UCR Compliance & Civil Rights

ANNUAL REPORT 2021-2022

**UNIVERSITY OF CALIFORNIA, RIVERSIDE
CHIEF COMPLIANCE OFFICE**

UC RIVERSIDE

CONTENTS

Message from UCR's Chief Compliance Officer

One of the many strengths of the University of California is its commitment to compliance and ethics. The Board of Regents formally adopted a systemwide ethics and compliance program and provides oversight through the Compliance and Audit Committee and Senior Vice President and Chief Compliance and Audit Officer Alexander Bustamante. Under this program, primary management responsibility for campus ethics and compliance activities are delegated by the Chancellor to the campus chief compliance officer.

An effective ethics and compliance program is the foundational framework for a culture of integrity, in which the University's ethical values and standards are interwoven with all that we do.

At UCR, the Chief Compliance Office coordinates ethics and compliance activities for the campus and has direct responsibility for the campus policy and privacy programs, compliance risk assessments, auditing and monitoring, Clery Act oversight, whistleblower complaints, civil rights compliance (such as Title IX, Title VII, ADA), and other programs and activities described in this report.

> **We are committed to:**
>
> **Integrity**
> We will conduct ourselves with integrity in our dealings with and on behalf of the University.
>
> **Excellence**
> We will conscientiously strive for excellence in our work.
>
> **Accountability**
> We will be accountable as individuals and as members of this community for our ethical conduct and for compliance with applicable laws and University policies and directives.
>
> **Respect**
> We will respect the rights and dignity of others.

This annual report presents, for the first time, a consolidated picture of the activities of UCR's Chief Compliance Office. With this report we hope to create greater awareness of the ethics and compliance program and the Office, demonstrate accountability by providing metrics for key elements of our work, and demystify complex processes. This report also highlights areas of focus during the 2021-22 academic year—a unique year for the entire University, as we returned to campus operations after the pandemic closure. The office and UCR met the challenges of this past year while continuing to support the university mission of teaching, research, and public service.

Compliance goals may only be achieved through the support and partnership of the campus community. UCR's unique Highlander spirit and passionate and mission-driven academics, staff, and students allow the university to grow with a focus on ethics and compliance.

Kiersten Boyce
Chief Compliance Officer and Locally Designated Official
Interim Title IX Officer

I.   INTRODUCTION

UC Riverside's Chief Compliance Office (CCO) includes four dedicated teams of professional staff:

Title IX, Equal Opportunity and Affirmative Action   Whistleblower / Fact-Finding   Compliance & Ethics   Audit & Advisory Services
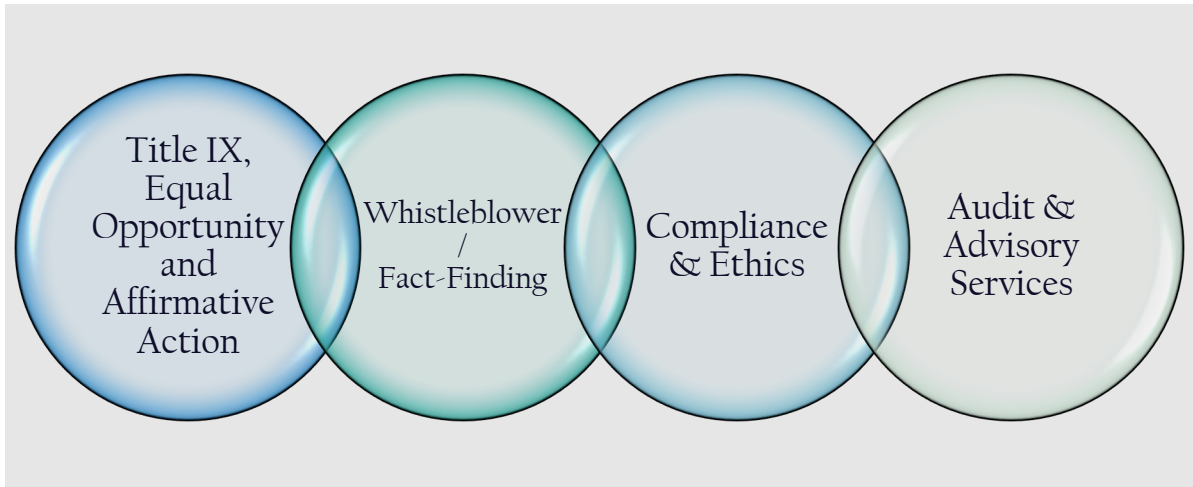
This report, for the first time, presents collected information about the work of these four teams.

By sharing this information, we seek to:

- Demystify complex systems
- Demonstrate transparency and accountability
- Continue to identify opportunities for improvement
- Create greater understanding of shared values.

Promoting an ethical culture in which all members of the UCR community are treated with respect is a shared commitment and responsibility.

Values-Driven

2021-2022 was the second year in which CCO focused on the ethical value of *accountability.*

We strive to uphold this value particularly in our investigations and other complaint resolution work.

II.   REPORTS AND INVESTIGATIONS

Overview

An important CCO function is receiving and responding to reports and complaints. The following figures provide high-level information about these reports and our response to them, including investigations. Later sections of this report provide a deeper dive into our Title IX and other civil rights work—preventing and responding to sexual violence, sexual harassment, and other forms of discrimination and harassment.

We receive many types of reports, inquiries, and complaints ("reports"), which we group into the following categories:

- Whistleblower: whistleblower reports (under the UC Whistleblower Policy) and complaints of retaliation under the UC Whistleblower Protection Policy.

- Civil Rights: reports of discrimination or harassment based on a protected category, discriminatory retaliation, or Prohibited Conduct under the UC Policy on Sexual Violence and Sexual Harassment (SVSH Policy).

- Bias: reports of acts of hate, bias or intolerance received by Title IX, Equal Opportunity & Affirmative Action or CCO. These reports generally are reviewed together with civil rights reports.

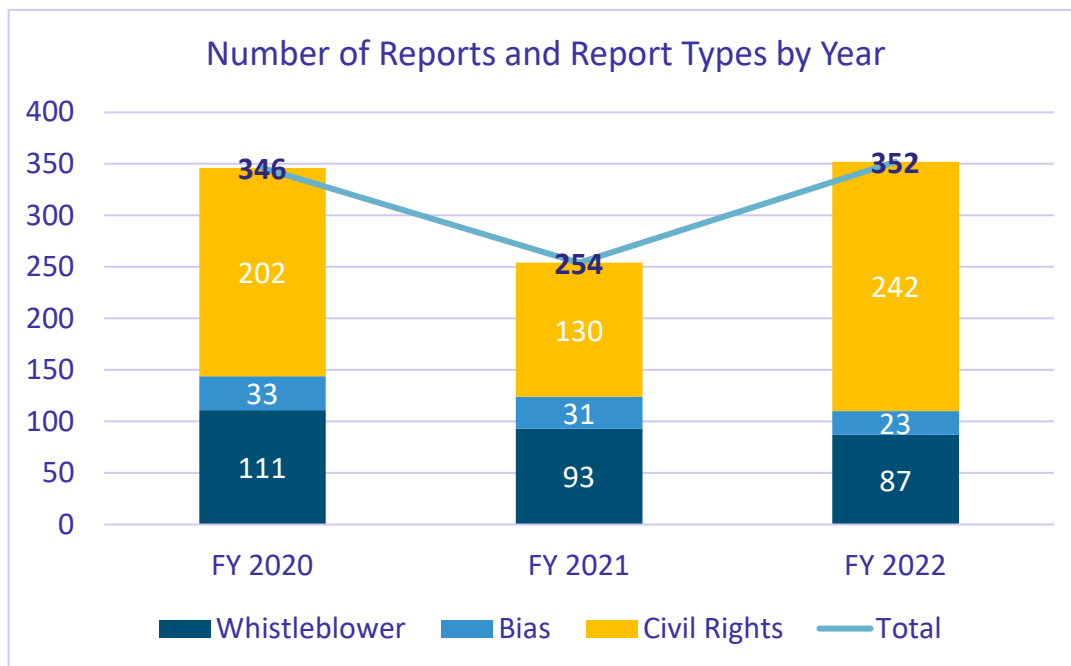*Figure 1: Reports Received in Academic Years 2019-20, 2020-21, and 2021-22*

Figure 1 shows a significant reduction academic year 2020-2021, particularly in civil rights reports. This reflects the significantly lower student and employee presence on campus due to the COVID campus closure that began mid-March 2020 and continued through FY21.

How are reports received?

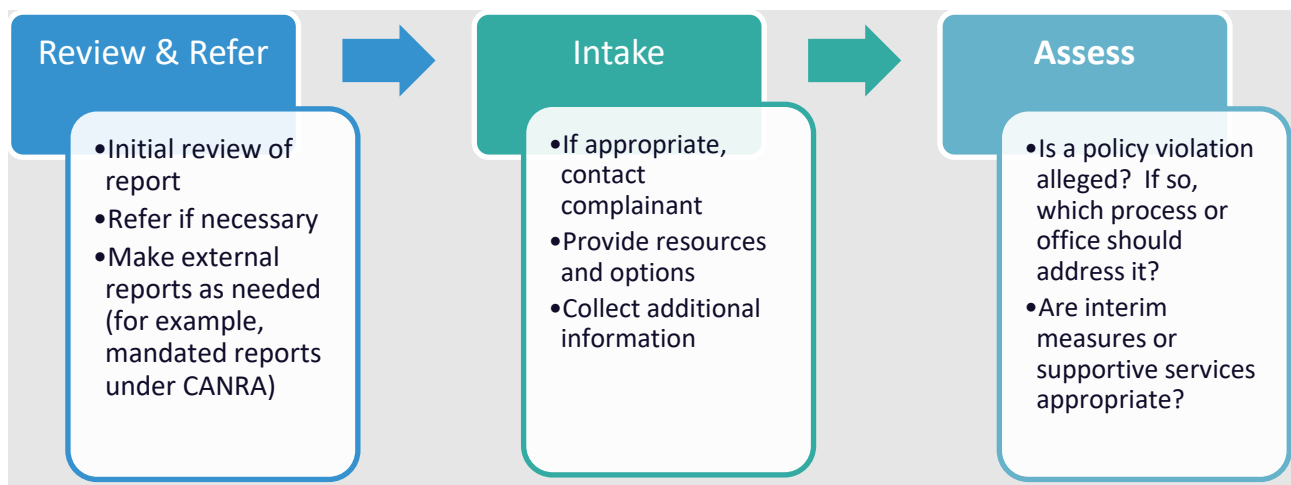Most reports are received through our two web-based reporting portals:

❖ EthicsPoint is a third-party managed hotline used throughout the entire University of California system that accepts all types of reports and complaints, particularly whistleblower. There is also an EthicsPoint reporting portal for reports of intolerance or bias. Reports may be made anonymously, online, or by phone.

❖ Beginning in 2021, UCR's Title IX & Equal Opportunity and Affirmative Action Office (TIX/EOAA) uses an online report and case management system, I-sight. I-sight also accepts all types of reports but is used primarily for Title IX (SVSH) and other civil rights reports.

We also receive reports by email (ldo@ucr.edu or titleix@ucr.edu), by phone, from walk-ins, and from referrals from campus partners such as Human Resources, Academic Personnel, UCPD, Residential Life, and Student Conduct and Academic Integrity Programs.

How do we respond to reports?

CCO reviews and assesses every report received. Most reports are assessed with campus partners, in a case management team or group as described on the following page.

Figure 2: Basic Intake and Assessment Process. While there are specific procedural requirements for certain types of reports, generally, the following steps are taken for each report:

Review & Refer
- Initial review of report
- Refer if necessary
- Make external reports as needed (for example, mandated reports under CANRA)

Intake
- If appropriate, contact complainant
- Provide resources and options
- Collect additional information

Assess
- Is a policy violation alleged? If so, which process or office should address it?
- Are interim measures or supportive services appropriate?

