DIVISION OF AUDIT
Action Items

FAMU [FLORIDA AGRICULTURAL AND MECHANICAL UNIVERSITY]

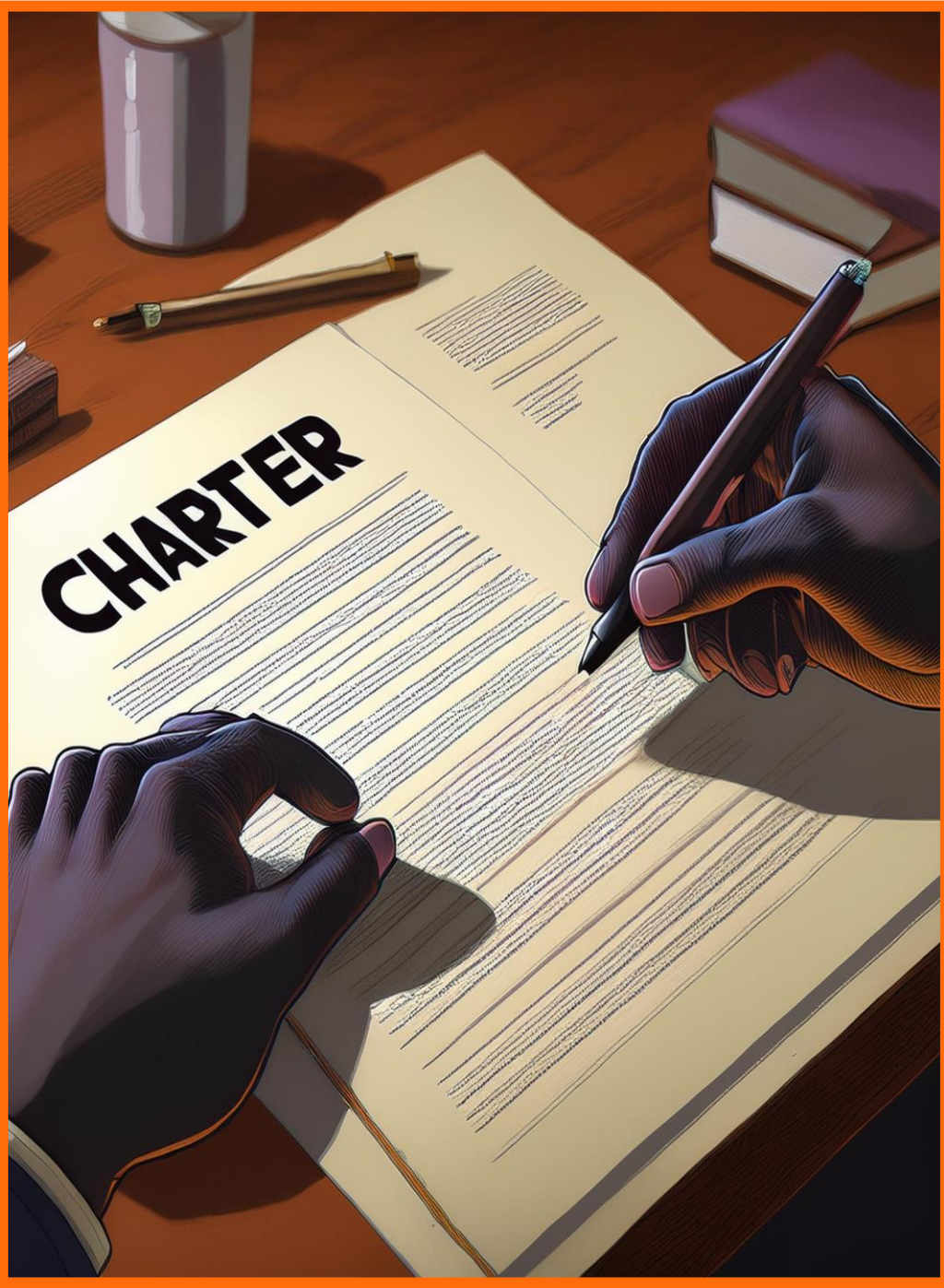# Audit and Compliance Committee Meeting Minutes: 05-28-2024

University Regulation 5.005

Changes include:

- **Clarification of Expressive Activities**
- **Prohibited Actions**
- **Time, Place, and Manner Restrictions**
- **Campus Safety**

AACC Charter Revisions

Rename the Audit and Compliance Committee (AACC) to the Audit, Risk and Compliance Committee (ARCC)

Separates duties and responsibilities of the ERM program from DOA

Adds responsibilities for the AACC to review and approve the annual ERM plan and the Office of Enterprise Risk Management (OERM) report.

Adds responsibilities for the AACC to review the internal audit function's report on conformance with professional standards.

Division of Audit and ERM Charters

Division of Audit

- Removed language referring to the CRO and ERM
- Enhanced language regarding Board Oversight
- Added language regarding situations that may necessitate a review or amendment of the DOA Charter and what that process will look like
- Enhanced language regarding independence and objectivity

Enterprise Risk Management

- Recognizes OERM as an entity separate from DOA
- Removed risk management responsibilities from DOA charter
- The language removed from the original DOA Charter was used to create the OERM Charter
- Removal of the Associate VP for Audit position from DOA and replaces it with the Audit Director

Strike, Strike, and Strike Again!

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New Audit Director

Trystal Wright
CGAP, CIGA, CIGI

- Over 10 years of audit, consulting and analytical experience

- Serves on ACUA's newly formed Artificial Intelligence (AI) Committee

- Serves as a Board member for Tallahassee Chapter of the IIA

- Spearheaded the creation of tools and templates to enhance the internal audit process

