

FLORIDA **A&M** UNIVERSITY
Board of Trustees

Audit and Compliance Committee Meeting
Wednesday, September 11, 2024
3:30 p.m.

Committee Members: Michael White, Chair
Otis Cliatt, II; John Crossman (Vice Chair); Natlie G. Figgers; Kristin Harper;
Loryn May; Belvin Perry

AGENDA

- | | | |
|-----|---------------|-----------------------|
| I. | Call to Order | Trustee Michael White |
| II. | Roll Call | Ms. Debra Barrington |

ACTION ITEMS

- | | | |
|------|---------------------------------------------------------------------------------------------------|--------------------------|
| III. | Minutes: Consideration of Approval – May 28, 2024 | Trustee White |
| IV. | AACC, Division of Audit, and ERM Charter Updates | J. Maleszewski/D. Melton |
| V. | Post Tenure Review Audit | J. Maleszewski |
| VI. | OCE Annual Report and Program Plan | R. Calhoun |
| VII. | Update University Regulation 5.005 Freedom of Expression and Assembly Rights and Responsibilities | R. Calhoun |

INFORMATIONAL ITEMS

- | | |
|-----------------------------------------------------|--------------------------|
| Office of Compliance and Ethics: | R. Calhoun |
| VIII. Office of Compliance and Ethics Annual Report | |
| Division of Audit: | J. Maleszewski/D. Melton |
| IX. Division of Audit Annual Report | |
| X. Audit and Investigative Follow-up | |
| XI. External Audit Updates | |
| XII. ERM Update | |
| XIII. Division of Audit Update | |
| XIV. Adjournment | |

**Florida Agricultural and Mechanical University
Board of Trustees**



**Audit & Compliance Committee Meeting
Vice Chair Crossman
Zoom
Tuesday, May 28, 2024
10:00 a.m.**

Committee Minutes

Committee Members: Trustee Crossman (Vice-Chair)
Trustee Kristin Harper
Trustee Otis Cliatt, II
Trustee Natalie G. Figgers
Trustee Belvin Perry, Jr.

Vice Chair Crossman called the meeting to order. Ms. Debra Barrington called the roll. A quorum was established. Vice Chair Crossman acknowledged two (2) action items:

1. Consideration of Approval for the March 6, 2024, Meeting Minutes; and
2. FY 2024-2025 Division of Audit Work Plan.

The first action item – The first action item was approval of our March 6, 2024, meeting minutes. Vice Chair Crossman asked for a motion. The minutes were moved by Trustee Belvin Perry and seconded by Otis Cliatt. The motion carried and the March 6, 2024, minutes were approved.

The second action item – The second action item was consideration of approval for the FY 2024-2025 Division of Audit Work Plan. Vice Chair Crossman asked VP Joseph Maleszewski and AVP/CRO Deidre Melton to present the plan which was included in the meeting materials beginning on page 32.

VP Maleszewski summarized that the Division of Audit (DoA) required to prepare an annual work plan by both Board of Governors Regulations and the International Standards for the Professional Practice of Internal Auditing. He clarified that this plan will guide the DoA activities over the coming year but will remain flexible to adapt to any emerging priorities identified by either management or the Board. VP Maleszewski reviewed the planned projects with the committee. The included two Board of Trustee required audits of Athletics Financial matters for Fall 2024 and Spring 2025; two Board of Governor required audits of Performance-based Funding Data Integrity and Foreign Influence; two operational audits of the Controller's Office (Control Self-Assessment) and Campus Safety and Security; an Academic Affairs advisory service related to the operations of colleges and schools; and two IT-related engagements of Cybersecurity Maturity Model Certification Level 1 and IT Governance. In addition, VP Maleszewski summarized the DoA's planned activities around service on FAMU Committees, Training and Awareness, and other DoA services such as external audit coordination, investigative services, management requests, and follow-up.

Vice Chair Crossman asked for a motion to approve the 2024 Division of Audit Work Plan. The 2024 Division of Audit Work Plan was moved by Trustee Otis Cliatt and seconded by Belvin Perry. The motion carried and the 2024 Division of Audit Work Plan was approved.

Informational Items – Vice Chair Crossman moved to the review of informational items noting that Chief Compliance and Ethics Officer Calhoun provided informational items which were included in the meeting materials. He asked that members please take time to review them if you have not already done so.

Vice Chair Crossman then recognized VP Maleszewski and AVP/Chief Risk Officer Melton to review informational items related to:

1. Risk Assessment
2. I/C Assessment – President Robinson’s I/C Assurance Statement
3. Audit and Investigative Follow-up
4. External Audit Updates
5. Standards Update
6. ERM Update
7. Division of Audit Update

The informational items were presented from the meeting materials and supported by a PowerPoint presentation. There was robust discussion on the action items to provide board members with a clear understanding on the materials presented and the status of related DoA work.

Adjournment – Vice Chari Crossman adjourned the Audit and Compliance Committee Meeting as there was no further business before the committee.



Division of Audit Charter

Purpose

The authority and responsibilities of the Florida Agricultural and Mechanical University's (FAMU) Division of Audit (DoA/Division) are defined in this charter.

The DoA is led by the Vice President for Audit who serves as the University's Chief Audit Executive\Inspector General and the ~~Associate Vice President for Audit who serves as the University's Chief Risk Officer~~Director of Audit.

The Division of Audit is committed to enhancing FAMU's ability to serve the public interest and its reputation and credibility with its stakeholders. The DoA enhances and protects organizational value by providing risk-based and objective audits and consulting engagements; ~~planning and overseeing the university enterprise risk management program~~; and investigating instances of fraud, waste, and abuse as follows:

- **Audit:** Provides independent, objective audit (assurance) and consulting (advisory) activities designed to add value and improve university operations. The Division helps the university accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control, and governance processes.
- ~~**Risk Management:** Facilitates the enterprise risk management (ERM) program by creating and maintaining the framework to effectively identify, assess, and manage enterprise risk. The role does not include supervision of the Risk Management Office, housed within the Division of Legal Affairs, which administers the university insurance programs.~~
- **Investigations:** Investigates allegations of fraud, waste, and abuse. Additionally, the Inspector General, reviews statutory whistle-blower information, designates whistleblowers, and coordinate all activities of the university as required by the Florida Whistle-blower's Act.

Role

The DoA provides insight on the mitigation of strategic, performance, and business risk to assist the Board of Trustees (BOT) and University management in the effective discharge of their responsibilities as they relate to the University policies, processes, programs, information systems, internal controls, and management reporting. The DoA is a point of coordination of and responsibility for activities that promote accountability, integrity, and efficiency in university operations.



Mission

The DoA's mission is to enhance and protect the value of FAMU and its stakeholders by providing excellence in risk-based and objective assurance, advice, and insight through the promotion of accountability, integrity, and efficiency.

Standards and Professionalism

Audit and consulting activities will conform to the mandatory elements of The Institute of Internal Auditors' (IIA) International Professional Practices Framework published by the Institute of Internal Auditors, Inc. and/or the *Information Systems Auditing Standards* published by ISACA. The DoA shall uphold the principles of integrity, objectivity, confidentiality, and competency as defined in the Institute of Internal Auditors' *Code of Ethics*. The DoA is to utilize the Committee of Sponsoring Organizations (COSO) as the model for evaluating the adequacy of internal controls. Additionally, the Division will adhere to the University's regulations, the Division's standard operating procedures manual, and Florida Board of Governors regulations and standards.

Investigation activities will conform to standards found in the *Principles and Standards for Offices of Inspector General* published by the Association of Inspectors General, and professional standards issued for the State University System of Florida entitled *Standards for Complaint Handling and Investigations for the State University System of Florida*.

~~Enterprise Risk Management activities will utilize the Committee of Sponsoring Organizations (COSO) as the model for facilitating enterprise risk management activities. In accordance with the International Professional Practices Framework published by the Institute of Internal Auditors, Inc.; the Division and its staff, are prohibited from owning University risks. Risks must be owned and managed by university administrators, faculty, and staff of operational and academic areas.~~

The Chief Audit Executive will report periodically to the BOT and senior management regarding the internal audit function's conformance with these standards.

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Authority

The DoA provides audit, and ~~investigative, and risk management~~ services to all entities of FAMU, including schools, colleges, administrative departments, auxiliary enterprises, and direct support organizations. Accordingly, the Division is authorized to:

- Have timely, unlimited, and unrestricted access to all data, books, records, files, property, information systems, and personnel of FAMU as necessary to carry out the Division's duties and responsibilities;



- Allocate resources, establish schedules, select subjects, determine scopes of work, and apply the techniques required to accomplish objectives;
- Obtain the essential assistance and cooperation of personnel in areas of the University where audits and investigations are performed, as well as other specialized services from within or outside the University; and
- ~~Facilitate the university's Enterprise Risk Management (ERM) by creating and maintaining the framework which ensures that risks are appropriately identified, assessed, managed, and considered in institutional decision making; and~~
- Have free and unrestricted access to the BOT.

The Vice President of the Division of Audit serves as the University's Chief Audit Executive, as described in the *International Standards for the Professional Practice of Internal Auditing*, and as Inspector General as authorized in Section 112.3189(1), Florida Statutes. ~~The Associate Vice President for Audit serves as the University's Chief Risk Officer.~~ The Chief Audit Executive ~~and/or the Chief Risk Officer~~ shall notify the chair of the BOT's audit committee or the President, as appropriate, of any unresolved restriction or barrier imposed by any individual on the scope of an inquiry, or the failure to provide access to necessary information or people for the purposes of such inquiry. The Chief Audit Executive ~~and/or Chief Risk Officer~~ shall work with the BOT and university management to remedy scope or access limitations. If the university is not able to remedy such limitations, the Chief Audit Executive shall timely notify the Board of Governors, through the Office of Inspector General and Director of Compliance (OIGC), of any such restriction, barrier, or limitation.

Circumstances may arise that necessitate a review or amendment of the Division's charter. Such circumstances include, but are not limited to:

- Significant changes in internal audit standards.
- Major acquisitions or reorganizations within the university.
- Changes in the university's risk profile, objectives, or regulatory environment.
- The appointment of a new Chief Audit Executive, Board of Trustees members, or senior management.

In such cases, the Chief Audit Executive, in consultation with the BOT and senior management, will discuss and document any required changes to the charter to ensure it continues to reflect the needs and objectives of the university.

Board Oversight The BOT will actively participate in discussions with the Chief Audit Executive and senior management to ensure that the Division has the necessary authority, resources, and independence to fulfill its duties effectively. The BOT will review and approve the internal audit charter periodically to ensure that it remains aligned with the university's strategic objectives and risk profile. The BOT will also ensure that the Chief Audit Executive has



direct and unrestricted access to the BOT, including the ability to meet privately with the BOT without senior management present.

Organization

The Chief Audit Executive ~~and Chief Risk Officer~~ reports functionally to the Chair of the BOT and to the Chair of the BOT’s Audit, Risk and Compliance Committee, and therefore communicates and interacts directly with the BOT, including at BOT meetings and between BOT meetings as appropriate. The Chief Audit Executive reports administratively to the President of the University. ~~The Chief Risk Officer reports administratively to the Vice President of Audit but shall have free and unrestricted access to the President of the University.~~

The BOT will:

- Approve the charter of the Division ~~of Audit~~;
- Approve the risk-based internal audit plan;
- Receive communications from the Chief Audit Executive on the internal audit activity’s performance relative to its plan and other matters;
- Provide input to senior management to support~~Approve all decisions regarding~~ the performance evaluation, appointment, removal, and annual compensation and salary adjustment of the Chief Audit Executive; and
- ~~• Approve ERM annual reports, institutional risk portfolio, risk appetite guidance, and reports on the status of risk response efforts; and~~
- Make appropriate inquiries of management and the Chief Audit Executive to determine whether there is inappropriate scope or resource limitations.

The Chief Audit Executive shall report directly to the Chair of the BOT and Chair of the BOT’s Audit, Risk, and Compliance Committee any allegations about the University President. Any allegations related to the Chief Audit Executive shall be reported to the University President and Chair of the BOT’s Audit, Risk, and Compliance Committee. Any allegations against BOT members shall be reported to the Board of Governors. These allegations are not to be handled internally and are not to be investigated by the Division.

Independence and Objectivity

The Chief Audit Executive will have the authority to disclose to the BOT any instances of interference encountered during the execution of internal audit activities. Such disclosures will include the nature of the interference, its impact on the internal audit function's effectiveness, and any actions taken to mitigate its effects. The BOT will support the Chief Audit Executive in maintaining the independence and objectivity of the internal audit function, ensuring that the function can operate without undue influence from management.

The Division will remain free from interference by any element in the University, including matters of audit and investigation selection, scope, procedures, frequency, timing, or report content to permit maintenance of a necessary independent and objective mental attitude.

Division staff must have no personal and external impairments to their independence, and have no direct responsibility or authority over any of the activities audited. Accordingly, they will not



implement internal controls, develop procedures, install systems, prepare records, or engage in any other activity that may impair their judgment.

Division staff will exhibit the highest level of professional objectivity in gathering, evaluating, and communicating information about the activity or process being examined. Division staff will make a balanced assessment of all the relevant circumstances and not be unduly influenced by their own interests or by others in forming judgments.

The Chief Audit Executive will confirm to the BOT, at least annually, the organizational independence of the internal audit activity.

Responsibility

The scope of internal audit encompasses, but is not limited to, providing assurance to management by examining and evaluating of the adequacy and effectiveness of the university's governance, risk management, and internal controls as well as the quality of performance in carrying out assigned responsibilities to achieve the University's stated goals and objectives.

Chief Audit Executive

The Chief Audit Executive is responsible for fulfillment of the following activities:

- Provide direction for, supervise, and coordinate audits, investigations, and risk management activities which promote economy, efficiency, and effectiveness in the administration of university programs and operations including, but not limited to, auxiliary facilities and services, direct support organizations, and other component units;
- Conduct, supervise, or coordinate activities for the purpose of preventing and detecting fraud and abuse within university programs and operations including, but not limited to, auxiliary facilities and services, direct support organizations, and other component units;
- Maintaining a professional audit staff with sufficient knowledge, skills, abilities, experience, and professional certifications;
- Perform consulting and advisory services related to governance, risk management and control as appropriate for the University. Such services include management requests, and participation in institutional committees;
- Review statutory whistle-blower information and coordinate all activities of the university as required by the Florida Whistle-blower's Act;
- Address significant and credible allegations relating to waste, fraud, or financial mismanagement as provided in Board of Governors Regulation 4.001;
- Keep the President and BOT informed concerning significant and credible allegations and known occurrences of waste, fraud, mismanagement, abuses, and deficiencies relating to university programs and operations; recommend corrective actions; and report on the progress made in implementing corrective actions;
- Promote, in collaboration with other appropriate university officials, effective coordination between the university and the Florida Auditor General, federal auditors, accrediting bodies, and other governmental or oversight bodies. Consider the scope of

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their work for the purpose of providing optimal audit coverage to the University at a reasonable overall cost;

- Review and make recommendations, as appropriate, concerning policies and regulations related to the university’s programs and operations including, but not limited to, auxiliary facilities and services, direct support organizations, and other component units;
- Evaluate the systems established to ensure compliance with policies, plans, procedures, laws and regulations which could have a significant impact on the University;
- Evaluate the reliability and integrity of information and the means used to identify, measure, classify, and report such information;
- Evaluate risk exposures relating to achievement of the university’s strategic objectives;
- Evaluating the means of safeguarding assets and, as appropriate, verifying the existence of such assets;
- Communicate to the president and the board of trustees, at least annually, the office’s plans and resource requirements, including significant changes, and the impact of resource limitations;
- Provide training and outreach, to the extent practicable, designed to promote accountability and address topics such as fraud awareness, risk management, controls, and other related subject matter;
- Coordinate or request audit, financial- and fraud-related compliance, controls, and investigative information or assistance as may be necessary from any university, federal, state, or local government entity;
- Develop and maintain a quality assurance and improvement program for the office of Chief Audit Executive. This program must include an external assessment conducted at least once every five (5) years. The external assessment report and any related improvement plans shall be presented to the BOT, with a copy provided to the Board of Governors;
- Establish policies that 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;
- Inform the BOT when contracting for specific instances of audit or investigative assistance; and
- Report routinely to the BOT on matters including significant risk exposures, control issues, fraud risks, governance issues, and other matters requested by the President and the BOT.

Chief Risk Officer

~~The Chief Risk Officer is responsible for fulfillment of the following activities:~~

- ~~• Primary responsibility for facilitating the design and implementation of Enterprise Risk Management consistent with COSO’s Enterprise Risk Management: Integrated with Strategy and Performance in collaboration with university leadership;~~
- ~~• Responsible and accountable for overseeing the development, implementation, and fostering of a collaborative, campus-wide approach to ERM at the University;~~



- ~~Promote the consistent use of risk management and ownership of risk at all levels of the institution;~~
- ~~Build a risk-aware culture, including appropriate education and training;~~
- ~~Lead the institution's processes for identifying, analyzing, evaluating, responding to and controlling, monitoring, and reporting on key risks;~~
- ~~Submit risk information for review on a regular basis to the Board of Trustees Audit and Compliance Committee and the full Board;~~
- ~~Charge, appoint, and oversee the work of an ERM Advisory Committee (ERMAC);~~
- ~~Submit high level recommendations to the President for keeping identified risks within tolerance levels; and~~
- ~~Annually submit a Risk Appetite Statement to the BOT for review.~~

 VP of Audit (Chief Audit Executive) Date

~~Associate VP of Audit (Chief Risk Officer) Director~~
 Date

 President Date

 Audit & Compliance Committee Chair Date

DRAFT

Purpose

The authority and responsibilities of the Florida Agricultural and Mechanical University's (FAMU) Office of Enterprise Risk Management (OERM) are established under this charter. The OERM is under the leadership of the Deputy Chief Operating Officer and Associate Vice President for Enterprise Risk Management (ERM).

Mission and Vision

The OERM's mission is to provide our stakeholders with meaningful, actionable, and timely strategic and performance risk intelligence to enhance decision-making and resource alignment while appropriately balancing risk and opportunity.

The Vision for the OERM is, "The FAMU ERM program aspires to be a thought leader in enterprise risk management by developing innovative, cost-effective methodologies that integrate risk management into the culture and strategic decision-making processes of academic institutions."

Standards and Professionalism

The ERM activities will utilize the Committee of Sponsoring Organizations (COSO) Enterprise Risk Management – Integrating with Strategy and Performance as the model for facilitating enterprise risk management activities.

Authority

The ERM program is granted the authority to:

- Access all necessary data, records, files, property, information systems, and personnel across FAMU without restrictions to fulfill its duties.
- Allocate resources, establish schedules, select subjects, determine the scope of work, and apply necessary techniques to achieve its objectives.
- Seek assistance and cooperation from university personnel and external entities to carry out its responsibilities.
- Create and maintain an ERM framework that identifies, assesses, manages, and integrates risks into institutional decision-making.

The Deputy Chief Operating Officer and Associate Vice President for ERM serves as the University's Chief Risk Officer. The Chief Risk Officer shall notify the chair of the BOT's Audit, Risk, and Compliance committee or the President, as appropriate, of any unresolved

restriction or barrier imposed by any individual on the scope of an inquiry or the failure to provide access to necessary information or people for such inquiry. The Chief Risk Officer shall work with the BOT and university management to remedy scope or access limitations. If the university cannot remedy such constraints, the Chief Risk Officer shall timely notify the Board of Governors, through the Office of Inspector General and Director of Compliance (OIGC), of any such restriction, barrier, or limitation.

Organization

The Chief Risk Officer reports functionally to the Chair of the BOT and the Chair of the BOT's Audit, Risk and Compliance Committee, ensuring direct and unrestricted communication and interaction with the BOT. Administratively, the Chief Risk Officer reports to the Executive Vice President and Chief Operating Officer and has unrestricted access to the President of the University.

The BOT's role:

- Approve the Enterprise Risk Management charter.
- Receive updates from the Chief Risk Officer on ERM activities and performance.
- Approve decisions regarding the Chief Risk Officer's evaluation, appointment, removal, and compensation.
- Approve the institutional risk portfolio, risk appetite guidance, and status reports on risk response efforts.
- Inquire about any limitations in scope or resources with university management and the Chief Risk Officer.

Independence and Objectivity

The OERM will remain free from interference by any element in the University to permit the maintenance of a necessary independent and objective mental attitude.

- ERM staff must avoid any personal or external impairments to their independence and should not have direct responsibility or authority over any activities they audit.
- Staff will maintain professional objectivity, making balanced assessments and ensuring their judgments are free from undue influence.

The Chief Risk Officer will confirm the organizational independence of the OERM to the BOT at least annually.



Responsibility

The Chief Risk Officer is responsible for:

- Leading the design and implementation of ERM in collaboration with university leadership, consistent with COSO’s ERM framework.
- Overseeing the development and fostering of a collaborative, campus-wide approach to ERM.
- Promoting consistent risk management practices and risk ownership across all institutional levels.
- Building a risk-aware culture through education and training.
- Managing the processes for identifying, analyzing, evaluating, responding to, controlling, monitoring, and reporting key risks.
- Regularly submitting risk information to the BOT’s Audit, Risk and Compliance Committee and the full BOT.
- Charging, appointing, and overseeing the ERM Advisory Committee (ERMAC).
- Submit high-level risk recommendations to the President to ensure risks remain tolerable.
- Annually submitting a Risk Appetite Statement to the BOT for review.

Associate VP of ERM (Chief Risk Officer)

Date

President

Date

Audit, Risk, & Compliance Committee Chair

Date



Report No. 23-24-0002
Assurance Services Report
Post-Tenure Review Audit



ACCOUNTABILITY • INTEGRITY • EFFICIENCY

June 21, 2024



FY 23-24 Post-Tenure Review Audit

EXECUTIVE SUMMARY

In accordance with BOG Regulation 10.003, Florida A&M University (the University) faculty underwent a comprehensive PTR of the last five years of performance. The purpose of this review was to ensure compliance with BOG Regulation 10.003 and its requirements, evaluate whether the PTR process is effective, and determine whether the process is aligned with university goals and priorities. As outlined in BOG Regulation 10.003, six (6) areas of the PTR process were tested for compliance. (See [Appendix D](#) for compliance testing details.) Those sections include:

1. **Policy and Procedures Requirements** - Institutions must develop policies and procedures for PTRs that align with the BOG standards, ensuring consistent and fair evaluations.
2. **Timing and Eligibility Requirements** - Tenured faculty must undergo review every five years, with eligibility starting five years post-tenure or since the last comprehensive review.
3. **Review Requirements** - PTR process must include a thorough evaluation of faculty members' performance in teaching, research, and service, based on established criteria.
4. **Process Requirements** - PTR must involve multiple levels of evaluation, including administrative assessments with clear documentation and feedback provided to faculty members.
5. **Outcomes** - PTR can result in outcomes ranging from commendation to a performance improvement plan, and in serious cases, initiation of procedures for termination.
6. **Monitoring** - Institutions must track and report on the implementation and outcomes of post-tenure reviews, ensuring compliance with the regulation.
7. **Other** – PTR must respect collective bargaining agreements and may include additional evaluation processes as long as they meet or exceed the regulation's requirements.

The PTR process was also reviewed to determine whether it was aligned with university priorities and goals and effective in evaluating tenured faculty members' performances.
















Conclusion:



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.

We commend the Division of Academic Affairs and Office of the Provost for their commitment to upholding high standards through the PTR process. We look forward to observing continued improvements in the future. To support this progress, several opportunities for improvement were identified. By addressing these opportunities, the University can further enhance the PTR process, ensuring it continues to support faculty excellence and alignment with the University's strategic priorities and goals. Opportunities for improvement were identified as follows:



	<p>Data Collection</p> <p>Faculty information regarding the date of last promotion, performance evaluation dates, ratings in performance evaluations, and performance improvement plan dates was not readily available in the data file. Currently, the process is to manually retrieve the information from candidates' resumes and faculty evaluation packets and record the information in an Excel file.</p>		
	<p>Reviewers for Candidates</p> <p>The PTR process does not include procedures for moving forward when a Level 1 or Level 2 reviewer is unavailable to review candidates. The Interim Associate Provost for Academic and Faculty Affairs plans to add language to the PTR procedures that allows the Deans, with the Provost's approval, to assign a designee to perform the candidate's review, when the reviewer is unavailable.</p>		
	<p>Monitoring</p> <p>There is no ongoing activity in place for gathering feedback on the post-tenure review process and using it to make improvements.</p>		
	<p>Transparency</p> <p>While most of the Colleges/Schools defined specific criteria for meeting the threshold for each of the rating categories (Exceeds Expectations, Meets Expectations, Does Not Meet Expectations, and Unsatisfactory), five¹ out of the 13 Colleges/Schools only defined the criteria needed for faculty to "Meet Expectations."</p>		
	<p>College of Law Criteria</p> <p>The College of Law PTR Committee determined that they would not utilize student teaching evaluations in the PTR process because of a very low rate of return from law students.</p> <p>The "Teaching" criteria section for the College of Law PTR procedures does not require an assessment of the teaching approaches and techniques related to preparing students for the Bar Exam. Therefore, the teaching criteria does not fully align with the President's goal to increase licensure pass rate.</p>		
	<p>School of Journalism and Graphic Communication (SJGC) Procedures</p> <p>SJGC's PTR procedures are unclear on whether management considers only the most recent Annual Faculty Evaluation form during PTR or all Faculty Evaluation forms from the prior 5-year review period.</p>		
Legend:	 Controls are in place & operating effectively	 Controls are in place but not operating effectively	 Controls are not in place

¹ The College of Agriculture & Food Sciences, College of Law, College of Social Sciences, Arts, & Humanities, School of Architecture & Engineering Technology, and School of Allied Health Sciences only defined the specific criteria for tenured faculty to "Meet Expectations."



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BACKGROUND

Florida Statutes PTR Directives for FY 2023-2024

Section (s.) 1001.706(6b)² Florida Statutes (F.S.), authorizes the BOG to adopt a PTR regulation. In 2022, the Florida State Legislature amended the statute to require the BOG to adopt a regulation that mandates each tenured faculty member in the state university system to undergo a comprehensive post-tenure review every five years. Additionally, the BOG PTR regulation must address the following areas:

- Accomplishments and productivity;
- Assigned duties in research, teaching, and service;
- Performance metrics, evaluations, and ratings; and
- Recognition and compensation considerations, as well as improvement plans and consequences for underperformance.

The BOG may include other considerations in the regulation, if it so chooses.

Florida Board of Governors: Regulation 10.003, PTR

In accordance with s. 1001.706 (6b) F.S., March 2023³, the BOG implemented Regulation 10.003⁴, Post-Tenure Faculty Review, which states each Board of Trustees must adopt policies that require each tenured state university faculty member to undergo a comprehensive post-tenure review. The purpose of BOG Regulation 10.003, is to accomplish the following:

- Ensure high standards of quality and productivity among the tenured faculty in the State University System.
- Determine whether a faculty member is meeting the responsibilities and expectations associated with assigned duties in research, teaching, and service, including compliance with state laws, Board of Governors' regulations, and university regulations and policies.
- Recognize and honor exceptional achievement and provide an incentive for retention as appropriate.
- Refocus academic and professional efforts and take appropriate employment action when appropriate.

BOG Regulation 10.003 Post-Tenure Faculty Review outlines the assessment, monitoring, and reporting requirements for ensuring high standards of quality and productivity among tenured faculty in the State University System of Florida. Each tenured faculty member must have a comprehensive post-tenure review of five years of performance in the fifth year following the last promotion or the last comprehensive review, whichever is later. For faculty hired with tenure, the hire date must constitute the date of the last promotion. In

² http://www.leg.state.fl.us/statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=1000-1099/1001/Sections/1001.706.html

³ BOG Regulation 10.003 was adopted in March 2023 and amended in November 2023.

⁴ <https://www.fibog.edu/wp-content/uploads/2022/11/Regulation-10.003.pdf>



each of the second, third, fourth, and fifth years following the effective date of this regulation, 20% of tenured faculty who have not received a comprehensive review will be evaluated.

The comprehensive PTR must include consideration of the following aspects of faculty performance:

- The level of accomplishment and productivity relative to the faculty member’s assigned duties in research, teaching, and service, including extension, clinical, and administrative assignments.
- The faculty member’s history of professional conduct and performance of academic responsibilities.
- Any non-compliance with state law, BOG regulations, university regulations and/or policies.
- Unapproved absences from teaching assigned courses.
- Substantiated student complaints.
- Other relevant measures of faculty conduct as appropriate

Beginning January 1, 2024, and continuing every three years thereafter, each university must conduct an audit of the comprehensive PTR process for the prior fiscal year and submit a final report to the university’s Board of Trustees by July 1st.

Florida A&M University: Regulation 10.204(9) Faculty Tenure, PTR

According to FAMU Regulation 10.204(9)⁵, each tenured faculty member at the University shall undergo a comprehensive PTR that is conducted in accordance with the criteria and requirements set forth in Florida BOG Regulation 10.003, Post-Tenure Faculty Review.

⁵ <https://www.famu.edu/about-famu/policies-and-regulations/regulations-and-notices/pdf-active/Regulation%2010.204%20Amendment%209-6-23.pdf>



FAMU PTR PROCESS OVERVIEW

As required by Florida Statutes 1001.706(6b) and BOG Regulation 10.003, the University has implemented a PTR process to ensure high standards of quality and productivity among tenured faculty at the University. There are currently 153 tenured faculty members at the University. For the first year following the effective date of BOG Regulation 10.003, all faculty tenured, promoted, or tenured upon appointment in 2019, were automatically selected for review. Additionally, faculty in the fifth year since their last promotion or the last comprehensive review and a random selection of eligible faculty tenured prior to 2019, were also selected to complete the process.

The Division of Strategic Planning, Analysis, and Institutional Effectiveness (SPAIE) was employed to assist in the randomized selection of the 20% of eligible faculty tenured prior to 2019. A list of the FAMU Employee ID numbers of those tenured prior to 2019 was provided to SPAIE. SPAIE performed a stratified random sampling of the Employee ID list and provided the list of the selected sample to the Office of the Provost. This resulted in a total of 26% of total tenured faculty being selected for evaluation⁶. All selected candidates and their deans were notified by email that they had been selected for a 2023-24 PTR review. The email provided candidates with guidance on the materials needed for their review. (See [Appendix B](#) for timeline of events.)

Faculty members were required to complete a dossier highlighting their accomplishments and demonstrating performance relative to their assigned duties. The completed dossier was then submitted to the appropriate department chair. The faculty member's department chair reviewed the completed dossier, the faculty member's personnel file, and other records related to professional conduct, academic responsibilities, and performance. The department chair then added a letter to the dossier which assessed the level of achievement and certification. The department chair then forwarded the dossier to the College Dean for review. The Dean also added a brief letter assessing the level of achievement during the period under review. The Dean's letter also was required to include the dean's recommended performance rating using the following scale:

- *Exceeds Expectations*: a clear and significant level of accomplishment beyond the average performance of faculty across the faculty member's discipline and unit.
- *Meets Expectations*: expected level of accomplishment compared to faculty across the faculty member's discipline and unit.
- *Does Not Meet Expectations*: performance falls below the normal range of annual variation in performance compared to faculty across the faculty member's discipline and unit but is capable of improvement.
- *Unsatisfactory*: failure to meet expectations that reflect disregard or failure to follow previous advice or other efforts to provide correction or assistance, or performance involves incompetence or misconduct as defined in applicable university regulations and policies.

⁶ There were originally 40 faculty members selected for 23-24 PTR Cohort. However, two faculty members' reviews were placed on hold pending separation from the University and were incomplete at the time of this audit. This resulted in a total of 38 faculty members being reviewed for the 23-24 PTR.



PTR OUTCOMES

This report provides a comprehensive review of the PTR process for the 23-24 fiscal year. As required by BOG Regulation 10.003(6a), the 23-24 PTR Cohort Results are as follows:

- a. Number of tenured faculty in each rating category:

Rating Category	Number of Faculty
Exceed Expectations	14
Meets Expectations	21
Does Not Meet Expectations	3
Unsatisfactory	0
Total	38

- b. University's Response in cases of each category:

Rating Category	University's Response
Exceed Expectations	The Provost, in consultation with the President, determined appropriate recognition for faculty who "Exceed Expectations" to be a one-time compensation of \$5,000.
Meets Expectations	The Provost, in consultation with the President, determined appropriate recognition for faculty who "Meet Expectations" to be a one-time compensation of \$2,500.
Does Not Meet Expectations	The faculty member's Dean, in consultation with the faculty member's Department Chair, proposed Performance Improvement Plans (PIPs) to be approved by the Provost. The PIPs included specific requirements for professional development. The faculty member's progress towards completing the plan's requirements will be reassessed by the faculty member's Department Chair or unit director in the 3rd, 6th, and 9th months of the plan. The plan cannot extend past 12 months after the date it is enacted. The faculty member will be provided feedback and appraisal at each reassessment.
Unsatisfactory	n/a

- c. Findings of noncompliance: None



PTR SURVEY RESULTS

In efforts to gather feedback from faculty, a PTR Satisfaction Survey was created using Qualtrics XM and distributed to faculty members who were selected for the 23-24 PTR Cohort via email. Artificial intelligence was used to help create the questions for the Faculty Satisfaction Survey. A total of 40 faculty members were selected for the 23-24 PTR Cohort. However, due to the untimely death of a member of the cohort and the pending separation of another, the total number of faculty members reviewed for the 23-24 PTR Cohort was 38.