Case Management at UCR

Case management teams bring together professional staff from different campus offices and divisions to review and assess reports and complaints. These groups facilitate information-sharing and collaboration, with the goal of better case outcomes. They oversee and manage ongoing investigations and other complaint resolution processes.

The Investigations Group. The University of California's whistleblower policies require that each campus have an investigations workgroup "to ensure coordination and proper reporting." This group is advisory to the Locally Designated Official (LDO)—a position mandated by the Whistleblower Policy and typically performed by the CCO. The group meets monthly, with additional meetings of sub-groups focused on particular types of cases.

- ❖ *Who are they*? The group includes representatives of units with "routine responsibility for certain types of investigations" such as UCPD, Risk Management, HR, APO, SOM Compliance, Student Affairs, and campus counsel. For a full list of members, visit **Investigations & Complaint Resolution | Compliance (ucr.edu)**.

- ❖ *What do they do?* The group:
  - o Reviews new reports including to assess whether an investigation is warranted and whether any external reports, particularly to UCOP, are required.
  - o Monitors formal investigations including for timeliness and external investigation spend (cost).
  - o May advise on appropriate remedial measures.

Case Management Teams. The SVSH policy requires each campus to have one or more case management teams advisory to the Title IX Officer. UCR's two case management teams reviews all incoming SVSH reports. Beginning this year, other types of discrimination and harassment and bias reports are also assessed with these groups. Case Management Teams help coordinate supportive services and interim measures.

In addition to advising on the initial assessment of reports, the teams monitor all ongoing complaint resolution processes, including tracking deadlines for investigations and adjudications. UCR currently has two case management teams, one focused on matters involving employees and the other on students. Some matters are reviewed by both teams.

Incident Response Team. In 2020-21, UCR created a new team in response to the systemwide guidelines for prevention and response to sexual harassment in the clinical setting. This team is a vital part of the University's efforts to prevent and respond to sexual misconduct occurring in the patient care context, such as at UCR Health, Student Health Services, or Counseling and Psychological Services (CAPS).

Does CCO discipline students or employees?

CCO strives to support accountability generally by conducting fair and thorough investigations. Investigative findings may be used by other campus offices to pursue discipline. In some instances, in accordance with applicable policies, representatives of CCO, such as the Title IX Officer, are consulted by these other offices when they are considering discipline or remedial measures.

A. Whistleblower Reports and Investigations

A required element of a compliance and ethics program is a mechanism for employees (and others) to report misconduct. As explained in UCR's new local implementing procedures for whistleblower reports:

> The University of California, Riverside (UCR) is committed to operating in good faith, with integrity and accountability. When people report concerns ("blow the whistle") it helps UCR fulfill this commitment, by alerting the campus to potential illegal or unethical acts so that they may be addressed.

The CCO serves as the campus LDO, or Locally Designated Official, a position with responsibilities under the UC whistleblower and whistleblower protection policies. Generally, whistleblower complaints are reports of suspected illegal or unethical activities by UCR employees or agents, and whistleblower protection policy complaints are grievances by employees who believe they have experienced certain types of retaliation for whistleblower activities.
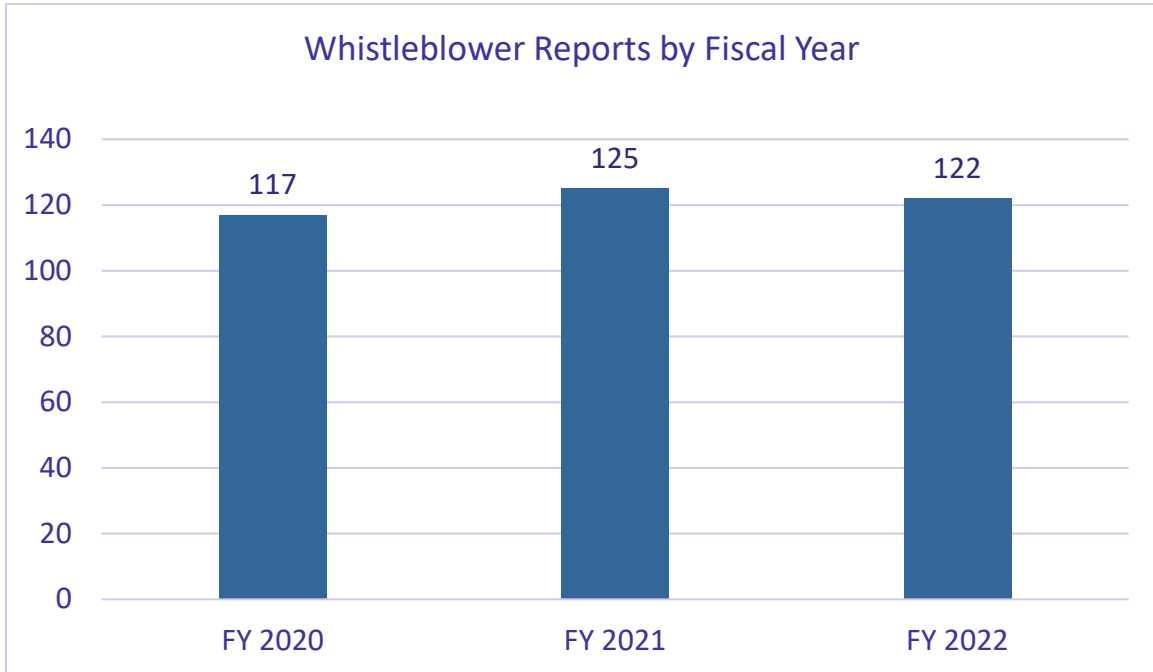
Whistleblower Reports by Fiscal Year

Figure 3 shows the number of whistleblower and whistleblower protection policy (retaliation) reports received by the Chief Compliance Office in each fiscal year. These reports are primarily reports received via UC's EthicsPoint hotline, but also include reports received by email (ldo@ucr.edu) and reports referred by management or other campus offices. Some of the reports received are of discrimination and harassment (civil rights complaints), which means there is some overlap or duplication with reports presented in the following Section B of this report. On the other hand, for this reporting purpose we count as a "single" report a complaint that includes multiple allegations (which is common among reports we receive).

The number of reports basically has been steady over the past three years.

Percentage of Anonymous Whistleblower Reports

	FY 2020	FY 2021	FY 2022
	48%	37%	72%
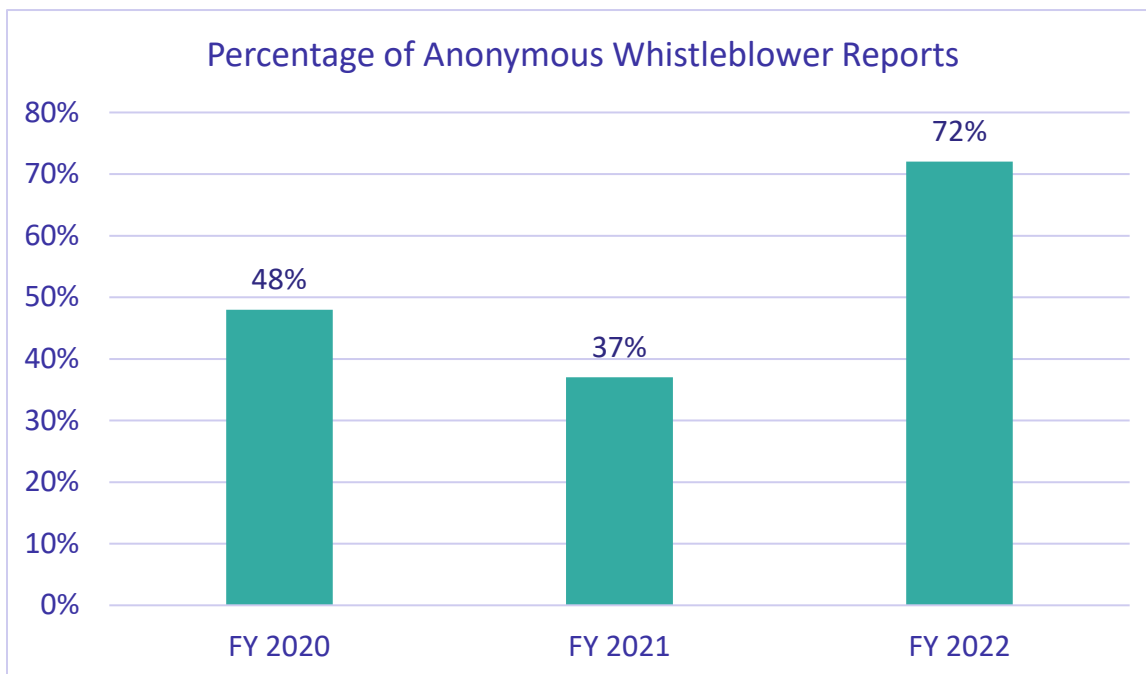
It is important to have mechanisms in place for anonymous reporting, including because this promotes a "speak up" culture and can mitigate concerns reporters may have about retaliation. The percentage of anonymous reports reflects many factors including how comfortable reporters are in identifying themselves, their position at the University (student, staff, faculty, visitor, etc.) and their proximity or distance from the observed activity of concern. UCR's overall percentage of anonymous reports across the three years (53%) is lower than the UC-wide average for EthicsPoint reports for the same three years (58%), and it is unclear at this time why there was a sudden rise in anonymous reports at UCR in FY 2022—it could represent random variation, or a post-pandemic "new normal" in reporters' preferences, or a substantive increase in worries about retaliation for reasons connected to either the campus or broader economic anxieties. The Chief Compliance Office will monitor this situation in the future to gauge if there is a durable upward trend in anonymous reporting and what that might mean for the UCR campus. Other data discussed below in Section IV of this report suggests UCR employees have relative confidence that they are able to report wrongdoing without retaliation.

Figure 5: CCO Process for Intake and Assessment of Whistleblower Reports
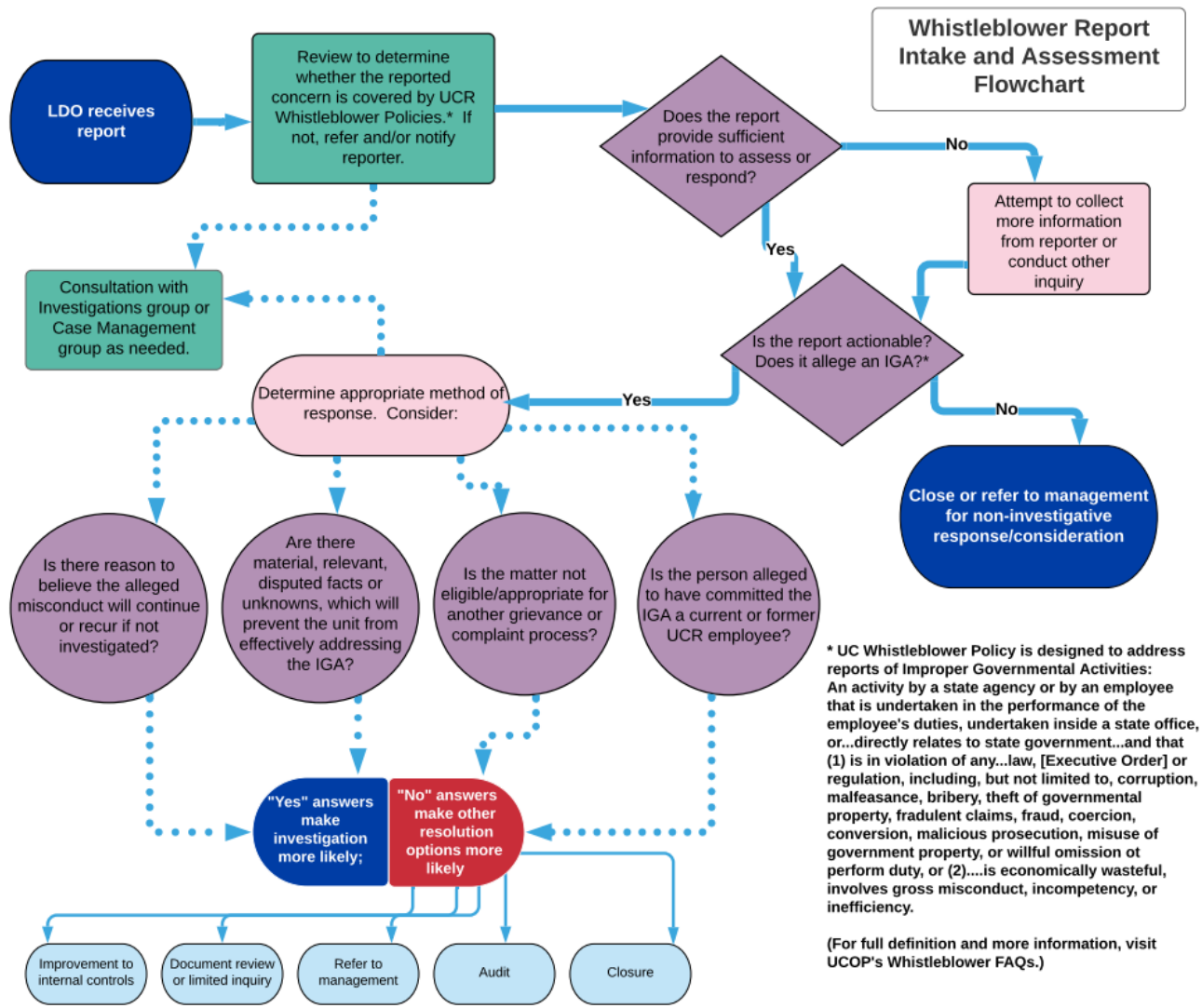
This and other flowcharts are available on our website and shared with parties in investigations. Our goal in creating and posting these informational tools is to provide transparency as to how we review and respond to reports received. For whistleblower reports, our process is defined by the systemwide policy as well as the local implementing procedure we adopted in June 2022.

