

# 2018 ANNUAL REPORT



## USF SYSTEM COMPLIANCE & ETHICS PROGRAM



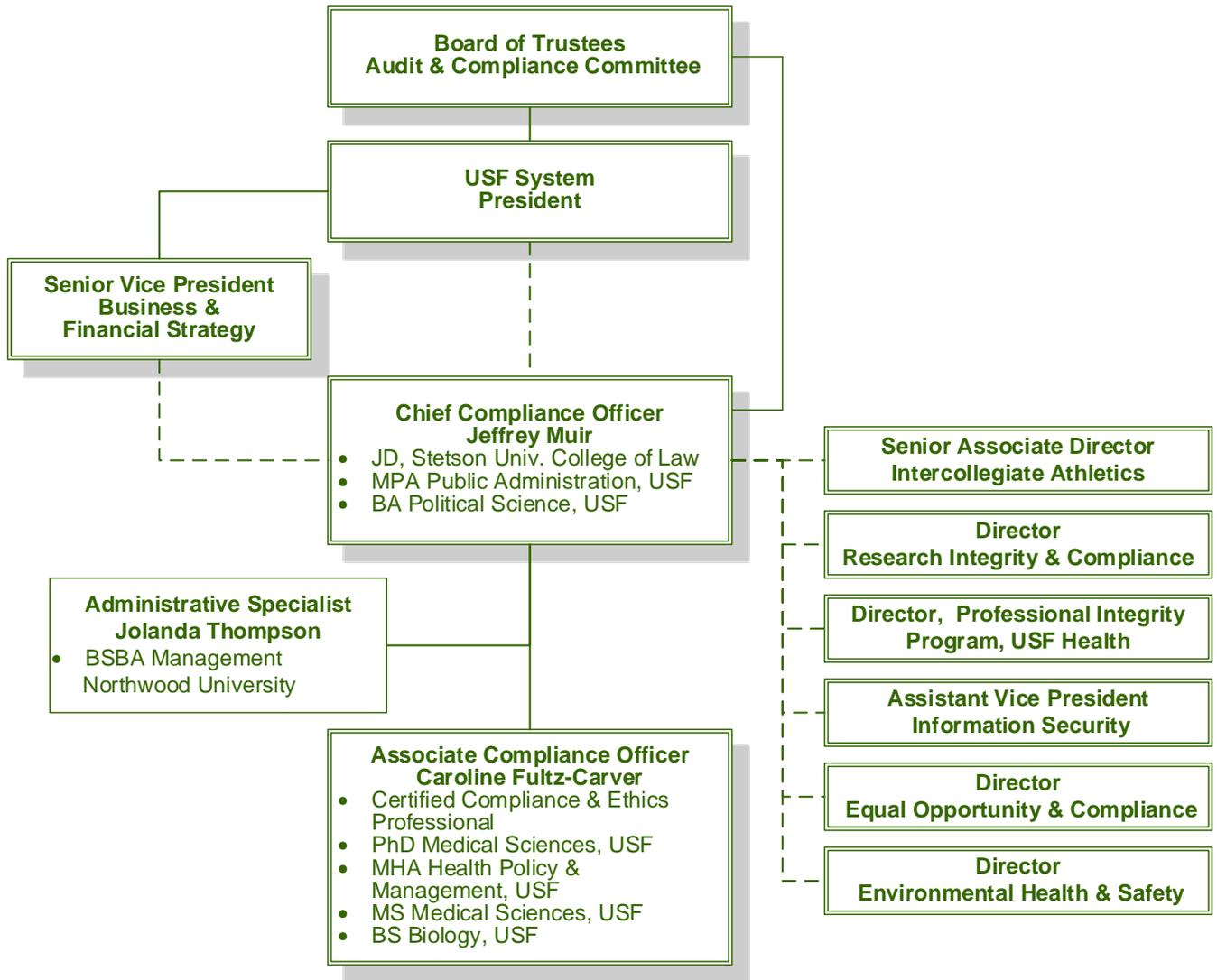
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# USF System Compliance and Ethics Program Organizational Chart



# 2018 ANNUAL REPORT

## USF System Compliance & Ethics Program

The USF Compliance & Ethics Program was created in 2007 as a component of University Audit & Compliance (UAC), with the appointment of a Chief Compliance Officer (CCO) charged by President Genshaft and the USF Board of Trustees (BOT) to create and maintain an effective compliance and ethics program based on best practices; to prevent, monitor, detect, and respond to non-compliance; and recommend corrective actions to fully meet regulatory requirements. In 2017, UAC separated into two entities: USF System Audit and the USF System Compliance & Ethics Program (the “Program”). This separation was in accordance with Board of Governors (BOG) Regulation [4.003](#), a regulation based on [Chapter 8, Part B, Section 2\(b\) of the Federal Sentencing Guidelines](#), the [Florida Code of Ethics for Public Officers and Employees](#), and industry best practices.

