December 4, 2014 Meeting
6. FY15 Audit Entrance Conference (*KPMG, Moss Adams, and Elizabeth Metzger, University Controller*)
7. Audit and Compliance Committee Process and Procedure Orientation (*Manu Patel, Internal Audit Director; Helen Gonzales, UNM Main Campus Chief Compliance Officer and Stuart Freedman, HSC Chief Compliance Officer*)
8. Health Sciences Center Chief Compliance Officer Status Report (*Stuart Freedman, HSC Chief Compliance Officer*)
9. Main Campus Chief Compliance Officer Status Report (*Helen Gonzales, UNM Main Campus Chief Compliance Officer*)
10. Status of Audit Recommendations (*Chien-chih Yeh, Internal Audit Manager*)  
Implemented  
Open  
Pending
11. Director of Internal Audit Status Report (*Manu Patel, Internal Audit Director*) and Working Lunch

The University of New Mexico  
Board of Regents' Audit and Compliance Committee  
*April 22, 2015 – 9:00 AM*  
*Roberts Room*  
**Agenda**

**EXECUTIVE SESSION**

12. Vote to close the meeting and to proceed in Executive Session as follows:

- a. Discussion of Final Internal Audit Reports, pursuant to limited personnel matters exception at Section 10-15-1.H(2) NMSA (1978), exception for matters subject to attorney-client privilege pertaining to threatened or pending litigation at Section 10-15-1.H(7), NMSA (1978).
- b. Discussion of limited personnel matters pursuant to exception at Section 10-15-1.H(2) NMSA (1978);
- c. Schedule of Audits in Process, pursuant to exceptions at Sections 10-15-1H(2 and 7), NMSA (1978);
- d. Proposed FY15 Audit Workplan exceptions at Sections 10-15-H(2 and 7), NMSA (1978); and
- e. Vote to re-open the meeting.

13. Certification that only those matters described in Agenda item # 12 were discussed in Executive Session and if necessary ratification of action, if any, taken in Executive Session

14. Adjournment

THE UNIVERSITY OF NEW MEXICO  
Board of Regents Audit and Compliance Committee Special Meeting  
December 4, 2014 – Draft Meeting Minutes

Members Present: Chairman J.E. “Gene” Gallegos, Vice Chair Lt. Gen. Bradley Hosmer, Regent James Koch (Quorum).

Other Attendees: Robert Frank, Helen Gonzales, Amy Wolhert, Elsa Cole, Pamina Deutsch, Gil Gonzales, Jeff Gassaway, Dianne Anderson, Purvi Mody, Rodney McNeese, Melissa Bokovoy, Manu Patel, Mallory Reviere, Amy O’Donnell.

Chairman Gallegos called the meeting to order at 10:32 AM in ROBERTS ROOM, Scholes Hall, UNM.

**ACTION ITEMS:**

- The Committee unanimously approved the minutes from the meeting of October 16, 2014.

**INFORMATION ITEMS:**

- There were no Advisors’ Comments.
- Follow up items:

Pamina Deutsch, Director, Policy Office, Amy Wolhert, Chief of Staff, and Melissa Bokovoy, Chair, History Department, presented the Committee with an update on the Main Campus Code of Ethics. The Ethics Task Force is not calling it a Code of Ethics as appears on North Campus, but rather Guiding Principles. Professor Bokovoy reported that is a set of four guiding principles the task force distilled and boiled down and that direct people to existing policies. The information was taken from multiple vision, mission, and value statements from UNM and other institutions, such as Cornell University. Dr. Ferrell, Chair, Faculty Ethics Committee, stated that using the term guiding principles is a practice that many businesses and universities follow. Ms. Deutsch noted that she had drafted a 25 page code of ethics based on the Health Sciences Center model, but consequently read an Albuquerque Journal article regarding the use of shorter guiding principles. Therefore, Ms. Deutsch suggested to the President’s Office that this might be a better model. She is not sure anyone would ever read a 25 page document. Professor Bokovoy added that people can try to make rules flex. The principles can guide you to move to the next stage. We already have robust policies that very much deal with ethical behavior. Chairman Gallegos thought the objective would be to have an overarching code that would not require trying to go here or there and some policies might conflict – not to have 25 pages; that was never suggested and is not the case at HSC. Ms. Deutsch stated that the Health Sciences Center has a code of ethics, but different units also have codes.

Chairman Gallegos asked Professor Bokovoy when they started on this and how many meetings the ethics task force had regarding the code/principles. Professor Bokovoy stated they started in August and had approximately eight meetings of one hour each. Regent Koch asked to hear from Regent Hosmer because he has prior experience with this topic. Regent Hosmer noted that this Committee has seen the HSC version and they find it appealing and valuable. He asked for a summary of the key differences between the guiding principles and the HSC code of ethics, and what are the benefits of the differences. Professor Bokovoy replied that the key benefit of these are they are overarching, not for a specific unit. The Committee felt very strongly that ethics starts at the very top with most violations occurring at the top levels. It is

important that everyone lives by them; it is not about “dos and don’ts.” It is about guiding behavior. These are ethical principles. A code is a set of laws that dictate behavior and the University already has many complicated policies and governmental laws to follow. Ms. Deutsch stated that the code of ethics at the Health Sciences Center is situational. The situations are given as examples based on discussions that occurred over a year’s time. It will be useful to have a series of forums on campus to discuss these principles and what they mean. There would be examples and eventually could be a document that would be somewhat similar to the HSC document. Regent Hosmer stated the Regents have seen the HSC version. They found it appealing and potentially valuable and they had hoped what the committee came up with would build on that. What Ms. Deutsch then explained is that what she put together initially mimicked the HSC code. It was done very quickly without opportunities to get input.

Ms. Wolhert added that the code Ms. Deutsch developed did not translate well to Main Campus and they feared it was too unwieldy. HSC has a much more focused mission. They sought out counsel from someone who does this for a living – Ann Rhoades, President and Founder of People Ink. Ms. Rhoades communicated that you should not try to do a code of ethics for this type of institution. She indicated the University should get a set of guiding principles in place and then talk about implementation language and how this plays out. You can check to see if policies align and are comprehensive enough. Professor Bokovoy added that the principles can be used in employee evaluations in a way a code of ethics cannot. Regent Hosmer asked if the HSC version depends on the narrower focus and very detailed prescriptive aspirations. For the Main Campus something organized in that fashion would be necessarily huge. They have therefore come up with the principles that are ethical and aspirational – the same as HSC in that respect, which is what the Regents found appealing. Regent Hosmer stated that some ethical codes are summarized very succinctly. Would a single short aspirational statement that summarizes the ethical component serve as a headline which replicates the value of the HSC version and also functions for the entire University? Not to replace these at all but give them an introduction or preamble that calls out, for example, integrity in service.

Professor Bokovoy stated that there are so many layers of putting policy forward. It was the Committee’s idea that the Regents wanted this done more quickly. This process is quicker than what the HSC did. The Big Red policy handbook creates ways to implement principles. There is not usually a summary in these, so they did not think of a preamble. If the Regents want the Committee to go back and address the addition of an introduction, they can. Regent Hosmer indicated the policy statement needs an additional sentence that summarizes core concepts of integrity, trust, and service.

Chairman Gallegos asked how we determine a violation and who determines the violations? What is the measure? Professor Bokovoy replied that you go to existing policies and the code of conduct. This even includes the HSC code of ethics. The Regents thought there would be an overarching code of ethics applicable to the Main Campus in addition to any other codes or policies that are not in conflict. Regent Hosmer added that the policy statement that captures the ethical component would be a very useful front end to the process, whatever else you come up with.

Professor Bokovoy asked if this should be shelved. Chairman Gallegos answered yes. There is nothing at this point to recommend to the full Board. Regent Koch informed the Committee and the task force that he likes the request for broader, clearer explanation up front. Professor

Bokovoy agreed that they could add a statement. Regent Hosmer stated if it is the right statement the principles could all flow under that. Regent Koch said things change when you have committees and discussions. Regent Hosmer asked if Chairman Gallegos could elaborate on the disappointment with what has come forward. Chairman Gallegos responded that what is before the Committee now is a compilation of various existing policies that bear one way or the other on ethical behavior. You cannot argue with the statements of principles, but a code is different in that it states clearly that this is what is expected in terms of conduct. Then, if that is not the conduct, then you have violated it. President Frank informed the Committee that they could take it one more stage, and morph it into something more like what they wanted to hear. They can take Regent Hosmer's request, tack it on, and then add the community meetings around campus, and it may be more like what the Regents wanted. This is a skeleton and it is early in the process. The HSC code may have been like this in the early stage.

Regent Hosmer said for each of these statements there are two sides of a coin: how do you define violations, and how do you encourage good behavior? Built above them could be a positive aspirational statement. Professor Bokovoy asked where you can get a document that is specific to a violation of, say, integrity. This guiding principles document will show where to look. It serves as an index. You will not see this anywhere in any document that already exists. Ms. Wolhert stated this will be in employee evaluations. You have to say what is exceptional integrity, what is tolerable, etc. President Frank stated there is no "live quality" to the principles document. Regent Hosmer said these eliminate grey areas. We all know of cases of misbehavior that are not actionable because they do not violate some specific law, regulation, or policy. The statements here have the benefit or strength of eliminating those grey zones.

Chairman Gallegos stated they would have to educate him on how they eliminate grey areas because they seem extremely general. President Frank replied that what is missing is where Regent Hosmer was going with the preface. They lack the HSC quality of grabbing you and they need more living examples. The readers should get more from the document. You have to understand too much. Chairman Gallegos added that the HSC version is positive. Regent Koch believes that students do not look at the Pathfinder (student policy manual) unless there is an issue. Ms. Wolhert stated that going forward we want to include the more positive statements, for instance to look at examples of behaviors that show adherence to the highest levels of integrity.

Director Patel concluded the follow-up items with a discussion of Clery Act data for all campuses. Internal Audit has drafted a memo detailing what information is missing. All the required information is filed with the government, but there are still some problems with internal reports. There is still work to be done to clean them up.

By unanimous consent, the meeting went into Executive Session at 11:25 for the reasons stated in the agenda.

- a. Discussion of Final Internal Audit Reports, pursuant to limited personnel matters exception at Section 10-15-1.H(2) NMSA (1978), exception for matters subject to attorney-client privilege pertaining to threatened or pending litigation at Section 10-15-1.H(7), NMSA (1978).
- b. Discussion of limited personnel matters pursuant to exception at Section 10-15-1.H(2) NMSA (1978);

Summary of the Regents' Audit and Compliance Committee Special Meeting  
December 4, 2014

- c. Schedule of Audits in Process, pursuant to exceptions at Sections 10-15-1H(2 and 7), NMSA (1978);
- d. Proposed FY15 Audit Workplan exceptions at Sections 10-15-H(2 and 7), NMSA (1978); and
- e. Vote to re-open the meeting.

The meeting returned to open session at 12:47 PM, with certification that only those matters described above were discussed in Executive Session.

The Committee approved the following UNM Hospital audits by unanimous consent:

- a. UNM Hospitals Patient Financial Services, audit period July 1, 2013 to January 31, 2014.
- b. UNM Cancer Center Patient Financial Services, audit period July 1, 2013 to January 31, 2014.
- c. Sandoval Regional Medical Center Patient Financial Services, audit period July 1, 2013 to January 31, 2014.
- d. Behavioral Health Operations Patient Financial Services, audit period July 1, 2013 to January 31, 2014.

Motion to adjourn 12:48 PM. (Motion: Regent Hosmer, Second: Chairman Gallegos).

Approved:

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Audit and Compliance Committee Chairman

There is no  
handout  
required for  
this item



There is no  
handout  
required for  
this item

**INFORMATION  
TO  
BE  
SUPPLIED  
AT  
MEETING**

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# University of New Mexico Compliance Office – Main Campus

Helen Gonzales, Chief Compliance Officer  
March 2015

# Compliance Office – Main Campus

- ▶ The Compliance Office works as a control and advisory function to ensure that there is a robust ethics and compliance program that mitigates compliance risks, prevents misconduct, and strengthens the ethical culture.
- ▶ The Compliance Office works proactively with Compliance Partners to facilitate & assure that management is addressing key risk areas.

# Creation of the UNM Compliance Office

In light of the issues that emerged at the University of Pennsylvania and the subsequent publication of the Louis Freeh report, in August 2012, President Frank commissioned a review of UNM's compliance functions.

That review recommended centralized oversight through a Chief Compliance Officer with decentralized delegation of day-to-day compliance management to "compliance partners". The Chief Compliance Office was created in January 2013 using the seven elements of the Federal Sentencing Guidelines as a model for an effective program.

# The Seven Elements of an Effective Compliance & Ethics Program

- Chief Compliance Officer
- Reports to Board & President
- Compliance Committee

Oversight,  
Accountability,  
Resources

- Codes of Conduct & Ethics
- Compliance Policies, Procedures & Controls
- Employee Handbooks

Standards &  
Controls

- Employee Orientation & training
- Management training
- Regular communications on compliance topics

Effective  
Training &  
Communication

- Compliance Hotline
- Audits
- HR reviews
- Safety reviews
- Employee surveys

Evaluation,  
Monitoring &  
Auditing

- Performance Management System
- Consistent discipline for violations

Enforcement,  
Discipline &  
Incentives

- Screening of new hires
- Background checks
- Controls on authority

Due Care in  
Delegating  
Authority

- Periodic Risk Assessments
- Review and amend program

Response &  
Continuous  
Improvement

# Association of Governing Boards

## “Welcome to Compliance U”

### August 2013 Article

- ▶ *“Higher education has entered an era of rapidly increasing regulatory activity at both the federal and the state level. That increase will require significant cultural change in higher education to adapt to ever-growing demands for accountability from policy makers, regulators, and the public.”*
- ▶ *“The governing board should ask for regular reports, as well as updates as appropriate, on compliance issues at the institution. Yet boards should carefully avoid trying to directly manage operational compliance matters.”*
- ▶ *“Building a compliance process and a culture that encourages working with regulators should be the principle goals for boards and other top administrations.”*



# Key Partnerships

- ▶ **Compliance Partners**
  - Ensure that there are adequate and appropriate internal controls to meet compliance obligations.
- ▶ **HSC Compliance Office**
  - Coordinates compliance activity for the HSC
- ▶ **Internal Audit**
  - Evaluates & validates the adequacy of the internal control structure
- ▶ **Policy Office**
  - Works with Compliance Partners to draft institutional policies
- ▶ **University Counsel**
  - Serves as the legal defender of the University, and seeks to avoid or negate related legal risks.

# Compliance Partners

- ▶ Accreditation
- ▶ Athletics
- ▶ Budget Office
- ▶ Controller's Office
- ▶ Enrollment Management
- ▶ Equal Opportunity
- ▶ Global Education
- ▶ Government Relations
- ▶ Human Resources
- ▶ Information Technology
- ▶ Institutional Support Services
- ▶ Police
- ▶ Provost Office
- ▶ Purchasing
- ▶ Research
- ▶ Safety & Risk Services
- ▶ Student Affairs

# Compliance Office Goals

- ▶ Develop a risk identification and mitigation reporting process for the Compliance Partners.
- ▶ Develop and maintain a compliance directory as a regulatory inventory with the University's key requirements and present controls. Document required reporting deadlines and available training.
- ▶ Launch a new ethics and compliance reporting system in March 2015. Transition from Internal Audit. Oversee and triage cases.
- ▶ Develop a consistent investigation protocol.
- ▶ Revise the Whistleblower Policy.
- ▶ Coordinate/convene compliance projects that span multiple organizations (e.g. sexual assault and minors on campus).
- ▶ Develop compliance metrics

# Possible Compliance Metrics

- ▶ Compliance Partner risk mitigation strategies
- ▶ Ethics & Compliance Reporting System data
- ▶ Completion of compliance training
- ▶ Disposition of internal investigations
- ▶ Feedback from employee ethics surveys
- ▶ Analysis of internal audit findings/corrective action plans

[Home](#)[Campus Safety](#)[Policies & Publications](#)[UNM Anonymous Hotline](#)[Compliance Training](#)[Compliance Directory](#)[Compliance Committees](#)[Resources](#)[Contact Us](#)[Minors on Campus Task Force](#)

## UNM Anonymous Hotline

### 1-888-899-6092

The hotline is to report concerns for all of UNM.

[Learn More](#)

[Compliance Office](#)  
MSC11 6300  
1 University of New Mexico  
Albuquerque, NM 87131

**Physical Location:**  
Student Support & Services Center  
Suite 1150

Phone: 505-272-7252  
Fax: 505-272-7010  
[compliance@unm.edu](mailto:compliance@unm.edu)

[UNM](#) > Home

## UNM Compliance Office - Main Campus

Welcome to the homepage of the University of New Mexico Main Campus Compliance Office.

The Compliance Office collaborates with the UNM community and senior leadership to coordinate and guide compliance efforts across the campus. The Compliance Office is complemented by an institutional compliance committee of administrative partners with responsibility and expertise in the major compliance areas, including athletics, human resources, research, student affairs, facilities, and finance.

Our mission is to ensure institutional compliance with applicable laws and regulations; to promote ethical behavior and research integrity; and to provide the tools, guidance, and oversight needed to adhere to all necessary regulatory requirements.

Our goal is to enhance compliance awareness across the University community, and support the management of compliance obligations from a university-wide perspective. The program is administered by the Chief Compliance Officer, who reports functionally to the Board of Regents and administratively to the President.

