Implementation Guide for Subject-specific Compliance Programs

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Texas Woman's University Compliance Guide For:

Compliance Partner: _____

Compliance Group/Sub-group/Department: _____

_____

Policy Vice-President: _____

Functional Office (if different from Group): _____

_____

Committee Name (if one exists for this Group): _____

_____

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Introduction and Overview

As a compliance partner you already know—very well—that compliance is part of your job and probably has been for a long time. But with the arrival of "institutional compliance programs" there is an expectation by federal and state governments that university compliance programs be documented and formalized.

Purpose

The purpose of this guide is to provide staff, managers, directors and other leaders who have compliance responsibilities embedded into their current jobs with the direction they need to document and organize their current compliance programs. Going through this exercise helps Texas Woman's University (TWU) in a couple of ways.

1) First, the information that these compliance programs produce help TWU leaders understand and know where we stand as a university at any given time when it comes to compliance relevant to local, state, and federal compliance requirements. If problems arise, they can be discovered and dealt with quickly and internally.
2) Finally, documenting and implementing individual compliance programs will also help foster a "culture of compliance" at the university.

Consequences of Noncompliance

There are consequences to TWU if it is found to be noncompliant in areas where compliance is required. These consequences can include:

- Fines, penalties, legal fees ($),
- Imposed compliance settlements,
- Media coverage, blemished reputation,
- More regulatory and audit agency scrutiny leading to increased bureaucracy and lowered efficiency and productivity,
- Management turnover,
- Lower faculty and staff morale,
- Lingering effects, and even
- Possible failure of the organization.

Some Texans are old enough to remember the Southwest Conference. It is well known that compliance issues damaged the Southwest Conference's reputation and finances contributing to the collapse of the entire conference in 1996.

Accountability for Compliance

Thinking, "This could never happen at TWU!" is risky, because it can! Your receipt of this guide is an indication that you, your department, and/or your committee are to be held accountable at TWU for compliance in a specific area. One of the key purposes of this guide it to make clear what is expected of you with regards to compliance at Texas Woman's University. Accountability for

compliance involves applying the "Eight TWU Compliance Program Steps" (discussed below). The primary purpose of these steps is to assist in three areas: prevention, detection, and correction of compliance issues.

Prevention

It is your responsibility to avoid the aforementioned consequences by doing everything in your power to prevent a compliance incident from occurring. Preventative measures such as policies, procedures, and training techniques, are designed to keep errors or irregularities from occurring in the first place.

Detection and Correction

If prevention procedures fail, that is the purpose of the "monitoring" step listed above—to detect compliance problems that may have occurred and correct them before they become serious. Detection and correction procedures are also important because they help alleviate possible external consequences.

For example, a university on the east coast discovered a research professor who had fraudulently embezzled over one million dollars. Because this problem was detected internally using monitoring techniques and subsequently reported to the appropriate authorities, millions of dollars in fines were *not* levied on the university.

The TWU Compliance Approach

TWU will use 8 steps in both institution level and operational level compliance. These eight steps are in compliance with the Federal Sentencing Guidelines (FSG) on Effective Compliance Programs (USSG §8B2.1). Over the past several years, these guidelines have become the *de facto* framework for the design and implementation of compliance program. Therefore, they are the standard used when the university is evaluated for compliance by any federal agencies. In addition, a few items are based on Federal Energy Regulatory Commission (FERC) guidance. More details are provided later in this guide, but the table below summarizes the purpose of each step.

The diagram below depicts a model of the compliance implementation process at Texas Woman's University. As just mentioned, these steps are in compliance with the Federal Sentencing Guidelines. Figure 1 is an overview of these steps and Table 1 includes a brief description of each stop. Details of how you will apply each step are articulated in the later sections in this guide.
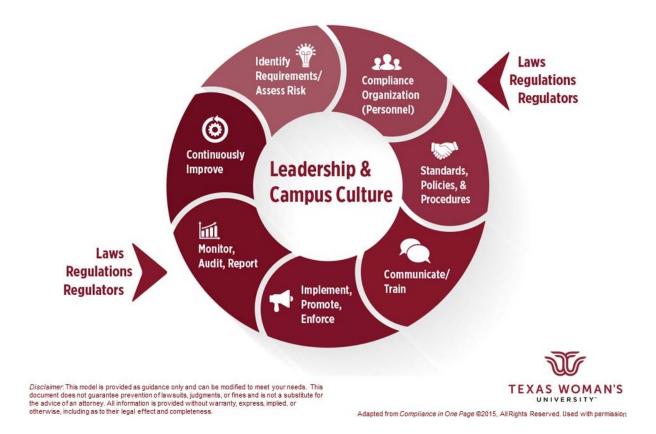
Figure 1: The TWU Compliance Process[1]

Disclaimer: This model is provided as guidance only and can be modified to meet your needs. This document does not guarantee prevention of lawsuits, judgments, or fines and is not a substitute for the advice of an attorney. All information is provided without warranty, express, implied, or otherwise, including as to their legal effect and completeness.

TEXAS WOMAN'S UNIVERSITY

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Table 1: Summary of the Eight TWU Compliance Program Steps[2]

	Step	Summary
1.	Identify Requirements/ Assess Risk	A documented process must be established to identify all compliance requirements applicable to the organization and to evaluate the risk these compliance requirements pose to the organization's success.
2.	Establish/Modify Compliance Organization	Once compliance risks are identified, compliance responsibility must be assigned to appropriate individuals, committees, functions, coordinators, etc. Executives and managers should have the authority and resources necessary to achieve compliance in their respective areas. Compliance coordinators, partners, or subject-matter experts should also be identified.

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[1] Adapted from Deena King, *Compliance in One Page*, (North Salt Lake, UT: Author, 2015), 5. All Rights Reserved. Used with permission.
[2] Ibid, 7.

3.	Document Standards, Policies, and Procedures	Fundamental to an effective compliance and ethics program are documented standards, policies, and procedures that are produced by those with compliance responsibilities and are based on risks and requirements. This documentation should be accurate, relevant, current, and accessible to all organization employees and agents.
4.	Communicate Standards, Policies, and Procedures	Compliance communication (which includes training) is one of the most significant components of effective compliance and ethics programs. All employees and agents of an organization, from members down to third- party contractors, must know what is required of them via policy and procedure and if necessary, be trained on the specific elements of compliance that affect them.
5.	Implement, Promote, and Enforce	As stated in the Federal Energy Regulatory Commission's Policy Statement on Compliance, "It is not enough to create a good compliance program on paper; the company must carry through to implement the program with effective accountability."2 This includes promoting and enforcing elements of each program as necessary.
6.	Monitor, Audit, and Report	One of the most powerful components of effective compliance and ethics programs is monitoring. This entails the self-assessment of compliance readiness by the individual operating entity. In addition, an audit function (internal or external) may conduct audits of the overall compliance and ethics program effectiveness or of specific components. In all cases, results need to be reported to appropriate leaders.
7.	Continuous Improvement	Compliance and ethics programs should be designed to provide tools and resources to managers and employees so they can make their operations incrementally better at ensuring achievement of the core values and standards represented by laws and regulations.
8.	Leadership/ Corporate Culture	The FSG states, "The organization's governing authority shall be knowledgeable about the content and operation of the compliance and ethics program" and "an organization shall…promote an organizational culture that encourages ethical conduct and a commitment to compliance with the law." FERC states, "Developing a strong and continuing culture of compliance is a critical task…the responsibility for a culture of compliance rests squarely on the shoulders of senior management." The corporate-level compliance and ethics program should promote a culture of compliance with policies, laws, and regulations is expected as part of the job.