- Proud alumna of FAMU
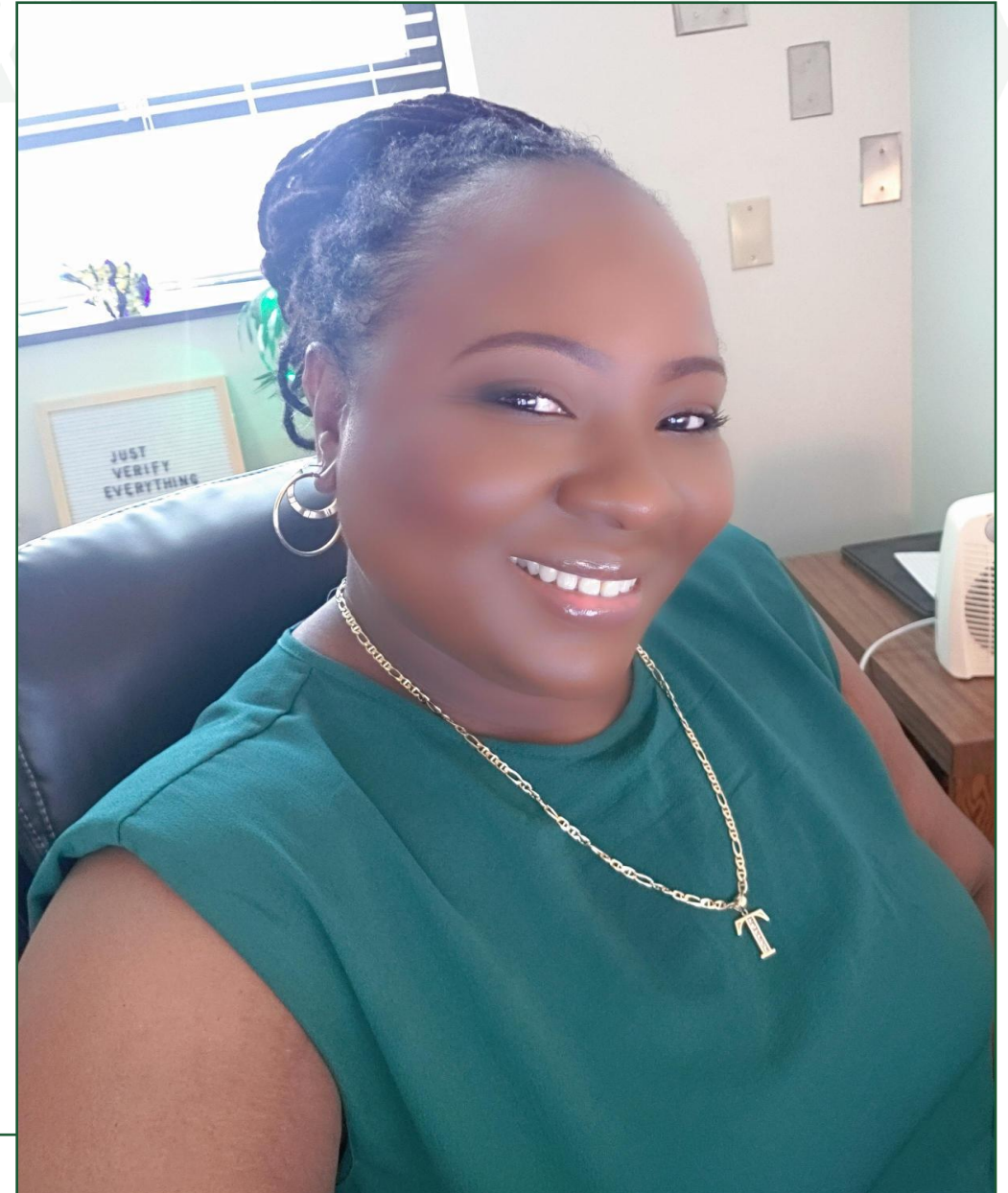
Strike, Strike, and Strike Again!

Post-Tenure Review Audit

Overall, the current PTR process was determined to be effective, compliant with BOG Regulation 10.003, and aligned with the University's goals and priorities.

Opportunities for improvement were identified in the areas of data collection, assignment of backup reviewers when the designated reviewer is unavailable, monitoring, defining thresholds for each rating category, criteria, and procedures.

DOA made 7 recommendations to address these OFIs. The related CAPs are all expected to be implemented no later than Summer 2024.

Strike, Strike, and Strike Again!
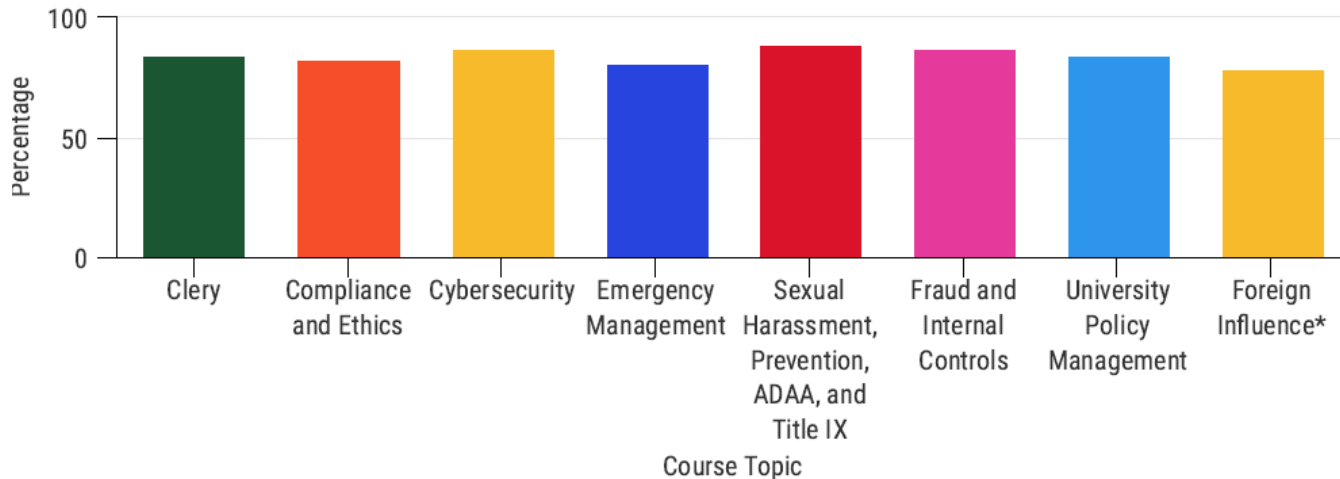
2024 OCE Annual Report

Performance at a Glance

FAMU Fundamentals

University Community Insights

Compliance and Ethics Week

Investigations

Ongoing Compliance Work in Research

Monitoring

Compliance Reviews

What's Next

STRIKE

Strike, Strike, and Strike Again!

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FAMU Fundamentals

FAMU Fundamentals 2024

Enhancement Strategies for 2025
- Manager Support
- Accountability
- Employee Support
- Incentives

Strike, Strike, and Strike Again!

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Compliance and Ethics Week 2023

FLORIDA AGRICULTURAL MECHANICAL UNIVERSITY

FLORIDA A&M UNIVERSITY
OFFICE OF COMPLIANCE AND ETHICS

PROUD FAMULY

2023 Compliance and Ethics Week Events and Info

RESOURCE HUB

November 6 1-2pm

A PROUD FAMILY LUNCH

Efferson Student Union Multipurpose Room B

November 7 1-2pm

PROUD FAMULY BINGO

November 9 1-2pm

PROUD FAMILY REUNION

Efferson Student Union Multipurpose Room B

November 10 ALL DAY

Veterans and Ethics: Honoring Service and Building a Stronger Community

Our Communities

November 1-2 pm

WE ARE FA OCE WOR

Efferson St Multipurpo or Zoom

THE OF COMPLIA ETH

OCE hosts FAMU's annual Compliance and Ethics Week every November. This year's theme, "Proud FAMUly," focused on and met three goals:

- Learn, share, and network

- Deliver an excellent experience

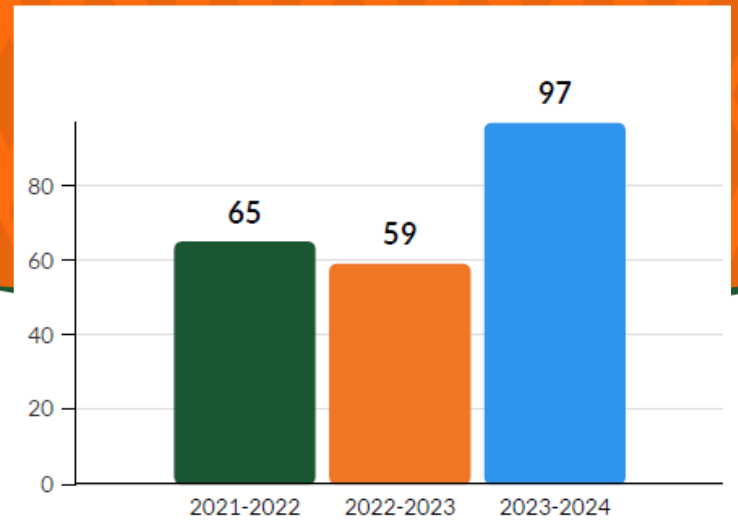- Boost engagement before and after the Week

Investigations

Complaints Received

- 2021-2022: 65
- 2022-2023: 59
- 2023-2024: 97

INVESTIGATIONS CONSTITUTE ANOTHER PIECE OF THE COMPLIANCE STRUCTURE, PROVIDING REINFORCEMENT OF UNIVERSITY EXPECTATIONS AND ACCOUNTABILITY.