## Compliance News

*The Chronicle of Higher Education*  
1/15/15  
[Standard & Poor's Issues Negative Outlook for Nonprofit Higher Education](#)

*The Chronicle of Higher Education*  
1/14/15  
[NCAA's Top Conferences to Allow Additional Aid for Athletes](#)



# Compliance

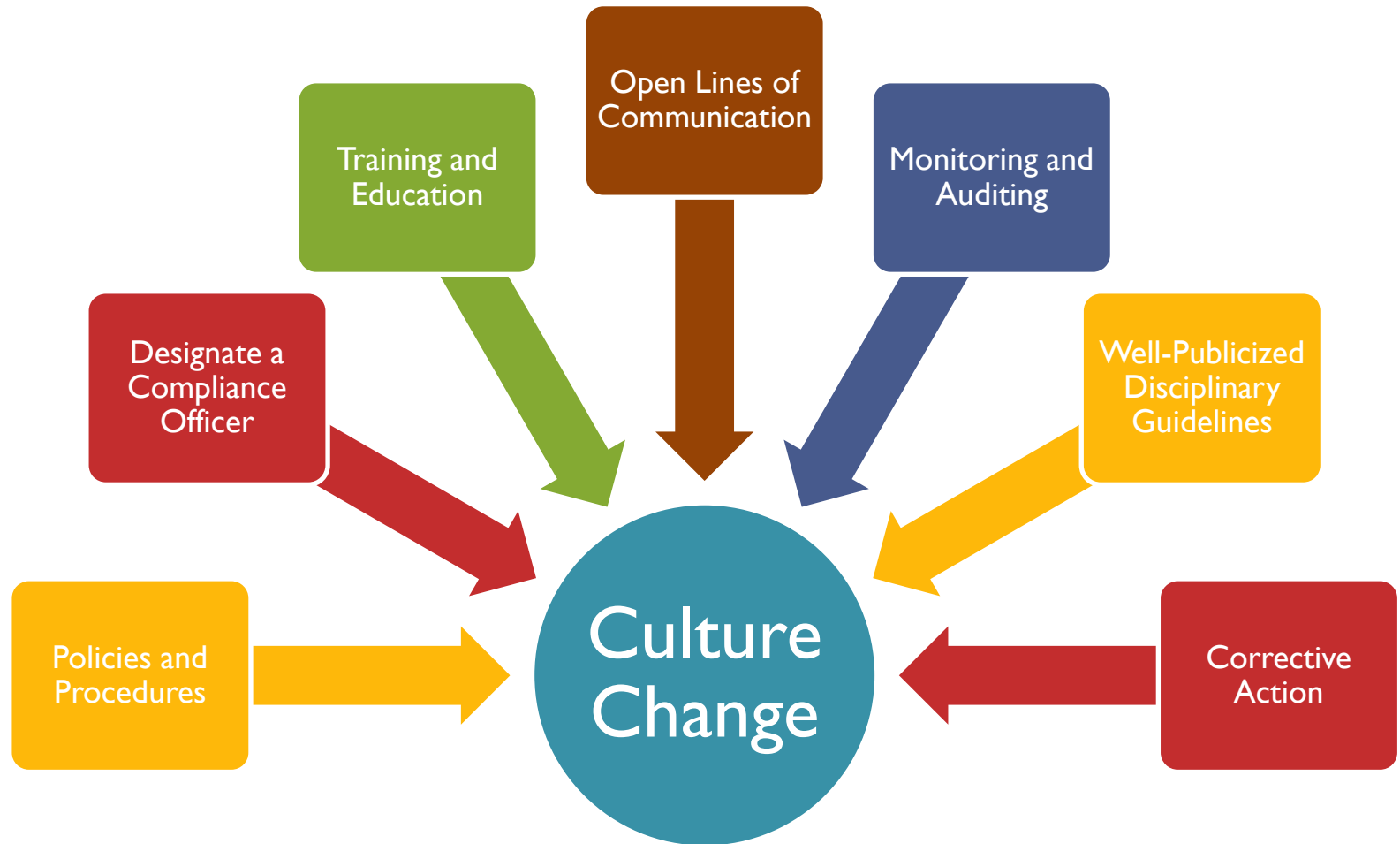
Stuart Freedman, MPH

HSC Chief Compliance Officer

# Compliance: 25 Years

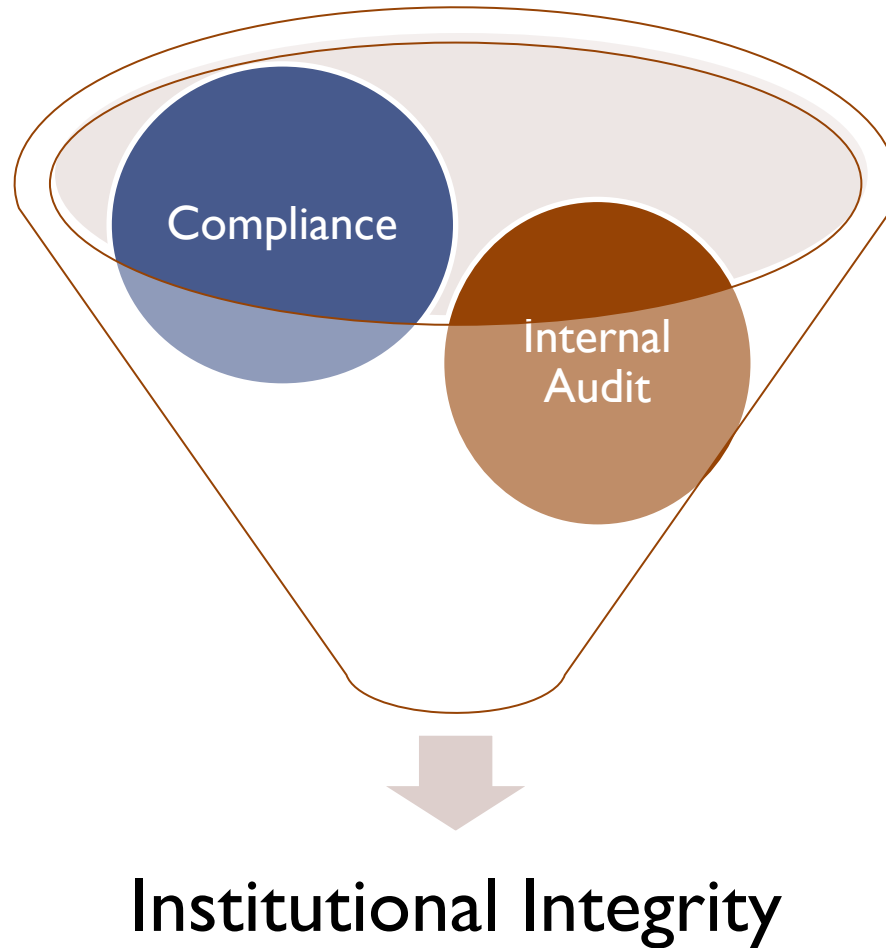
Date	Event
Nov 1991	The US Sentencing Commission released sentencing guidelines for organizational defendants, establishing the Seven Elements of an Effective Compliance Program
June 1991	First meeting of the Ethics Officer Association
Feb 1997	DHHS Inspector General released an “Open Letter to Health Care Providers” in which she supported voluntary compliance programs in healthcare
Sept 1997	Health Care Compliance Association founded
Fall 2001	Enron scandal
Nov 2002	First National Symposium on Corporate Responsibility: Compliance and Ethics held
Nov 2004	The US Sentencing Commission makes major revisions to the sentencing guidelines for organizations, enhancing responsibility for governing boards
May 2012	Upon release of the Freeh Report, higher education begins to reexamine the role of compliance

# The Seven Elements of an Effective Compliance Program





# Compliance and Internal Audit: Two Approaches, One Goal



# Compliance and Internal Audit: Two Approaches, One Goal

	<b>Internal Audit</b>	<b>Compliance</b>
<b>Primary Function</b>	Conduct independent assessments	Create a “culture of compliance”
<b>Role in Operations</b>	None: does not “step into the shoes of management”	Limited: assists management in implementing corrective action
<b>Foundation</b>	Best practices	Regulation
<b>Types of Investigations</b>	Use of organizational resources/funds	Other noncompliance, such as healthcare fraud, retaliation, or NCAA violations

# Example HSC Compliance Projects

Projects Identified by the AAMC Compliance Peer Review as National Best Practice:

- HSC Code of Ethics
- Health System Provider Compliance Committee

Other Major Projects:

- Compliance Customer Satisfaction Survey
- Community Engagement
  - Presentations/Events
  - Hotline Poster
  - Online Training Focus Group



**Date:** January 21, 2015  
**To:** Executive Compliance Committee  
**From:** Stuart Freedman, HSC Chief Compliance Officer  
**RE:** Monthly Compliance Report November/December 2014

***Introduction:***

The University of New Mexico's Health Science Center ("HSC") serves its community through its three missions of patient care, education and research. The HSC has adopted a Compliance Plan in accordance with the ***Seven Elements of an Effective Compliance Program*** (see below). This report contains information to assist HSC leadership and the HSC Board of Directors in evaluating and responding to compliance risks.

1. **Designate a compliance officer** to have a working relationship with management and the governing board. The compliance officer works with a high level "Compliance Committee" to ensure the organization leaders are aware of any compliance concerns.
2. **Written policies and procedures** ensure that HSC has set expectations about behavior and that there are processes in place to prevent noncompliance.
3. **Training and education** ensure that HSC faculty and staff are aware of behavioral expectations and compliance concerns.
4. **Open lines of communications** provide every member of the University community channels through which to report concerns or ask questions anonymously.
5. **Responding promptly to detected offenses and undertaking corrective action**, when *Compliance* discovers that a non-compliance action has occurred or occurring, they make recommendations to management and then assists management to implement corrective action plans.
6. **Internal monitoring and auditing** are processes by which the HSC can identify noncompliance.
7. **Enforces standards through disciplinary guidelines**, *Compliance* does not discipline, but does conduct investigations that may result in discipline.

1. **Designate a compliance officer** and ensure that the compliance officer has unfettered access to leadership and the Board of Directors. At the HSC, Stuart Freedman is the HSC Chief Compliance Officer (CCO). The Executive Compliance Committee (“ECC”) is the executive-level committee that focuses on compliance. The following chart contains dates from meetings held during this reporting period.

Meeting Date	Meeting Type
November 19, 2014	Executive Compliance Committee
<b>Members Present:</b> Holly Buchanan, Rick Crowell, Stuart Freedman, Amy Levi, Ava Lovell, Richard Larson, Anthony Masciotra, Steve McKernan, Michael Richards, Jamie Silva-Steele, Thomas Williams, Ella Watt, and Lynda Welage	<b>Members Absent:</b> Bob Bailey, Jim Pendergast, Nancy Ridenour, and Paul Roth

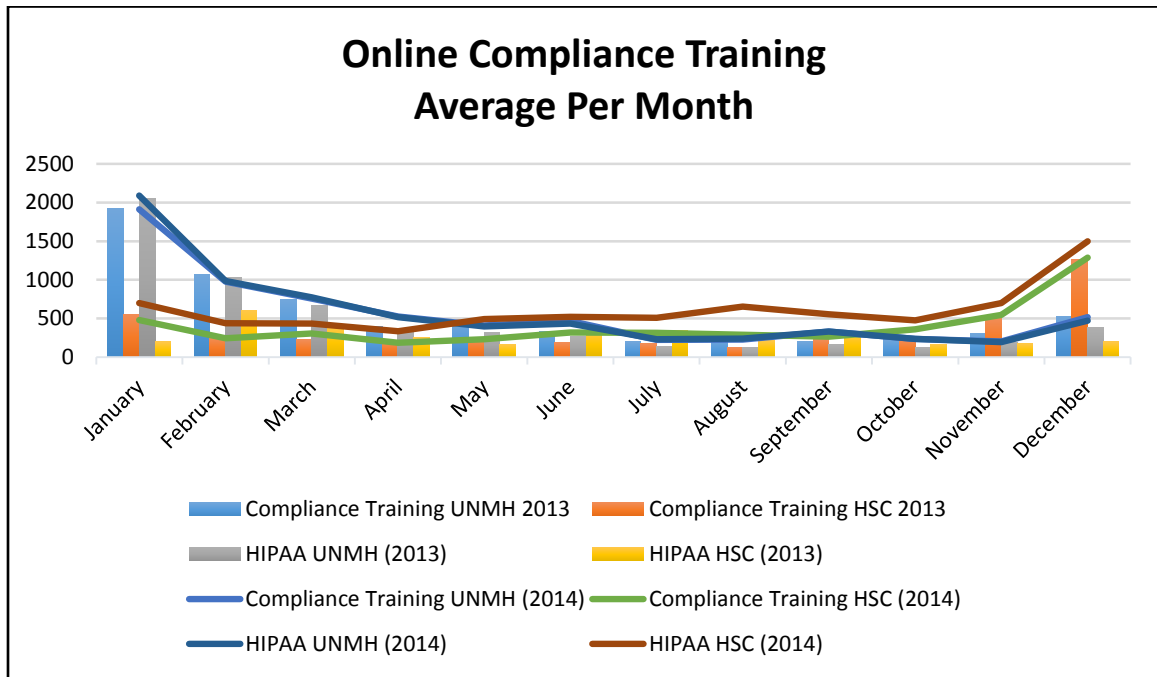
2. **Written policies and procedures** must reflect the current regulatory environment and HSC business practices. Although there are many policies and procedures at the HSC, this report lists the date and type of meeting held where possible new or revised compliance policies were discussed.

Meeting Date	Meeting Type
11/19/2014	ECC

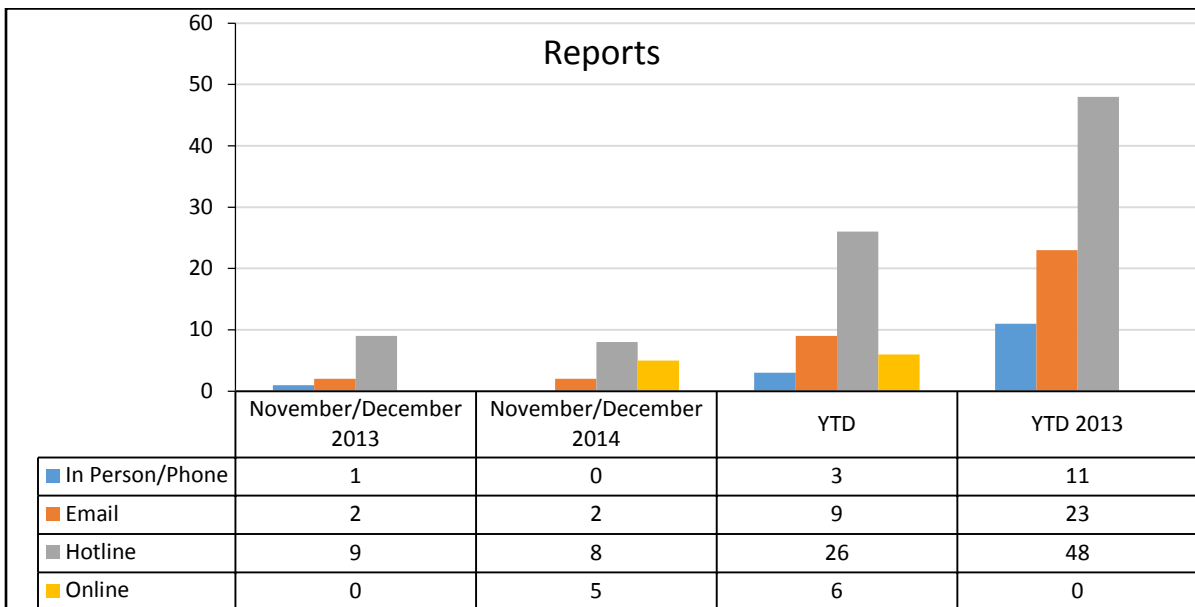
**3 Training and education** about compliance is provided to HSC faculty and staff, both in-person and online. This report will include completion of required online trainings and this reporting periods live compliance trainings provided to physicians, advanced practice clinicians, fellows, residents, and others who document in the medical record.

**In-Person Training**

Department	Faculty	Providers	Residents	Provider 1:1	New Provider/Hire
UNMCC	10	25	0	0	2
UNM HOSPITALS	0	0	0	0	0
UNMMG	2	0	13	1	0
UNM SRMC	0	0	0	0	0
HSC PRIVACY	1	0	0	22	0
HSC RESEARCH & EXPORT	147	55	0	0	6
HSC SECURITY	0	0	0	0	0



4. **Open lines of communication** provide HSC faculty and staff with multiple avenues through which to ask questions about compliance or report concerns to their Compliance Officer. Face-to-face meetings, phone or email contacts, and an anonymous hotline permit HSC faculty and staff to communicate with their Compliance Officer in whatever way makes them the most comfortable.



5. **Responding promptly to detected offenses and undertaking corrective action** demonstrates that *Compliance* will identify noncompliance and respond. When *Compliance* identifies noncompliance, leadership will be informed and, when necessary, *Compliance* will partner with effected areas to create and implement corrective action plans.

