

UCONN HEALTH

JOINT AUDIT & COMPLIANCE COMMITTEE MEETING

MARCH 4, 2021

PUBLIC SESSION

Meeting held by WebEx:

https://uconn-cmr.webex.com/uconn-cmr/j.php?MTID=m1480d2b480db53f512ba5a61fae03aba

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Agenda

10:00 am - 10:45 am - Executive Session / 10:45 am - 12:00 pm - Public Session

Meeting held by Webex: https://uconn-cmr.webex.com/uconn-

cmr/j.php?MTID=m1480d2b480db53f512ba5a61fae03aba

(Note: this meeting will be recorded)

То	pic	Proposed Action	Attachment
Exe	ecutive Session to discuss: $C \in C = 1.200(C)[5]$. Breliminary drafts or notes that the public econory has determined that the public's	Review	None
•	C.G.S. 1-200(6)[E] – Preliminary drafts or notes that the public agency has determined that the public's interest in withholding such documents clearly outweighs the public interest in disclosure. [1-210(b)(1)]		
•	C.G.S. 1-200(6)[E] – Records or the information contained therein pertaining to strategy and negotiations with respect to pending claims [1-210(b)(4)]		
•	C.G.S 1-200(6)(E) – Records, reports and statements privileged by the attorney-client relationship. [1-210(b)(10)]		
•	C.G.S. 1-200(6)[C] – Records of standards, procedures, processes, software and codes not otherwise available to the public, the disclosure of which would compromise the security and integrity of an information technology system. [1-210(b)(20)]		
	GENERAL		
1.	General		
	Opportunity for Public Comments*		None
	Minutes of the December 16, 2020 JACC Meeting	Approval	1.1
	AUDIT		
2.	External Audit Activities		
	Status of External Audit Engagements	Update	2.1
	 CohnReznick – UCONN 2000 Construction Projects Substantially Complete FY20 	Presentation	None
	CohnReznick – Student Recreation Center Project Substantially Complete FY20	Presentation	None
	CohnReznick – Agreed-Upon Procedures on UConn 2000 Construction Expenditures FY20	Presentation	None
	CohnReznick – Agreed-Upon Procedures on Tech Park - IPB Construction Expenditures FY20	Presentation	None
	 UConn and UConn Health Financial Statements for Fiscal Year Ended June 30, 2020 were Issued and Posted on Their Respective Websites <u>https://controller.uconn.edu/</u> and <u>https://health.uconn.edu/finance/accounting/overview/financial-reports/</u> 	Informational	None
3.	Significant Internal Audit Activities		
	Status of Audits	Update	3.1
	Status of Audit Findings	Update	3.2
-	COMPLIANCE		
4.	Compliance Activities	Lin data	
	Significant Compliance Activities	Update	4.1
	Informational/Educational Items	Informational	4.2
5.	INFORMATION TECHNOLOGY Information Technology Update		
э.	UConn Health	Update	5.1
	UConn Health UConn	Update	5.2
	CLOSING	opuate	5.2
6	Conclusion of Full Meeting		

6. Conclusion of Full Meeting

* If members of the public wish to address the Committee during the Public Participation portion of the meeting, you must submit a request in writing 30 minutes prior to the start of the meeting (by 9:30 a.m.) to the following email address: <u>BoardCommittees@uconn.edu</u>. Please indicate your **name, telephone number, and topic** to be discussed. Per the University By-Laws, the Board may limit public comment. As an alternative, you may also submit your comments via email which will be shared with the Board.

The next meeting of the JACC will be held on June 10, 2021 at 10:00 am

ATTACHMENT 1.1

DRAFT

University of Connecticut & UConn Health Joint Audit & Compliance Committee Meeting

Minutes of the December 16, 2020 Meeting

Telephone Meeting

Attendees	
Trustees/ Directors:	Chair: M. Boxer, A. Dennis-Lavigne, B. Pollard, D. Toscano, F. Archambault, J. Gouin, T. Holt
Staff:	 A. Agwunobi, J. Blumenthal, P. Casey, N. Fuerst, N. Gelston, J. Geoghegan, S. Jordan, T. Katsouleas, A. Keilty, M. Kirk, R. Maric, R. Rubin, J. Simpson, J. Shoulson, O. Andujar, T. Dyer, K. Fearney, E. Gallo, S. Guralnick, K. Goss, K. Hill, M. Kennedy, F. LaRosa, C. Murray, L. Neal, G. Perrotti, A. Quaresima, K. Violette, E. Vitullo, E. Zincavage, C. Bernard, C. Gray, M. Mundrane, C. Podesta, N. Eskin, M. O'Connor, N. Patrylak, C. Bianchi, W. Byerly, L. Cruickshank, A. Cunningham, G. Daniels, C. Delello, M. Frank, L. Hansen, M. Jednak, M. Lucas, K. Rourke, K. Sadowski, W. Thorpe, B. Woodaman, R. Wrynn
State Auditors	W. Felgate
Marcum	C. Jackson
вкр	A. Kerr, M. McKinley

The meeting of the Joint Audit and Compliance Committee (JACC) was called to order at 10:01 a.m. by Committee Chair Boxer.