On April 19, 2024, the survey was distributed to the 23-24 Cohort, allowing one-week for response time. The response rate for the Faculty Satisfaction Survey was 39.47% (15/38). Overall, the feedback received from faculty was positive and constructive. The majority of the respondents believed the PTR process was clear, easy to understand, and effective for promoting faculty excellence and accountability. (See summary below and [Appendix C](#) for details.)

Of the respondents surveyed:

- 80% believe the PTR process was clear and easy to understand.
- 87% believe that they had access to the resources and support they needed to prepare for the review.
- 80% believe the criteria for evaluation were fair and relevant to their role.
- 67% believe the review timeline was reasonable and met expectations.
- 80% believe the PTR process is effective for promoting faculty excellence and accountability.
- 73% of respondents believe the feedback they received from the review committee was constructive and helpful.

The Office of the Provost has agreed to incorporate the suggestions received from the Faculty Satisfaction Survey, as appropriate, take actions to ensure notifications to future cohorts are received timely, and provide a more static PTR Calendar of Events. (See [Recommendations and Corrective Action Plans](#) for more details.)



RECOMMENDATIONS AND CORRECTIVE ACTION PLANS

CONDITIONS	RECOMMENDATIONS	MANAGEMENT'S RESPONSE
<p>Data Collection: BOG Regulation 10.003(2a) specifies the timing and eligibility requirements for the PTR process. During the review of the requirements, the process was determined to be in compliance with the regulation. However, information regarding each faculty member's date of last promotion, performance evaluation dates, ratings in performance evaluation, and performance improvement plan dates were not readily available in the data file and had to be obtained manually.</p>	<p>To increase efficiency, Academic Affairs management should use an electronic reporting system to collect and manage faculty activity information related to faculty review.</p>	<p>The Office of the Provost is exploring several solutions. Dr. Reginald Perry has contacted Academic Analytics to obtain a quote for their solution. He has also contacted Interfolio to arrange for a demo of their product. The University already licenses with other products from both companies.</p> <p>Target Date: August 2024</p>
<p>Reviewers for Candidates: A review of the University's PTR Procedures identified missing internal controls related to how to proceed with the process when a Level 1 or Level 2 reviewer is unavailable.</p>	<p>Academic Affairs management should implement a procedure that describes what steps should be taken if a Level 1 or Level 2 reviewer is unavailable to perform their review.</p>	<p>Dr. Perry will revise the current procedures to incorporate this change.</p> <p>Target Date: August 2024</p>
<p>Transparency: 8 out of 13 Colleges/Schools defined specific criteria to meet the threshold for each of the rating categories: <i>Exceeds</i>, <i>Meets</i>, <i>Does Not Meet</i>, and <i>Unsatisfactory</i>. However, 5 out of 13 Colleges/Schools only defined the criteria needed for faculty to <i>Meet Expectations</i>.</p>	<p>While BOG Regulation 10.003 vaguely defines the recommended performance rating scale categories, for the purpose of transparency, each College/School's PTR criteria should include details about how faculty members can achieve each rating.</p>	<p>The Office of the Provost will request that all colleges and schools include metrics for <i>Exceeds</i> and <i>Does Not Meet</i>.</p> <p>Target Date: August 2024</p>
<p>College of Law Criteria: While reviewing the College of Law PTR Criteria, it was noticed that the College of Law elected not to include student teaching evaluations in PTR process. According to the documented procedures, the decision was made due to a low survey response rate from students.</p>	<p>As a best practice, College of Law faculty should:</p> <ul style="list-style-type: none"> • Use well-designed evaluation instruments that minimize bias and encourage thoughtful feedback. • Train students on how to provide constructive and helpful feedback, which can improve the quality of the evaluations. 	<p>To help minimize bias, College of Law has implemented a new strategy to increase their student evaluation response rates.</p> <p>Target Date: August 2024</p>
<p>College of Law Criteria: The <i>Teaching</i> section of the College of Law criteria includes a requirement for faculty to demonstrate expertise</p>	<p>In efforts to support the President's Annual Goal to increase licensure pass rate, the language in the "Teaching"</p>	<p>Office of the Provost will request the College of Law strengthen their language regarding the assessment</p>



<p>by submitting a description of teaching approaches and techniques which “may” include those related to preparing students for the Bar Exam.</p>	<p>section should be strengthened to require faculty to include approaches and techniques used for preparing students for the bar exam.</p>	<p>of faculty’s preparation of students for the bar exam. Target Date: August 2024</p>
<p>SJGC Procedures: SJGC’s PTR procedures do not clearly state whether management considers only the most recent Annual Faculty Evaluation form OR all Faculty Evaluation forms from the 5-year review period.</p>	<p>To increase transparency, SJGC should clarify whether all Annual Faculty Evaluation forms from the 5-year period are reviewed for PTR or just the most recent one.</p>	<p>Office of the Provost will request SJGC include 5-years of annual evaluations in the PTR process. Target Date: August 2024</p>
<p>Monitoring: There is no process in place to survey each PTR cohort for feedback regarding their experience of the process and using that feedback to improve the process.</p> <p>Division of Audit created and distributed an anonymous survey to the 23-24 PTR Cohort and received a response rate of about 39%. 6 out of 10 of the questions asked, related to the areas of training/resources, data collection & analysis, and outcomes.</p>	<p>The Provost Office should implement a process to conduct anonymous faculty satisfaction surveys after every cohort review is complete, in order to gauge faculty’s experience and perceptions of the fairness, transparency, and effectiveness of the post-tenure review process.</p> <p>The Provost Office should review the feedback received from faculty and use it to make process improvements.</p>	<p>The Provost Office will incorporate the survey developed by the Division of Audit into its process. The survey will be administered after the Dean's Review.</p> <p>Feedback received as a result of the anonymous survey distributed by the Division of Audit will be reviewed and incorporated into the process as appropriate.</p> <p>Target Date: August 2024</p>



APPENDIX A: PURPOSE, SCOPE, AND METHODOLOGY

Purpose and Scope

The purpose of this audit was to verify compliance with BOG Regulation 10.003 and its requirements for comprehensive post-tenured faculty review; evaluate whether the PTR process is effective and aligned with university goals and priorities.

Methodology

The procedures and controls applied by management in the University's PTR process to achieve the compliance, assess faculty performance, recognize excellence, and refocus efforts, were subject to the following audit procedures:

- Detailed testing of faculty dossiers and management responses.
- Walk-throughs of processes for navigating the Interfolio system, dossier submission, compiling data files, and inputting data into the system.
- Interviews of key staff regarding the PTR process, including timelines and criteria.
- Surveys of the 23-24 PTR Cohort to obtain feedback on their experience with the process.



APPENDIX B: 23-24 PTR CALENDAR OF EVENTS



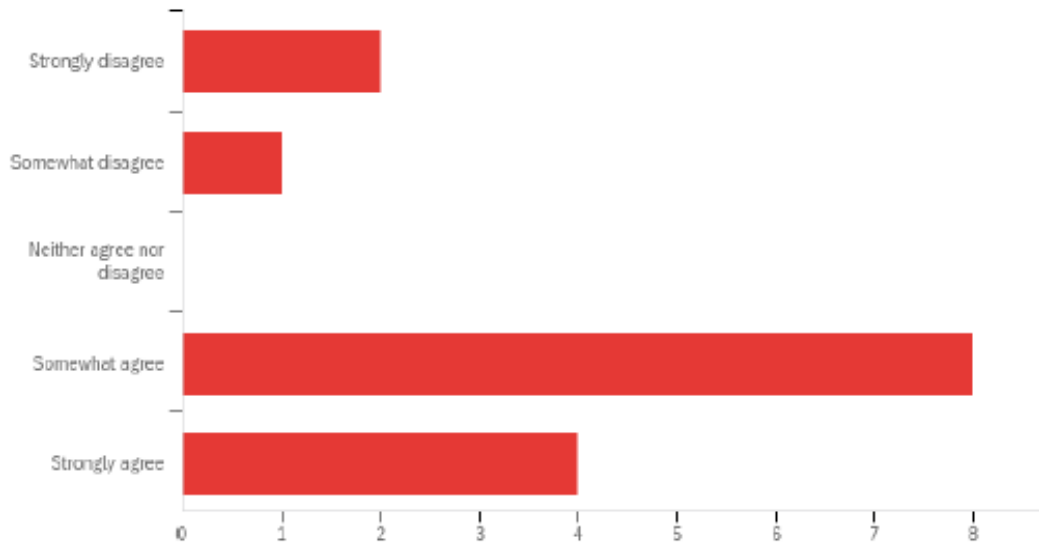
2023-24 Post Tenure Review Calendar of Events

ACTION	DEADLINE
Faculty candidates and their dean are notified that they have been selected for a Post Tenure Review	September 30, 2023
Faculty candidates submit request for a Provost Exemption.	October 6, 2023
Interfolio Portal Opens for Candidates to Submit Review Materials	November 6, 2023
Interfolio Portal Closes for Candidates to Submit Review Materials to the Office of the Provost	December 11, 2023
Review materials due from the Office of the Provost to the Department Chairs or Division Directors	January 8, 2024
Department Chair's or Division Directors Review Due to the Dean	February 2, 2024
Dean's Review Due to the Provost	March 1, 2024
Candidate's Optional Response to the Dean's Review Due	March 8, 2024
Candidate, Dean, and Chair/Director Notified of the Provost's Final Rating.	April 15, 2024
Appeal Applications Due	April 22, 2024
Performance Improvement Plans Due	April 22, 2024
Provost Report to BOT	June 2024



APPENDIX C: FACULTY SATISFACTION SURVEY RESULTS

Q1 - The post-tenure review process was clear and easy to understand.

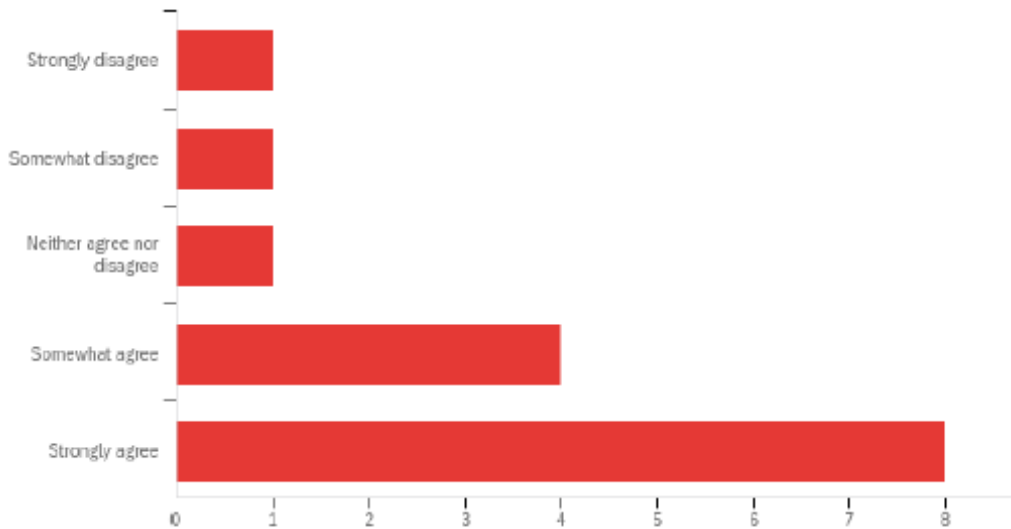


#	Field	Minimum	Maximum	Mean	Std Deviation	Variance	Count
1	The post-tenure review process was clear and easy to understand.	1.00	5.00	3.73	1.29	1.66	15

#	Answer	%	Count
1	Strongly disagree	13.33%	2
2	Somewhat disagree	6.67%	1
3	Neither agree nor disagree	0.00%	0
4	Somewhat agree	53.33%	8
5	Strongly agree	26.67%	4
	Total	100%	15



Q2 - I felt the criteria for evaluation were fair and relevant to my role.

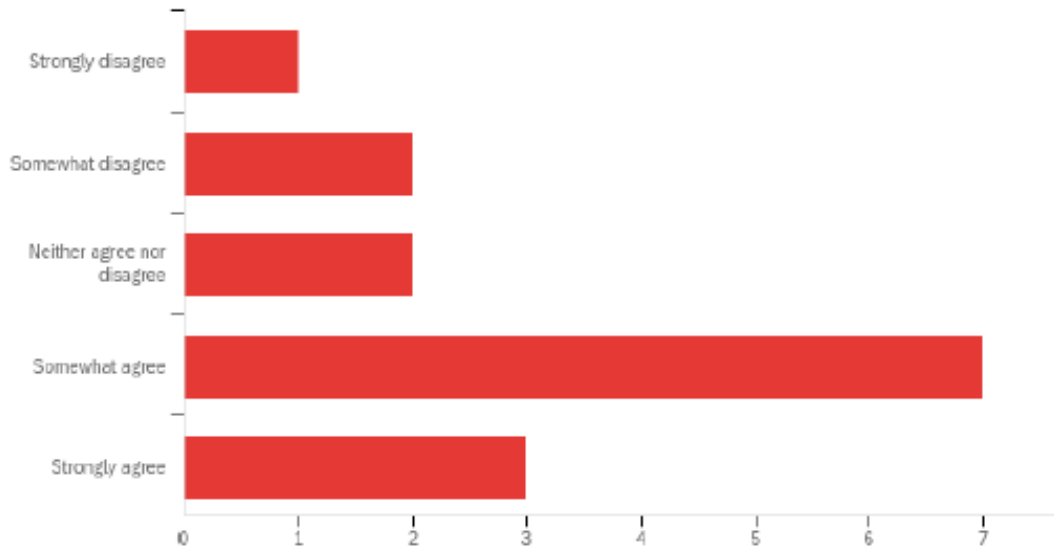


#	Field	Minimum	Maximum	Mean	Std Deviation	Variance	Count
1	I felt the criteria for evaluation were fair and relevant to my role.	1.00	5.00	4.13	1.20	1.45	15

#	Answer	%	Count
1	Strongly disagree	6.67%	1
2	Somewhat disagree	6.67%	1
3	Neither agree nor disagree	6.67%	1
4	Somewhat agree	26.67%	4
5	Strongly agree	53.33%	8
	Total	100%	15



Q3 - The review timeline was reasonable and met expectations.

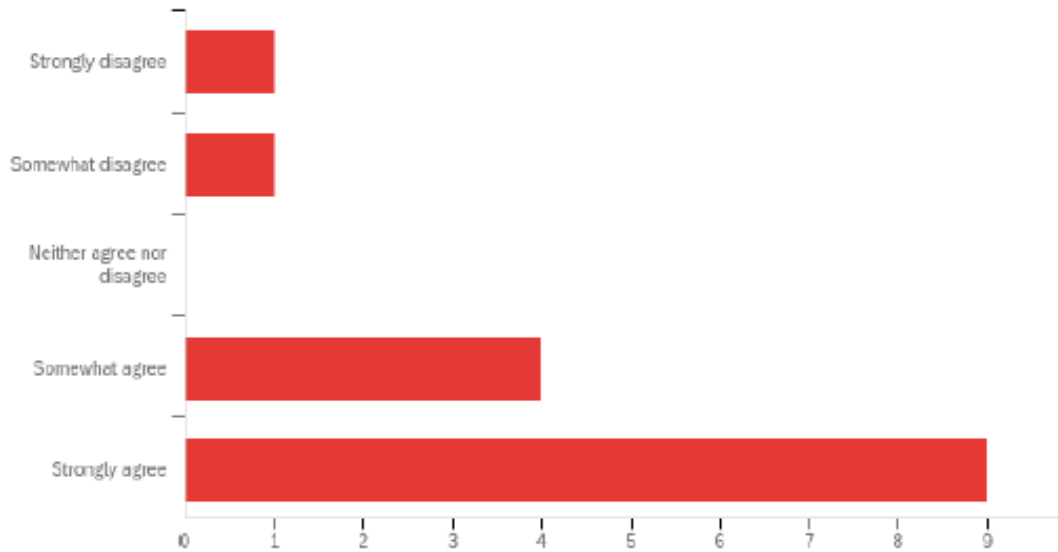


#	Field	Minimum	Maximum	Mean	Std Deviation	Variance	Count
1	The review timeline was reasonable and met expectations.	1.00	5.00	3.60	1.14	1.31	15

#	Answer	%	Count
1	Strongly disagree	6.67%	1
2	Somewhat disagree	13.33%	2
3	Neither agree nor disagree	13.33%	2
4	Somewhat agree	46.67%	7
5	Strongly agree	20.00%	3
	Total	100%	15



Q4 - I had access to the resources and support I needed to prepare for the review.

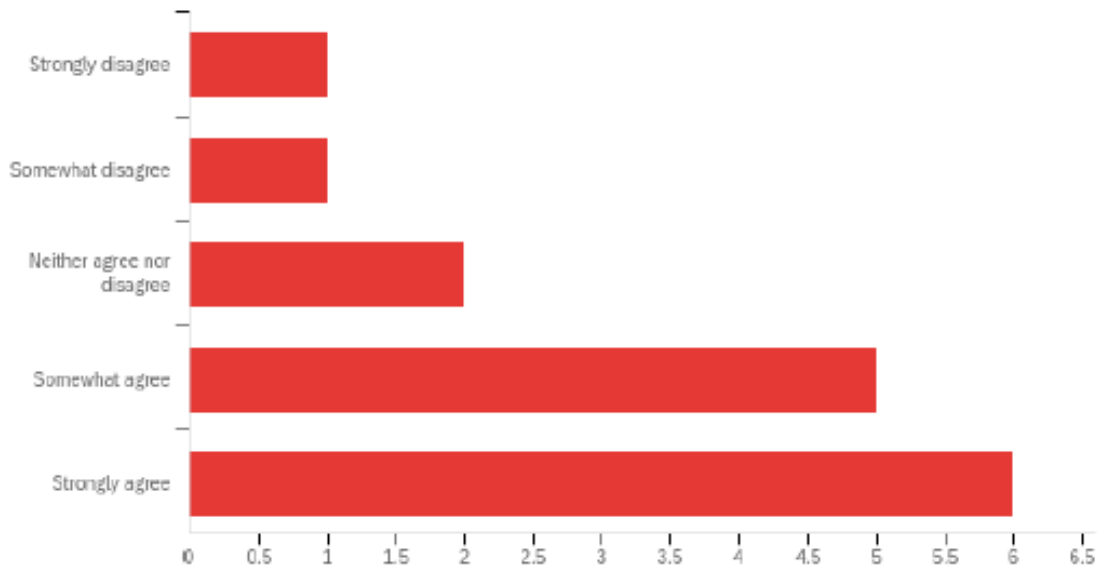


#	Field	Minimum	Maximum	Mean	Std Deviation	Variance	Count
1	I had access to the resources and support I needed to prepare for the review.	1.00	5.00	4.27	1.18	1.40	15

#	Answer	%	Count
1	Strongly disagree	6.67%	1
2	Somewhat disagree	6.67%	1
3	Neither agree nor disagree	0.00%	0
4	Somewhat agree	26.67%	4
5	Strongly agree	60.00%	9
	Total	100%	15



Q5 - The feedback I received from the review committee was constructive and helpful.

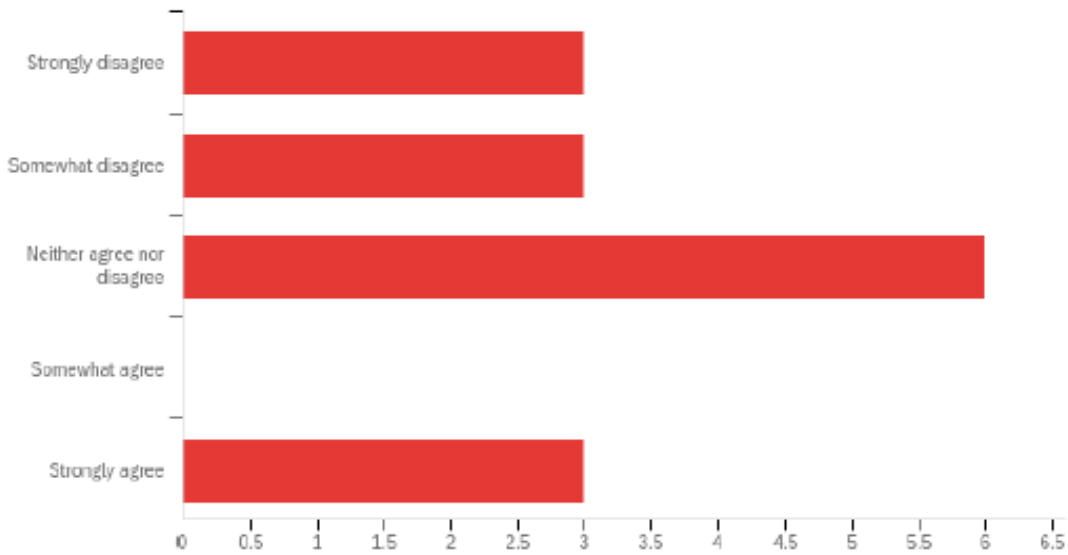


#	Field	Minimum	Maximum	Mean	Std Deviation	Variance	Count
1	The feedback I received from the review committee was constructive and helpful.	1.00	5.00	3.93	1.18	1.40	15

#	Answer	%	Count
1	Strongly disagree	6.67%	1
2	Somewhat disagree	6.67%	1
3	Neither agree nor disagree	13.33%	2
4	Somewhat agree	33.33%	5
5	Strongly agree	40.00%	6
	Total	100%	15



Q6 - I believe adding a peer-review component to the post-tenure review process would help to decrease bias and provide a well-rounded assessment.

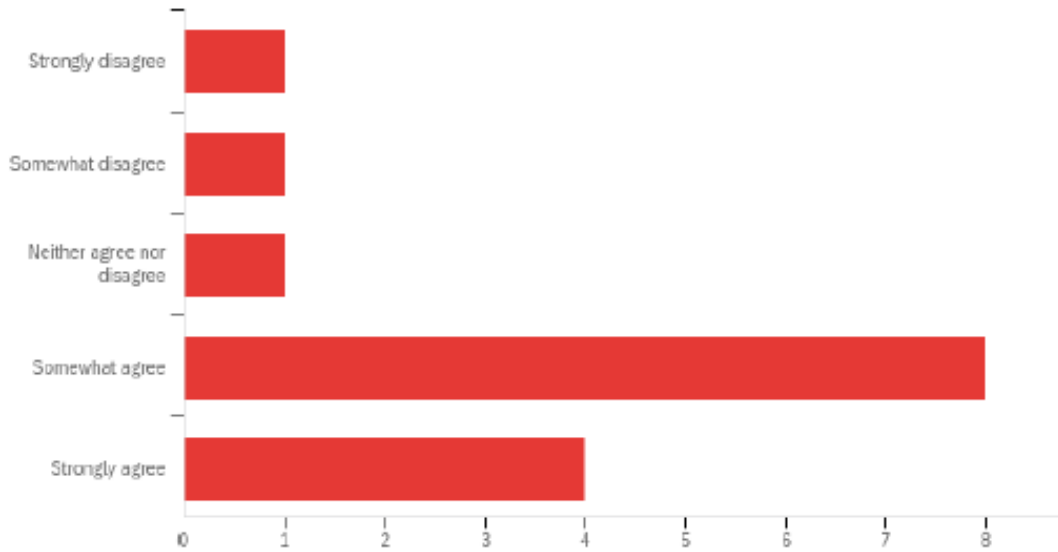


#	Field	Minimum	Maximum	Mean	Std Deviation	Variance	Count
1	I believe adding a peer-review component to the post-tenure review process would help to decrease bias and provide a well-rounded assessment.	1.00	5.00	2.80	1.33	1.76	15

#	Answer	%	Count
1	Strongly disagree	20.00%	3
2	Somewhat disagree	20.00%	3
3	Neither agree nor disagree	40.00%	6
4	Somewhat agree	0.00%	0
5	Strongly agree	20.00%	3
	Total	100%	15



Q7 - I feel the post-tenure review process is effective for promoting faculty excellence and accountability.



#	Field	Minimum	Maximum	Mean	Std Deviation	Variance	Count
1	I feel the post-tenure review process is effective for promoting faculty excellence and accountability.	1.00	5.00	3.87	1.09	1.18	15

#	Answer	%	Count
1	Strongly disagree	6.67%	1
2	Somewhat disagree	6.67%	1
3	Neither agree nor disagree	6.67%	1
4	Somewhat agree	53.33%	8
5	Strongly agree	26.67%	4
	Total	100%	15



Q8 - What did you find most valuable about the post-tenure review process?

What did you find most valuable about the post-tenure review process?

That I was able to present a record of my post-tenure work for five years.

The PTR workshop that was provided to explain the process in detail and what to expect.

Ensuring fairness in the post-tenure review process is essential for maintaining trust and academic integrity.

That there was full clarity provided by the Provost team every step of the way!

I think the post-tenure review process sends a good message to the administrators that faculty at all levels and longevity needs continuous support from the administration in order to fulfill our roles.

The feedback I received from the review committee was constructive and helpful.

Gave me a good chance to update my CV.

Communication from the provost office was clear

Opportunity to demonstrate faculty hard work and consistent commitment to University

Providing the rebuttal to the dean's comments

Review of work by others

Dr Perry helpfulness



Q9 - What suggestions do you have for improvement?

What suggestions do you have for improvement?

The Candidate should get the Provost's post-tenure review final rating and the names of the Committee members.

Let cohorts know early when they are up for PTR so they can start preparing materials early.

Please note that more time is needed after notification of the review process commencing date.

At the department level, criteria should be made available to the faculty undergoing PTE. The criteria should be developed by the unit faculty and be clearly visible to the faculty members from the time they're hired as an assistant professor.

Follow up on incentivizing faculty who work hard despite lack of support. For example, certain percentage increase in base salary for those who "exceed expectations" would go a long way to fulfill the motto of "excellence with caring".

I have no suggestions for improvement.

AORs, as signed by the faculty and Chair, should be available online. These are a pain to retrieve and the AOR online does not match what was signed by the faculty.

Review by supervisor instead of dean if dean is not immediate supervisor

Provide additional information regarding types of artifacts to use for demonstration of teaching, service, and research. Provision of criteria for minimum for the levels of expectation to increase clarity; agree with adding peer review aspect; provide additional instruction to supervisors and Deans for what and when to discuss faculty issues ...if not discussed in annual evaluations and appraisals then first time should not be during this process.

Set firm deadlines and stick with them.

NA

Clearly indicated time line well in advance



Q10 - Were there any aspects of the review process that caused you difficulty?

Were there any aspects of the review process that caused you difficulty?

The failure of the institutional actors (provost) to meet the published deadlines.

As always, the time crunch... but allowing the option to make an appeal for next cycle does help.

The sometimes difficulty or accessibility into the Interfolio Portal to submit or review materials.

Those who are going up for P&T should have an automatic pass in this process

Lack of clarity on PTE criteria. If expectations are clearly defined, faculty can be better positioned to fulfill and surpass them.

Some department chairs and deans interpreted the process differently from the Provost's Office, particularly what to include in the portfolio.

Some aspects were difficult, but not all.

Not particularly.

Being reviewed by a dean that is not familiar with my work because he is not my supervisor

Short timeline during busy semester.

No

None

Tech



APPENDIX D: BOG REGULATION 10.003, POST-TENURE FACULTY REVIEW

The chart below documents the University’s compliance with the various requirements of BOG Regulation 10.003, Post-Tenure Faculty Review.

Regulation	Regulation Requirements	Link/Source Verifying Where Requirement has been Met
	Policies and Procedures	
10.003(1)	1. Obtain policies requiring each tenured state university faculty member to undergo a comprehensive post-tenure review.	Post-Tenure Review Process and Summary of Procedures Page 2 under Preamble
	2. Assess whether the policy addresses the following areas:	
10.003 (1)(a)	a. Procedures to ensure high standards of quality and productivity among the tenured faculty in the State University System	Post-Tenure Review Process and Summary of Procedures Page 2 under Preamble
10.003 (1)(b)	b. Procedures to determine whether a faculty member is meeting the responsibilities and expectations associated with assigned duties in research, teaching, and service, including compliance with state laws, Board of Governors’ regulations, and university regulations and policies.	Post-Tenure Review Process and Summary of Procedures Page 2 under Preamble
10.003 (1)(c)	c. Procedures to recognize and honor exceptional achievement and provide an incentive for retention as appropriate.	Post-Tenure Review Process and Summary of Procedures Page 2 under Preamble
10.003 (1)(d)	d. Refocus academic and professional efforts and take appropriate employment action when appropriate.	Post-Tenure Review Process and Summary of Procedures Page 2 under Preamble
10.003 (2)(a)	3. Assess whether the policy requires each tenured faculty member shall have a comprehensive post-tenure review of five years of performance in the fifth year following the last promotion or the last comprehensive review, whichever is later.	Post-Tenure Review Process and Summary of Procedures Page 2 under Process
10.003 (2)(c)	4. Assess whether the policies and regulations adopted by the boards of trustees include exceptions to the timing of the comprehensive post-tenure review for extenuating, unforeseen circumstances.	Post-Tenure Review Process and Summary of Procedures Page 3; subsection c
10.003 (2)(c)	5. If the policies and regulations adopted by the boards of trustees include exceptions, were the exceptions disclosed in the chief academic officer’s report to the university’s president and board of trustees on the outcomes of the comprehensive post-tenure review.	Post-Tenure Review Process and Summary of Procedures Page 3; subsection c



<p>10.003 (3)</p>	<p>6. Assess whether the policies include review requirements that include:</p> <ul style="list-style-type: none"> a. The level of accomplishment and productivity relative to the faculty member’s assigned duties in research, teaching, and service, including extension, clinical, and administrative assignments. The university specified the guiding documents. Such documents include quantifiable university, college, and department criteria for tenure, promotion, and merit as appropriate. b. The faculty member’s history of professional conduct and performance of academic responsibilities to the university and its students. c. The faculty member’s non-compliance with state law, Board of Governors’ regulations, and university regulations and policies. d. Unapproved absences from teaching assigned courses. e. Substantiated student complaints. f. Other relevant measures of faculty conduct as appropriate. 	<p>Post-Tenure Review Process and Summary of Procedures Page 3-4</p>
<p>10.003 (4)(a)</p>	<p>7. Assess whether the polices require involvement of the faculty member, department chair, dean, chief academic officer, and president as required by the regulation.</p>	<p>Post-Tenure Review Process and Summary of Procedures Page 4-5 beginning with Review Procedure</p>
<p>10.003 (4)(f) and (i)</p>	<p>8. Assess whether the polices and regulations require that faculty are evaluated using the following standards:</p> <ul style="list-style-type: none"> a. 1. Exceeds expectations: a clear and significant level of accomplishment beyond the average performance of faculty across the faculty member’s discipline and unit. b. 2. Meets expectations: expected level of accomplishment compared to faculty across the faculty member’s discipline and unit. c. 3. Does not meet expectations: performance falls below the normal range of annual variation in performance compared to faculty across the faculty member’s discipline and unit but is capable of improvement. d. 4. Unsatisfactory: failure to meet expectations that reflect disregard or failure to follow previous advice or other efforts to provide correction or assistance, or performance involves incompetence or misconduct as defined in applicable university regulations and policies. 	<p>Post-Tenure Review Process and Summary of Procedures Page 5 subsection (f)(i-iv)</p>



10.003 (5)(a)	9. Assess whether the University regulations and policies regarding outcomes of the comprehensive post-tenure review process included recognition and compensation considerations and consequences for underperformance	Post-Tenure Review Process and Summary of Procedures Page 6
10.003 (6)(a)	10. Assess whether the policies and procedures require the chief academic officer to report annually to the university president and board of trustees on the outcomes of the comprehensive post-tenure review process consistent with section 1012.91, Florida Statutes (Personnel records)	Post-Tenure Review Process and Summary of Procedures Page 7
10.003 (7)	11. Assess whether polices and procedures require that the University not enter into any collective bargaining agreement that conflicts with this regulation.	Post-Tenure Review Process and Summary of Procedures Page 8
	12. Obtain an understanding of the systems and processes in place to capture data to ensure compliance with the Reg 10.003.	The Interfolio document management platform and a spreadsheet are used to track the status of each faculty’s review. https://www.interfolio.com/
	Timing and Eligibility	
10.003 (2)(a)	1. Obtain a listing of faculty members for a specific period. Listing should identify for each faculty member tenured/non-tenure, administrative roles, hire date, date of last promotion, performance evaluation dates, ratings in performance evaluation, performance improvement plan dates, notice of termination date.	While all of the faculty information was available, information regarding the hire date, last promotion, evaluation dates and ratings for many faculty members had to be manually pulled from other resources. The Office of the Provost plans to implement an automated system to capture this information in the future.
10.003 (2)(a)(1)	2. Determine if 20% of tenured faculty were evaluated during the period March 25, 2023 – March 24, 2024 (first year).	Post-Tenure Review Detailed Procedures Page 2 Section (A)(3)
10.003 (2)(a)(1)	3. Determine if each faculty in the fifth year of tenure was evaluated during the period March 25, 2023 – March 24, 2024 (first year).	Post-Tenure Review Process and Summary of Procedures Page 2 Section (1)(a)(i)
10.003 (2)(a)(2)	4. In each subsequent year, year-two, through year-five determine if 20% of tenured faculty who have not received a comprehensive review were evaluated in addition to faculty who are in the fifth year.	Post-Tenure Review Process and Summary of Procedures Page 2 Section (1)(a)(ii)
10.003 (2)(a)(3)	5. In year 6 determine that each tenured faculty member has a comprehensive post-tenure review of five	Post-Tenure Review Process and Summary of Procedures Page 3 Section (1)(a)(iii)



	years following their last promotion or their last comprehensive review, whichever is later.	
10.003 (2)(b)	6. Determine if tenured faculty in administrative roles, such as department chairs or directors, are evaluated annually by the appropriate college dean based on criteria established by the university	Post-Tenure Review Process and Summary of Procedures Page 3 Section (1)(b)
10.003 (2)(b)	7. Determine if tenured faculty in administrative roles evaluations include: <ul style="list-style-type: none"> a. a review of performance based on all assigned duties and responsibilities and professional conduct. b. performance of academic responsibilities to the university and its students; c. non-compliance with state law, Board of Governors’ regulations, and university regulations and d. policies; and substantiated student complaints. 	Post-Tenure Review Process and Summary of Procedures Page 3 Section (1)(b)
	Review Requirements	
10.003 (3)(a)	1. Determine if the comprehensive post-tenure review include the following: <ul style="list-style-type: none"> a. The level of accomplishment and productivity relative to the faculty member’s assigned duties in research, teaching, and service, including extension, clinical, and administrative assignments. The university specified the guiding documents. Such documents include quantifiable university, college, and department criteria for tenure, promotion, and merit as appropriate. b. The faculty member’s history of professional conduct and performance of academic responsibilities to the university and its students. c. The faculty member’s non-compliance with state law, Board of Governors’ regulations, and university regulations and policies. d. Unapproved absences from teaching assigned courses. e. Substantiated student complaints. f. Other relevant measures of faculty conduct as appropriate. 	Post-Tenure Review Process and Summary of Procedures Page 3-4 Section (2)(a)
	2. Review a sample of faculty dossiers, department chair and college dean assessments, and chief academic officer ratings to assess the inclusion of required elements such as performance in research, teaching, service,	Faculty dossiers, department chair/ college dean assessments, and chief academic officer ratings include required elements such as



	professional conduct, compliance with laws and regulations, unapproved absences, and student complaints.	performance in research, teaching, service, professional conduct, compliance with laws and regulations, unapproved absences, and student complaints.
10.003 (3)(b)	3. Determine if the review inappropriately considered the faculty members' political or ideological viewpoints.	None of the dossiers reviewed showed that the faculty members' political or ideological viewpoints were inappropriately considered.
	Process Requirements	
10.003 (4)	1. Determine if the policies and procedures require that the process as documented in 10.003 (4) is completed including use of rating system.	Post-Tenure Review Process and Summary of Procedures Page 5 Section (3)(f) Post-Tenure Review Detailed Procedures Page 7 Section (3)(b)
	2. Review a sample of faculty for steps 3 - 13	
10.003 (4)(a)	3. Determine if the faculty member completed the required dossier and submit the dossier to the appropriate department chair.	Required dossiers were completed and submitted to the appropriate department chair.
10.003 (4)(b)	4. Determine if there is evidence of the faculty member's department chair reviewed the completed dossier, the faculty member's personnel file, and other records related to professional conduct, academic responsibilities, and performance.	Evidence exists that the department chairs reviewed each faculty members' completed dossier, personnel file, and other records related to professional conduct, academic responsibilities, and performance.
10.003 (4)(c)	5. Determine if the chair added to the following items to the dossier a. Additional records related to professional conduct, academic responsibilities, and performance concerns. b. A letter assessing the level of achievement and certification that the letter includes, if applicable, any concerns regarding professional conduct, academic responsibilities, and performance during the period under review.	Department Chairs added additional records, and a letter assessing level of achievement.
10.003 (4)(d)	6. Determine if the faculty member's department chair forwarded the dossier, including all records and the chair's letter, to the appropriate college dean for review	The deans forwarded the dossiers, including all records, to the chief academic officer.
10.003 (4)(e)	7. Determine if the dean of the college reviewed all materials provided by the faculty member's department chair.	The deans reviewed all materials provided by the faculty member's department chair.