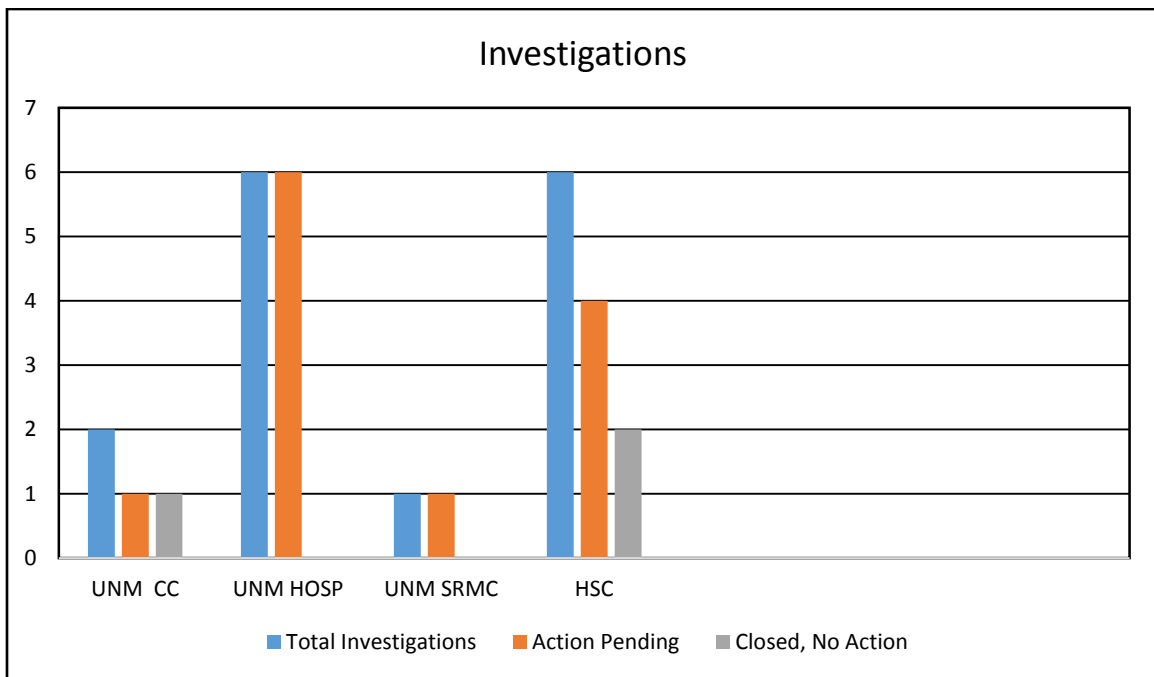
<b>Source</b>	<b>Number</b>	<b>Action Pending/Closed</b>
<b>Hotline</b>	8	6 action pending, 2 closed
<b>Phone/E-Mail</b>	2	2 action pending
<b>Computer Line</b>	5	4 action pending, 1 closed



**6. Internal monitoring and auditing** helps the HSC identify and correct noncompliance. This report includes information about reviews or ongoing processes (monitoring) and past events (auditing) related to exclusion checks and third party billing.

Department	External Compliance Reviews	Closed External Reviews	Internal Compliance Reviews	Closed Internal Reviews
<b>UNM CC</b>	0	0	0	0
<b>UNM HOSPITALS</b>	1	0	57	52
<b>UNMMG</b>	0	0	10	10
<b>UNMSRMC</b>	0	0	27	25
<b>HSC PRIVACY</b>	0	0	0	0
<b>HSC R &amp; E CONTROL</b>	2	1	3	2
<b>HSC SECURITY</b>	0	0	0	0

7. **Enforcing standards through well publicized disciplinary guidelines** means that when *Compliance* identify noncompliance, there are consequences for HSC faculty and staff. Although discipline is handled by employment areas, when *Compliance* conducts an investigation and finds noncompliance, that information is provided to leadership so that appropriate discipline can be taken.



## LIST OF ACRONYMS

### *Acronym Definition*

AAMC	American Association of Medical Colleges
BHC	Biohazard Compliance
CDC	Center for Disease Control (Feds)
COI	Conflict of Interest
DHHS	Department of Health & Human Services
ECC	Executive Compliance Committee
HIPAA	Health Insurance Portability and Accountability Act of 1996
HR	Human Resources
HRPO	Human Research Protections Office
HRRC	Human Research Review Committees
HSC	Health Sciences Center
HSLIC	Health Sciences Library Informatics Center
IBC	Institutional Biosafety Committee
MAD	Medical Assistance Division (State Medicaid)
MIC	Medicaid Integrity Contractor
NIH	National Institutes of Health
OACC	Office of Animal Care Compliance
OCR	Office for Civil Rights
OIG	Office of Inspector General
RAC	Recovery Audit Contractor
SRMC	Sandoval Regional Medical Center
UNM	University of New Mexico
UNMCC	University of New Mexico Cancer Center
UNMH	University of New Mexico Hospital
UNMMG	University of New Mexico Medical Group

## **Chief Compliance Officer Quarterly Report**

Submitted by Helen Gonzales, Main Campus Chief Compliance Officer (CCO)  
March 20, 2015

This quarterly report to the Regent's Audit and Compliance Committee includes activity since the October, 2014 Regent's Audit Committee meeting.

### **Compliance Office Goals, Activity, & Accomplishments**

The following goals have been assigned to the Chief Compliance Officer for FY15:

#### **Goal 1: Document internal controls and monitoring mechanisms, identify any gaps or risks, and communicate directly with compliance partners to recommend appropriate action.**

During the last quarter, I continued to develop core compliance processes to support ongoing mitigation efforts, including:

- Convened a Minors on Campus Task Force to develop institutional policies and practices. This group is made up of a wide-range of University representatives. There are 4 subcommittees actively working on the following: Survey and inventory existing programs, identify legal and safety issues, develop practices for children of employees and students, and identify a mechanism to track information on UNM-hosted programs. The committee is expected to have a draft policy by spring 2015;
- Spent a significant amount of time this last quarter working on issues related to Clery Act and Title IX compliance. Some of the specific activity included:
  - Co-chaired a Sexual Assault Coordination Committee to recommend strategies to coordinate efforts on campus. Developed the CARE model to align resources.
  - Participated in the Clery Committee, providing input and advice;
- Developed and maintained an inventory of all material laws and regulations applying to the university;
- Met with compliance partners to review their risks and compliance obligations;
- Joined the Safety and Risk Services Loss Control Committee;
- Joined the OEO Director Search Committee, a critical position to ensure institutional compliance with Title IX.

#### **Goal 2: Provide quarterly reports to the President and the Regents about compliance status, with an emphasis on issues requiring immediate attention.**

- Developed a compliance risk mitigation worksheet for Compliance Partners to complete semi-annually;
- Developing metrics to track compliance status.

#### **Goal 3: Work with Compliance partners to develop education programs that are sufficient as well as efficient in terms of the time and resources required for**

## **implementation.**

- Identified all of the university training programs that address compliance issues. Worked with HR to discuss and identify training requirements for compliance obligations;
- Convened the Institutional Compliance Committee to brief them on the following institutional initiatives:
  - hotline implementation and transition to the Compliance Office,
  - hotline metrics,
  - compliance risk reporting,
  - LoboRESPECT CARE model,
  - Minors on Campus committee,
  - State Authorizations

### **Goal 4: Participate in the development of a campus-wide code of ethics and behavioral guidelines.**

- Participated in the committee that developed draft guiding principles;
- Collaborated with Dr. Linda Ferrell, UNM Professor of Marketing and Bill Daniels Professor of Business Ethics, to support an MBA student on Independent Study. The student will assist the Compliance Office with informing the campus community about the ethics & compliance hotline;
- Participated in an invited group discussion with Andy Fastow, former Enron executive, regarding the importance of establishing institutional ethical principles

### **Goal 5: Work closely with University Policy process and Internal Audit to align compliance needs with policies and monitoring activities.**

- Continued to meet with the Policy Office Director to identify policies under review;
- Continued on-going collaboration with Internal Audit to identify risks and mitigation efforts;
- Began transition of the Ethics & Compliance hotline from Internal Audit to the Compliance Office. We are implementing a new vendor product: Navex/Global Ethics & Compliance Reporting System. We are partnering with the HSC, Hospital, UNMMG, and SRMC. We are developing the intake process, identifying investigators and investigation protocols, identifying metrics, and developing report formats.

Follow Up Report - Recommendation Implemented (April 2015 Open Session)

Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Recommendation Action	Actual Implementation Date	Responsible Party
2013-27	<u>Parking and Transportation Services Contract Renewal</u>	<u>Recommendation 1 - Update UNM Parking Regulations</u>	The Associate Vice President of Institutional Support Services should work with the Board of Regents to revise the PATS Parking Regulations to reflect the actual parking enforcement configurations and update the other entities that handle their own parking services.	We concur. UNM PATS Parking Regulations will be updated to reflect the current parking enforcement configurations, and submitted, for approval, to the President who has been delegated authority to approve UNM Parking & Transportation Services Regulations on behalf of the UNM Board of Regents.	3/31/2015	IA received a copy of the updated PATS regulations approved by the UNM President. A degree of self-regulation may be granted to the University's departments, agencies or facility managers by written agreement (e.g. MOU) with PATS. IA received a copy of the Statement of Cooperation for the Athletics Department, the Cancer Center, Continuing Education, UNMH, and the Science and Technology Park (Real Estate Department). Each of the SOC's terms is indefinite and each SOC is to be reviewed for any changes on an annual basis in early June.	4/2/2015	Chris Vallejos,Avp,Bsn Plng & Svcs/Iss and Barbara Morck, PATS Director
2013-29	<u>Review of College of Education Operations</u>	<u>Recommendation 1 - Enforce UNM Reserve Policies and Procedures</u>	The Dean should enforce UNM Reserve policies which require preparing and maintaining adequate supporting documentation for committed and dedicated reservations.	In accordance with the Board of Regents' policy 7.2 "Budgets and Fund Balances", departments responsible for current unrestricted funds are required to submit a budget use report to the cognizant vice president. This is further explained in UAPP 7000.2. The College commits to maintaining supporting documentation that is required by these policies in the form of signed reports from the Chair to the Dean designating their balances into the appropriate categories.	10/15/2014	New COE Dean established process and policy for department chairs to follow in tracking and categorizing reserve balances.	9/2/2014	Salvador Hector Ochoa, Dean; Susan Rhymer, Finance Officer
2013-29	<u>Review of College of Education Operations</u>	<u>Recommendation 10 - Review of course fees</u>	The Dean of the College of Education should review the TK20 Higher Education curricular fees to ensure that expenses are still allowable, allocable, reasonable, and timely.	An analysis of the appropriateness of the curricular fees will be conducted during FY15 to ascertain the allowability, allocability and reasonableness of the charges.	12/31/2014	02/16/2015 - The Provost's Office has reviewed and approved all course fees for COE as of 12/31/2014, as required by Policy 8210.	2/16/2015	Salvador Hector Ochoa, Dean; Susan Rhymer, Finance Officer
2014-04	<u>Clery Act</u>	<u>Recommendation 10 - Fire Statistics Tables</u>	The Executive Vice President for Finance and Administration should instruct the Director of Safety and Risk Services to work with the University Communications' Web Designer to ensure that all the required fire statistics tables for the three most recent calendar years are published in the ASFSR. The UNM Fire Marshal should also review the ASFSR to ensure information and data reported is accurate and current. The Director of Safety and Risk Services should develop adequate policies and procedures to ensure that they adequately maintain and archive documentation used to support fire statistics included in the ASFSR for seven years.	SRS will initiate a meeting with the University Communication Web Designer and work with that individual to publish the annual security and statistic report. The Manager, Construction Safety will also review the ASFSR to ensure information and data reported is accurate and current. SRS will develop adequate policies and procedures to ensure that it maintains and archives documentation to support fire statistics in the ASFSR for seven years. These policies and procedures will include: collection and maintenance of fire drill training and drills;collection and maintenance of fire safety and fire extinguisher training; collection and maintenance of fire alarm activations; collection and maintenance of State Fire Marshal reports and follow-up; collection and maintenance of fire suppression testing and repair records; collection and maintenance of fire alarm testing and repair records; collection and maintenance of fire extinguisher inspection records; and collection and updating of resident advisor lists and facility manager lists for student housing.	12/31/2014	2/16/15 2014 ASFSR contains fire statistics for three most current years. SRS SOP for Clery Act Reporting and Compliance assign responsibility of reviewing the fire statistics for the ASFSR to the Construction Safety Manger. Note – that position is vacant; however, the SRS Director informed she is working to post the position in the near future. With regard to documentation to support review of the fire statistics published in the 2014 ASFSR, the SRS Safety Specialist provided email correspondence between the prior Construction Safety manager and the interim Clery Coordinator. SRS has addressed appropriate record retention period in their SRS SOP.	2/16/2015	Carla Domenici,Int Dir,Safety & Risk Services

**Follow Up Report - Recommendation Implemented (April 2015 Open Session)**

Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Recommendation Action	Actual Implementation Date	Responsible Party
2014-04	<u>Clery Act</u>	<u>Recommendation 23 Report Publication and Distribution</u>	The Chancellor for Health Sciences should instruct the Chief Executive Officer of UNMH to ensure prospective employees are made aware of the availability of the ASFSR on the hiring web page or in the application, and new employee orientation should include notification of the availability of the ASFSR.	The UNMH new employees' orientation will include notification of the availability of the Annual Security and Fire Safety Report.	9/30/2014	Cleared. New Employee Orientation was updated to include a slide referencing ASFSR. Change made 8/11/14.	10/13/2014	James Pendergast,ADM IN HR
2014-04	<u>Clery Act</u>	<u>Recommendation 24 - Daily Crime Log</u>	The Executive Vice President for Finance and Administration should require that the UNM Police Chief update procedures to require that offenses recorded in the crime log are easy to understand and do not include initials or codes; disposition of crimes is documented, and unfounded offenses are identified as "unfounded" in the crime log; and crime logs are archived for seven years.	Review and audit the UNMPD's process for verifying crimes statistics reported in the ASFSR. The UNMPD Lieutenant will review and record all crimes identified by Clery Act requirement for the ASFSR. The Lieutenant will write on actual police report the reason an incident is not recorded into the ASFSR. The report will be signed by the Lieutenant and then reviewed by the UNMPD Commander to ensure the correct action was taken and will sign same report providing a proper audit trail for reviewing. The Daily Crime Log is now located on the UNM Police Web page providing easy access to public. The offenses recorded on the crime log are easy to understand and no initials or codes are being used. The crime log also provides an easy to view pin map of where the incident occurred for the public to get a better idea of where the incident occurred. The Disposition of crime has been corrected and the status of "Unfounded" has been added in the crime log. Crime logs are being archived for 7 years.	11/30/2014	UNMPD has adopted a new online system of retaining daily crime logs to assist UNMPD in its effort to store the daily crime logs for at least seven years. This online system located on the UNM Police Web page is easily accessible and does not have time limitation. Internal Audit verified that the UNMPD Commander has been attaching a separate sheet of paper to the police report with the reason of not counting the incident as a Clery crime when in doubt. This sheet is reviewed and signed by the Deputy Chief in order to provide a proper audit trail for reviewing. Internal Audit reviewed the daily crime log report for three months to determine if the disposition status for any false or baseless reported crimes was correctly recorded as 'unfounded' instead of 'closed.' Internal Audit did not find any exceptions with the recording of reported crimes within this three month period.	2/28/2015	Kevin McCabe,Dir,Univ Scty/Chief of Police
2013-05	<u>HSC Cancer Research Center</u>	<u>Recommendation 1 - EOD Training - HIPAA and Standard</u>	The Director/Chief Executive Officer of the UNM Cancer Center should work with the Cancer Center Human Resources Department and with the SOM Department Chairs (who hold primary responsibility for faculty) to ensure that all faculty and staff take the University's required training and HIPAA training courses.	UNM Cancer Center intends to address the recommendation for with the following actions. Staff: 1) Cancer Center Human Resources will retrain managers and supervisors to ensure completion of required training is accurately tracked and noted on employee evaluations. 2) Cancer Center Human Resources will work with Learning Central to develop/obtain a detailed tracking report of required training courses by employee. Managers and Supervisors will receive a distribution of the status report monthly and will be contacted directly by Human Resources if outstanding training is not resolved within one month prior to completion deadline. Any employee missing the deadline will be required to complete the training immediately and will be subject to progressive discipline. Faculty: UNM SOM Chairs/Administrators for faculty who practice in the Cancer Center (largely from the Departments of Internal Medicine, Surgery, OB/GYN and other Departments) will work with representatives from Learning Central to ensure faculty training plans are properly loaded for faculty. SOM Department Division Administrators will work closely with Chairs to audit and track completion.	12/31/2014	2/25/15 Received various items to support completion of this recommendation. CC has made diligent effort to train supervisors and managers about annual training requirements of staff. CC provided copies of quarterly staff meeting agendas and minutes to support delivery of reminders to complete the training and training provided by HR staff regarding required training. CC Director has reached out to SOM chairs to inform of faculty training requirements and receives status updates during weekly Executive Committee meetings. Despite all efforts made required training for 2014 was not 100% complete by all staff and faculty. Faculty had a 100% completion rate on 8 of the 10 required courses (the other two were 94% and 96% completion rates) Staff completion rates for the five required courses ranged from 87.7% to 99% complete. At this time the CC has provided evidence that they have made diligent effort to ensure that all faculty and staff take required training and the recommendation requirements have been fulfilled. Completion rates have significantly improved; although not 100% completion rate. Further action with regard to those who have not completed the courses was not addressed in recommendation or response. Clear.	2/25/2015	RODNEY MARTINEZ,Chief Financial Officer: UNM Cancer Center