This annual report summarizes the activities of our Program from January 1, 2018, to December 31, 2018. This report is organized by the “essential elements” for an effective compliance and ethics program as prescribed by the Federal Sentencing Guidelines and fulfills our annual reporting requirements in accordance with BOG Regulation 4.003 and the [USF System Compliance & Ethics Program Plan](#).

### Element I: Governance & High-Level Oversight

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The USF System addresses this element through the BOT Audit and Compliance Committee, the USF System Compliance & Ethics Program, and the (High-Risk) Compliance Officers Workgroup.

#### **A. Board of Trustees Audit and Compliance Committee**

In accordance with BOG Regulation 4.003, the BOT Audit and Compliance Committee (the “Committee”) has audit and compliance oversight responsibilities. These responsibilities are outlined in the [BOT Audit & Compliance Committee Charter](#).

During this reporting period, the Committee Charter was amended to include the addition of the Committee’s role and responsibilities regarding the appointment, removal, and remuneration of the Chief Compliance Officer and the Chief Audit Executive (to ensure independence of the audit and compliance functions); removal of Committee’s responsibility to approve the annual report as it is not required by standards or regulations; and inclusion of a procedure for amending the charter.

## **B. USF System Compliance & Ethics Program**

In accordance with [BOG Regulation 4.003](#), the USF System Compliance & Ethics Program (the “Program”) reports directly to the BOT Audit & Compliance Committee and administratively to the USF System President. The purpose, authority, and responsibilities of our Program are governed by the following in accordance with BOG Regulation 4.003:

- [USF System Policy 0-026: USF System Compliance & Ethics Program](#) provides our Program with the authority to coordinate and manage all USF System compliance and ethics activities.
- [USF System Compliance & Ethics Program Charter](#) (“Program Charter”) identifies the purpose, authority, and responsibilities of our Program.
- [USF System Compliance & Ethics Program Plan](#) (“Program Plan”) summarizes the current status of our Program.

## **C. (High Risk) Compliance Officers Workgroup**

The Compliance Officers Workgroup assists the CCO in maintaining an effective and broad-based program designed to prevent, monitor, and detect areas of non-compliance and, when necessary, to fully meet compliance requirements and recommend corrective actions. This workgroup is comprised of senior compliance officers in the following “high-risk” compliance units within the USF System, all of whom have an “accountable reporting” relationship to the CCO:

- Athletics Compliance
- Environmental Health & Safety
- Research Integrity & Compliance
- Diversity Inclusion & Equal Opportunity
- Professional Integrity Program, USF Health
- Information Security

Brief descriptions of several of the above-listed “high-risk” compliance units and highlights from this reporting period are provided below.

### ***Athletics Compliance***

The USF Athletics Compliance Office (Athletics Compliance) ensures compliance with National Collegiate Athletic Association (NCAA) and American Athletic Conference rules and associated USF System regulations and policies through its education, monitoring, and enforcement efforts. During the 2017-2018 academic year, Athletics Compliance provided 206 in-person educational sessions. These

sessions provided athletics compliance education to 750 athletic employees, student-athletes, on-campus constituents, and external constituents.

