

**Worksheet: Evidence and Review**

**INSTRUCTIONS:** For each question, please answer Y or N in column E then assess to the extent conformance with the regulations is met by providing supporting documentation. You can refer to Columns A and F for suggestions of supporting documents. These documents are examples and should be tailored to the program under assessment so, feel free to add or remove supporting documents as appropriate. Once your list of documents is finalized, select the letter(s) from Column A and enter them in Column G to show how you are meeting the requirement. Note: Column F can be deleted at the end the assessment. The assessment also includes interviewing different employees across the organization. During the interviews you may hear supportive statements that are representative of an effective Compliance Program. Compile these statements on one document and include it in column A (e.g. see x). Number the statements on that document so you can refer to them in Column H, for example x)1) or x)2). Column I provides opportunity to briefly comment on additional factors that may be favorable, for example, the Board Office may not have a Non-retaliation Policy currently but is in the process of developing one. When the assessment is complete, go to the next tab to assign a rating.

A.	B.	C.	D.	E.	F.	G.	H.
List of Suggested Supporting Documents	SUB SECTION	No.	Questions	Y/N	Supporting Documents (In Place)	Supporting Statements (From Interviews)	Comments
<b>EXECUTIVE OVERSIGHT</b>							
a) BOG Meeting Agendas/minutes b) New BOG Orientation Materials c) BOG – Other Workshop Materials d) BOG Orientation Materials e) BOG/Compliance Committee training or other educational material f) Audit and Compliance Committee Charter g) Compliance Committee Agenda and Minutes h) Compliance Office Annual Reports i) Board Office Organizational Chart j) Compliance Office	<b>Board of Governors</b>	1	Are the chancellor and the Board of Governors (BOG) members knowledgeable about the Compliance and Ethics Program (Program)? How is it demonstrated?	Y	a) b) c) d) e)	w1) w2)	Confirmed through supporting documents and interviews of Chancellors Rodrigues and Levine. Note: BOG Chancellors were interviewed to ensure the accuracy of these findings.
		2	Do the chancellor and BOG exercise oversight with respect to the Program's implementation and effectiveness?	Y	a) i) x)	w1) w2)	Confirmed through supporting documents and interviews of Chancellors Rodrigues and Levine.
		3	Are any Program plan revisions, based on the director of compliance’s report approved by the Board of Governors?	Y	a) i) x)	w1) w2)	Confirmed through supporting documents and interviews of Chancellors Rodrigues and Levine.
	<b>Audit and Compliance Committee</b>	4	Does the Audit and Compliance Committee Charter address governance oversight for the Program?	Y	f)	n/a	Supported by documentation.

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<p>Organizational Chart k) Director of Compliance Position Description l) OIGC Office Charter m) Compliance Office Budget n) Compliance Officer Resume o) Compliance Office - 5-Year Review Materials p) Compliance Officer - Board Office Committee Listing q) Compliance Office - Hotline Engagement Documentation r) "Compliance Partners" meeting agendas, minutes, notes; Committee members listing s) Code of Conduct/Statement of Ethical Conduct t) Code of Conduct, Ethical Conduct Training u) Fraud and Other Wrongful Acts Policy v) Compliance Program Plan w) Supporting statements x) F.S. 20.155 BOG of the SUS</p>	<p><b>Director of Compliance/Compliance Office</b></p>	5	Is the Office of Inspector General and Director of Compliance (OIGC) governed by a charter approved by the BOG and reviewed at least every three (3) years for the consistency with applicable BOG Regulations, professional standards, and best practices?	Y/N	g) j) k) n) o)	w1) w2) w3) w4)	Confirmed through supporting documents and responses from Julie Leftheris, Inspector General and Director of Compliance (IGDC), and Lori Clark, Compliance & Audit Specialist (CAS), and the Chancellors. The assessment tool references the "every three years" timeframe, section 11 of our current OIGC charter says, " <b>The AACC will periodically review</b> " the OIGC charter.
		6	Does the director of compliance report functionally to the BOG and administratively to the chancellor?	Y	g) j) k)	w1) w2) w3) w4)	Confirmed through supporting documents and responses from the IGDC and CAS, and the Chancellors.
		7	Is the director of compliance the same individual as the inspector general or the general counsel?	N	i) k) l)	w1) w2) w3) w4)	Confirmed through supporting documents and responses from the IGDC and CAS.
		8	Does the director of compliance have the independence and objectivity to perform the responsibilities of the compliance function?	Y	j) l)	w3) w4)	Confirmed through supporting documents and responses from the IGDC and CAS.
		9	In circumstances where either a restriction or barrier was imposed by an individual on the scope of an inquiry, or the access to the necessary information for the purposes of such inquiry was denied, is the director of compliance able to remedy the situation by talking to the chancellor?	Y	h) i) k) l)	w1) w2) w3) w4)	Confirmed through supporting documents and responses from the IGDC and CAS. <b>The documentation provided does not specify whether the director of compliance is able to talk directly to the chancellor with regards to these matters.</b>
		10	Does the director of compliance have decision-making independence, including the ability to elevate compliance and ethics concerns directly to the BOG without executive leadership pre-approval?	Y	g) h) i) k) l)	w1) w2) w3) w4)	Confirmed through supporting documents and responses from the IGDC and CAS, and the Chancellors.