**Follow Up Report - Recommendation Implemented (April 2015 Open Session)**

Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Recommendation Action	Actual Implementation Date	Responsible Party
2014-08	IT Ticketing	<u>Recommendation 2 - Vault Camera</u>	The Director of Ticketing Services should request that the appropriate personnel adjust the camera to ensure that all persons entering and leaving the vault are recorded on camera. The University should also consider installing a camera in the vault room.	We concur. We will work with the Facility Director in Athletics to get camera position adjusted. The camera outside vault door will be moved, so that it ensures a clear angle to the vault door and all activity can be recorded. In addition, we will review the addition of a camera inside the vault room.	12/31/2014	Completed. Ticketing Services has installed a camera directed at the vault.	2/6/2015	Mark Koson, Assoc Athletic Dir/Ticket Svcs
2014-08	IT Ticketing	<u>Recommendation 3 - Timely Deposits</u>	The Director of Ticketing Services should work with the Controller's Office to ensure that deposits over \$50 are deposited by the next working day or exceptions to the policy are made and documented.	We concur. Ticketing Services will continue with regularly scheduled deposits on Tuesday, Wednesday and Friday. Per the University Controller's approval (June 16, 2009) of an exception on Monday deposits, Ticketing Services will continue to comply. Thursday deposits will be added to the pickup schedule. When a special deposit is deemed necessary on a Monday, Ticketing Services will make arrangements for an armored car pickup.	10/31/2014	Closed. Ticketing added Thursday to the armored car pick-up schedule.	10/6/2014	Mark Koson, Assoc Athletic Dir/Ticket Svcs
2014-08	IT Ticketing	<u>Recommendation 5 - University Required Training</u>	The Director of Ticketing Services should ensure that all staff members, including part-time and student employees, take the University's required annual training.	We concur. All staff (full-time, part-time, students, on-call) will complete the three UNM training classes.	12/31/2014	All employees have completed the required training. Close finding.	2/18/2015	Mark Koson, Assoc Athletic Dir/Ticket Svcs
2014-12	Office of Vice-President for Research	<u>Recommendation 4 - Timely Spending of Start Up Funds</u>	The Provost and the Chancellor for Health Sciences should develop a formal written plan for the use and management of start-up funds awarded to new faculty. Documentation to support the award should address required time limits for use of the funds to ensure that monies awarded are not indefinitely tied up and can be made available to meet other needs when the designated spending timeline has lapsed.	Response from the EVP for Academic Affairs: The EVP for AA will direct the Faculty Contracts Office to ensure that a spending plan for any start up funds is specified in faculty appointment offer letters. The plan should specify a reasonable period of time to fully expend the funds for their intended purpose. Any sums remaining at the end of the specified time period will revert back to the academic unit.  Response from the Chancellor for Health Sciences: Chancellor will direct the Health Sciences Center to incorporate the spending plan of start-up funds in faculty contract appointment letters, specifying a reasonable period of time to fully expend the funds for their intended purpose.	12/31/2014	The Chancellor and Provost offices both sent a memo to all Deans and Directors to revise offer letters to add language pertaining to the period of availability for start-up funds. Internal Audit reviewed the memos sent by the Chancellor and Provost offices and also reviewed copies of offer letters sent to new faculty with the added language to verify implementation.	2/26/2015	Chaouki Tanios Abdallah, Provost; Faculty Contracts Office; HSC Senior Executive Officer for Finance & Administration
2014-12	Office of Vice-President for Research	<u>Recommendation 5 - One-Time F&amp;A awards are not sufficiently documented/supported</u>	The OVPR should document the process for making one time awards from the discretionary pool of F&A funds kept at the OVPR. The process should include the consistent use of the OVPR Funding Request Form already available.	Starting in FY15 the OVPR has required the use of the VPR Funding Request Form to ensure consistent support documentation.	12/31/2014	OVPR implemented the use of a standard request form for F&A one time awards. They provided a list of on-time awards made in FY15 along with the support for the award.	1/27/2015	Michael Dougher, Sr Vice Provost



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Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Recommendation Action	Actual Implementation Date	Responsible Party
2014-03	<u>UNM Law School Student Bar Association</u>	<u>Recommendation 1 - Internal Controls to Prevent External Bank Accounts</u>	UNM School of Law management and staff members should strengthen internal controls to ensure that student organizations do not use off-campus bank accounts if they receive funding from ASUNM, GPSA, Student Fees, or other University funds.	All Law School chartered organization treasurers shall be required to sign a declaration affirming they do not have an outside bank account and are not aware of any outside bank account for their organization. This declaration will be signed during the first week of the fall semester every school year.  The Assistant Dean for Student Services will work with the Law School Registrar to develop a policy on outside accounts for the Law School's Bulletin and Handbook of Policies.	8/31/2014	A law school wide, mandatory Student Organization Training was held August 20, 2014. At this meeting, all student organization officers were informed they must read and sign an attestation that they understand no outside bank accounts are permitted, and that to their knowledge none exist. This document is required and obtained as new clubs charter or as officers change or are elected. The Student Organizations section of the Law School Bulletin and Handbook of Policies has been changed to reflect that outside bank accounts are not permitted. Internal Audit reviewed the list of attending Law School student organizations that attended the training, the attestation document signed by all Law School student organizations, and the revised Bulletin and Handbook of Policies.	2/13/2015	David Herring, Dean
2014-03	<u>UNM Law School Student Bar Association</u>	<u>Recommendation 2 - Approval for Purchases</u>	All purchases made using SBA funds should obtain approval by the Executive Board and should go through UNM's purchasing policies and procedures, and supporting documentation should be maintained.	The Assistant Dean for Student Services will work with the SBA board to instruct them on proper board procedures, voting and recording of agendas, minutes and budgets.  Accounting will monitor SBA accounts and check against the approved budget and known large events planned for SBA in the semester.	8/31/2014	Internal Audit verified that SBA no longer has an off-campus bank account to purchase items that have not been properly approved. In addition, the SBA is preparing a calendar of events, which allows sufficient time to prepare and purchase items needed for their events following purchasing policies and procedures. Internal Audit reviewed supporting documentation for items needed for the annual back-to-school barbecue and noted all purchases for the event were in compliance with purchasing policies and procedures.	2/20/2015	David Herring, Dean
2014-03	<u>UNM Law School Student Bar Association</u>	<u>Recommendation 3 - Internal Controls for Proper Reimbursements</u>	Internal controls should be strengthened to ensure reimbursements are not received for charges that have already been paid by other funding sources.	Law School will ban outside bank accounts as detailed in Recommendation #1.  Law School Accounting will monitor reimbursement requests to ensure that reimbursements are not received for charges already paid by other funding sources.	10/31/2014	The Law School developed internal controls to prevent the use of external bank accounts, which decreases the risk of improper reimbursements. In addition, the Law School accounting office, along with student services communicate on every reimbursement request that is made by the students to ensure they are aware of how each item was paid (personal funds or UNM P-Card). Internal Audit reviewed the attestation signed by the SBA Treasurer certifying he is not aware of off-campus bank accounts. In addition, Internal Audit reviewed the memo sent to Law School accounting indicating that they would communicate and review every reimbursement request to ensure expenses were not made by another UNM funding source.	10/14/2014	David Herring, Dean
2014-03	<u>UNM Law School Student Bar Association</u>	<u>Recommendation 4 - Contact Internal Audit to Initiate Investigation of Suspected Improper Activity</u>	In the event that improper activity is suspected within a department and/or organization, Law School management should immediately contact Internal Audit.	Law School management will be trained on proper reporting procedures.	12/31/2014	On November 25, 2014 a training was provided to Law School senior administrative staff and associate deans regarding identifying fraud and misconduct, and the process for reporting it to Internal Audit.	2/13/2015	David Herring, Dean

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Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Recommendation Action	Actual Implementation Date	Responsible Party
2014-03	<u>UNM Law School Student Bar Association</u>	<u>Recommendation 6 - Track, Monitor, and Safeguard Apparel Inventory</u>	Apparel inventory should be adequately safeguarded to prevent theft and/or misappropriation. Internal controls should be developed by the SBA officers to track and monitor apparel inventory.	Assistant Dean for Student Services will meet with SBA officers to develop and implement internal controls to track and monitor apparel and merchandise inventory.	10/10/2014	The SBA implemented procedures to track and safeguard its apparel inventory. An initial inventory is taken at the beginning of the year when apparel is purchased for resale. Two SBA members count the initial inventory and list the quantities by class on a spreadsheet. The spreadsheet is updated on a regular basis as inventories are sold. In addition, inventory counts are performed on a monthly basis and reconciled to inventory on hand recorded on the spreadsheet. Procedures have also been implemented to safeguard apparel. The storage room where apparel is stored is now locked at all times and only SBA Executive Board members have a key with access to the room. Internal Audit attempted to open the storage room door where the apparel is stored and noted the door was locked.	2/26/2015	David Herring, Dean
2014-03	<u>UNM Law School Student Bar Association</u>	<u>Recommendation 8 - SBA Faculty/Staff Advisors Should Attend SBA Board Meetings</u>	The SBA faculty/staff advisors should provide adequate supervision by attending regular Board meetings as required by the UNM Student Organization Handbook.	Faculty/staff advisors will be informed that they are required to provide adequate supervision by attending regular Board meetings at least once every quarter.  Faculty/staff advisors will have informal meetings with board members and follow up with emails to officers.  A signature line for faculty/staff advisors will be added to club meeting minutes. Faculty/staff advisors will be expected to review the minutes and monitor.	8/31/2014	Assistant Dean for Student Services presented these requirements to faculty at the September 9th faculty meeting. Faculty appear to understand the requirement and the administration will monitor compliance.	2/13/2015	David Herring, Dean
2014-03	<u>UNM Law School Student Bar Association</u>	<u>Recommendation 9 - Mandatory Cash Management Training</u>	SBA faculty/staff advisors should require SBA officers handling cash to take Cash Management training. In addition, all UNM Law School staff that handle cash, and their direct supervisors, should also take Cash Management training.	Faculty/staff advisors will require SBA officers handling cash to take Cash Management training.  All law school faculty, staff and direct supervisors who handle cash will take Cash Management training.	11/30/2014	The Law School provided a cash management training course on October 27, 2014. All Law School student organization treasurers were required to attend the training. In addition, the Law School made all staff that handle cash take the online cash management training. Internal Audit reviewed the power point slides for the training, the listing of student organization treasurers that attended the training, and reviewed Learning Central to verify that Law School staff took the online training.	2/13/2015	David Herring, Dean
2014-03	<u>UNM Law School Student Bar Association</u>	<u>Recommendation 12 - Prepare Annual Budgets at the Beginning of Each Academic Year</u>	Formal SBA budgets should be prepared and approved by the SBA Executive Board at the beginning of the academic year and should be posted throughout the school year. Budgeted and non-budgeted expenditures should be approved by the SBA Executive Board and posted to the budget.	Assistant Dean for Student Services will inform SBA officers that Formal SBA budgets must be prepared and approved by the Executive Board at the beginning of the academic year and must be posted throughout the school year. This will be done through the annual student organization officer training.  Assistant Dean for Student Services will inform SBA officers that all budgeted and nonbudgeted expenditures must be approved by the Executive Board and posted to the budget. This will be done through the annual student organization officer training.	10/10/2014	For FY 2014, the SBA prepared a budget, which was approved by the SBA Executive Board. In addition, the Treasurer prepares a revenue and expense report on a monthly basis. Internal Audit reviewed the approved budget for FY 2014 and the revenue and expense report as of June 30, 2014.	2/26/2015	David Herring, Dean

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Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Recommendation Action	Actual Implementation Date	Responsible Party
2014-10	<u>UNM Children's Campus</u>	<u>Recommendation 1 - Wait List Administration</u>	The UNMCC should expedite installation of the Bumble-Bee waitlist tracking system to better facilitate more effective reporting and management of the UNMCC waitlists.	The UNM Children's Campus agrees with the recommendation to expedite installation of the BumbleBee wait list tracking system. Minor modifications will be made to the BumbleBee parent interface. Training will be provided to Children's Campus staff responsible for wait list maintenance. The link will be published to the Children's Campus website to begin collection of new wait list data. Existing wait list data will be input into the BumbleBee wait list tracking system.	12/31/2014	UNMCC has demonstrated that they have installed and are using Bumble-Bee software to track their wait lists and parent applications.	12/11/2014	Daniela Marysol Baca,Dir,Child Care Center
2014-10	<u>UNM Children's Campus</u>	<u>Recommendation 3 - Accounts Receivable Reconciliation</u>	The UNMCC should obtain a Banner Authorization Request for MyReports and work with the Bursar's office to develop and implement a methodology for monthly reconciliation of family accounts receivable.	The UNM Children's Campus agrees with the recommendation to obtain Banner Authorization for MyReports and to work with the Bursar's office to complete monthly reconciliation of family accounts receivable. Banner Authorization for MyReports was received effective September 29, 2014. The Bursar's office has provided the Children's Campus with MyReports forms including AR Summary for Childcare; Transactions per Feed Document; Childcare Charges by Academic Period; and Childcare Charges by ID. MyReports forms are being used to complete a monthly reconciliation of Children's Campus family accounts receivable. Families with outstanding Childcare balances are being notified and required to submit a plan for payment to avoid discontinuation of services.	10/31/2014	UNMCC developed standard operating procedures and demonstrated that they are performing monthly account reconciliations.	12/11/2014	Daniela Marysol Baca,Dir,Child Care Center
2014-10	<u>UNM Children's Campus</u>	<u>Recommendation 4 - Cash Handling Training</u>	UNMCC should work with the Office of the Student Affairs and the Human Resources Department to ensure that appropriate staff members take the proper University cash handling training.	The Children's Campus agrees with the recommendation to work with the Office of Student Affairs and the Human Resources Department to ensure that appropriate staff members take the proper University cash handling training. Individuals requiring cash handling training will be identified. Cash handling training will be added to Learning Central Learning Plans for identified individuals. Individuals will be notified of the required training and corresponding deadline for completion. Follow-up will be completed to ensure individuals have completed the required training by the specified deadline.	12/31/2014	UNMCC had all employees take cash handling training and thus demonstrated compliance with UNM cash management training course policy.	12/11/2014	Daniela Marysol Baca,Dir,Child Care Center

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Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Recommendation Action	Actual Implementation Date	Responsible Party
2014-10	UNM Children's Campus	<u>Recommendation 5 - Internal Control Weaknesses</u>	UNMCC should review its business processes to address internal control weaknesses. UNMCC should also ensure that P-Card holders are fully trained, and that the department adheres to all UNM P-Card policies.	The Children's Campus agrees with the recommendation to review its business processes to address internal control weaknesses. UNMCC should also ensure that P-Card holders are fully trained, and that the department adheres to all UNM P-Card policies. A review of Children's Campus departmental P-Card procedures will be conducted to determine internal control weaknesses. Internal control weaknesses will be addressed. Children's Campus departmental P-Card procedures will be modified and implemented. All P-Card holders will continue to complete required P-Card training as outlined by the UNM Purchasing Department. All P-Card holders will stay abreast of all updates to University Purchasing Guidelines for P-Card use.	12/31/2014	UNMCC developed internal control policies and demonstrated compliance with UNM P-Card policies and procedures, money lists and deposits, separation of duties, and conflicts of interests.	12/11/2014	Daniela Marysol Baca,Dir,Child Care Center
2014-10	UNM Children's Campus	<u>Recommendation 6 - Background Checks</u>	The UNM Human Resources department should work with UNMCC to review the background check process, correct issues that are preventing or delaying the timely completion of the background checks, and improve documentation of CYFD clearance letters in the UNMCC employee files.	A standard operating procedure (SOP) has been developed by UNM HR in collaboration with the UNMCC outlining the background check process. This SOP will ensure both parties, UNMCC and UNM HR are aware of the process and the respective roles of each. The SOP will be implemented immediately; however, both parties have agreed to use the next 60 days as an evaluation/test period for the SOP. During this time,UNMCC will provide feedback on the effectiveness of the SOP and UNM HR will manually monitor and track fingerprint requests to ensure timely completion of the background checks.	12/1/2014	HR Implemented finding by 1) developing a Standard Operating Procedure in October 2014, and then by testing the process in January of 2015. The SOP is working as intended and the issued is deemed implemented.	2/5/2015	Sandra DuBrock,Mgr,HR Client Services; Dorothy Terese Anderson
2014-10	UNM Children's Campus	<u>Recommendation 8 - Required UNM Training</u>	The Director of the UNM Children's Campus should work with the Office of the Provost and the Human Resources Department to ensure that all faculty and staff take the University's required annual training.	The Children's Campus agrees with the recommendation that the Director of the UNM Children's Campus work with the Office of the Provost and the Human Resources Department to ensure that all staff takes the University's required annual training. All Children's Campus staff including student employees, temporary employees, and regular employees will be required to complete all University annual trainings by the required internal deadlines.	12/31/2014	UNM Children's Campus achieved 100% compliance on mandatory training of employees for the calendar year 2014.	2/11/2015	Daniela Marysol Baca,Dir,Child Care Center
2014-15	CASAA Time Abuse	<u>Recommendation 1 - Petty Cash Concerns</u>	The Director of CASAA should: a. Require the Fund Custodians to reconcile the Petty Cash Funds once a week. b. Require the Fund Custodians to sign all Petty Cash Reconciliation forms.	I agree with this audit finding. Planned corrective actions: (1) instruct both custodians to reconcile Petty Cash Funds once a week, and to sign all Petty Cash Reconciliation forms; (2) instruct the fund custodians to create a log of weekly reconciliations, and submit these to the CASAA Director for review on a monthly basis; (3) CASAA Director conduct random checks of the Petty Cash reconciliation forms to verify signatures.	11/3/2014	CASAA is reconciling both Petty Cash funds weekly and is signing all Petty Cash forms.	3/5/2015	Barbara McCrady,Director