## ***Environmental Health & Safety***

USF Environmental Health & Safety (EH&S), a department within the Division of Facilities Management, ensures potential safety and environmental hazards are properly mitigated/remediated in accordance with applicable federal, state, and local requirements; USF System policies, procedures, guidelines; and industry best practices. EH&S serves as the liaison between the USF System and external agencies and provides environmental health and safety awareness and compliance training. EH&S administers multiple programs to achieve this end. Some highlights from FY 2017-2018 include:

- Provided safety and compliance training to approximately 99,200 faculty, staff, students, and affiliates via classroom-based and online training courses.
- Conducted 213 emergency evacuation drills and 47,064 fire extinguisher inspections; provided Fire Safety Education and Training sessions for approximately 382 individuals; and, issued 23 hot work permits.
- Performed 1,477 laboratory safety inspections in research and teaching laboratories, studios, and shops.
- Coordinated the compliant management, treatment, and/or disposal of approximately 151,262 pounds of regulated waste for the USF System. Performed 109 inspections of construction/development contractors' Stormwater Pollution Prevention Plans and completed 8 storm water compliance audits of grounds and vehicle/equipment maintenance areas.
- Facilitated the following external regulatory agency inspections:
  - 12 inspections by the Florida Department of Health (biomedical waste and drinking water compliance).
  - 13 inspections by the Environmental Protection Commission (regulated storage tank, air permit, and industrial wastewater compliance).
  - 271 fire and safety code inspections by the Office of the State Fire Marshall.
- Evaluated/mitigated approximately 275 Industrial Hygiene/Occupational Safety issues and/or complaints (i.e., asbestos, mold, noise, odor, etc.).
- Provided permitting and code/safety related inspection support for approximately \$188 million construction-related value for the USF System.
- Processed/coordinated approximately 374 workers' compensation claims to ensure injured/ill workers receive proper medical treatment, disability leave and supplemental wages, as necessary.

## ***Research Integrity & Compliance***

Research Integrity and Compliance, a division within USF Research & Innovation, ensures research performed within the USF System is safe, ethical, and complies with all applicable regulations, laws, and institutional policies. Some highlights from FY 2017-2018 include:

- Provided live and online human subject research-related training to 1,529 investigators through its education program.
- Audited 25 human subject research sites of which 5 (20%) were audited for cause.
- Reviewed 178 project-specific disclosures for financial conflicts of interest in research with 133 (75%) requiring a management plan.
- Performed 65 inspections of laboratories using biohazardous agents.
- Provided biosafety trainings to 1,461 individuals.
- Responded to 5 biosafety incident reports.
- Coordinated a CDC site visit for renewal of our Select Agent program registration; registration was renewed for another 3 years.
- Performed 199 IACUC (Institutional Animal Care and Use Committee) laboratory inspections.
- Offered First Aid/CPR/AED/Oxygen/Nitrox/Scientific Diving Techniques for a total of 51 classes; and received 52 new Scientific Divers into the Diving Safety program.
- Provided 16 boating safety classes resulting in 31 trained operators.

## ***Diversity, Inclusion & Equal Opportunity***

The Office of Diversity, Inclusion & Equal Opportunity (DIEO) ensures the USF System workplace and academic environments are free from discrimination, harassment, and retaliation based on protected categories of race, color, sex (including sexual harassment), national origin, sexual orientation, religion, age, disability, marital status, gender identity and expression, and veteran's status, as provided by law. Some highlights from this reporting period include:

- Equal Opportunity (EO) Section received 121 reports of which 44 were investigated. Of those investigated, 0 (0%) were substantiated based on the preponderance of evidence standard.
- EO provided 22 harassment prevention and sexual harassment prevention trainings to USF System students and employees resulting in 447 people trained.
- The Office of Title IX (Title IX) received 320 reports of which 277 were determined to fall under the provisions of Title IX. Of these, 11 (4%) were substantiated based on the preponderance of evidence standard.
- Title IX provided 94 live training sessions resulting in 5,315 USF System employees trained.

## ***Professional Integrity Office, USF Health***

The USF Health Professional Integrity Office encompasses two programs: the Billing Integrity Program and the HIPAA/Privacy Program. The Billing Integrity Program focuses on compliance with federal, state and insurance-provider regulations and policies governing the provision of and billing for healthcare services provided by USF Health practitioners. The HIPAA/Privacy Program focuses on compliance with the Health Insurance Portability and Accountability Act (HIPAA), federal and state privacy laws, regulations, and internal policies.