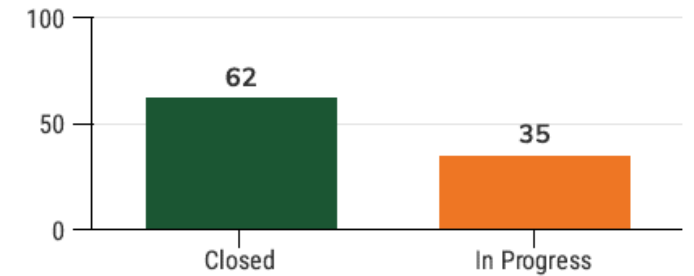THE ENHANCED COMPLIANCE AND ETHICS HOTLINE ALLOWS US TO EXAMINE TRENDS FROM COMPLAINTS RECEIVED.

2023-2024 Complaint Status

- Closed: 62
- In Progress: 35

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Monitoring

➢ **Athletics**

➢ **Compliance and Ethics Hotline**

➢ **Bomb Threat Response Plan**

➢ **Research**

➢ **FAMU DRS**

➢ **Privacy**

➢ **Campus Safety**

➢ **Enterprise Compliance Committee**

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DATA PRIVACY PROGRAM— Strategic Roadmap

Goal	Yearly Activities		
	Year 1 : Assessment and Compliance	Year 2 : Expansion	Year 3 : Maturity and Improvement
Part 1	• Assess privacy procedures and practices to identify existing and emerging privacy regulations, risks and threats. • Develop privacy policies and management procedures that outline the organization's approach to privacy, types of data collected, purpose and access rules. • Set up a data breach and other privacy incidents' response plan. • Launch training and communications campaigns to drive compliant employee behavior.	• Manage the privacy risk assessment process and lead discussions about critical risks. • Facilitate opportunities for collaboration between business units and other functions to monitor ongoing compliance. • Assess and implement privacy enhancing technologies to drive effectiveness and efficiency in data protection at scale. • Develop and implement a privacy impact assessment process to identify and manage privacy risks associated with new projects and initiatives.	• Establish processes to monitor and assess the effectiveness of the privacy program and to regularly review and update privacy policies, processes and training materials. • Present regularly to senior leadership and the BOT on the progress of the privacy program. • Measure privacy risk mitigation effectiveness. • Collaborate with privacy experts to stay ahead of privacy regulations, policies and best practices.
Part 2	• Establish a privacy steering group to oversee and govern the privacy program. • Launch a dedicated privacy team with an appropriate mix of designated privacy FTEs and outline their roles and responsibilities.	• Guide the privacy team to design a privacy governance program and to develop partnerships with regulatory bodies and privacy advocacy groups to stay ahead of privacy regulations and best practices.	• <Same as above>

DATA PRIVACY PROGRAM

- **Established Data Privacy Compliance Committee**

- **Privacy Forecast- FAMU Fundamentals**

- **Updated the University Privacy Statement**

- **Partnered with University ITS to provide additional resources and education**

DATA PRIVACY WEEK

➢ **Partnered with Enterprise Risk Management to facilitate Privacy Workshop.**

➢ **Created media promotion through Instagram highlighting what it meant to be a Data Privacy Champion.**

➢ **Partnered with University partners to provide resources and tips to the University Community.**
  - ➢ **Senior Leadership—Business Case for Privacy**
  - ➢ **Office of the Registrar—FERPA**
  - ➢ **University—Phishing**

Strike, Strike, and Strike Again!

DATA PRIVACY CHAMPIONS January 22-26, 2024

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Compliance Reviews

Research: Export Control/Tech Transfer

Research: Clinical Trials

Research: Foreign Influence Screening

Athletics: Action Plan

Interdepartmental: Foreign Influence Travel Reporting

Research: Grant Compliance

Interdepartmental: Conflict of Interest

Legislation: Private Spaces

Research: USDA Compliance Visit

Athletics: External Compliance Progress Report

What's Next

Strengthening Risk-Based Compliance Oversight

Enhancing risk assessments and strategic compliance initiatives, focusing on emerging challenges such as privacy, cybersecurity, and conflict of interest management across all university divisions.

Expanding Outreach and Engagement

Increasing collaboration with stakeholders to promote a proactive culture of compliance, including targeted training programs for faculty, staff, and students to raise awareness of key regulations and responsibilities.

Enhance Compliance Support

Refining policies and processes for accommodations, investigations, and reporting to ensure comprehensive and accessible services for stakeholders.

Strike, Strike, and Strike Again!

OCE Program Plan 2024-2025

Element 1: Provide Oversight of Compliance and Ethics and Related Activities

Element 2: Develop Effective Lines of Communication

Element 3: Conduct Effective Training and Education

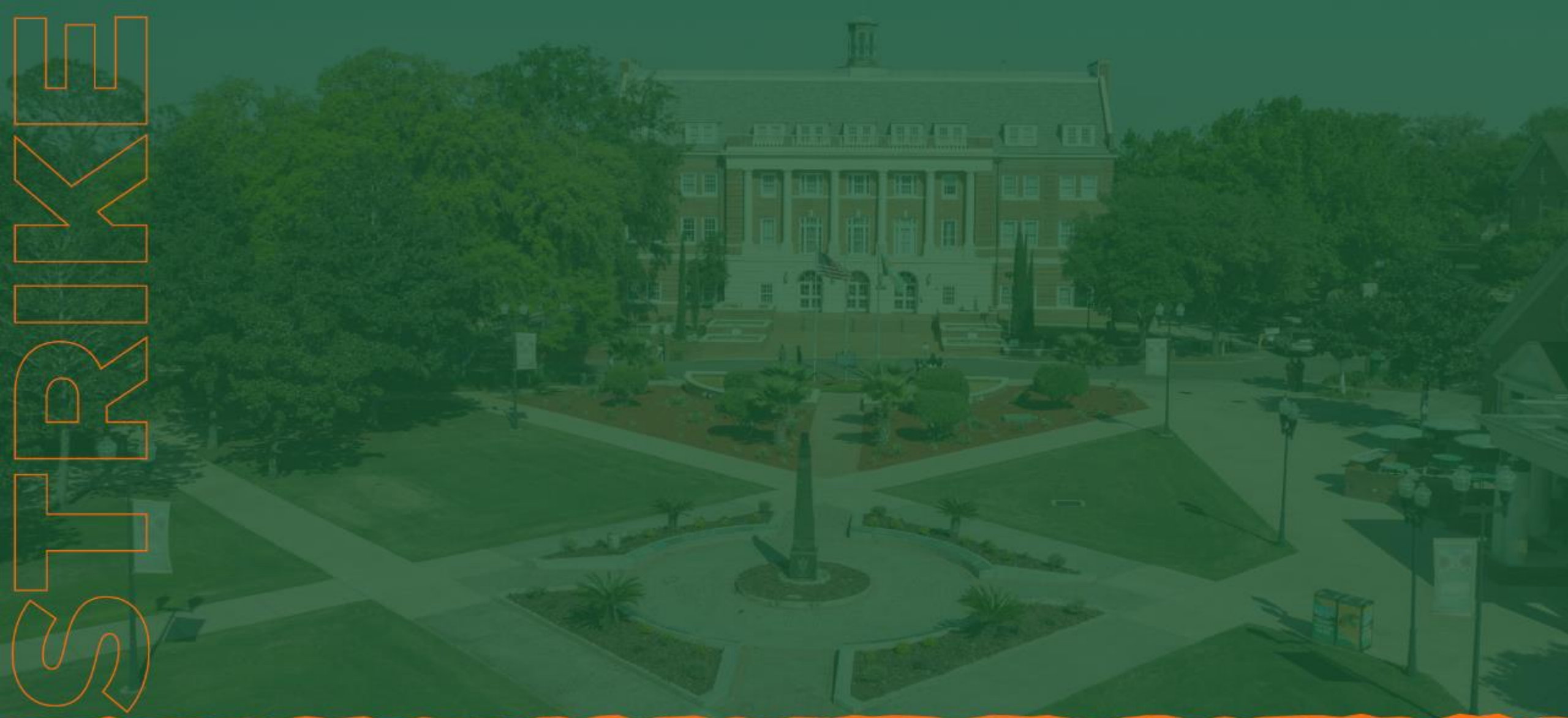Element 4: Revise and Develop Policies and Procedures