<p>10.003 (4)(f)</p>	<p>8. Determine if the dean of the college added to the dossier a brief letter assessing the level of achievement during the period under review. Does the letter include:</p> <ul style="list-style-type: none"> a. any concerns regarding professional conduct, academic responsibilities, and performance. b. the dean’s recommended performance rating using the following scale. <ul style="list-style-type: none"> i.Exceeds expectations: a clear and significant level of accomplishment beyond the average performance of faculty across the faculty member’s discipline and unit. ii.Meets expectations: expected level of accomplishment compared to faculty across the faculty member’s discipline and unit. iii.Does not meet expectations: performance falls below the normal range of annual variation in performance compared to faculty across the faculty member’s discipline and unit but is capable of improvement. iv.Unsatisfactory: failure to meet expectations that reflect disregard or failure to follow previous advice or other efforts to provide correction or assistance, or performance involves incompetence or misconduct as defined in applicable university regulations and policies. 	<p>The deans added letters assessing concerns of conduct, and recommended ratings.</p>
<p>10.003 (4)(g)</p>	<p>9. Determine if the dean of the college forwarded the dossier to the chief academic officer for review</p>	<p>The deans forwarded the dossiers to the chief academic officer.</p>
<p>10.003 (4)(h)</p>	<p>10. Determine if the chief academic officer reviewed the dossier provided by the dean of the college.</p>	<p>The chief academic officer reviewed the dossiers provided by the dean.</p>
<p>10.003 (4)(i)</p>	<p>11. Determine if the chief academic officer rated the faculty member’s professional conduct, academic responsibilities, and performance during the review period with guidance and oversight from the university president.</p>	<p>The chief academic officer rated the faculty members’ professional conduct, academic responsibilities, and performance during the review period with guidance and oversight from the university president.</p>
<p>10.003 (4)(i)</p>	<p>12. Determine if the chief academic officer rated each faculty member with rating of Exceeds expectations, Meets expectations, Does not meet expectations, or Unsatisfactory.</p>	<p>The chief academic officer rated the faculty members with ratings of “Exceeds expectations,” “Meets expectations,” “Does not meet expectations,” or “Unsatisfactory.”</p>



10.003 (4)(j)	13. Determine if the chief academic officer notified the faculty member, the faculty member’s department chair, and the appropriate college dean of the outcome.	The chief academic officer notified the faculty members, the faculty members’ department chairs, and the appropriate college deans of the outcomes.
	Outcomes	
	1. Review a sample of faculty for steps 2 - 6	
10.003 (5)(b)	2. Determine if each employee who received a final performance rating of “exceeds expectations” or “meets expectations” the appropriate college dean, in consultation with the faculty member’s department chair, recommended to the chief academic officer appropriate recognition and/or compensation in accordance with the faculty member’s performance and university regulations and policies.	Faculty members who received <i>Exceeds or Meets Expectations</i> were recommended to receive appropriate compensation in accordance with University regulations and policies.
10.003 (5)(c)	3. Determine that for each faculty member who receives a final performance rating of “does not meet expectations,” the appropriate college dean, in consultation with the faculty member’s department chair, proposed a performance improvement plan to the chief academic officer.	Faculty members who received “Does Not Meet Expectations” received a proposed Performance Improvement Plan.
10.003 (5)(c)	4. Determine if: a. The plan must include a deadline for the faculty member to achieve the requirements of the performance improvement plan. b. The deadline does not extend more than 12 months past the date the faculty member receives the improvement plan. c. The chief academic officer made final decisions regarding the requirements of each performance improvement plan. d. Each faculty member who failed to meet the requirements of a performance improvement plan by the established deadline received a notice of termination from the chief academic officer.	The Performance Improvement Plans included a deadline, did not exceed 12 months, and received approval from chief academic officer.
10.003 (5)(d)	5. Determine that each faculty member who received a final performance rating of “unsatisfactory” received a notice of termination from the chief academic officer.	Not applicable as no faculty members received an “Unsatisfactory” rating.
10.003 (5)(e)	6. Determine if the policies and procedures allow for the appeal of final decisions regarding post-tenure review under university regulations or collective bargaining agreements.	PTR policies and procedures allow for the appeal of final decisions under university regulations and collective bargaining agreements.



Monitoring		
10.003 (6)(a)	1. Determine if the chief academic officer reported annually to the university president and board of trustees on the outcomes of the comprehensive post-tenure review process consistent with section 1012.91, Florida Statutes (Personnel records)	Not applicable since this is the first PTR since its implementation in 2023.
10.003 (6)(a)(1)	2. Determine if an audit was conducted by the university's chief audit executive or by an independent, third-party auditor ("auditor"), as determined by the chair of the university's board of trustees by January 1, 2024 and continuing every three years thereafter.	FAMU's Division of Audit performed an audit of the PTR process. The audit began on February 19, 2024 and concluded on May 30, 2024.
10.003 (6)(a)(1)	3. Determine if the final audit report was submitted to the university's board of Trustees.	In progress
10.003 (6)(a)(1)	4. Determine if the final audit report included a. The number of tenured faculty in each of the four performance rating categories as defined in (4)(f). b. The university's response in cases of each category. c. Findings of non-compliance with applicable state laws, Board of Governors' regulations, and university regulations and policies.	Yes. See page 8 of 33 in this report.
10.003 (6)(a)(2)	5. Determine if the university board of trustees considered the audit report at the next regularly scheduled board of trustees meeting after the report's publication date	In progress
10.003 (6)(a)(2)a	6. Determine if the chief academic officer or the auditor presented the audit report to the board of trustees. The board of trustees did not adopt the report as a consent agenda item	Not applicable since this is the first PTR since its implementation in 2023.
	7. If the audit report shows compliance, determine that a copy of the adopted audit report was provided to the Board of Governors consistent with Regulation 1.001(6)(g)	Not applicable since this is the first PTR since its implementation in 2023.
	8. If the audit report does not show compliance, determine that the auditor presented the report to the Board of Governors at its next regularly scheduled meeting.	Not applicable. No non-compliant events were found.
Other		
10.003 (7)	1. Determine if the University entered into any collective bargaining agreement following the effective date (March 24, 2023) of this regulation,	Post Tenure Review Detailed Procedures Page 10



	a. Determine if the collective bargaining agreement conflicts with this regulation.	
10.003 (8)	2. Assess whether any additional evaluation processes, criteria, or standards entered into meets or exceeds the requirements outlined in section 1001.706(6)(b), Florida Statutes, and this regulation.	The University's Annual Faculty Evaluation form appears effectively meet the requirements outlined in section 1001.706(6)(b), Florida Statutes, and this regulation.



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STATEMENT OF ACCORDANCE

The Division of Audit’s mission is to provide independent, objective assurance and consulting services designed to add value and improve the University’s operations. It helps the University accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control, and governance processes.

We conducted this assurance service in accordance with the International Standards for the Professional Practice of Internal Auditing. Those standards require we plan and perform the assurance services to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our engagement objectives. We believe the evidence obtained provides a reasonable basis for our conclusions based on our objectives.

Please address inquiries regarding this report to the Division of Audit at (850) 412-5479.

<https://www.famu.edu/administration/audit/index.php>



FAMU

FLORIDA A&M UNIVERSITY
**OFFICE OF COMPLIANCE
AND ETHICS**



Annual Report

2024



Annual Report

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- Organizational Chart and Progress
- The Compliance Chronicles (August 2024)
- ACTION ITEM: Annual Report and Program Plan
- ACTION ITEM: University Regulation 5.005

Performance at a Glance

Rica Calhoun, Chief Compliance and Ethics Officer

The past year has been marked by significant progress and steadfast commitment for compliance and ethics throughout our institution. Our unwavering dedication to fostering a transparent and ethical environment has enabled the FAMU community to flourish amidst a landscape of evolving challenges.

This report encapsulates the diverse and impactful initiatives spearheaded by the Office of Compliance and Ethics, Equal Opportunity Programs, and Athletics Compliance, in close collaboration with University stakeholders. Our mission remains centered on supporting a culture that prioritizes ethical decision-making, adherence to regulatory requirements, and the continuous refinement of policies and procedures. We are proud to present the achievements, challenges, and forward-looking initiatives that have propelled the growth and success of FAMU. Our team's relentless efforts have been pivotal in promoting a culture of accountability and integrity.

In this report, you will discover comprehensive insights into our focal areas, the tangible impact of our work, and our strategic plans for the future. We highlight the stakeholder synergies that have advanced our compliance and ethics program and acknowledge the contributions of compliance partners who have been integral to our success.

Reflecting on the accomplishments of the past year, we also look forward with optimism and determination as our compliance and ethics program matures. Our collective resolve to uphold these principles continues to elevate the reputation and achievements of our University.

The unwavering support, engagement, and dedication of the entire University community remain the cornerstone of our shared mission. Together, we strive to cultivate a culture of compliance, ethics, and accountability that exemplifies excellence in higher education.

We invite you to delve into this report and gain a deeper understanding of the critical work undertaken by the Office of Compliance and Ethics at FAMU.

Looking back at 2023-2024

High Risk Monitoring

Compliance and Ethics Week

External Review Follow Up

FAMU Fundamentals

Outreach

Enterprise Compliance Committee

Collaboration

Conflict of Interest

Policy Review and Revision

Foreign Interest

Compliance and Ethics Hotline

FAMU Fundamentals



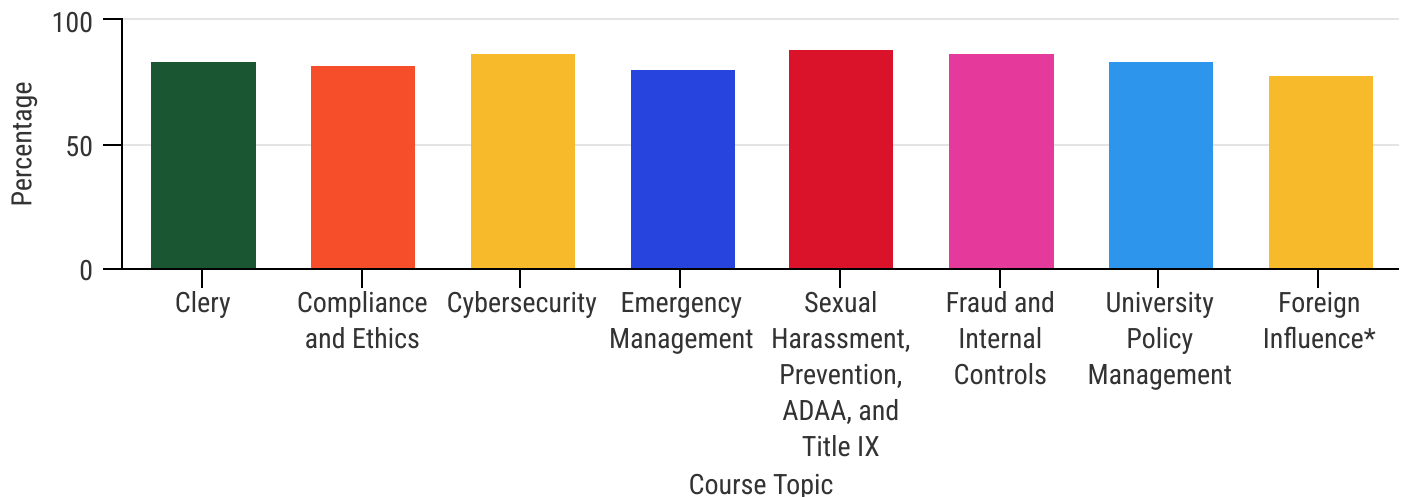
One of the core components of an effective compliance and ethics program is training and education. Members of the University community must understand University expectations and the bases for those expectations. FAMU Fundamentals is mandatory for University employees and select student employees.

In our fifth year, FAMU Fundamentals was composed of seven modules, with an eighth module specifically for research and research positions:

1. Compliance and Ethics: Cornerstone Topics;
2. Clery Awareness;
3. Rights, Respect, and Responsibilities with Equal Opportunity Programs
4. Fraud and Internal Controls Awareness;
5. Cybersecurity Awareness;
6. Emergency Management: Empowerment through Emergency Preparedness,
7. Guiding Principles in the Art of Policy Management; and,
8. Foreign Influence Primer **(Researchers and Research Support Positions ONLY)

Communication began in November 2023, with the start of "Compliance and Ethics Week." The training was administered from March 1-31, 2024. Users also received a Resource Library with the University Code of Conduct and links to all policies referenced in the training. This year, completion percentages increased stayed fairly consistent with 2023, with an average 85% completion for the initial period. This year, we implemented new accountability measures that resulted in notices of non-compliance. This has allowed us to hold stakeholders accountable while working with them to complete their training. We continue to evolve and improve the training and have already received feedback for FAMU Fundamentals 2025.

FAMU Fundamentals 2024



University Community Insights



Post-Training Survey

This year, we continued to focus on soliciting feedback from members of the University community about compliance and ethics and mandatory training. We administered the "FAMU Fundamentals Post-Training Survey" (March 2024) to help us understand what was working and where we had opportunities for improvement for 2025.

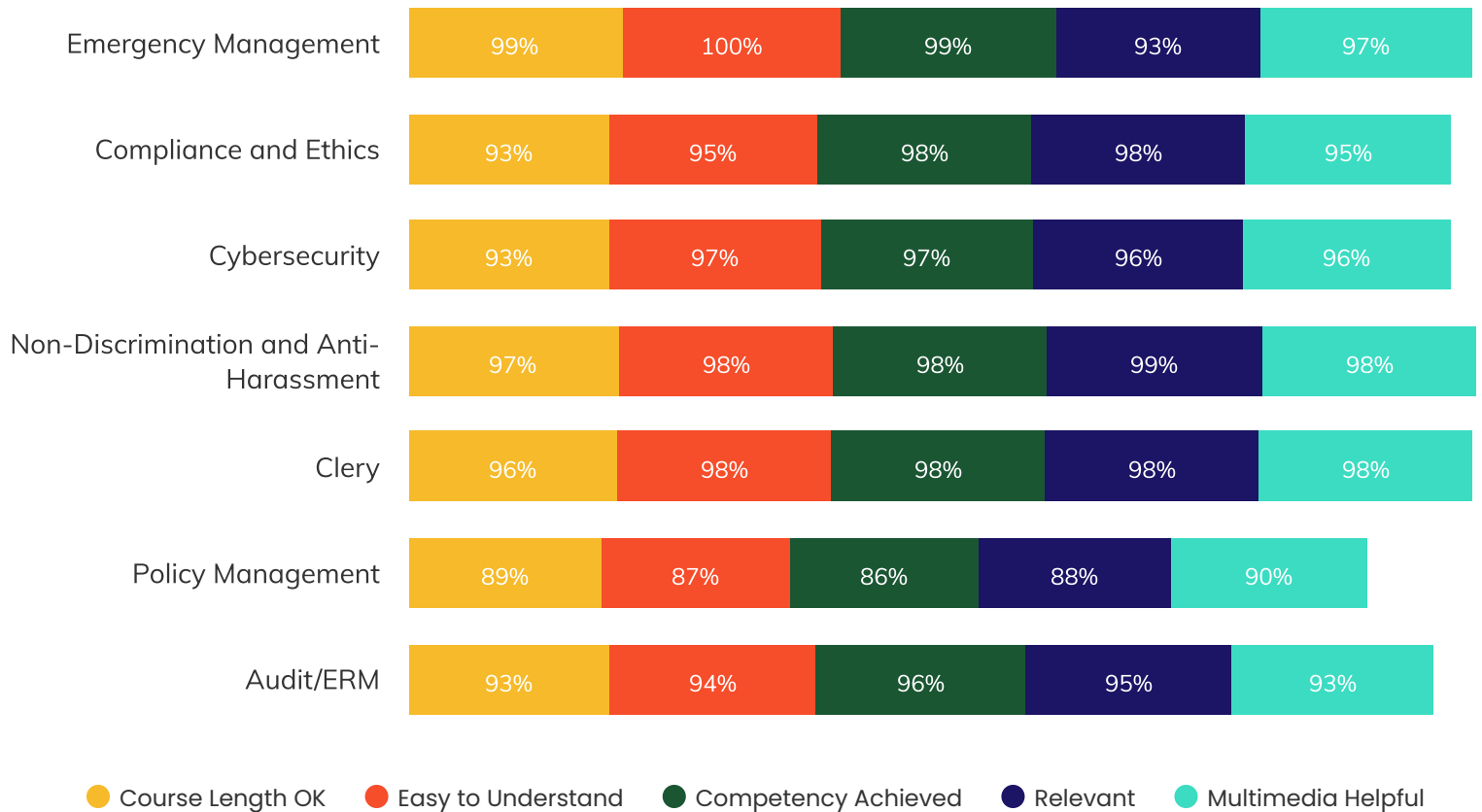
Our goal with each administration of FAMU Fundamentals is to evolve with the needs of University employees. Feedback from participants and compliance partners has helped us keep a pulse on what training topics to cover and how we can best present the information.

The post-training feedback survey results indicate that the course received positive feedback from a significant majority of respondents. The following key points were highlighted by the participants:

- **Course Length:** A majority of respondents found the course duration to be appropriate, suggesting that it neither felt too lengthy nor too rushed.
- **Ease of Understanding:** Participants reported that the course content was presented in a clear and comprehensible manner, making it accessible to a wide range of learners.
- **Competency:** The majority of respondents felt that the course effectively enhanced their knowledge and skills in the subject matter.
- **Relevance:** Survey participants noted that the course content was relevant to their roles and responsibilities, which likely contributed to its overall effectiveness.
- **Multimedia:** The incorporation of multimedia elements, such as videos, presentations, or interactive components, was positively received by a significant portion of respondents, enhancing their learning experience.

Post-Training Survey Observations

Course Specific Feedback (participant response of 'yes' to questions in legend below)



Enhancement Strategies for 2025



Manager Support

Additional guidance for managers to facilitate training in their units



Accountability

Accountability measures through performance platforms and access restrictions



Employee Support

Increased outreach for feedback and support for constituencies that have access challenges



Incentives

Recognition and incentives throughout training period

Compliance and Ethics Week 2023

FAMU FLORIDA A&M UNIVERSITY
**OFFICE OF COMPLIANCE
AND ETHICS**

**PROUD
FAMULY**

2023
Compliance and Ethics Week
Events and Info

November 6
1-2pm

**A PROUD FAMILY
LUNCH**

Efferson Student
Union Multipurpose
Room B

November 7
1-2pm

**PROUD FAMILY
BINGO**

November 8
1-2 pm

**WE ARE FAMILY:
OCE WORKSHOP**

Efferson Student Union
Multipurpose Room B
or [Zoom](#)

**RESOURCE
HUB**



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



**Expanded website
located HERE**

Proud FAMUly!

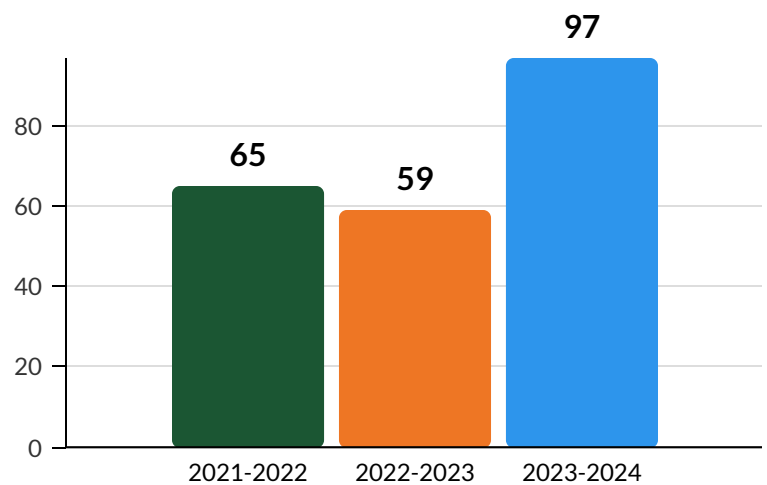
OCE hosts FAMU's annual Compliance and Ethics Week every November. In 2023, our theme, "Proud FAMUly," focused on the shared responsibility for the success of the compliance and ethics program at the University. We focused on enhancing awareness and engagement across campuses. The week featured hybrid workshops on ethical decision-making and reducing compliance burdens, along with panel discussions where our key offices answered questions from participants. We embraced programming across Compliance and Ethics units, including interactive sessions like "Consent Karaoke" for Title IX and the Victim's Advocate Office and engaging games such as Compliance Bingo and Jeopardy, which emphasized compliance principles in a fun way. The week was marked by active participation and a strengthened culture of ethics and compliance within the University community. OCE continues to provide stakeholders receive an electronic copy of the University's Code of Conduct and the OCE Welcome Packet.

Investigations (EthicsPoint)



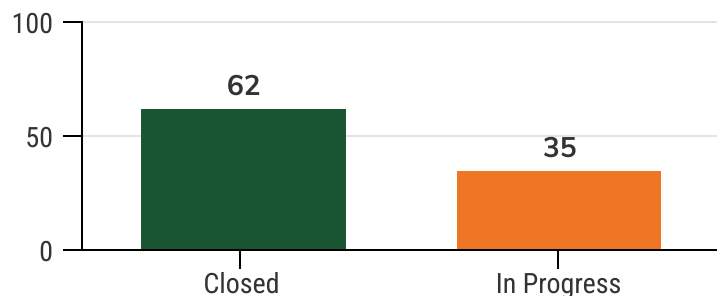
Investigations constitute another piece of the compliance structure, providing reinforcement of University expectations and accountability. The enhanced Compliance and Ethics Hotline allows us to examine trends from complaints received. OCE also coordinates meetings of the Triage Team, which includes core members from the Office of Equal Opportunity Programs, and the Division of Audit. Subject matter experts from other offices are consulted, as needed. The Triage Team meets regularly to discuss reports, investigations, and referrals to ensure that we are appropriately addressing concerns. In 2023-2024, we received 97 reports. The majority of complaints were unsubstantiated, but did result in process recommendations or referrals, which indicates that reporting avenues are readily accessible and used. It also corresponds with our previous survey feedback that participants were knowledgeable about where to report their concerns and felt comfortable reporting.

Currently, 62 cases are closed and 35 cases are in progress.



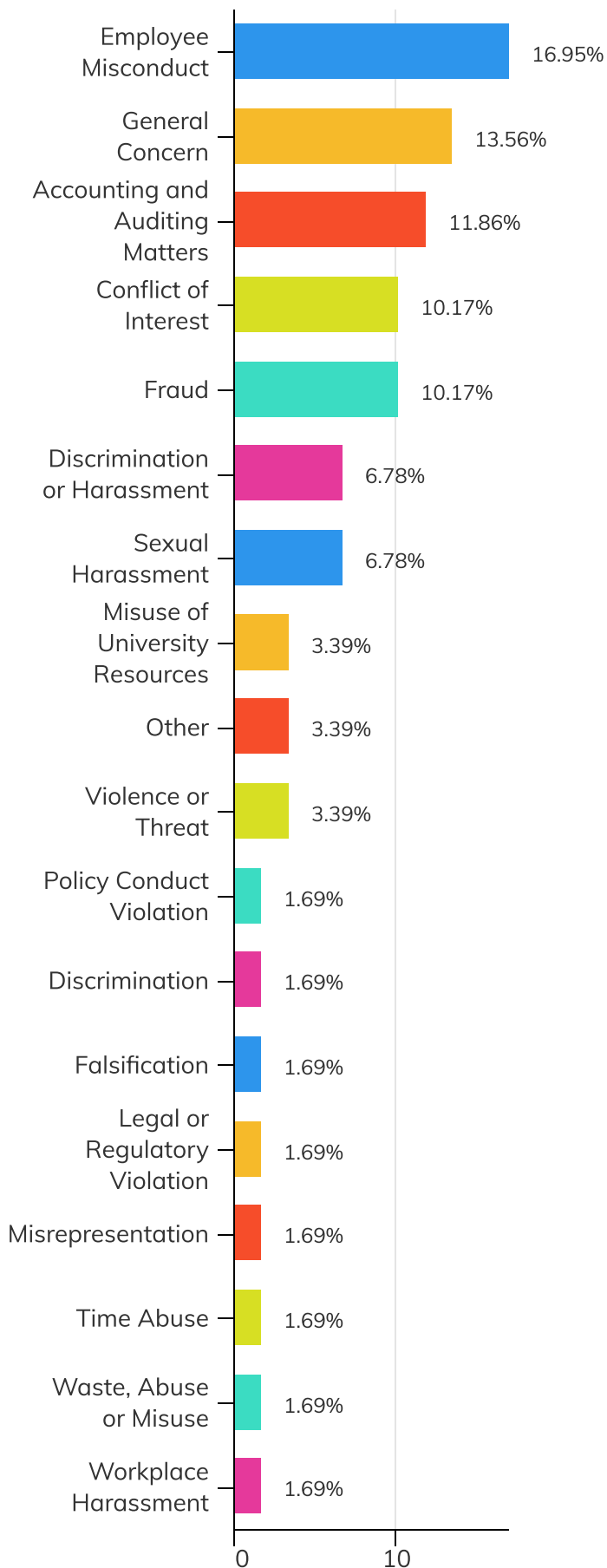
Complaints Received

2023-2024 Complaint Status

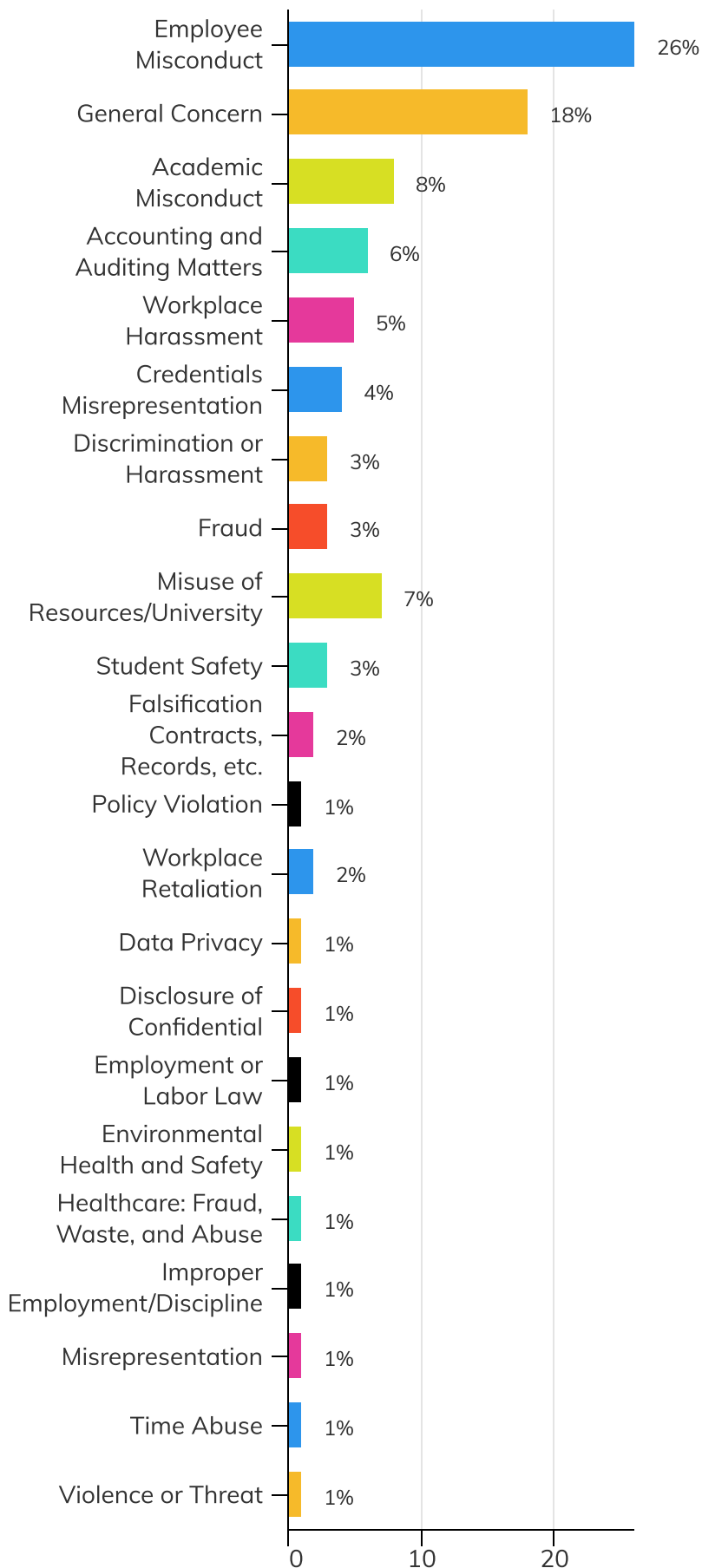


Investigations: Issue Comparison

Issue Types 2022-2023



Issue Types 2023-2024



Investigations: Trends



There is some consistency in the common issues reported to enforcement offices* between 2022-2023 and 2023-2024. The top issues include:

- Employee Misconduct
- General Concerns (Personnel relations, student processes, etc.)
- Accounting and Auditing
- Discrimination and Harassment

These issues will be areas of focus in the coming year as we work with compliance partners to examine policies, processes, and regulatory requirements. We continue to provide trainings and increased communication educating members of the University community about reporting and the investigative process.