Billing Integrity Program highlights from 2018 include:

- Provided in-person, customized training to all new billing providers (Physicians, Advanced Practice Practitioners, Therapists, etc.) with in-depth review of the documentation/coding/supervision standards applicable to the practitioner's specialty/practice with a follow-up documentation review to assess accuracy;
- Monitored compliance with mandatory training requirements for all workforce members within 90 days of hire and annually thereafter on the USF Health Code of Conduct, Fraud/Waste/Abuse prevention, and general healthcare compliance;
- Ensured creation and annual review of program standards procedures and practices;
- Conducted ongoing risk assessment of practice/provider billing/coding and supporting workflows/systems;
- Conducted federal and state exclusion screening on all workforce members and vendors;
- Investigated reports of inaccurate billing and facilitated implementation of corrective actions as identified, including refunds;
- Responded to and resolved audits conducted by external parties.

HIPAA/Privacy Program highlights from 2018 include:

- Monitored unauthorized access within the electronic health record ("EHR") and conduct randomized access audits;
- Monitored compliance with mandatory training for all workforce members within 90 days of hire and annually thereafter on the HIPAA Privacy Rule;
- Audited EHR access by researchers to ensure access of protected health information is authorized pursuant to IRB (Institutional Review Board) approval letters;
- Monitored deleted communications by providers with the EHR to ensure such communications have not violated HIPAA;
- Performed root-cause analysis of misdirected faxes generated from within the EHR;

- Conducted and facilitated quarterly HIPAA privacy walkthroughs with assigned clinical liaisons to assess risk and provide ongoing education to decrease violations;
- Responded to patient medical record overlays and ensured proper reeducation of staff was conducted to minimize future occurrence;
- Investigated reports of HIPAA privacy potential breaches and facilitated corrective actions as identified, including reporting to Health & Human Services (HHS);
- Drafted and negotiated Business Associate Agreements, including obtaining annual re-certifications as mandated under HIPAA;
- Performed annual revisions to all standards and procedures including the preparation of a new procedure for non-USF Health Observers in clinical settings;
- Audited EPIC access/EHR for over 200 USF Health EPIC guest accounts to ensure access is permitted in accordance with each user's role; and
- Investigated, responded, and resolved HIPAA complaints from patients, workforce members, and external entities (HHS/Office of Civil Rights).

### ***Information Security***

Information Security ensures the security of USF information systems. Highlights from this reporting period include:

- Worked with USF Health Privacy and Integrity Office to review and update the medical record monitoring process for HIPAA.
- Worked with Verizon on HIPAA Risk Assessment for USF Clinical Systems.
- Multiple Security Awareness presentations were given throughout USF, including Bring Your Child to Work Day, Baker Act Reporting Center, and others.
- Security Awareness campaign drive in front of the library in January, February, and March.
- Participated in multiple incident investigations on behalf of Human Resources, University Audit, General Counsel, and the Professional Integrity Office, determining the severity of the incident and potential need for breach notification to appropriate state and federal entities.
- Ran tabletop exercise for USF Information Technology Disaster Recovery Plan.
- Identified issues with researchers working on IRB projects without approval.
- Worked with Psychology and Research IRB to educate researchers and implemented a process to verify approval before access to research data is granted.
- Secured Box (cloud storage) folders for HIPAA and other high sensitivity data to be stored, controlled, and/or monitored.

- Reviewed 150+ research contracts and worked with departments to identify/implement security requirements in accordance with applicable federal regulations.
- Provided training to Sponsored Research Administrators to read/understand technical language inserted into contracts.
- Facilitated hiring of Research Compliance Analyst and ongoing training of individual.
- Reviewed export-controlled projects for the College of Engineering, multiple contracts, and sponsors.
- Completed Dual Use Agreements (and implemented security measures) for USF Researchers obtaining sensitive/restricted data from various outside organizations.
- Created/Implemented a Research Data Committee representing members from multiple areas.
- Worked with auditors from the Florida Department of Law Enforcement (Division of Human Resources, Communication Disorders, and University Police), State Auditors, and University Audit to implement and improve control safeguards issues outlined by auditors.
- Ensured research involving restricted data is compliant with federal regulations.

#### **D. State University System of Florida Compliance & Ethics Consortium**

In addition to being the first Compliance & Ethics Program at a State University System (SUS) institution and the first SUS institution to fully implement BOG Regulation 4.003, our Program continues its leadership role in the State University System of Florida Compliance & Ethics Consortium. This consortium was established on June 27, 2013, to provide an avenue for member universities to discuss the development and improvement of SUS compliance and ethics programs, new federal and state regulations, best practices, and issues they may be facing. In addition, the purpose of the consortium is to ensure effective communication and collaboration in the development of compliance and ethics programs across the SUS. The consortium is comprised of Compliance and Ethics Officers and their representatives from the compliance and ethics programs of SUS institutions; and, as non-voting, ex officio members, the Inspector General and Director of Compliance and his/her representatives from the SUS of Florida Board of Governors.