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Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Recommendation Action	Actual Implementation Date	Responsible Party
2014-15	CASAA Time Abuse	<u>Recommendation 3 - Inaccurate Rental Car Reimbursement Concerns</u>	The Director of CASAA should: a. Ensure that CASAA staff use rental cars only for necessary and allowable business expenses. b. Ensure that CASAA staff thoroughly explain their travel claims and attach original itemized receipts and supporting documentation. c. Ensure that a rental car log is prepared to identify which traveler drove which car.	I agree with this audit finding. Corrective actions include: (a) development of a detailed written procedure for documentation of rental car usage when multiple cars are charged to one P-card; (b) development of a procedure for cross-review of all travel reimbursement requests between the Manager of Administrative Operations and the Program Operations Director; (c) development of a rental car log form that clearly allocates rental cars to drivers.	11/6/2014	CASAA has drafted procedures for rental car usage when multiple cars are assigned to one P-Card, implemented procedures or other documentation or cross-review of travel reimbursement requests, and has implemented a rental car log.	3/5/2015	Barbara McCrady, Director
2014-15	CASAA Time Abuse	<u>Recommendation 5 - Personal Use of University Property Concerns</u>	The Director of CASAA should: a. Ensure that the Professor of Health Communication/Senior Scientist immediately removes all UNM email, addresses, and phone numbers from the New Mexico State Regulation & Licensing Department website, and the Way to Serve server permits. b. Address personnel issues and appropriate disciplinary actions for the Professor of Health Communication/Senior Scientist in accordance with C07: Faculty Disciplinary Policy of the Faculty Handbook.	I do not agree fully with this audit finding. The Professor of Health Communication/Senior Scientist was conducting NIH-funded research on the effectiveness of the on-line alcoholic beverage server training program, and server trainer certificates were issued by the New Mexico State Regulation & Licensing Department to individuals who completed the training as part of the research grant. These certificates appropriately listed UNM/CASAA contact information as they were related to the research grant. However, during the same time period server training also was provided through Wedge Communication, and the Professor of Health Communications/Senior Scientist did not take any steps to clearly discriminate server trainings conducted through Wedge Communication from server trainings conducted as part of his NIH-funded research. I agree that he/she should not have had any UNM contact information on server training certificates for training provided through Wedge Communication. All NIH-funded research training was concluded by 8-31-14, so at that point all references to UNM should have been removed.	12/2/2014	CASAA has removed all references to UNM from New Mexico State Regulation and Licensing Department's webpage. The CASAA director had had a performance discussion with the Professor of Health Communication/Senior Scientist.	3/5/2015	Barbara McCrady, Director

**Follow Up Report - Recommendation Pending (April 2015 Open Session)**

Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Last Status Update	Actual Implementation Date	Responsible Party
2013-29	<u>Review of College of Education Operations</u>	<u>Recommendation 11 - Required University Training</u>	The Dean of the College of Education should work with the Office of the Provost and the Human Resources Department to ensure that all faculty and staff take the University's required annual training.	The new dean with the help of the COE Academic Operations Officer will request regular reports from HR of mandatory training completion statistics and then implement regular communications with Faculty and Staff to ensure that all faculty and staff comply with the required annual University training. Consequences will be implemented for those faculty and staff within the COE that do not comply.	12/31/2014	Fall 2014 - COE sent College-wide correspondence notifying faculty and staff of training requirements. Email and phone call with Susan R 1/27/2015 - COE follows the UNM deadline for required training which is 1/31/2015. IA to run report and analysis to evaluate compliance. 2/17/2015 – Internal Audit performed an analysis on faculty and staff compliance with mandatory training policy and found that only 47% faculty and 86% staff took the 2014 training by the 1/31/2015 deadline; therefore, the finding will remain past due until the 2015 training is verified.		Salvador Hector Ochoa, Dean; Susan Rhymer, Finance Officer
2013-10	<u>P-Card</u>	<u>Implementation of new system to record and track hazardous chemicals and radioactive materials</u>	The Purchasing department and SRS should implement a system which effectively records the purchase of hazardous materials and radioactive materials, and provides all relevant information to SRS for tracking.	SRS purchased the Enterprise Re-Agent Manager (ERM) software and is implementing this software in five UNM Departments effective August 2013. This ERM software will replace ICID. ERM is a SciQuest Product that communicates with Banner. Purchasing and SRS are working as a team to populate the ERM software with data from Chemical and Research Laboratory Supplies (CRLS). SRS established a main campus Chemical and Laboratory Safety Committee and is working with the committee to attempt to implement ERM campus-wide. SRS needs the support of UNM management to promulgate policies to require the use of ERM software and the inventory of chemical and radioactive materials.	7/1/2015			Carla Domenici, Int Dir, Safety & Risk Services
2013-11	<u>UNM Medical Group</u>	<u>Recommendation 2 - Research Park Act</u>	The University Office of Government and Community Relations should work with UNMMG management to propose necessary amendments to University Research Park Act during the 2015 sixty day legislative session.	The UNM Office of Government and Community Relations will work with the HSC Leadership, Council of the University Presidents to propose legislative amendments to the University Research Park and Economic Development Act during the 2015 legislative session.	6/14/2015			Connie Beimer, Government Relations officer
2013-01	<u>Review of College of Arts and Sciences Operations</u>	<u>Implementation of Process to Track Research Activities</u>	A process should be implemented that enables colleges to effectively track and monitor time that faculty members spend on research activities to help management determine if faculty members are meeting academic load requirements and workload guidelines.	To track faculty research activities, an RFP was created for the purchase of a scholarly productivity subscription service, which will have the ability to track faculty research activities. The products of three vendors responding to the RFP are being evaluated Fall 2014, and a decision on purchase is expected to be made by January 1, 2015. Actual implementation of the software is expected to be completed by December 15, 2015.	12/15/2015	Initial plans to implement a process for tracking faculty research could not be completed due to budget restraints for purchasing software for scholarly productivity subscription service, which has the ability to track faculty research activities. Instead, the Provost office will pull faculty research activities data together from available public sources such as Google Scholar.		Greg Heileman, Associate Provost; Chaouki Tanios Abdallah
2013-15	<u>Safeguards for Protecting Private Data- Service Providers and Contractors</u>	<u>Recommendation 1 - UNM Information Security Program</u>	The CIO needs to implement the UNM Information Security Program University-wide.	Concur. The CIO will continue implementation of the Information Security Program with the advisory structure approved by the President. The CIO submitted a recommendation to the IT Governance Council UNM Policy 2560 (President, EVPs, and Chancellor) to create a University wide security council. The existing and operational UNM Information Security Program will be assigned to the appropriate advisory structure.	6/30/2015	IT Executive Governance has been considering options to revise the advisory and governance structures. Advice from the Kurt Salmon Information Technology consultation anticipated this quarter may inform those options and the decision.		Gilbert Gonzales, Chief Information Officer

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Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Last Status Update	Actual Implementation Date	Responsible Party
2013-15	<u>Safeguards for Protecting Private Data-Service Providers and Contractors</u>	<u>Recommendation 2 - University Information Security Function</u>	The President should give the CIO the explicit authority and responsibility to manage information security University-wide, including the decentralized computing services. The President should also ensure that the CIO has the budget to develop, implement, and enforce security policies.	Concur. The President's Office is working with the EVP for Administration, the Provost and EVP for Academic Affairs, and the Chancellor for Health Sciences on the appointment of an appropriate advisory structure. We will work with the EVP for Administration and the CIO to evaluate whether this office has sufficient budget and authority to develop, implement, and enforce security policies. The Information Security Office, through the CIO, has established a security management reporting mechanism and makes quarterly reports to senior management on the status of information security at UNM.	7/31/2015	UNM has engaged an international management consulting firm, to perform a high-level review of all main campus IT services, departmental and enterprise. The project will include a document review, interviews, and a campus-wide survey. Recommendations will focus on: a) Operational efficiencies, b) "Common Good" IT services, and c) UNM IT Governance. The office of the CIO will facilitate the review along with a small group of executive stakeholders. The review is anticipated to start in the immediate future and to be completed this calendar year. Recommendations will be received in FY2015.		Gilbert Gonzales, Chief Information Officer
2013-29	<u>Review of College of Education Operations</u>	<u>Recommendation 2 - Evaluate endowment expenditures and award activity</u>	The College, including its scholarship committee, should evaluate endowment expenditure and award activity to ensure endowment spending distributions and available reserves are optimally utilized, and to communicate availability of scholarships to chairs and students. In addition, the College should work with the UNM Foundation to lift certain donor imposed restrictions that are hard to meet by COE scholarship applicants.	The College will analyze existing scholarships to maximize awards, including partnering with the UNM Foundation to ease donor-imposed restrictions where appropriate. This should be done in preparation for the FY16 award cycle which culminates in April, 2015.	5/1/2015			Salvador Hector Ochoa, Dean; Susan Rhymer, Finance Officer
2013-29	<u>Review of College of Education Operations</u>	<u>Recommendation 3 - Time to acquire a degree at UNM COE</u>	The Dean of the College of Education should work with Office of the Provost to ensure any redesign of the College addresses the Provost's recommendation for reducing minimum credit hours for degree programs.	A college-wide Curriculum Review has been underway since 2013; one objective of the review is to reduce the required number of credit hours in each bachelor degree program to 120 hours, or close to it. The NM PED requires 57 credit hours in core courses for teacher preparation programs. The PED is reviewing this requirement. The Early Childhood Education program (ECE) is well under way to restructuring the program into a 5 year degree program, and in compliance with regulatory and accreditation agencies.	6/30/2016			Salvador Hector Ochoa, Dean
2013-29	<u>Review of College of Education Operations</u>	<u>Recommendation 4 - Excess student credit hours</u>	The Provost should work with the Interim Dean of the College to become more involved in prospective COE enrollees earlier in their college career, and endeavor to provide critical advisement to COE students as early in the process as possible. The Provost office should also work with the College to determine if excessive student credit hours are occurring before, or after, being admitted to the College.	Advisors will be shifted from University College to the College of Education so that the COE may take on the responsibility for advising their students as early in the process as possible. The departments are reviewing through the Dean their curricula and modifying it in the hope of reducing excess student credit hour accumulation. There is an impediment related to NM teacher licensure that we cannot address without collaboration with PED. Many of the excess credit hours are attributable to their requirements.	8/31/2015	Received a revised status update with the new Dean's estimated completion date of 8/31/2015.		Salvador Hector Ochoa, Dean; Greg Heileman, Associate Provost
2013-29	<u>Review of College of Education Operations</u>	<u>Recommendation 5 - Data Analysis Issue</u>	The Provost's Office and the College should explore data reporting alternatives to the first-time fall freshmen data reporting. Internally, the University should track spring semester freshman, summer session freshman, and transfer student starts so that a more complete picture of individual college's metrics can be obtained.	The Academic Affairs office accepts responsibility and will implement the recommendation. We will continue to work to create metrics for these reports (already underway), and spreadsheets of data in Excel format for displaying them in an on-line format that departments can access directly.	5/31/2015	3/12/2015 According to Provost a data tracking system for entire University has been implemented effective February 2015. They are in the process of validating data and will have presentation to the next Academic/Student Affairs committee meeting in April. The implementation was extended to May 31, 2015.		Greg Heileman, Associate Provost

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Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Last Status Update	Actual Implementation Date	Responsible Party
2013-29	<a href="#">Review of College of Education Operations</a>	<a href="#">Recommendation 6 - Residency School</a>	The Dean of the COE and the Provost office should consider developing a College of Education Teacher Preparation Residency School. Such a residency school could provide COE students with hands on training throughout their teacher preparation experience.	The College of Education will consider the Teacher Preparation Residency School as a part of the continuing re-imagining efforts and future direction of the College.	8/31/2016			Salvador Hector Ochoa, Dean
2013-29	<a href="#">Review of College of Education Operations</a>	<a href="#">Recommendation 7- Field Services Assessments</a>	The College should consider establishing a coordinated clinical field service assessment program to effectively provide feedback while teacher candidates are conducting field service and to follow up with them after graduation. Consider changes in programs to include student field service experience earlier in the program/student experience and establish a program to assess the effectiveness of traditional field service.	The College established a Field Services Portal (the first of its kind in NM) for feedback between teacher candidates and supervisors during the entire field service experience. This portal undergoes continuous improvement to facilitate and enhance feedback and communication with candidates, staff and supervisors. The College also utilizes the TK-20 assessment system to collect observations on students' learning and can be accessed by our alumni to store their teaching and learning dossiers.  In addition, the Center for Education Policy Research is conducting a separate program evaluation of the Co-Teaching Collaborative model as part of its two-year pilot program (FY14 and FY15). FY14 is the first year for which this type of data is being gathered.	8/31/2016	New Dean of COE requested additional time to implement since he just started at UNM on 7/15/2014. Implementation date was extended to 8/31/2016.		Salvador Hector Ochoa, Dean
2013-29	<a href="#">Review of College of Education Operations</a>	<a href="#">Recommendation 8 - Expand Field Service to Rural NM</a>	The Dean of the COE should work with the Provost's Office to develop a permanent funding model for field service, and explore expansion of the Co-Teaching Collaborative School model within the Teacher Education Department, to other departments within the College, and to rural areas of New Mexico.	The new COE Dean and the Provost will explore funding possibilities for Field Services, and further examine possibilities for expanding the Co-Teaching Collaborative School model in Teacher Education and other areas of the college. Rural areas of New Mexico will also be included.	8/31/2016			Salvador Hector Ochoa, Dean
2013-29	<a href="#">Review of College of Education Operations</a>	<a href="#">Recommendation 9 - UNM School Turnaround Program</a>	The Dean of the College of Education should work with the Provost's Office and the Office of Government and Community Relations to pursue options for funding for the College's school turnaround programs, including but not limited to: the New Mexico legislature, the U.S. Department of Education, NM PED, private foundations, and collective funding initiatives in the school districts.	Collaboration is underway with other New Mexico institutions of higher education, including New Mexico State University.	6/30/2015	New Dean of COE requested additional time to implement since he just started at UNM on 7/15/2014. Implementation date was extended from 5/31/2014 to 06/30/2015.		Salvador Hector Ochoa, Dean



**Follow Up Report - Recommendation Pending (April 2015 Open Session)**

Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Last Status Update	Actual Implementation Date	Responsible Party
2014-04	Clery Act	<u>Recommendation 1 - Organizational Structure and Administrative Function</u>	A. The University President should consider establishing the position of Clery Coordinator whose sole responsibility is Clery Act compliance and oversight. The Clery Coordinator should be empowered to enforce Clery Act compliance. B. The University President should establish a Clery Act Compliance Committee with appropriate representation from the campus community. Using the best practices provided earlier, the committee should be tasked with developing an organizational structure for compliance with, coordination, and communication of Clery Act requirements. C. The Clery Coordinator working with the Clery Act Compliance Committee should develop a formal UAPPM Clery Act Compliance policy. D. The University President should notify the entire campus community that Clery Act compliance is mandatory, and all are responsible for knowing their roles and responsibilities for reporting and keeping the campus safe.	A. An Interim Clery Coordinator at UNMPD has been assigned, effective August 1, 2014 for FY15. The Director of Office of Equal Opportunity (OEO) will develop a budget request for FY16 that includes Clery reporting to OEO by June 30, 2015. The Interim Coordinator will work with the UNM compliance office and the UNM policy office to develop policies and procedures (by June 30, 2015) in consultation with the Clery Compliance Steering Committee. B. A Clery Act Steering Committee was appointed August 1, 2014. C. The Steering Committee will work with the UNM policy office to develop a policy by June 30, 2015. A meeting was held with all individuals on the Audit "Clery Organization Chart" on May 7th in the President's conference room. Each of those supervisors agreed to communicate to their direct reports. In addition, after (C.) is completed, the policy will be included in the President's communication by June 30, 2015. The University President will issue a memo to notify the entire campus community that Clery Act compliance is mandatory- to be completed by September 15, 2014.	6/30/2015			Amy Wohlert, Chief Of Staff/Office Of Pres
2014-04	Clery Act	<u>Recommendation 2 - Geography - Clery Act Locations</u>	A. The University President must require the Clery Coordinator to assign the responsibility for determining the University's Clery geography. B. The University President should require that the Clery Coordinator ensure development of written policies and procedures that include adequate internal controls to accurately define, document, and update the Clery geography annually.	A. Delegated to the Provost's Office from the President's Office via email communication on August 12, 2014. B. Delegated to the Provost's Office. The Interim Clery Coordinator will work with the Provost's office and the UNM policy office to develop written policies by June 30, 2015.	6/30/2015	2/17/15 Per UNMPD, Clery Geography will take at least a year from this date to obtain.		Amy Wohlert, Chief Of Staff/Office Of Pres
2014-04	Clery Act	<u>Recommendation 3 - Geography - Clery Act Locations</u>	The EVP for Academic Affairs/Provost should require a review of Policy 2710 UAPP Study Abroad Health and Safety to incorporate any requirements of the Clery Act.	The Provost will ask Global Education Office Director and Policy Office Manager to draft proposed revisions to UAPP 2710 and to subsequently initiate policy comment and approval process.	5/15/2015			Melissa Vargas, Strategic Planner
2014-04	Clery Act	<u>Recommendation 4 - Campus Security Authorities</u>	The University President or Clery Coordinator should designate CSAs, the Clery Coordinator should incorporate CSA policy into Clery Act Policy, the policy should be included in the Student Activities Handbook, and the CSA should sign signifying awareness of policy.	The Interim Clery Coordinator will gather a confirmed response from each CSA for reporting and will obtain a signed form from each CSA stating they are aware of their responsibilities. The OEO website will include this list of CSAs by June 30, 2015. The policy developed will be included and coordinated in the Student Organization Handbook - to be completed by June 30, 2015.	6/30/2015			Amy Wohlert, Chief Of Staff/Office Of Pres
2014-04	Clery Act	<u>Recommendation 5 - Campus Security Authorities</u>	The EVP for Academic Affairs/Provost should discuss with the Dean of Students inclusion of CSA information in the Pathfinder and discuss with the Faculty Senate President inclusion of CSA roles and responsibilities in the Faculty Handbook.	The Provost will direct the VP for Student Affairs and Dean of Students to add the CSA info to the Pathfinder in consultation with the Clery Coordinator. Discussions will happen with the Faculty Senate Policy committee relative to recommendation that roles and responsibilities governing CSAs operating within Academic/Student Affairs Units (Deans, Chairs, Advisors, etc.) should be covered in a universal policy in UAPP, in the Faculty Handbook, or both. Also, whether the Faculty Handbook should outline faculty reporting responsibility related to the Clery Act.	5/15/2015			Melissa Vargas, Strategic Planner