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a) BOG Meeting Agendas/minutes b) New BOG Orientation Materials c) BOG – Other Workshop Materials d) BOG Orientation Materials e) BOG/Compliance Committee training or other educational material f) Audit and Compliance Committee Charter g) Compliance Committee Agenda and Minutes h) Compliance Office Annual Reports i) Board Office Organizational Chart j) Compliance Office Organizational Chart k) Director of Compliance Position Description l) OIGC Office Charter m) Compliance Office Budget n) Compliance Officer Resume o) Compliance Office - 5-Year Review Materials p) Compliance Officer - Board Office Committee Listing q) Compliance Office - Hotline Engagement Documentation r) "Compliance Partners" meeting	<b>Director of Compliance/Compliance Office</b>	11	Does the director of compliance have timely access to any records, data, and other information in possession or control of the Board Office, including information reported through the Board Office's complaints form?	Y	h) q) l)	w3) w4)	Confirmed through supporting documents and responses from the IGDC and CAS.
		12	Does the director of compliance conduct and report on compliance and ethics activities and inquiries free of actual or perceived impairment to the independence of the position?	Y	a) i) l)	w3) w4)	Confirmed through supporting documents and responses from the IGDC and CAS.
		13	Does the director of compliance coordinate or request compliance activity information or assistance as may be necessary from any Board Office, federal, state, or local government entity?	Y	h)	w3) w4)	Confirmed through supporting documents and responses from the IGDC and CAS.
		14	Does the director of compliance routinely communicate to the chancellor, the BOG, and the Audit and Compliance Committee regarding Program activities?	Y	e) g) h)	w1) w2) w3) w4)	Confirmed through supporting documents and responses from the IGDC and CAS, and the Chancellors.
		15	Does the director of compliance have adequate resources and appropriate authority?	Y	h) i) k) l) m) n) o)	w3) w4)	Confirmed through supporting documents and responses from the IGDC and CAS.
		16	Do the Program's functions conflict with the responsibility of the general counsel to provide legal advice on ethics laws?	N	h)	w3) w4)	Confirmed through supporting documents and responses from the IGDC and CAS.
		17	Does the Program include compliance officers ("Compliance Partners") for various program areas throughout the Board Office?	Y	r)	n/a	Confirmed through supporting documentation.

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Partners Meeting agendas, minutes, notes; Committee members listing s) Code of Conduct/Statement of Ethical Conduct t) Code of Conduct, Ethical Conduct Training u) Fraud and Other Wrongful Acts Policy v) Compliance Program Plan w) Supporting statements x) F.S. 20.155 BOG of the SUS	<b>Compliance Program and Effectiveness</b>	18	Is the Program a point for coordination of and responsibility for activities that promote ethical conduct and maximize compliance with applicable laws, regulations, rules, policies, and procedures?	Y	s)	w3) w4)	Confirmed through supporting documents and responses from the IGDC and CAS.
		19	Is the program reasonably designed to optimize its effectiveness in preventing or detecting non-compliance, unethical behavior, and criminal conduct?	Y	i) j) k) l) m)	n/a	Confirmed through supporting documentation.
		20	Does the director of compliance report at least annually on the effectiveness of the Program to the BOG?	N	i) l)	w3) w4)	Based on the documentation provided and reviewed the answer is that it is reviewed "regularly," not "annually."
		21	Are the chancellor and BOG provided for review and approval at least once every five (5) years with an external review of the Program's design and effectiveness and any recommendation for improvement?	Y	o)	n/a	Confirmed through supporting documentation.
<b>STANDARDS OF CONDUCT/POLICIES AND PROCEDURES</b>							
a) BOG Meeting Agendas/minutes b) New BOG Orientation Materials c) BOG – Other Workshop Materials d) BOG Orientation Materials e) BOG/Compliance Committee training or other educational material f) Audit and Compliance Committee Charter g) Compliance	<b>Codes of Conduct (Employees and Students)</b>	22	Is the Program developed consistent with the Code of Ethics for Public Officers and Employees contained in Part III, Chapter 122, Florida Statutes; and the Federal Sentencing Guidelines Manual, Chapter 8, Part B, Section 2.1 (b)?	Y	t) j)	n/a	Based on the documentation provided and reviewed the answer is "yes."
	<b>ions, Laws</b>	23	Has the Board Office established standards and procedures to prevent and detect misconduct, including criminal conduct?	Y	t)	n/a	Based on the documentation provided and reviewed the answer is "yes."

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b) Compliance Committee Agenda and Minutes h) Compliance Office Annual Reports i) Board Office Organizational Chart j) Compliance Office Organizational Chart k) Director of Compliance Position Description l) OIGC Office Charter m) Compliance Office Budget n) Compliance Officer Resume o) Compliance Office - 5-Year Review Materials p) Compliance Officer - Board Office Committee Listing q) Compliance Office - Hotline Engagement Documentation r) "Compliance Partners" meeting agendas, minutes, notes; Committee members listing s) Code of Conduct/Statement of Ethical Conduct t) Code of Conduct, Ethical Conduct Training u) Fraud and Other Wrongful Acts Policy v) Compliance Program Plan w) Supporting statements x) E.S. 20.155 BOC of	<b>Policies, Regulations</b>	24	Do the compliance activities performed by the Program promote ethical conduct and maximize compliance with applicable laws, regulations, rules, policies, and procedures?	Y	l) s)	n/a	Confirmed through supporting documentation.	
	<b>EFFECTIVE LINES OF COMMUNICATION AND REPORTING</b>							
	<b>Open Lines of Communication</b>	25	Does the OIGC take reasonable steps to communicate periodically and in a practical manner its standards and procedures, and other aspects of the compliance and ethics program, to members of the BOG, leadership, employees, and Board Office agents as appropriate to such individuals' respective roles and responsibilities?	Y	b) c) d) f) l) s)	w3) w4)	Confirmed through supporting documents and responses from the IGDC and CAS.	
r) "Compliance Partners" meeting agendas, minutes, notes; Committee members listing s) Code of Conduct/Statement of Ethical Conduct t) Code of Conduct, Ethical Conduct Training u) Fraud and Other Wrongful Acts Policy v) Compliance Program Plan w) Supporting statements x) E.S. 20.155 BOC of	<b>Reporting Expectations, Hotline, Non-Retaliation Policy</b>	26	Does the Program require the Board Office, in a manner, which promotes visibility, to publicize a mechanism for individuals to report potential or actual misconduct and violations of Board Office policy, procedures, regulations, or law, and to ensure that no individual faces retaliation for reporting a potential or actual violation when such report is made in good faith?	Y	q)	n/a	Confirmed through supporting documentation.	
	<b>EDUCATION AND TRAINING</b>							
	<b>Board of Governors Training</b>	27	Do Board of Governors members receive training regarding their responsibility and accountability for ethical conduct and compliance with applicable laws, regulations, rules, policies, and procedures?	Y	b) c) d)	n/a	Confirmed through supporting documentation.	