We also provide FAQs and other information about the whistleblower protection policy, which is a grievance procedure used to address certain types of retaliation.

Types of Misconduct Investigated FY 20-22

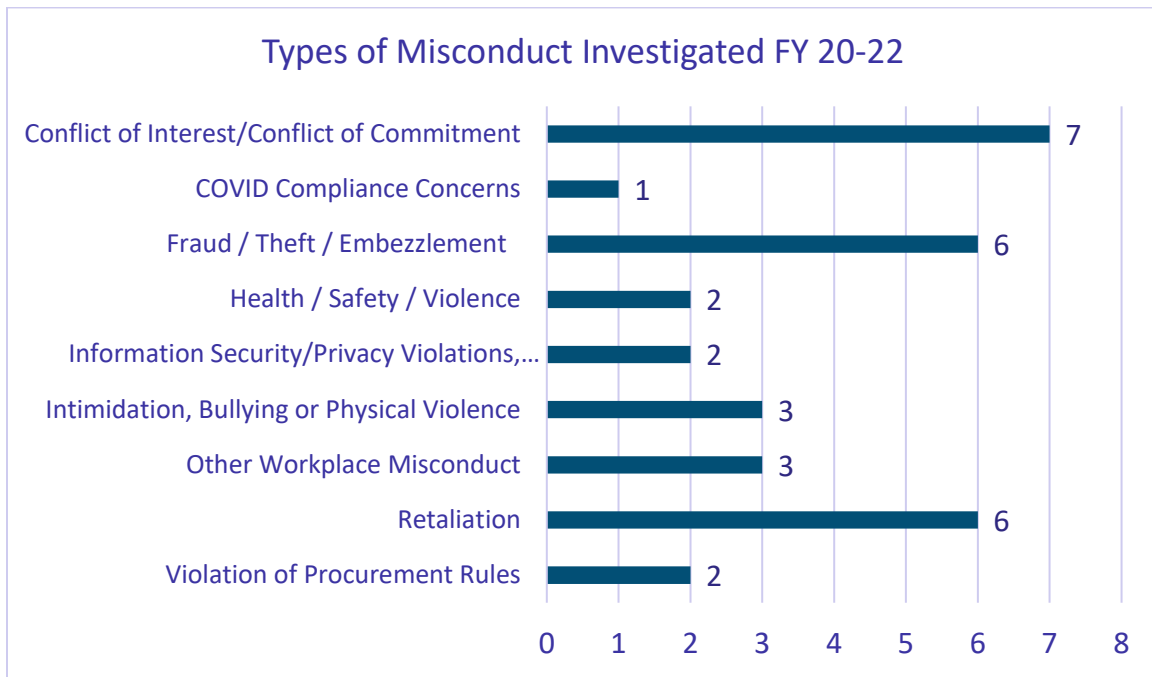| Category	Count
Conflict of Interest/Conflict of Commitment	7
COVID Compliance Concerns	1
Fraud / Theft / Embezzlement	6
Health / Safety / Violence	2
Information Security/Privacy Violations,…	2
Intimidation, Bullying or Physical Violence	3
Other Workplace Misconduct	3
Retaliation	6
Violation of Procurement Rules	2

Figure 6 shows the types of allegations that were addressed through a formal investigation in the previous three academic years. A formal investigation involves notices of investigation issued to the parties, interviews and other evidence collection and review, and production of an investigation report, all following procedural steps designed to provide full due process to those involved.

Note that the retaliation category includes three complaints processed under the Whistleblower Protection Policy and three other retaliation investigations.

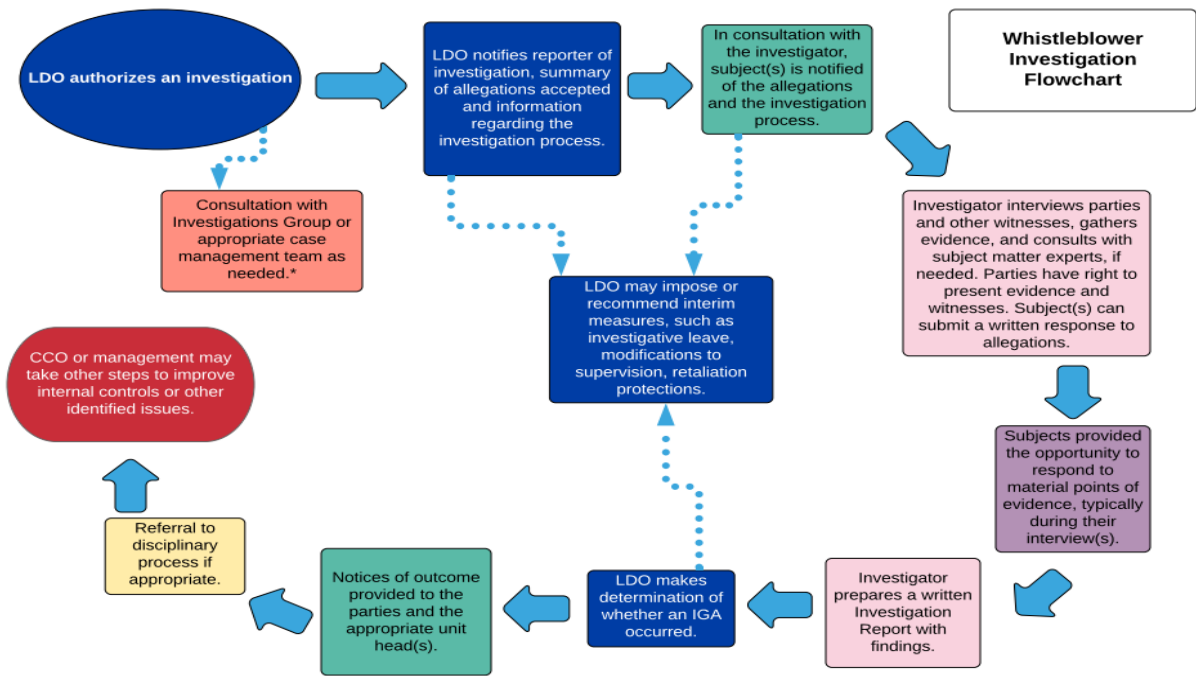*Figure 7: UCR Whistleblower Investigation Process*

Figure 8: How Many Investigations Substantiate Misconduct?
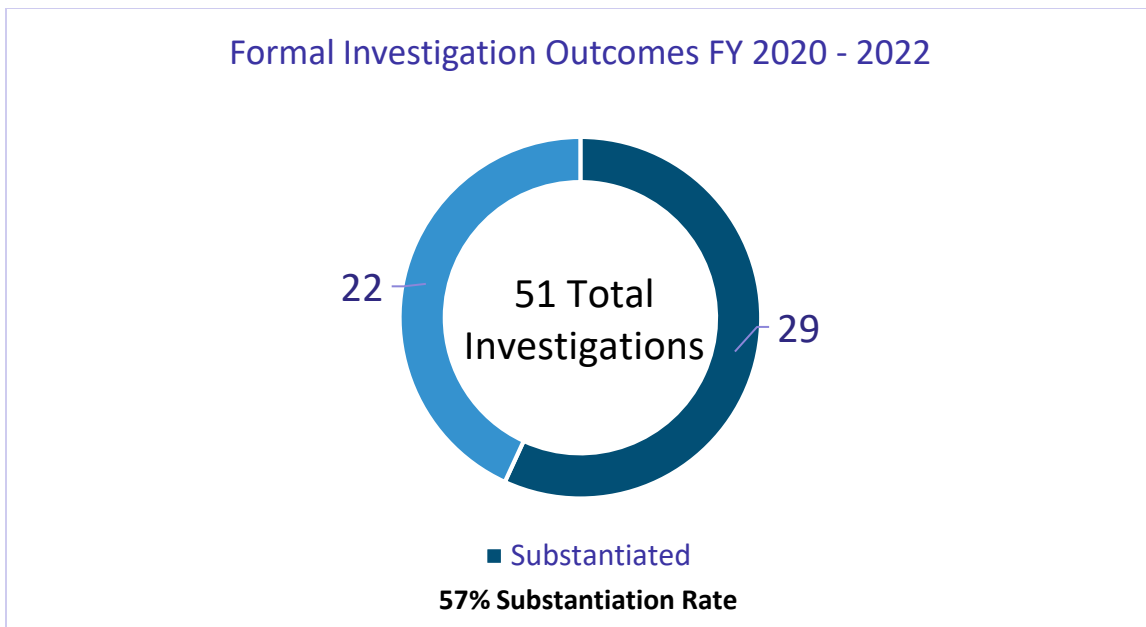
The above figure shows the number and percentage of reports that make a finding of misconduct. A finding of misconduct is made when the preponderance of the evidence supports that a policy violation occurred. Given the many steps involved in assessing a report and determining whether an investigation is warranted (see Figures 5 and 7 above), it is not necessarily surprising that more than

half (57%) of investigated cases in the past three years resulted in substantiated findings of misconduct (i.e., cases and allegations that are investigated differ in systematic ways from cases where it is determined that an investigation is not warranted). Some investigations look into multiple potential policy violations; if the investigation finds misconduct for one of the alleged policy violations, it will be reflected in this figure as "substantiated", even if other allegations are not substantiated.

What Happens after a Whistleblower Investigation?

If misconduct has been substantiated and/or if there are findings warranting management attention, the matter is referred to the appropriate administrative office or process. This may result in disciplinary sanctions for employees found to have engaged in misconduct. Actions may also be taken to strengthen internal controls, to avoid recurrence of the misconduct, and to remedy the effects of the misconduct.

B. SVSH and Other Civil Rights Reports and Investigations

The Office of Title IX, Equal Opportunity & Affirmative Action (Title IX/EOAA) is dedicated to protecting the civil rights of UCR's faculty, students, and staff through:

- training and education and awareness programs promoting the UC's values and policies
- responding to complaints and grievances of discrimination, harassment and retaliation
- implementing UC and campus non-discrimination policies including the UC Policy on Sexual Violence and Sexual Harassment (SVSH)
- overseeing compliance with laws relating to discrimination and harassment
- ensuring that UCR protects the rights of those with disabilities including under the Americans with Disabilities Act and Section 504 of the Rehabilitation Act
- coordinating campus affirmative action programs and producing the affirmative action plans.