Applying the "Eight Steps" of Compliance in Your Area

Applying the eight steps has two parts: design and implementation. In reality, Steps 1-3 of the model are in many ways paper exercises—regulations are identified, an organization is designed, and processes and plans are written. Implementing the compliance and ethics program includes "doing" *all* of its steps. The next two sections will discuss expectations regarding design and implementation in-depth. They have been written in checklist form. Hopefully this will be helpful to you going forward in this process.

Designing a Compliance Program at TWU

One of the key responsibilities a compliance partner has is designing, re-designing, or overseeing the design/redesign of a subject-specific compliance program. A designed compliance program is a program that documents the activities you will take in each of the eight steps, such as a manual or handbook. The design evidence is outlined below.

Design Evidence Checklist[3]

The design of the compliance program for your area will result in the following components. Ideally, while each of these components may be written up in a booklet or a set of documents, you should be able to summarize each component in the one page self-assessment provided in Appendix A1. *Note: This Appendix is provided as a guide only. The actual self-assessment is now online. Please contact the Office of Compliance for instructions on how to use this tool.*

The design components of your subject-specific compliance program should include:

Identify Requirements/Assess Risk

- ☐ A documented process for identifying the statutes and regulations that apply to your area (for federal laws, the Office of Compliance will provide a statutory summary in table form)
- ☐ A documented process for, at least annually, identifying level of risk the aforementioned statutes and regulations pose to TWU (high risk, medium risk, or low risk)

Establish/Modify Compliance Organization

- ☐ A documented process for designing or modifying the org chart including a list of roles, job descriptions, and/or committees who will be accountable for subject-specific compliance responsibilities, including a documented process for establishing or modifying their roles and responsibilities (which should include designing and implementing these eight steps)

Establish/Modify Standards, Policies, and Procedures

- ☐ A documented process for designing/modifying standards, policies, and procedures that address the requirements identified in Step 1

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[3] Ibid. 173.

☐ A documented process for designing and re-designing how your group will use these "eight steps" (*Note*: completing this documentation for these "design components" list addresses this step)

Communicate Standards, Policies, and Procedures

☐ A documented communication/training plan on relevant compliance policies and procedures

Implement, Promote, and Enforce

☐ Documented processes or plans used to implement, promote, and enforce the program and its standards, policies, and procedures

Monitor, Audit, and Report

☐ A documented auditing/monitoring program which includes reports to management and the Office of Compliance
   o This will include an annual, bi- or tri-annual self-assessment of how well your compliance program is working

Continuous Improvement

☐ A documented process for continuously improving the program, as necessary, after an audit or an enforcement, and

Leadership/ Corporate Culture

☐ A documented plan for showing how you as compliance leader(s) plan to promote a "culture of compliance."

Implementing a Compliance Program at TWU
While TWU is clearly not a utility company, the importance of actually following through with the program design is well stated in a document published by the Federal Energy Regulatory Commission (FERC):

> It is not enough to create a good compliance program on paper; the company must carry through to implement the program with effective accountability for compliance (para 16, FERC Compliance with Statutes, Regulations, and Orders, 2008).

The Federal Sentencing Guidelines also require "implementation:"

[The organization's] compliance and ethics program shall be reasonably designed, implemented, and enforced so that the program is generally effective in preventing and detecting criminal conduct (USSG §8B2.1.a.2).

Therefore, a second key responsibility of a compliance partner is to "do" their compliance program. An implemented compliance program is a program that documents the activities outlined above in the design section are actually being used, i.e. that you have "done" each of the eight steps. A list of implementation evidence is outlined below.

Implementation Evidence Checklist[4]
The implementation of the compliance program for your area should result in evidence such as is listed below. Ideally, this evidence should be summarized in the one page self-assessment provided in Appendix A2. *Note: This Appendix is provided as a guide only. The actual self-assessment is now online. Please contact the Office of Compliance for instructions on how to use this tool.*

Identify Requirements/Assess Risk

☐ A compliance inventory, i.e. a list of the statutes and regulations that apply to your area (*Note*: For federal laws, the Office of Compliance will provide a statutory summary in table form as updates become available from the Higher Education Compliance Alliance)
    o This list should identify which apply to TWU and which do not
☐ For those that do apply to TWU, meeting minutes or risk assessment reports showing what level of risk they pose (high risk, medium risk, or low risk)

Establish/Modify Compliance Organization

☐ A list of persons or committee members who are in the positions outlined in the design section above

Document Standards, Policies, and Procedures

☐ A list of the policies that are in place that address the compliance requirements outlined in Step 1
☐ A list and description of the procedures that are used to ensure TWU is in compliance (*Note*: completing this "design components" list addresses this step)
    o Department procedures

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[4] Ibid. 175.

      o Inter-departmental procedures
      o Desk procedures

Communicate Standards, Policies, and Procedures

☐ Evidence that the communication/training plan is being used such as compliance curriculum, training logs, email and/or newsletter samples, videos, pictures of posters, etc.

Implement, Promote, and Enforce

☐ *Implement*: Evidence that steps 1-4 and 6-8 are working and used on a regular basis (*Note*: Evidence produced by completing this "Implementation Evidence" checklist addresses this step)

☐ *Promote*: A list of ways you, your leaders, and/or your team promoted compliance in your area, i.e. swag, lectures, brown bags, emails, etc.