During this reporting period, the USF System Chief Compliance Officer served as the consortium chair. Our Program hosted the annual, in-person SUSCEC meeting at USF which included, but was not limited to, the following compliance topics:

- Implementation of BOG Regulation 4.003
- The General Data Protection Regulation
- New Title IX Regulations

The Consortium also continued its work to develop an assessment tool for the required 5-year Program Review under BOG Regulation 4.003.

## **Element 2: Establish Standards of Conduct, Policies, & Procedures**

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Throughout this reporting period, the USF System Compliance & Ethics Program reviewed new USF System policies and revisions to existing USF System policies issued by the Office of the General Counsel for comment. The Program provided the Office of the General Counsel, whenever possible, with draft language aimed at harmonizing language with existing policies; reducing or eliminating redundant policy statements with existing policies; and clarifying language to facilitate understanding. Below are highlights from this reporting period:

### **A. Florida Code of Ethics Policy**

During this reporting period, the USF System Compliance & Ethics Program reviewed [USF System Policy 0-027: Florida Code of Ethics for Public Officers and Employees: Compliance and Disclosure](#) to ensure this policy reflects current State of Florida statutes, USF System policy, and associated USF System business processes. This policy states the foundational standards of conduct for all USF System employees as the Florida Code of Ethics for Public Officers and Employees (FCOE), [Section 112.313](#) of the Florida statutes.

### **B. Higher Education Opportunity Act**

The Higher Education Act of 1965 (HEA) governs the administration of federal funding for higher education programs. The USF System must comply with HEA in order to remain eligible for Title IV funding from the U.S. Department of Education and for funding from other federal agencies sponsoring USF System research projects. The Higher Education Opportunity Act of 2008 (HEOA) amended HEA and includes compliance with the following federal laws:

- Jeanne Clery Disclosure of Campus Security Policy and Crime Statistics Act (Clery Act);
- Violence Against Women Act (VAWA) amendments to the Clery Act;
- Equity in Athletics Disclosure Act (EADA);
- Student Right to Know Act; and
- The Drug Free Schools and Communities Act (DFSCA).

For the purposes of this report, the term “HEOA” refers collectively to the above-listed federal laws and their associated regulations. HEOA requirements are complicated and often involve cross-jurisdictional compliance risks, e.g., regulatory risks affecting more than one university leadership area or more than one USF System institution.

During this reporting period, our Program continued to assist each institution within the USF System to meet their HEOA compliance responsibilities in accordance with [USF System Policy 0-233: Higher Education Opportunity Act Initiative: USF System, Portal, and Security & Fire Safety Reporting Compliance](#) (the “HEOA Initiative”) as follows:

- Coordinated, via each institution’s Clery Coordinator, with over 26 units to implement a procedure coordinating the creation of an HEOA-compliant Annual Security and Fire Safety Report for each institution in the USF System, which complies with the Clery Act and VAWA, including distribution of these reports to the U.S. Department of Education and all current USF System students and employees.
- Confirmed the USF HEOA portal complied with U.S. Department of Education HEOA disclosure requirements for this reporting period.
- Reviewed HEOA-required annual notices to students and employees summarized in the below table by notice type, federal law, and required recipient for compliance with federal law:

Notice Type	Federal Law	Required Recipient under Federal Law
Federal Student Financial Aid Penalties for Drug Law Violations	HEOA	All Current Students
Voter Registration Information	HEOA	
Institutional and Financial Aid Information	HEOA	
Drugs and Alcohol Abuse Prevention Programs	DFSCA	All Current Students and Employees
Availability of the Annual Security and Fire Safety Report (ASR)	Clery VAWA	All Current Student and Employees