ON A MOTION made by Committee Chair Boxer, approved by Director Holt and seconded by Trustee Dennis-Lavigne, the JACC voted to go into executive session to discuss:

- C.G.S. 1-200(6)[E] Preliminary drafts or notes that the public agency has determined that the public's interest in withholding such documents clearly outweighs the public interest in disclosure. [1-210(b)(1)]
- C.G.S. 1-200(6)[E] Records or the information contained therein pertaining to strategy and negotiations with respect to pending claims
- C.G.S. 1-200(6)[E] Records, reports and statements privileged by the attorney-client relationship. [1-210(b)(10)]
- C.G.S. 1-200(6)[C] Records of standards, procedures, processes, software and codes not otherwise available to the public, the disclosure of which would compromise the security and integrity of an information technology system. [1-210(b)(20)]

Executive Session was attended by the following: JACC, BOT and BOD members: M. Boxer, A. Dennis-Lavigne, B. Pollard, D. Toscano, F. Archambault, J. Gouin, T. Holt; **President and Cabinet members:** A. Agwunobi, M. Kirk, N. Fuerst, N. Gelston , R. Rubin, R. Maric, S. Jordan, T. Katsouleas **Senior Staff:**, A. Keilty, J. Simpson, J. Blumenthal, J. Geoghegan, J. Shoulson, P. Casey; **AMAS Staff:** T. Dyer, E. Gallo, K. Goss, M. Kennedy, F. LaRosa, C. Murray, G. Perrotti, A. Quaresima, K. Violette, E. Zincavage; **University Compliance Staff** O. Andujar, K. Fearney, S. Guralnick, K. Hill, L. Neal, E. Vitullo; **Portions of Executive Session were also attended by:** C. Bernard, C. Gray, M. Mundrane, C. Podesta, A. Kerr, M. McKinley.

The Executive Session ended at 10:38 a.m., the JACC returned to public session at 10:39 a.m.

DRAFT

University of Connecticut & UConn Health Joint Audit & Compliance Committee Meeting

Minutes of the December 16, 2020 Meeting

Telephone Meeting

<u> Tab 1 - General</u>

There were no public comments.

ON A MOTION made by Committee Chair Boxer, approved by Trustee Gouin and seconded by Trustee Dennis-Lavigne the minutes of the September 10, 2020 JACC meeting were approved.

Tab 2 – External Audit Activities

F. LaRosa provided an update on the ongoing external engagements.

ON A MOTION made by Committee Chair Boxer, approved by Trustee Dennis-Lavigne and seconded by Trustee Gouin the Pharmacy Optimization Consultants, INC DBA 340b Compliance Partners- audit of UConn Health's remaining covered entity 340b drug pricing program was approved.

F. LaRosa presented the BKD independent accountant's report on applying agreed-upon procedures performed on the division of athletics as required by NCAA bylaw 3.2.4.17.1 year ended June 30, 2020.

C. Jackson from Marcum presented the financial statements audit for fiscal year ended June 30, 2020 of UConn Health's John Dempsey Hospital, University Medical Group, and Finance Corporation.

Tab 3 – Significant Internal Audit Activities

F. LaRosa provided an update on the status of audit assignments.

F. LaRosa provided an update on the status of audit findings.

Tab 4 – Compliance Activities

K. Fearney provided an update on compliance activities.

K. Fearney provided an update on university compliance data and trends.

Tab 5 – Information Technology Updates

C. Podesta provided an update on UConn Health IT projects.

M. Mundrane provided an update on the UConn IT projects.

There being no further business, **ON A MOTION** made by Committee Chair Boxer, approved by Trustee Dennis-Lavigne and seconded by Trustee Gouin, the meeting was adjourned at 11:12 a.m.