This section of the annual report presents information about Title IX/EOAA's response to reports of protected category discrimination, harassment, and Prohibited Conduct under the SVSH Policy.

Protected Categories

UCR respects the rights of all members of the campus community to equal opportunity and freedom from harassment on the basis of race, color, national origin, religion, sex, gender (including gender identity, gender expression and gender transition status), sexual orientation, pregnancy, disability (mental or physical), age, medical condition (cancer-related or genetic characteristics), genetic information (including family medical history), ancestry, citizenship, service in the uniformed services (including protected veteran status), marital status, or any other characteristic protected by state or federal law.

Sexual violence is a particularly severe form of sexual harassment, which is a form of discrimination based on sex, which is a type of protected category discrimination.

242 Reports Received
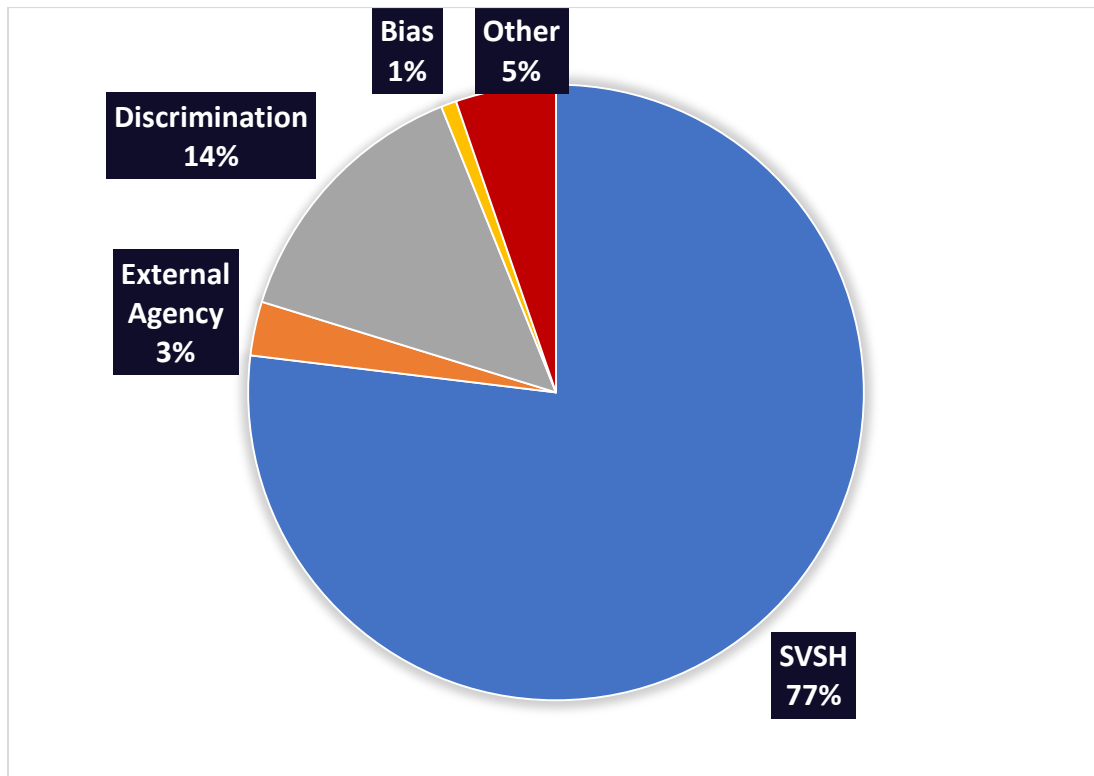
Reports are categorized by Title IX/EOAA staff based on the allegation or information provided by the reporting party in the initial report. A report being classified as an SVSH report (for example) does not mean that the report alleges conduct that violates the policy—see further explanation on the next page.

As in previous years, the largest category of reports relates to the SVSH Policy.

External Agency reports are most commonly from the Equal Employment Opportunity Commission, the California Civil Rights Department (formerly the Department of Fair Employment and Housing), and the Office for Civil Rights of the U.S. Department of Education.
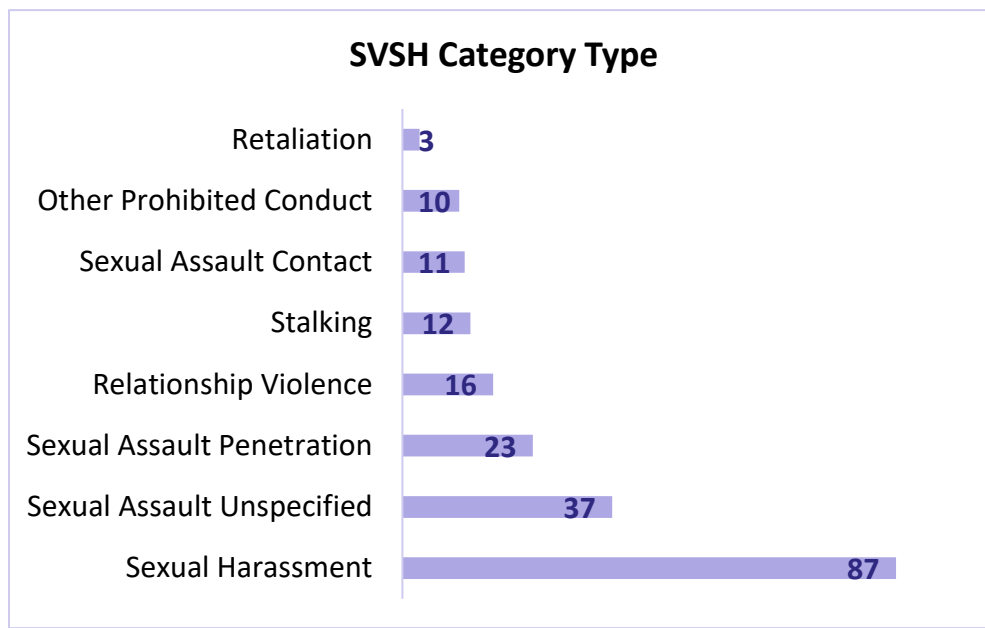
Figure 10: Number of SVSH Reports Received in Academic Years 2019-20, 2020-21, and 2021-22

Sexual Violence and Sexual Harassment

- FY22: 192
- FY21: 85
- FY20: 182

As with whistleblower reports, the significant decline in FY21 reports reflects the campus closure. We expect a continued increase in reports in FY23.

Figures 11 and 12: Types of Prohibited Conduct (SVSH Policy) or Discrimination Reported in 2021-22

The following show the types of concerns alleged in the reports received.

SVSH Category Type

- Retaliation: 3
- Other Prohibited Conduct: 10
- Sexual Assault Contact: 11
- Stalking: 12
- Relationship Violence: 16
- Sexual Assault Penetration: 23
- Sexual Assault Unspecified: 37
- Sexual Harassment: 87

These categories track the types of Prohibited Conduct defined in the SVSH Policy. Please note that category type does not indicate that the report alleges conduct that, if true, violates the SVSH Policy. For example, a report about conduct that is harassing in nature but not a violation of the policy either because it is outside of UCR's jurisdiction or because the conduct is not "severe or pervasive" enough to meet the definition of Sexual Harassment-Hostile Environment will still be included as a Sexual Harassment report.

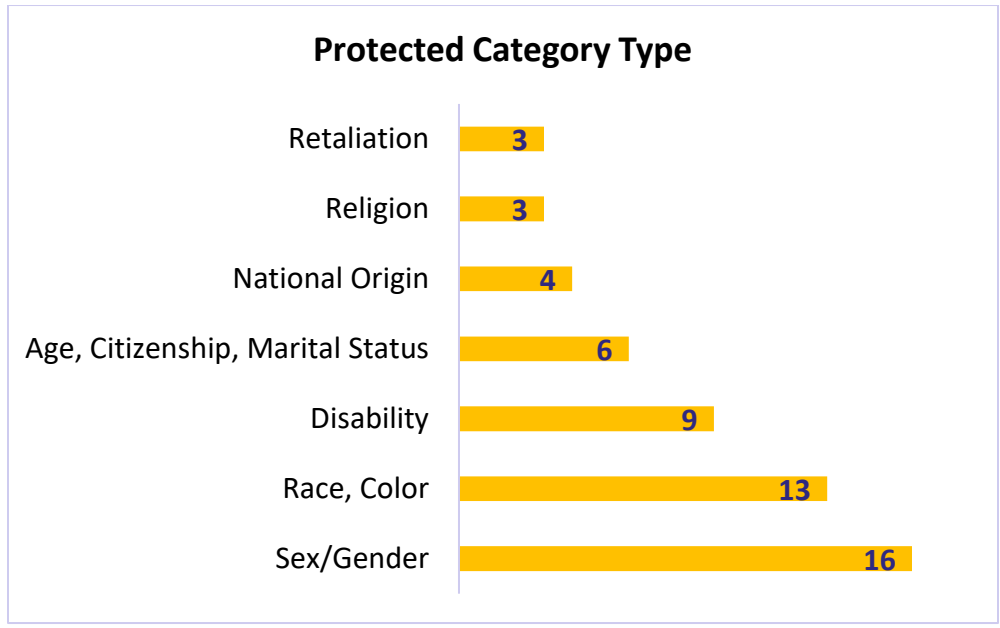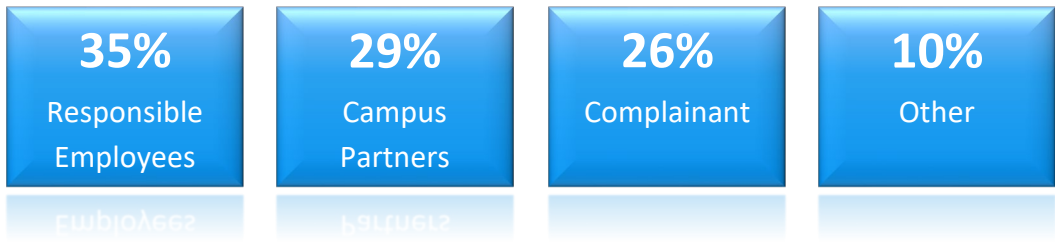For more information about the types of Prohibited Conduct, visit the Title IX website.