Based on our review, the number of anonymous complaints we have received has stayed fairly consistent from 2022-2023. We continue enhancing the use of analytics to inform our training and monitoring efforts throughout the University.



27%

of reports received
were anonymous in
2022-2023



26%

of reports received
were anonymous in
2023-2024

* Office of Compliance and Ethics; Equal Opportunity Programs, and the Division of Audit; and the Office of Human Resources

Ongoing Compliance Work in Research

Over the past year, OCE has supported the University's efforts in upholding high standards of research integrity and compliance. In the dynamic landscape of academia and research, OCE works with compliance partners, like the Divisions of Research and Academic Affairs to ensure that research activities conducted under FAMU's purview adhere to legal, regulatory, and ethical frameworks. In 2023-2024, OCE continues supporting this compliance area through monitoring of the Foreign Influence screening, travel, and gift processes; automation and process streamlining for data collection, and grant compliance. Some key highlights of our compliance efforts in research for this period include:



Compliance Review:
Tech Transfer and
Export Control



Policy : Enterprise
Compliance
Committee
Working Group
collaborating on
policy
development



Compliance Review:
Foreign Influence
Screening Process



Foreign Gift
Reporting to BOG
(July and January);
Coordinated with
the Office of
Financial Aid and
other compliance
partners to report
foreign gifts to the
US Department of
Education (July
and January)



Training Support:
OCE coordinated
with the Office of
Research Integrity
and Animal Welfare
to develop resources
and materials for
Foreign Influence
Screening Process
training and
awareness.

Monitoring

Monitoring is a cornerstone of the internal control structure, to ensure that the policies and risk mitigation processes in place are actually working. In 2023-2024, high-risk monitoring was implemented through the OCE (including the Office of Athletics Compliance) and the Enterprise Compliance Committee's compliance partners. Areas monitored are below:

<p>ATHLETICS</p> <p>Coordination with the Associate Athletic Director of Compliance to monitor and address risk areas:</p> <p>Eligibility</p> <p>Academic Progress Rate</p> <p>NCAA Infractions Report Monitoring</p> <p>Athletics Action Plan</p> <p>Compliance External Review and Report</p>	<p>COMPLIANCE AND ETHICS HOTLINE</p> <p>Managing the compliance and ethics hotline for appropriate investigation or referral to triage partners</p>	<p>BOMB THREAT RESPONSE PLAN</p> <p>OCE supported the University Police and compliance partners to develop a draft University bomb threat plan; collaborated with local, state, and federal partners (CISA)</p>
<p>PRIVACY</p> <p>Began implementation of University Privacy Program that launched with the establishment of the Privacy Advisory Council, review and amendment of the University's Privacy notice, training and outreach opportunities.</p>	<p>RESEARCH</p> <p>Policy and process updates regarding foreign influence screening, travel, and gift reporting; clinical trial compliance review</p>	<p>FAMU DRS</p> <p>Monitored and supported FAMU DRS implementation of changing regulatory requirements in safety, emergency drills, and reporting.</p>
	<p>CAMPUS SAFETY</p> <p>Supports the Division of Student Affairs through the establishment of the Behavioral Threat Assessment Team to identify and mitigate acute behavioral concerns.</p>	<p>ENTERPRISE COMPLIANCE COMMITTEE</p> <p>Enterprise Compliance Committee Meetings: 2023-2024: August, November, February, and April</p> <p>Working Group Meetings scheduled by compliance partner chairs</p>

Compliance Reviews

Compliance Reviews are integral to assess our current processes, identify gaps, and ensure that policies and procedures are being followed. OCE assists compliance partners by providing resources to help them identify and mitigate risk in their areas. OCE also completes monitoring to provide additional support and guidance. This year, the Office of Compliance and Ethics conducted advisory services in the following areas:

Research: Export Control/Tech Transfer

Interdepartmental: Foreign Influence Travel Reporting

Compliance: Privacy Program

Athletics: Athletics Progress Rate (APR) review and external review

Research: Foreign Influence Screening

Research: Clinical Trials

Athletics: Athletics Plan

Interdepartmental: USDA Compliance Visit

Review: Private Spaces Legislation

Athletics: External Compliance Progress Report





FLORIDA A&M UNIVERSITY
**OFFICE OF COMPLIANCE
AND ETHICS**

THE COMPLIANCE CHRONICLES

FAMU's Compliance & Ethics
Quarterly Newsletter

AUGUST 2024

VOLUME TWO | ISSUE TWO

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Rica Calhoun

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COMPLIANCE & ETHICS

MESSAGE FROM THE CHIEF COMPLIANCE & ETHICS OFFICER, RICA CALHOUN

Greetings Rattlers,

As we release this edition of Compliance Chronicles, our University is undergoing a period of significant transition. Change, while challenging, also presents an opportunity for reflection and growth. During this time, one thing remains constant: our unwavering commitment to upholding the highest standards of compliance and ethics.

In this issue, we reaffirm our dedication to maintaining a culture of integrity that transcends organizational shifts. Compliance and ethics is not just a set of rules we follow; it is the foundation of trust that our University community is built upon. Compliance and ethics is not just important when it is convenient. It is important all of the time. Our mission to ensure that every member of our community adheres to these principles is as strong as ever.

This edition delves into key compliance areas that are critical during times of change, including privacy and data protection, which remain at the forefront of our efforts. As we steward sensitive information, our responsibility to safeguard the privacy of our students, faculty, and staff is paramount. We provide practical steps to reinforce your department's data privacy protocols in this issue.

Additionally, we continue to prioritize training and professional development, ensuring that all team members are equipped to navigate the evolving regulatory landscape. The resources and opportunities highlighted in this edition are designed to empower you to uphold our shared values, no matter what changes may come.

Finally, I am pleased to update you on our ongoing compliance risk assessment initiative. As we assess potential risks, your input is crucial in shaping a robust compliance framework that will guide us through this transitional period and beyond.

Thank you for your steadfast dedication to our university's values. Your commitment to ethical conduct and compliance remains the cornerstone of our community's strength. As we move forward together, let us continue to build a culture of compliance that not only meets regulatory requirements but also exemplifies our enduring commitment to excellence.

Warm regards,

Best,
Rica Calhoun



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866 445 4968



WEBSITE:
fam.u.edu/administration/compliance-and-ethics/



E-MAIL:
OCE@FAMU.EDU

Office of Compliance and Ethics

highlights

In this section of Compliance Chronicles, we share updates and highlights in each of our areas: The Office of Compliance and Ethics, Equal Opportunity Programs, and the Athletics Compliance office.

All offices attended the Office of Compliance and Ethics Retreat in July 2024 to “Build Bridges and Break Barriers.” The retreat was an opportunity to innovate and enhance our programs for 2024-2025!



La'Tonya Baker and Edna Gasque traveled to the SCCE Higher Education and Healthcare Research Compliance Conference to network and learn the best practices and compliance and research to bring back to FAMU.

Rica Calhoun is scheduled to take the Main Stage at the Ignite Emerging Leaders Conference to present on ethics for auditors in October 2024.



OCE's Summer 2024 Intern!

This summer we had the pleasure of working with Ms. Kenedy Williams, an intern from the Strike Forward CEE internship program. Kenedy continues Striking from the Top!



Office of Equal Opportunity Programs

highlights

EOP Interns

Aurea and Jeremiah were amazing editions to the EOP office as interns, Striking from the Top, per usual! They performed tasks such as research, data analysis, administrative duties, and assisted with special projects.



Montell Holmes, Dicye Baker, and Kimberly easier traveled to the Excel Conference to network and bring back best practices in investigations, monitoring, and accommodations.

Title IX Ambassador Program

The Ambassador Program has applied to become a University student organization, which will greatly expand the group's advocacy and outreach related to Title IX, prevention, and reporting.



ATHLETICS COMPLIANCE

highlights



Senior Associate Athletics Director for Compliance and Senior Woman Administrator, Brittney Johnson, spearheaded the NCAA AASP (Accelerating Academic Success Program) Grant and FAMU was awarded \$87k for the grant to assist with increasing our overall APR scores and other APR initiatives!

Tia Huie, one of our Athletics Compliance Coordinators, Tia was accepted to the Black Sports Business Academy which is a 14-week immersive learning experience for HBCU's. The participants will receive exposure in Liberated Development, Sports Industry Exposure and Community Building.



Congratulations to our newest full time Athletics Compliance Office team member, Alexis Davenport! She provides critical guidance and support to our prospective and incoming student athletes!

COMPLIANCE IN FOCUS

We can encounter compliance issues in many ways. A helpful practice to avoid becoming a headline is educating our campus community and providing a space where questions can be asked when unsure what to do.

This Compliance in Focus section provides real-life examples to create awareness, facilitate discussion, and avoid the headlines.

Information Security & Technology Events

Jul 19: Outage

A global technology outage caused by a faulty software update grounded flights, knocked media outlets offline, and disrupted hospitals, small businesses and government offices on Friday, highlighting the fragility of a digitized world dependent on just a handful of providers. The trouble with the update issued by cybersecurity firm CrowdStrike affected customers running Microsoft Windows. It was not the result of hacking or a cyberattack, according to CrowdStrike, which apologized and said a fix was on the way. Businesses and governments experienced hours-long disruptions and scrambled to deal with the fallout. ([link](#))

Jul 01: Cybersecurity

A vulnerability in the MOVEit file transfer tool is again raising alarms, with Progress Software urging customers to patch the "critical" issue" as hackers reportedly increase attempts to exploit the bug. Progress Software released an initial advisory on Tuesday about CVE-2024-5806 -- a new vulnerability that has alarmed experts because of its resemblance to another issue last year which was exploited to carry out one of the largest data theft campaigns on record. The company released a patch on June 11 and has been working with customers to resolve the issue since then. ([link](#))

Fraud & Ethics Related Events

Jul 01: Scholarship Fraud

A Reddit post unraveled a web of lies by a student at Lehigh University in Bethlehem, Pennsylvania. As it turns out, his entire application was made up. [The student], 19, pleaded guilty earlier this month in Northampton County. Lehigh had given [the student] a full scholarship to attend the school from his native India. [He] had been enrolled, but a Reddit moderator flagged one of his posts. It was blatantly titled: "I have built my life and career on lies." The post went on to describe how [he] falsified transcripts, financial statements and even provided a fraudulent death certificate for his father, who is actually alive. In a statement, Lehigh University said it "Appreciates the report to its ethics hotline and the diligent investigation by the Lehigh University Police Department that led to [the student]'s arrest." ([link](#))

COMPLIANCE
STARTS WITH
YOU.



COMPLIANCE IN FOCUS

continued



Jul 01: Research Fraud

A neuroscientist whose work helped pave the way for an Alzheimer's drug candidate was indicted by a federal grand jury on Thursday on charges of fraud. The indictment, announced Friday by the Justice Department, brings additional scrutiny to the work of [the scientist], who has had multiple studies retracted and faced an investigation by the City University of New York, his employer, that was later halted. The indictment charges him with one count of fraud against the United States, two counts of wire fraud and one count of false statements. It accuses [the scientist] of manipulating or adding to images of Western blots, a laboratory method that researchers use to identify proteins, in order to bolster evidence and help secure grants. ([link](#))

Jul 10: Occupational Fraud

Authorities allege that a doctor who lives on Staten Island illegally used a business credit card from SUNY Downstate Medical Center in Brooklyn to pay for over \$1 million in travel, pet care, fitness and other personal expenses. Brooklyn District Attorney Eric Gonzalez and New York State Inspector General Lucy Lang announced the indictment of [a doctor], the 66-year-old former chairman of emergency medicine at SUNY Downstate, who faces charges that include grand larceny. During an audit, SUNY discovered the alleged thefts by [the doctor], who previously served as chief medical officer and acting head of Downstate Hospital and the medical school. ([link](#))

Compliance/Regulatory & Legal Events

Jul 15: State Law

The California State University system will be required to establish clear policies and guidelines for how sexual harassment cases are investigated and tracked under a bill Gov. Gavin Newsom signed Monday. The new law obligates the 23-campus network to implement recommendations from a 2023 state audit that examined how officials investigated and tracked complaints at the nation's largest public four-year university system following outcry over the failure to properly handle sexual misconduct cases across multiple campuses. ([link](#))



Jul 26: Lawsuit Settlement

Western Iowa Tech Community College has agreed to settle the second of two federal lawsuits alleging the school conspired with others to engage in human trafficking. As reported by Iowa Public Radio earlier this week, WITCC of Sioux City has agreed to pay \$2.3 million to settle a lawsuit initiated by 10 students from Brazil. In April, the school agreed to pay \$3 million to settle similar claims brought by 13 students from Chile. Court documents confirm that while the lawsuits have yet to be dismissed, settlements between the school and the students have been finalized. The Sioux City college was accused of procuring visas for the students to enroll in the school's international education program, and then steering them to work in area meat processing plants. The college then diverted money from the students' paychecks to reimburse the school for the cost of the program, the lawsuits claimed. ([link](#))

COMPLIANCE IN FOCUS

continued



Jul 02: Discrimination Lawsuit

A conservative group filed a lawsuit against Northwestern University's law school on Tuesday, claiming that its attempts to hire more women and people of color as faculty members violate federal law prohibiting discrimination against race and sex. The complaint, coming just over a year after the Supreme Court struck down the use of affirmative action in college admissions, is expected to be among the first in a wave of new legal challenges attacking the way that American universities hire and promote professors. The lawsuit, which was filed in Federal District Court in Chicago, calls that process "a cesspool of corruption and lawlessness." It says Northwestern has deliberately sidelined white male candidates for faculty positions at the law school, giving preference to candidates of other races and gender identities. ([link](#))

Campus Life & Safety Events

Jul 10: Student Death

Police are looking into whether hazing played a role in the death of a Dartmouth College student whose body was found in a river over the weekend. Won Jang was last seen around 9:30 p.m. Saturday by docks on the Connecticut River, and he was reported missing Sunday afternoon, police in Hanover, New Hampshire, said. His body was found at about 7:30 p.m. Sunday in the water about 65 feet offshore, police said. Two of Jang's friends wrote in an email to The Dartmouth, the college's student newspaper, that he had attended a joint event Saturday night of his fraternity, Beta Alpha Omega, and Alpha Phi, a sorority. The event had involved alcohol, the two friends said. Police Chief Charles Dennis told WMUR-TV of Manchester that they would be looking into whether hazing was involved. ([link](#))

Jul 09: Vandalism

Officials at the University of Houston said on Tuesday that a vandal attacked Shahzia Sikander's sculpture "Witness," beheading the work, which is a monument to women and justice installed on campus. Footage of the destruction, which occurred early Monday morning amid the harsh weather of Hurricane Beryl and power outages, was obtained by campus police, officials told the artist. Sikander, a Pakistani American artist, often creates works that examine questions of politics, language and empire. The damaged statue was one of the artist's first major public sculptures in a nearly 30-year career. ([link](#))



Jul 08: Campus Climate

Three Columbia University administrators have been removed from their posts after sending text messages that "disturbingly touched on ancient antisemitic tropes" during a forum about Jewish issues in May, according to a letter sent by Columbia officials to the university community on Monday. The administrators are still employed by the university but have been placed on indefinite leave and will not return to their previous jobs. The announcement came about a month after a website published photos that showed some of the text messages sent by the administrators. ([link](#))

Compliance and the Road Ahead

Recent headlines, as well as several pieces of regulatory and legal guidance, have occurred in the last month that may impact the University's compliance risk. Focus areas for this compliance notice are listed to the right.

The Office of Compliance and Ethics, which includes the Offices of Equal Opportunity Programs and Athletics Compliance, will continue to monitor these areas and support compliance partners in mitigating risk.

Regulation of Artificial Intelligence

Phishing and other Cybersecurity threats

Research Misconduct

Foreign Influence

Freedom of Expression (University Regulation 5.005)

FOR DATA PHISHING AWARENESS

VERIFY SENDER INFORMATION

- Check the sender's email address for legitimacy.
- Hover over email addresses to make sure it is from famu.edu.
- Be cautious of emails from unknown or suspicious addresses and domains.

DUO: FAMU'S MULTI-FACTOR AUTHENTICATION

- Hackers generally cannot access your account unless you approve the MFA challenge.
- **NEVER** approve a multifactor authentication push or challenge that you have not initiated.

LOOK FOR RED FLAGS

- Emails that claim to be from one domain (ie @Famu.edu) but come from an email address with a different domain (ie @gmail.com).
- Offers that are too good to be true.
- Emails that ask you to provide information that the sender should already have.
- Poor grammar or spelling



DON'T CLICK UNKNOWN LINKS

- Avoid clicking links, providing personal information, or downloading attachments from unfamiliar sources.
- FAMU business must be conducted with FAMU email accounts. You will never receive an email from someone at FAMU using a @gmail.com, @yahoo.com, @icloud.com, etc.

BEWARE OF URGENT REQUESTS

Be wary of emails or messages that create a sense of urgency or pressure you to act quickly.

REPORT SUSPICIOUS ACTIVITY

If you suspect phishing or account activity that you did not initiate, immediately report it to phishbowl@famu.edu.





Mandatory Training Calendar

[FIND OUT MORE](#)

SEE SOMETHING, SAY SOMETHING

Do you know a FAMU employee who has demonstrated a commitment to compliance and integrity?

We believe that ethical behavior starts with individuals who are willing to take a stand when they see something that doesn't align with our values, even when it is difficult or uncomfortable to do so.

We want to celebrate the employees who exemplify a dedicated commitment to integrity and ethics.

Let us know by nominating them for the “See Something, Say Something” Award at complianceandethics@famuedu and be on the lookout for a feature in our next issue!



Resources and Reports

[ACCESS NOW](#)

Meet the University Compliance (OCE) Team



RICA CALHOUN

Chief Compliance & Ethics Officer
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LA'TONYA BAKER

Director of Compliance,
Chief Privacy Officer
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MIRANDA WASHINGTON

Compliance Coordinator
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THOMAS WOOD

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complianceandethics@famu.edu

Equal Opportunity Programs (EOP)



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Athletics Compliance Team



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Director
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Financial Air & Benefits
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KELLEY BICKHAM

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Eligibility and Compliance
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TIA HUIE

Athletic Compliance
Coordinator
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ALEXUS DAVENPORT

Athletic Compliance
Front Office Assistant
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For inquiries, contact us.

aco@famuedu

850-599-8303



Organizational Chart



FLORIDA A&M UNIVERSITY
OFFICE OF COMPLIANCE AND ETHICS



Rica Calhoun
Chief Compliance and Ethics Officer

University Compliance and Ethics

Athletics Compliance


Equal Opportunity Programs



Marquis Stewart
Interim Registrar



Brittney Johnson
Senior Associate AD for Athletics Compliance



La'Tonya Baker
Director, Compliance
Chief Privacy Officer



Vacant
Coordinator



Vacant (August 2024)
Program Manager



Latrecha Scott
Director, Equal Opportunity Programs



Kelley Bickham
Associate AD for Compliance (Eligibility)



Lori Goodart
Associate AD for Compliance (Fin. Aid and Benefits)



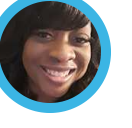
Miranda Levy
Coordinator, Administrative Services



Thomas Wood
Investigator



Vacant (search)
Coordinator, Research Compliance and Foreign Influence



Kimberly Ceaser
Assistant Director
Titles VI, VII, and ADA



Letitia McClellan
Assistant Director
Title IX Coordinator



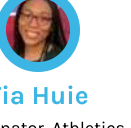
Sophia Koonce
Coordinator (Certification Liaison)



Vacant (August 2024)
Graduate Assistant



Vacant (July 2024)
Coordinator (Athletics Compliance, General)



Tia Huie
Coordinator, Athletics Compliance (Fin. Aid and NIL)



Alexus Davenport
Coordinator, General Compliance



Dicye Baker
Investigator



Montell Holmes
ADA Coordinator



Allysan Boatman
Title IX Investigator



ACTION ITEM: Annual Report and Program Plan

Compliance and Ethics Program Plan 2024-2025

Element 1

Provide Oversight of Compliance and Ethics and Related Activities



1. Coordinate and conduct regular meetings with the Enterprise Compliance Committee
2. Attend the President's Senior Leadership Team meetings.
3. Serve and provide guidance to compliance and regulatory committees.

Element 3

Conduct Effective Training and Education



1. Coordinate, create, deliver and track annual completion of FAMU Fundamentals.
2. Provide trainings to constituency groups throughout the year.
3. Plan and implement the University's annual Compliance Week learning and outreach activities.
4. Develop annual memoranda and guidance on issues of note, including conflicts of interest, Code of Conduct, privacy, and ethics.

Element 5

Conduct Internal Monitoring and Compliance Reviews



1. Monitor compliance and ethics risk areas, including conflicts of interest, regulatory changes, and research.
2. Continue building the University's privacy program.
3. Continue compliance partner reporting through the ECC.
4. Collaborate with the Chief Risk Officer, as appropriate, for risk bulletins and initiatives.
5. Coordinate the triage committee and analyze Hotline trends and risk areas to develop recommendations for management action to address appropriately.

Element 7

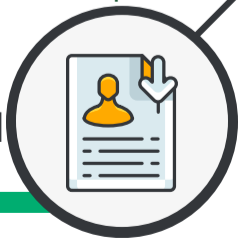
Enforce and Promote Standards through Appropriate Incentives and Disciplinary Guidelines



1. Develop and promote compliance and ethics standards through incentive opportunities and various outreach initiatives, including Compliance and Ethics Week.
2. Promote awareness of University regulations, policies, procedures, and regulatory requirements.
3. Promote accountability and consistent discipline.

Initiatives

New Regulations and Special Projects



1. Assist management in addressing several areas, including: athletics, research, foreign influence, NIST 800-171, conflicts of interest, and privacy.
2. Support the expansion of the Office of Compliance and Ethics through the strategic growth and success of the Offices of Equal Opportunity Programs and Athletics Compliance.

Element 2

Develop Effective Lines of Communication



1. Prepare and distribute Compliance and Ethics communication and micro-learning opportunities.
2. Administer and promote the University's Compliance and Ethics Hotline (Hotline).
3. Coordinate timely responses to regulatory and external agencies, as appropriate.
4. Disseminate resources and information throughout the year, including the Compliance Chronicles newsletter.

Element 4

Revise and Develop Policies and Procedures



1. Collaborate with the Office of University Policy to support policy development through the Enterprise Compliance Committee (ECC).
2. Continue to enforce and manage the University Code of Conduct and the University's Compliance and Ethics Charter.

Element 6

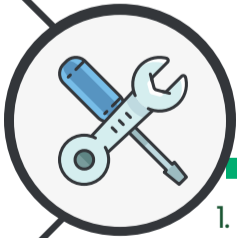
Respond Promptly to Detected Problems and Undertake Corrective Action



1. Receive and evaluate Hotline reports and direct complaints; refer, close, or investigate, as appropriate.
2. Provide recommendations for corrective actions and improvement of compliance and ethical decision-making. Monitor management response.

Element 8

Measure Compliance Program Effectiveness



1. Develop and issue OCE's annual compliance and ethics report.
2. Implement program maturation measures identified in the external five-year program review; prepare for 2026 external review.
3. Apply benchmark analysis of culture and training surveys to enhance 2024-2025 offerings
4. Develop, measure, and track office efforts through the University assessment process.



ACTION ITEM:
University Regulation 5.005
Freedom of Expression Review
and Action

FLORIDA A&M UNIVERSITY BOARD OF TRUSTEES



NOTICE OF PROPOSED AMENDED REGULATION

Date: June 8, 2018

REGULATION CHAPTER TITLE: Chapter 5

REGULATION TITLE AND NUMBER: Freedom of Expression and Assembly Rights and Responsibilities, Open Platform Areas (5.005).

SUMMARY OF REGULATION: The legislature enacted Florida Statute 1004.097 with an effective date of July 1, 2018. As a result of the passage of this law, portions of Regulation 5.005 are in conflict, and will be superseded by the Statute and no longer in effect. Therefore, this amendment reflects the new law that requires the removal of designated free speech zones.

The proposed amended Regulation continues to outline the authority of the President as it relates to Freedom of Expression and Assembly; and it provides guidelines, requirements, and proscriptions. Non-compliance with this new law can lead to court costs, attorney fees, and/or an injunction.

AUTHORITY FOR REGULATION: Article IX, Section 7, Florida Constitution, Board of Governors Regulation 1.001.

UNIVERSITY OFFICIAL INITIATING THIS REGULATION: Rodner B. Wright, AIA, Interim Provost and Vice President for Academic Affairs.

PROCEDURE FOR COMMENTS: Written comments concerning this proposed regulation shall be submitted within 14 days of the date of this notice to the person identified below. The comments must specifically identify the regulation on which you are commenting.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED REGULATION IS: Shira Thomas, Interim Vice President and General Counsel, Office of the General Counsel, Suite 304 Foote-Hilyer Administrative Center, Tallahassee, Florida 32307, (850) 599-3591 (Telephone), (850) 561-2862 (Facsimile), shira.thomas@famuedu (Email).

FULL TEXT OF THE PROPOSED REGULATION: The full text of the proposed regulation follows:

Florida A&M University Regulation



5.005 Freedom of Expression and Assembly Rights and Responsibilities, Open Platform Areas

Freedom of expression at Florida A&M University ("FAMU") includes the right to present and advocate ideas in the spirit and development of knowledge. Freedom of expression and assembly includes demonstrations, picketing, protests, petitioning, information dissemination, the formation of groups, gatherings, and participation in group activities. FAMU, as a public university, protects the First Amendment rights of all, including those constitutionally protected views and values contrary to FAMU's mission and fundamental principles. While the University upholds these freedoms, the University will not permit speech, expression, or assembly that advocates lawlessness and/or violence, or restrains, **disrupts**, or interferes with activities of members of the University community, whether by physical force or intimidation. The positions, expressions, or views, belong to those students, protestors, demonstrators, or speakers themselves, and do not necessarily reflect the views of the University. This Regulation is not intended to inhibit or interfere with academic freedom of expression, and it is understood that faculty exercising their rights under academic freedom will accept responsibility for both the substance and the manner of their messages.

As with all public universities, the word "public" does not mean that all areas on University property are open to the general public. There are areas that are not open to the public such as, but not limited to, classrooms, laboratories, offices, and research and field sites. The regulation of certain activity on the University's campuses is necessary to preserve the educational mission, vision, and fundamental principles of the University; to prevent unnecessary disruption of classes, study periods and/or administrative functions; to provide for the safety of University students, faculty, staff, and the public; and to protect the property of students, faculty, staff, and the University. Therefore, reasonable restrictions on the time, manner, and place of the expression are appropriate and necessary to maintain and protect the rights of its students, faculty, staff, and the public.

(1) University Guidelines.

Florida A&M University prescribes the following guidelines:

- (a) Demonstrations, picketing, and speeches must not be in violation of the federal, state, or local statutes, FAMU Board of Trustees, University, or Florida Board of Governors' ("BOG") regulations or policies governing unlawful assemblies.
- (b) Demonstrations, **picketing, and speeches** may be held on campus as long as they do not impede or disrupt the normal operation of the University or infringe on the rights of other members of the University community in accordance with this Regulation. Demonstrations, **picketing, and speeches** are not permitted: inside of University buildings; ~~to~~ **blockin**g the ingress or egress to University buildings, streets, or sidewalks; or on the grounds surrounding the Educational

5.005 Freedom of Expression Rights and Responsibilities, Open Platform Areas

Research Center for Child Development, the Student Health Services' primary care clinic, and dormitories/housing facilities.

(c) For demonstrators not to **disrupt or** interfere with the operation of the University or the rights of others, they shall not:

- Obstruct entrances or exits to buildings or driveways;
- Obstruct vehicular, bicycle, pedestrian, or other traffic;
- Interfere with educational activities inside or outside any building;
- Interfere with scheduled University classes, ceremonies, or events;
- Disrupt normal activities to include breach of peace;
- Damage property, such as but not limited to buildings, landscapes, or vehicles;
- Harass, intimidate, or threaten passersby, or use fighting words, which are those words that by their mere utterance inflict violence or would tend to incite a reasonable person/individual to violence or other breach of the peace; or
- Obstruct, disrupt, or attempt to physically force the cancellation or continuance of a speaker; or interfere with or impede a scheduled speaker from being heard.

(d) Any use of sound amplification equipment on the outdoor areas of campus is prohibited without prior clearance through the Office of Student Activities. Such use will be permitted only if there is no interference or disruption of any academic or other University activities. Use of outdoor areas must also be consistent with all other University **Regulations and Policies**, and state, federal and local laws.

(e) Outside Speakers.

1. **University Sponsored.** Academic units, departments, alumni groups, recognized student organizations and other University affiliated groups, who sponsor outside speakers, are responsible for informing the speaker that the University is not to be used as a platform for the organization or the incitement of lawlessness or violence, and for obtaining the speaker's agreement not to use the event for such purposes. Please refer to University [Regulation 2.030, Student Activities](#) for additional information.

2. **Non-University Sponsored.** Entities, individuals, or public speakers who wish to lease or rent a University facility for an event must adhere to this Regulation and University [Regulation 10.124, Use of University Facilities and Services](#). Priority will be given to those groups and/or individuals whose activities are related to, and/or further the mission of the University.

(f) Signs may be posted on bulletin boards designated for public announcements. FAMU maintains a General Information Center and bulletin boards throughout the campus. Listings on the boards include information regarding campus events and activities, general information, and classified advertisements. Such listings are limited to the Quadrangle Information Center and bulletin boards and will not be displayed, for example, on trees, buildings, or road signs. Pre-approval for the posting of signs, to include posting for the purpose of solicitation, is required in accordance with [Regulations 3.011, Commercial Solicitation](#) and [2.030, Student Activities](#). In addition, the deans of the colleges and/or schools located at the satellite campuses can designate a posting area.

- (g) Infringement of Copyrighted Materials and Individuals' Expectations of Privacy. Recording of speeches, gatherings, rallies, events, and/or other activities may be restricted by copyright protection, and/or laws governing privacy. There are civil and criminal penalties with the recording of copyright protected events and in situations where there is an expectation of privacy.
- (h) To maintain the orderly operation of the University, demonstrations ~~may~~ can occur ~~in designated areas located at~~ but is not limited or restricted to: the University Quadrangle, parking lot south of the Student Union Building, Stadium parking lot, gymnasium parking lot, and west of the Student Union Building between the Student Union and Foster-Tanner Fine Arts Building on a space available basis. However, demonstrations must not disrupt, interfere with, or obstruct, normal operational processes of the University. In addition, ~~the deans of the colleges and/or schools located at the~~ satellite campuses ~~can~~ may designate but not limit or restrict a demonstration areas best suited for demonstrations that are least likely to obstruct University operations.
- (i) Symbolic speech, such as silent protest, wearing expressive clothing that is not obscene or a safety hazard, gesturing, or standing, may be conducted anywhere as long as the symbolic speech does not violate this Regulation, BOG or University Regulations and Policies, and/or federal, state or local laws. However, silent protests must not disrupt, interfere with, or obstruct, normal operational processes of the University.

(2) Prohibited Items during Protests/Demonstrations/Speaker Events

To maintain the orderly operations of the University and the safety of all members of the University community and the public, the following items are prohibited during protests, demonstrations, and/or speaker events:

- Weapons of any kind to include toy weapons, weapon lookalikes, or fake weapons;
- Sharp objects;
- Lighters, matches, torches or open flame;
- Any athletic equipment or other items which could be used as a weapon;
- Masks of any kind; goggles; bandanas/scarfs; neck gaiters; shields;
- Flag poles, bats, clubs, sticks (**including sticks for signs**); umbrellas;
- Aerosol/pressurized cans; mace; pepper spray;
- Chains, padlocks, bicycle locks;
- Fireworks;
- Backpacks, bags, purses, clutches;
- Signs made of anything other than cloth, paper, foam core, cardboard;
- Cans, metal, or glass containers, beverages or alcoholic beverages;
- No water bottles of any kind (can be used as weapons);
- Pop-up tents, canopies or hammocks;
- Wagons or pull carts; coolers; grills, propane tanks;
- Drones or other unmanned aircraft systems;
- Pets (excluding ADA service animals);
- Bicycles, scooters, skateboards;
- Tobacco products of any kind;
- Illegal drugs;
- Laser pointers;

5.005 Freedom of Expression Rights and Responsibilities, Open Platform Areas

- Water balloons;
- Megaphones or other amplified sound devices;
- Any other items that Campus Police determine pose a risk to safety, disruption of classes, or vehicular or pedestrian traffic.