☐ *Enforce*: A redacted list of disciplinary actions that were taken when someone was found to be out of compliance with TWU standards, policies, and procedures

Monitor, Audit, and Report

☐ *Self-Monitoring:* Monitoring samples
☐ *Self-Audit:*
      o Self-audit schedules
      o Self-audit results
      o Audit reports (redacted to remove sensitive information); these can include self-audits or audits conducted by the Office of Internal Audits or an external auditor

☐ *Compliance Program Self-Assessment:* Results of an annual, bi- or tri-annual compliance self-assessment or evidence that an assessment was conducted by an internal or external auditor

☐ *Report:* Sample reports from all of the above

Continuous Improvement

☐ Samples of action plans for improvement following an audit, self-audit, self-assessment, or enforcement actions

☐ Updated standards, policies, and/or procedures following audit, self-audit, self-assessment, or enforcement actions

Leadership/ Corporate Culture

- ☐ Redacted budgets, sample corporate-wide communications, redacted meeting logs and/or redacted minutes that show oversight and participation in compliance activities
- ☐ Results of internal compliance culture assessments and action plans

Getting Started

There are two ways to use this guide. One is to jump right in with the above checklists and detailed step by step instructions below. Another is to start with a self-assessment. The Office of Compliance recommends doing a self-assessment first primarily because it helps clarify where your program is already strong. Once you have this knowledge, you can use this guide to organize what you already have, strengthen weak areas, and/or design/implement what is missing.

Compliance Program Self-Assessment

As just mentioned, the Office of Compliance recommends you begin organizing your compliance program by doing a self-assessment. This assessment can act as a "gap analysis" and will help you understand what components you already have in place by virtue of the fact your area has actually been doing compliance for a while now. This assessment will also help you see what might need to be strengthened or what might be missing.

The TWU compliance self-assessment is currently online and easy to use. Please contact the Office of Compliance (x813249, compliance@twu.edu) for assistance in using this tool and for getting the results.

Using This Guide

The remainder of this guide outlines step by step how you will be expected to organize, design, and implement your compliance program here at TWU. This can be done in a number of ways:

- Notebook
- Handbook
- Manual
- Collection of documents (online or paper)
- Website
- Links to online policies/procedures

Note: Whatever technique you choose, an index showing where the design and implementation evidence for each step of the eight steps can be found will be very helpful.

Feel free to use whatever technique works best for your office and do not hesitate to contact the Office of Compliance if you have any questions.

Good luck!

Step 1: Identifying Requirements/Assess Risk

Overview

Identify Requirements
Primary questions that need to be answered:[5]

- What laws and regulations is TWU required to comply with in my area?
  - The answer will produce a documented process for producing a subject-specific "compliance inventory."
- How are we keeping this list up-to-date?
  - The answer will produce a documented process for keeping subject-specific compliance inventories up-to-date.
- *Note: The Office of Compliance will assist with these tasks on the federal level by providing each compliance partner with a federal statutory summary in table form as updates become available from the Higher Education Compliance Alliance.*

Major tasks:

- Identify all federal, state, local, and contractual compliance requirements associated with your area.
  - *Design Action Step:* Document the process for identifying these requirements.
  - *Implementation Action Step:* Keep a file (or otherwise store) these requirements in a manner that will make them easy to retrieve.

- Identify how your area is ensuring that TWU is up-to-date on these requirements.
  - *Design Action Step:* Document the process for keeping up-to-date with these requirements.
  - *Implementation Action Step:* Keep this inventory up-to-date and keep a record of when/how requirements are kept up-to-date.

At the conclusion of this step you should have:

- ☐ *Design:* The documented process you will use to identify and keep these requirements up-to-date.

- ☐ *Implementation:* An up-to-date list of the statutes and regulations that apply to your area.

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[5] King, *Compliance in One Page*, 173.

Resources:

- Higher Education Compliance Alliance Compliance Matrix (provided by the Office of Compliance)

Other possible resources:

- Professional organizations
- Listservs
- Newsletters
- Conferences
- Webinars
- Internet

Discussion

One of the roles of the Office of Compliance will be to assist as much as possible in identifying the statutes and regulations in your area using the resources we have at our disposal, such as the Higher Education Compliance Alliance Compliance Matrix. However, as a subject-matter expert in a specific compliance area (or areas), it is your responsibility to know and keep up-to-date with these requirements using a variety of resources, including professional organizations, listservs, newsletters, etc.

A sample from Higher Education Compliance Alliance Compliance Matrix is below in Figure 2.

Figure 2: Sample Higher Education Compliance Alliance Compliance Matrix for TWU

ID	Statute Title	Statute Citation1	Statute Citation2	Specific Regulations	Statutory Summary

Primary Business Owner: [ ]

Compliance Area: **Environmental Health & Occupational Safety**

ID	Statute Title	Statute Citation1	Statute Citation2	Specific Regulations	Statutory Summary
73	*Asbestos Hazard Emergency Response Act*	15 U.S.C. § 2651			To prevent exposure to asbestos in school buildings, AHERA requires that all public and non-profit schools inspect each school building for asbestos-containing building material and prepare an asbestos management plan to prevent disturbance of asbestos.

Additional Note

Secondary Owners: [ ]

ID	Statute Title	Statute Citation1	Statute Citation2	Specific Regulations	Statutory Summary
74	*Chemical Facility Anti-Terrorism Standards*	Executive Order 13563 and 12866		6 C.F.R. §27	This rule establishes risk-based performance standards for the security of the nation's chemical facilities. It requires covered chemical facilities to prepare Security Vulnerability Assessments, which identify facility security vulnerabilities, and to develop and implement Site Security Plans, which include measures that satisfy the identified risk-based performance standards.

Additional Note

Secondary Owners: [ ]

ID	Statute Title	Statute Citation1	Statute Citation2	Specific Regulations	Statutory Summary
75	*Clean Air Act*	42 U.S.C. §§ 7401-7671q		40 C.F.R. §50; 40 C.F.R. §60; 40 C.F.R. §61	Regulates air emissions from stationary and mobile sources. Requires annual fees to be paid based upon total tons of actual emissions of each regulated pollutant.

Additional Note

Secondary Owners: [ ]

ID	Statute Title	Statute Citation1	Statute Citation2	Specific Regulations	Statutory Summary
76	*Clean Water Act*	33 U.S.C. §§ 1251-1387		40 C.F.R §122.41	Establishes the basic structure for regulating discharges of pollutants into the waters of the United States and regulating quality standards for surface waters. Facilities are governed by local wastewater pretreatment standards issued by local wastewater treatment plants.

Additional Note

Secondary Owners: [ ]

Assess Risk

Primary question that need to be answered:[6]

- How are we assessing our risk related to these laws and regulations?
  - The answer will produce a documented process for conducting a subject-specific compliance risk assessment.

Major tasks:

- After requirements have been identified, assess which requirements may pose the most risk to TWU.
  - *Design Action Step:* Document a process for doing regular compliance risk assessments.
  - *Implementation Action Step:* Conducting regular compliance risk assessments and documenting the results, include plans to address high risk issues.