Protected Category Type

Category	Count
Retaliation	3
Religion	3
National Origin	4
Age, Citizenship, Marital Status	6
Disability	9
Race, Color	13
Sex/Gender	16

Figure 13. The following shows who reported matters to TIX/EOAA in 2021-22

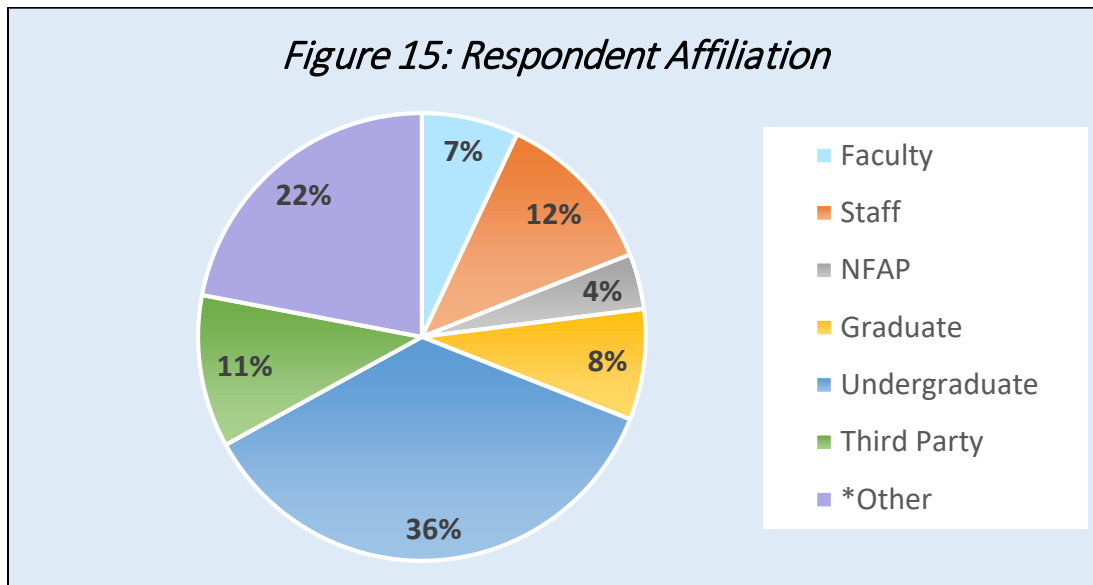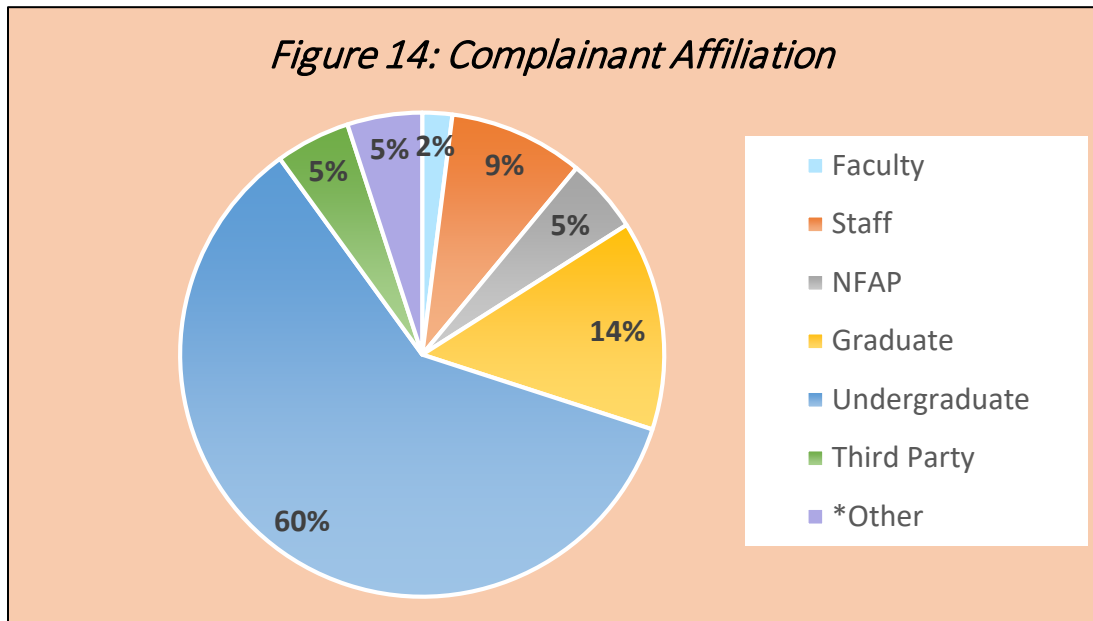| **35%** Responsible Employees	**29%** Campus Partners	**26%** Complainant	**10%** Other

Any person can report Prohibited Conduct. They can report directly to Title IX/EOAA, to any Responsible Employee, or to campus partners (who are also Responsible Employees) such as Student Affairs, UCPD and Human Resources, who will then report to Title IX/EOAA.

Figures 14 and 15: Party Affiliation for Civil Rights Reports Received in 2021-22

A "Complainant" is a person identified or reported as having experienced discrimination or harassment (or other prohibited conduct), even if that person has not themselves made a complaint. A "Respondent" is the person who is reported to have engaged in discrimination (including Prohibited Conduct under the SVSH Policy). Figures 14 and 15 show that largest category of reports is those about undergraduate students.

- "Other" refers to UNEX students, patients, unknown individuals, and students who whom we cannot identify as graduate or undergraduate.
- Third parties are non-affiliates, such as students of other universities.
- NFAP are non-faculty academic personnel, such as postdoctoral scholars.

Figure 14: Complainant Affiliation

Faculty 2%, Staff 9%, NFAP 5%, Graduate 14%, Undergraduate 60%, Third Party 5%, *Other 5%

Figure 15: Respondent Affiliation

Faculty 7%, Staff 12%, NFAP 4%, Graduate 8%, Undergraduate 36%, Third Party 11%, *Other 22%

Responding to Civil Rights and Bias Reports—Initial Assessment

Under both the SVSH Policy and our non-discrimination policies, all civil rights reports are promptly and carefully assessed to:
- Address immediate safety concerns (particularly for reports of sexual violence)
- Determine whether supportive measures are appropriate
- Decide whether the report is within Title IX/EOAA's jurisdiction and available complaint resolution processes.

> Title IX/EOAA helps connect complainants to campus resources and supportive services. For those who have experienced sexual violence or harassment, CARE provides support and assistance—without being obligated to share information with Title IX/EOAA.

Reports may be addressed through Alternative Resolution (SVSH) or Early Resolution, Formal Investigation, or Other Inquiry. Title IX/EOAA works with complainants to find the most appropriate resolution process based on their goals and concerns and the policy frameworks as applied to the specific report. Title IX/EOAA typically initiates an investigation at the request of, or with the consent and participation of the complainant. For SVSH cases, we cannot conduct an Alternative Resolution without the consent of all parties involved.

Not all reports received by Title IX/EOAA may be resolved through a formal resolution process. For example, UCR may not investigate or conduct an Alternative Resolution for reports:
- of conduct not covered by the SVSH Policy or Non-Discrimination Policy;
- without enough information (example, identities unknown);
- if the Respondent is not a UCR affiliate;
- for which there is not enough connection between the reported conduct and UCR.
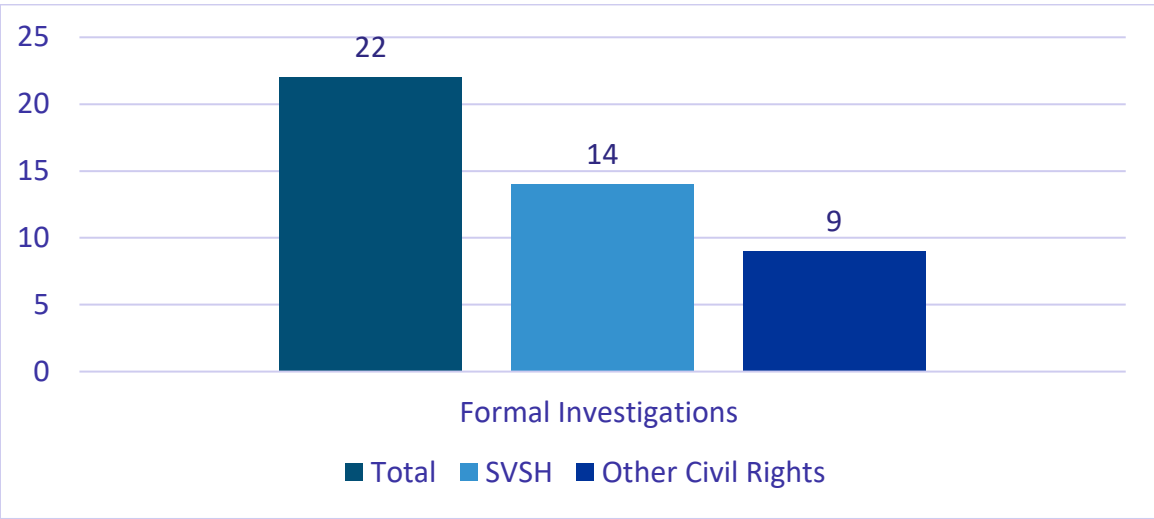
Informal Resolution

We encourage reporting of any and all harassing conduct, although harassment violates our policies only when it is severe or pervasive. This means that we receive reports of conduct that is harassing in nature, but not a policy violation. For these types of reports, when appropriate, Title IX/EOAA takes steps to stop the reported conduct, prevent its escalation or occurrence, and address its affects, such as providing resources to the complainant or conducting an educational conversation with the respondent.

Title IX/EOAA also receives bias and climate reports through i-sight and the UC Systemwide Intolerance Report Form. Bias incidents generally are conduct that targets or disparages people or groups based on actual or perceived race, color, ancestry, religion, ethnicity, national origin, gender, gender identity, age, disability, sexual orientation, or other protected characteristics or categories. This year, we created FAQs to provide the campus with information about the complicated relationship of hate, bias, and harassment.
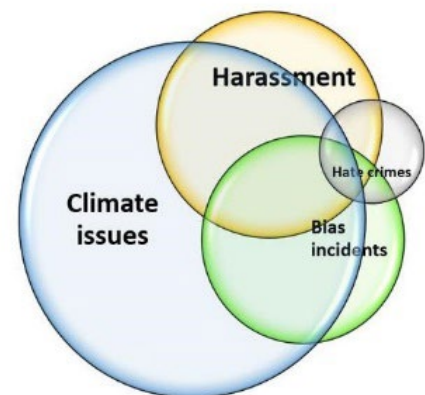
The figures below show the formal complaint resolution processes initiated (begun) in the period July 1, 2021 through June 30, 2022. Note that some of these processes relate to reports made in the previous academic year.

Figure 16: Number and Type of Formal Investigations Initiated 2021-22

* Note that one investigation was both SVSH and racial harassment.

In addition to the formal investigations, Title IX/EOAA initiated four Alternative Resolutions and one Other Inquiry under the SVSH Policy in 2021-22.

Figure 17: Percentage of Formal Investigations Substantiated and Unsubstantiated
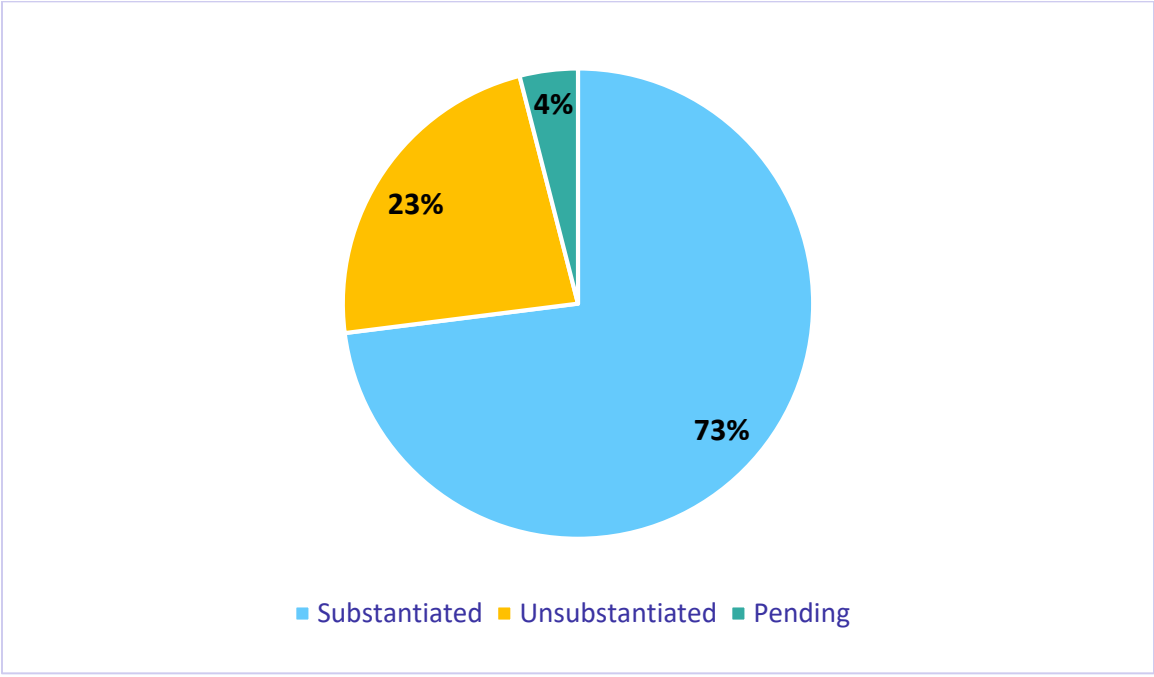
We strive to provide investigations that are prompt, fair, and thorough, meeting all policy and procedural requirements. The policy deadline for SVSH cases, which may be extended for good cause, is 90 business days. This year, we dedicated efforts to meeting deadlines and are proud to report that our median time for completion of an SVSH investigation in FY2021-22 was 89 business days.