Element 5: Conduct Internal Monitoring and Compliance Reviews

Element 6: Respond Promptly to Detected Problems and Undertake Corrective Actions

Element 7: Measure Compliance Program Effectiveness
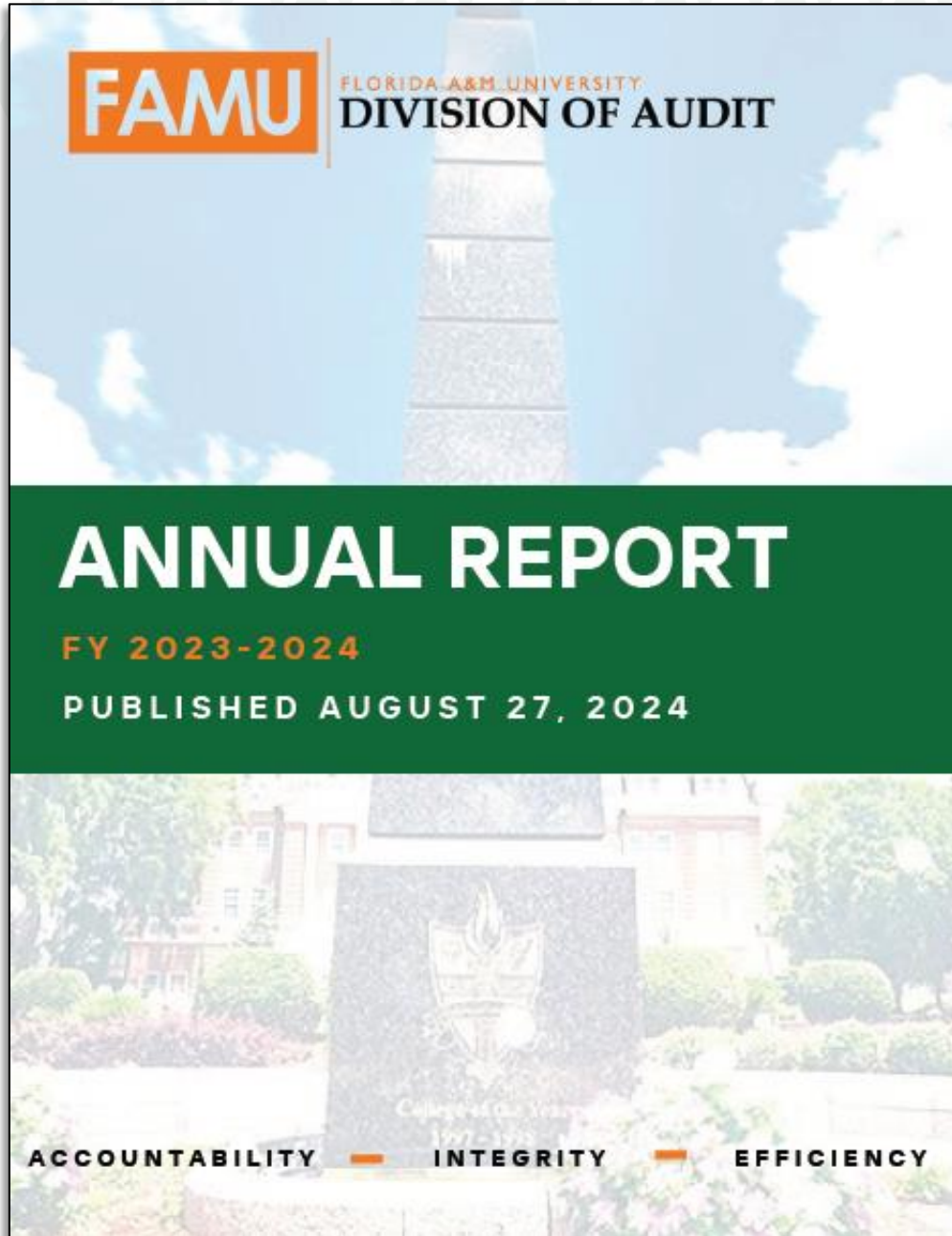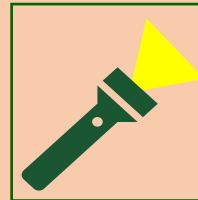
Strike, Strike, and Strike Again!

FY 23-24 Annual Audit Report

Florida BOG Regulation 4.002 states, by September 30th of each year, the CAE shall prepare a report summarizing the activities of the office for the preceding fiscal year. The report shall be provided to the president, board of trustees, and the Board of Governors Office, through the OIGC.

HIGHLIGHTS:

- Results of the Performance-Based Funding and Post-Tenure Review audits
- Results of internal audits and audit follow-up.
- DOA Restructure & Deidre Melton's new role as Deputy Chief Operating Officer
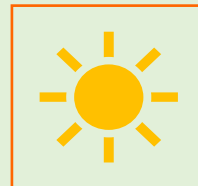
HIGHLIGHTS:

- New staff certifications and
- Staff training and professional development
- Investigative workload
- Results of the external audits and audit follow-up.