~~(3) Authority of the President~~

- ~~(a) The President has authority to determine whether reasonable grounds exist to believe that a planned speech, demonstration, or other event is likely to:~~
- ~~1. Draw a large number of individuals (whether demonstrators for or against), who are not FAMU students, faculty, or staff;~~
 - ~~2. Obstruct ingress or egress to or from University classrooms or other facilities or travel across campus; or~~
 - ~~3. Interfere with the ability of students or faculty to study and enjoy a secure and peaceful academic atmosphere.~~
- ~~(b) In cases where the President makes the determination that a planned speech, demonstration or other event will likely cause any of the above issues, the President is authorized to designate an area on University property[†] that would mitigate such effects and is reasonably accessible to University students, faculty and employees, and to limit the event to such location. This authority is intended for the President to maintain the safety, welfare, and health of our students, faculty, staff, and the public; and to maintain the orderly operations of the University. Nothing in this section is intended to, nor shall be read to, imply an obligation on the part of the President or the University to secure or rent property for any speech, demonstration, or other event, nor is it intended to indicate that any and all speeches, demonstrations, or events can be accommodated.~~

(3) Disruptive Action

- (a) In the event of disruptive action, University employees and students involved in demonstrations shall identify themselves by presenting appropriate documents such as ID cards when requested to do so by the President or President's designee, and such designee shall identify him/herself when making this request.
- (b) Demonstrators not officially related to FAMU may be directed to leave the campus immediately or be subject to arrest for a violation of the law forbidding the disruption or interference with the administration or functions of an educational institution.
- (c) If the President or his/her designee determines that a demonstration is disrupting normal University operations, or infringing on the rights of other members of the University community, the President or President's designee may:
1. Inform the demonstrators that they are in violation of the University policy and/or in violation of the law and specify the nature of the violation;
 2. Request that the violation cease; and/or

[†]~~To include "Use Days" at the Civic Center.~~

3. In the event of non-compliance with this request, enlist the assistance of the Campus Police in restoring order and enforcing the law.
- (d) The University's Department of Campus Safety and Security ("Campus Police") has the primary mission of providing safety and security for all members of the University community including students, faculty, staff, and guests. Campus Police has full law enforcement authority to arrest individuals who violate the law on University property. In addition, the Campus Police maintains mutual aid agreements with city and county authorities, and host cities of the University campuses.

Campus Police has the authority and responsibility to:

1. Declare a demonstration to be in violation of law and request all demonstrators to cease and desist, and to disperse and clear the area, or be subject to arrest and/or University disciplinary action.
 2. Arrest any demonstrators observed to be in violation of the law; and
 3. Enlist the assistance of outside law enforcement agencies, if necessary.
- (e) If a demonstration or a protest is **disrupting**, impeding or obstructing normal University operations, and after the demonstrators have been officially notified of the impediment or obstruction, the act will be considered in violation of University policy and can be considered disturbance (breach) of the peace, which is a violation of the law. Within a reasonable length of time, those who fail to disperse may be subject to criminal, civil, as well as University disciplinary action as appropriate. Refer to University [Regulation 2.012, Student Code of Conduct](#), [Regulation 10.111, Disruptive Conduct](#), and [Regulation 1.019, University Code of Conduct](#); and applicable federal, state and local laws for further information.

(4) Students and Employees (Faculty, Staff and Personnel)

- (a) Students, faculty, staff, and all other personnel who intentionally act to impair, **disrupt**, interfere with, or obstruct the orderly conduct, processes, and functions of the University shall be subject to appropriate disciplinary action by the University authorities. Refer to University [Regulation 2.012, Student Code of Conduct](#), [Regulation 10.111, Disruptive Conduct](#), and [Regulation 1.019, University Code of Conduct](#) for further information.
- ~~(b) Recognized student organizations, individual students, or student groups within the University may hold or conduct demonstrations and protests on designated University property provided that the Dean of Students is notified, in writing, at least 24 hours before the demonstration or protest, and that the meeting does not interfere or obstruct with the orderly processes of the University.~~
- ~~(b) Students, faculty, staff, and all other personnel~~ who participate in marches, protests, picketing, and demonstrations are hereby notified that they will be held accountable individually for any actions that violate the BOG and/or University Regulations and Policies as well as federal, state and local laws. Faculty, staff, and all other personnel shall not participate while on work time.

(c) Students, faculty, or staff of the University may not materially disrupt previously scheduled or reserved activities on campus occurring at the same time.

(5) Public and Guests

(a) Members of the public and guests are responsible for their actions on any and all University property and will be held accountable for any violations of law, University Regulations, or Policies, which may include a trespass warning.

(6) Security

(a) It is the responsibility of the sponsor, individual, and/or group, including University sponsors, to coordinate security plans with Campus Police prior to the event, and to arrange for and cover costs of security as permitted by law.

(b) Additional duly appointed security officers may also be required depending upon the type of event, facility, and the expected number of individuals to attend. Security officers employed or secured must be approved by Campus Police.

(c) Two weeks prior to the scheduled outside speaker or other event, notice shall be given to Campus Police in order to plan and coordinate for security and safety concerns.

~~(d) 48 hours prior to a demonstration/protest, notice shall be given to Campus Police in order to plan and coordinate for security and safety concerns.~~

(7) Definitions

(a) Breach of the peace; disorderly conduct. Section 877.03, of the Florida Statutes, provides "[w]hoever commits such acts as are of a nature to corrupt the public morals, or outrage the sense of public decency, or affect the peace and quiet of individuals who may witness them, or engages in brawling or fighting, or engages in such conduct as to constitute a breach of the peace or disorderly conduct, shall be guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083."

(b) Campuses (main and satellite campuses) are defined to include all properties and facilities under the guidance, supervision, regulation, or control of the University, or any of its direct support organizations.

(c) Fireworks are defined as, and includes, any combustible or explosive composition or substance or combination of substances, or except as hereinafter provided, any article prepared for the purpose of producing a visible or audible effect by combustion, explosion, deflagration, or detonation.

(d) Hate Crimes are criminal offenses that manifest evidence of prejudice based on race, religion, sexual orientation, or ethnicity. Larceny-theft, simple assault, intimidation, and the destruction, damage, or vandalism of property can also be considered hate crimes.

(e) Solicitation is defined to be any act or event conducted for the purpose of financial or commercial gain to the vendor, individual(s), or organization(s), e.g. handing out promotional leaflets and

placing signs on University property. Please refer to University [Regulation 3.011, Commercial Solicitation](#) for further information.

- (f) Weapon is defined as any item, including, but not limited to metallic knuckles, swords, any dangerous chemical or biological agents, firearms, machine guns, starter guns, BB guns, stun guns, paintball guns, stun guns (Tasers), archery equipment, or any other object which will, is designed to, or may readily be converted to, expel a projectile by the action of an explosive; the frame or receiver of any such weapon; any firearm muffler or firearm silencer; any destructive device.

Specific Authority: Article IX, Section 7, Florida Constitution, Board of Governors Regulation 1.001. History—New 1-2-2018, Amended 7- -18.

Florida A&M University Regulation



5.005 Freedom of Expression and Assembly Rights and Responsibilities.

Freedom of expression at Florida A&M University (“FAMU” or “University”) includes the right to present and advocate ideas in the spirit and development of knowledge. Freedom of expression and assembly includes demonstrations, picketing, protests, petitioning, marches, information dissemination, the formation of groups, gatherings, and participation in group activities (hereinafter “Expressive Activity”). FAMU, as a public university, protects the First Amendment rights of all, including those constitutionally protected views and values contrary to FAMU’s mission and fundamental principles. In upholding these freedoms, the University will not shield members of the University community from expressive activities. However, the University prohibits speech, expression, or assembly that advocates lawlessness and/or violence, or restrains, intentionally and significantly disrupts, or interferes with activities of members of the University community, whether by physical force or intimidation. The positions, expressions, or views belong to those students, protestors, demonstrators, or speakers themselves, and do not necessarily reflect the views of the University. This Regulation is not intended to inhibit or interfere with academic freedom of expression, and it is understood that faculty exercising their rights under academic freedom will accept responsibility for both the substance and the manner of their messages.

As with all public universities, the word “public” does not mean that all areas on University property are open to the general public. There are areas that are not open to the public such as, but not limited to, classrooms, laboratories, offices, and research and field sites. The regulation of certain activity on the University’s campuses is necessary to preserve the educational mission, vision, and fundamental principles of the University; to prevent unnecessary disruption of classes, study periods and/or administrative functions; to provide for the safety of University students, faculty, staff, and the public; and to protect the property of students, faculty, staff, and the University. Therefore, reasonable restrictions on the time, manner, and place of the expression are appropriate and necessary to maintain and protect the rights of its students, faculty, staff, and the public.

(1) University Guidelines.

(a) Permissive Activities.

1. Expressive activity is permitted when such activity complies with federal, state, or local statutes, FAMU or Florida Board of Governors’ (“BOG”) regulations or policies governing unlawful assemblies.
2. Expressive activity, in the form of symbolic speech, such as silent protest or wearing expressive clothing that is not obscene or a safety hazard is permitted. Gesturing or standing in solidarity as symbolic speech is also permissive. Such activity is subject to compliance and restriction parameters outlined throughout this Regulation.
3. To maintain the orderly operation of the University, expressive activity may, without limitation, occur: The University Quadrangle, parking lot south of the Student Union

Building, Stadium parking lot, gymnasium parking lot, and west of the Student Union Building between the Student Union and Foster-Tanner Fine Arts Building on a space available basis. However, expressive activity must not disrupt, interfere with, or obstruct, the normal operational processes of the University. In addition, satellite campuses may designate but not limit or restrict areas best suited for expressive activities that are least likely to obstruct University operations.

(b) Prohibited Activity.

1. Expressive activity is impermissible when such activity:
 - a. impedes or disrupts the normal operation of the University including, without limitation, impeding or disrupting educational, administration, or research activities, ceremonies, events, or operations inside or outside any building;
 - ii. impedes or infringes on the rights of other members of the University community;
 - iii. occurs inside University buildings including, without limitation, classrooms, laboratories, offices, research and field sites, and other University indoor or outdoor facilities that are intended for purposes such as instruction, study, reflection, group discussions, administrative functions, and various other University activities and operations;
 - iv. blocks the ingress or egress (entrances or exits) to University buildings, streets, or sidewalks.
 - v. occurs in restricted outdoor areas, including the Educational Research Center for Child Development, Student Health Services primary care clinic, University Libraries, and residential facilities;
 - vi. damages property, such as but not limited to buildings, landscapes, or vehicles;
 - vii. defaces University property, including any vertical or horizontal surface;
 - viii. harasses, intimidates, injures, or threatens passersby, or directly uses words which by their mere utterance intended to incite violence or a breach of peace (fighting words);

(c) Time, Place and Manner Restrictions. Florida A&M University is committed to safeguarding the health, safety, and welfare of all University community members. In furtherance of that commitment, expressive activities are subject to the following additional restrictions:

- i. **Time Restrictions.** Expressive activity is prohibited on University campuses from sunset to 8:00 a.m. without prior approval from the Vice President of Student Affairs. Requests for approval will be evaluated in a content and viewpoint-neutral manner.
- ii. **Venue Capacity.** The University may restrict attendance at expressive activities based on the capacity of the venue.
- iii. **Sound Amplification.** Any use of sound amplification equipment, including megaphones, on the outdoor areas of campus is prohibited without five (5) business days prior written approval from the Vice President of Student Affairs.
 1. Such use will be permitted only if sound levels are reasonable, meet the event communication needs without excessive noise penetration to adjacent areas and there is no interference or disruption of any academic or other University activities.
- iv. **Disruption of Scheduled Speakers.** Individuals engaging in expressive activity shall not obstruct, disrupt, or attempt to force the cancellation or continuance of a speaker physically; or interfere with or impede a scheduled speaker from being heard.

- v. Only University-related events will be permitted during any final exam period, and no unapproved amplified sound will be permitted at outdoor events during any final exam period.
- vi. **Safety Hazard.** Expressive activity that creates an environmental hazard or poses a health and safety threat to the University, its community, affiliated organizations, or the general public, is prohibited.
- vii. **Camping, Encampments, or Structures.** Camping on University grounds is prohibited, unless it is part of an official University activity, including activities organized by an academic or administrative unit, and has received written approval from the Vice President of Student Affairs, or their designees. Building or constructing any shelter, barrier, or other physical structure is also prohibited.
- viii. **Failure to Comply.** Individuals engaging in expressive activity must comply with any reasonable instruction by Department of Campus Safety and Security (“Campus Police”) or any University official acting in the performance of their duty.
- ix. **Unlawful Conduct.** Individuals may not engage in conduct that violates the lawful time, place, and manner restrictions outlined in this Regulation.

(d) Guidelines for Outside Speakers.

- i. **University Sponsored.** Academic units, departments, alumni groups, recognized student organizations and other University affiliated groups who sponsor outside speakers are responsible for informing the speaker that the University is not to be used as a platform for the organization or the incitement of lawlessness or violence. The University affiliated unit sponsoring the speaker is responsible for obtaining the speaker’s agreement with these parameters. Please refer to University [Regulation 2.030, Student Activities](#) for additional information.
- ii. **Non-University Sponsored.** Entities, individuals, or public speakers who wish to lease or rent a University facility for an event must comply with this Regulation and University [Regulation 10.124, Use of University Facilities and Services](#). Priority will be given to those groups and/or individuals whose activities are related to and/or further the mission of the University.

(e) Distribution of Literature and Postings. Individuals may circulate non-commercial literature, provided it is identified by authorship and sponsorship, subject to applicable provisions of this Regulation. Signs may be posted on bulletin boards designated for public announcements. FAMU maintains a General Information Center and bulletin boards throughout campus locations. Listings on the boards include information regarding campus events and activities, general information, and classified advertisements. Such listings are limited to the Quadrangle Information Center and bulletin boards and will not be displayed, for example, on trees, buildings, or road signs. Posters must obtain pre-approval for the posting of signs, including posting for solicitation, as required by University Regulations 3.011, Commercial Solicitation, and [2.030, Student Activities](#). Deans of the colleges and/or schools located at the satellite campuses can designate additional posting areas at that satellite location.

(f) Infringement of Copyrighted Materials and Individuals’ Expectations of Privacy. Recording of speeches, gatherings, rallies, events, and/or other activities may be restricted by copyright protection, and/or laws governing privacy. There are civil and criminal penalties associated with the recording of copyright-protected events and in situations where there is an expectation of privacy.

(2) Prohibited Items during Protests/Demonstrations/Speaker Events

To maintain the orderly operations of the University and the safety of all members of the University community and the public, the following items are prohibited during any expressive activity events:

- Firearms and/or weapons of any kind including, without limitation, toy weapons, weapon lookalikes, or fake weapons;
- Sharp objects;
- Lighters, matches, torches or open flame;
- Flammable liquids;
- Any athletic equipment or other items which could be used as a weapon;
- Masks of any kind; goggles; bandanas/scarfs; neck gaiters;
- Armor and/or screens of any kind;
- Helmets;
- Flag poles, bats, clubs, sticks (**including sticks for signs**); umbrellas;
- Aerosol/pressurized cans; mace; pepper spray;
- Chains, padlocks, bicycle locks;
- Fireworks;
- Backpacks, bags, purses, clutches;
- Signs made of anything other than cloth, paper, foam core, cardboard;
- Cans, metal, or glass containers;
- Beverages or alcoholic beverages;
- Water bottles of any kind, due to potential use as weapons;
- Pop-up tents, shelters, bedding, canopies and/or hammocks;
- Wagons or pull carts
- Vehicles,
- Coolers; grills, propane tanks, ladders;
- Drones or other unmanned aircraft systems;
- Pets (exception: ADA service animals);
- Bicycles, scooters, skateboards;
- Tobacco products of any kind;
- Illegal drugs;
- Laser pointers;
- Water balloons;
- Megaphones or other amplified sound devices without appropriate prior approval;
- Any other items that the President or Campus Police reasonably determine pose a risk to safety, disruption of classes or traffic (vehicular or pedestrian).

(3) Disruptive Action

- (a) In the event of disruptive activity, University employees and students involved in demonstrations shall identify themselves by presenting appropriate documents such as ID cards when requested to do so by Campus Police, the President, or President's designee, and such designee shall identify him/herself when making this request.

- (b) Demonstrators not officially affiliated with FAMU may be directed to leave the campus immediately or be subject to arrest for a violation of the law forbidding the disruption or interference with the administration or functions of an educational institution.
- (c) If the President or his/her designee determines that such expressive activity is disrupting normal University operations, poses a health or safety risk, or infringes on the rights of other members of the University community, the President or President's designee is authorized to take any of the following actions, without limitation:
1. Inform the demonstrators that they are in violation of the University policy and/or in violation of the law and specify the nature of the violation.
 2. Request that the violation cease.
 3. Designate an area on University property that would mitigate such effects and is reasonably accessible to University students and faculty, and to limit the event to such location.
 - a. Nothing in this section is intended to, nor shall be read to, imply an obligation on the part of the President or the University to secure or rent property for any expressive activity nor is it intended to indicate that all manner of expressive activity can be accommodated.
 4. Cancel the event or activity, if the President or designee has reasonable grounds to believe that any such event or activity presents an imminent threat to the health, safety, and welfare of campus and the threat cannot be mitigated using reasonable alternative means.
 5. In the event of non-compliance, enlist the assistance of the Campus Police, or affiliated law enforcement at satellite locations, in restoring order and enforcing the law.
- (d) The University's Campus Police has the primary mission of providing safety and security for all members of the University community including students, faculty, staff, and guests. Campus Police has full law enforcement authority to arrest individuals who violate the law on University property. In addition, the Campus Police maintains mutual aid agreements with city and county authorities, and host cities of the University campuses.

Campus Police has the authority and responsibility to:

1. Declare an expressive activity to be in violation of law and request all participants to cease and desist, and to disperse and clear the area, or be subject to arrest and/or University disciplinary action;
2. Arrest any participants observed to be in violation of the law; and
3. Enlist the assistance of outside law enforcement agencies, if necessary.
4. This Regulation does not intend to limit or restrict the authority of the Campus Police Department or other law enforcement personnel under applicable laws or BOG and/or University regulations, policies, and procedures.

(4) Students and Employees (Faculty, Staff and Personnel)

- (a) Students, faculty, staff, and all other personnel who intentionally act to impair, disrupt, interfere with, or obstruct the orderly conduct, processes, and functions of the University shall be subject to appropriate disciplinary action by the University authorities.
- (b) Students, faculty, staff, and all other personnel who participate in expressive activity are hereby notified that they will be held accountable individually for any actions that violate the BOG and/or University regulations and policies as well as federal, state and local laws. Faculty, staff, and all other personnel shall not participate while on work time.
- (c) Students, faculty, or staff of the University may not materially disrupt previously scheduled or reserved activities on campus occurring at the same time.

(5) Public and Guests

- (a) Members of the public and guests are responsible for their actions on any and all University property and will be held accountable for any violations of law, University regulations, or policies, which may include a trespass warning.

(6) Security

- (a) It is the responsibility of the sponsor, individual, and/or group, including University sponsors, to coordinate security plans with Campus Police prior to the event or activity, and to arrange for and cover costs of security as permitted by law.
- (b) Additional duly appointed security officers may also be required depending upon the type of event, facility, and the expected number of individuals to attend. Security officers employed or secured must be approved by Campus Police.
- (c) Two weeks prior to the scheduled outside speaker or other event, the sponsor, individual, and/or group shall give notice to Campus Police in order to plan and coordinate for security and safety concerns.

- (7) University Use.** This regulation does not restrict the University's authority to schedule or reserve campus areas in advance for use by the University or a specific individual or organization. Outdoor areas of the campus will be available for expressive activities on a space-available basis. Expressive activities in outdoor areas that have been reserved by the University or another individual, group, or organization for use through established University procedures are subject to removal or relocation. Additionally, no individual or group may claim exclusive use of any area without prior approval through the applicable event permitting or reserving processes. Individuals may not materially disrupt previously scheduled or reserved activities on campus occurring at the same time.

- (8) Enforcement and Penalties.** If any expressive activity is disrupting, impeding, or obstructing normal University operations, and after the participants have been officially notified of the impediment or obstruction, the act will be considered in violation of University policy and can be considered disturbance (breach) of the peace, which is a violation of the law. Within a reasonable length of time, those who fail to disperse may be subject to criminal, civil, as well as University disciplinary action as appropriate. Refer to University [Regulation 2.012, Student Code of Conduct, Regulation 10.111, Disruptive Conduct](#), and [Regulation 1.019, University Code of Conduct](#); and applicable federal, state, and local laws for further information.

(9) Definitions

- (a) Breach of the peace; disorderly conduct. Section 877.03, Florida Statutes, provides “[w]hoever commits such acts as are of a nature to corrupt the public morals, or outrage the sense of public decency, or affect the peace and quiet of individuals who may witness them, or engages in brawling or fighting, or engages in such conduct as to constitute a breach of the peace or disorderly conduct, shall be guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083.”
- (b) Campuses (main and satellite campuses) are defined to include all properties and facilities under the guidance, supervision, regulation, or control of the University, or any of its direct support organizations.
- (c) Material and substantial disruption means any conduct that intentionally and significantly hinders another person’s or group’s expressive rights. The term does not include conduct that is protected under the First Amendment to the United States Constitution and Art. I of the State Constitution, including, but not limited to, lawful protests and counter-protests in the outdoor areas of campus or minor, brief, or fleeting nonviolent disruptions that are isolated or brief in duration.
- (d) Expressive Activities are activities such as assemblies, demonstrations, exercises of free speech, protests, parades, marches, picketing and speeches; distributing literature; carrying signs; circulating petitions; faculty research, lectures, writings, and commentary, whether published or unpublished; and the recording and publication, including the Internet publication, of video or audio recorded in outdoor areas of campus, protected under the First Amendment to the United States Constitution and Article 1 of the Florida Constitution. Expressive activity does not, for purposes of this regulation, include defamatory or commercial speech.
- (e) Fireworks are defined as, and includes, any combustible or explosive composition or substance or combination of substances, or except as hereinafter provided, any article prepared for the purpose of producing a visible or audible effect by combustion, explosion, deflagration, or detonation.
- (f) Restricted Area means any portion of campus the University President or designee determines on a content-neutral basis, permanently or temporarily, where it would be unreasonable for expressive activities to occur because of disruption or health, safety, and welfare considerations.
- (g) Shield means to limit students’, faculty members’, or staff members’ access to, or observation of, ideas and opinions that they may find uncomfortable, unwelcome, disagreeable, or offensive.
- (h) Solicitation (or commercial speech) is defined to be any act or event conducted for the purpose of financial or commercial gain to the vendor, individual(s), or organization(s), e.g. handing out promotional leaflets and placing signs on University property. Please refer to University [Regulation 3.011, Commercial Solicitation](#) for further information.
- (i) Weapon is defined as any item, including, but not limited to metallic knuckles, knives, swords, any dangerous chemical or biological agents, firearms, machine guns, starter guns, BB guns, stun guns, paintball guns, stun guns (Tasers), archery equipment, or any other object which will, is designed to, or may readily be converted to, expel a projectile by the action of an explosive; the frame or receiver of any such weapon; any firearm muffler or firearm silencer; any destructive device.

Specific Authority: Article IX, Section 7, Florida Constitution, Sections 1004.097, 1006.61, and 1012.80, Fla. Stat., Board of Governors Regulation 1.001. History–New 1-2-2018, Amended 7- 9-18, Technical Amendment (update footer) 1-9-19; September xx, 2024.



FLORIDA A&M UNIVERSITY
DIVISION OF AUDIT

ANNUAL REPORT

FY 2023-2024

PUBLISHED AUGUST 27, 2024

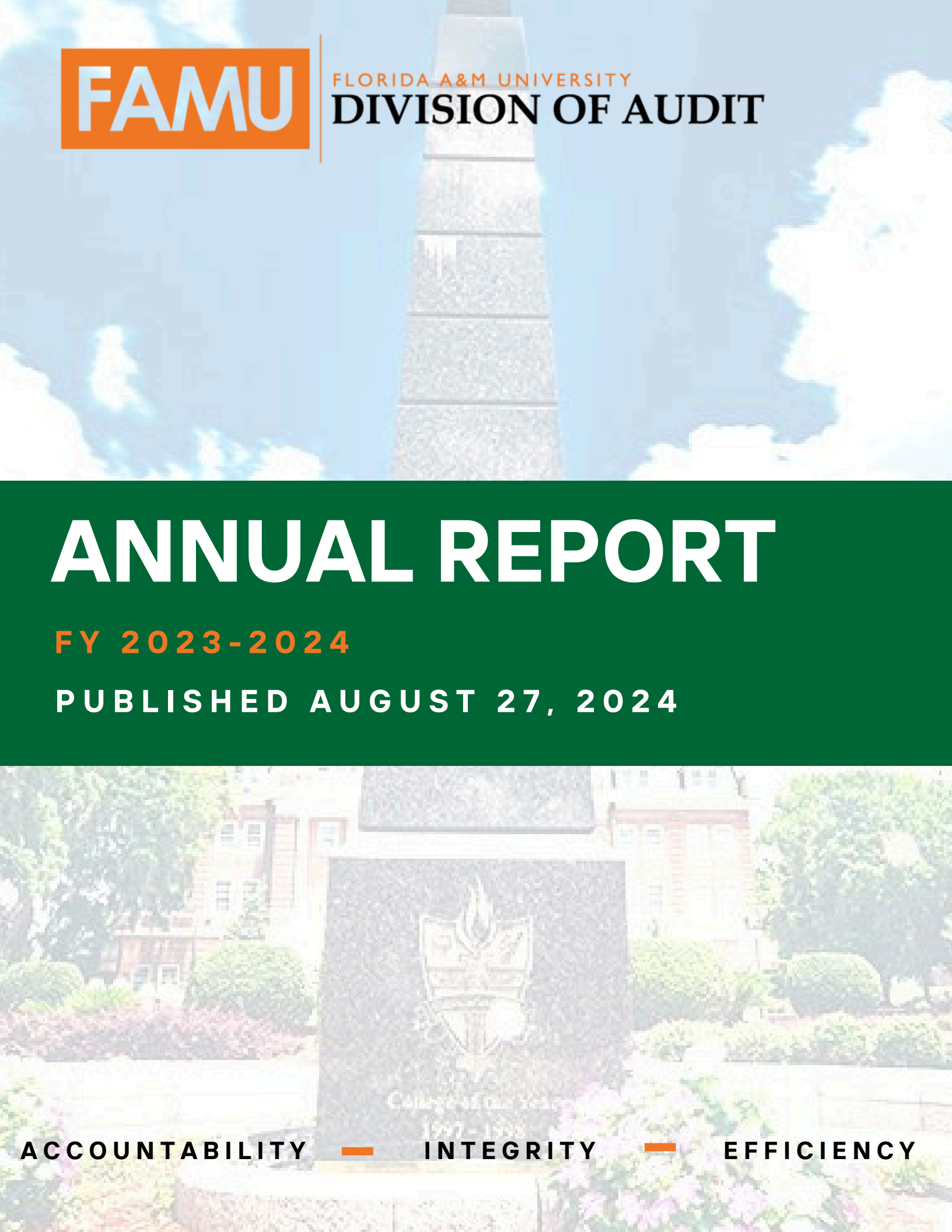
ACCOUNTABILITY



INTEGRITY



EFFICIENCY



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I N T R O D U C T I O N

The Division of Audit (DoA) is an independent and objective assurance and consulting activity that is guided by a philosophy of adding value to improve the operations of the University.

The DoA enhances and protects organizational value by providing risk-based and objective assurance and advice as follows:

- **AUDIT:** Provides independent, objective assurance and advisory activity designed to add value and improve university operations. Audit helps the university accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control, and governance processes.
- **RISK MANAGEMENT:** Facilitates the enterprise risk management (ERM) program by creating and maintaining the framework to effectively identify, assess, and manage enterprise risk. The role will not include supervision of the enterprise risk services department that administers the university insurance programs.
- **INVESTIGATIONS:** Investigates allegations of fraud, waste, and abuse. Additionally the Inspector General, reviews statutory whistle-blower information, designates whistleblowers, and coordinate all activities of the university as required by the Florida Whistle-blower's Act.

V I S I O N

We will be championed by our customers, benchmarked by our peers (counterparts), and dedicated to excellence in our products and services.

M I S S I O N

The Division's mission is to enhance and protect the value of FAMU and its stakeholders by providing excellence in risk-based and objective assurance, advice, and insight through the promotion of accountability, integrity, and efficiency.

A WORD FROM OUR LEADERSHIP

Greetings Rattler Nation,

We are pleased to present the FAMU Division of Audit Annual Report for the fiscal year ending June 30, 2024.

This year has brought many changes and achievements, thanks to our exceptional team.

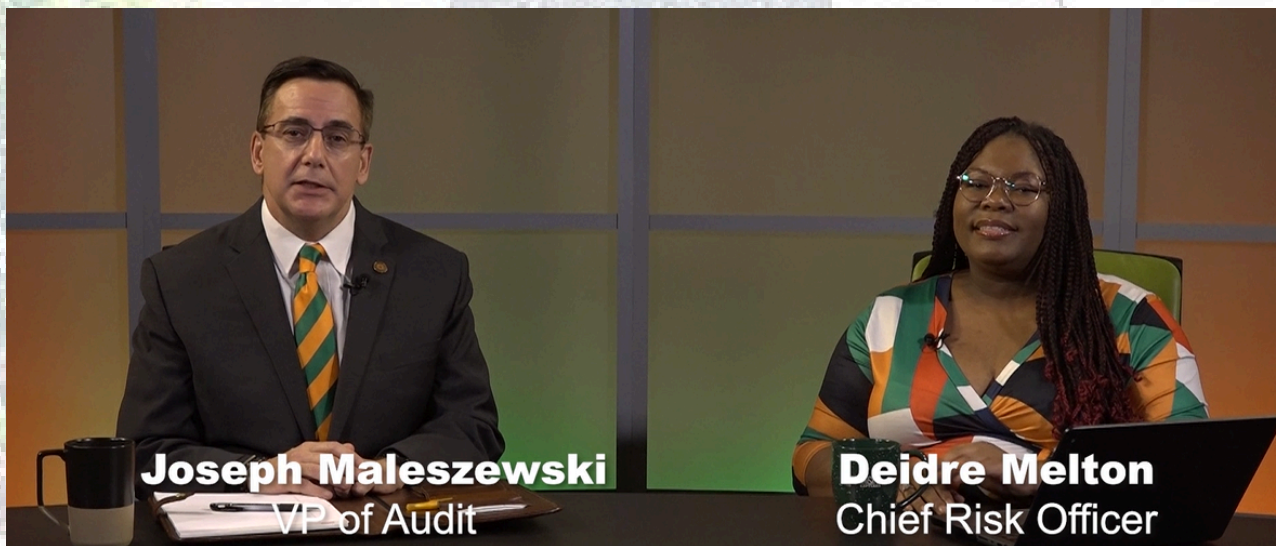
Our team continues to add value to FAMU by promoting accountability, integrity, and efficiency through excellence in auditing, advisory, investigations, management reviews, technical assistance, and Enterprise Risk Management.

We are excited to announce Deidre Melton's new role as Deputy Chief Operating Officer, while she continues as Chief Risk Officer, supported by Bill Knight and student interns. Congratulations, Deidre!

We also welcome Trystal Wright as our new Director of Audit. Congratulations, Trystal!

In addition to our work at FAMU, our staff has contributed to the profession and community, achieving numerous professional milestones and certifications.

We look forward to continuing our collaboration with FAMU leadership and the Board of Trustees to help the University achieve its mission.



Joseph K. Maleszewski

Deidre Melton

GOVERNING STANDARDS

The Division’s activities for audit (assurance), advisory, and investigative services are governed by the following professional standards:

GOVERNING BODY	STANDARDS	DIVISION SERVICES
 <p>The Institute of Internal Auditors</p>	<p><i>International Professional Practices Framework</i> published by the Institute of Internal Auditors, Inc.</p>	<p>Audit ✓ Advisory ✓ Investigation</p>
 <p>ISACA®</p>	<p><i>Information Technology Assurance Framework</i> published by Information Systems Audit and Control Association</p>	<p>Audit ✓ Advisory ✓ Investigation</p>
 <p>ASSOCIATION OF INSPECTORS GENERAL <small>Advancing Professionalism, Accountability & Integrity</small></p>	<p><i>Principles and Standards for Offices of Inspectors General</i> published by the Association of Inspectors General</p>	<p>Audit ✓ Advisory ✓ Investigation ✓</p>
 <p>STATE UNIVERSITY SYSTEM of FLORIDA Board of Governors</p>	<p><i>Standards for Complaint Handling for the State University System of Florida</i> published by the State University System of Florida</p>	<p>Audit Advisory Investigation ✓</p>

DIVISION SERVICES

In addition to the core services of audit, advisory, and investigation, the Division conducts management reviews and provides technical assistance.