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x) F.S. 20.155 BOG of the SUS	Compliance Training/New Employee Orientation	28	Do Board Office employees receive training regarding their responsibility and accountability for ethical conduct and compliance with applicable laws, regulations, rules, policies, and procedures?	Y	s)	n/a	Confirmed through supporting documentation.	
		29	Does the Program specify when and how often this training shall occur?	N	s)	n/a	Based on the documentation provided and reviewed there is no indication as to when and how often the trainings occur.	
	<b>COMPLIANCE REVIEWS AND ISSUES MONITORING</b>							
	Audits	30	Has the Board Office taken reasonable steps to ensure that its compliance and ethics program is followed, including monitoring and auditing to detect criminal conduct?	Y	h) k) l)	n/a	Based on the documentation provided and reviewed the answer is "yes." The process and structure are in place, as well as the legal authority. The roles and functions are delineated in the referenced documents.	
31		Does the compliance and ethics program exercise due diligence to prevent and detect criminal conduct?	Y	h) k) l)	n/a	Based on the documentation provided and reviewed the answer is "yes."		
<b>RESPONSE AND REPORTING RESULTS</b>								
a) BOG Meeting Agendas/minutes b) New BOG Orientation Materials c) BOG – Other Workshop Materials d) BOG Orientation Materials e) BOG/Compliance Committee training or other educational material	Issue Investigation	32	Does the director of compliance initiate, conduct, supervise, coordinate, or refer to other appropriate offices (such as human resources, audit, or general counsel) such inquiries, investigations, or reviews as deemed appropriate and in accordance with Board Office regulations and policies?	Y	h) k) l)	w3) w4)	Confirmed through supporting documents and responses from the IGDC and CAS.	
		33	When noncompliance, unethical behavior, or criminal conduct has been detected, does the Board Office take reasonable steps to prevent further similar behavior, including making any necessary modification to the Programs?	Y	t)	n/a	Confirmed through supporting documentation.	
f) Audit and Compliance Committee Charter g) Compliance Committee Agenda and Minutes h) Compliance Office Annual Reports i) Board Office	Remediation Corrective Action							

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ENFORCEMENT AND DISCIPLINE						
<b>Enforcement</b>	34	Does the Program articulate the steps for reporting and escalating matters of alleged misconduct, including criminal conduct, when there are reasonable grounds to believe such conduct has occurred?	Y	u)	n/a	Confirmed through supporting documentation.
	35	After criminal conduct has been detected, does the Board Office take reasonable steps to respond appropriately to the criminal conduct and to prevent further similar criminal conduct, including making any necessary modifications to the Board Office's policies and procedures?	Y	u)	n/a	Confirmed through supporting documentation.
	36	Does the Board Office periodically assess the risk of criminal conduct and take appropriate steps to design, implement, or modify the Program to reduce the risk of criminal conduct identified through this process?	Y	f) u)	n/a	Based on the documentation provided and reviewed the answer is "yes."
<b>Incentives and Disciplinary Measures</b>	37	Does the director of compliance promote and enforce the Program, in consultation with the chancellor and Board of Governors members, consistently through appropriate incentives and disciplinary measures to encourage a culture of compliance and ethics?	Y	e) t)	w3) w4)	Confirmed through supporting documents and responses from the IGDC and CAS.
	38	Are failures in compliance or ethics addressed through appropriate measures, including education or disciplinary action?	Y	u)	w3) w4)	Confirmed through supporting documents and responses from the IGDC and CAS.

l) Board Office  
 Organizational Chart  
 j) Compliance Office  
 Organizational Chart  
 k) Director of  
 Compliance Position  
 Description  
 l) OIGC Office Charter  
 m) Compliance Office  
 Budget  
 n) Compliance Officer  
 Resume  
 o) Compliance Office - 5-  
 Year Review Materials  
 p) Compliance Officer -  
 Board Office Committee  
 Listing  
 q) Compliance Office -  
 Hotline Engagement  
 Documentation  
 r) "Compliance  
 Partners" meeting  
 agendas, minutes,  
 notes; Committee  
 members listing  
 s) Code of  
 Conduct/Statement of  
 Ethical Conduct  
 t) Code of Conduct,  
 Ethical Conduct Training  
 u) Fraud and Other  
 Wrongful Acts Policy  
 v) Compliance Program  
 Plan  
 w) Supporting  
 statements  
 x) F.S. 20.155 BOG of  
 the SUS