FAMU FLORIDA A&M UNIVERSITY
DIVISION OF AUDIT

ANNUAL REPORT

FY 2023-2024

PUBLISHED AUGUST 27, 2024

ACCOUNTABILITY — INTEGRITY — EFFICIENCY

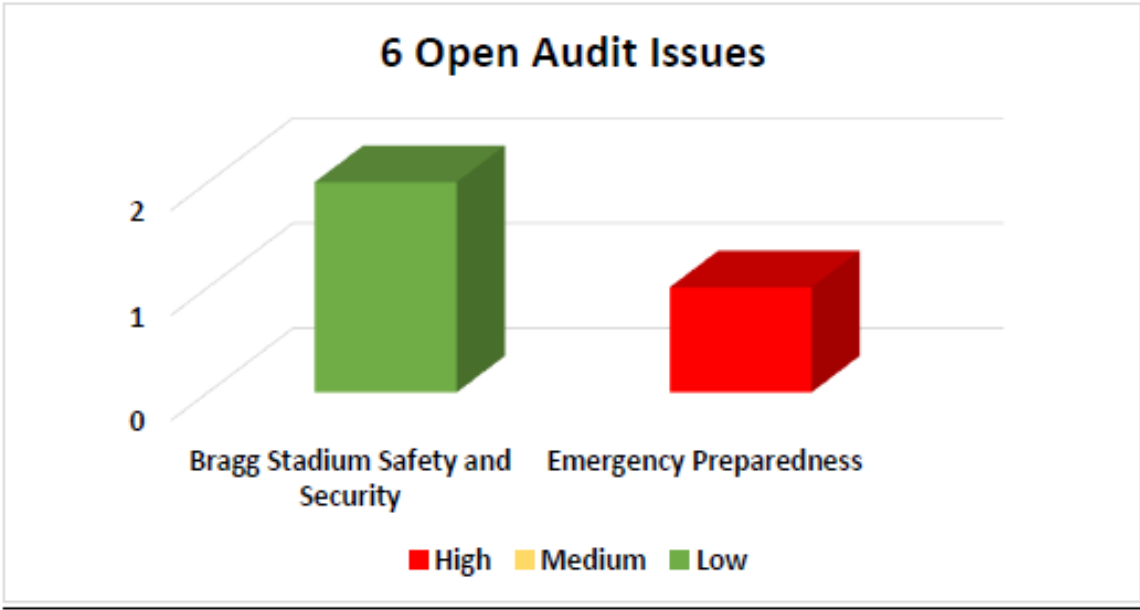# Internal Audit Activities

Audit Work Plan			
Project	**Projected Completion**	**Status**	**Issues Identified**
Financial Aid Audit	Quarter 1	Reporting	N/A
Athletics Financial Review: Spring 2023	Quarter 1	Reporting	N/A
Gramm Leach Bliley Act	Quarter 1	Reporting	N/A
Foreign Influence Audit	Quarter 1	Planning	N/A
Athletics Financial Review: Spring 2024	Quarter 2	Planning	N/A
Performance-Based Funding Data Integrity Audit	Quarter 3	Planning	N/A

Status of Correct Actions for Open Audit Issues since June 2023

Florida Board of Governors Regulation 4.002 State University System Chief Audit Executive, Section 3(b) requires the chief audit executive to report on the progress made by management in implementing corrective actions.

6 Open Audit Issues

Bragg Stadium Safety and Security — Low

Emergency Preparedness — High

■ High ■ Medium ■ Low

Advisory Activities

Advisory Work Plan		
Project	**Projected Completion**	**Status**
Academic Affairs: Faculty & Student Experience	Quarter 1	Reporting
Campus Safety & Security	Quarter 2	Planning

Status of Corrective Action for Open Advisory Issues

- **2022 Procurement Services (34 Recommendations)**
  - 11 Recommendations Successfully Implemented
  - 2 Pending Closure
  - 21 Recommendations Are In-Progress
    - On August 16, 2024, OPS requested that 5 of the past due implementation dates for corrective actions (related to standardizing financial consequences in University contracts and efficient use of technology) be extended to October 2024 and July 2025.
    - Five other corrective actions have future implementation dates and are related to p-card usage, creating a contract repository, including a financial consequence in contract clauses, training and oversight.
    - 2 corrective actions should be completed by Fall 2024, 2 by December 2024, and 1 by Spring 2025.
    - 11 corrective action plans require either clarification, additional information, or an implementation date to be set.

Investigation Activities

12 RECEIVED CASES – 2024-2025
- 3 Investigations
- 5 Management Referrals
- 3 Other Department/Non-DoA Matter
- 1 Preliminary Review

7 FY 2024-2025 OPEN CASES
- 3 Active Investigations
- 3 Management Referrals
- 1 Preliminary Review

6 FY 2024-2025 CLOSED CASES
- 1 Carryforward Investigation
- 2 Management Referrals
- 3 Other Department/Non-DoA Matter

3 INVESTIGATION REPORTS ISSUED
- 2 Carryforward Investigations
- 1 External Investigation

Open Investigative Issues	Count
Accounting and Auditing	1
Conflict of Interest *	1
Discrimination or Harassment *	1
Fraud	4
General Concern	8
Legal or Regulatory Violation	1
Misconduct	2
Other	1
Waste, Abuse, Misuse of Institution Resources	1
Grand Total	20

Although these issues originated as either a conflict of interest or discrimination or harassment they contained elements appropriate for the Division of Audit jurisdiction.

Investigation Updates

Case Number	Investigation Type	Days Open	Current Status
2022-1-71	Employee allegedly overly compensated	944	CLOSED
2022-4-80	Contractors inappropriately compensated	866	VP Review
2022-11-118	Employment complaint: Student Assignment & AOR credits	546	CLOSED - CAP
2022-12-119	Improper use of SGA funds and time abuse	624	CLOSED - CAP
2023-3-137	Alleged fraud and altered Financial Aid records	532	VP Review
2023-6-ITS WB	Contracts - Confidential	455	External Investigation - Fieldwork
2023-7-158	Inappropriate IT Director Designation	412	VP Review
2023-8-164 WB	Band Summer Camp - Confidential	404	CLOSED - CAP
2023-8-167 WB	Contracts - Confidential	223	Fieldwork
2023-9-172	Timesheet and Attendance Fraud	355	Reporting
2022-10-111	Inappropriate ticket sells	684	CLOSED
2023-11-200	Compensation complaint	282	CLOSED - CAP

10 ISSUES HIGHLIGHTED IN GIFT REPORT

Failure to Provide Adequate Information to the University BOT and Foundation BOD

Apparent Conflict Between the Florida Sunshine Law and Florid Public Records Act

Letter of Current Disposition Regarding Major Gift to Donor

University Organizational Structure Allows for Certain Individuals to Bypass Established Checks and Balances

University Current Position Descriptions for the VP of Advancement and the Executive Director of the Foundation Lack Due Diligence Elements

Failure to Utilize Comprehensive Commercial and Open-Source Tools To Verify the Source of Donated Funds

Lack of Policies or Procedures Surrounding Donations

Need for Improved Training

Lack of Threshold for When University BOT or Foundation BOD Must Be Informed of Donations

Donor Confidentiality Related to NDAs and Boards Need to Carryout Fiduciary Responsibilities

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Framework for CAP Development

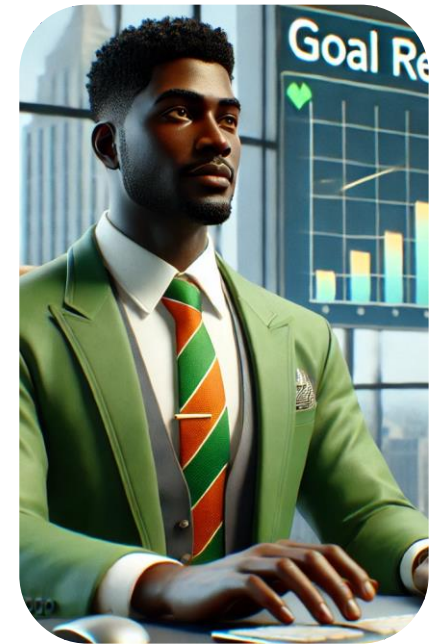Enhance Policies and Procedures Governing the Gift Acceptance Process