At the conclusion of this step you should have:

- ☐ *Design:* A documented process for doing regular compliance risk assessments
- ☐ *Implementation:* A report and action plan for addressing high risk compliance issues in your area

Resources:

- Professional instincts

Other possible resources:

- Professional organizations
- Listservs
- Newsletters

Discussion
Once requirements are identified, it is important to identify those compliance requirements that may present significant risk to TWU. One way to assess these risks is your own professional instincts. Other risk advisors may include professional organizations, listservs, newsletters, etc.

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[6] Ibid., 173.

While TWU will conduct an institutional compliance risk assessment at least once a year, it is still important to conduct subject-specific compliance risk assessments in your own area so that you can know what risks may exist. Understanding these risks can help you understand what resources need to be dedicated appropriately to preventing, detecting, and/or correcting any negative consequences.

Step 2: Establish/Modify Compliance Organization

Overview

Primary questions that need to be answered:[7]

- Who is responsible for ensuring compliance in your day-to-day operations?
  o The answer will produce job descriptions of how compliance responsibilities are addressed in your area.
- What is the reporting structure of these personnel?
  o The answer will produce an org chart.

Major tasks:

- *Design Action Step:* Ensure these responsibilities are documented in roles and responsibilities documents such as job descriptions and that reporting lines are established via an org chart.
- *Implementation Action Step:* Ensuring that responsibilities are assigned to a person or persons who will have regular or day-to-day responsibility for the design and implementation of compliance issues in your area.

At the conclusion of this step you should have:

- ☐ *Design:* An org chart showing management's relationship with compliance personnel
- ☐ *Design:* Documented roles, responsibilities, including job descriptions that show how compliance responsibilities have been assigned
- ☐ *Implementation:* Evidence that this person or these persons are fulfilling these responsibilities such as meeting notes, emails, self-assessments, etc. (see steps 1 and 2-8)

Resources:

- Research on what other universities are doing in your area.

Other possible resources:

- Professional organizations
- Listservs
- Newsletters

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[7] King, *Compliance in One Page*, 173.

- Subject-specific compliance websites
- Government websites

Discussion

As outlined in the Federal Sentencing Guidelines (USSG §8B2.1.b.2.C):

- *Specific individual(s) within the organization shall be delegated day-to-day operational responsibility for the compliance and ethics program.*

TWU has appointed a director of compliance who has day-to-day operational responsibility for the university-wide compliance and ethics program. However, TWU is also an organization that has directors, managers, and personnel who have substantial authority over areas that must operate substantially or in part under specific regulations such as EEOC, FERPA, NCAA, OSHA, HIPAA, etc. At TWU, these are another set of "specific individuals" that are delegated day-to-day compliance responsibilities *in their areas*. These persons have been given the designation of "compliance partners." Together, the director of compliance and the compliance partners make up the TWU compliance network.

Therefore, once requirements and risks have been identified in your area of responsibility, it is important to ensure that someone with the appropriate skill set is given the responsibility and subsequently follows through with that responsibility for achieving compliance on a day-to-day basis with applicable "specific regulations."

Step 3: Document Standards, Policies, and Procedures

Overview

Primary questions that need to be answered:[8]

- Do all laws and regulations we are responsible to comply with have a related company policy?
  - o The answer will produce 1) a documented process for designing appropriate policies at the subject-specific level that may apply to your department or the entire university and 2) appropriate policies that are made available to the TWU community at large.
- Do relevant company policies have accompanying procedures?
  - o The answer will produce 1) a documented process for designing appropriate procedures at the subject-specific level that may apply to your department or the entire university and 2) appropriate procedures to be used where and as needed. Some procedures may be general while others may be specific "desk procedures."
- How are we keeping our policies/procedures up-to-date?

Major tasks:

- *Design Action Step:* Designing/updating TWU policies as statues/regulations are enacted or change.
- *Design Action Step:* Designing/updating TWU procedures as statues/regulations are enacted or change.
- *Implementation Action Step:* Ensuring official/approved TWU policies are in place that address each statute/regulation.
- *Implementation Action Step:* Ensuring official/approved TWU procedures are in place that address each statute/regulation.

At the conclusion of this step you should have:

- ☐ *Design:* A documented process designing new policies/procedures
- ☐ *Design:* A documented process for keeping policies/procedures up-to-date
- ☐ *Implementation:* A list of documented policies that are in place to address the requirements identified in Step 1
- ☐ *Implementation:* A list of documented procedures that are in place to address the requirements identified in Step 1

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[8] King, *Compliance in One Page*, 173.

Discussion

Policies are the governing documents of Texas Woman's University. As regulations are identified or updated, it is important TWU policies are in place to support these laws/statutes. If policies are not in place or need to be updated, the process to follow includes three levels: Regent level policies, University Regulations and Procedures, and Department level policies and procedures.

Regent Level Policies

Regent level policies are those policies that apply to the entire university community. These policies generally represent standards that apply to everyone who works at or is in any way affiliated with TWU.

If you determine that a policy in your area does apply to all of TWU and its partners, please contact the General Counsel for specific instructions on how to design a Regent policy and have it approved.

University Regulations and Procedures (URPs)

University regulations and procedures are policies/procedures that apply to the subset of the TWU community generally consisting of multiple departments, but not the entire university. If you determine that a policy in your area does apply part of TWU, please contact the General Counsel for specific instructions on how to design a university regulation and procedure and have it approved.

Division/Department Policies and Procedures

Division/department policies and procedures are policies/procedures that apply to one division or department of the TWU community. It is generally recommended that you use a template similar to those used for Regent policies and URPs in designing division/department policies and procedures.

A formal process should be used to design and implement division/department procedures, including having these documents approved, signed, and dated. Updates/modifications should also be documented using a "change record." These policies and procedures should also be made readily available to all TWU personnel who need access.

Step 4: Communicate Standards, Policies, and Procedures

Overview

Primary questions that need to be answered:[9]

- How are all executive, management-level, and operational personnel informed and/or trained on expectations related to laws, regulations, and policies/procedures they are to comply with?
  - The answer will produce 1) a plan for communicating and training on subject-specific compliance issues in your area with the TWU community or a subset and 2) curriculum, training, newsletters, etc.

Major tasks:

- *Design Action Step:* Ensuring a training and/or communication plan is in place to support each TWU policy/procedure that comes from your area.
- *Implementation Action Step:* Executing the training/communication plan.

At the conclusion of this step you should have:

- ☐ *Design:* A subject-specific compliance training/communication plan
- ☐ *Implementation:* Evidence the compliance training/communication plan is being used such as curriculum, training logs, posters, emails, etc.

Discussion

Communication and training are among the most significant components of an effective compliance program. Most regulatory requirements include a training component. They require TWU to periodically communicate standards and procedures "by conducting effective training programs and otherwise disseminating information appropriate to such individuals' respective roles and responsibilities" (USSG §8B2.1.b.4.A).