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	<b>Background Checks/Exclusion Screening</b>	39	Does the Board Office use reasonable efforts to exclude individuals from the Board Office and its affiliate organizations those whom it knows or reasonably should have known (through the exercise of due diligence), engaged in conduct not consistent with an effective Program?	Y	BOG-IOPP Manual	w3) w4)	<p>For any instances regarding conduct inconsistent with an effective compliance program related to the hiring process, we would refer to the Board Office’s Internal Operating Policies and Procedures (IOPP) Manual, section 2.2.1, Advertisement, Recruitment, and Selection, which states in part:</p> <p>Applicants</p> <p>To be considered for Board Office positions, an applicant must have submitted all required documents, including acknowledgment of and consent to background screening requirements, and taken any applicable assessments/technical reviews. Pursuant to Section 893, Florida Statutes, any person who has been convicted of a felony involving the sale of, or trafficking in or conspiracy to sell or traffic in, a controlled substance is disqualified from employment unless conditions outlined in Section 775.16, Florida Statutes, are met. Failure to disclose such conviction is cause for dismissal.</p>
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**Worksheet: Assessment Rating, List A**

**Board of Governors Office of Inspector General and director of compliance**

	#	QUESTIONS	Y/N	GC, PC, DNC* <small>*(Generally Conforms, Partially Conforms, Does Not Conform)</small>	Assessor Comments	Improvement Opportunities
<b>EXECUTIVE OVERSIGHT</b>						
<b>Board of Governors</b>	1	Are the Chancellor and the Board of Governors (BOG) members knowledgeable about the Compliance and Ethics Program (Program)? How is it demonstrated?	Y	GC	It is demonstrated by the agendas and minutes along with the orientation, workshops, as well as the trainings and educational materials.	None
	2	Do the Chancellor and BOG exercise oversight with respect to the Program's implementation and effectiveness?	Y	GC	It is apparent that the chancellor and BOG is heavily involved in the dictates of the Program's structure, implementation, and effectiveness.	None
	3	Are any Program plan revisions, based on the director of compliance's report approved by the BOG?	Y	GC	Confirmed through supporting documents and interviews of Chancellors Rodrigues and Levine.	None
<b>Audit and Compliance Committee</b>	4	Does the Audit and Compliance Committee Charter address governance oversight for the Program?	Y	GC	The charter is clear and succinct with regards to governance oversight of the Program.	None
			Y			
	5	Is the Office of Inspector General and Director of Compliance (OIGC) governed by a charter approved by the BOG and reviewed at least every three (3) years for the consistency with applicable BOG's Internal Operating Policies and Procedures, professional standards, and best practices?	Y	PC	Most recent charter revisions were presented to the AACC and BOG on 9/18-19, 2024 and it was changed to "at least every three years." This was confirmed on the link: <a href="https://www.flbog.edu/meeting/florida-board-of-governors-meeting-qlnoqqne/">https://www.flbog.edu/meeting/florida-board-of-governors-meeting-qlnoqqne/</a> .	Ensure that the new 3-year review requirement is followed.
	6	Does the director of compliance report functionally to the Board of Governors and administratively to the Chancellor?	Y	GC	The reporting structure is thoroughly spelled out in the documentation.	None
	7	Is the director of compliance the same individual as the inspector general, chief audit executive, or the general counsel?	N	GC	Confirmed through supporting documents and responses from the IGDC and CAS.	None

**Worksheet: Assessment Rating, List A**

	#	QUESTIONS	Y/N	GC, PC, DNC* *(Generally Conforms, Partially Conforms, Does Not Conform)	Assessor Comments	Improvement Opportunities
Compliance/Compliance Office	8	Does the director of compliance have the independence and objectivity to perform the responsibilities of the inspector general and director of compliance function?	Y	PC	The OIGC's governing documents (the committee and office charters as well as the compliance program plan) already address the need for the IG's/DoC's independence and objectivity. There are proposed revisions to both charters that will be presented to the AACC and the full Board at the September 18-19, 2024, meeting to be more specific and descriptive.	Ensure that the revisions are completed based on the new Global Internal Audit Standards that will be in effect in January 2025.
	9	In circumstances where either a restriction or barrier was imposed by an individual on the scope of an inquiry, or the access to the necessary information for the purposes of such inquiry was denied, is the inspector general and director of compliance able to remedy the situation by talking to the Chancellor?	Y	PC	The committee and office charters have been revised and presented to Board (9/18-19), which now specifies that the inspector general and director of compliance has the authority and status to take matters directly to the chancellor without interference.	Ensure that the compliance program plan is revised similarly upon completion of this external review of the compliance program. The revised program plan should be presented to the Board for approval at the first opportunity.
	10	Does the inspector general and director of compliance have decision-making independence, including the ability to elevate compliance and ethics concerns directly to the BOG without executive leadership pre-approval?	Y	PC	The documentation provided does not specify whether the director of compliance has the ability to go directly to the BOG without executive leadership pre-approval. However, the compliance program plan states that the inspector general and director of compliance has "full access to the chancellor and Board members" and that she can escalate critical or time-sensitive compliance issues as appropriate and as needed.	Upon completion of this external review of the compliance program, revise the compliance program plan to clarify that the IG/DoC can escalate any matters to the Board without interference. The revised compliance program plan should be presented to the Board for approval at the first opportunity to do so.