Strengthen Communication Channels to Enable Informed Decision-Making by Stakeholders

Clearly Identify Roles and Responsibilities in Process and Approval Chains
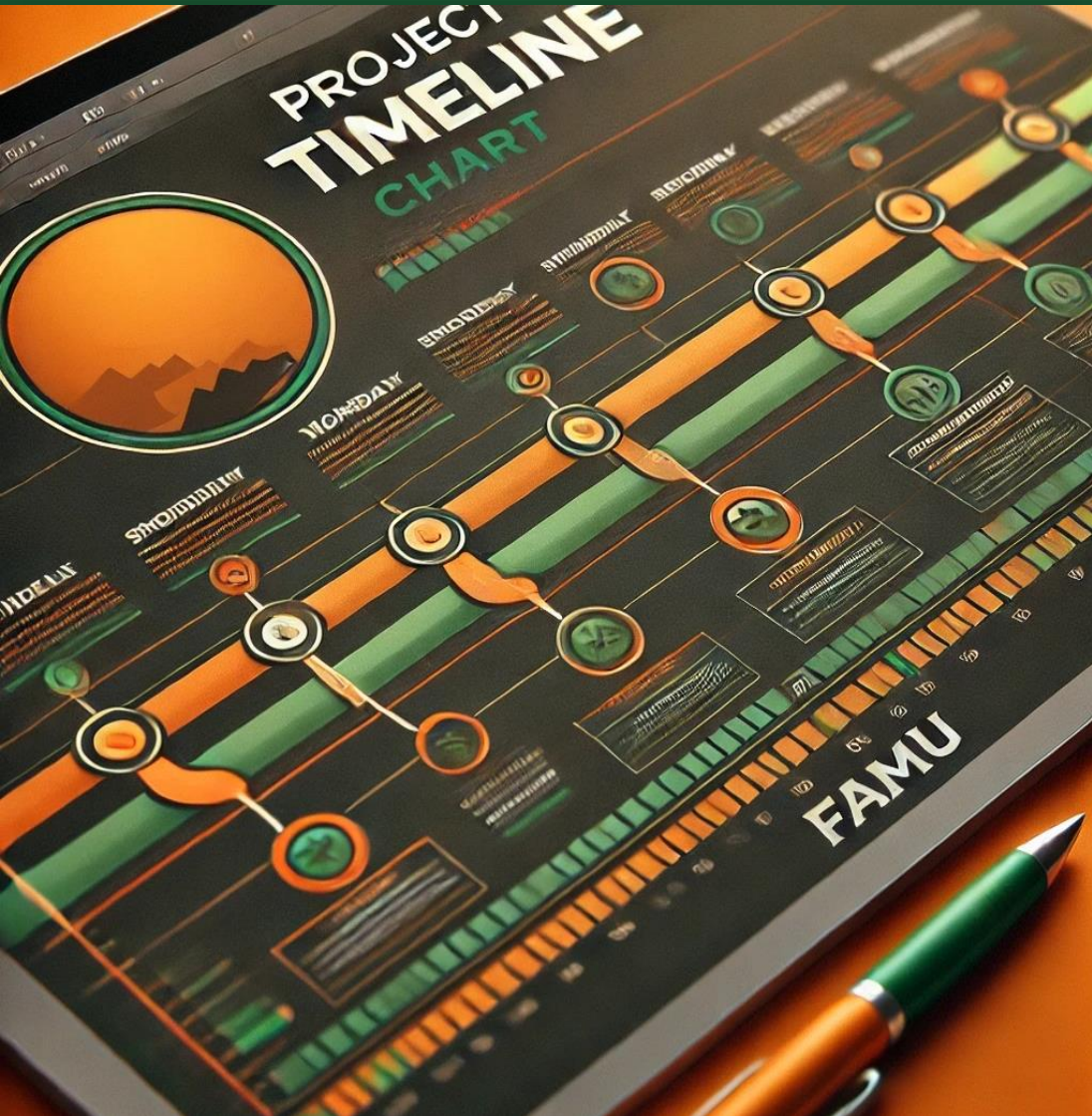
Develop Training to Provide Staff, Management, and Board Members with KSAs to be Effective

Establish Monitoring and Continuous Improvement Protocols

Strike, Strike, and Strike Again!

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CAP Implementation Timeline

Completed by December '24 FAMU BOT Meeting

- Policy and Procedure Reviews
- Identification and Implementation of Communication Protocols
- Review and Enhancement of Roles and Responsibilities
- Implementation of Monitoring and Continuous Improvement Best Practices

Completed by February '25 BOT Meeting

- All Initial Rounds of Training
- Hiring of VP of Advancement & Executive Director of Foundation

External Audit Activities

| Current Status of External Audits		
Audit	**Current Status**	**Comments**
Florida Auditor General (AG) Operational Audit (FYE 2024)	Reporting	The AG Operational Exit Conference was held Monday, August 26, 2024. There were four adverse audit findings, which include the following: • **Special Investments with State Treasury Account:** A repeat finding related to Special Investments with State Treasury Account (SPIA); • **Bank Account Reconciliations:** Untimely preparation of bank reconciliations; • **Prompt Payment (40 days):** Payments to vendors not being in compliance with the 40-day prompt payment requirement; • **Personnel Evaluations:** Employee evaluations not being performed consistently; 11 out of a sample of 28 individuals did not have current evaluations on file for the time period under audit. There were also five issues of concern related to the following: • **Compensated Absences:** Employees remaining on the Leave Liability Report after they were either paid or on the list but not eligible for payment. • **Untimely Financial Reporting:** For the FYE June 30, 2023, the University did not submit financial statements to the BOG by the September 15th deadline or the Annual Financial Report (AFR) to the Board of Governors by the October 31, 2023, deadline. • **Capital Assets- Subsidiary records:** The subsidiary ledgers for Capital Assets have not been timely updated. • **P-cards:** Testing revealed 2 terminated employees still had access to their P-card. • **Subcontractor Documentation:** There is concern that the University could not readily produce subcontract agreements for construction projects related to the Bragg Stadium parking lot project and the 700 Bedroom Residence Hall.
Thomas, Howell, Ferguson (THF) Athletics Financial Statement Audit (FYE 2022 and FYE 2023)	In-Progress	THF audit fieldwork is currently in a holding period due to delays in THF's ability to obtain the requested information from management.
Thomas, Howell, Ferguson (THF) Athletics Agreed Upon Procedures (FYE 2023)	Pending	The next NCAA-required Operating and Capital Financial Data Report, is due January 15, 2025.