Respectfully submitted, Molly Kennedy

ATTACHMENT 2.1

March 4, 2021

Status of External Audit Engagements

A 1*:			Audit	Status		Status	of Findin	gs	
Auditor	Area	Scope	Period		Total	Closed	Open	Disagreed	
Marcum, LLP	UConn Health	Financial Statement Audit	FY 20	Report Issued 12/16/20		No Findings Reported			
BKD	UConn Athletics	NCAA agreed upon procedures performed on all revenues, expenses, and capital expenditures for, or on behalf of, the Athletics Program	FY 20	Report Issued 12/21/20	No Findings Reported				
CohnReznick, LLP	UConn & UConn Health	Annual audit of UCONN 2000 substantially completed projects and agreed upon procedures	FY 20	Report to be presented at the 3/4/21 meeting					
Pharmacy Optimization Consultants	UConn Health	Audit of UConn Health's Covered Entities 340B Drug Pricing Program required by Health Resources and Services Administration	CY 20	Audits are underway					
State Auditors	UConn	Annual Audit of Federal Funds required under the Federal Single Audit Act	FY 20	Audit is underway					
State Auditors	UConn Health	Annual Audit of Federal Funds required under the Federal Single Audit Act	FY 20	Audit is underway					
State Auditors	UConn	Annual audit of financial statements included in the Comprehensive Annual Financial Reports	FY 20	Report Issued 12/30/20		No Findir	ngs Repoi	rted	
State Auditors	UConn Health	Annual audit of financial statements included in the Comprehensive Annual Financial Reports	FY 20	Report Issued 1/8/21	No Findings Reported			rted	
State Auditors	UConn	Departmental Statutory Required Audit (CGS Sec 2-90)	FYs 16, 17, 18	Audit is underway					
State Auditors	UConn Health	Departmental Statutory Required Audit (CGS Sec 2-90)	FYs 17, 18	Report Issued 7/7/20	14	10	2	2	

ATTACHMENT 3.1

Office of Audit and Management Advisory Services Status of Audits As of January 29, 20210

		Current	A	nticipated J	ACC Meeti	ıg
Audits Approved in the 2021 Audit Plan	Campus	Status	Dec 2020	Mar 2021	Jun 2021	Sep 2021
Accounting for Equipment Upon Faculty Separation	UC/UH	Fieldwork			Ĭ	
CARES Act Funding – UConn	UC	Fieldwork			Ĭ	
CARES Act Funding – UConn Health	UH	Fieldwork			Ĭ	
UConn Compensatory Time	UC	Planning				I
UConn Health Compensatory Time	UH	Planning				Ĭ
Environment of Care Project	UH	Draft				
Epic Application Security	UH	Fieldwork				Ĭ
IT Change Control Management	UH	Fieldwork				Ĭ
Financial Conflict of Interest in Research	UC/UH	Final Draft		Ĭ		
Faculty Consulting for the Period July 1, 2019 through June 30, 2020	UC/UH	Draft			Ĭ	
Injections and Infusions	UH	Fieldwork				I
International Employees, Students & Visitors	UC/UH	Fieldwork				
Indirect Cost Recovery Revenues from Grants	UC/UH	Planning				Ĭ
Pathology	UH	Final Draft				
Psychiatric Outpatient Services	UH	Draft				
Review of NW Science Quad Supplemental Utility Plant	UH	Planning				Ī
School of Business Entrepreneurial Programs on Stamford Campus	UC	Fieldwork			Ĭ	
Student Health Services Electronic Prescriptions	UC	Fieldwork				Ĭ
UConn Telecommuting Cybersecurity Controls	UC	Final Draft		Ĭ		
UConn Health Telecommuting Cybersecurity Controls	UH	Fieldwork			Ĭ	
University of Connecticut Foundation FY20	UC/UH	Final Draft		Ĭ		
Athletics Travel	UC	Completed				
Clinical Conflict of Interest	UH	Completed				
Review of Selected Notices Required by Medicare	UH	Completed				
University Catering	UC	Completed				
Management Advisory and Consulting Services						
USG Student Group Funding Request	UC	Completed				

ATTACHMENT 3.2

Status of Audit Findings

Aging of Overdue Management Actions by Functional Area Based on Original Due Date As of January 31, 2021

	<u> </u>										1									
Audit Area	r	Not Du	le	0-3	Mos	3	-6 Mc	s	6	12 M	os	:	1-2 Yr:	s	2-3	Yrs	:	> 3 Yrs	5	Total
	L	м	н	L	м	L	м	н	L	м	н	L	м	н	L	м	L	м	H	
UConn																				
Athletics		3		4			1			2			5				3			18
College of Agriculture, Health and Natural Resources												1								1
Center for Students with Disabilities													1							1
Controller	1	3		6						1			1							12
Dining Services	1				4												1			6
Environmental Health and Safety										1										1
EVP of Administration and CFO				2									2							4
Facilities Operations										7						4	1	1		13
Human Resources																	1	2		3
Information Technology Services	1	1	3	1								1					4	1	1	13
Labor Relations																	1			1
Office of Institutional Equity						1			2	4										7
Office of the Provost				1								1	2							4
OVPR																	1			1
President's Office		1											1							2
Procurement										1		4	2		1	1	3	1		13
Public Safety																1		1		2
School of Law															1					1
School of Nursing									2						-					2
Sponsored Program Services									1											1
Student Activities	2			2					-											4
Student Affairs Administration	2			2		1	2		6	3		1								13
University Planning, Design and Construction						-	2		0	5		-	2							2
	_	0	-	46		2	2			40		•			2	6	45	6	-	
UConn Total	5	8	3	16	4	2	3	-	11	19	-	8	16	-	2	6	15	6	1	125
UConn Health																				<u> </u>
		7																		-
Ambulatory Care																				7
CEO and EVP for Health Affairs		1			1								2		2		4			2
Controller										1		1	2	1	2		1			8
Environmental Health and Safety																	1	2		3
Epic		1			2															3
Facilities and Grounds Operations								1												1
Human Resources						1						2	1		4	1	2			11
Information Technology Services		2	2		1	2	4	3	2	9	5		1							31
JDH Administration		2		1	13				1	10	1	1			1					30
JDH and UMG Revenue Cycle Management		3								3		3	4	1						14
JDH Pharmacy													1							1
JDH Quality and Patient Services		1																		1
OVPR			1																	1
Procurement						1														1
School of Dental Medicine				1					1	4		3			1		2			12
School of Medicine											3	2			3					8
UConn Medical Group																	1			1
UConn Health Total		17	3	2	17	4	4	4	4	27	9	12	9	2	11	1	7	2		135
Grand Total	5	25	6	18	21	6	7	4	15	46	9	20	25	2	13	7	22	8	1	260