AUDITS

We engage in audits of compliance, operations, information technology and financial procedures.



ADVISORY & CONSULTING

We provide a range of activities, including assessing proposed or existing processes, improving strategic and business objectives, analyzing controls, emerging risks, etc.



MANAGEMENT REVIEWS

Evaluations of management processes and systems for performance, continuous improvement, effectiveness, efficiency, and suitability of policies and objectives



TECHNICAL ASSISTANCE

Training (internal controls, fraud, risk), policy and process revisions and development, external audit liaison, business impact analysis, and risk identification.



ENTERPRISE RISK MANAGEMENT

We provide meaningful, actionable, timely strategic and performance risk intelligence to our stakeholders to enhance decision making and resource alignment while appropriately balancing risk and opportunity.



INVESTIGATIONS

We perform investigations into allegations of fraud, waste, abuse, and whistleblower disclosures. We also work in conjunction with other departments on referrals.

OFFICE HIGHLIGHTS

PARTNERSHIPS

We shared and exchanged best practices with our state and university partners through presentations and interactive roundtables, including the Department of Financial Services, Wayne State University, Howard University, the Board of Governors, and others.

INTERNS

Worked with the Office of Financial Aid to hire three part-time student interns through the Federal Work-Study Program to work with ERM staff. We had another student that was funded by the URMIA scholarship.

PROFESSIONAL DEVELOPMENT

Erica Thames demonstrated their expertise and experience through the attainment of the professional designation of Certified Fraud Examiner. Rasheedat McKay and Trystal Wright obtained the designation of Certified Inspector General Investigator.

TRAINING

Staff led a variety of training throughout the year internally to the FAMU community such as the President's Management Seminar, and externally to local and national professional organizations such as the Institute of Internal Auditors' IGNITE Emerging Leaders Conference.

LEADERSHIP

Several members of our staff serve as board members of many local and national professional organizations including Association of College and University Auditors, Association of Inspectors General, Institute of Internal Auditors, Association of Government Accountants, and ISACA.

AUDIT CHARTER

The Division of Audit updated the Audit Charter to add language around the Inspector General role to address requirements for training and accreditation.

DIVISION HIGHLIGHTS

MANDATORY AUDITS

We completed all Florida Board of Governors (BOG) mandatory audits. This year was the first year the BOG implemented an audit of the Post-Tenure Review process. The Division of Academic Affairs did an excellent job at creating a framework and methodology of the process. Our Performance Based Funding Data Integrity Audit was also successful. We met all objectives outlined in the BOG regulation.

FAMU FUNDAMENTALS

The Division of Audit created a video for FAMU's annual mandatory training FAMU Fundamentals. Our video was called Fraud Stoppers and included helpful information about the different types of fraud in an entertaining way.

[CLICK HERE TO WATCH THE VIDEO](#)

PROFESSIONAL DEVELOPMENT

VP Joe Maleszewski conducted a training workshop with members of our Board of Trustees on Governance in Florida Higher Education.

ENTERPRISE RISK MANAGEMENT

The Enterprise Risk Management team declared February as ERM Month. The month's activities was planned completely by our student interns. We held a Jeopardy game with the University community, and hosted a Kahoot Game Night with students. We issued Risk Alerts to the Senior Leadership Team. We also completed our first cohort of the ERM Advisory Committee (ERMAC) comprised of representatives from the conventional operational risk domains.

SERVICE EXCELLENCE

Will Thomson plays a vital role in this initiative by serving as a Service Excellence trainer. He is responsible for educating the campus community on our service excellence philosophy, standards, and tools.

EXTERNAL AUDITS

Staff served as liaison for external audits such as the Financial Audit of our Direct Support Organizations and the Athletics Action Plan.

WHAT OUR CUSTOMERS ARE SAYING



Reginald Perry, Ph.D.
Associate Provost for
Academic and Faculty Affairs



Initially, we had concerns about the Division of Audit "looking over our shoulders" as we began to implement the new state mandated Post-Tenure Review process. However, we learned that their approach was very collaborative in nature, and by the end of their review, we welcomed their feedback. Their involvement definitely improved the final product.



As Provost, I have had the distinct pleasure of working closely with the Division of Audit. The Division's thorough and insightful audits have not only ensured compliance but have also provided valuable recommendations that have helped us enhance our processes and achieve our strategic objectives. I am continually impressed by their professionalism and dedication to our university's mission.



Allyson Watson, Ph.D.
Provost and
Vice President for
Academic Affairs



AUDIT SERVICES

During Fiscal Year 2023-2024, the Division of Audit completed two (2) audit projects listed below.



1

PERFORMANCE BASED FUNDING DATA INTEGRITY

In accordance with BOG Regulation 5.001, we verified the data submitted for Fall 2022, Spring 2023, and Summer 2023 academic semesters that supports the University's performance-based funding metrics 5, 6, 8, and 10; evaluated the University's processes for completeness, accuracy, and timeliness of performance-based funding data submissions; and reviewed other University actions that impact the University's Data Integrity Certification required by the Florida Board of Governors (FLBOG).

Issue Date: Jan. 19, 2024

Report ID: 23-24-0001

[VIEW FULL REPORT HERE](#)



2

POST-TENURE REVIEW

In accordance with BOG Regulation 10.003, Florida A&M University (the University) faculty underwent a comprehensive PTR of the last five years of performance. The purpose of this review was to ensure compliance with BOG Regulation 10.003 and its requirements, evaluate whether the PTR process is effective, and determine whether the process is aligned with university goals and priorities. As outlined in BOG Regulation 10.003, six (6) areas of the PTR process were tested for compliance.

Issue Date: Jun. 21, 2024

Report ID: 23-24-0002

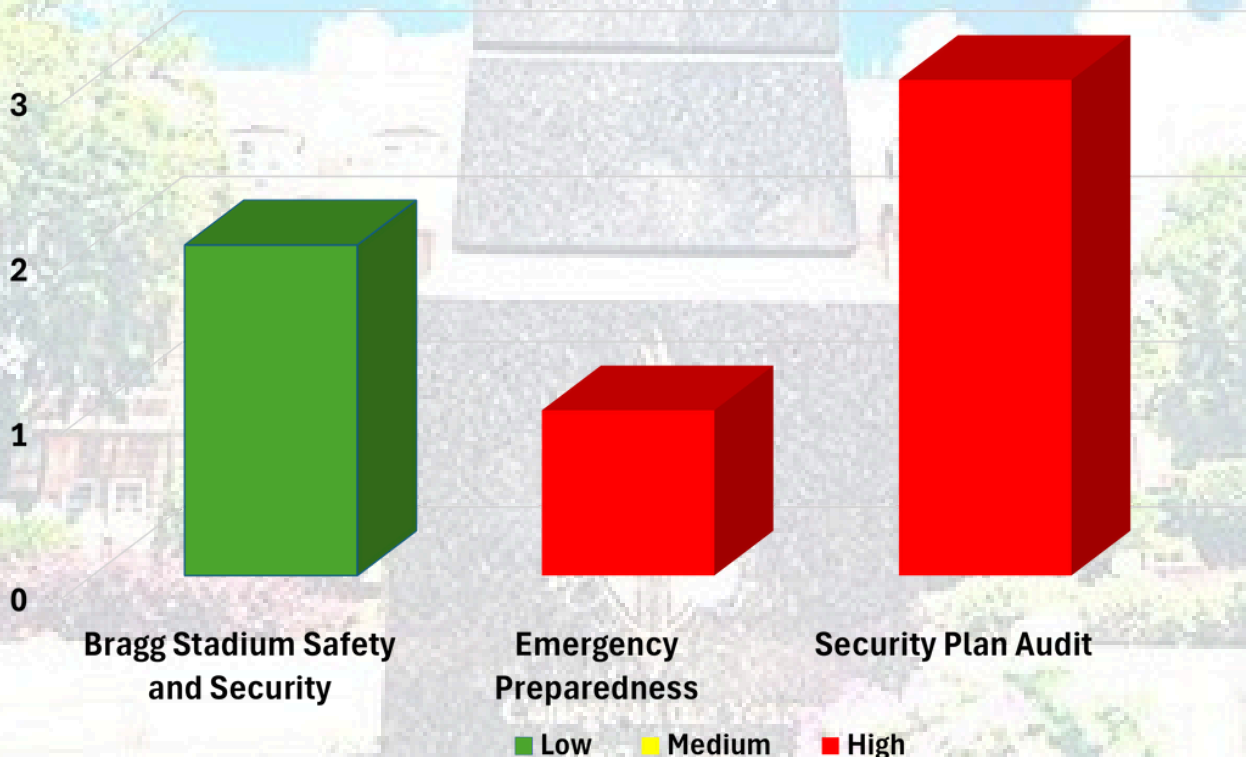
[VIEW FULL REPORT HERE](#)

AUDIT FOLLOW UP

Audit Follow-ups are completed for any outstanding audit findings disclosed in audit services and may be completed for other engagements, such as risk assessments. Audit follow-up reports are provided to the Board of Trustees Audit and Compliance Committee, the President, and the Senior Leadership Team on the status of implementation of corrective actions.

We began the year with 9 open audit issues spanning across our different engagement projects. To date, we only have 6 open issues. There are two on our Bragg Stadium Safety and Security project, one in Emergency Preparedness, and three from our confidential Security Plan Audit.

6 Open Audit Issues



EXTERNAL AUDIT ACTIVITIES

The external audit provides important and valuable insight regarding the policies, processes and internal controls that exist within the University.

The external audit report reinforces the credibility of the University's financial statements, general financial health, and its operational processes.

Here is a brief overview of the external audit that was conducted for FY 2023-2024:

AUDIT	OVERVIEW
FLORIDA AUDITOR GENERAL: FINANCIAL STATEMENTS AUDIT	<p>The Florida Auditor General performed the Financial Statement Audit for the period ending June 30, 2023, and issued an unmodified opinion.</p> <ul style="list-style-type: none">• Disclosed that the basic financial statements were presented fairly, in all material respects, in accordance with prescribed financial reporting standards;• Did not identify any deficiencies in internal control over financial reporting that were considered to be material weaknesses; and• Tests disclosed no instances of noncompliance or other matters that are required to be reported under Government Auditing Standards issued by the Comptroller General of the United States.

EXTERNAL AUDIT ACTIVITIES

The Florida Auditor General conducted audits of Financial and Federal Awards across the state, and had no adverse audit findings related to FAMU’s operations. Additionally, audits of the Florida Bright Futures Scholarship Program and the Florida Student Assistance Grant Program, covering institutions in the State University System and the Florida College System, also found no adverse audit findings related to FAMU’S operations.

The Florida Board of Governors Regulation 9.011 (5) states:

Support organizations shall provide for an annual audit conducted pursuant to university regulations or policies. The annual audit report shall be submitted to the university board of trustees for review. The audit report shall be submitted to the Board of Governors, and the Auditor General.

FAMU has three Direct Support Organizations (DSOs). An overview of the financial statement audits can be found below.

AUDIT	OVERVIEW
FAMU NATIONAL ALUMNI ASSOCIATION	Grayson Accounting and Consulting, an independent CPA firm, determined that the financial statements were presented fairly, with no material weaknesses in internal control or instances of noncompliance found.
FAMU RATTLER BOOSTERS, INC.	Grayson Accounting and Consulting, an independent CPA firm, determined that The financial statements were presented fairly, with no material weaknesses in internal control or instances of noncompliance found.
FAMU FOUNDATION, INC.	Watson Rice Accountants and Advisors, an independent CPA firm, determined that The financial statements were presented fairly, with no material weaknesses in internal control or instances of noncompliance found.

ADVISORY SERVICES

College of Pharmacy & Pharmaceutical Sciences, Institute of Public Health Advisory: Faculty & Student Experience

The FAMU Institute of Public Health (IPH) was created by the 1995 Florida Legislature with the mission of improving the health status of Florida's poor and underserved. The IPH offers the Degree Programs of the Master of Public Health (MPH) and the Doctor of Public Health (DrPH).

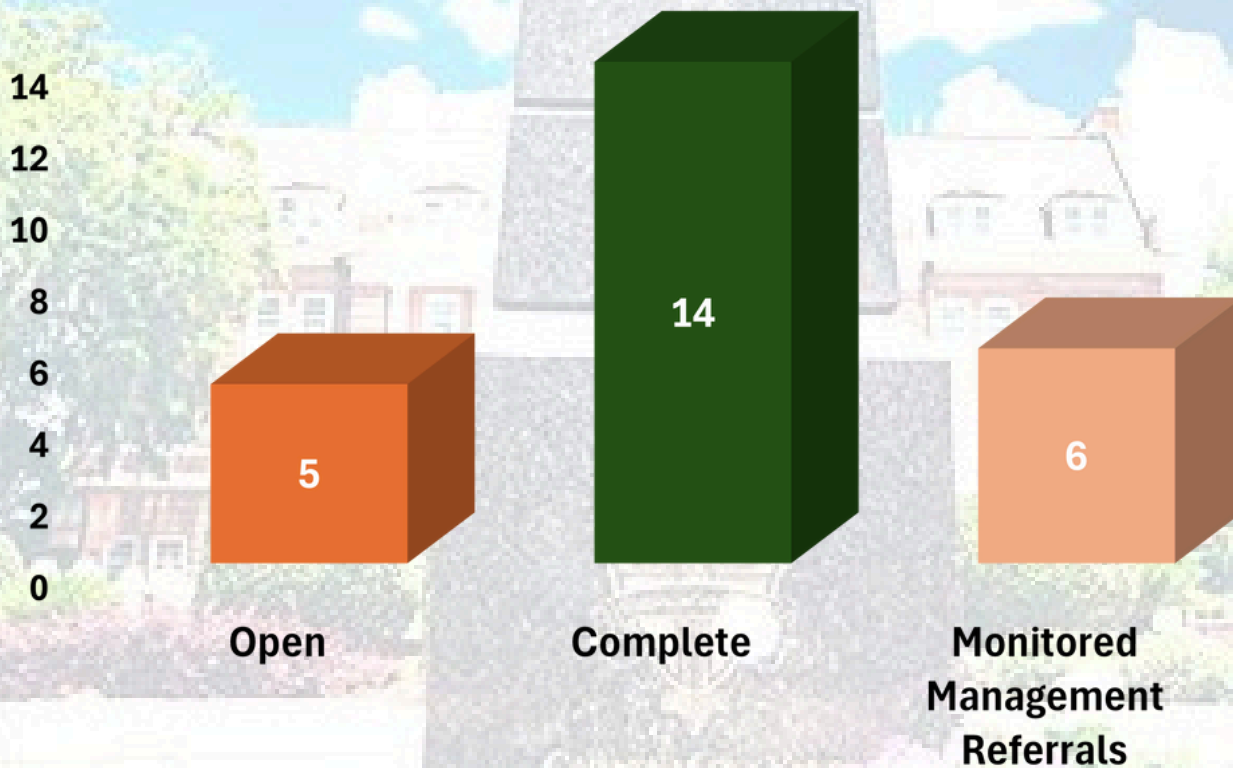
The purpose of this project was to evaluate students' and faculty experiences to identify opportunities to improve student success outcomes, faculty needs, and strategies that could enhance Performance Based Funding metrics, attainment of Strategic Plan goals, and our US News and World Report rankings.



INVESTIGATIVE SERVICES

Our office received 25 investigation inquiries throughout the fiscal year. Some of those complaints did not meet the investigative criteria and were referred to management for review and response. The remainder were assigned for investigation. Of these, we have completed and closed 14 cases. This following summary reflects the diligent progress and ongoing efforts of the DoA investigative endeavors.

**2023-24 Investigative Services
25 Complaints Received**

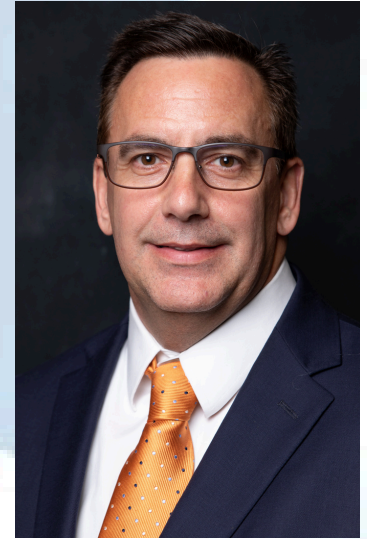


MEET THE TEAM

JOSEPH MALESZEWSKI

VICE PRESIDENT FOR AUDIT/ CHIEF AUDIT EXECUTIVE

Joe has over 30 years of experience serving in the field of internal and external auditing, investigations and information technology governance. As a result of his experience, he leads our University as Chief Audit Executive (CAE).



Engagement Responsibilities:

As CAE, Joe serves as the primary point of contact for whistle blower determinations and has final responsibility for investigations, audit, and advisory engagements. He reports functionally to the Board of Trustees, and functionally to the President.

He is responsible for ensuring that we operate in accordance to our Audit Charter and assess the various functions and controls of the University.

Experience:

Through his career at FAMU, beginning in 2019, Joe serves as a member of the President's Senior Leadership Team and has been an essential part in many of the operational improvements seen at the University.

Education:

Joe is an alumnus of Florida State University earning his Bachelor's in Finance in Marketing in 1989 and his Master's of Business Administration in 1991.

MEMBERSHIPS

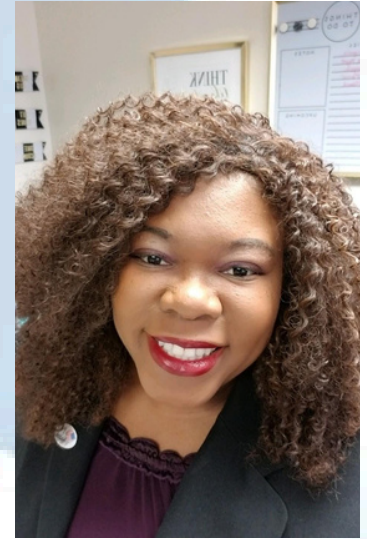
- ASSOCIATION OF INSPECTORS GENERAL
- INSTITUTE OF INTERNAL AUDITORS
- ASSOCIATION OF COLLEGE AND UNIVERSITY AUDITORS
- ASSOCIATION OF GOVERNMENT ACCOUNTANTS
- ASSOCIATION OF CERTIFIED FRAUD EXAMINERS
- INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION
- SOCIETY FOR CORPORATE COMPLIANCE AND ETHICS
- NATIONAL ASSOCIATION OF CONSTRUCTION AUDITORS
- FLORIDA AUDIT FORUM
- FLORIDA GOVERNMENT FINANCE OFFICERS ASSOCIATION
- FLORIDA STATE UNIVERSITY AUDITOR COUNCIL

MEET THE TEAM

DEIDRE MELTON

ASSOC. VICE PRESIDENT FOR AUDIT/ CHIEF RISK OFFICER

Deidre has over 18 years of experience serving in the field of internal auditing and information technology, and Enterprise Risk Management (ERM). As a result of her experience, she leads our University as Chief Risk Officer (CRO).



Engagement Responsibilities:

Deidre is the direct supervisor and reviewer for our audit and investigation engagements.

In 2021, President Larry Robinson appointed Deidre as Chief Risk Officer. She is the primary contact for our ERM program at the University and serves as Co-Chair of the ERM Advisory Committee (ERMAC).

Experience:

Beginning in 2014, Deidre began as an Auditor and Investigator. Since then, she has climbed through the ranks and has made many effective contributions to FAMU, and the internal audit field across the higher education realm.

Education:

Deidre is an alumna of Florida A&M University earning her both her Bachelor's and Master's of Science in Business Administration in 2005.

MEMBERSHIPS

- ASSOCIATION OF INSPECTORS GENERAL
- INSTITUTE OF INTERNAL AUDITORS
- ASSOCIATION OF COLLEGE AND UNIVERSITY AUDITORS
- ASSOCIATION OF GOVERNMENT ACCOUNTANTS
- ASSOCIATION OF CERTIFIED FRAUD EXAMINERS
- INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION
- SIGMA GAMMA RHO SORORITY, INC.

MEET THE TEAM

NANCY SHEPHERD

LEAD SENIOR AUDITOR

Nancy has over 20 years of experience serving in the field of internal audit and accountancy. As a result of her experience, she serves our Division as Lead Senior Auditor.



Engagement Responsibilities:

Nancy has many years of experience in internal auditing and accountancy. She primarily serves as the lead auditor on our financial audits. With the new changes to the Global Audit Standards, she has developed the training program and created templates on implementation of the new Standards.

Experience:

Nancy came to our Division in 2023. She comes to us from the Florida Department of Transportation where she worked on special projects and was the External Audit Liaison.

Education:

Nancy is an alumna of the University of Chicago earning her Bachelor's in Economics in 1983. She is also an alumna of Indiana University earning her Master's in Accountancy in 2001.

MEMBERSHIPS

- ASSOCIATION OF INSPECTORS GENERAL
- INSTITUTE OF INTERNAL AUDITORS
- ASSOCIATION OF COLLEGE AND UNIVERSITY AUDITORS
- ASSOCIATION OF GOVERNMENT ACCOUNTANTS
- ASSOCIATION OF CERTIFIED FRAUD EXAMINERS

MEET THE TEAM

ERICA THAMES

SENIOR AUDITOR & LEAD INVESTIGATOR

Erica has nearly 10 years of experience serving in the field of internal auditing and investigations. As a result of her experience, she serves our Division as Senior Auditor and Lead Investigator.



Engagement Responsibilities:

Erica primarily serves as the lead investigator on our investigative engagements. She is a member of our triage committee, where she helps review cases submitted through our EthicsPoint hotline to determine which department should handle each case based on established criteria.

Experience:

Erica joined our team in 2022, from the Florida Department of Children and Families. There she served as Management Review specialist planning and leading audit engagements, risk assessments, and scoping audit plans.

Education:

Erica is an alumna of Florida State University earning her Bachelor's in Sociology in 1999. She is also an alumna of Walden University where she earned her Master's in Public Administration in 1999.

MEMBERSHIPS

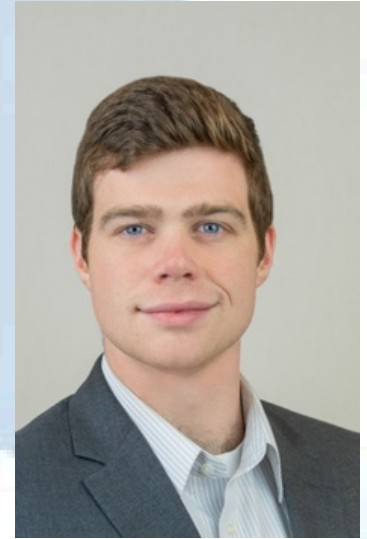
- ASSOCIATION OF INSPECTORS GENERAL
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- ASSOCIATION OF CERTIFIED FRAUD EXAMINERS
- INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION

MEET THE TEAM

WILLIAM THOMSON

SENIOR IT AUDITOR & INVESTIGATOR

Will, as he is affectionately called, has nearly 5 years of experience serving in the field of internal and external auditing of information systems. As a result of his experience, he serves our Division as Senior IT Auditor and Investigator.



Engagement Responsibilities:

Will primarily serves as lead auditor and investigator on our engagements of information systems, data privacy, and cybersecurity. He also serves on our Service Excellence Committee as a Trainer, and assists with our training video productions.

Experience:

Will joined our team in 2022, prior to that, he served as Senior Management Analyst I at the Florida Department of Agricultural and Consumer Services. There, he defined objectives and scopes for the IT and operational audits.

Education:

Will is an alumnus of Florida State University earning his Bachelor's in Information Technology in 2019.

MEMBERSHIPS

- ASSOCIATION OF INSPECTORS GENERAL
- INSTITUTE OF INTERNAL AUDITORS
- ASSOCIATION OF COLLEGE AND UNIVERSITY AUDITORS
- ASSOCIATION OF GOVERNMENT ACCOUNTANTS
- ASSOCIATION OF CERTIFIED FRAUD EXAMINERS
- INFORMATION SYSTEMS AUDIT AND CONTROL ASSOCIATION

MEET THE TEAM

TRYSTAL WRIGHT

LEAD SENIOR AUDITOR & INVESTIGATOR

Trystal has nearly 8 years of experience serving in the field of internal auditing. As a result of her experience, she serves our Division as Lead Senior Auditor and Investigator.



Engagement Responsibilities:

Trystal primarily serves as lead auditor and reviewer on our audit and advisory engagements. She is also the Editor-In-Chief of our quarterly newsletter, *The Audit Report*, and webmaster for our Division website.

Experience:

Trystal has been a member of our team since 2021, coming from the Department of Revenue as a Senior Management Analyst II. Her experience is in auditing management capabilities and operational procedures.

Education:

Trystal is an alumna of Florida A&M University earning her Bachelor's in Psychology in 2011.

MEMBERSHIPS

- ASSOCIATION OF INSPECTORS GENERAL
- INSTITUTE OF INTERNAL AUDITORS
- ASSOCIATION OF COLLEGE AND UNIVERSITY AUDITORS
- ASSOCIATION OF GOVERNMENT ACCOUNTANTS
- ASSOCIATION OF CERTIFIED FRAUD EXAMINERS

MEET THE TEAM

WILLIAM KNIGHT

ENTERPRISE RISK MANAGEMENT COORDINATOR

Bill, as he is affectionately called, has over 15 years of experience serving in the field of internal auditing and Enterprise Risk Management. As a result of his experience, he serves our Division as Enterprise Risk Management Coordinator.



Engagement Responsibilities:

Bill is the primary contact for our Division Assessment Report. He also supervises our ERM interns and coordinates risk functions and communications related to ERM for the university community.

Experience:

Bill became a member of our team in 2018 as an Internal Auditor and Investigator. In 2021, with the inception of the Enterprise Risk Management program, he was appointed as Coordinator.

Education:

Bill is an alumnus of Florida State University earning his Bachelor's in Finance in 1987.

MEMBERSHIPS

- ASSOCIATION OF INSPECTORS GENERAL
- INSTITUTE OF INTERNAL AUDITORS
- ASSOCIATION OF COLLEGE AND UNIVERSITY AUDITORS
- ASSOCIATION OF GOVERNMENT ACCOUNTANTS
- ASSOCIATION OF CERTIFIED FRAUD EXAMINERS

MEET THE TEAM

CRISENCIA BROWN

AUDITOR & INVESTIGATOR

Crissy, as she is affectionately called, has nearly 2 years of experience serving in the field of internal auditing. As a result of her experience, she serves our Division as Auditor and Investigator.



Engagement Responsibilities:

Crissy primarily serves as staff auditor on our audit and advisory engagements. She is currently working on two financial audits as she has many years of experience working in financial aid and higher education.

Experience:

Joining our team in 2022, Crissy has many years of experience in financial aid audit and compliance from the Florida State University Office of Financial Aid. She managed and coordinated federal, state, and institutional audit and compliance activities.

Education:

Crissy is an alumna of Florida A&M University where she earned her Bachelor's and Master's in Business Administration in 2017 and 2020 respectively.

MEMBERSHIPS

- ASSOCIATION OF INSPECTORS GENERAL
- INSTITUTE OF INTERNAL AUDITORS
- ASSOCIATION OF COLLEGE AND UNIVERSITY AUDITORS
- ASSOCIATION OF GOVERNMENT ACCOUNTANTS
- ASSOCIATION OF CERTIFIED FRAUD EXAMINERS
- NATIONAL BLACK MBA ASSOCIATION

MEET THE TEAM

RASHEEDAT MCKAY

AUDITOR & INVESTIGATOR

Rasheedat has a little over 1 year of experience serving in the field of internal auditing. As a result of her experience, she serves our Division as Auditor and Investigator.



Engagement Responsibilities:

Rasheedat primarily serves as staff auditor on our audit and advisory engagements. She also assists with supervising our interns, planning special projects and awareness campaigns.

Experience:

Rasheedat comes to our department from many different divisions at FAMU, including Student Affairs and Finance and Administration. Her expansive knowledge in higher education, are beneficial when engaging with other departments and stakeholders.

Education:

Rasheedat is an alumna of Florida A&M University earning her Bachelor's in Allied Health Sciences in 2015.

MEMBERSHIPS

- ASSOCIATION OF INSPECTORS GENERAL
- INSTITUTE OF INTERNAL AUDITORS
- ASSOCIATION OF COLLEGE AND UNIVERSITY AUDITORS
- ASSOCIATION OF GOVERNMENT ACCOUNTANTS
- ASSOCIATION OF CERTIFIED FRAUD EXAMINERS

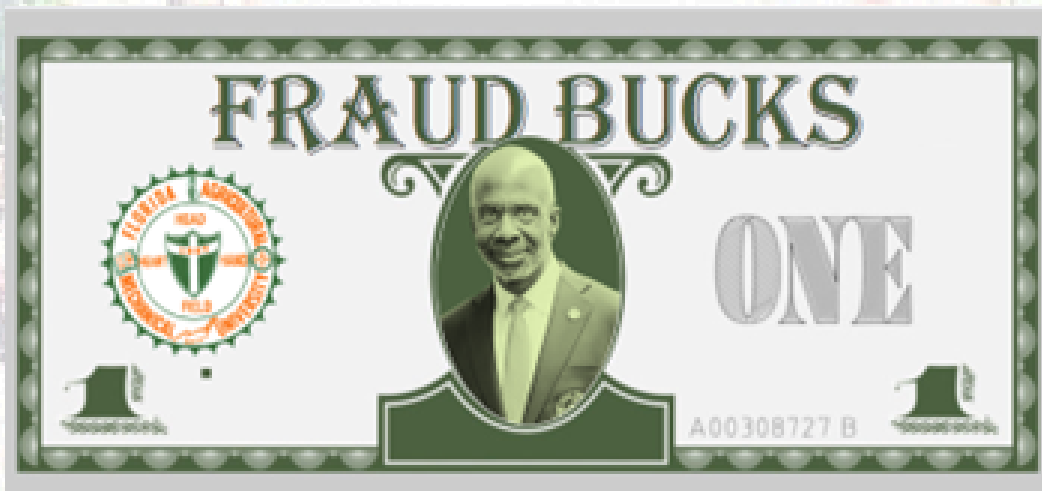
TRAINING & AWARENESS

FRAUD AWARENESS WEEK

In November 2023, the Division of Audit set the stage for an exhilarating International Fraud Awareness Week. With anticipation building, our team kicked off the festivities by unveiling a captivating video designed to educate viewers on the prevalent types of fraud that plague Higher Education. From embezzlement to falsified credentials, we left no stone unturned, equipping our audience with the tools to identify and thwart fraudulent activities.

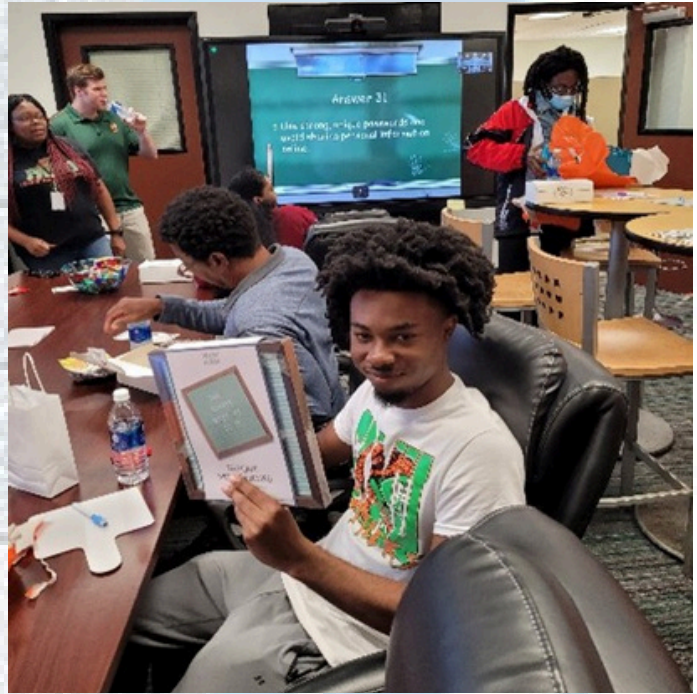
As the week progressed, we delved deeper into the subject matter with our virtual town hall, “Impacts of Fraud: Risky Business in Higher Education.” Our esteemed panel, featuring none other than our very own Chief Operating Officer, Dr. Donald Palm, alongside respected leaders from the State University System Virginia Kalil, an executive director and Chief Internal Auditor at the University of South Florida, and Roger Frank, University of Florida’s investigation director - provided invaluable insights. Together, they shed light on the intricate and far-reaching consequences of fraud within the realm of higher education, sparking meaningful dialogue and igniting a passion for accountability.