## Elements 3 & 4: Create a Fair and Ethical Culture & Open Lines of Communication

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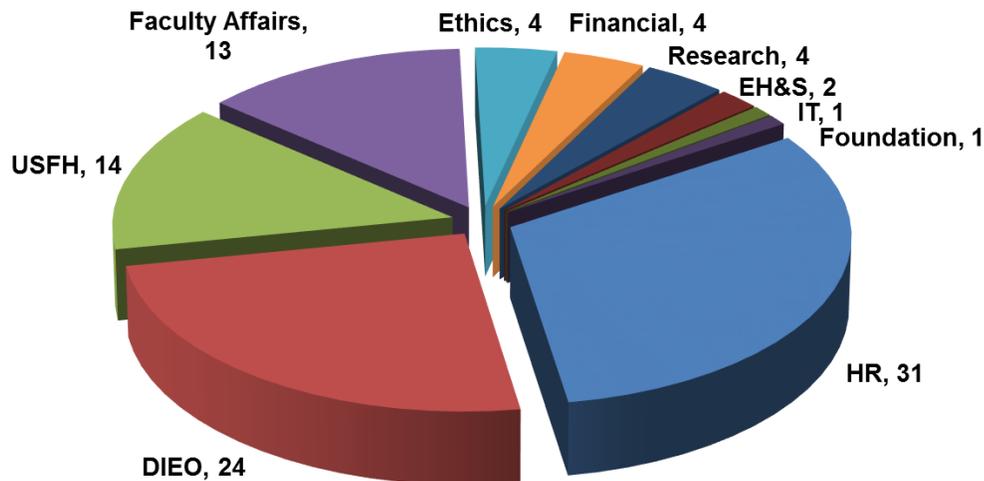
Under the provisions of [USF System Regulation 5.001: Waste, Fraud, or Financial Mismanagement Prevention and Detection](#), all USF System managers and their employees are responsible for preventing, detecting, and reporting waste, fraud, financial mismanagement, or other violations of USF System policy or regulation.

## EthicsPoint

EthicsPoint, our anonymous reporting hotline, serves as one of the primary tools assisting the USF System in this effort. Recent upgrades to EthicsPoint included several improvements and included consolidation of our hotline with the USF Foundation EthicsPoint Hotline into one, central USF System EthicsPoint Hotline.

For calendar year 2018, we received 98 unduplicated reports, which is consistent with the number of reports from recent reporting periods. Twenty-two percent of all reports were found to be “substantiated”, consistent with past reporting periods. Seventeen reports were referred, typically to the Office of Student Rights and Responsibilities (student code of conduct process), Title IX Office, Victim Advocacy, or the University Medical Service Association (UMSA).

### ETHICSPPOINT REPORTS



	Substantiated	Unsubstantiated	Referred/ Transferred	Open	Total
HR	10	12	4	5	31
DIEO	-	15	7	2	24
USFH	4	5	3	2	14
Faculty Affairs	4	6	2	1	13
Ethics	1	3	-	-	4
Financial	-	1	1	2	4
Research	1	3	-	-	4
EH&S	1	-	-	1	2
IT	1	-	-	-	1
Foundation	-	-	-	1	1
<b>Total</b>	<b>22</b>	<b>45</b>	<b>17</b>	<b>14</b>	<b>98</b>

During this reporting period, our Program publicized EthicsPoint via the following mechanisms:

- Included EthicsPoint, USF Regulation USF5.001, and USF System Policy 0-027 education in new employee orientation;
- Provided EthicsPoint posters to departments and encouraged their prominent display throughout our campuses; and
- Included EthicsPoint information in the training component of the Florida Code of Ethics (FCOE) form in the eDisclose System.

## Element 5: Education and Training

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### A. Compliance & Ethics Training for New Employees

Our Program provides compliance and ethics training or training content to new USF System employees as follows:

- Online compliance and ethics training required of new USF Tampa administration and staff employees attending new employee orientation, a program administered by the Division of Human Resources (DHR).
- Live trainings provided periodically throughout the year, based on hiring volume, to new USF St. Petersburg (USFSP) faculty, administration, and staff employees attending orientation, a program administered by USFSP Human Resources.
- One-on-one orientation sessions with new USF Sarasota-Manatee (USFSM) faculty, administration, and employees provided by USFSM Human Resources using materials provided by our Program.