**Worksheet: Assessment Rating, List A**

	#	QUESTIONS	Y/N	GC, PC, DNC* *(Generally Conforms, Partially Conforms, Does Not Conform)	Assessor Comments	Improvement Opportunities
Director of C	11	Does the inspector general and director of compliance have timely access to any records, data, and other information in possession or control of the Board Office, including information reported in accordance with the Board Office's complaints procedures?	Y	PC	Charter (section 7.0, p. 5) states "...OIGC staff shall have access to all information and personnel necessary to perform their duties and responsibilities," which was revised to be clearer and stronger (BOG approval at the 9/18-19, 2024, meeting). This was confirmed on the link: <a href="https://www.flbog.edu/meeting/florida-board-of-governors-meeting-qlnoqqne/">https://www.flbog.edu/meeting/florida-board-of-governors-meeting-qlnoqqne/</a> .	The compliance program plan should be revised to include this language upon completion of the external review. Once revised, it should be presented to the Board of Governors for approval at the first opportunity.
	12	Does the inspector general and director of compliance conduct and report on compliance and ethics activities and inquiries free of actual or perceived impairment to the independence of the the position?	Y	GC	The inspector general and director of compliance issues reports from compliance reviews, internal audits, and any investigative activities to the Board of Governors as well as to the chancellor. Typically, the results of any investigations are also presented to the Board.	None
	13	Does the inspector general and director of compliance coordinate or request compliance activity information or assistance as may be necessary from any federal, state, or local government entity?	Y	GC	For compliance reviews and internal audit engagements, the OIGC often requests information from other Board Office units and (occasionally) from universities and other state agency offices (such as the Department of Management Services or the Florida Digital Service). OIGC staff have experienced full cooperation with all requests.	None
	14	Does the inspector general and director of compliance routinely communicate to the Chancellor, the BOG, and the Audit and Compliance Committee regarding Program activities?	Y	GC	The inspector general and director of compliance and her staff provide support to the BOG's audit and compliance committee. This includes requests for specific information for review. Routine meetings are held, issues periodic newsletters, and issues an annual report of activities for the previous fiscal year.	None
	15	Does the inspector general and director of compliance have adequate resources and appropriate authority?	Y	GC	New hire which has led to an increase in the number of compliance activities as a result of having this additional FTE.	None
	16	Do the Program's functions conflict with the responsibility of the general counsel to provide legal advice on ethics laws?	N	GC	Confirmed through supporting documents and responses from the IGDC and CAS, and the Chancellors.	None

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	#	QUESTIONS	Y/N	GC, PC, DNC* *(Generally Conforms, Partially Conforms, Does Not Conform)	Assessor Comments	Improvement Opportunities
<b>Senior Leadership Compliance Partners</b>	17	Does the Program include compliance officers ("Compliance Partners") for various program areas throughout the agency?	Y	GC	There is a network of Compliance Partners for the various program areas of the Board Office.	None
	18	Is the Program a point for coordination of and responsibility for activities that promote ethical conduct and maximize compliance with applicable laws, regulations, rules, policies, and procedures?	Y	GC	The Code of Conduct/Statement of Ethical Conduct is thorough in its requirements to ensure that activities that promote ethical conduct and maximize compliance with applicable laws, regulations, rules, policies, and procedure followed.	None
<b>Compliance Program and Effectiveness</b>	19	Is the program reasonably designed to optimize its effectiveness in preventing or detecting non-compliance, unethical behavior, and criminal conduct, as appropriate to the agency's mission, size, activities, and unique risk profile?	Y	GC	The necessary elements for an effective Compliance Program to prevent or detect non-compliance, unethical behavior, and criminal conduct are in place.	None
	20	Does the inspector general and director of compliance report at least annually on the effectiveness of the Program to the BOG?	N	DNC	Based on the documentation provided and reviewed the answer is that it is reviewed "regularly," not "annually." It has been stated that although the office has been able to increase the number of compliance activities and mature the compliance program over the past two fiscal years, the nature of the compliance program and activities makes it difficult to assess effectiveness.	It is recommended that data analytics be utilized to gauge the effectiveness of the Program, which should be reported to the BOG at least annually. (See "Recommendation" tab for an example)
	21	Are the Chancellor and BOG members provided for review and approval at least once every five (5) years with an external review of the Program's design and effectiveness and any recommendation for improvement?	Y	GC	Based on the documentation provided and reviewed the answer is "yes."	None

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	#	QUESTIONS	Y/N	GC, PC, DNC* *(Generally Conforms, Partially Conforms, Does Not Conform)	Assessor Comments	Improvement Opportunities
<b>STANDARDS OF CONDUCT/POLICIES AND PROCEDURES</b>						
Codes of Conduct (Employees and Students)	22	Is the Program developed consistent with the Code of Ethics for Public Officers and Employees contained in Part III, Chapter 112, Florida Statutes; and the Federal Sentencing Guidelines Manual, Chapter 8, Part B, Section 2.1 (b)?	Y	GC	Based on the documentation provided and reviewed the answer is "yes." The program is consistent with the referenced documentation.	None
Policies, Regulations, Laws	23	Has the agency established standards and procedures to prevent and detect misconduct, including criminal conduct?	Y	GC	Based on the documentation provided and reviewed the answer is "yes." The Code of Conduct and Ethical Conduct Training are sufficiently adequate in its establishment of standards and procedures to prevent and detect misconduct, including criminal conduct.	None
	24	Do the compliance activities performed by the Program promote ethical conduct and maximize compliance with applicable laws, regulations, rules, policies, and procedures?	Y	GC	Confirmed through supporting documentation.	None
<b>EFFECTIVE LINES OF COMMUNICATION AND REPORTING</b>						