To further complicate matters, the Federal Sentencing Guidelines requirement applies to "all the members of the governing authority, high-level personnel, substantial authority personnel, the organization's employees, and, as appropriate, the organization's agents" (USSG §8B2.1.b.4.B). Essentially, this element requires that all employees and agents of an organization, from the board down to contractors and agents, be made aware via communication and/or training of the elements of compliance and ethics that are their responsibility.[10]

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[9] King, *Compliance in One Page*, 174.
[10] Ibid., 81-82.

While in most cases, you simply need to communicate with members of your division/staff, there may be cases when a law/regulation in your area impacts a subset of TWU or the entire community. In such cases, you need to ensure that your communication and training plan reaches all applicable TWU personnel and partners.

Step 5: Implement, Promote, and Enforce

Overview

Primary questions that need to be answered:[11]

- How are we implementing, promoting, and enforcing subject-specific policies and procedures?
  - o The answer will produce 1) a plan or plans to implement, promote, and enforce all eight steps of your compliance program and 2) evidence that your implementation/promotion/enforcement plan(s) has/have been completed.

Major tasks:

- *Design Action Step:* Designing/updating the processes or plans you will use to implement, promote, and enforce your compliance program.
- *Implementation Action Step:* Implementing, promoting, and enforcing your compliance program.

At the conclusion of this step you should have:

- ☐ *Design:* A designed implementation, promotion, and enforcement plan (or plans)
- ☐ *Implementation*
  - o *Implement:* Evidence that your compliance program has been implemented; (*Note*: If all of the "*At the conclusion of this step you should have/Implementation*" steps 1-4 and 6-8 outlined in this document can be substantiated with evidence, this task is considered complete)
  - o *Promote:* Evidence that your program is being promoted such as newsletters, swag promotions, email blasts, leader speeches, etc.
  - o *Enforce:* Evidence that enforcement action was taken when a policy was violated

Discussion
Implement
To repeat what was stated above in "Implementing Compliance at TWU," a key responsibility of a compliance partner is to "do" their compliance program. An implemented compliance program is a program can show via documentation

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[11] King, *Compliance in One Page*, 174.

that activities outlined in each design section are actually being used, i.e. that you have "done" each of the eight steps.

The great news—evidence to support implementation of your compliance program is the successful documentation of all the "*At the conclusion of this step you should have/Implementation*" steps 1-8 outlined in this document. Therefore, if you can provide "implementation" evidence for each step as outlined in this guide, you can report that your program has been successfully implemented.

Promote

One dictionary definition defines promote it this way, "to encourage the sales, acceptance, etc., of [a product], especially through advertising or other publicity." In light of this definition, it could be said that Step 4, communicate and train, qualifies as promotion because these steps involve letting people know what the compliance and ethics program is and what is expected of them regarding compliance and ethics.

But promotion goes further than just communicating. Another definition of promote—"to help or encourage to exist or flourish; to further"—helps us understand the essence of the compliance role. The words encourage, flourish, and further are key. These words imply that implementation is not enough—the program must thrive. Promotion examples include contests, swag promotions, performance awards, including elements in performance reports, and other means. These techniques help communicate with your department or all of TWU that complying with laws/regulations in your area are important and should be remembered.[12]

Enforce

Compliance programs are also promoted through enforcement efforts. Enforcing policies/procedures shows the culture at large that TWU takes compliance seriously. Enforcement activities can range from routine to more serious. Minor violations of a law or regulation are often dealt with internally and may be uncovered during an audit or from a hotline tip. These can be enforced during an internal remediation process.

Probably one of the toughest activities compliance professionals must engage in is enforcement of the law—particularly serious violations. Government and regulatory agencies expect an organization to deal appropriately with violations once they are discovered. In addition, many of these agencies also expect such violations to be self-reported to them in a timely manner.

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[12] Ibid., 95.

There is some good news here—TWU's Human Resources (HR) department can be helpful in this area. HR has a documented disciplinary process that can probably be leveraged by your compliance program.[13]

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[13] Ibid., 97.

Step 6: Monitor, Audit, and Report

Overview

Primary questions that need to be answered:[14]

- *Monitor*
  - Are there reasonable programs and systems in place to monitor compliance in areas where compliance should be regularly scrutinized?
    - The answer will produce 1) a plan or plans to monitor compliance in your area of responsibility and 2) monitoring results and reports.
  - How will we investigate when we learn that someone has violated one of our compliance-related policies or procedures?
    - The answer will produce 1) a plan or plans to investigate compliance failures and 2) reporting the results of a compliance investigation.
- *Audit*
  - How will we conduct audits to ensure compliance?
    - The answer will produce 1) a plan or plans to audit compliance in your area of responsibility and 2) audit results and reports.
  - How will reports and remediation be handled?
    - The answer will produce 1) a documented process for addressing gaps and findings detailed in an audit report and 2) addressed findings and gaps.
  - How are results reported to senior management and the board?
    - The answer will produce 1) a documented process for reporting monitoring and auditing issues to management and 2) audit/monitoring results and reports.

- *Compliance Program Evaluation*
  - How often is the compliance program reviewed for effectiveness?
    - The answer will produce 1) a plan or plans to self-assess your compliance program or to have it reviewed by an internal or external reviewer and 2) evaluation results and reports.
  - How are results reported to senior management and the board?
    - The answer will produce 1) a documented process for reporting compliance program issues to management and 2) compliance program evaluation results and reports.

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[14] King, *Compliance in One Page*, 174.

Major tasks:

- *Design Action Steps:*
  - *Monitor:*
    - Designing/updating the process you will use to monitor compliance in your subject-specific area.
    - Designing/updating the process or plan you will use to investigate compliance failures in your subject-specific area.
  - *Audit:* Designing/updating the process you will use to audit compliance in your subject-specific area, to include self-audit, internal or external audits.
  - *Report:* For both monitoring and auditing, designing/updating the process you will use to report the results to senior management and others, as necessary.
  - *Compliance Program Evaluation:* Designing/updating the process you will use to determine the completeness and effectiveness of this subject-specific compliance program.

- *Implementation Action Steps*
  - *Monitor:*
    - Monitoring procedures that produce monitoring reports.
    - An investigation process/plan that produces final reports, including disposition.
  - *Audit:* Audit Schedules that produce self-audit reports or receiving reports from internal/external audits.
  - *Report:* For both monitoring and auditing, reporting the results to senior management and others, as necessary.
  - *Compliance Program Evaluation:* Evaluating the completeness and effectiveness of this subject-specific compliance program and reporting the results to management and others, as necessary.