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Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Last Status Update	Actual Implementation Date	Responsible Party
2014-04	Clery Act	<u>Recommendation 6 - Validation of Crime and Disciplinary Statistics</u>	The University President should require the Clery Coordinator to develop written policies and procedures, including adequate internal controls for documenting, tracking, and verifying and reporting crimes and disciplinary actions for all University reporting departments. Record retention requirements should also be included in the written policies and procedures.	The Interim Clery Coordinator will work with the UNM Policy Office to develop a policy on double counting and reporting. To be completed by June 30, 2015.	6/30/2015			Amy Wohlert, Chief Of Staff/Office Of Pres
2014-04	Clery Act	<u>Recommendation 7 - Validation of Crime and Disciplinary Statistics</u>	The EVP for Finance and Administration should instruct the UNMPD Chief to develop adequate training for all housing facility personnel, and the Dean of Students' Conduct Officer to ensure adequate tracking and documenting of incidents.	The Lieutenant at UNMPD is developing a lesson plan that will be provided to all housing facility personnel and the Dean of Students' Conduct Officer on tracking and documenting reported incidents. The training will be accessible through the UNM Learning Central which will provide greater outreach to UNM personnel.	5/31/2015	2/16/15 - The Interim Clery Coordinator informed that the training is available and provided some lists of persons that have completed the training; however, they are not able to confirm that housing facility personnel that should take the training on a semester basis is reconciled to the list of persons that have taken the training. Informed the VP for Administration that he may need to request an extension.		Kevin McCabe, Dir, Univ Scty/Chief of Police
2014-04	Clery Act	<u>Recommendation 8 - Validation of Crime and Disciplinary Statistics</u>	The Provost should require that all student housing facility personnel responsible for Clery crime reporting and disciplinary incidents, and the Dean of Students' Student Conduct Officer: meet monthly with the UNMPD to reconcile statistics; receive proper training from UNMPD; and maintain adequate documentation to substantiate disciplinary statistics submitted to UNMPD and submitted to ED. The Provost should also require all Clery incidents occurring at student housing facilities be coordinated by the Dean of Students' Student Conduct Officer. Student housing facilities must still maintain adequate documentation for statistics submitted to UNMPD.	The Provost will direct the VP for Student Affairs, AVP for Student Life, and the Student Conduct Officer to work with the Clery Coordinator and ASFSR officials to develop an implementation plan to meet these requirements.	5/15/2015			Melissa Vargas, Strategic Planner
2014-04	Clery Act	<u>Recommendation 9 - Validation of Crime and Disciplinary Statistics</u>	The Chancellor for Health Sciences should inform the Chief Executive Officer for Health Systems to require that the Chief of Security: meet monthly with the UNMPD to reconcile statistics; receive proper training from UNMPD on how to categorize a Clery crime; and adequately document the outcome of the incident.	The UNMH Chief of Security is working with UNMPD for Clery reporting and will be meeting quarterly to reconcile reports. As for the training, UNMPD is working on developing training that will be available via learning central.	6/30/2015	3/5/15 - UNMPD provided support for annual reconciliation of 2013 crime statistics, UNMPD reports, and the HSC Security Officer's list of reported crimes. Review of the reconciliation revealed deficiencies in the reconciliation process. There was one item reported by the HSC Security Officer that UNMPD did not have a report for; upon request for supporting information, the HSC Security Officer informed that none could be found. At that point, the crime was dropped from further review/reconciliation/reporting. IA informed UNMPD that the reconciliation process was not thorough and that the annual reconciliation process needs to be documented. At this time the due date has been extended to 6/30/15. IA will review the 2014 HSC to UNMPD crime report reconciliation and verify that the process is formally documented.		Kevin McCabe, Dir, Univ Scty/Chief of Police

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Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Last Status Update	Actual Implementation Date	Responsible Party
2014-04	Clery Act	<u>Recommendation 12 - ASFSR Policy Statement</u>	The Provost should instruct the Dean of Students to update the disciplinary procedures to add "requests for the outcome of disciplinary proceedings for crimes of violence or non-forcible sexual offences must be in writing."	The Provost will direct the VP for Student Affairs and the Dean of Students to update relevant policies.	5/15/2015			Melissa Vargas, Strategic Planner
2014-04	Clery Act	<u>Recommendation 14 - Missing Student</u>	A. The EVP for Academic Affairs/Provost should publish the missing student policy, B. require UNM Residence Life & Student Housing to implement adequate internal controls and access to missing student contact, and C. require Casas de Rio and Lobo Village to receive training on missing student requirements.	A. The Provost will send a memo to VP for Student Affairs and Dean of Students to write a policy (if it does not already exist) and to publish it in a prominent place. B. The Provost will send a memo to the VP for Student Affairs and AVP for Student Life to meet these directives. C. The Provost will send a memo to VP for Student Affairs and AVP for Student Life to meet these directives.	5/15/2015			Melissa Vargas, Strategic Planner
2014-04	Clery Act	<u>Recommendation 15A Emergency Evacuation Plan</u>	The EVP for Finance and Administration should require that the Director of SRS complete the annual Campus-wide evacuation plan, communicate it to the Emergency Operations Committee (EOC), and test it annually. The EVP for Finance and Administration should require the Director of SRS have a comprehensive set of evacuation plans for every building on campus, review campus structure yearly to identify new buildings, and ensure that those buildings have an adequate evacuation plan.	Evacuation maps will be posted by April 30, 2015. Campus evacuations/fire drills will be organized and completed by December 31, 2015. SRS will be working to organize and implement fire drills for all buildings, including branch and satellite campuses, to insure that designated evacuation procedures are being followed. This should include timely and complete evacuation following the correct route to the designated muster point. SRS suggests that the task of evacuating every building on campus should be re-directed to UNM PD and EOC. SRS can support this effort in its role as an occupational safety partner, but it is not equipped to evacuate the campus for all situations. SRS has initiated the design and posting of evacuation plans in all buildings. SRS will strive to complete this project by the Target Completion Date.  SRS is not currently staffed or trained to prepare or to lead the development of a campus-wide evacuation plan. SRS could, with the appropriate support and funding, hire an individual with the required background to lead this effort. Nonetheless, the preparation of campus-wide evacuation plans would require specialized assistance from vendors/contractors.	3/31/2015	Auditee informed they do not agree with the recommendation and refute that Clery Act requires a campus wide evacuation. They requested a six week extension so that University Counsel can submit a legal opinion.		Carla Domenici, Int Dir, Safety & Risk Services

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Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Last Status Update	Actual Implementation Date	Responsible Party
2014-04	Clery Act	<u>Recommendation - 15B Emergency Evacuation Plan</u>	The Chancellor for Health Sciences should require the Chair of Emergency Medicine to instruct the Emergency Manager to communicate Emergency Response procedures annually to students, staff and faculty.	We met with the Employee and Occupational Development office of the UNM Human Resources Department to discuss the inclusion of Emergency Response Procedures in an annual training format. Using the Learning Central platform and the Basic Annual Safety Training (BAST) model, we feel that this would be the best way to deliver annual training and to quantify those efforts. We are meeting on August 13 with the Safety and Risk Services Department to assess their willingness to add these procedures to their already required BAST. This would be the most efficient way for us to implement this requirement for Staff and Faculty, with an implementation date of January 1, 2015.  Students are not in the Learning Central platform, and could not be addressed in this manner. We believe that the Provost's Office should determine how to push this information out to them. We might suggest, however, that some type of "banner" be added to my.unm.edu which would require students upon their first login to acknowledge Emergency Response Procedures similar to a "Terms of Service" agreement.	6/30/2015	2/26/15 - Received documentation from the Emergency Manager to support that faculty and staff are being notified of Emergency Response procedures. The Basic Annual Safety Training (BAST) PowerPoint presentation was updated to include Emergency Response procedures. The BAST is required annually by all UNM staff and faculty. Per the auditee response, the Provost's Office was the better contact to ensure that students are informed of the Emergency Response procedures. 3/12/2015 - According to the Provost, the University is exploring cost effective solutions to provide and track training to entire university community (Faculty, Staff, Student, etc.) through a Banner module rather than Learning Central due to cost constraint. HR is preparing a cost estimate and time line of implementation to address training requirements (Clery, title IX and University). Implementation date was extended to 6/30/2015.		Byron Edward Piatt, University Emergency Manager; Melissa Vargas, Strategic Planner
2014-04	Clery Act	<u>Recommendation 16 - Fire Drills</u>	The EVP for Finance and Administration should instruct the Director of SRS to work with UNM Residence Life and Student Housing, Casas del Rio, and Lobo Village to ensure students are educated on safe and proper evacuation procedures. The Director of SRS should monitor all housing facilities to ensure facility managers are conducting required fire drills.	SRS will ensure that students are thoroughly educated on safe and proper evacuation procedures. SRS will continue to organize fire drills in cooperation with facility managers. SRS will work with the property managers for Casas del Rio and Lobo Village to collect their statistics and documentation for submission. SRS met with the Regional Vice President for American Campus Communities in March 2014 and was informed that the company would conduct fire drills and maintain documentation. It was agreed that SRS would collect the data for Clery Act reporting purposes. SRS does not have jurisdiction over the fraternity and sorority houses as they are private property.	12/31/2015	2/16/15 - Verified that SRS is keeping documentation of scheduled fire drills at all student housing facilities. Fire drills are planned a year in advance and coordination is taking place with facility managers as per documentation kept on hand at SRS. The only outstanding item is to verify that students are thoroughly educated on safe and proper evacuation procedures. Per SRS, SOP for Clery Compliance SRS is to collect documentation of the training on a semester basis. IA contacted SRS and is working to review said documentation for the most recent semester (Spring 2015).		Carla Domenici, Int Dir, Safety & Risk Services
2014-04	Clery Act	<u>Recommendation 17 - Fire Drills</u>	The EVP for Academic Affairs/Provost should instruct all student housing facility managers require resident assistants' document floor meetings to use sign-in sheets as evidence that students are informed of fire safety and evacuation procedures.	The Provost will direct the VP for Student Affairs and AVP for Student Life to meet these directives.	5/15/2015			Melissa Vargas, Strategic Planner
2014-04	Clery Act	<u>Recommendation 18 - Fire Drills</u>	The University President should direct the Executive Administration to work with the Emergency Manager to include emergency response training into new student orientation and all areas of new employee orientation and monitor Basic Annual Training courses completion rates to increase the rate to close to 100%.	New student orientation should include emergency response training. Plan for education by June 30, 2015. Plan for universal education implemented by June 30, 2015.	6/30/2015			Amy Wohlert, Chief Of Staff/Office Of Pres

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Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Last Status Update	Actual Implementation Date	Responsible Party
2014-04	Clery Act	<u>Recommendation 19 - Separate Campus Designation</u>	The University President should instruct the Special Assistant to the University President for Branch Affairs to require UNM West issue its own Annual Security Report and comply with all Clery Act requirements.	The President's Office has instructed the Branch Campus Director to complete the report.	6/30/2015			Amy Wohlert, Chief Of Staff/Office Of Pres
2014-04	Clery Act	<u>Recommendation 20A Branch Campus Reporting</u>	The University President should instruct the Special Assistant to the University President for Branch Affairs to meet as soon as possible with the Gallup Branch Executive Director and Police Sergeant to determine what resources are needed to prepare and issue the ASR.	The President has scheduled a meeting on August 25, 2014 with Branch campus directors. Clery Act Compliance is on the Executive Cabinet agenda for discussion. To be completed on June 30, 2015.	6/30/2015			Amy Wohlert, Chief Of Staff/Office Of Pres
2014-04	Clery Act	<u>Recommendation 20B Branch Campus Reporting</u>	The University President should instruct the Special Assistant to the University President for Branch Affairs work with the Clery Coordinator to develop written policies and procedures for branch campus Clery Act reporting and oversight. In addition, branch campuses should be required to correct requisite statistics that are in error and branch campus personnel should be required to attend training.	The President has scheduled a meeting on August 25, 2014 with Branch campus directors. To be completed by June 30, 2015.	6/30/2015			Amy Wohlert, Chief Of Staff/Office Of Pres
2014-04	Clery Act	<u>Recommendation 21 Report Publication and Distribution</u>	A. The EVP for Academic Affairs/Provost should instruct the Dean of Students to include availability of the ASF SR in student orientation. B. The EVP for Academic Affairs/Provost should instruct faculty who hire staff to ensure that prospective faculty are made aware of the availability of the ASF SR on the hiring web page or in the application. In addition, the availability of the ASF SR should be included in new faculty orientation.	A. The Provost will send a memo to the VP for Student Affairs and AVP for Student Life to meet these directives. B. The Provost will send a memo to all faculty administrators to meet these directives. Additionally, new faculty orientation will be modified to include information about the Clery act and the availability of the ASF SR.	5/15/2015			Melissa Vargas, Strategic Planner
2014-04	Clery Act	<u>Recommendation 25 - IT Application Controls</u>	The EVP for Finance and Administration should require the UNMPD Chief to develop its own written policies and procedures. UNMPD should ensure their IT backups are stored in a secure off-site location.	Policies and procedures have been written to address the Department's Information Technology (IT Unit). Included in the policy is the issue of proper segregation of IT personnel duties and the storage of back-up data in secure off-site locations. (Policy Number 82.1.6) UNMPD is in the process of working with UNM IT to identify the place and means to back-up data. Policies and procedures have also been written regarding a disaster plan for the dispatch center. The plan provides direction to all personnel if the dispatch center goes down. (Policy Number 81.3.2a).	7/31/2015	Partially completed. Internal Audit verified that UNMPD has developed its own written IT policies and procedures on July 14, 2014 for the dispatch center disaster plan and response as well as proper segregation of duties. According to UNMPD IT personnel, UNMPD will have its back-up data stored in secure off-site locations by the end of July 2015. UNMPD requested an extension to upgrade servers and associated backup software systems.		Kevin McCabe, Dir, Univ Scity/Chief of Police
2014-04	Clery Act	<u>Recommendation 26 - IT Application Controls</u>	The EVP for Academic Affairs/Provost should require UNM Housing to develop its own written IT policies and procedures.	The Provost will send a memo to the VP for Student Affairs and AVP for Student Life to meet these directives.	5/15/2015			Melissa Vargas, Strategic Planner