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	#	QUESTIONS	Y/N	GC, PC, DNC* <small>*(Generally Conforms, Partially Conforms, Does Not Conform)</small>	Assessor Comments	Improvement Opportunities
Open Lines of Communication	25	Does the OIGC take reasonable steps to communicate periodically and in a practical manner its standards and procedures, and other aspects of the compliance and ethics program, to members of the BOG, leadership, and employees, as appropriate to such individuals' respective roles and responsibilities?	Y	GC	The charters explicitly state what is expected of Board members and the inspector general and director of compliance. Training events are offered, partnering with the general counsel and ethics officer who handles the annual ethics training statutory requirement. The OIGC communicates the results of compliance reviews and internal audits to the responsible staff for the topic of the review or audit as well as Board Office leadership. Also, the inspector general and director of compliance is invited to any BOG or board of trustees orientations, retreats, or other such events to present.	None
Reporting Expectations, Hotline, Non-Retaliation Policy	26	Does the Program require the agency, in a manner which promotes visibility, to publicize a mechanism for individuals to report potential or actual misconduct and violations of internal operating policies and procedures, regulations, or law, and to ensure that no individual faces retaliation for reporting a potential or actual violation when such report is made in good faith?	Y	GC	Based on the documentation provided and reviewed the answer is "yes."	None
<b>EDUCATION AND TRAINING</b>						

**Worksheet: Assessment Rating, List A**

	#	QUESTIONS	Y/N	GC, PC, DNC* <small>*(Generally Conforms, Partially Conforms, Does Not Conform)</small>	Assessor Comments	Improvement Opportunities
Board of Governors	27	Do BOG members receive training regarding their responsibility and accountability for ethical conduct and compliance with applicable laws, regulations, rules, policies and procedures?	Y	GC	Based on the documentation provided and reviewed the answer is "yes."	None
n	28	Do Board Office employees receive training regarding their responsibility and accountability for ethical conduct and compliance with applicable laws, regulations, rules, policies, and procedures?	Y	GC	Based on the documentation provided and reviewed the answer is "yes."	None

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	#	QUESTIONS	Y/N	GC, PC, DNC* <small>*(Generally Conforms, Partially Conforms, Does Not Conform)</small>	Assessor Comments	Improvement Opportunities
Compliance Training/New Employee Orientatio	29	Does the Program specify when and how often this training shall occur?	N	DNC	Based on the documentation provided and reviewed there is no indication as to when and how often the trainings occur. It appears that the New Employee Orientation is done at the time of hire and that the Code of Conduct/Statement is required annually per statute.	It is not stated how often the code of conduct or statement of ethical conduct training should occur as that training responsibility is under other Board Office units separate from the OIGC. The general counsel and ethics officer prepares and delivers the presentation, and the OIGC lends administrative support for the trainings. <b>Recommendations:</b> Should consider including in documentation form that the code of conduct/statement of ethical conduct training is an annual requirement. Additionally, see the "Effectiveness" tab for ideas to track and Evaluate the Effectiveness of training programs
<b>COMPLIANCE REVIEWS AND ISSUES MONITORING</b>						
Audits	30	Has the Board Office taken reasonable steps to ensure that its compliance and ethics program is followed, including monitoring and auditing to detect criminal conduct?	Y	GC	Based on the documentation provided and reviewed the answer is "yes." The process and structure are in place, as well as the legal authority. The roles and functions are delineated in the referenced documents.	None
	31	Does the compliance and ethics program exercise due diligence to prevent and detect criminal conduct?	Y	GC	Based on the documentation provided and reviewed the answer is "yes."	None
<b>RESPONSE AND REPORTING RESULTS</b>						



**Worksheet: Assessment Rating, List A**

	#	QUESTIONS	Y/N	GC, PC, DNC* *(Generally Conforms, Partially Conforms, Does Not Conform)	Assessor Comments	Improvement Opportunities
<b>Issue Investigation</b>	32	Does the inspector general and director of compliance initiate, conduct, supervise, coordinate, or refer to other appropriate offices (such as human resources, audit, or general counsel) such inquiries, investigations, or reviews as deemed appropriate and in accordance with Board Office internal operating policies and procedures and other authoritative sources?	Y	GC	The inspector general and director of compliance along with the investigations and audit manager handle any inquiries, investigations, or reviews, even if compliance related. The OIGC's investigation function was accredited by the Commission for Florida Law Enforcement Accreditation, Inc. The OIGC refers to other appropriate offices any complaints or concerns, which includes referring complaints regarding a public university, along with follow-up. The OIGC charter outlines procedures. For compliance reviews, the OIGC frequently relies on other Board Office units to provide the necessary information or evidence related to the review topic.	None
<b>Remediation Corrective Action</b>	33	When noncompliance, unethical behavior, or criminal conduct has been detected, does the agency take reasonable steps to prevent further similar behavior, including making any necessary modification to the Programs?	Y	GC	To date, the Program has not encountered any noncompliance, unethical behavior, or criminal conduct. In any such instances, BOG Regulation 4.004, Board of Governors Oversight Enforcement Authority and section 20.055, Florida Statutes would be applicable.  Any compliance review or internal audit recommendations are added to the OIGC's follow-up table. The status of any open findings or recommendations are reviewed every six months and the results are reported to the chancellor and Board of Governors chair.	None
<b>ENFORCEMENT AND DISCIPLINE</b>						