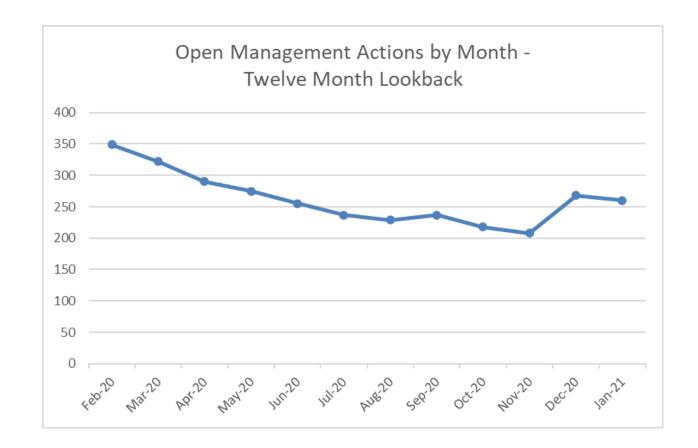
Status of Audit Findings

Aging of Overdue Management Actions by Finding Category Based on Original Due Date As of January 31, 2021

Finding Category		lot Du	e	0-3	Mos	3	8-6 Mc	s	6	-12 M	os	:	1-2 Yr:	s	2-3	Yrs	> 3 Yrs		5	Total
Finding Category	L	м	н	L	м	L	м	н	L	м	н	L	м	н	L	м	L	м	н	
UConn																				
Business Process Improvement	4	6		4	4	1	2		1	1		2	2		1	3	3	3		37
Business Purpose																	2			2
Documentation				3					2	1		1	3							10
Governance									2	1		1								4
Management Oversight									2	3		2	5							12
Monitoring							1		2	1		1				1				6
Physical Security of Assets										1							1			2
Policy	1	1		7		1				2		1	2			2	2	2		21
Regulatory Compliance									2	3			3				7		1	16
Security			3							6			1					1		11
Segregation of Duties				1																1
Use of Resources		1		1											1					3
UConn Total	5	8	3	16	4	2	3		11	19		8	16		2	6	15	6	1	125
UConn Health																				
Business Process Improvement		1			3	1	3			2		3	2	2	7		3	1		28
Documentation						2			2	7		1			1					13
Governance																1				1
Management Oversight		2			1						1	3	3							10
Monitoring		3			2					2			1		1		1			10
Physical Security of Assets					1			2												3
Policy		2		2	7		1	1	1	3		2	2		1					22
Regulatory Compliance		4								1							3	1		9
Security			2					1		7	3		1							14
Technology		3			2					2	5	1			1					14
Training		2			1							1								4
Use of Resources			1			1			1	3		1								7
UConn Health Total		17	3	2	17	4	4	4	4	27	9	12	9	2	11	1	7	2		135
Grand Total	5	25	6	18	21	6	7	4	15	46	9	20	25	2	13	7	22	8	1	260

* Two high risk actions that were outstanding for more than three years were closed since the prior meeting.

Status of Audit Findings Trend Analysis of Monthly Balances of Open Management Actions As of January 31, 2021



Analysis:

The increases in September 2020 and December 2020 were the result of 27 and 67 management actions, respectively, required to resolve new observations identified in audits that went final. There were no increases in March or June, the other two months in which audit reports went final, because the number of management actions closed exceeded the number of new required management actions.

The effective collaboration between UConn and UConn Health and AMAS reflects a continued commitment to resolving outstanding open actions, as depicted in the downward trend in the above line graph minus the upticks for new required actions.