Wrapping up the week on a high note, we hosted a dynamic lunch and learn activity: “Are You Smarter Than a Fraudster?” Contestants, brimming with newfound knowledge from the kickoff video, town hall discussions, and daily flyers, eagerly put their expertise to the test. With each correct answer, they affirmed their status as individuals equipped to outsmart and outmaneuver fraudsters, ready to safeguard the integrity of our educational institutions.



TRAINING & AWARENESS

FRAUD AWARENESS WEEK



TRAINING & AWARENESS

ENTERPRISE RISK MANGEMENT AWARENESS MONTH

The ERM Team declared February as Enterprise Risk Management Awareness Month. This effort was run entirely by our student interns. The team developed three functions to raise awareness among students and staff. A ‘Student Game Night’ in the Villages brought students together to learn about FAMU’s ERM program and how it benefits them.

A Jeopardy-themed event for staff allowed for outreach and awareness of our ERM program.



FAMU ENTERPRISE RISK MANAGEMENT DIVISION OF AUDIT

FAMU brings to you the first annual Enterprise Risk Management (ERM) Awareness Month

EVENTS

FEB	20	STUDENT GAME NIGHT	7 PM - 8 PM	VILLAGE GAME DAY ROOM
FEB	28	ERM PANEL	2 PM - 4 PM	SENATE CHAMBERS
FEB	29	ERM JEOPARDY	12 PM - 2 PM	DOA CONFERENCE ROOM



ATTENTION FAMILY:
NEED ERM SERVICES?

FILL OUT OUR REQUEST FORM

Why wait when the Enterprise Risk Management Team is here to help!!!

Services Provided:
Risk Assessments - Risk Management Planning - Training and Education - Incident Management - Crisis Management - Strategic Planning - Budgeting

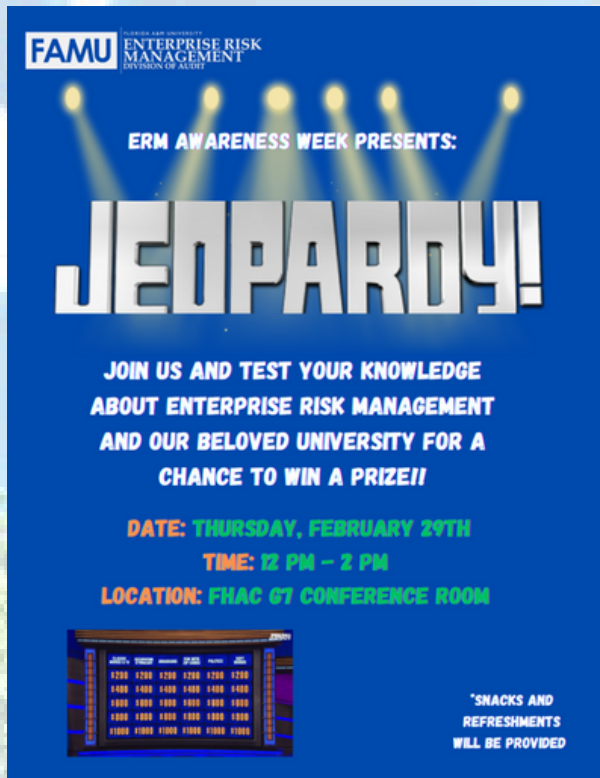
SCAN OR CLICK THE QR CODE NOW TO START!!



FAMU ENTERPRISE RISK MANAGEMENT DIVISION OF AUDIT

TRAINING & AWARENESS

ENTERPRISE RISK MANGEMENT AWARENESS MONTH




FAMU FLORIDA A&M UNIVERSITY
ENTERPRISE RISK MANAGEMENT
DIVISION OF AUDIT

ERM AWARENESS WEEK PRESENTS:

JEOPARDY!

JOIN US AND TEST YOUR KNOWLEDGE ABOUT ENTERPRISE RISK MANAGEMENT AND OUR BELOVED UNIVERSITY FOR A CHANCE TO WIN A PRIZE!!

DATE: THURSDAY, FEBRUARY 29TH
TIME: 12 PM - 2 PM
LOCATION: FHAC 67 CONFERENCE ROOM



*SNACKS AND REFRESHMENTS WILL BE PROVIDED



FAMU FLORIDA A&M UNIVERSITY
ENTERPRISE RISK MANAGEMENT
DIVISION OF AUDIT

Join us for ERM Awareness Week's

GAME Night!

Tuesday
Feb 20th
7pm

Village Gameday Room

*Snacks and refreshments provided



TRAINING & AWARENESS

INTERNAL AUDIT AWARENESS MONTH

This year, International Internal Audit Awareness Month looked different than past years. On May 10, 2024, the city of Tallahassee was impacted by three tornadoes. The natural disaster left our campus and community with significant damage. Our office arranged for a townhall featuring presidents from four HBCUs; FAMU, Edward Waters University, Virginia State University, and the University of the District of Columbia. Unfortunately, we canceled this event, but we plan to reschedule and host it on a much bigger scale. Instead of the townhall, we distributed infographics through FAMU's internal communication system, The Daily Venom with information about the field of internal audit.

FAMU FLORIDA A&M UNIVERSITY
DIVISION OF AUDIT

3 Ways to Have a Successful Audit Engagement

- Up to Date Policies & Procedures**
Having easy access to current policies and procedures helps us understand your department's activities and reduces the risk of errors or omissions during the audit. This saves time for everyone involved!
- Be Responsive**
Prompt responses to our questions and requests for information keeps the audit moving smoothly and efficiently. Delays can throw off our entire timeline.
- Implement Corrective Action Items**
Addressing audit findings promptly demonstrates your department's commitment to continuous improvement and a strong internal control environment.

**INTERNATIONAL INTERNAL
AUDIT AWARENESS MONTH**

TRAINING & AWARENESS

INTERNAL AUDIT AWARENESS MONTH



International Internal Audit Awareness Month

COMMON MYTHS ABOUT US



Myth: Internal audits are unnecessary if an organization has external audits.

Reality: External audits focus on financial reporting accuracy, while internal audits assess a wide range of operational, strategic, and compliance risks and controls.

Myth: Internal Audits are solely focused on finding faults.

Reality: Our primary goal is to add value and improve an organization's operations.

Myth: The internal audit function is an adversary of management.

Reality: Internal auditors work closely with management to identify and mitigate risks. They act as advisors, providing objective evaluations and recommendations to help management achieve its objectives more effectively.

WHAT ARE SOME MYTHS YOU THOUGHT ABOUT US? EMAIL US AT AUDIT@FAMU.EDU

International Internal Audit Awareness Month

When Should You Call Us?

May is International Internal Audit Awareness Month. We want to inform the University that we are here to help! See the information below to know when to give us a call.

Fraud

An attempt to obtain something valuable through intentional misinterpretation

Waste

Misuse of funds or resources through excessive or nonessential expenditures

Abuse

Intentional and unacceptable use of grant funds or misuse of one's position

ERM

Provide meaningful, actionable, and timely strategic and performance risk intelligence

Consulting

Assessment on the design of new processes, systems or departmental initiatives, assist with workflow mapping, and benchmarking for best practices



PROFESSIONAL DEVELOPMENT

POWER SKILLS LABS

Audit Sampling

August 2023

Crisencia Brown led a workshop on Audit Sampling for the staff. Audit sampling is a technique that allows auditors to evaluate a subset of data or transactions from a larger population, enabling them to draw conclusions about the entire set. This method is crucial as it allows auditors to efficiently assess the effectiveness of internal controls without examining every transaction, saving valuable time.

IIA Standards: Domains I-III

February 2024

Our Associate Vice President for Audit, Deidre Melton, coordinated and facilitated a roundtable discussion with the Internal Audit department staff of Howard University and Wayne State University. Each institution reviewed the new Global Audit Standards Domains I through III and discussed implementation and execution of the new guidelines.

Florida Whistleblower's Act

February 2024

DoA hosted a workshop led by Rebekah Weeks, Investigations and Audit Manager at the Florida Board of Governors. This workshop included staff from the University's Office of Compliance and Ethics, General Counsel, Equal Opportunity Programs, and staff from Florida State University Office of Audit and Advisory Services. The workshop consisted of content surrounding the applicability of the Florida Whistleblower's Act to State Universities and responsible parties.

PROFESSIONAL DEVELOPMENT

POWER SKILLS LABS

AIG Green Book Standards

This year, the Association of Inspectors General updated the Principles and Standards for Offices of Inspectors General, commonly known as the Green Book. We invited Brian Hunter, Special Counsel in the Executive Office of the Governor to inform our team of the updates to the Standards.

February 2024

Independence & Objectivity

As the new Global Audit Standards were released, we felt it necessary to freshen up on some of the basic foundations and expectations of internal auditors. Rasheedat McKay, led an interactive workshop with staff about the importance of maintaining independence and objectivity. The workshop included scenarios, and open discussion on what happens when we compromise our professionalism.

April 2024

Service Excellence

The Service Excellence Initiative at FAMU is grounded in the philosophy of inspiring excellence through kindness and exceptional service. William Thomson, Senior IT Auditor and Investigator, plays a vital role in this initiative by serving as a Service Excellence trainer. He is responsible for educating the campus community on our service excellence philosophy, standards, and tools.

April 2024

LOOKING AHEAD TO 2024-2025

DIVISION RESTRUCTURE

DoA is getting a new look! Our Enterprise Risk Management section will now be housed under the Office of the Chief Operating Officer. Deidre Melton will now have a new role as Deputy Chief Operating Officer and Associate Vice President of Enterprise Risk Management.

On the internal audit side, we have restructured our reporting model. We updated some of our team members' job duties to better suit the strengths and areas for growth they possess.

See our NEW Organizational Chart on the following page.



DIVISION OF AUDIT ORGANIZATIONAL CHART



Joseph Maleszewski
VP FOR AUDIT/CHIEF AUDIT
EXECUTIVE/INSPECTOR GENERAL



Debra Barrington
ADMINISTRATIVE ASSISTANT
TO THE VICE PRESIDENT



Trystal Wright
AUDIT DIRECTOR



Erica Thames
INVESTIGATIONS MANAGER



Rasheedat McKay
SPECIAL PROJECTS COORDINATOR
& INVESTIGATOR



Vacant
AUDIT MANAGER



Taytiana Smith
SPECIAL PROJECTS
INTERN



Jade Smoot
GRAPHIC DESIGN
INTERN



William Thomson
SENIOR IT AUDITOR
& INVESTIGATOR



Nancy Shepherd
LEAD SENIOR
AUDITOR



Crisencia Brown
AUDITOR &
INVESTIGATOR

2024-2025 AUDIT WORK PLAN



Board of Trustees (Mandatory)

- Athletics Financial Review - Fall 2024
- Athletics Financial Review - Spring 2024



Florida Board of Governors (Mandatory)

- Performance-based Funding Data Integrity Audit (Strategic Priority 4)
- Foreign Influence Audit (Strategic Priority 2)



Operational

- Controller's Office Control Self- Assessment (Strategic Priority 5)
- Campus Safety & Security (Strategic Priority 5)



Academic Affairs Advisory Services

- Colleges & Schools: Operations (Strategic Priority 5)



IT/Cybersecurity

- Cybersecurity Maturity Model Certification Level 1 Self- Assessment (Strategic Priority 2)
- IT Governance (Strategic Priority 5)



FAMU Committees

- Athletic Action Plan Implementation Team and Workgroup (Strategic Priority 5)
- Policy Advisory Committee (Strategic Priorities 1 - 5)
- Civil Discourse Committee (Strategic Priority 1 - 2)



Training and Awareness

- Fraud Awareness Week (Strategic Priority 5)
- Internal Audit Awareness Month (Strategic Priority 5)
- FAMU Fundamentals (Strategic Priority 5)
- FAMU Management Seminar (Strategic Priority 5)



DoA Services

- External Audit Coordination
- Investigative Services
- Management Requests
- Audit, Advisory, & Investigative Follow-up

THANK YOU!



1700 Lee Hall Drive
G7 Foote-Hilyer Administration Center
Tallahassee, Florida 32307



Phone: (850) 412-5479
Fax: (850) 561-2079



<https://www.famu.edu/administration/audit/index.php>



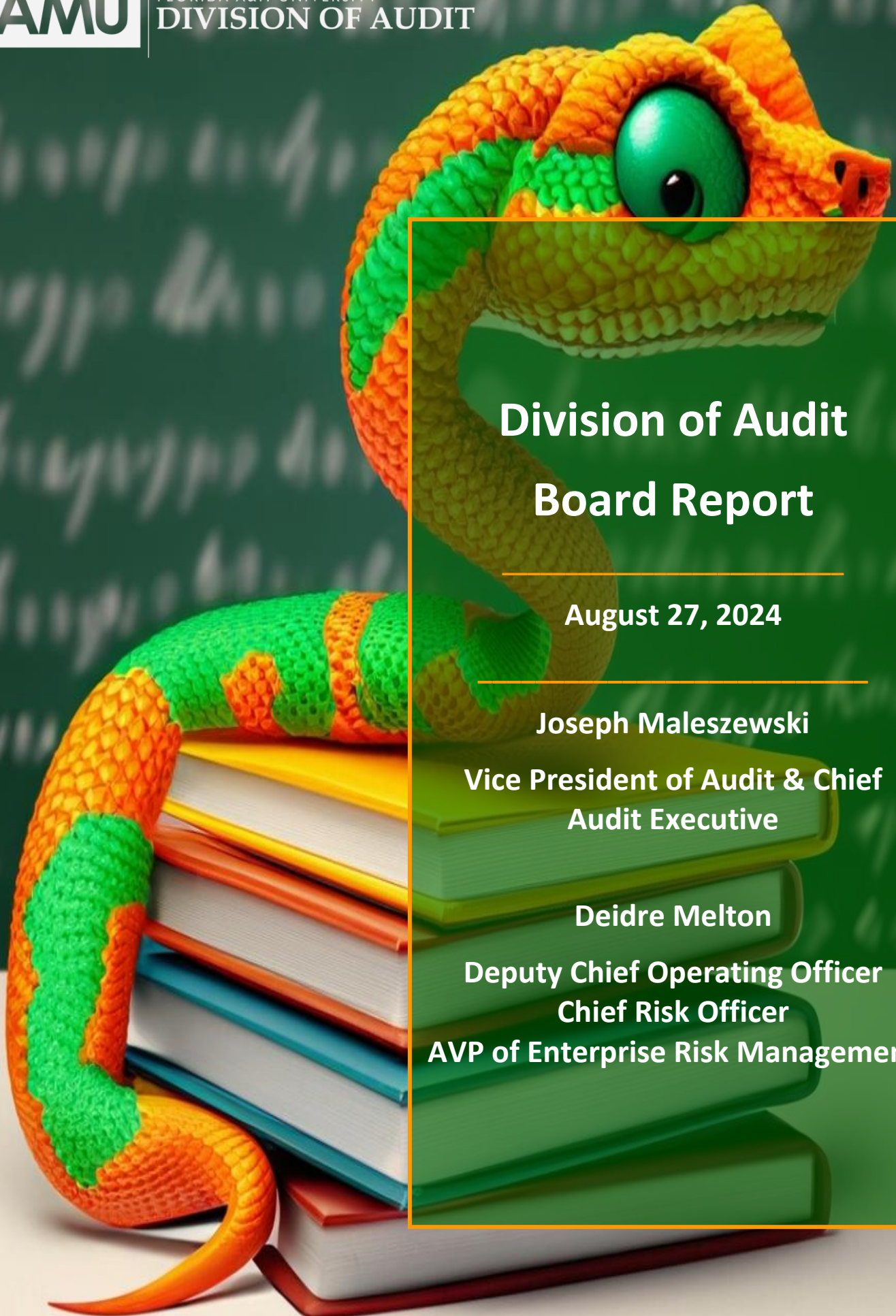
divisionofaudit@famu.edu



*"At FAMU, Great Things are
Happening Every Day!"*



FLORIDA A&M UNIVERSITY
DIVISION OF AUDIT



Division of Audit Board Report

August 27, 2024

Joseph Maleszewski

**Vice President of Audit & Chief
Audit Executive**

Deidre Melton

**Deputy Chief Operating Officer
Chief Risk Officer
AVP of Enterprise Risk Management**

Dear Esteemed Members of the FAMU Board of Trustees,

I am excited to submit materials for the upcoming September 11th Audit and Compliance Committee meeting. It has been an exciting year with many changes. Just today I submitted the FAMU Division of Audit Annual Report for the fiscal year ended June 30, 2024.

Our team continues to add value to FAMU and its stakeholders by promoting accountability, integrity, and efficiency through excellence in auditing (assurance), advisory and consulting, investigations, management reviews, technical assistance, and Enterprise Risk Management.

I look optimistically to the future for FAMU. Just a few years ago I reported that we launched the University’s Enterprise Risk Management program with Diedre Melton being designated the University’s Chief Risk Officer! We are now excited for Deidre Melton in her new position as Deputy Chief Operating Officer and AVP for Enterprise Risk Management where she will work closely with the University’s Executive Vice President and Chief Operation Officer on several key university initiatives. Ms. Melton retains her role as the University’s Chief Risk Officer, responsible for identifying, evaluating, and mitigating risks that could impact the University. She is supported in this role by William “Bill” Knight, ERM Coordinator and student interns. Congratulations Deidre and we are excited to see how you contribute to this new role!

We are also excited to have promoted from within and welcome Trystal Wright to her new role as Director of Audit. Congratulations Trystal!

The Division of Audit team looks forward to working with FAMU leadership and Board of Trustees members to help the University meet its mission



Sincerely,

A handwritten signature in blue ink that reads "Joseph L. Melton".

Vice President for Audit and Chief Audit Executive



Embracing Innovation and Excellence in Audit and Enterprise Risk Management

Dear Board of Trustees Members,

I am pleased to report a significant advancement in our strategic approach to risk management at Florida Agricultural and Mechanical University (FAMU). The Office of Enterprise Risk Management is transitioning from the Division of Audit to the Office of the Chief Operating Officer. In my new role as Deputy Chief Operating Officer, I am committed to leveraging this shift to further integrate risk management principles deeply into the fabric of our university operations.

This transition is more than a structural change; it represents a pivotal enhancement in how we embed a culture of risk awareness across the university. By aligning risk management closer to our operational core, we aim to foster a more proactive, informed, and responsive environment. This strategic realignment will enable us to better anticipate, mitigate, and respond to risks, thereby safeguarding and advancing our institutional objectives.

Moreover, recognizing the critical role of governance in effective risk management, we are committed to enhancing our communication and collaboration with you, our esteemed board members. Our goal is to ensure you are well-informed of the high-risk areas that could impact our university, facilitating more strategic oversight and informed decision-making at the board level.

We are enthusiastic about the opportunities this change will usher in, and I look forward to working closely with each of you to cultivate a more risk-aware and resilient FAMU.

Thank you for your continued support and commitment to excellence at our university.



Warm regards,

Deidre Melton

Deputy Chief Operating Officer

Chief Risk Officer

Associate Vice President for Enterprise Risk Management



FLORIDA A&M UNIVERSITY
**ENTERPRISE RISK
MANAGEMENT**
DIVISION OF AUDIT

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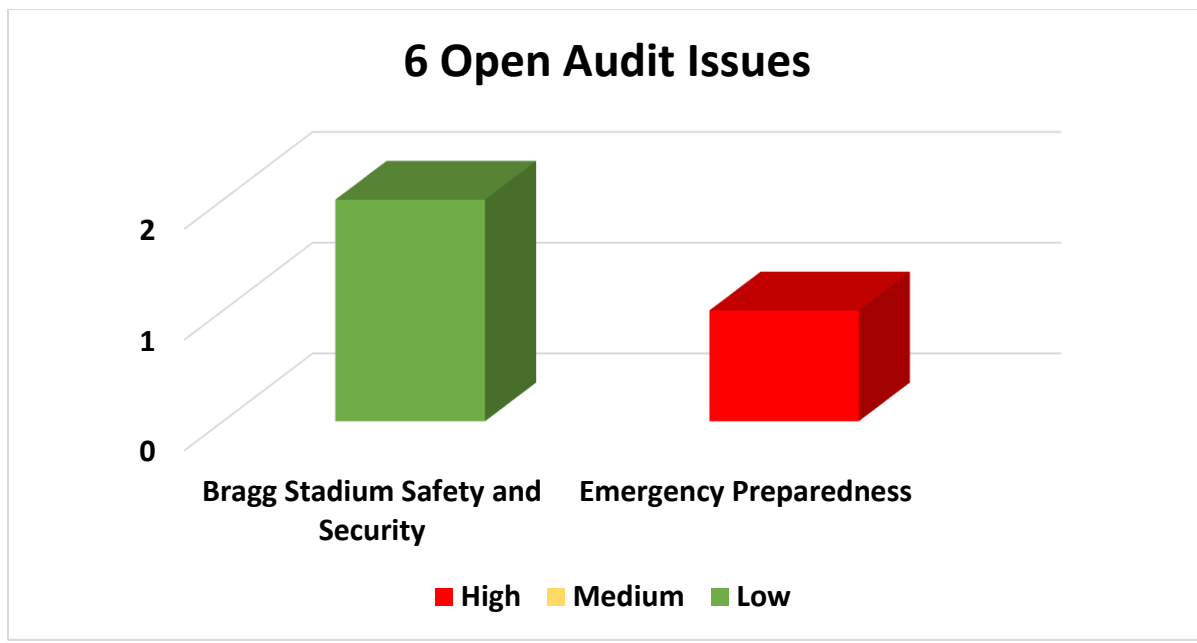


Internal Audit Activities

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.



Bragg Stadium Safety and Security (Open Issues: 2)

Executive Owner: Tiffani-Dawn Sykes, Vice President for Athletics/AD

- ADA Guardrail Compliance** - The height (in certain areas) and construction of the guardrails are not compliant, in accordance with the Florida Building Code: FBC-B 1015. The University is currently looking at the most cost-effective way to address this concern and is awaiting design and pricing from the consultant/general contractor. Until these areas are addressed, the Building code official recommended that the University install “caution signage” to bring awareness to the individuals seated in these areas. **(Status- OPEN; Risk Level- LOW)**

- **ADA Restroom Compliance** – Restrooms are not fully ADA compliant, in accordance with certain elements of Florida Building Code *Chapter 6: Plumbing Elements and Facilities*. The University is currently looking at the most cost-effective way to address this concern and is awaiting design and pricing from the consultant/general contractor. Until these areas are addressed, the University has contracted with a vendor to provide ADA accessible restrooms during events held at the stadium. **(Status- OPEN; Risk Level- LOW)**

Emergency Preparedness (Open Issues: 1)

Executive Owner: Keith Miles, Director of Communications

- **Establishing an Evacuation Plan** - The Evacuation Plan has been finalized with the supporting essential employee plan. The plan was updated on lessons learned from hurricane Ian. The crisis communication plan will need to be enhance based on feedback received during the May 23, 2023, hurricane table top exercise. **(Status- OPEN; Risk Level- HIGH)**

Security Plan Audit (Open Issues: CONFIDENTIAL)

Executive Owner: Robert Seniors, Vice President for Information Technology Services/CIO

- The referenced audit issues are considered confidential in accordance with [Florida Statute 1004.055 Security of Data and Information Technology in State Postsecondary Education Institutions](#). A detailed review of progress made on corrective actions taken to resolve issues identified during the 2022 Security Plan Audit will be provided to Board of Trustees members during the September 2024 Cybersecurity Closed Door Session. Board members are entitled to a one-on-one briefing prior to this meeting and can request a briefing by contacting Joseph Maleszewski, Vice President for Audit/CAE at joseph.maleszewski@famu.edu.

External Audit Activities

The Division of Audit functions as the University’s official liaison for external auditors to assist management with meeting the requests and understanding various audit requirements. We also monitor the implementation status of audit recommendations, including recommendations with long implementation timelines to ensure they are progressing.

The chart below provides an overview of external audits currently in-progress or recently concluded since our September 2023, report to the Audit and Compliance Committee.

Current Status of External Audits		
Audit	Current Status	Comments
<p><u>Florida Auditor General (AG)</u> Operational Audit (FYE 2024)</p>	Reporting	<p>The AG Operational Exit Conference was held Monday, August 26, 2024. There were four adverse audit findings, which include the following:</p> <ul style="list-style-type: none"> • 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. <p>There were also five issues of concern related to the following:</p> <ul style="list-style-type: none"> • 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.
<p><u>Thomas, Howell, Ferguson (THF)</u> Athletics Financial Statement Audit (FYE 2022 and FYE 2023)</p>	In-Progress	<p>THF audit fieldwork is currently in a holding period due to delays in THF’s ability to obtain the requested information from management.</p>

Current Status of External Audits		
Audit	Current Status	Comments
<u>Thomas, Howell, Ferguson (THF)</u> Athletics Agreed Upon Procedures (FYE 2023)	Pending	The next NCAA-required Operating and Capital Financial Data Report, is due January 15, 2025.

Florida AG Operational Audit (FYE 2024)

Executive Owner: Rebecca Brown, Vice President for Athletics/CFO

The issuance of recommendations from the AG Operational audit are pending issuance of the Preliminary and Tentative (P&T) Audit Report. Once the P&T is received, the University will have 30 days to provide an official response. The final Operational Audit Report published to the BOT will include the University's response.

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 Correct Actions for Open Advisory Issues since June 2023

Institute of Internal Audit Standards, [2500 – Monitoring Progress](#), requires the internal audit activity to monitor the disposition of results of consulting engagements to the extent agreed upon with the client. The Division of Audit monitors corrective actions only for recommendations accepted by management during the consulting engagement. Accepted recommendations and corrective action plans are confirmed by both the division vice president and chief operating officer for monitoring.

2022 Procurement Services

Executive Owner: W. Rebecca Brown, Vice President for Finance and Administration

- A total of 34 recommendations were agreed upon by Procurement Services management.
- Eleven (11) of those recommendations have been successfully implemented.
- Twenty-two (21) of the recommendations remain open, of which:
 - Five (5) expected implementation dates were extended to October 2024 and July 2025; and related to standardizing financial consequences in University contracts and efficient use of technology.
 - Five (5) had future implementation dates; two (2) by Fall 2024, two (2) by December 2024, and one (1) by Fall 2024 or Spring 2025; and related to p-card usage, creating a contract repository, including a financial consequence in contract clauses, training and oversight.
 - Seven (7) require an implementation date to be set; and are related to setting procurement goals, updating the Procurement and P-Card Manuals, and implementing IT controls and monitoring activities.
 - Four (4) require clarification or additional information; and are related to updating the Procurement and P-Card Manuals to enhance accountability, and updating P-Card and Contract Management Trainings.
- Two (2) of the recommendations are pending closure, as the Division of Audit assists Procurement Services with documenting cross-functional process workflows.

Remote Work - IT Controls (Open Recommendations: CONFIDENTIAL)

Executive Owner: Robert Seniors, Vice President for Information Technology Services/CIO

- The referenced advisory recommendations are considered confidential in accordance with [Florida Statute 1004.055 Security of Data and Information Technology in State Postsecondary Education Institutions](#). A detailed review of progress made on corrective actions taken to resolve issues identified during the 2022 Security Plan Audit will be provided to Board of Trustees members during the September 2024 Cybersecurity Closed

Door Session. Board members are entitled to a one-on-one briefing prior to this meeting and can request a briefing by contacting Joseph Maleszewski, Vice President for Audit/CAE at joseph.maleszewski@famu.edu.

Investigation Services

The Division of Audit (DoA) is authorized to perform investigations into allegations of fraud, waste, abuse, and whistleblower determinations and disclosures, pursuant to the Florida’s Whistleblower Act (Sections 112.3187-112.31895, Florida Statutes). The DoA manages cases, such as investigations, preliminary inquiries, and management referrals. Additionally, our team collaborates with other departments and external agencies on referral matters.

In accordance with the DoA Charter, investigation activities are required to conform to standards found in the *Principles and Standards for Offices of Inspector General* published by the Association of Inspectors General, and professional standards issued for the State University System of Florida entitled *Standards for Complaint Handling and Investigations for the State University System of Florida*.

The following information is designed to keep the Board of Trustees informed regarding DoA investigative activities.

DoA Investigative Workload - FY 2023-2024

During the 2023-2024 fiscal year, the Division of Audit received 30 complaints, resulting in cases, 24 of which have been closed. The information below provides details on the number of complaints received during FY 2023-2024 and their current status.



30

RECEIVED CASES – 2023-2024

- 6 Investigations
- 24 Management Referrals



6

FY 2023-2024 OPEN CASES

- 5 Active Investigations
- 1 Management Referrals



24

FY 2023-2024 CLOSED CASES

- 1 Investigations
- 23 Management Referrals



2

INVESTIGATION REPORTS ISSUED

- 1 Investigation
- 1 Carryforward External Investigation

DoA Investigative Workload - FY 2024-2025

As of August 27, 2024, the DoA received 12 complaints during the FY 2024-2025, and six (6) cases were subsequently closed.



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 Investigation Cases Breakdown

As of August 27, 2024, the Division of Audit has **25** open cases. Among these, 20 are active investigations, four (4) are management referrals, and one (1) case is currently in preliminary review. The table below summarizes the open investigative issues by type of concern.

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.*

OPEN CASES

#	Date Received	Case#	Allegation Description	Department	Executive Owner	Phase	Risk Level
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INVESTIGATIONS

1	6/23/24	2024-6-254	Referred from OCE: Employee misconduct and interference with student housing	OCE	Chief Compliance Officer Calhoun	Fieldwork	Low
2	7/19/24	2024-7-264	Employee misconduct: Timesheet and attendances fraud	Academic Affairs	Provost Watson	Planning	Moderate
3	7/26/24	2024-7-266	Employee Misconduct: Alleged P-card fraud	Student Affairs	VP Hudson	Fieldwork	Low
4	8/6/24	2024-Major Gift	Major Gift from Gregory Gerami, Batterson Farms Corporations, The Isaac Batterson Family 7th Trust	Division of University Advancement	Interim Vice President for Advancement/Director of the Foundation - COO Palm	Management Action Development	High

MANAGEMENT REFERRALS

1	6/11/24	2024-6-252	Alleged check fraud	Foundation	Interim Vice President for Advancement/Director of Foundation - COO Palm	Management referral DCSS	High
2	7/16/24	2024-7-256	Financial Matters	Academic Affairs	Provost Watson	Preliminary Review	n/a
3	7/23/24	2024-7-262	Censorship of academic freedom	Academic Affairs	Provost Watson	Management referral	Low
4	7/29/24	2024-7-267	Employees payroll checks redirects to fraudulent account	Finance and Administration /HR	VP Rebecca Brown/Terrisa Brown	Monitoring	n/a
5	8/20/24	2024-8-274	Breach of Confidentiality	OCE	CCO Calhoun	Management referral	n/a

OUTSTANDING OPEN CASES – OVER 30 DAYS

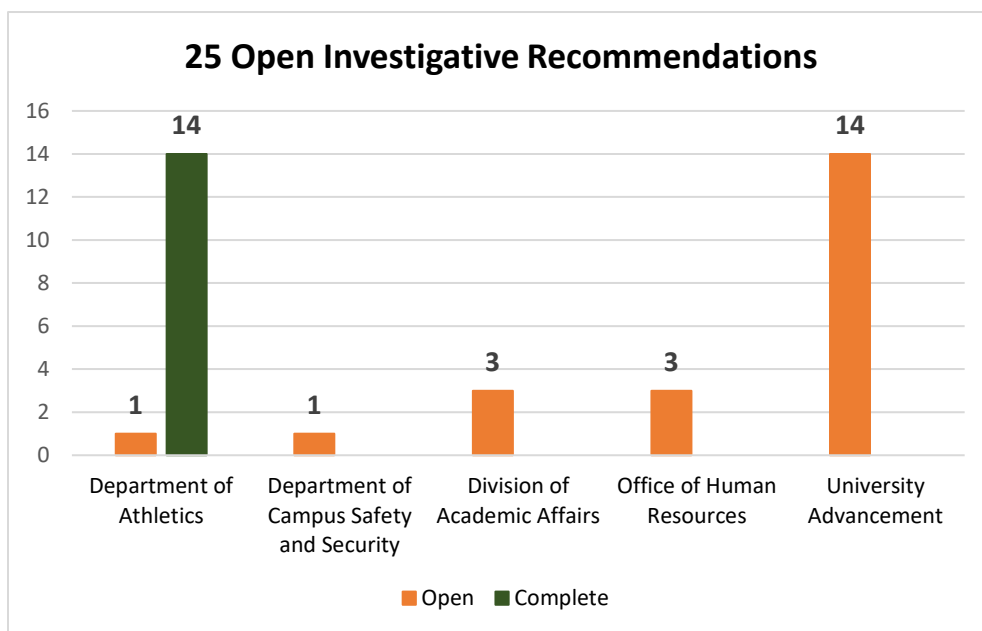
#	Date Received	Case#	Allegation Description	Department	Executive Owner	Phase	Risk Level	Days Outstanding
INVESTIGATIONS								
1	1/27/22	2022-1-71	Employee allegedly overly compensated	Title III	Dr. Erick Akins	Reporting	Low	>90 days
2	2022	2022-4-80	Contractors inappropriately compensated	Academic Affairs	Provost Watson	Fieldwork	Moderate	>90 days
3	3/1/23	2022-11-118	Employment complaint: Student Assignment & AOR credits	Academic Affairs	Provost Watson	Reporting	Low	>90 days
4	12/13/22	2022-12-119	Improper use of SGA funds and time abuse	President's Office	VP Hudson	Reporting	Low	>90 days
5	3/15/23	2023-3-137	Alleged fraud and altered Financial Aid records	Student Affairs	VP Hudson	Reporting	Low	>90 days
6	5/31/23	2023-6-ITS WB	Contracts - Confidential	n/a	Interim President Beard	External Inv Fieldwork	High	>90 days
7	7/13/23	2023-7-158	Inappropriate IT Director Designation used for CoPPS employee	Academic Affairs	Provost Watson	Fieldwork	Low	>90 days
8	7/21/23	2023-8-164 WB	Confidential	Academic Affairs	Provost Watson	Reporting	High	>90 days
9	1/31/24	2023-8-167 WB	Contracts - Confidential	Finance and Administration	VP Rebecca Brown	Fieldwork	Low	>90 days
10	9/21/23	2023-9-172	Timesheet and Attendance Fraud	Academic Affairs	Provost Watson	Reporting	Moderate	>90 days

MANAGEMENT REFERRALS

1	n/a	2022-10-111	Inappropriate ticket sells	Athletics	Interim AD Smith	Management referral	Moderate	>90 days
2	11/10/23	2023-11-200	Compensation complaint	Academic Affairs	Provost Watson	Management Referral	Low	>90 days

Status of Management Actions for Investigation Recommendations since May 2024:

DoA collaborated with management to understand the measures taken since the last report to the Audit and Compliance Committee. The table below summarizes the status of management actions.