At the conclusion of this step you should have:

- ☐ *Design:* A designed implementation, promotion, and enforcement plan (or plans).
  - *Monitor:*
    - A monitoring plan
    - An investigation process/plan
  - *Audit:*
    - An audit plan
  - *Report:*
    - For both monitoring and auditing, a plan for reporting results to management
  - *Compliance Program Evaluation:*

- A plan to evaluate the completeness and effectiveness of this subject-specific compliance program; this could be a self-assessment or an internal/external review
  - ☐ *Implementation*
    - o *Monitor*:
      - Monitoring results/reports
      - Investigation results/reports
    - o *Audit*:
      - Audit results/reports
    - o *Report*:
      - For both monitoring and auditing, reports/results provided to management and others as necessary.
    - o *Compliance Program Evaluation*:
      - Program evaluation results for this subject-specific compliance program with the results reported to management and others, as necessary.

Discussion

Monitor

Unlike auditing (discussed below), monitoring does not need to be independent or objective, but that does not mean it provides less value to an organization. According to Mark Ruppert, Director of Audit Services at Cedars-Sinai Health System:

> Monitoring is an ongoing process usually directed by management to ensure processes are operating as intended. Monitoring is an effective detective control within a process.

Rather than being conducted by an independent auditor, monitoring efforts are often established and conducted by the entity responsible for the process.[15] Monitoring techniques may include:

- Form or checklist reviews/authorizations
- Listening/observing
- Technical applications for "continuous monitoring"
- Inspections
- Hidden Cameras
- Hotlines

As a subject-matter compliance specialist, you are best equipped to understand how to best monitor compliance in your area.

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[15] Ibid., 102.

Investigations

There are two types of investigations: initial and detailed. Initial investigations are superficial. Their purpose is to determine if there is enough evidence to warrant a more detailed investigation. Also, the evidence collected in a detailed investigation needs to reach a high standard. This type of investigation could yield results that might need to be shared with local, state, or federal law enforcement. The good news is that the quality, thorough internal investigations may help prevent more detailed and painful external investigations.[16]

Depending on the subject-specific compliance area you work in, you may or may not conduct regular compliance-related investigations. In some cases, these investigations will be delegated to HR, Student Services, or Associate Deans. In any case, you should have a documented process or plan in place to investigate policy violations in your area.

Audit

The common definition of an audit is the systematic review of a person, project, system, process, or organization. This review is, by definition, independent and objective. In compliance, an audit is a review, either of the overall compliance program or of its adherence to the specific contracts, laws, or regulatory guidelines to which it is subject. Auditors review policies, procedures, and other processes used to address compliance by the organization. An audit cannot guarantee compliance, but it can provide "reasonable assurance" that the institution's compliance programs are functioning effectively or uncover areas that aren't working as intended.[17]

Your audit plan may include conducting self-audits, engaging internal audit, or being audited by external auditors.

Report

All of the above procedures—monitoring, investigations, and auditing, if done correctly, will produce reports. Reporting is fundamental to ensuring effective accountability—"achievement or failure needs to be reported to leadership." Status reports to management provide opportunities for the compliance program to demonstrate its value and can give management confidence in its overall compliance status. Once management is in possession of compliance information via a well-written report, appropriate action can be taken.[18]

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[16] Ibid., 103.
[17] Ibid.
[18] Ibid., 113.

Compliance Program Evaluation

There are a variety of terms that can be used to describe the compliance program evaluation process, including a "program self-assessment" or a "compliance management controls audit." Any technique used to ensure that the eight steps of the TWU process are in place and operating as designed will be referred to as a compliance program evaluation.

Evaluating your compliance program actually has two parts. The first part involves answering the question, "Have we documented how we are managing compliance?" This means ensuring the compliance program is written up and published, at least internally, including action plans, policies, guidelines, and/or procedures, as necessary.

The second part involves answering the question, "Can we demonstrate the compliance and ethics program is working as intended?" This means ensuring each component is effective and operating as designed.[19]

Essentially, that is the purpose of this guide—it is a step by step guide to ensure that your compliance program will pass such an evaluation—both parts—with flying colors!

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[19] Ibid., 107.

Step 7: Continuous Improvement

Overview

Primary questions that need to be answered:[20]

- How is "continuous improvement" built in to our compliance plan?
  - The answer will produce 1) a plan or plans to ensure your compliance program "continuously improves" and 2) evidence that your compliance program is continuously getting better.

Major task:

- *Design Action Step:* Ensuring "continuous improvement" processes and techniques are built into your compliance program.
- *Implementation Action Step:* Executing the "continuous improvement" plan.

At the conclusion of this step you should have:

- ☐ *Design:* A subject-specific "continuous improvement" component in your compliance plan.

- ☐ *Implementation:* Evidence that your subject-specific compliance plan is "continuous improving" such as change records, completed audit/monitoring action plans, etc.

Discussion

Continuous improvement as a modern discipline can be traced back to the work of Dr. J. Edward Deming. Dr. Deming was a famous quality expert who designed a highly effective technique that serves as a practical tool for carrying out continuous improvement in the workplace. This technique is called the PDCA Cycle. PDCA is acronym of *Plan, Do, Check,* and *Act.* How the TWU compliance process maps to the Deming PDCA cycle is summarized in Table 2 below:

Table 2: TWU Compliance Process Mapped to PDCA (Plan, Do, Check, Act) [21]

TWU Compliance Step	Deming's PDCA Cycle
• Identify Requirements/Assess Risk • Establish/Modify Compliance Organization, • Document Standards, Policies, and Procedures	Plan
• Communicate Standards, Policies, and Procedures • Implement, Promote, and Enforce	Do
• Monitor, Audit, and Report	Check
• Continuous Improvement	Act

The final step, Step 7 – Continuous Improvement, represents "acting" on what was learned after checking (Step 6 – Monitor, Audit, and Report). Continuous improvement is all about making changes that will help your compliance program work better each time through. That is why it is called a cycle, and that is why the TWU compliance process is designed as a cycle as well.

Thus, your program should have a step built-in that takes advantage of information learned in step 6 to modify whatever area needs to be modified so that monitoring, auditing, and evaluation findings do not occur again in the future. This may mean fixes to any of the other steps 1-7 or 8.

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[21] Ibid., 119-120.

Step 8: Leadership/Corporate Culture

Overview

Primary questions that need to be answered:[22]

- How is leadership showing its support for your subject-specific compliance program?
    o The answer will produce 1) a plan or plans to enlist leadership support for your compliance program (if it is lacking) and 2) evidence that your leaders are supporting your program financially and through various means of communication.
- What is the status and condition of our current compliance culture?
    o The answer will produce 1) a plan or plans to improve the culture of compliance in your subject-specific area (if it is lacking) and 2) evidence that there is a positive "culture of compliance" in your subject-specific area.