### B. Compliance & Ethics Training for Current Employees

Certain USF System employees are required to complete an annual Florida Code of Ethics (FCOE) disclosure in eDisclose, our online disclosure and review system. This disclosure includes education on current FCOE, nepotism, and outside activity prohibitions and restrictions under the FCOE and [USF System Policy 0-027](#). The following employee position types must annually complete this disclosure:

- All Faculty;
- All Administration employees;
- Staff employees issued a procurement card (PCard) or role in FAST (our financial accounting system); and
- Temporary employees issued a PCard or FAST role.

During 2018, 6,224 FCOE disclosures were submitted by current USF System faculty, administration, staff, and temporary employees in eDisclose. This translates to 5,759 individual USF System employees receiving FCOE, nepotism, and outside training during the 2018 calendar year.

Our program also provided additional live, department-level FCOE, nepotism, and outside activity training to several operating units, including the College of Pharmacy, the USF Health Department of Surgery, and Campus Recreation.

## **Element 6: Detection, Remediation, and Enforcement**

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The USF Compliance and Ethics Program continues to work with compliance units to detect compliance gaps. When such gaps are identified, our program convenes multidisciplinary teams to develop and implement cross-jurisdictional policies and procedures aimed at addressing compliance gaps, including enforcement.

### **A. Protection of Minors on Campus/Summer Programs**

The new process for ensuring background screenings for summer camps/programs contained in [USF System Policy 0-029](#) and its attendant procedures implementing a coordinated approach continued to be highly effective during the summer of 2018. Units involved included the Division of Human Resources (DHR), which bears the heaviest load in the process, as well as the Office of the General Counsel, the Phyllis P. Marshall Student Center, Housing & Residential Education, Campus Recreation, USF Athletics, USF Health, and Innovative Education. Over 40 USF programs and a like amount of non-USF camps utilizing our facilities were successfully processed through the DHR during summer 2018. USF System Compliance & Ethics will continue to monitor the background clearance process. In addition, a new [USF System Policy 6-038](#) was implemented by USF Environmental Health & Safety establishing guidelines for minors visiting, working, volunteering, or conducting research in “hazardous areas” on campus such as laboratories and machine shops.

### **B. Form One Financial Disclosure**

In 2018, the USF System Compliance & Ethics Program assumed USF System-wide responsibility for ensuring compliance with Fla. Stats. 112.3145 Financial Disclosure. In furtherance of this responsibility, a new Procedure (SOP 5) was developed and implemented defining roles and responsibilities for Form One disclosure by “specified state employees” (VPs, Deans, etc.), “state officers” (board members), and “purchasing agents”. Effective processes to ensure institutional compliance with Form One disclosure requirements is particularly important for our employees, as failure to timely file such disclosures can result in fines of \$25 per day.

### **C. Intercollegiate Athletics Document Review**

Our Program was tasked with assessing the USF System’s readiness for a site visit by the National Collegiate Athletic Association (NCAA) or the National American Athletics Conference (“The American”). Our program and USF Athletics Compliance co-developed a Documentation Analysis tool. This tool identifies key documents

Intercollegiate Athletics would be expected to provide should the NCAA or The American request a site visit. A baseline analysis was completed in June 2017 by a cross-jurisdictional workgroup including, but not limited to, USF Athletics, Office of the Registrar, Financial Aid, Admissions, Human Resources, and Information Technology. During 2018, our Program continued assisting workgroup members in the bringing their documentation and associated processes into compliance with NCAA rules and best practices. This project is ongoing.

## Element 7: Risk Assessment, Audit, and Monitoring

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The USF System Compliance & Ethics Program is available to perform compliance reviews, risk assessments, and other consulting projects when compliance gaps are known or suspected. Compliance gaps can arise when the USF System has no known internal controls or the existing controls are not consistent with the law or industry best practices. Such reviews, assessments, and projects performed by the Program aim to bring the process or unit into compliance and, thereby mitigate risk to the institution. Below is a discussion of compliance reviews, risk assessments, and other consulting projects performed by our Program this reporting period:

### A. General Data Protection Regulation

Effective May 25, 2018, the General Data Protection Regulation (GDPR) provides data protection and privacy rights for personal data processing for all individuals located within the European Union (EU) and the European Economic Area (EEU); and all EU citizens regardless of their location when their personal data is processed. Institutions failing to comply with the GDPR may be subjected to significant fines of up to €10M (\$11.3M) or 2% annual global turnover, whichever is higher. For example, the EU recently fined Google \$56.8M for violating two provisions of the GDPR: lack of transparency and not having the legal basis to process user data for certain personalized advertisements.