SVSH
89
business days

Civil Rights
103
business days

The 103 business day median for other civil rights investigations excludes investigations that we conduct in response to external agency complaints, because those investigations are subject to the agencies' deadlines and do not follow the full investigation process used for internal complaints.

III. OTHER TITLE IX & CIVIL RIGHTS WORK
A. Affirmative Action

UCR is a federal contractor, meaning that it accepts federal funds for its educational programs, and as such must comply with all affirmative action regulations enforced by the Department of Labor's Office of Federal Contract Compliance Programs. The purpose of these regulations is to provide, for the benefit of job seekers and wage earners, affirmative action and equal employment opportunity, particularly to recruit and advance qualified minorities, women, persons with disabilities, and covered veterans.

UCR's Office of Title IX/EOAA is responsible for ensuring compliance with affirmative action regulations. We do this through:
- the creation of annual affirmative action plans (AAPs);
- the creation and monitoring of policies and guidelines;
- promotion of equal opportunity programs and policies, including complaint resolution processes;
- internal review of personnel actions (hiring, promotions, separations, compensation); and
- training and consultation.

2021-22 Affirmative Action Program Highlights

- Affirmative action goals (outreach goals) and other program highlights were communicated to the senior management and their team members through multiple communication sessions and presentation tailored to specific units.

- Provided adverse impact analysis by racial and gender groups relating to COVID-budget required layoff, to ensure equal employment opportunity.

- Both applicant tracking systems used by UCR (i-Recruit and AP Recruit) as well as the new HR Management System (HRMS) were updated with current affirmative action goals and availability pools to help hiring departments in their affirmative action outreach responsibilities.

- Supported UC Gender Recognition and Lived Name policy implementation by designing necessary system changes.

B. Disability Access – ADA/504 Coordination

UC Riverside is dedicated providing an accessible campus and programs for its students, faculty, staff, and visitors. Federal laws and regulations—specifically, the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act of 1973 (a federal law prohibiting discrimination on the basis of disability and requiring affirmative action in employment for those with disabilities, which applies to UCR as an institution that receives federal funding)—require campuses to have an administrator who coordinates compliance efforts. UCR's ADA/504 Coordinator is the Chief Compliance Officer, who also helps ensure compliance with California laws protecting those with disabilities.

The ADA/Section 504 Coordinator's responsibilities include:
- ensuring that UCR has appropriate policies, procedures, and grievance mechanisms
- helping promote disability access, accommodations, and non-discrimination
- identifying and assessing compliance gaps and risks.

> In 2022, UCR launched a new Chancellor's Advisory Committee for Diversity Inclusion (CACDI).

Our Disability Inclusion and Access website collects information, policies, and other resources. This year, we created a new resource: a site collecting guidance on accessible communication, ranging from podcasts to powerpoints to surveys.

C. Pregnancy Accommodations

The Office of TIX/EOAA supports pregnant students, faculty, and staff by coordinating accommodations. Accommodations that may be provided range from changes in parking to leaves of absences. To learn more, visit our pregnancy resources website. We expect pregnancy accommodations to be an expanding service, particularly with the revisions to the Title IX regulations anticipated in 2023.

D. Clery Compliance

The Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act of 1998, commonly referred to as the "Clery Act," is a federal law that requires each university receiving federal financial aid to annually compile and report specific crime and fire statistics for the university campus and to provide other safety and crime information to members of the campus community. The Clery Act also requires universities to:

- Have emergency response programs, including evacuation procedures for students.
- Notify the community of emergencies and issue warnings of threats.
- Maintain a daily crime log and a fire log.
- Have policies and procedures relating to sexual assault, dating and domestic violence, and stalking.

The Violence Against Women Reauthorization Act of 2013 (VAWA) made substantial amendments to the Clery Act, tightening its relationship to Title IX and particularly sexual violence prevention.

To learn more about Clery and review current and archived ASFSRs (Clery reports), visit our Clery compliance website.

2021-22 Clery Compliance Highlights

- A new UCR Clery coordinator assumed the role in April of 2021, and the responsibilities shifted into the Title IX, Equal Opportunity and Affirmative Action Office. This shift reflects the close relationship of Clery work to our sexual violence prevention work.

- The 2021 Annual Security & Fire Safety Report (ASFSR) was published and communicated to the campus community, meeting the deadline of October 1st 2021.

- In June 2022, a revised version of the ASFSR was published. These revisions reflected the changes made in the January 2022 version of the SVSH Policy, and some expanded content relating to drug and alcohol prevention. The revised ASFSR was distributed along with the annual required notification under the Drug Free Schools and Communities Act.

- UCR Clery Compliance Committee was formed several years ago and conducts regular meeting to update senior management on important Clery-related issues. Members include representatives of Student Affairs, UCPD, Athletics, Fire Prevention, Risk Management, Emergency Management, Health, Well-Being & Wellness, and Real Estate.

- UCR's Campus Security Authority (CSA) identification and communication process has been improved to ensure certain departments, services and functions are included, as well as that CSA obligations are clearly communicated. Currently there are more than 500 CSAs identified at UCR.

- With UCPD, our Timely Warnings were refined to improve the safety recommendations and crime information provided.

- Clery geography identification issues have been addressed by verifying campus borders, all eligible non-campus locations and clarifying the status of several properties for Clery reporting. An updated Clery Campus Map was created.

- In July 2022, the UC Clery Act Policy was revised on an interim basis, to incorporate changes to the Campus Security Authorities (CSA) identification provisions. These provisions relate to certain offices that had previously been identified as confidential, and require position-by-position review to determine CSA status.

IV. COMPLIANCE & ETHICS PROGRAM COORDINATION

A. Introduction

CCO provides campus coordination of the University-wide ethics and compliance program.

- Compliance and ethics programs are the *practices and culture* of an organization designed to encourage ethical conduct and a commitment to compliance with the law, including by preventing and detecting misconduct.

- The University of California Board of Regents established the University ethics and compliance program, which is designed to satisfy the federally-defined seven elements of an effective compliance & ethics program. UCOP's Senior Vice President/Chief Compliance and Audit Officer provides systemwide leadership for the program.

- Under the UC Ethics and Compliance Program Plan, each campus has a chief compliance and ethics officer (CCO) and a compliance and ethics committee—at UCR, the Ethics, Compliance Risk and Audit Controls Committee (ECRAC)—to provide program oversight and advise the CCO.

Campus Partners

The Chief Compliance Office partners with multiple units across campus to promote a culture of compliance; identify, address, and mitigate compliance risks, and to comply with applicable laws and policies. The CCO partners with the following offices along with many others:

Compliance Cycle

A compliance program seeks to **PREVENT** misconduct by establishing clear expectations and standards of conduct, ensuring that faculty and staff are aware of applicable laws and rules, and maintaining internal controls.

A compliance program must also have ways to **DETECT** problems that occur, including whistleblower hotlines and other reporting mechanisms as well as audits and monitoring systems.

A compliance program **REMEDIES** violations, system failures, internal control weaknesses, including through disciplinary action and policy improvements.
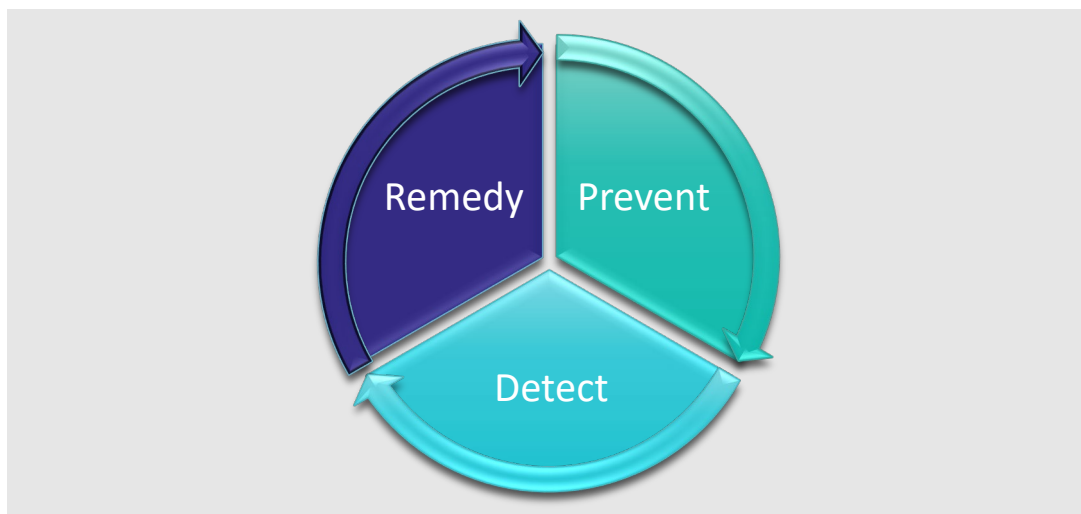
B. Evaluating and Monitoring

The Chief Compliance Office uses qualitative and quantitative data to evaluate the effectiveness of the compliance program at UCR. The CCO collects systemwide survey data from various populations including student and faculty/staff to benchmark perceptions of certain elements of the program and evaluate whether these are improving. See Figures 18 and 19. In addition, the CCO reviews campus-specific data, such as exit surveys and the risk assessment process to compile additional information regarding the effectiveness of the program.

Figure 18: Council of University of California Staff Assemblies (CUCSA) Staff Engagement Survey
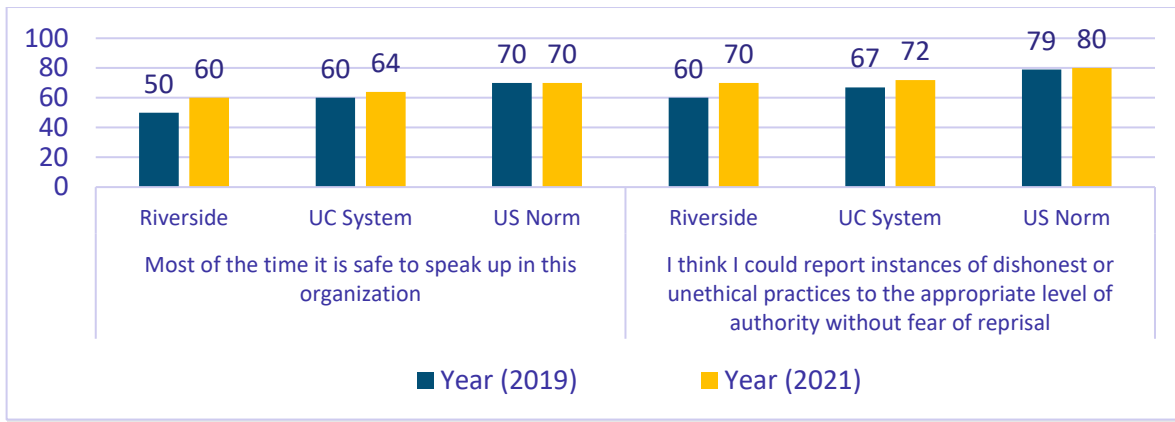
The Council of University of California Staff Assemblies (CUCSA) conducts a Staff Engagement Survey every two years at each UC location. The survey includes questions on career development, performance management, wellness, among others. A new area of focus over the last two instances of the survey is "Empowered Culture." This area asks questions regarding whether it is safe to speak up at the organization and whether staff feel they could report dishonest or unethical practices without fear of reprisal. **As evidenced in the figure above, UCR has improved 10 percentage points in both of those areas from the 2019 survey to the 2021 survey.**