Major tasks:

- *Leadership:*
    o *Design Action Step:* Ensuring TWU leaders in your area are supporting your compliance program.
    o *Implementation Action Step:* Taking action to ensure that TWU leaders in your area support your compliance program.
- *Compliance Culture:*
    o *Design Action Step:* Ensuring TWU culture is supporting compliance as it relates to your subject-specific area.
    o *Implementation Action Step:* Taking action to ensure that TWU culture supports compliance as it relates to your subject-specific area.

At the conclusion of this step you should have:

- ☐ *Design:*
    o *Leadership:* A subject-specific leadership component in your compliance plan.
    o *Compliance Culture:* A subject-specific compliance culture improvement component in your compliance plan.
- ☐ *Implementation:*

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[22] King, *Compliance in One Page*, 174.

- o *Leadership:* Evidence that your subject-specific compliance plan is supported by TWU leadership, including budgets, FTE, communications, etc.
- o *Compliance Culture:* Evidence that your subject-specific compliance plan is supported by TWU culture, including few to no violations, little pushback on policies and processes, etc.

Discussion

There are two key components in the TWU compliance process. These components are at the heart of the model for a reason. Everything else surrounds them because these two areas are like the air a compliance program breathes. They can make or break the entire compliance effort. To illustrate this, Figure 1 is presented again below.

Figure 1: The TWU Compliance Process[23]

Disclaimer: This model is provided as guidance only and can be modified to meet your needs. This document does not guarantee prevention of lawsuits, judgments, or fines and is not a substitute for the advice of an attorney. All information is provided without warranty, express, implied, or otherwise, including as to their legal effect and completeness.

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These two elements are Leadership and Campus Culture.

Leadership

First, lack of leadership can ultimately make any and all compliance and ethics efforts completely ineffective, and second, leaders are the key to setting the

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[23] Ibid., 5.

cultural tone. In other words, leadership can lead to and/or support the existence of a culture that condones noncompliance or one that promotes compliance. Great leadership can be the catalyst that creates and upholds a culture of compliance.[24]

Thus it is important that your compliance program include strategies and tactics for ensuring that leaders are supporting your subject-specific compliance efforts with budgets, finances, FTE, and communication that shows they value what you are doing.

Compliance Culture
Second, a culture of compliance exists when an institution's employees see complying with the law as a positive institutional expectation rather than a constraint imposed by the regulators or management.

Consequently your compliance program should also include strategies and tactics for ensuring that the culture at TWU is supporting your subject-specific compliance efforts. This can be accomplished, in part, through promotional techniques (Step 5) and from the support of leaders (Step 8a).

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[24] Ibid., 125.

Appendix A: Sample Subject-Specific Compliance Program

When you are done with the "design" portion of this guide, you should have a document that acts as an index, manual, handbook, website, or other file that looks similar to the one below. This is a sample table of contents for the fictitious "TWU Unions Compliance Program."

Unions Compliance Program – Texas Woman's University

Section 1:

- *Part 1:* The Union Compliance Inventory Identification and Update Process
- *Part 2:* Annual/Quarterly Risk Assessment Process

Section 2: The Union Compliance Department's Organization, Roles, and Responsibilities

Section 3: Documentation Process, Including Approvals

Section 4: Training and Communications Plan

Section 5:

- *Part 1:* Annual Unions Compliance Action Planning Process
- *Part 2:* Annual Promotion Plan
- *Part 3:* Enforcement Processes

Section 6:

- *Part 1:* Monitoring Plan
- *Part 2:* Audit Plan
- *Part 3:* Investigation Process
- *Part 4:* Unions Compliance Program Evaluation Plan

Section 7: Processes for Updating and Improving this Plan

Section 8:

- *Part 1:* Leadership Improvement Plan
- *Part 2:* Compliance Culture Improvement Plan

Appendix B: Terms, Definitions, and Concepts

Compliance Areas: A specific area of contractual, legal, or regulatory compliance. To ease the burden of definition, TWU has adopted the terms provided by the Higher Education Compliance Alliance "Topic" areas. There are currently 36 compliance categories at TWU, including, but not limited to, Environmental Health and Occupational Safety, Athletics, Fundraising and Development, Human Resources, Export Controls, and Copyright and Trademark. These are the high-level categories that contain laws and regulations TWU is required to comply with.

Compliance Class: Within most of the compliance categories are subcategories. These are referred to as classes. For example, Environmental Health and Safety includes the following compliance classes: OSHA, Fire and Building Safety, EPA, Energy, and Medical Waste. Some of these areas will also have subclasses.

Compliance Program: The level at which compliance is actually implemented. For example, OSHA includes a set of regulations for working in "confined spaces." Therefore, there would be a compliance program called Confined Spaces. Another example, one of the compliance categories is Investment Charter. This category has no classes or subclasses, so along with being a compliance category, it is will also have a compliance program.

Compliance Universe: All federal, state, and local laws, statutes, and regulations that TWU is required to comply with.

Compliance Officer: The position responsible to provide cabinet-level assurance regarding the adequacy of compliance within the entire university compliance universe. This position is currently filled by the Associate Vice President of Compliance and General Counsel.

Director of Compliance: The position responsible for the day-to-day operations of compliance activities throughout the entire university compliance universe.

Executive Policy Office: The Vice Presidential Office responsible for maintaining and updating University Policy in a compliance category.

Compliance Partner: Department or committee leader responsible for a subject-specific compliance program such as privacy, technology, safety, etc. This position usually 33333has division/department level oversight responsibility over the development, maintenance, review, and implementation of a subject-specific compliance program or multiple compliance programs.

Compliance Network: Comprised of compliance partners and subject-matter experts from the major substantive compliance areas across campus. This

network is responsible for keeping the appropriate University constituencies informed of compliance issues and for updating the network on recent developments in their fields. This network reinforces the concept of a TWU compliance community.

Appendix C: The Role of the Office of Compliance

The primary role of the Office of Compliance to provide secondary verification that effective compliance is occurring in all activities governed by federal law and regulation, and by University policy. Please note that *verification* does not mean *performing* the work of compliance. That is the responsibility of each compliance group. Rather, verification means making sure that all relevant activities have compliance organizations that are utilizing effective compliance programs. It also means making sure that these compliance organizations have effective policies and procedures, effective training programs, and effective techniques for monitoring/auditing compliance.

As part of the work of verification, the Office of Compliance is also responsible for making recommendations to the Internal Auditor for possible compliance audits. One of the purposes of this handbook is to share with compliance groups at Texas Woman's University the standards that will be used in such audits with regards to the internal controls known as program design.

The Office of Compliance is here to serve the university. It is hoped this handbook will help facilitate the important work of compliance. Feel free to contact us with any of your questions or concerns.