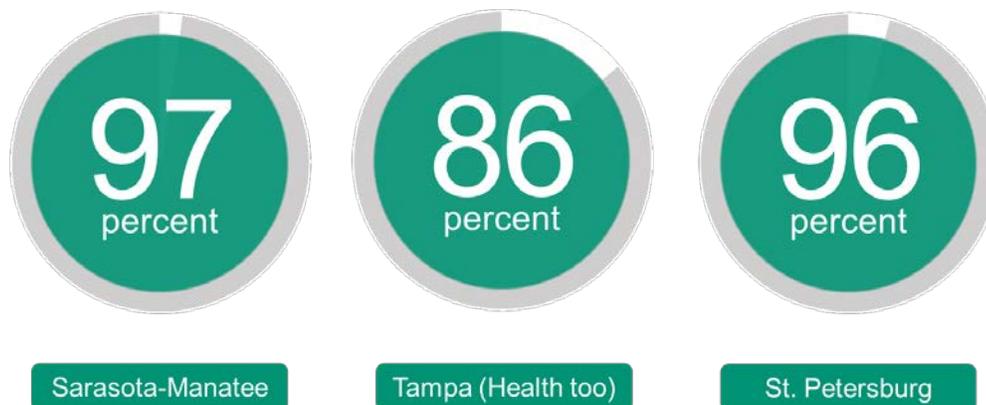
USF System functions affected by the GDPR include, but are not limited to, Admissions, Office of the Registrar, Study Abroad, Development, and Alumni Relations. The USF System Compliance & Ethics Program partnered with the Office of the General Counsel to implement a GDPR education and assessment strategy based on National Association of College and University Attorneys (NACUA) and ISACA (information systems) guidance. This strategy included the following steps:

1. Identification of applicable requirements;
2. Development of compliance assessment tools;
3. Training unit representatives
4. Units' self-assessment;
5. Compliance reviews; and
6. Policy and procedure updates.

Our Program continues to provide compliance guidance and assistance to university units with functions that are subject to the GDPR. This project is ongoing.

## B. Annual FCOE Disclosure Compliance Monitoring

Our Program continues to monitor USF System employee compliance with the annual Florida Code of Ethics (FCOE) disclosure requirements set forth in USF System Policy 0-027. On the second Tuesday of every month, our Program sends senior managers an FCOE Disclosure Compliance Report (FCOE Report) identifying all USF System employees under their purview who are required to complete an annual FCOE disclosure and whether or not they have done so within the past 12 months. Senior managers and their designees then follow up with noncompliant employees to ensure they complete their annual FCOE disclosure in eDisclose. During 2018, this monitoring by our Program and subsequent follow up by senior managers resulted in an overall FCOE disclosure compliance rate of 87% for the USF System. The percentage of USF System employees who met their annual FCOE disclosure requirement in the eDisclose system is provided below, by institution:



## C. DFSCA Compliance Review

The Drug Free Schools and Communities Act (DFSCA) requires the USF System to perform a biennial review of its drug and alcohol prevention programs in order to remain eligible for Title IV funding. This review results in a Biennial Drug and Alcohol Prevention Program Report (Biennial AOD Report). During 2018, the Center for Student Well Being, a department of Student Affairs & Student Success, requested a compliance review of their 2016 Biennial AOD Report, which they intended to use as a template for their 2018 report. Our Program reviewed the 2016 report for compliance with DFSCA and U.S. Department of Education best practices. Identified compliance gaps were provided to the Center for Student Well Being. Our Program provided advice and guidance on how to develop a best practice standard operating procedure for the creation of future Biennial AOD Reports.

## Element 8: Assessment of Effectiveness

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Under BOG Regulation 4.003, the CCO is required to provide an Annual USF System Compliance & Ethics Program Report (“Annual Report”) on the effectiveness of the Program to the BOT. Any Program Plan revisions, based on the CCO’s Annual Report, must be approved by the BOT. Copies of this Annual Report and revised Program Plan are provided to the BOG. This Annual Report fulfills our annual reporting requirement on the effectiveness of the USF System Compliance & Ethics Program to the Board. No revisions to our Program Plan, based on this Annual Report, are recommended by the USF System Compliance & Ethics Program at this time.