**Follow Up Report - Recommendation Pending (April 2015 Open Session)**

Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Last Status Update	Actual Implementation Date	Responsible Party
2014-08	IT Ticketing	<u>Recommendation 6A - Information Technology General Controls</u>	The Director of Ticketing Services should complete and implement key IT general controls procedures.	We concur. Procedures will be completed and implemented.	6/30/2015	Ticketing Services and UNM IT are working together to implement key IT general controls by June 2015.		Mark Koson, Assoc Athletic Dir/Ticket Svcs
2014-12	<u>Office of Vice-President for Research</u>	<u>Recommendation 1 - Deficit Reduction Plan - Reasonable payback period</u>	The University President should consider working with each of the Deans to review their current operations and determine if there is any possibility of shortening the payback periods.	The President will direct Provost Abdallah to work with VPR Dougher and EVP Harris to provide a plan by June 30, 2015 for eliminating the deficits in the CHTM and CARC budgets. The plan will address reduction of the payback period.	6/30/2015			David Harris, EVP for Adm; Chaouki Tanios Abdallah, Provost
2014-12	<u>Office of Vice-President for Research</u>	<u>Recommendation 2 - Sevilleta - Future Funding</u>	The University President should consider working with the Dean of Arts and Sciences to assess the viability of funding for Sevilleta, and to determine how best to address funding availability for the aging facility if they are in need of emergency repairs.	The President will direct the Provost to work with the A&S Dean to develop a plan by March 1, 2015 that addresses both deficit reduction and viability for the Sevilleta Field Station.	3/1/2015			Mark Peceny, Dean; Chaouki Tanios Abdallah, Provost
2014-12	<u>Office of Vice-President for Research</u>	<u>Recommendation 3 - Designation of Start up reserves</u>	Deans of all Colleges, Departments, and Centers should enforce UNM Reserve policy UBP 7000: Categorization of Reserves by designating start-up reserves as either "Committed" or "Dedicated."	Response from the Dean of the School of Engineering: An email to departments instructing them to categorize all faculty start-up funds as committed was sent 08/13/14. Once the Categorization of Reserves is completed, a review will be done to confirm that instructions were followed.  Response from the Dean of the College of Arts and Sciences: The College will inform all departments and programs that start-up funding promised to faculty members via Letters of Offer will be considered committed in the UAP 7000 Categorization of Reserves. This will be practiced at all levels from department and program level up to the Dean's level.	8/31/2015	Partially Resolved: Internal Audit reviewed the UAP 7000: Categorization of Reserves report and all School of Engineering start-up reserves have been designated as "Committed" for FY 2015. The College of Arts and Sciences start-up reserves were reported as discretionary for FY 2015 and were not dedicated as recommended by Internal Audit. The College is unable to reclassify the reserves from discretionary to dedicated because the budget system for reserve designations is locked until FY 2016. The College intends to designate all start-up reserves as dedicated for FY 2016. The College has requested an extension date of August 31, 2015 for its corrective action.		Financial Analyst, School of Engineering; Financial Officer, College of Arts and Sciences.
2014-10	<u>UNM Children's Campus</u>	<u>Recommendation 2 - Develop Plan for Annual Deficits</u>	UNMCC should develop a plan to identify causes of the annual deficits, submit a plan for resolving the causes of the deficit, and submit follow-up reports to the Vice President for Student Affairs showing the progress being made to reduce the deficit.	The UNM Children's Campus agrees with the recommendation to develop a plan to identify causes of the annual deficits and submit a plan for resolution of the deficit under University Administrative Policy (UAP) 7000. Identify over and under expenditures for fiscal years 2012-2014 and determine whether they were one time or reoccurring expenses. Evaluate revenue for fiscal years 2012-2014 as it relates to Children's Campus enrollment. Deficit reduction measures will continue to be implemented as outlined in the Children's Campus UAP 7000 report.	7/31/2015			Daniela Marysol Baca, Dir, Child Care Center



**Follow Up Report - Recommendation Pending (April 2015 Open Session)**

Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Last Status Update	Actual Implementation Date	Responsible Party
2014-10	<u>UNM Children's Campus</u>	<u>Recommendation 7 - UNMCC Proposed Expansion</u>	The demand for access to quality childcare at UNM is constantly growing. The University should consider expanding the UNMCC to meet the needs of this segment of its student and staff population. The University should work with the Budget Office to assess the availability of funding for the proposed expansion of the UNMCC.	The AVP for Student Life agrees with the recommendation that the University should consider expanding the UNMCC to meet the needs of this segment of its student and staff/faculty population. The AVP for Student Life will coordinate with the Provost's Office to prioritize this project in the context of main campus capital priorities. The challenge will be assessing the need for expansion of the UNMCC against academic priorities relative to available state, institutional and private funding sources.	7/31/2015			Walter Miller, Assoc VP, Student Life
2014-15	<u>CASAA Time Abuse</u>	<u>Recommendation 2 - Laptop Tagging Concerns</u>	The Director of CASAA should: Require that CASAA staff are provided with proper directions in the preparation of laptop distribution papers by instructing employees to record consistent and correct laptop serial numbers. Ensure that all laptops that are retained for staff use are properly tagged for inventory purposes. Ensure that all laptops that are checked out to former UNM employees are returned to CASAA. Promptly transfer \$10,602 off the RBS grant in order to ensure that the University of New Mexico demonstrates to the granting agency that once we became aware of inappropriate expenditures they were quickly transferred off the grant. Address personnel issues and appropriate disciplinary actions for The Professor of Health Communication/Senior Scientist in accordance with C07: Faculty Disciplinary Policy of the Faculty Handbook.	I agree with this audit finding. Planned corrective actions: (a) reinstitute use of laptop distribution form created by the Facilities Coordinator, require use of this form for all laptops used as research incentives, and require a photograph of the back of the laptop to be attached to the laptop distribution form; (b) have Facilities Coordinator maintain records of all laptops to be used as research incentives, reconcile distribution during annual inventory process, and provide inventory tags for laptops not distributed; (c) request that laptop from former employee be returned (request sent 10-6-14); (d) move \$10,602 to unrestricted index (completed 10-2-14); (e) CASAA Director to consult with Senior Vice Provost about appropriate response under the Faculty Disciplinary Policy and then implement appropriate discipline. Also require that the Professor of Health Communication/Senior Scientist retake the UNM PI training program.	3/31/2015	CASAA has provided a laptop distribution form and procedures, evidence that the former employee returned the outstanding laptop, transferred the \$10,602 from the grant index, and had a performance discussion with the Professor of Health Communication/Senior Scientist. The Professor of Health Communication/Senior Scientist will attend PI training in March 2015. Internal Audit has extended the implementation date to 03/31/15.		Barbara McCrady, Director
2014-15	<u>CASAA Time Abuse</u>	<u>Recommendation 4 - The Professor of Health Communication/Senior Scientist Travel Concerns</u>	The Director of CASAA should: a. Instruct CASAA employees not to use University funds for advances, loans or any other types of purchases for personal benefit. b. Address personnel issues and appropriate disciplinary actions for the Professor of Health Communication/Senior Scientist in accordance with C07: Faculty Disciplinary Policy of the Faculty Handbook.	I agree with this audit finding. Planned corrective actions: (a) review of University policies 4000 and 4030 with CASAA Program Directors and Principal Investigators and distribute policy to all CASAA employees; (b) CASAA Director to consult with Senior Vice Provost about appropriate response under the Faculty Disciplinary Policy and then implement appropriate discipline. Also require that the Professor of Health Communication/Senior Scientist retake the UNM PI training program.	3/31/2015	CASAA distributed policies 4000 and 4030 to employees on 2/18/15. CASAA employees reviewed Internal Audit findings and CASAA implementation plan on 11/4/14. The CASAA director had had a performance discussion with the Professor of Health Communication/Senior Scientist. The Professor of Health Communication/Senior Scientist will attend PI training in March 2015. Internal Audit has extended the implementation date to 03/31/15.		Barbara McCrady, Director
2015-14	<u>Cancer Center Portable Devices</u>	<u>Recommendation 1 - Incident Log</u>	The Chief Financial Officer of the CC should ensure that they develop a comprehensive log for reporting any missing portable devices. The log should include, at minimum, the date of discovery, the description of the item, the reporting party, and a running description of action taken through to the disposition. The Chief Financial Officer of the CC should assign responsibility to the appropriate level of management for use, follow-up and management of the log.	UNM Cancer Center agrees with the recommendation. UNMCC will create a process and log to record incidents of missing portable devices. Key elements will include: date of discovery, relator, description of incident, description or unique identifier of unit lost, chain of communication (i.e. who incident was reported to), resolution of incident (i.e. re-inventory taken and media found, media not found; HIPPA Breach Notification Form completed and submitted appropriately).	4/1/2015			RODNEY MARTINEZ, Chief Financial Officer: UNM Cancer Center

**Follow Up Report - Recommendation Pending (April 2015 Open Session)**

Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Last Status Update	Actual Implementation Date	Responsible Party
2015-14	<u>Cancer Center Portable Devices</u>	<u>Recommendation 2 - Timely Removal of PHI from USB</u>	The Chief Financial Officer of the CC should work with the HSC IT Security Office to ensure that the CC develops procedures relating to proper use of portable devices. They should require, but not be limited to, erasure of data immediately following transference of information from one area to another. The Chief Financial Officer of the CC should communicate these procedures to all portable device users. In addition, the CC should monitor the process to ensure staff follow the correct procedures.	UNM Cancer Center agrees with the recommendation. UNMCC will work with HSC IT Security to develop a procedure for the management and security of portable media used in UNM Cancer Center Radiation Oncology department. The procedure will include periodic review of processes to ensure compliance.	4/1/2015			RODNEY MARTINEZ, Chief Financial Officer: UNM Cancer Center
2015-14	<u>Cancer Center Portable Devices</u>	<u>Recommendation 3 - Adequate Protection of Information on USB's-Encryption</u>	The Chief Financial Officer of the CC should work with the HSC IT Security Office to ensure that they encrypt all portable devices.	UNM Cancer Center agrees with the recommendation. UNM Cancer Center will work with HSC IT Security to investigate solutions that will allow us to encrypt the USB drives used for transferring data between radiation oncology treatment systems. Key considerations with this solution will involve securing encryption capabilities that will be compatible with the proprietary software of the treatment planning systems.	4/1/2015			RODNEY MARTINEZ, Chief Financial Officer: UNM Cancer Center
2015-14	<u>Cancer Center Portable Devices</u>	<u>Recommendation 4 - USB Inventory</u>	The Chief Financial Officer of the CC should ensure that the CC develops an inventory process for portable devices and that they perform and document reconciliations at minimum on a monthly basis. The process should include a specific device assignment and/or check out system and ongoing documentation of information loaded onto and removed from each device by date.	UNM Cancer Center agrees with recommendation and will develop and document an inventory process to ensure management and security of portable devices including a timely inventory (at a minimum monthly) of devices.	4/1/2015			RODNEY MARTINEZ, Chief Financial Officer: UNM Cancer Center
2015-14	<u>Cancer Center Portable Devices</u>	<u>Recommendation 5 - Archived PHI</u>	The Chief Financial Officer of the CC should explore the feasibility of using the PACS system for archiving information.	UNM Cancer Center will investigate the possibility of utilizing a PACS system for archiving ongoing treatment and planning data.  In regards to existing archived storage on portable CDs, UNM Cancer Center is currently in the process of moving this data from the CD archives to a shared network folder. The transition of this data to the network folder to be completed by April 30, 2015.  In regards to archived storage on tape media, an RFP to be issued for the permanent archive of this media from tape to a networked server/folder. To be completed by June 30, 2015.	5/1/2015			RODNEY MARTINEZ, Chief Financial Officer: UNM Cancer Center
2015-14	<u>Cancer Center Portable Devices</u>	<u>Recommendation 6 - Archived PHI</u>	The Chief Financial Officer of the CC should ensure that the CD inventory documentation process includes a mandated maximum check out time and regular monitoring and reconciliation of CDs in the vault.	UNM Cancer Center agrees with recommendation and will develop and document an inventory process to ensure management and security of CDs, which would include a check out and inventory procedure.	4/1/2015			RODNEY MARTINEZ, Chief Financial Officer: UNM Cancer Center



**Follow Up Report - Recommendation Pending (April 2015 Open Session)**

Project Code	Project Name	Recommendation Title	Executive Recommendation	Response	Estimated Implementation Date	Last Status Update	Actual Implementation Date	Responsible Party
2015-14	Cancer Center <u>Portable</u> <u>Devices</u>	<u>Recommendation</u> 7 - <u>Complaint</u> <u>Specific</u> <u>Conclusion</u>	The Chief Financial Officer of the CC should formally assign the responsibility of managing portable devices, determining potential loss, managing the investigative process, reporting to the HSC Privacy Officer, and communicating the outcome to designated individuals at the CC as appropriate. The person responsible for overall oversight should develop written standard operating procedures for the process, communicate the standard operating procedures to all staff, and require annual training in compliance with HSC Policy 300.	UNM Cancer Center will initiate a process to ensure that staff are current on their required annual training supporting the handling of protected information such as HIPAA information. UNMCC will initiate a process to develop and train our staff on standard operating procedures for communicating and reporting incidents to the appropriate levels of authority in the institution. UNMCC has a dedicated Compliance Officer who maintains the responsibility for managing the investigative process, coordinating communication within UNMCC, and reporting to the HSC Privacy Officer.	4/1/2015			RODNEY MARTINEZ, Chief Financial Officer: UNM Cancer Center

**Internal Audit Director's Status Report  
Audit and Compliance Committee Meeting  
April 22, 2015**

## ACTION ITEMS

**Audit Committee Meeting Calendar for the Remainder of Calendar Year 2015.** The Committee meets at 9:00 AM in the Roberts Room.

June 18, 2015

August 13 or 18, 2015 or September 3, 2015

October 15, 2015 (Exit Conference 2015 External Audit)

## INFORMATION ITEMS

**Audit Plan Status.** The Fiscal Year 2015 (FY15) audit plan consisted of eight audits carried over from FY14. The project status and hours report for the plan is at Tab # 12c. The status of the proposed plan as of February 28, 2015 is:

Completed	11
Fieldwork	4
Subtotal	<b>15</b>
Unassigned/Deferred	6
<b>Total</b>	<b>21</b>

**Complaints.** Since July 1, 2014, the department received 90 reports of misconduct or fraud; as of February 27, 2015, 50 complaints were investigated and closed, and 71 complaints are open.

Carry Forward from FY10	1
Carry Forward from FY12	1
Carry Forward from FY13	11
Carry Forward from FY14	18
Complaints Opened in FY15	90
<b>Total Complaints</b>	<b>121</b>
Complaints Closed in FY15	50
<b>Total Open Complaints</b>	<b>71</b>

**Internal Audit Director's Status Report  
Audit and Compliance Committee Meeting  
April 22, 2015**

Following is the status of open complaints:

<b>Referred to</b>	<b>Total</b>
Referred to Branch Liaison	1
Referred to HSC Compliance	15
Referred to HSC Privacy Office	7
Referred to HSC Clinical Affairs	2
Referred to HSC Information Security	1
Referred to Human Resources	6
Referred to Internal Audit	28
Referred to IT Security	6
Referred to Office of Equal Opportunity	6
Referred to Provost	7
Referred to Purchasing	
Referred to Safety and Risk Services	4
Referred to UNMH Compliance & Audit	
Referred to UNMH Human Resources	7
Referred to UNMH Safety	1
<b>Total</b>	<b>91</b>

Note: An open complaint may be referred to multiple areas.  
Thus, the number of referrals will be greater than the number of complaints.

**Complaints Trend Data for FY2011 to FY2015**

Attached to this report at Tab 11 are two graphs that show complaint trend analysis by organization and by issue types. From FY 2011 through FY 2015 (February 27, 2015), the department received 467 complaints with 550 different issues. Of the 550 issues, about 244 issues are personnel (Human Resources) related, approximately 51 are policy related, 38 are OEO related, approximately 89 are time sheet, fraud and theft related, and 43 are healthcare related issues.

**Hotline and Compliance Case Management**

Internal Audit and HSC Compliance have contracted with a new compliance hotline and case management vendor (Navex Global, Inc.). The new compliance hotline and case management system is cost effective and offers greater functionality for case management and reporting. The reporting from our current hotline software is very basic and does not allow for customized reports to produce management reports and statistical analysis. IA staff spends an excessive amount of time manually manipulating data downloaded from the hotline website to produce management and Audit Committee reporting.