ENTERPRISE RISK MANAGEMENT
Updates

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Building Resilience Through Strategic Risk Management: 2024 Enterprise Risk Management Annual Report
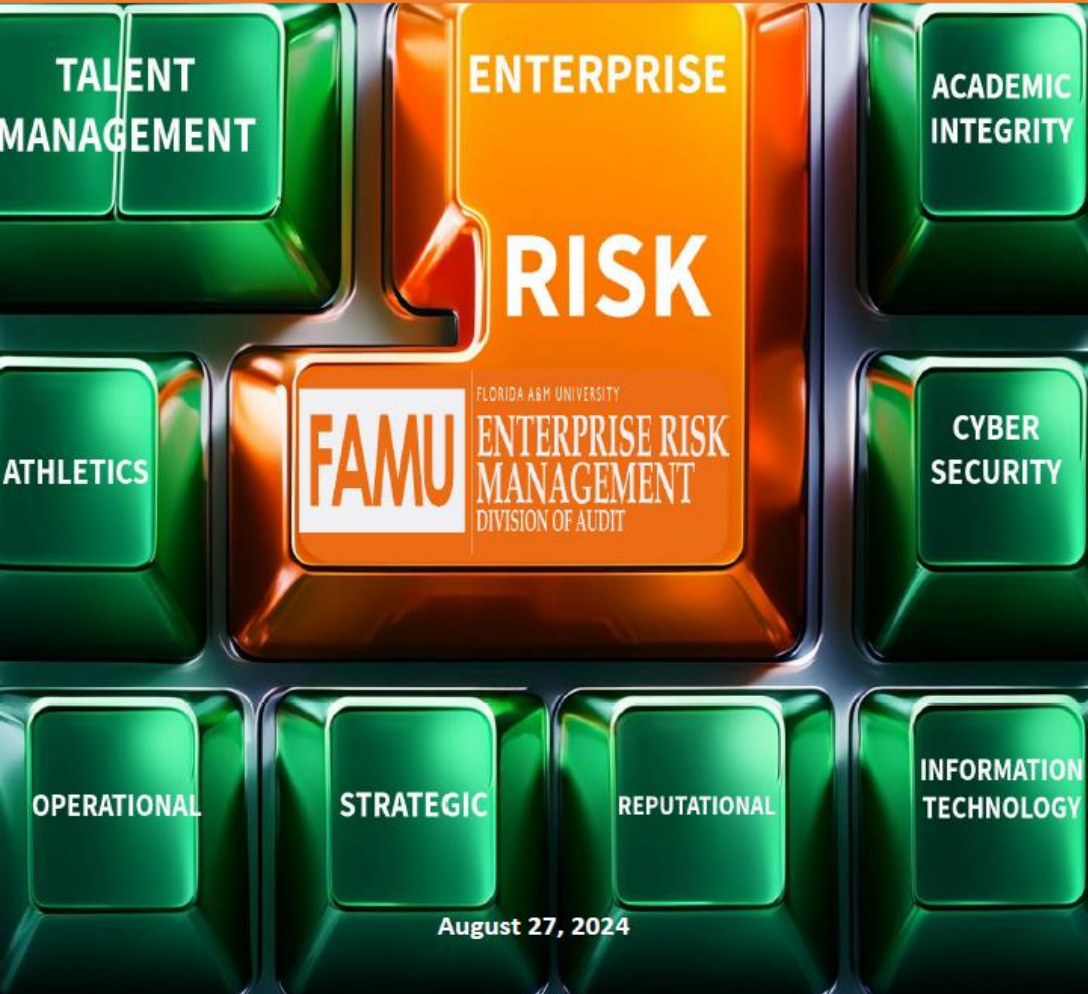
Strategic Alignment: We have strengthened the alignment between our risk management initiatives and the university's strategic goals, ensuring that our risk management practices support our mission of academic excellence, research innovation, and community impact.

Enhanced Risk Awareness: Through education and outreach, we have worked to cultivate a heightened awareness of risk across all levels of the university.

Resilience Building: In partnership with various university departments, we have enhanced our capabilities to respond to unforeseen events and challenges.

Data-Driven Decisions: Leveraging data and analytics, we have improved our risk assessment processes, enabling more informed decision-making across the university.

Collaboration and Partnership: ERM is a collaborative effort, and we have deepened our partnerships with stakeholders across the university to foster a shared responsibility for managing risk.

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Component 1: ERMAC Risk Managers Sub-Committee

The sub-committee will deliver powerful reports that spotlight critical risks, targeted mitigation strategies, and significant achievements across all key areas. Comprehensive reports on emergency management, campus safety, student health services, environmental health & safety, and research will be released, with senior leadership providing strategic feedback at each step. Bi-weekly meetings and a comprehensive end-of-year progress report will ensure continuous momentum and accountability.

Component 2: Establish ERMAC Cohort 2

This year, we will strategically launch Cohort 2 of the ERM Advisory Committee, comprising the Office of Compliance and Ethics, the University Policy Office, and the Division of Audit. By appointing key leaders, establishing a clear meeting cadence, and setting focused priorities, we aim to drive meaningful impact across these critical areas. Regular priority presentations and action plan meetings will ensure that each area advances with purpose and delivers tangible results.

Component 3: Develop a Comprehensive Action Plan Process

This year, we will establish a robust process to monitor and drive the completion of risk response action plans. Our goal is to enhance reporting on these plans and streamline the entire process by integrating it into the Workiva ERM software, ensuring efficiency and accountability throughout. This initiative will empower our teams to proactively manage risks and deliver timely, data-driven updates to leadership.

Component 4: Enhancing Risk Communications

This year, we will elevate our risk communications by issuing regular alerts on emerging risks and providing in-depth reports on risks impacting our Performance Based Funding Metrics and Strategic Plan Goals. Additionally, we will release targeted risk strategy reports on a select group of top risks identified in the University risk assessment, ensuring that our stakeholders are informed and prepared to take action.

Component 5: Implement a Dynamic Risk Assessment Process

This year, we will implement a dynamic risk assessment process that includes a series of targeted workshops on critical areas such as leadership, artificial intelligence, legislation, and cybersecurity. We will conduct industry risk scans and integrate our risk registry into the Workiva platform. Additionally, we will gather comprehensive risk data through interviews and surveys with key stakeholders, including the Board of Trustees, faculty, and mid-management, culminating in a detailed Risk Assessment Report.

Component 6: Strengthening the ERM Governance Framework

This year, we will take decisive action to enhance the ERM Governance Framework, ensuring it is both robust and aligned with best practices. We will conduct thorough reviews of risk appetites, charters, policies, and procedures, as well as maturity assessments to identify areas for improvement. By fortifying the governance structure, we will solidify the foundation of our ERM program, driving greater accountability, transparency, and effectiveness across the university.

Component 7: Expanding Training and Awareness

This year, we will prioritize the expansion of training and awareness initiatives across the university to deepen understanding and engagement with ERM principles. We will develop targeted training programs and awareness campaigns to equip faculty, staff, and stakeholders with the knowledge and tools they need to effectively identify, assess, and manage risks. This will foster a proactive risk culture that supports the university's strategic objectives.

Component 8: Transitioning the ERM Program to the Office of the Chief Operating Officer

This year marks a pivotal shift as the ERM program transitions from the Division of Audit to the Office of the Chief Operating Officer. In this new structure, the Chief Risk Officer will also take on the role of Deputy Chief Operating Officer, integrating risk management more deeply into the university's operational strategy. This transition will enhance the alignment of risk management with our broader strategic goals, driving a more cohesive and resilient organization.

Risk Alert
Meaningful. Actionable. Timely.