Figure 19: University of California Undergraduate Experience Survey (UCUES)
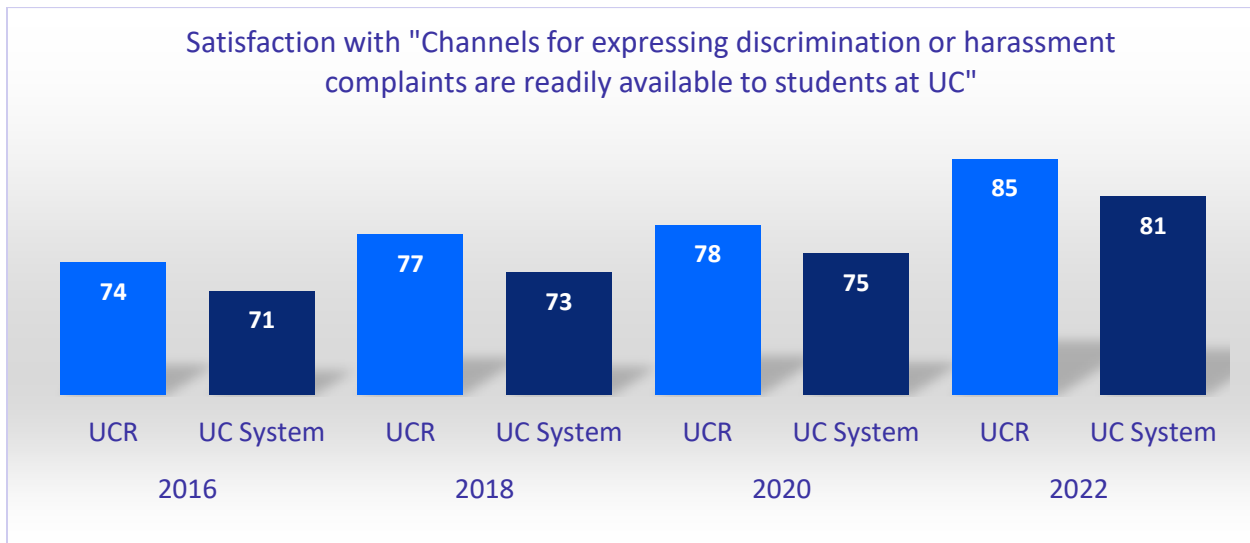
The University of California Undergraduate Experience Survey (UCUES) is completed every two years by the nine UC undergraduate campuses and seeks responses from a broad set of areas including educational experience, academic engagement, and campus climate. One question that has been asked in the survey since 2016 is whether students are satisfied with whether the "channels for expressing discrimination or harassment complaints are readily available." **As shown in the figure above, undergraduate students at UCR have increasingly been more satisfied with the availability of these channels for expressing complaints since the survey began. In addition, UCR continues to out-perform the UC system, as a whole, in this area.**

Exit Surveys

Quarterly, the CCO reviews quantitative and qualitative data of exit surveys provided by employees who left UCR. The qualitative responses include narratives regarding potential discrimination, harassment, and whistleblower concerns. The exit surveys also provide data on the reasons why employees may have left UCR—with Growth/Future Opportunity, Recognition and Respect, and Compensation being the most common while Ethics and Integrity is much further down the list.

Risk Assessment

Audit & Advisory Services and the Chief Compliance Officer together annually conduct a risk identification process through interviews with senior leadership and key administrators. CCO supplements this with information from the UC Office of the Present, data analysis from Audit & Advisory Services, and discussion with the Ethics & Compliance Risk and Audit Controls (ECRAC) Committee to identify areas of focus for risk mitigation. This year, following the identification process, a risk assessment process identified the top compliance risks of the campus as:

> (1) Cybersecurity/Privacy;
>
> (2) COVID/Post-Pandemic Operations;
>
> (3) Prevention & Remediation of Sexual Violence and other Discrimination/ Harassment;
>
> (4) Export Controls/Foreign Influence; and
>
> (5) Lab Safety and OSHA/EH&S Risks.

CCO works with partner units to support development and implementation of mitigation strategies for these risks.

C. Policy Program

The first requirement of an Ethics & Compliance program is that there be established "standards and procedures" to prevent and detect misconduct. Usually these "standards" are policies. The foundational standard for the UC E&C Program is Regents Policy 1111: Statement of Ethical Values and Standards of Ethical Conduct. Other systemwide and campus policies implement and expand upon these standards.

UCR's CCO manages the campus Policy Program, which communicates and implements compliance standards and regulations across the campus.

Policy Dashboard
Number of In Process v. Completed Campus-wide Policies by year

Legend: ■ In Process   ■ Completed

*Completed in the 'Current' column are total policies completed from March 2019 - December 2022
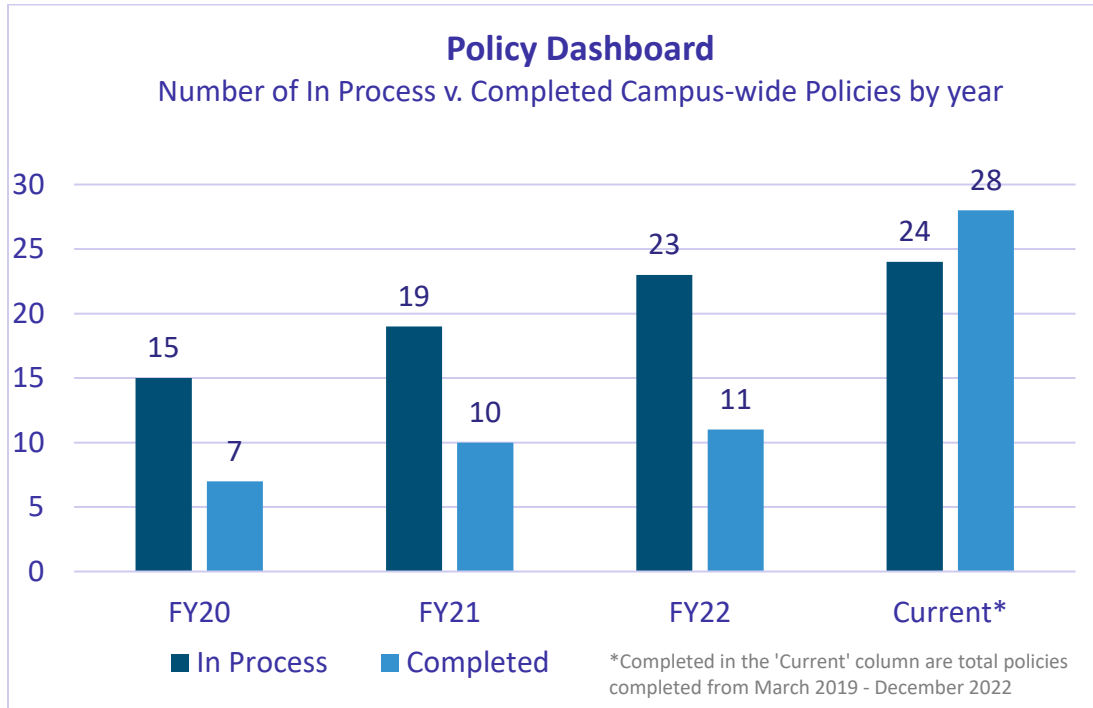
Policy Highlight – Anti-Bullying Policy (650-76)

The 2019 Campus Culture Task Force Report recognized the need to strengthen the commitment to addressing and eliminating bullying and abusive conduct. In 2020, the Communications and Policy Coordination Group (CPCG) led by UCR's Vice Chancellor for Diversity, Equity & Inclusion began the policy development process for a new Anti-Bullying Policy. The draft policy was initially modeled on policies and guidelines from other UC campuses, including Berkeley and Merced. In FY 2020-2021, the policy went through an initial and secondary review by the Academic Senate and CPCG received additional feedback from other key stakeholders. The proposed policy was posted for 30-day notice and comment period to the UCR community and the Provost & Executive Vice Chancellor approved the new campus Anti-Bullying policy (650-76) effective December 1, 2021. This policy showed leadership in the system; a similar, systemwide policy was developed a year after UCR's.

> **Policy Spotlight Series**
> On a monthly basis, the Chief Compliance Office publishes its Policy Spotlight, which informs the UCR community on new or relevant campus or systemwide policies and procedures. For example, in June 2022, the CCO spotlighted the recently approved and effective UCR Whistleblower and Whistleblower Protection – Local Procedures.

The Chief Compliance Office also manages the Delegation of Authority process and maintains the campus repository. Delegation of authority is an organization process in which specific functions are passed down through a hierarchical chain, typically beginning with the UC Board of Regents or UC

President down through the Chancellor and then, if necessary, re-delegated to certain campus offices or positions. A formal delegation of authority should include the source of the authority; a description of the authority being delegated; any limitations to that authority, including restrictions on redelegations; and if any delegations are amended or superseded as a result of the delegation.

D. Privacy Program

The right to privacy is expressed in the California Constitution. The University of California similarly values privacy. Under the UC Statement of Privacy Values & Privacy Principles, privacy consists of (1) the individual's ability to conduct activities without concern of or actual observation and (2) the appropriate protection, use, and release of information about individuals.

The Campus Privacy Officer role sits within the Chief Compliance Office. The UC Riverside privacy goals are derived from the UC Privacy Principles and include:

- Upholding academic integrity, intellectual freedom, and autonomy;
- Committing to the privacy values while also respecting obligations relating to transparency, accountability, and individual choice;
- Promoting stewardship of personal data handled by the campus;
- Ensuring an appropriate level of privacy through policies and procedures, especially as interpretations of privacy change over time;
- Raising awareness about privacy issues, laws and regulations.

The current elements of the UCR Privacy Program include:

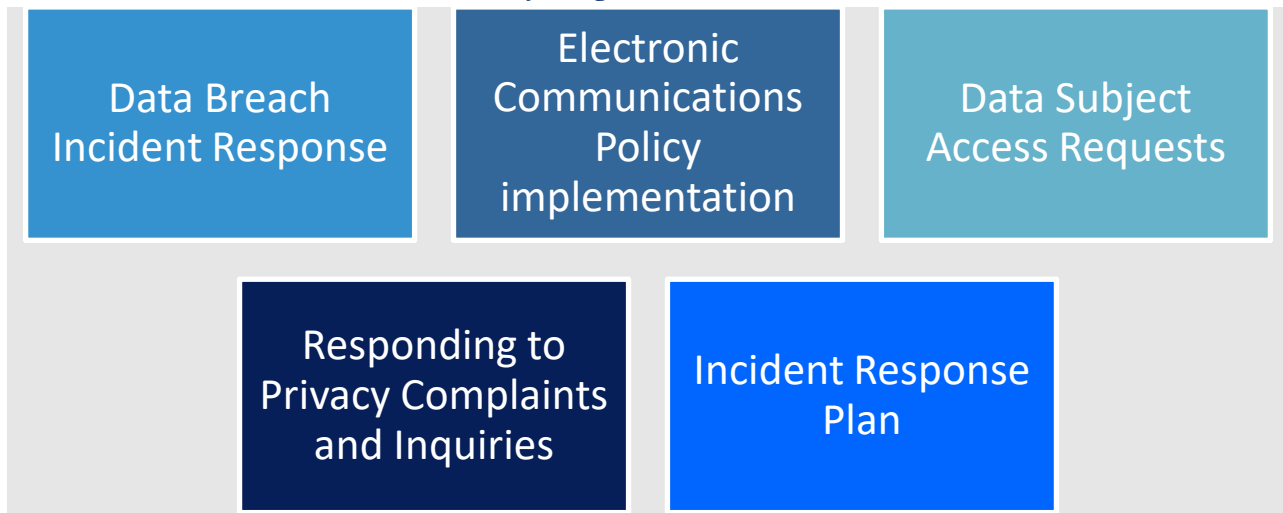| Data Breach Incident Response	Electronic Communications Policy implementation	Data Subject Access Requests
Responding to Privacy Complaints and Inquiries	Incident Response Plan	

Figure 21: UCR FY 2021-2022 Data Request Totals

Requests for Access Without Consent of Electronic Communications	6
Request for Access with Consent	3
Former Employee Access Requests	6
Requests for Personal Data Erasure	20

E. Conflicts of Interest and Foreign Influence

Conflict of Interest Coordination

The Chief Compliance Office includes the responsibility of Conflict of Interest Coordinator, tracking submission of Form 700 (required under the California Political Reform Act) by campus officials who are "Designated Officials"—employees required to disclose personal financial interests. Reportable economic interests include stock holdings and other business interests, real estate, and personal income including gifts, loans and travel payments. This year, the Conflict of Interest Coordinator reviewed and expanded UCR's designated positions under the Conflict of Interest Code, bringing us into closer alignment with other UC campuses. In addition, the Conflict of Interest Coordinator informed unit heads of the Designated Officials in their unit and the status of their required annual submission, to help ensure compliance.