Status of Audit Findings Management Actions Closed By Functional Areas by Risk Level For the Period November 1, 2020 to January 31, 2021

	Area Required to be Audited Annually	Im	plemen	ted	No Longer Applicable	Risk Acceptance	Total
	L	L	м	н	м	L	
UConn							
Athletics		1					1
Dining Services			3				3
Environmental Health and Safety		1					1
EVP of Administration and CFO		1					1
Facilities Operations			1				1
Information Technology Services			3				3
Office of the Provost	1						1
Public Safety				2			2
Student Activities		1				2	3
Student Affairs Administration				1	1		2
UConn Total	1	4	7	3	1	2	18
UConn Health							
Epic			1				1
JDH Administration		2	1				3
JDH and UMG Revenue Cycle Management			1				1
School of Medicine		1	1				2
UConn Health Total		3	4				7
Grand Total	1	7	11	3	1	2	25

Status of Audit Findings Risk Level Descriptions

Rating Level Descriptions:

- L (Low): Meaningful reportable issue for client consideration that in the Auditor's judgment should be communicated in writing. The finding results in minimal exposure to UConn or UConn Health and has little or no impact on the UConn's or UConn Health's compliance with laws and regulations. The issues related to this control weakness will typically not lead to a material error.
- M (Medium): Significant exposure to the area under review within the scope of the audit. The finding results in the potential violation of laws and regulations and should be addressed as a priority to ensure compliance with UConn's or UConn Health's policies and procedures. The significance of the potential errors related to this control weakness makes it important to correct.
- H (High): Significant exposure to UConn or UConn Health that could include systemic UConn or UConn Health wide exposure. The finding could result in a significant violation of laws and regulations and should be viewed as a highest priority which UConn or UConn Health must address immediately.

ATTACHMENT 4.1

University of Connecticut & University of Connecticut Health Center Joint Audit & Compliance Committee Meeting

SIGNIFICANT COMPLIANCE ACTIVITIES

Faculty and Staff Training – University Compliance launched the 2021 Annual Compliance and Ethics Training season for the Storrs and Regional campuses, providing an online module as well as live WebEx training sessions. Training modules incorporated realistic scenarios, interactive video clips, and opportunities for the user to demonstrate mastery of the concepts through knowledge-check questions. Additional details and preliminary results from the post training survey are included in the packet.

Investigations – As of February 11th, University Compliance received 13 reports through the REPORTLINE since the start of 2021. The 2020 calendar year closed out with a total of 79 reports (87% are closed). Of the reports submitted in 2020, 28% were related to COVID-19 concerns.

Education and Awareness – University Compliance hosted two WebEx Events with colleagues from UCPD and the Minor Protection Program, providing professional development and engagement for the UConn and UConn Health campuses. Such topics were also featured in the Compliance Chatters, along with other Health and Safety topics, including reminders on Safety Data Sheets.

Compliance Monitoring - University Compliance continues to work on monitoring efforts related to the Drug Free Schools and Campuses Act. It has also initiated the monitoring process with the OVPR on Export Controls and the OIE on Title IX for both the Storrs and UConn Health Campus. Additionally, University Compliance is conducting internal monitoring on the effectiveness of policies and procedures.

Office of Healthcare Compliance and Privacy – In addition to using new monitoring technology to detect coworker snooping, Healthcare Compliance and Privacy began monitoring for "household snooping" (i.e., unauthorized access to medical records of family and other household members).

Privacy Update - University Compliance is partnering with UConn Storrs's HIPAA Covered Components to create a new training program. Additionally, Compliance expects to customize HIPAA training for additional groups with access to Protected Health Information, such as students in clinical placements and researchers.

Policy Update – University Compliance will be disseminating a snap-survey to the UConn and UConn Health communities to gather information on the effectiveness of policies and procedures for both campuses. The survey was designed based on the DOJ and HCCA effectiveness guidelines and results will be reviewed and analyzed for opportunities to make enhancements to the overall policy program as well as for areas of needed education.

2021 UConn Compliance Training (Storrs & Regionals) General Updates and Preliminary Survey Results As of February 8th, a total of 99 survey responses were received