Deena King
Director of Compliance
Texas Woman's University
1403 ACT
940-898-3249

Appendix D: Sample Simplified Generic Compliance Plan ("Program Design")

Section 1: Identify Requirements/Assess Risk

☐ Once a year, the compliance partner will attend a professional conference that includes a mandatory track on changes to existing regulations and a briefing on new regulations that impact his/her area.

☐ The compliance partner will make arrangements to receive regular emails from a professional organization that will update him/her on changes to existing regulation and briefings on new regulations.

☐ The compliance partner will use the above information to establish and maintain a list or spreadsheet of, at minimum, a summary of all laws and regulations that impact his/her area.

☐ Once a year the compliance partner will meet with staff and other advisors to review compliance requirements and determine which requirements might bring added risk to their operations. If issues are identified, the department will use sections 2-8 below to design plans to address these compliance risks.

Section 2: Establish/Modify Compliance Organization

☐ *Establish*: If compliance responsibilities have not been assigned, the compliance partner will design an org chart including a creating a list of roles, writing job descriptions, and/or designing committees who will be responsible and accountable for subject-specific compliance responsibilities.

☐ *Modify*: If compliance responsibilities and accountabilities have been assigned (see above bullet), the compliance partner will annually review the organization, including roles and responsibilities, job descriptions, etc. and make changes as necessary.

Section 3: Establish/Modify Standards, Policies, and Procedures

☐ *Establish*: As new compliance requirements are identified, the compliance partner will work with staff, the general counsel, and others to design standards, policies, and procedures that address these requirements (usually identified in Section 1 above).

☐ *Modify*: As changes in compliance requirements are identified (usually via Section 1 above), the compliance partner will work with staff, the general

counsel, and others to update/modify standards, policies, and procedures that address these changes (usually identified in Section 1 above).

☐ *Note*: This step includes designing or re-designing one or more of the eight sections of this compliance plan.

Section 4: Communicate Standards, Policies, and Procedures

☐ When a new employee is hired, they will be required to take a compliance training module before they can begin doing their job.

☐ Refresher training will be required once every two years.

☐ Posters will be displayed in well-trafficked areas around the office.

☐ Employees with particularly sensitive access will be given "cheat sheets" to follow to ensure they follow proper protocols.

☐ At "all hands" meetings, the compliance partner will provide guidance when necessary on compliance issues and follow this up with a "summary" email to all staff.

Section 5: Implement, Promote, and Enforce

☐ *Implement*: An annual action plan will be created that addresses each bullet item in this plan. It will be executed and modified as needed.

☐ *Promote*: During at least 2-3 "all hands" meetings each year, the compliance partner will promote "ethics and compliance" and its importance to department and university operations.

☐ *Enforce*: When violations of any of the above standards, policies, or procedures are identified or surface, appropriate action will be taken using TWU policies and procedures for investigation and adjudication. If discipline is required, it will be handled per TWU policy.

Section 6: Monitor, Audit, and Report

☐ *Monitor/Report*: For sensitive issues, the compliance partner will receive daily/weekly/monthly reports on _____, review them, and make changes in department process, as required.

☐ *Audit/Report*: The department is subject to an internal audit every three years. The department will be cooperative during these audits and, after the reports are received, implement all reasonable recommended changes.

- ☐ *Reporting to Senior Management*: Quarterly the compliance partner will provide a compliance status report to the vice president over our area.
- ☐ *Compliance Program Self-Assessment*: The Office of Compliance will coach us through a compliance program self-assessment every three years.

Section 7: Continuous Improvement

- ☐ As problems are identified in steps 1 through 6 above, the compliance partner will make changes to this program and relevant policies, procedures, communication, and training. This will create a "continuous improvement" compliance culture in the department.

Section 8: Leadership/ Corporate Culture

- ☐ *Leadership*: The quarterly report/discussion with our vice president should improve compliance buy-in and leadership.
- ☐ *Corporate Culture*: The bullet items in steps 4 and 5 above should communicate the importance of compliance and ethics and help enhance the compliance culture."
- ☐ As necessary, additional changes will be made in steps 2-7 above to improve leadership and culture in this area.

Appendix E1: "One Page" – Self-Assessment – Program Design

Please circle Yes, No, or Partial and provide a summary of evidence that could be provided that shows these compliance elements have been designed.

Identify Requirements/Assess Risk

Risk Assessment: Y/N/P

Compliance Requirements: Y/N/P

Establish/Modify Organizational Structure

Org Chart: Y/N/P

Roles/Responsibilities: Y/N/P

Background Checks: Y/N/P (Note: These are generally handled by HR)

Document Standards, Policies, and Procedures

Documentation: Y/N/P: *Note: You can score "Yes" or "Partial" if all or most of steps 1-2 and 4-8 are complete. If none of these steps are documented, please choose "No."*

Communicate Standards, Policies, and Procedures

Communication Plan: Y/N/P

Training Plan: Y/N/P

Implement, Promote, and Enforce

Implementation Strategy: Y/N/P

Promotion and Enforcement: Y/N/P

Audit, Monitor, and Report

Audit Program: Y/N/P

Compliance Program Evaluation: Y/N/P

Reports (to leaders, executives, Regents, agencies): Y/N/P

Continuous Improvement

Continuous Improvement Program: Y/N/P

Leadership/Corporate Culture

Leadership Program: Y/N/P

Compliance Culture: Y/N/P

Appendix E2: "One Page" – Self-Assessment – Program Implementation

Please circle Yes, No, or Partial and provide a summary of evidence that could be provided that shows these compliance elements have been implemented.

Identify Requirements/Assess Risk

Risk Assessment: Y/N/P

Compliance Requirements: Y/N/P

Establish/Modify Organizational Structure

Org Chart: Y/N/P

Roles/Responsibilities: Y/N/P

Background Checks: Y/N/P (Note: These are generally handled by HR)

Document Standards, Policies, and Procedures

Documentation: Y/N/P:

Communicate Standards, Policies, and Procedures

Communication Plan: Y/N/P

Training Plan: Y/N/P

Implement, Promote, and Enforce

Implementation Strategy: Y/N/P: *Note: You can score "Yes" or "Partial" if you can produce evidence that all or most of steps 1-4 and 5-8 are working. If none of these steps can be supported with evidence, please choose "No."*

Promotion and Enforcement: Y/N/P

Audit, Monitor, and Report

Audit Program: Y/N/P

Compliance Program Evaluation: Y/N/P

Reports (to leaders, executives, Regents, agencies): Y/N/P

Continuous Improvement

Continuous Improvement Program: Y/N/P

Leadership/Corporate Culture

Leadership Program: Y/N/P

Compliance Culture: Y/N/P

Version History

Version 1.0: June 22, 2016

Version 1.1: Updated style; updated logos; minor formatting fixes. April 27, 2018.