**Worksheet: Assessment Rating, List A**

	#	QUESTIONS	Y/N	GC, PC, DNC* <small>*(Generally Conforms, Partially Conforms, Does Not Conform)</small>	Assessor Comments	Improvement Opportunities
<b>Enforcement</b>	34	Does the Program articulate the steps for reporting and escalating matters of alleged misconduct, including criminal conduct, when there are reasonable grounds to believe such conduct has occurred?	Y	GC	Confirmed through supporting documentation.	None
	35	After criminal conduct has been detected, does the agency take reasonable steps to respond appropriately to the criminal conduct and to prevent further similar criminal conduct, including making any necessary modifications to the office's Programs?	Y	GC	To date, there has not been any instances of criminal conduct but the Program strives to identify any factors that had contributed to overlooking any early warning signs to adjust our policies and procedures as needed. Currently, the Board Office conducts a level 2 background check on all potential new hires. For any background checks that identify an issue, the inspector general and director of compliance consults with the general counsel, the human resources director, and any other staff as appropriate to determine any possible follow-up before proceeding or not with the hire.	None
	36	Does the Board Office periodically assess the risk of criminal conduct and take appropriate steps to design, implement, or modify the Program to reduce the risk of criminal conduct identified through this process?	Y	GC	The AACC is charged with oversight of the System's audit, investigative, risk, and control functions, as well as the processes for monitoring compliance with laws, rules, and regulations. The AACC Charter provides for the receipt and review of the inspector general's Board office risk assessment results, as well as the approval of the OIGC risk-based work plan and all significant changes to the plan.	None

**Worksheet: Assessment Rating, List A**

	#	QUESTIONS	Y/N	GC, PC, DNC* *(Generally Conforms, Partially Conforms, Does Not Conform)	Assessor Comments	Improvement Opportunities
<b>Incentives and Disciplinary Measures</b>	37	Does the inspector general and director of compliance promote and enforce the Program, in consultation with the Chancellor and BOG, consistently through appropriate incentives and disciplinary measures to encourage a culture of compliance and ethics?	Y	GC	Through the compliance training events, the Program promotes and enforces the compliance program. One such training involved compliance basics applicable for state agency and BOG employees since there were recent hires of new staff who recently graduated with their bachelor's or master's degrees or who have come from the private sector.	None
	38	Are failures in compliance or ethics addressed through appropriate measures, including education or disciplinary action?	Y	GC	The OIGC does not typically make personnel decisions. The office will make recommendations for process or procedural improvements. Additionally, the inspector general and director of compliance is included in leadership meetings where educational opportunities would be discussed.	None

**Worksheet: Assessment Rating, List A**

	#	QUESTIONS	Y/N	GC, PC, DNC* *(Generally Conforms, Partially Conforms, Does Not Conform)	Assessor Comments	Improvement Opportunities
<b>Background Checks/Exclusion Screening</b>	39	Does the agency use reasonable efforts to exclude individuals from the agency whom it knows or reasonably should have known (through the exercise of due diligence), engaged in conduct not consistent with an effective Program?	Y	GC	<p>For any instances regarding conduct inconsistent with an effective compliance program related to the hiring process, the Program would refer to the Board Office's Internal Operating Policies and Procedures (IOPP) Manual, section 2.2.1, Advertisement, Recruitment, and Selection, which states in part:</p> <p>Applicants:</p> <p>To be considered for Board Office positions, an applicant must have submitted all required documents, including acknowledgment of and consent to background screening requirements, and taken any applicable assessments/technical reviews. Pursuant to Section 893, Florida Statutes, any person who has been convicted of a felony involving the sale of, or trafficking in or conspiracy to sell or traffic in, a controlled substance is disqualified from employment unless conditions outlined in Section 775.16, Florida Statutes, are met. Failure to disclose such conviction is cause for dismissal.</p>	None

# Worksheet: Summary by Element

State University System of Florida Board of Governors  
Office of Inspector General and Director of Compliance  
Compliance Program Self-assessment, January 2023  
Self-assessment Review Results, Summary

	Element 1 Executive Oversight	Element 2 Standards of Conduct/Policies and Procedures	Element 3 Effective Lines of Communication	Element 4 Education and Training	Element 5 Compliance Reviews and Issues Monitoring	Element 6 Response and Reporting Results	Element 7 Enforcement and Discipline	Other Program Design and Effectiveness Review
<b>Current Status:</b>	GC = 70% (15 Subsections Items) PC = 25% (5 Subsection Items) DNC = 5% (1 Subsection Item) <b>Overall Compliance Status = 95%</b>	GC = 100% (3 Subsection Items) <b>Overall Compliance Status = 100%</b>	GC = 100% (2 Subsection Items) <b>Overall Compliance Status = 100%</b>	GC = 67% (2 Subsection Items) DNC = 33% (1 Subsection Item) <b>Overall Compliance Status = 67%</b>	GC = 100% (2 Subsection Items) <b>Overall Compliance Status = 100%</b>	GC = 100% (2 Subsection Items) <b>Overall Compliance Status = 100%</b>	GC = 100% (6 Subsection Items) <b>Overall Compliance Status = 100%</b>	Currently conducting Risk Compliance Assessments.
<b>Next Steps:</b>	Follow-up on recommendations in the Assessment Ratings, with emphasis on the Annual Reporting to the BOG.	Continue to facilitate compliance with the Codes of Conduct (Employees and Students) and Policies, Regulations, Laws	Continue to facilitate Open Lines of Communication and Reporting Expectations, Hotline, Non-Retaliation Policy	Follow-up with recommendation concerning specifying when and how often training shall occur, and consider tracking and Evaluating the Effectiveness of training programs with resource supplied.	Continue to facilitate the process and structure and legal authority that are in place with the clearly delineated functions.	Continue to facilitate the current process in place. Consider maintaining the Commission for Florida Law Enforcement Accreditation for the investigation function.	Continue to facilitate compliance with Enforcement, Incentives and Disciplinary Measures, and Background Checks/Exclusion Screening.	Continue to conduct the Risk Assessments.
<b>Other Note:</b>	The PC Subsection Items are or have been addressed – Assurance is recommended.	Commendable observations for this element.	Commendable observations for this element.	Trainings are being done consistently and routinely, but should be documented.	Commendable observations for this element.	Commendable observations for this element.	Commendable observations for this element.	Commendable observations for this element.