Conflict of Interest Highlight: Foreign Influence

A key compliance risk for UCR and many higher education institutions is the increased federal interest and requirements related to foreign influence in higher education, including Section 117 reporting, loss of intellectual property, and academic espionage. The Chief Compliance Office collaborated with compliance partner units across the university to facilitate and develop improvements to enhance compliance with Section 117 of the Higher Education Act, which relates to foreign contracts and gifts reporting.

> **Avoiding Conflict of Interest in Admissions**
> The Chief Compliance Office has been integral in implementing improvements related to actual and potential conflicts of interest in admission practices, including the following:
> - Developed and issued policies avoiding communication between Advancement Personnel and admission teams and otherwise ensuring that staff members avoid bias in the admission of prospective student-athletes
> - Conducts a secondary review of athletic qualifications for all incoming student-athletes in the newly developed review
> - Created a policy and procedures ensuring that financial contributions are not factors in admission decisions for recruited student-athletes and implemented this review for all incoming student-athletes

E. Compliance Training

An important component of maintaining and improving a compliance program is ensuring that individuals are properly trained and aware of ethics and compliance matters, policies, and best practices. UCR requires employees to take trainings in a number of key areas, such as a general compliance briefing (including one specific for researchers), preventing harassment and discrimination, cybersecurity awareness, safety orientation, and a module on COVID-19 prevention.

The CCO monitors the completion rate of certain mandatory trainings, including the general compliance briefing course assigned to new hires.

Figure 22: General Compliance Briefing Completion Rates

2022 Monthly Compliance Rates -
General Compliance Briefing

V.   AUDIT & ADVISORY SERVICES

UCR Audit & Advisory Services (A&AS) provides independent, objective assessments of diverse financial and operating activities. In Fiscal Year (FY) 2022, A&AS reported administratively to the Chancellor through the Associate Vice Chancellor and Chief Compliance Officer, and functionally to The Regents' Committee on Compliance and Audit through the Senior Vice President – Chief Compliance and Audit Officer (CCAO), with additional direct access to the Chancellor and University President as circumstances warranted.

A&AS performs three general types of services:

1) Audits – Assurance services defined as examinations of evidence for the purpose of providing an independent assessment on governance, risk management, and control processes for the organization. Examples include financial, performance, compliance, systems security and due diligence engagements.

2) Advisory Services – Engagements wherein the nature and scope are agreed upon with the client, intended to add value and improve an organization's governance, risk management, and control processes without the internal auditor assuming management responsibility. Examples include reviews, consultations, recommendations, facilitation, and training.

3) Investigations – Independent evaluations of allegations generally focused on improper governmental activities including misuse of university resources, fraud, financial irregularities, significant control weaknesses and unethical behavior or actions.

In performing the audit function, A&AS has neither direct responsibility for, nor authority over any of the activities reviewed. The internal audit review and approval process does not in any way relieve other persons in the organization of the responsibilities assigned to them.

The FY 2022 annual audit plan for UCR comprised a variety of assurance, advisory and investigative services with audit topics primarily identified through a risk-based process. The audit plan strives to achieve an appropriate balance of breadth and depth of coverage. Three primary areas make up the audit plan for the year:

1. Risk based audits and systemwide audits;
2. Customer/Stakeholder requested audits and advisory service projects; and
3. Investigations.

During FY 2022, A&AS completed seven audits. Three were UC systemwide audits: UCPD Complaints Process Review, Admissions Donations, and Electronic Information Security (IS-3).

Management Corrective Actions. Management corrective actions, or MCAs, are steps that management has agreed to take in response to audit findings. During FY 2022, A&AS closely monitored the progress in completing agreed upon MCAs addressing control weaknesses reported in our internal audit and advisory service reports. Timely correction of control weaknesses demonstrates management's commitment to operating in accordance with sound business practices. Not only is management's commitment to timely corrective action important, but functional areas are many times indicators of areas with increased inherent risk. Some MCAs are important enough that they are considered critical to the control environment. While all MCAs are tracked to their agreed corrective action date, prompt attention to "high risk" MCAs is critical to the University meeting its fiduciary responsibilities and being proactive in addressing gaps in respective systems of internal control. During FY 2022, A&AS was able to close out a total of 37 MCAs. Seven of the MCAs closed were high risk.

Figure 23 below presents a summary of open MCAs for the FY years ended June 30, 2021 and June 30, 2022.

Figure 23: Summary of Open MCAs

MCA SUMMARY

MCAs as of June 30, 2021	26
MCAs as of June 30, 2022	11

Figure 24 represents an aging report of all open MCAs. During FY 2022, A&AS worked closely with management to consistently inform them of past due MCAs. Several of the past due MCAs involve multiple departments that have experienced significant changes in leadership and/or reorganization/reporting structure issues that have had an impact on implementing the corrective action. A&AS is working with department leadership to close the 11 open MCAs as of June 30, 2022, in FY 2023.

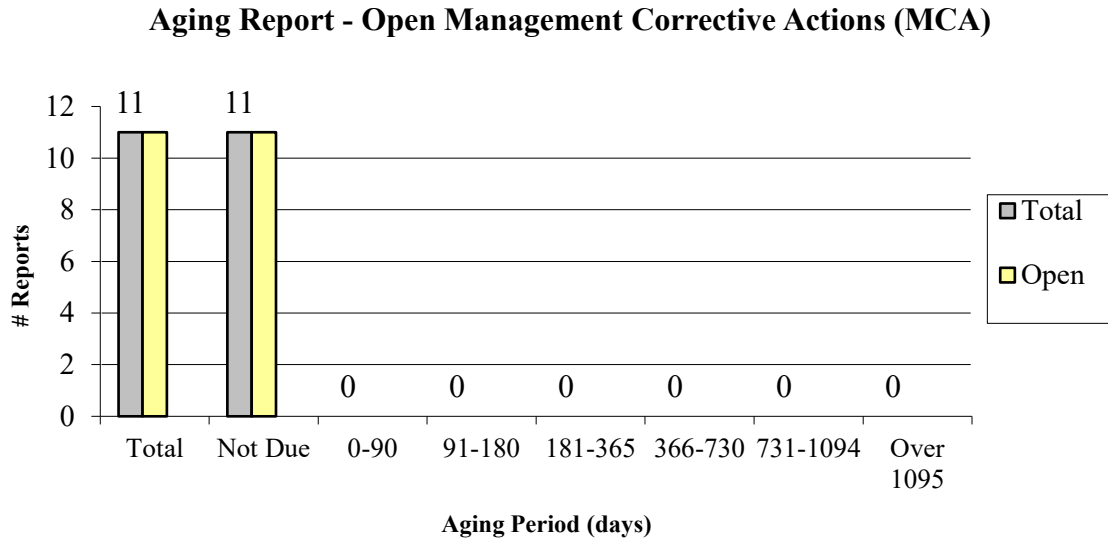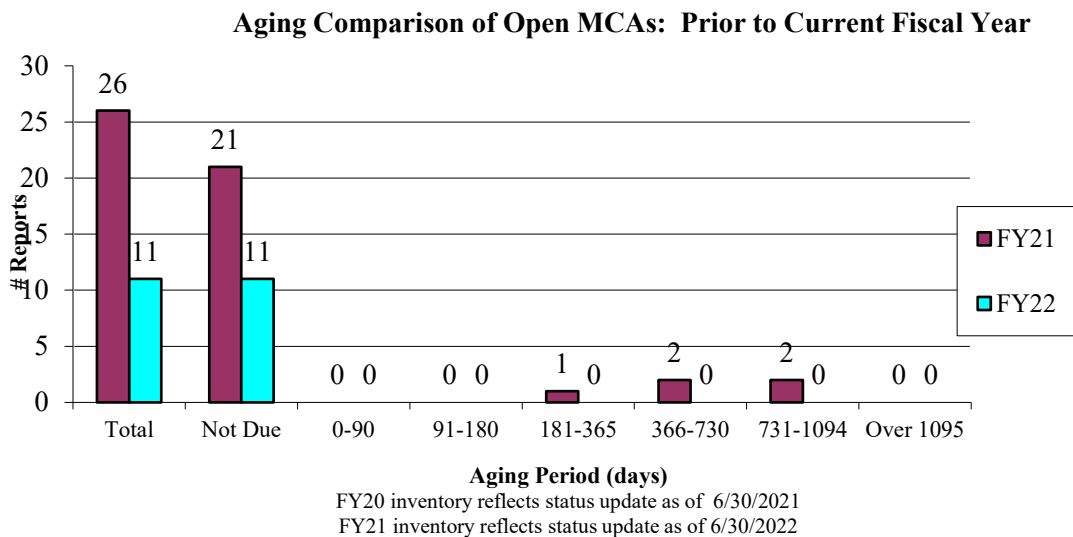*Figure 24: Open Management Corrective Actions (MCA) Aging Report*

Aging Report - Open Management Corrective Actions (MCA)

Figure 25: Open Management Corrective Actions (MCA) Aging Comparison

Aging Comparison of Open MCAs: Prior to Current Fiscal Year

FY20 inventory reflects status update as of 6/30/2021
FY21 inventory reflects status update as of 6/30/2022

APPENDIX A

<u>Internal Audit Charter:</u>

Policy Statement

It is the policy of the University of California (UC) to maintain an independent and objective internal audit function to provide the Regents, President, and campus Chancellors with information and assurance on the governance, risk management and internal control processes of the University. Further, it is the policy of the University to provide the resources necessary to enable Internal Audit to achieve its mission and discharge its responsibilities under its Charter. Internal Audit is established by the Regents, and its responsibilities are defined by The Regents' Committee on Compliance and Audit as part of their oversight function.

Authority

Internal Audit (IA) functions under the policies established by the Regents of the University of California and by university management under delegated authority.

IA is authorized to have full, free and unrestricted access to information including records, computer files, property, and personnel of the university in accordance with the authority granted by approval of this charter and federal and state statutes. Except where limited by law, the work of IA is unrestricted. IA is free to review and evaluate all policies, procedures, and practices for any university activity, program, or function.

In performing the audit function, IA has no direct responsibility for, nor authority over any of the activities reviewed. The internal audit review and approval process does not in any way relieve other persons in the organization of the responsibilities assigned to them.

Mission

The mission of the UC Internal Audit program is to provide the Regents, President, and campus Chancellors independent and objective assurance and consulting services designed to add value and to improve operations. It does this by assessing and monitoring the campus community in the discharge of their oversight, management, and operating responsibilities. Internal Audit brings a systematic and disciplined approach to evaluating and improving the effectiveness of risk management, control and governance processes.

Available at <u>Internal Audit Charter | UCOP</u>