May 20, 2024

Deepfakes in Higher Education

Deep fake technology, which employs advanced artificial intelligence and machine learning algorithms, is capable of producing highly realistic and difficult to detect audiovisual forgeries. These technologies can manipulate or generate video and audio recordings that falsely depict people saying or doing things they never did. In the context of higher education, the implications of this technology are particularly profound, encompassing academic, operational, reputational, legal and ethical, and social and psychological risks. Given these multifaceted risks, it is imperative that our management, faculty and staff understand the risks associated with deepfakes and methods they can employ to detect deepfakes.

Academic Risks:
Deep fakes can be used to create fraudulent academic presentations, research materials, or even entire lectures that could deceive students, faculty, and external academic bodies. This threatens the foundation of academic integrity and truth, pillars upon which educational institutions stand.

Operational Risks:
On the operational front, deep fakes could be employed in sophisticated cyber-attack strategies such as spear phishing. By impersonating trusted figures within the university, attackers could obtain unauthorized access to sensitive areas of the university's administrative and financial systems. Furthermore, these technologies could be used during negotiations or decision-making processes to mislead or manipulate outcomes.

Reputational Risks:
From a reputational standpoint, the misuse of deep fake technology can lead to severe consequences. For instance, a convincingly altered video of a university official could rapidly spread misinformation or harmful statements, potentially sparking public relations crises or damaging the university's credibility and trustworthiness on a global scale.

Legal and Ethical Risks:
There are also legal and ethical considerations. The unauthorized use of a person's likeness to create deceptive content not only raises privacy issues but could also lead to legal liabilities for the university if it is unable to prevent or respond effectively to such incidents. Additionally, there are ethical dilemmas associated with the handling and dissemination of synthetic media, which require clear institutional policies and guidelines.

Social and Psychological Risks:
Finally, on a social and psychological level, deep fakes could contribute to a broader erosion of trust within the university community. They can create confusion and mistrust among students and staff, impacting morale and the overall campus environment.

Alert Type: Awareness | Watch | Warning

Risk Alert
Meaningful. Actionable. Timely.

July 11, 2024

Airplane Wi-Fi Cyberattacks

Recent warnings from the Federal Bureau of Investigations (FBI) and Transportation Security Administration (TSA) have highlighted significant cybersecurity risks associated with using in-flight Wi-Fi networks. These networks often lack robust security protocols, making them attractive targets for hackers who can intercept communications, set up rogue networks, and exploit device vulnerabilities. This poses a risk to both personal and professional data on connected devices, potentially leading to data breaches and significant operational and reputational damage. All university personnel are advised to exercise caution and follow best practices when connecting to Wi-Fi networks while traveling.

Potential Risk Impacts to the University

Data Breach and Leakage
If university employees connect to in-flight Wi-Fi and their devices are compromised, sensitive university data, including research, student records, and confidential communications, could be exposed.

Financial Loss:
Cyberattacks could lead to financial repercussions, including costs associated with data recovery, legal fees, potential regulatory fines, and loss of funding or donations due to damaged reputation.

Operational Disruption:
Compromised devices can lead to the spread of malware within the university's network, disrupting administrative functions, online classes, and other critical operations.

Reputational Damage:
A data breach involving university employees could severely damage the institution's reputation, eroding trust among students, parents, faculty, and donors.

Compliance Issues:
Unauthorized access to sensitive information can result in non-compliance with data protection regulations, leading to potential legal actions and fines.

Intellectual Property Theft:
Research data and intellectual property can be targeted, leading to theft of valuable information that could be used by competitors or malicious actors.

Alert Type: Awareness | Watch | Warning

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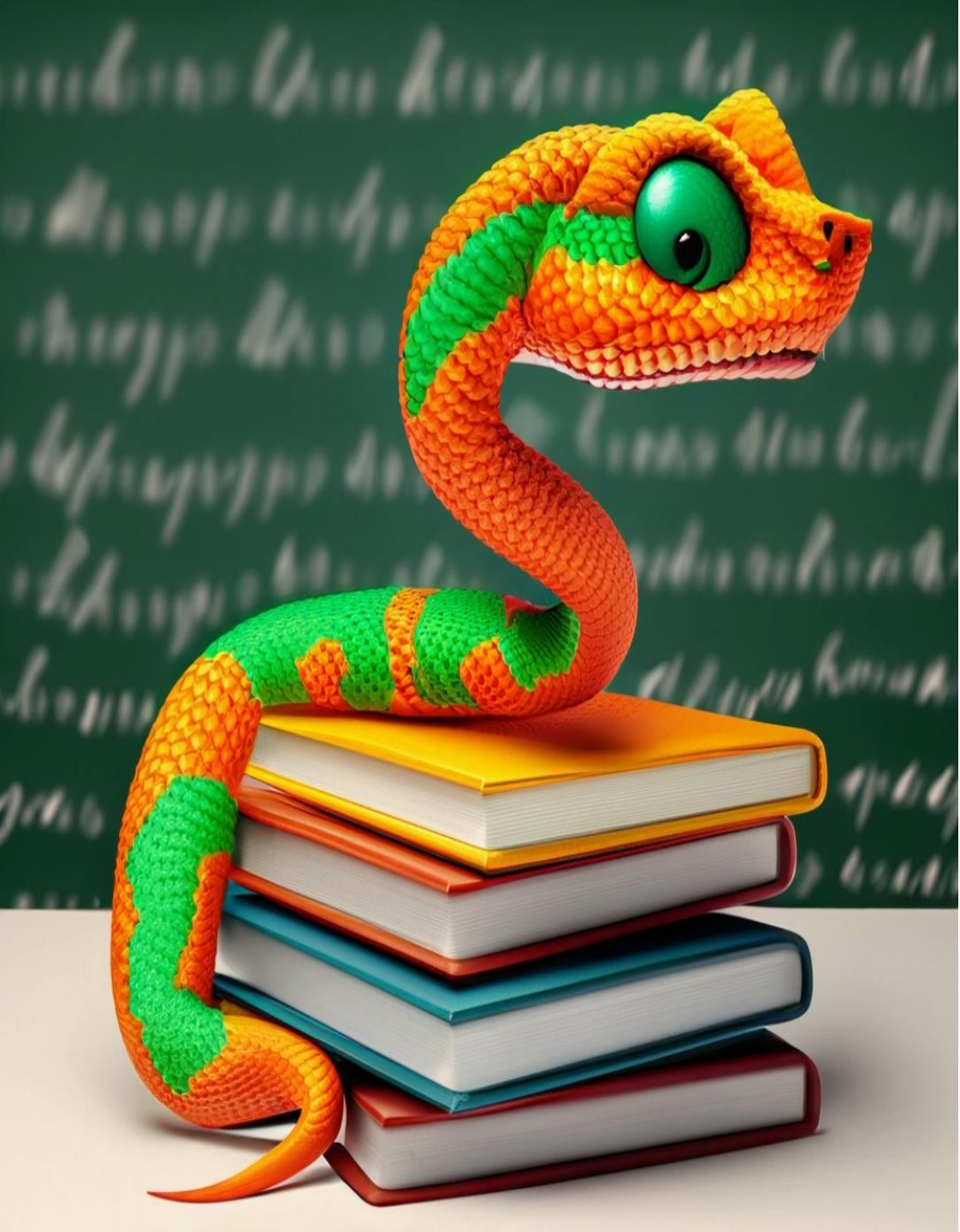
"We inspire Excellence by showing kindness and delivering exceptional Service."