General Details

General Details								
La	aunch Date	Tra	aining Length	Training	Completions as of 2/8/2021			
2	/1/2021	45 -	50 minutes		595			
The 2021 UConn Complia earlier than in 2020.	nce Training launched 2 weeks	Guide to the State Code included an enhanced se	e University's Code of Conduct, and of Ethics, this year's training ction on the seven elements of the new information about the reporting process.	12% of required employees completed the 2021 Compliance Training within the first week. 16% of those who completed the training, participated in OUC's post training survey.				
Feedback Related t	o the Effectiveness of the T	raining Delivery Met	hods					
Effectiveness	of the Delivery Method		participants provided comments regoral Perceptions		with the training delivery method Emergent Themes			
	41% 41% 1%	nature. 14% of comment 11% of survey participant	Unfavroable 11% Neutral 14% s shared (75%) were positive in s were neither positive nor negative. ts provided critical feedback, which	Effective Design & Delivery 449 25% Non-Applicable Content 8% 8% Design Issues 6% 6% Navigation Issues 3% *LMS - Refers to Learning Management System Most of the favorable feedback provided on the training delivery, an content. Preliminary results suggests that there might be				
Other Key Metrics		OUC plans to consider in	future trainings.	applicability and user inte	consideration in the areas of content erface with the LMS.			
	ants provided comments on the of the training content		cipants shared 1-3 things they about the training		participants shared 1-3 things they keep about the training			
Content Applicable 79%	Content Not Applicable 10% Content Somewhat Applicable	4: Scen	sign 2% Content 28% arios 1%	N/A 53%	Course Length 7% Design - Text Size 14% Content Applicability 26%			
most (90%) expressed that	that responded to this question, at the training content was directly ir position, role, or responsibilities		rall design, new scenarios, and o Ethics and the Reportline as the ley valued.	participants said "N/A".	opportunity to do so, over 53% of Training elements that were named in this a applicability, the length of the course, and			
	overed in the training sy to understand		ed in the training enhanced understanding		inclusive and was designed to ess a diverse audience			
Strongly Agree	55%	Strongly Agree	50%	Strongly Agree	57%			
Agree	40%	Agree	45%	Agree	32%			
Neutral	5%	Neutral	4%	Neutral	9%			
Disagree	0%	Disagree		Disagree	1%			
Strongly Disagree	0%	Strongly Disagree		Strongly Disagree				
Most participants (95%) a this year's training were ea	greed that the materials covered in asy to understand.	retention, real life scenari year's training. Preliminar	oyees and promote knowledge os were included throughout this y survey results reveal that this has among 95% of participants.	89% of participants felt the considred the University	hat the 2021 training was inclusive and 's diverse workforce.			
	to think more deeply about the epts covered		oughout the training contributed lerstanding of the concepts					
Strongly Agree Agree Neutral Disagree Strongly Disagree	1%	Strongly Agre Agre Neutra Disagre Strongly Disagre	e 42% al 12% e 1%	throughout the 20 Results will b effectiveness of ou training modules.	nue to gather this type of feedback 021 Compliance Training season. e assessed to determine the ur synchronous and asynchronous Additionally, we hope to consider			
	s felt that this year's training itical thinking about the covered	questions focused on lea learners with opportunitie materials and receive ad	led various types of assessment rning applicability. This provided s to reflect on the presented ditional guidance on key concepts. at this approach contributed to their		further enhance our training and n efforts moving forward.			

overall understanding.

ATTACHMENT 4.2

Key Takeaways

What is the Clery Act?

The Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act (Clery Act) is a federal mandate requiring all institutions of higher education (IHEs) that participate in the federal student financial aid program to disclose information about crime on all owned and controlled University property. The Clery Act affects virtually all public and private IHEs and is enforced by the U.S. Department of Education (ED). Campuses that fail to comply with the act can be penalized with large fines and may be suspended from participating in the federal financial aid program.

How are Clery crime statistics compiled and reported?

Campus crime, arrest, and referral statistics include those reported to the University of Connecticut Police, designated Campus Security Authorities (CSA) as defined under the Act, and local law enforcement agencies. These reports and statistics are compiled and published in the <u>Annual Security</u> and <u>Fire Safety Report</u>, which includes statistics for the previous three years concerning reported crimes.

The report also includes institutional policies on campus safety and security, policies concerning alcohol and drug use, crime prevention, the reporting of crimes, the reporting and investigation of sexual assault and other matters. In addition to crime statistics, the report also includes statistics on reported fires in student housing facilities.



Am I a CSA (Campus Security Authority)?

The law defines various people or positions as being Campus Security Authorities, or CSAs. These are people who are required to report Clery crimes. If your role or position at UConn/UConn Health falls under one of the below, you are a CSA and have reporting requirements.

1. University Police Department sworn personnel and department administrators;

2. Non-police individuals of offices responsible for campus security; *Examples: individuals with security presence or access control authority on university property such as buildings and grounds, security staff at events, ID checkers for entry/access, etc.*

3. Officials with significant responsibility for student and campus activities;

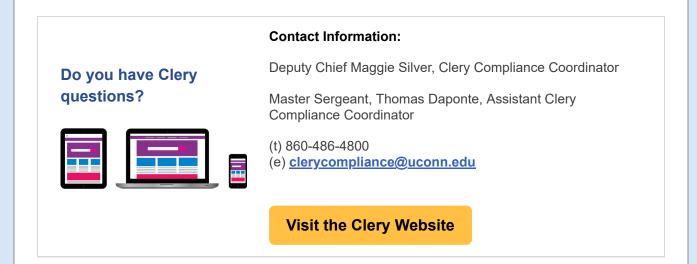
Examples: job functions that involve relationships with students, where the official has the authority and the duty to take action or respond to particular issues on behalf of the University such as Deans, Student Affairs Professionals, Housing staff, Athletics staff/coaches, faculty/staff advisors to student organizations, coordinators of student activities, etc.

As a CSA, what am I required to Report?

CSAs are encouraged to report any crime that has been reported to them, however, they are only required to report <u>Clery Act qualifying crimes</u> that occur on UConn/UConn Health owned or leased property, or surrounding areas.