OVERALL SUMMARY	
Total = 39 Subsection Items	
GC = 32	82%
PC = 5	13%
DNC = 2	5%
<b>95% Total Compliance</b>	

## Worksheet: Recommendations, p. 1

### RECOMMENDATIONS for Improvement Opportunities

As part of this external assessment, we are presenting the below recommendations which are advisory in nature and are not meant to be requirements that need to be implemented as part of this process. These are suggested improvement opportunities based upon the findings made during the assessment.

#### I. Assessing the effectiveness of a compliance program by reporting on metrics gathered through data collection on the following compliance activities:

##### Recommendations:

- a. Conduct Risk Assessments: Regularly evaluate the risks associated with the organization's operations and ensure the compliance program addresses these risks effectively.
- b. Review Policies and Procedures: Ensure that all compliance policies and regulations are up-to-date and aligned with current laws and regulations. Regularly review and revise them as necessary.
- c. Training and Awareness: Evaluate the effectiveness of training programs. Are targeted stakeholders aware of compliance policies/regulations? Conduct surveys or assessments to gauge understanding.
- d. Monitoring and Auditing: Implement ongoing monitoring and periodic audits to assess compliance with policies/regulations. This can help identify areas of non-compliance or weaknesses in the program.
- e. Reporting Mechanisms: Review the volume and nature of reports to assess compliance culture.

#### II. Training Frequency (Did Not Conform):

To address the absence of clear documentation specifying the frequency of Code of Conduct and Statement of Ethical Conduct training, the compliance program should leverage *Report Volume per 100 Employees*, *Anonymous Report Rate*, and *Substantiation Rate* as metrics to monitor the impact of training frequency on reporting behaviors. Including these metrics in an annual training evaluation report will ensure alignment with compliance goals and provide measurable insights into training effectiveness.

##### Recommendations:

- a. Clearly document that Code of Conduct and Statement of Ethical Conduct training is an annual requirement, ensuring consistency and compliance with statutory mandates.
- b. Use reporting data trends to assess the impact of annual training and adjust content to address identified gaps.

#### III. Annual Reporting to the BOG (Did Not Conform):

The compliance program should integrate data analytics to assess and report on its effectiveness, tying outcomes to the three compliance metrics below:

##### Recommendations:

- a. **Report Volume per 100 Employees:** Demonstrates employee engagement with compliance resources post-training and throughout the year.
- b. **Anonymous Report Rate:** Reflects trust levels in the compliance process and can be compared pre- and post-implementation of specific initiatives.
- c. **Substantiation Rate:** Provides insights into the relevance and quality of reports, highlighting whether training equips employees to identify and report valid concerns.
- d. Ensure the inspector general and director of compliance present these metrics in an annual report to the BOG to demonstrate program effectiveness and compliance maturity.

## Worksheet: Recommendations, p. 2

e. Regularly benchmark these metrics against industry standards to identify trends and risks.

## Worksheet: Training Effectiveness

Tracking and Evaluating the Effectiveness of Training Programs	
<p>A system to track and evaluate training program effectiveness, including post-training assessments, typically utilizes a model which involves four levels of evaluation: Reaction, Learning, Behavior, and Results - assessing participant satisfaction, knowledge gained, on-the-job behavior changes, and overall business impact respectively, often through post-training surveys, knowledge checks, and performance monitoring tools.</p>	
<b>Key elements of a training evaluation system:</b>	
<ul style="list-style-type: none"><li>• <b>Pre-training assessment:</b></li></ul>	Identify existing skill gaps and baseline knowledge before training begins through tests or surveys.
<ul style="list-style-type: none"><li>• <b>Learning Management System (LMS):</b></li></ul>	A platform to deliver training content, track completion rates, and automatically generate post-training assessments. (United Educators, Moodle, Blackboard, Schoology, Google Classroom, Canvas, D2L Brightspace, Absorb LMS, LearnDash, CertCentral, and Edmodo LMS).
<ul style="list-style-type: none"><li>• <b>Post-training assessments:</b></li></ul>	
<ul style="list-style-type: none"><li>• <b>Level 1: Reaction:</b> Immediate feedback through surveys capturing participant satisfaction with the training content, delivery, and format.</li></ul>	
<ul style="list-style-type: none"><li>• <b>Level 2: Learning:</b> Knowledge checks or tests to measure the acquisition of new skills and information learned during training.</li></ul>	
<ul style="list-style-type: none"><li>• <b>Level 3: Behavior:</b> Observation of on-the-job performance to assess whether learned skills are being applied in practice.</li></ul>	
<ul style="list-style-type: none"><li>• <b>Level 4: Results:</b> Measurement of the overall impact on business metrics like productivity, quality, or customer satisfaction linked to the training objectives.</li></ul>	