The Department is working with the Main Campus Compliance Office and HSC Compliance Office to transition the University Hotline management and reporting system to the compliance

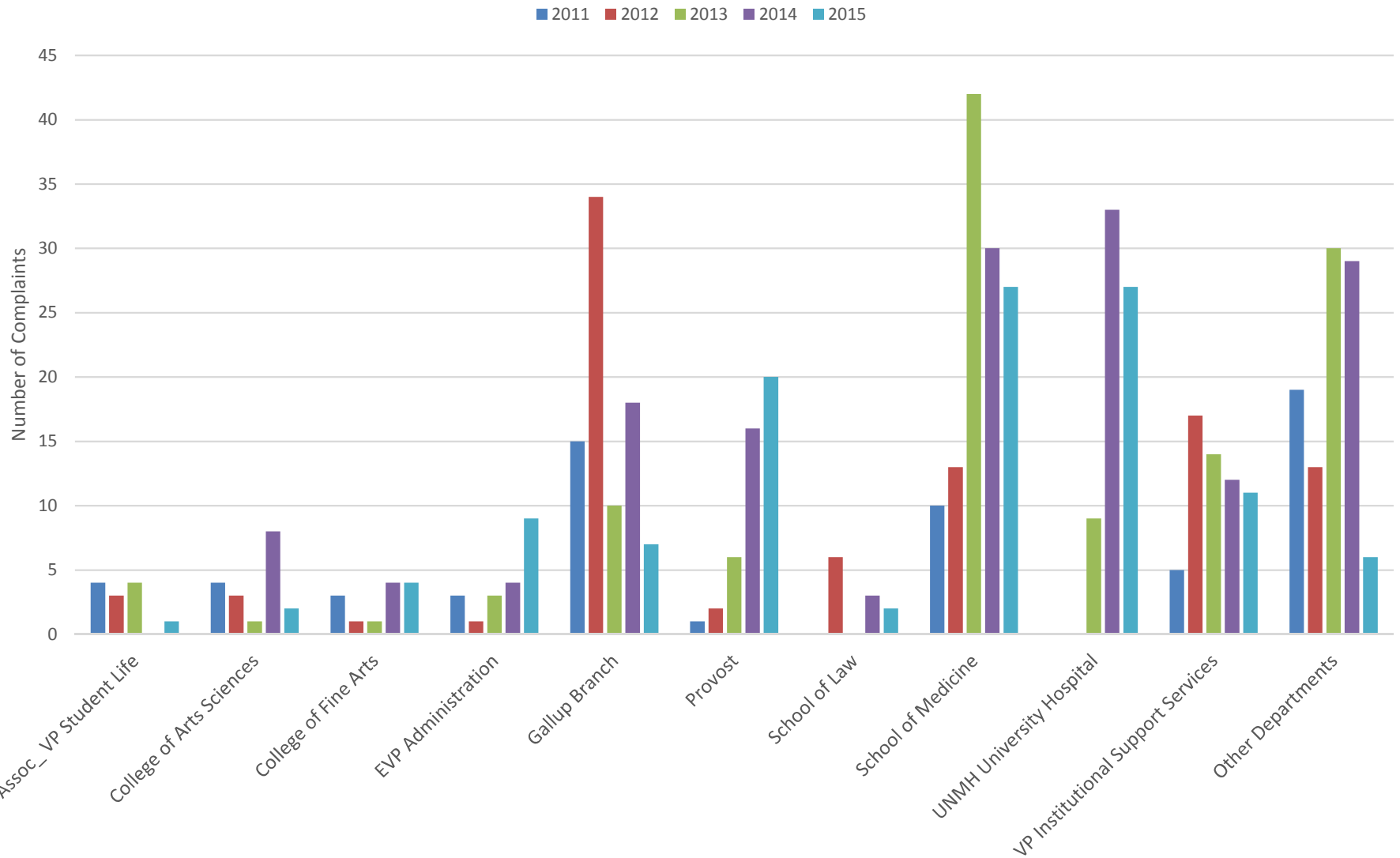
**Internal Audit Director's Status Report**  
**Audit and Compliance Committee Meeting**  
**April 22, 2015**

office. The Navex-required workbook, webpage, system administrator and users training, etc. has been completed. On March 26, 2015, the compliance Hotline (1-888-899-6092 & website unm.ethicspoint.com) and complaint case management system was successfully transferred to Navex (Ethicspoint). The Department will continue to work closely with the compliance offices for orderly transfer and administration of the Hotline and complaint intake process.

**Department Financial Report.** At Tab 11 is the Internal Audit Department's budget status report for your review. The FY15 adjusted budget is \$838,596, of which \$802,250 is funded from the general pooled allocation, and \$36,346 from the departmental reserve. As of March 31, 2015, the department's actual expenditures are \$608,761 and encumbrances are \$185,222. The Department expects to have estimated reserves of \$8,000 as of June 30, 2015.

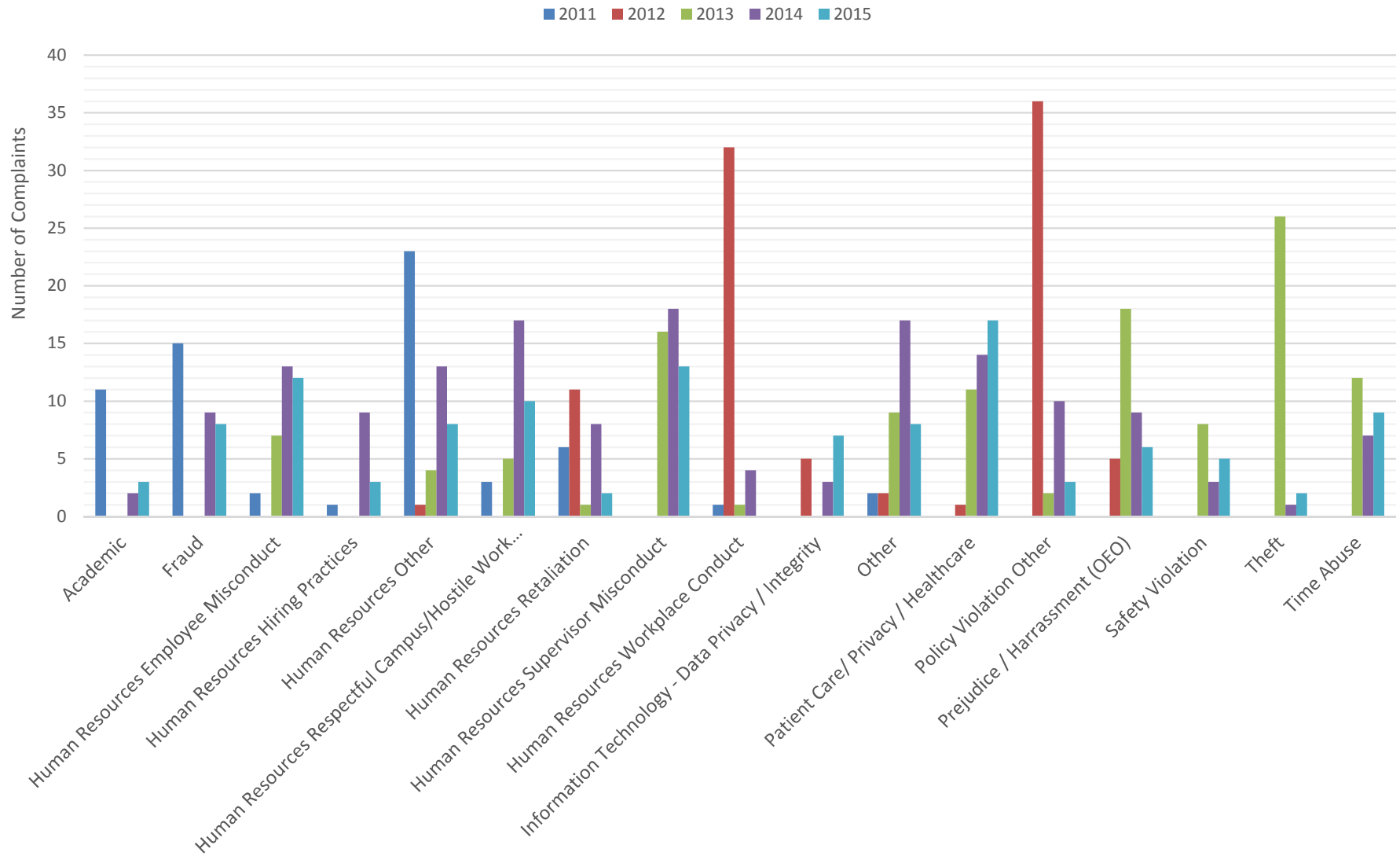


## Internal Audit Department Location of Complaints by Organization - FY2011 through FY2015 (March 5, 2015)



\*Note: Other Departments - Departments with few complaints were categorized under Other Departments. Other Departments include but are not limited to: College of Education, Controller's Office, College of Nursing, College of Pharmacy, and Information Tec

## Internal Audit Department Complaints by Type - FY2011 through FY2015 (March 5, 2015)



\*Note: Other - complaint types with few complaints were catagorized under Other. Other includes internal controls, student enrollment and other complaints that fall outside the types listed above.

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Account Description	Budget (FYTD) Adopted	Budget (FYTD) Adjustments	Budget (FYTD) Accumulated	Actuals Current Month	Actuals Pct	Actuals Fiscal YTD	Actuals Pct	Encumbrances	Balance Available	Balance Pct
<b>Revenue</b>										
0340 - University Hospital Revenue!	\$0.00	\$0.00	\$0.00	\$825.00	.00%	\$825.00	.00%	\$0.00	(\$825.00)	.00%
1640 - Allocations Pooled Allocatio!	\$776,691.00	\$0.00	\$776,691.00	\$0.00	.00%	\$776,691.00	100.00%	\$0.00	\$0.00	.00%
1660 - Allocations Other Gen	\$0.00	\$25,559.00	\$25,559.00	\$0.00	.00%	\$25,559.00	100.00%	\$0.00	\$0.00	.00%
1900 - Reserves	\$0.00	\$0.00	\$0.00	\$0.00	.00%	\$36,346.35	.00%	\$0.00	(\$36,346.35)	.00%
1901 - Budgeted Use of Reserves	\$61,905.00	(\$25,559.00)	\$36,346.00	\$0.00	.00%	\$0.00	.00%	\$0.00	\$36,346.00	100.00%
<b>*TOTAL Revenue</b>	<b>\$838,596.00</b>	<b>\$0.00</b>	<b>\$838,596.00</b>	<b>\$825.00</b>	<b>.10%</b>	<b>\$839,421.35</b>	<b>100.10%</b>	<b>\$0.00</b>	<b>(\$825.35)</b>	<b>(.10%)</b>
<b>Expense</b>										
2020 - Administrative Professional !	\$697,764.00	\$0.00	\$697,764.00	\$55,666.94	7.98%	\$514,751.87	73.77%	\$174,440.67	\$8,571.46	1.23%
2060 - Support Staff Salary Detail !	\$38,932.00	\$0.00	\$38,932.00	\$2,994.98	7.69%	\$28,316.12	72.73%	\$10,781.21	(\$165.33)	(.42%)
20J0 - Student Salaries Gen	\$20,000.00	\$0.00	\$20,000.00	\$1,639.20	8.20%	\$15,560.40	77.80%	\$0.00	\$4,439.60	22.20%
20P0 - Temporary Salary Gen	\$15,000.00	\$0.00	\$15,000.00	\$340.46	2.27%	\$1,034.59	6.90%	\$0.00	\$13,965.41	93.10%
3100 - Office Supplies General	\$3,000.00	\$0.00	\$3,000.00	\$170.21	5.67%	\$855.61	28.52%	\$0.00	\$2,144.39	71.48%
3110 - Books Periodicals Gen	\$400.00	\$0.00	\$400.00	\$0.00	.00%	\$56.00	14.00%	\$0.00	\$344.00	86.00%
3140 - Computer Software Gen	\$500.00	\$0.00	\$500.00	\$100.00	20.00%	\$100.00	20.00%	\$0.00	\$400.00	80.00%
3150 - Computer Supplies <\$5,001	\$300.00	\$0.00	\$300.00	\$0.00	.00%	\$123.03	41.01%	\$0.00	\$176.97	58.99%
31A0 - Business Food - Local	\$1,100.00	\$0.00	\$1,100.00	\$0.00	.00%	\$419.00	38.09%	\$0.00	\$681.00	61.91%
31C0 - Dues Memberships Gen	\$3,500.00	\$0.00	\$3,500.00	\$0.00	.00%	\$3,610.00	103.14%	\$0.00	(\$110.00)	(3.14%)
31J0 - Parking Permits Gen	\$600.00	\$0.00	\$600.00	\$0.00	.00%	\$400.00	66.67%	\$0.00	\$200.00	33.33%
31K0 - Postage Gen	\$50.00	\$0.00	\$50.00	\$0.00	.00%	\$1.86	3.72%	\$0.00	\$48.14	96.28%
3800 - In State Travel Gen	\$1,000.00	\$0.00	\$1,000.00	\$0.00	.00%	\$2,592.40	259.24%	\$0.00	(\$1,592.40)	(159.24%)
3805 - Instate Travel-Per Diem Sta!	\$200.00	\$0.00	\$200.00	\$0.00	.00%	\$504.00	252.00%	\$0.00	(\$304.00)	(152.00%)
3810 - Instate Travel-Per Diem No!	\$0.00	\$0.00	\$0.00	\$0.00	.00%	\$268.80	.00%	\$0.00	(\$268.80)	.00%
3820 - Out Of State Travel Gen	\$5,000.00	\$0.00	\$5,000.00	\$0.00	.00%	\$3,017.17	60.34%	\$0.00	\$1,982.83	39.66%
3825 - Out State Travel-Per Diem !	\$0.00	\$0.00	\$0.00	\$0.00	.00%	\$274.50	.00%	\$0.00	(\$274.50)	.00%
3830 - Out State Trvl-Per Diem No!	\$0.00	\$0.00	\$0.00	\$0.00	.00%	\$158.60	.00%	\$0.00	(\$158.60)	.00%
39Z1 - Travel Non UNM Emp-Non !	\$0.00	\$0.00	\$0.00	\$0.00	.00%	\$0.00	.00%	\$0.00	\$0.00	.00%
6000 - Telecom Charges Gen	\$4,000.00	\$0.00	\$4,000.00	\$292.50	7.31%	\$2,632.50	65.81%	\$0.00	\$1,367.50	34.19%
6020 - Long Distance Gen	\$100.00	\$0.00	\$100.00	\$0.22	.22%	\$44.33	44.33%	\$0.00	\$55.67	55.67%
6060 - Voice Mail Box Gen	\$600.00	\$0.00	\$600.00	\$50.00	8.33%	\$450.00	75.00%	\$0.00	\$150.00	25.00%
6300 - Alarm System Gen	\$150.00	\$0.00	\$150.00	\$11.25	7.50%	\$238.33	158.89%	\$0.00	(\$88.33)	(58.89%)
6315 - Electronic Databases	\$0.00	\$0.00	\$0.00	\$194.34	.00%	\$1,554.72	.00%	\$0.00	(\$1,554.72)	.00%
6340 - Auditing Services Gen	\$0.00	\$0.00	\$0.00	\$0.00	.00%	\$0.00	.00%	\$0.00	\$0.00	.00%



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Account Description	Budget (FYTD) Adopted	Budget (FYTD) Adjustments	Budget (FYTD) Accumulated	Actuals Current Month	Actuals Pct	Actuals Fiscal YTD	Actuals Pct	Encumbrances	Balance Available	Balance Pct
63A0 - Conference Fees Gen	\$6,000.00	\$0.00	\$6,000.00	\$0.00	.00%	\$2,495.00	41.58%	\$0.00	\$3,505.00	58.42%
63A2 - Seminars/Training Fees	\$3,000.00	\$0.00	\$3,000.00	\$875.00	29.17%	\$3,800.00	126.67%	\$0.00	(\$800.00)	(26.67%)
63C0 - Copying Gen	\$50.00	\$0.00	\$50.00	\$0.00	.00%	\$0.00	.00%	\$0.00	\$50.00	100.00%
63V1 - Consultant Fees & Svcs-Fo!	\$250.00	\$0.00	\$250.00	\$0.00	.00%	\$0.00	.00%	\$0.00	\$250.00	100.00%
69Z0 - Other Professional Services!	\$7,000.00	\$0.00	\$7,000.00	\$902.92	12.90%	\$8,216.28	117.38%	\$0.00	(\$1,216.28)	(17.38%)
70E0 - Computer Hardware Mainte!	\$3,200.00	\$0.00	\$3,200.00	\$0.00	.00%	\$0.00	.00%	\$0.00	\$3,200.00	100.00%
70E1 - Computer Software Mainten!	\$17,300.00	\$0.00	\$17,300.00	\$3,607.20	20.85%	\$10,415.82	60.21%	\$0.00	\$6,884.18	39.79%
70F0 - Equipment Rent Expense G!	\$5,000.00	\$0.00	\$5,000.00	\$329.92	6.60%	\$3,387.89	67.76%	\$0.00	\$1,612.11	32.24%
80E0 - Contingency Budget Gen	\$0.00	\$0.00	\$0.00	\$0.00	.00%	\$0.00	.00%	\$0.00	\$0.00	.00%
80K0 - Banner Tax	\$600.00	\$0.00	\$600.00	\$65.34	10.89%	\$456.16	76.03%	\$0.00	\$143.84	23.97%
80K2 - Foundation Surcharge	\$4,000.00	\$0.00	\$4,000.00	\$335.88	8.40%	\$3,026.39	75.66%	\$0.00	\$973.61	24.34%
<b>*TOTAL Expense</b>	<b>\$838,596.00</b>	<b>\$0.00</b>	<b>\$838,596.00</b>	<b>\$67,576.36</b>	<b>8.06%</b>	<b>\$608,761.37</b>	<b>72.59%</b>	<b>\$185,221.88</b>	<b>\$44,612.75</b>	<b>5.32%</b>

Index: 676000 - 113280-AUDIT DEPARTME-General Activ

Account Description	Budget (FYTD) Adopted	Budget (FYTD) Adjustments	Budget (FYTD) Accumulated	Actuals Current Month	Actuals Pct	Actuals Fiscal YTD	Actuals Pct	Encumbrances	Balance Available	Balance Pct
Total Revenue:	\$838,596.00	\$ .00	\$838,596.00	\$825.00	.10%	\$839,421.35	100.10%	\$ .00	(\$825.35)	(.10%)
Total Expense:	\$838,596.00	\$ .00	\$838,596.00	\$67,576.36	8.06%	\$608,761.37	72.59%	\$185,221.88	\$44,612.75	5.32%
Net:	\$ .00	\$ .00	\$ .00	(\$66,751.36)	.00%	\$230,659.98	.00%	(\$185,221.88)	\$45,438.10	.00%

**Parameters:**

Index: 676000 - 113280-AUDIT DEPARTME-General Activ

Groupings:

Warning: These reports will show fiscal year activity. For inception to date activity for Grants please use the FRRGLDS - Grant Ledger Detail Summary report.

# EXECUTIVE SESSION