CSAs are required to report regardless of whether or not the report has been substantiated or is simply alleged.

To report such crimes the <u>CSA Crime Reporting Form</u> can be submitted to the University's Clery Compliance Coordinator. When in doubt, report!



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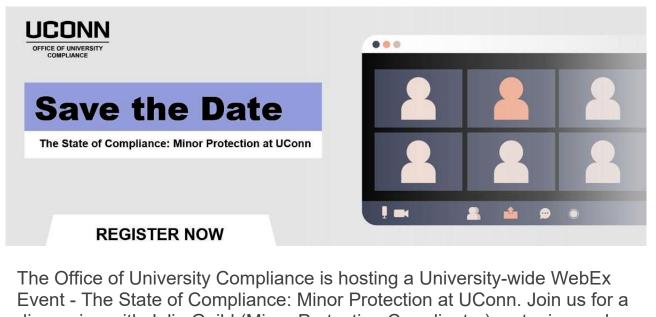
Office of University Compliance | Individual Responsibility • Institutional Success



The Office of University Compliance invites you to participate in a brief anonymous survey. Our goal is to learn more about how UConn Health employees view the University's compliance program as it relates to policies and procedures. The survey is completely voluntary and anonymous, should take less than 5 minutes, and you can skip any question. Click "<u>Start Here</u>" to participate. Thank you, in advance, for your participation and for helping us continue to enhance the culture of compliance at UConn Health.

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discussion with Julie Guild (Minor Protection Coordinator) on topics such as compliance with the Minor Protection Policy; minor protection in virtual settings; reporting obligations and what to expect; and guidance on how to plan proactively for youth programs at UConn and UConn Health. Click below to <u>register now!</u>



ATTACHMENT 5.1

Joint Audit & Compliance Committee – March 2021

UConn Health – Information Technology Services – Key Takeaways

- Budget YTD 12/31 1.5% under.
- Two positions open with one on hold for Financial Improvement Plan as of 12/31.
- One position, Director of Epic Ambulatory filled on 1/25.
- No outages since December meeting.
- Completed 4 of 12 projects since last meeting.
- Disaster Recovery project added as an audit response.
- 6 of 8 projects green and 2 are yellow.
- Marcum Cybersecurity Risk Assessment delayed until 2/28 due to Oct/2020 targeted ransomware response.
- Windows 7 replacement delayed due to funding issues but extra resources have been assigned to accelerate.
- Epic focus has been on vaccine roll-out.

University of Connecticut

Joint Audit & Compliance Committee Meeting

Public Session

March 2021

UConn Health – Information Technology Services

Financials FY2021 YTD 12/31 Operating

State Appropriation and Tuition Budget and Forecasted Expenditures:

Budget <u>\$26,001,399</u> Forecasted Personal Services and Fringe Benefits <u>\$18,483,043</u> Forecasted Operating Expenses <u>\$7,518,356</u> FY21 Actual <u>\$25,600,479</u> Variance <u>\$400,920</u> (Under)

Information Technology Staffing (as of 2/1/2021)

Open Positions, Positions on Hold, Terminations and the areas they represent.

- 1. Epic area: Credentialed Trainer for Revenue Cycle On hold for FIP
- 2. Directory of Epic Ambulatory Hired
- 3. Infrastructure Desktop Engineering– Technical Analyst 3

Outages (as of 2/1/2021)

Outage Taxonomy	# of Issues	Systems Affected

Total # of Outages: 0

UConn – IT Projects Status (as of 2/1/2021)

Project Name	Brief Project	Planned Budget	Actual Spend ¹	Status	Rational for	Expected
•	Description	°,	•		Yellow and Red	Completion
					Status	Date
Marcum Cybersecurity risk assessment	Cybersecurity risk assessment in accordance with industry standards and regulatory requirements	\$356,000	\$332,321	Yellow	Targeted ramsomware campaign diverted internal resources for several weeks	2/28/2021
Infinite Infrastructure Assessment	IT Infrastructure assessment to identify critical areas of need.	\$95,000	\$95,000	Green		11/30/2020 Completed

Epic vAUG20 Upgrade	Routine maintenance	0	0	Green	Twice per year	Completed January 2021
Epic vNov20 Upgrade	Routine maintenance	0	0	Green	Twice per year	April 2021
HDA Legacy Systems Archive	Multiple legacy clinical system's data to be archived into Harmony Health Data Archiver	0	0	Green	Routine maintenance	6/1/2021
POCUS Integration	Multiple point of care Ultrasound and x-ray devices to be integrated into Epic and PACS	\$647,695	\$458,435	Green	Has a financial ROI.	Completed
Windows 7 & Server 2008 Migration	Upgrade all Win7 desktops to Win10 and Server 2008 OS	\$2,500,000	\$929,328	Yellow	Putting together a plan to accelerate this project	Q2 2022
Employee Screening Kiosks	Safe passage kiosks to track employee entry into buildings that capture attestation of travel and temperature readings	\$311,850	0	Green	Rollout took place early January.	Q1 2021 Completed
Epic Mychart Bedside	Ability for patients to participate in their care.	0	0	Green	Scoping	Q3 2021
21 st Century Cures Act	Many phases including information blocking, ADT Event Notifications, Interoperability	0	0	Green		Q2 2021
Vaccine Rollout	Ability to use Mychart for employee and public vaccination program	0	0	Green	Implementation started in mid Dec/2020 and continuing	Q2 2021
Disaster Recovery – Audit Response	Addressing major issue in DR Audit to separate the redundant servers for backup system	\$30,000	\$27,987	Green		2/26/2021

ATTACHMENT 5.2

University of Connecticut

Joint Audit & Compliance Committee Meeting

Public Session

March 4, 2021

UConn – Information Technology Services

Financials FY2021 Operating

State Appropriation and Tuition Budget and Forecasted Expenditures:

Budget	<u>\$38.3M</u>
Forecasted Personal Services and Fringe Benefits	\$27.8M
Forecasted Operating Expenses	<u>\$ 10.5M</u>
Forecasted Carryforward	<u>\$.0M</u>

To date in FY2021 ITS's operating budget was cut by \$1.2M, our deferred maintenance budget was cut from \$2.0M to \$1.7M and our 5-year wired access layer refresh budget was decreased to \$4.2M (our original request was 5-years at \$6.0M per year and FY2021 is year 2). No further FY2021 budget reductions are anticipated at this time.

Also, in FY2021, ITS requested and will receive operating budget for a director of high-performance computing and \$1.6M for high performance capital investments.

Information Technology Staffing (as of 1/28/2021)

- ITS has one new open position for the Director of High-Performance Computing. This is a reposting due to a failed search.
- There have been no new hires since 11/10/2020.
- Effective 11/6/2020, three employees transitioned from the Hartford Campus IT Team to ITS's Campus Technology Department.
- Three Special Payroll positions were ended effective 12/31/2020 in the Enterprise Applications Department.
- Effective 2/1/2021, there will be a retirement in the High Performance Computing Department.

Since October 11, ITS has had seven employees separate:

- Two were retirements effective 12/31/2020 in the Enterprise Applications Department. One from the Admissions and Student Records unit and one from the Reporting and Data Management unit.
- One employee from the Enterprise Applications Admissions and Student Records unit separated on 12/31/2020 due to their H1-B visa expiring.
- One employee from the Enterprise Applications Reporting and Data Management unit separated on 1/18/2021.
- One employee from the Campus Technology Web Development unit separated on 1/5/2021.
- One employee was separated while under their UCPEA probationary period in the PeopleSoft Admissions/Student Records unit.
- One employee in CEN who was separated while under their UCPEA probationary period.

Outages (as of 10/1/20 - 12/31/20)

Outage Taxonomy	# of Issues	Systems Affected	
Network Issue - Hardware	3	Wireless (multiple buildings), Wired (multiple buildings),	
		Castleman	
Network Issue - Software	0		
Network Issue – Request Flood	0		
System Issue - Hardware	1	Digital Signage	
System Issue - Software	9	Student Admin, Wordpress/Aurora, HuskyCT, Anyware	
		Desktop, Kuali, Digital Signage, Daily Digest, Location Log	
Third Party	12	Kaltura, Huskybuy, O365, CoreCT, Touchnet, Google	
		Apps, Google Mail, Respondus, WebEx, Schedule Builder	

Total # of Outages: 25

Project Name	Brief Project Description	Planned Budget	Actual Spend	Status	Rational for Yellow and Red Status	Expected Completion Date
WALR FY 2020 Phase 1 (Including Gampel Wireless)	Upgrade all network equipment and wired access infrastructure for the University	\$6.000M	\$5.54M	COMPLETE		6/30/2020
WALR FY 2021 Phase 2	Upgrade all network equipment and wired access infrastructure for the University	\$4.200M	\$0.27M	GREEN	On track	6/30/2021
Concur	Implement travel and expense system	\$3.100M	\$1.099M	GREEN	Final module, Guest Travel, in progress.	4/30/2021
Peoplesoft Upgrade	Upgrade Peoplesoft Student System (Campus Solutions) to version 9.2	\$1.372M	\$0.912M	COMPLETE	On Time	12/31/2020
Parking	Upgrade Parking Software	\$0.413M	\$0.172M	YELLOW	DMV approval for cloud outstanding.	10/31/2021
HR Payroll Data Mart	First phase of HR Payroll data mart	\$0.156M	\$0.047M	YELLOW	Functional resource allocation lower than forecast	12/31/2021
Kuali Upgrade	Upgrade KFS 5.3 to "Current" code	Internal	Internal	COMPLETE	Ahead of schedule	9/26/2020
AIX Migration	Migrate all applications off of IBM AIX platform	Internal	Internal	GREEN		3/1/2021