Department of Athletics Inventory Management (1 Open Recommendation)

- **Develop and implement a method for tracking apparel that is given to University employees, and work with the Division of Finance and Administration to ensure proper reporting of apparel as additional income in accordance with IRS guidelines -** The Department of Athletics is in the process of meeting with the Division of Finance and Administration regarding the proper reporting of apparel based on IRS guidelines. **Status – Open; Risk Level - Moderate; Anticipated Completion – December 2024)**

Department of Campus Safety and Security Staffing Level (1 Open Recommendation)

Executive Owner: John A Cotton, Jr. Interim Chief, DCSS

1. **Evaluate campus security staffing levels -** DCSS has doubled its staffing levels. Currently, there are 27 administrative, patrol, SRO, and investigator positions, with 21 of those positions

filled. One additional hire is currently in the onboarding process. DCSS is committed to continuing the process of filling the remaining vacancies.
(Status – Open; Risk Level – **Moderate**; Anticipated Completion – December 2024)

Division of Academic Affairs (3 Open Recommendations)

Executive Owner: Dr. Allyson Watson, Vice President of Academic Affairs and Provost

Response due: **September 2, 2024**

1. Consult with Human Resources and the Office of General Counsel regarding appropriate actions to address late submission of Additional Employment Requests and unauthorized secondary employment.
(Status – Open; Risk Level – **Low**; Anticipated Completion – December 2024)
2. Improve Additional Employment Procedures and Processes.
(Status – Open; Risk Level – **Low**; Anticipated Completion – December 2024)
3. Require verification of Request for Approval of Additional Employment (RAAE) authorization.
(Status – Open; Risk Level – **Low**; Anticipated Completion – December 2024)

Office of Human Resources (3 Open Recommendations)

Executive Owner: Terrisa Brown, Interim Assistant Vice President of Human Resources

Response due: **September 2, 2024**

1. Implement procedures for providing resources and training to supervisors on the appointment, onboarding, evaluation, and offboarding requirements of each employee group classification.
(Status – Open; Risk Level – **Low**; Anticipated Completion – December 2024)
2. Assess the feasibility of documenting the start date and end date of the probationary period within the employee’s HR file and iRattler to be viewable by supervisors.
(Status – Open; Risk Level – **Low**; Anticipated Completion – December 2024)
3. Document the extension of an employee’s probationary period in the employee’s HR file and iRattler with the new start and end dates following an approved extension.
(Status – Open; Risk Level – **Low**; Anticipated Completion – December 2024)

Division of University Advancement (14 Open Recommendations)

On August 8, 2024, the Board of Trustees convened to discuss the issuance of the report from Buchanan Ingersoll & Rooney, PC. During the meeting, Interim President Timothy Beard committed to preparing an action plan, which will be presented to the Board at their September 11th-12th meeting. The plan will include specific dates and assignments to address the report’s fourteen recommendations listed below.

Executive Owner: Dr. Donald Palm, Executive Vice President, Chief Operating Officer, and Interim Vice President for University Advancement

Response due: **September 11, 2024**

1. Changes to FAMU Policies and Regulations

We **recommend** modifying FAMU Foundation Policies and Guidelines to place the determination for whether gifts over a certain threshold are in the “best interest of the University” at the sole discretion of the Foundation Board of Directors.

2. **FAMU Regulation Update**

We **recommend** clear language be added to Florida A&M University Regulation, Chapter 1.021, detailing the President's responsibility to provide timely and adequate information to the University Board of Trustees related to financial matters above a certain threshold.

3. **Confidential Records and Sunshine Laws**

We **recommend** finding legal counsel to reconcile this and raising the issue to the SUS Board of Governors. Consult with legal counsel to reconcile challenge[s] due to an apparent conflict that exists between the Florida Sunshine Law and the Florida Public Records Act as they relate to university donor anonymity. The Florida Sunshine Law allows for closed meetings of a university board of trustees for certain specified topics; however, this does not include for the purpose of preserving requests for anonymity by donors. The Florida Public Records Act, by contrast, allows for donors who wish to remain anonymous to preserve their anonymity by exempting their information from public records requests, giving universities the ability to deny public request for records that would jeopardize a donor's anonymity. These two statutes are difficult to harmonize where a board of trustees requires information about a donor to carry out its fiduciary duties because the Sunshine Laws requires non-exempt meetings be open to the public.

4. **Roles of Vice President for University Advancement and Executive Director of the Foundation**

- We **recommend** the Interim President evaluate separating the roles of Vice President for University Advancement and Executive Director of the Foundation into two distinct positions.
- Additionally, we **recommend** the University undertake an analysis of senior leadership reporting chains to ensure positions are staffed with qualified individuals that provide a strong framework of oversight and accountability. However, the Executive Director of the Foundation should continue to report directly to the President and the Foundation Board of Directors, as the head of a direct support organization.

5. **Communicate Foundation Position**

- We **recommend** the Foundation consider communicating its position in writing to the Donor to make clear the Foundation's position:
 - The Gift Agreement was never executed,
 - The transfer of stock was invalidated by the Carta, transfer agent, and
 - The stock certificates in the Foundation's possession have been canceled. As such, as of May 14, 2024, the University and the Foundation have no ownership interest in Batterson Farms Corporation nor any legal relationship with the Donor.

6. **Position Duties and Responsibilities**

We **recommend** the position descriptions be revised to highlight the importance of conducting accurate research on prospective donors. This due diligence need not be performed directly by the Assistant Vice President for University Advancement or Vice President, but these individuals should be required to know what tools are available for due diligence and when a due diligence request should be made. Additionally, specific responsibilities for ensuring compliance with due diligence protocols should be clearly outlined in their job descriptions to prevent future oversights and ensure the integrity of the donation process.

7. **Office of Advancement Training**

We **recommend** that all individuals in the Office of Advancement should receive appropriate training on this topic, including a requirement that due diligence to be conducted of all donors prior to accepting a gift. Due diligence should be a mandatory requirement for all donors, and derogatory information should be flagged and elevated to the vice president or executive vice president level for approval to proceed in accepting that donation.

8. **Foundation Policies**

A comprehensive policy needs to be created to anticipate and address different types of gifts, including private stock transfers. This policy should include:

- **Clear Guidelines for Various Gift Types:** Establish protocols for the acceptance of different types of gifts, including private stock, real estate, and other non-cash assets.
- **Due Diligence Requirements:** Mandate due diligence procedures for all types of donations, ensuring that the sources and nature of the gifts align with the University's mission and comply with legal standards.
- **Training and Education:** Provide training for Foundation leadership and relevant staff on the intricacies of private stock transfers and other complex donations.
- **Documentation and Compliance:** Ensure that all necessary documentation, including independent audits, appraisals, and IRS forms, are completed and maintained in compliance with legal and ethical standards.

9. Training

All individuals involved in the gift process should receive comprehensive training on the following:

- **Chain of Command:** Clear guidelines on the chain of command and when senior leadership should become involved in the gift process.
- **Due Diligence Procedures:** The requisite documentation required for due diligence and who is responsible for ensuring it is completed.
- **Documentation and Signatures:** Understanding who should sign the documents and at what stage.
- **Announcement Protocols:** When announcements of donations should be made to ensure all due diligence and approvals have been completed.

10. Foundation Board and FAMU BOT Oversight

To ensure the wealth of knowledge present on the Foundation Board of Directors and University Board of Trustees is fully utilized, it is paramount that leadership receive important information in a timely manner. Currently, the President must inform the University Board of Trustees to enter into settlement agreements at or in excess of \$250,000. There is no threshold for when the University Board of Trustees or the Foundation Board of Directors must be informed about donations. A similar threshold should be established for donations to ensure transparency and oversight.

11. EthicsPoint Reporting

Furthermore, there was a breakdown in the ethics notification process. The system itself and the administration thereof by the Office of Compliance and Ethics is sufficient. However, there remains an inefficiency in the process whereby individuals designated as recipient of hotline tips have no requirement to review the tips. Individuals received the notification about Mr. Gerami, but several did not open the notice. Each office should designate individuals responsible for reviewing and acknowledging ethics complaints to ensure they are addressed promptly and appropriately.

12. BOT Fiduciary Duties

The University Board of Trustees plays a critical role in providing fiduciary oversight to the University. To effectively fulfill their obligations, it is imperative that the University Board of Trustees not be excluded from information necessary for them to perform their duties. Excluding the University Board of Trustees from critical discussions and decisions undermines their ability to ensure the University's financial health, integrity, and compliance with legal and ethical standards.

13. Donor Confidentiality and Florida Sunshine Law

- To maintain the confidentiality of legitimate donors while ensuring comprehensive oversight, University policies should explore options to allow for closed sessions or individual briefings of the University Board of Trustees when discussing sensitive donation-related matters. This amendment will enable the University Board of Trustees to be fully informed and engaged in the decision-making process without compromising donor privacy.
- This recommendation may present a challenge due to an apparent conflict that exists between the Florida Sunshine Law and the Florida Public Records Act as they relate to university donor anonymity. The

Florida Sunshine Law allows for closed meetings of a university board of trustees for certain specified topics; however, this does not include for the purpose of preserving requests for anonymity by donors. The Florida Public Records Act, by contrast, allows for donors who wish to remain anonymous to preserve their anonymity by exempting their information from public records requests, giving universities the ability to deny public request for records that would jeopardize a donor's anonymity. These two statutes are difficult to harmonize where a board of trustees requires information about a donor to carry out its fiduciary duties because the Sunshine Laws require non-exempt meetings be open to the public. We recommend the Board of Trustees seeks legal counsel to reconcile this and raises the issue to the SUS Board of Governors.

- Furthermore, the FAMU Confidentiality Agreement, which existed prior to this incident, lacks clarity regarding the extent and limitations of confidentiality. It remains unclear what type of counsel senior leadership received concerning the NDA or Confidentiality Agreement. The Office of General Counsel should revise this document to explicitly outline what discussions and disclosures are permitted, ensuring necessary transparency among university leadership.

14. NDA Training

Additionally, we recommend that the Office of General Counsel provide comprehensive training to appropriate staff about NDAs and the FAMU Confidentiality Agreement. This training should cover the scope of these agreements, the importance of transparency, and the circumstances under which information can and should be shared with the University Board of Trustees and other key stakeholders.

Audit Highlights

Staff Retreat

On June 5-6, 2024, we held our annual staff retreat, spanning two productive days. The first day began with an engaging icebreaker, where we played Jenga with questions written on the blocks, sharing personal insights as each brick was pulled. Sabrina Butler from the Office of the Chief Operating Officer then guided us through a culture assessment, providing valuable insights into our department's dynamics. We also took the opportunity to align our goals for the upcoming fiscal year, restructuring duties to better match each team member's strengths and areas for growth. With the implementation of the new Global Audit Standards this year, Deidre Melton led an informative workshop on the changes and how our department will adapt to them.

The second day was equally enriching, with each team member delivering presentations on their professional journeys, favorite quotes, and fun personal facts. We also celebrated our colleagues with superlative awards, as voted on by the staff. The retreat concluded with a Power Skills Lab on Microsoft Copilot, expertly led by Will Thomson, followed by an overview of our division's initiatives, presented by Rasheedat McKay.



PROFESSIONAL DEVELOPMENT

The Division of Audit prioritizes professional development of our team in alignment with the Boldly Striking Strategic Priority 5.1. *Enhance a culture that intentionally fosters building and engaging a high performing workforce and fortifies FAMU's status as an employer of choice.* Continuous education is vital for our staff to maintain the highest standards of professional competence and ensure the integrity of our operations. By prioritizing their growth and development, we enable them to conduct high-quality investigations and uphold our commitment to excellence.



Deidre Melton

Deputy Chief Operating Officer

Power Skills Lab – Expectations Model

Deidre Melton recently developed and presented an Expectations Model tailored specifically for our team. This comprehensive model outlines the expectations for various skills and principles, meticulously aligned with each leadership level within our department. It provides clear guidance on the competencies and contributions expected from team members at every stage of their leadership journey. By establishing these benchmarks, the model not only clarifies individual roles but also ensures that each level of leadership is equipped to effectively support and advance our department's goals.



William Thomson

Sr. IT Auditor & Investigator

Power Skills Lab - New Operating System, Workiva

Our office is in the process of implementing Workiva, a new operational project management system designed to enhance our efficiency and streamline our workflows. Leading this critical transition is our Senior IT Auditor and Investigator, Will Thomson, who has been diligently working to migrate all data from our old system to Workiva. His dedication ensures a smooth transition and minimal disruption to our operations. We are eager to explore the advanced features that Workiva offers and look forward to leveraging its capabilities to optimize our audit processes and further elevate our department's performance.



Joseph Maleszewski

Vice President for Audit

Association of Inspectors General (AIG) Institute

In August, Joe Maleszewski had the privilege of presenting at the AIG Institute in New York City, NY. He led several workshops, including a key session on Enterprise Risk Management tailored for the Inspector General, Inspector General Investigator, and Inspector General Auditor Institutes. Additionally, Joe stepped in on short notice to lead courses for the Inspector General Auditor track, covering Audit Follow-up, Use of Specialists, Audit Planning, and Audit Supervision. He took over these sessions in the absence of Erica Smith, Deputy Inspector General of the Jefferson Parish Office of Inspector General, who was unable to attend. Joe's expertise and leadership were well-received, and the attendees greatly appreciated the valuable insights he provided.

Employee of the Quarter



Bill Knight has been an integral part of FAMU since he joined the team in 2018 as an Internal Auditor and Investigator. His dedication and expertise quickly became evident, and in 2021, with the launch of the Enterprise Risk Management (ERM) program, Bill was the natural choice for Coordinator. In this role, he has excelled in overseeing our Annual Division Assessment Report and guiding ERM interns, ensuring they gain valuable experience and contribute meaningfully to our projects. Bill is also the creative force behind our ERM awareness and educational campaigns, driving initiatives that enhance the University's understanding and management of risks.

But Bill's contributions go far beyond his job description. He's the one who brings energy and positivity into the office with his infectious dance moves, a stash of sweet snacks, and a can-do attitude that's nothing short of inspiring. Bill is always the first to lend a hand, whether it's assembling new office furniture or stepping in to support a colleague. His commitment to teamwork and his ability to uplift those around him make him not just a coworker, but a friend to all. We're proud to recognize Bill Knight as our Employee of the Quarter—thank you, Bill, for all that you do!

Interns

Thanks to funding from the Spencer Educational Foundation, we were able to bring on Anthony Durden, a student from the School of Business and Industry (SBI), as a summer intern. Anthony worked closely with our Enterprise Risk Management (ERM) Coordinator, Bill Knight, gaining valuable hands-on experience in the field.

As we look ahead to the Fall semester, we are pleased to announce the continuation of Anthony Durden's internship through the Federal Work-Study Program. Anthony has been a valuable asset to our team, and we are excited to see his continued growth and contributions.

In addition to Anthony, we are thrilled to welcome two more Work-Study students to our department. Layla Frasier will be returning for her third year as an ERM Intern, bringing with her a wealth of experience and a deep understanding of our Enterprise Risk Management processes. Her continued involvement is sure to strengthen our efforts in this critical area.

We are also excited to introduce Taytiana Smith, who will be joining us as a Special Projects Intern. Taytiana will work closely with Rasheedat McKay on a variety of key initiatives across our division, providing essential support and fresh perspectives. We are confident that both Layla and Taytiana will make significant contributions to our team and help drive our mission forward.

We are also excited to welcome Jade Smoot as our new Graphic Design Intern, funded by the Office of Freshman Studies through the Strike Forward Initiative. Jade will play a key role in enhancing our creative efforts, contributing her skills to develop graphics and publications for both the Division of Audit and the Enterprise Risk Management team. Her work will be instrumental in elevating the visual impact of our communications and supporting our departmental goals.

ERM Activities

ERMAC Risk Managers Committee

The Risk Managers Sub-Committee, a constituent of the Enterprise Risk Management Advisory Committee (ERMAC), comprises not only representatives from the conventional operational risk domains but also includes delegates from the Office of Compliance and Ethics, as well as the Office of the Chief Operating Officer, who assume supportive roles within the committee's framework. The fundamental objective underpinning the existence of this sub-committee revolves around furnishing the University with a comprehensive and methodical approach for identifying, scoring, and mitigating potential hazards.

To this end, the representatives have conducted assessments of the risks germane to their respective areas. These endeavors have culminated in identifying the foremost risks necessitating immediate attention and mitigation. Presenting their findings before the entire committee, each representative has undergone a rigorous review, with subsequent inquiries and commentary from fellow committee members improving the collective understanding of the risks in question and their intricate interplay with other business units.

Working individually with each representative, we isolated the underlying root causes of the identified risks, consequences, and impacts. We formulated well-calibrated risk response actions through this analysis. Timelines for execution accompany each action. At this juncture, representatives are reporting back to the sub-committee on completed mitigation efforts of the identified risks. New risks have also been identified and added to the assessments.

Alerts on Emerging Risks

Through the diligent release of risk alerts and comprehensive reports, we steadfastly achieve our mission: To provide meaningful, actionable, and timely strategic and performance risk intelligence to our stakeholders.. Our concerted efforts in disseminating these critical insights embody our commitment to not only foresee emerging challenges but also to empower our stakeholders with the knowledge needed to navigate them effectively. As we present the highlights of recently released risk alerts we invite you to look at your own cybersecurity practices and how they can be strengthened.

Deepfakes in Higher Education



The "Deepfakes" risk alert addresses the emerging threat posed by deepfake technology, which uses artificial intelligence to create highly realistic but fake videos or audio recordings. This technology presents significant risks to the university, including potential damage to reputation, misinformation, and the spread of false or misleading content that could undermine trust within the campus community. The alert emphasizes the importance of increasing awareness about deepfakes, developing strategies to detect and counteract such content, and establishing clear guidelines for responding to incidents involving deepfakes. By proactively addressing this risk, the university can protect its integrity and ensure that its communications and reputation remain credible and trustworthy. ([View Full Risk Alert](#))

Airplane Wi-Fi Cyberattacks



The "Airplane Wi-Fi Cyberattacks" risk alert highlights the growing cybersecurity threats associated with the use of in-flight wi-fi, particularly for university employees and students who may access sensitive information while traveling. The alert outlines the risks of data breaches, unauthorized access, and the potential compromise of personal and institutional information due to vulnerabilities in airplane wi-fi networks. It emphasizes the need for heightened awareness and best practices when using in-flight internet, such as avoiding accessing confidential data and using secure connections. By addressing these risks, the university can better protect its community from cyber threats during air travel and maintain the security of its information assets.

([View Full Risk Alert](#))

Enterprise Risk Management Resources

ERM WEBSITE



RISK REPORTING
HOTLINE



ERM SERVICE
REQUEST



RESEARCH

FINANCE

CAMPUS
SAFETY

CYBER
SECURITY

Building Resilience Through Strategic Risk Management: 2024 Enterprise Risk Management Annual Report

TALENT
MANAGEMENT

ENTERPRISE

ACADEMIC
INTEGRITY

RISK

ATHLETICS

FAMU

FLORIDA A&M UNIVERSITY

ENTERPRISE RISK
MANAGEMENT
DIVISION OF AUDIT

CYBER
SECURITY

OPERATIONAL

STRATEGIC

REPUTATIONAL

INFORMATION
TECHNOLOGY

August 27, 2024

Message from the Chief Risk Officer

Dear Members of the FAMU Community,

As we reflect on the past year, I am proud to present the Annual Report for Enterprise Risk Management (ERM) at Florida A&M University. Our commitment to fostering a culture of proactive risk management and resilience has never been stronger. This year has underscored the importance of agility, foresight, and collaboration as we navigate an ever-evolving risk landscape.

At FAMU, we recognize that managing risk is not just about mitigating threats; it is about identifying opportunities to enhance our university's mission and achieve strategic objectives. Our ERM program is dedicated to integrating risk management into the fabric of our institution—ensuring that every decision is informed by a thorough understanding of potential risks and rewards.

Over the past year, our ERM efforts have focused on several key areas:

1. **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.
2. **Enhanced Risk Awareness:** Through education and outreach, we have worked to cultivate a heightened awareness of risk across all levels of the university. This includes our continued efforts to engage faculty, staff, and students in the identification and management of emerging risks.
3. **Resilience Building:** In partnership with various university departments, we have enhanced our capabilities to respond to unforeseen events and challenges. Our focus on building resilience has positioned FAMU to not only withstand potential disruptions but also to emerge stronger and more adaptable.
4. **Data-Driven Decisions:** Leveraging data and analytics, we have improved our risk assessment processes, enabling more informed decision-making across the university. This data-driven approach has allowed us to prioritize risks effectively and allocate resources where they are most needed.
5. **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. Together, we have built a stronger, more unified approach to risk management that benefits the entire FAMU community.

As we look ahead, our focus will remain on continuous improvement and innovation in our risk management practices. The challenges we face are complex and multifaceted, but I am confident that, together, we can navigate these challenges and turn them into opportunities for growth and success.

Thank you for your continued support and commitment to risk management at FAMU. Together, we will continue to build a resilient and thriving university community.



Warm regards,

Deidre Melton

Associate Vice President for Audit and Chief Risk Officer



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STAFF

Championing Resilience: The Role of the Chief Risk Officer in Shaping FAMU's Future

As Chief Risk Officer at Florida A&M University, Deidre's role has been instrumental in shaping a proactive and resilient risk management culture across the campus. By integrating risk management into strategic decision-making processes, she has worked to safeguard the university's mission while identifying opportunities for growth and innovation. Through collaboration with university leadership, faculty, and staff, she has diligently worked to enhance FAMU's ability to anticipate and mitigate risks, ensuring that FAMU remains a leader in academic excellence and community impact. Her commitment to fostering a culture of risk awareness and resilience has not only strengthened the university's defenses against potential threats but also positioned FAMU to capitalize on emerging opportunities, secure a thriving future.



Deidre Melton
Associate VP for Audit & Chief Risk Officer

Stewarding Resilience and Cultivating Future Leaders: The Impact of the ERM Coordinator



William "Bill" Knight, Jr.
ERM Coordinator

Bill plays a pivotal role at the university as the Enterprise Risk Management (ERM) Coordinator, where he significantly contributes to the institution's ability to navigate complex risks and safeguard its strategic objectives. His expertise in developing and implementing the ERM framework ensures that potential risks are identified, assessed, and mitigated effectively across various departments. By leading the ERM Internship Program, Bill not only enhances the university's risk management capabilities but also cultivates the next generation of risk management professionals. His impact is seen in the university's strengthened resilience and preparedness, positioning it to thrive in an ever-evolving landscape.

Empowering the FAMU Community: The Impact of ERM Interns on Campus Awareness and Education

Our ERM interns have played a crucial role in elevating risk management awareness across the FAMU campus. Their dedication and creativity were instrumental in the successful launch of ERM Awareness Month in February 2024, a month-long initiative that engaged the entire campus community, including students, faculty, and staff. Through workshops, presentations, and interactive activities, our interns educated the FAMU community on the importance of proactive risk management, fostering a culture of preparedness and resilience. Their efforts have significantly increased ERM visibility on campus, empowering individuals at all levels to actively participate in safeguarding our university's future.



Jeremiah Fisher



Layla Frasier



Dayton Harmon



Ahmaud Herman



MISSION & VISION



Mission Statement



To provide meaningful, actionable, and timely strategic and performance risk intelligence to our stakeholders to enhance decision making and resource alignment while appropriately balancing risk and opportunity.

Vision Statement



The FAMU ERM program strives to become a thought leader in enterprise risk management practices through development of innovative and cost-effective methodologies that integrates enterprise risk management practices into the culture and strategic decision-making processes of academic, student, and administrative functions within educational institutions.



MANAGEMENT INSIGHTS

Message from the Vice President of Audit

As I reflect on the past three years, I am proud of the significant strides we have made in establishing and growing the Enterprise Risk Management (ERM) program within the Division of Audit. From its inception, our goal has been to build a robust and respected ERM function that not only identifies and mitigates risks but also enhances the university's ability to achieve its strategic objectives. I am pleased to say that our efforts have been successful, and the ERM program has become an integral part of our institution's governance framework.

Our journey began with a commitment to proactive risk management, and over the years, we have seen the tangible benefits of this approach. By issuing risk bulletins, facilitating ERM education through initiatives like FAMU Fundamentals, and fostering cross-silo collaboration, we have significantly enhanced the university's capacity to manage a wide range of risks. The feedback and engagement from our leaders have been invaluable in refining and improving the program.

The ERM program's impact is evident in the increased coordination, efficiency, and effectiveness across the university. We have established a solid process for prioritizing risks at the highest levels, filling critical gaps where risks were not previously mitigated, and providing essential guidance in areas such as emergency management, cybersecurity, and compliance. These efforts have not only safeguarded the university but also supported its growth and strategic initiatives.

As the ERM function transitions to the Office of the Chief Operating Officer, I am confident that it will continue to thrive and expand its influence. This move will allow for even greater integration of risk management with the university's operational strategy, leading to more comprehensive and effective risk mitigation efforts. I am particularly excited about the opportunities this presents for the ERM program to further mature and establish itself as a leader in higher education risk management.

I have every confidence that under the leadership of Deidre Melton, who will serve as both the Deputy Chief Operating Officer and Chief Risk Officer, the ERM program will continue to build on its strong foundation. The alignment of these roles will provide a unique perspective that will enhance our risk management practices and drive the university towards achieving its strategic goals.

I look forward to witnessing the continued growth and success of the ERM program as it enters this new phase. Thank you for your ongoing support and dedication to strengthening the risk posture of our university.



Joseph Maleszewski

Joseph Maleszewski
Vice President for Audit
Chief Audit Executive



Message from the Chief Operating Officer

As we reflect on the progress of our Enterprise Risk Management (ERM) program over the past year, I am filled with excitement and optimism for the future. This year marks a significant milestone for our university as we transition the ERM function from the Division of Audit to the Office of the Chief Operating Officer. This strategic move reflects our commitment to expanding the program's reach and impact across the university.

This transition allows us to enhance collaboration with leadership throughout the institution, ensuring that risk management is an integral part of our decision-making processes at every level. By embedding ERM more deeply into the fabric of our operations, we can better anticipate and address challenges, thereby strengthening the overall risk posture of the university.

I am particularly pleased to announce that Deidre Melton, our current Chief Risk Officer, will assume the role of Deputy Chief Operating Officer while continuing her responsibilities as Associate Vice President of Enterprise Risk Management. Deidre's dual role will foster a seamless integration of risk management with operational strategy, enabling us to approach risk from a holistic perspective. Her expertise and leadership will be instrumental in driving our vision forward, creating synergies that will benefit the entire university community.

The alignment of these roles presents a unique opportunity to elevate our ERM program, positioning it as a leading example of innovation and excellence in the higher education sector. Our vision is to mature the ERM program to not only meet but exceed the standards of best practice, ensuring that we are well-prepared to navigate the complexities of our evolving environment.

As we embark on this new chapter, I am confident that the enhancements we are making will have a lasting, positive impact on our institution. Together, we will build a stronger, more resilient university, ready to embrace the opportunities and challenges that lie ahead.

Thank you for your continued dedication and commitment to our shared goals.



Donald Palm

Donald Palm, Ph.D.

Executive Vice President & Chief Operating Officer
Interim Vice President for Advancement
Interim Executive Director of the FAMU Foundation

An illustration of a woman with dark skin, her hair styled in a large, elegant bun. She is wearing black-rimmed glasses, a dark blazer, a light green top, and an orange tie. She is holding a large, orange and yellow megaphone to her mouth, as if shouting or announcing something. The background is a soft, light green gradient. A dark green arrow-shaped banner points to the right across the middle of the image, containing the text 'RISK REPORTS' in white, stylized, serif capital letters.

RISK REPORTS

At Florida Agricultural and Mechanical University, our commitment to excellence is underscored by our proactive approach to managing the risks that could hinder our progress toward achieving strategic goals. The Enterprise Risk Management (ERM) program is dedicated to identifying, assessing, and mitigating the risks that could impact our university. One of the key tools we use to achieve this is our published risk reports.

These reports are designed to provide a deep dive into specific risks that pose significant challenges to the university. Each report is developed in close collaboration with management and key stakeholders, ensuring that we address these risks comprehensively and strategically. The reports include:

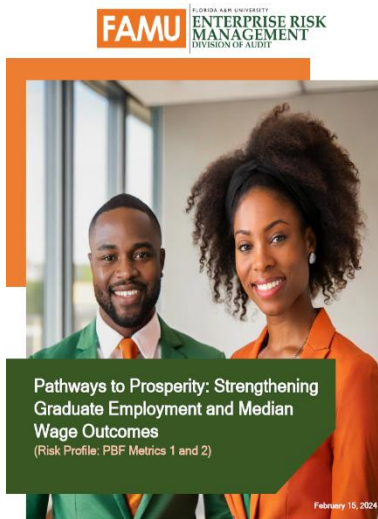
- **In-depth Analysis:** A thorough examination of the identified risks, including their potential impact on the university's operations and objectives.
- **Mitigation Strategies:** Collaboratively developed strategies with management to address and mitigate the identified risks, ensuring that we are prepared to tackle challenges proactively.
- **Key Risk Indicators (KRIs):** Identification of critical metrics for ongoing monitoring of the risks, enabling us to track progress and adjust our strategies as needed.

Navigating the Future: A Blueprint for Talent Management Excellence



The higher education sector is undergoing significant transformation, particularly in talent management, presenting both challenges and opportunities for institutions like Florida Agricultural and Mechanical University (FAMU). At FAMU, we view risks not as mere obstacles but as opportunities for improvement and innovation. This proactive approach is essential in a rapidly evolving landscape, ensuring that we attract, retain, and develop the talent needed to achieve our strategic goals. The university has identified ten key talent management challenges, including ensuring the availability of critical skills, optimizing succession planning, managing turnover, enhancing attraction and retention of high performers, and fostering better employee engagement. Addressing these challenges requires a strategic and resilient mindset, enabling us to navigate the future with adaptability and creativity, ultimately advancing towards our institutional goals with confidence. ([View Full Report](#))

Pathways to Prosperity: Risk Profile of PBF Metrics 1 and 2



In the increasingly competitive State University System of Florida (SUS), excelling in Performance-Based Funding (PBF) metrics, particularly those related to graduate employment rates and median earnings, is crucial for securing funding and maintaining a strong institutional reputation. This report identifies nine key risks that could impact Florida Agricultural and Mechanical University's (FAMU) performance in these areas, including managing brand integrity, economic downturns, and the effectiveness of career services. To address these challenges, the report outlines targeted mitigation strategies designed to position FAMU for long-term success and resilience. Key Risk Indicators (KRIs) such as graduate employment trends and entrepreneurial rates are essential for monitoring these risks and enabling proactive, data-driven decision-making. By understanding these risks and implementing effective strategies, FAMU aims to not only meet but exceed the benchmarks set by these critical PBF metrics, thereby enhancing the university's attractiveness to prospective students and ensuring that graduates are well-prepared for successful careers. ([View Full Report](#))



RISK ALERTS

The publication of risk alerts for emerging risks is a crucial component of our Enterprise Risk Management (ERM) program, aligning directly with our mission to provide meaningful, actionable, and timely strategic and performance risk intelligence to our stakeholders. These alerts serve as an early warning system, helping the university community stay informed about new and evolving threats that could impact our ability to achieve our strategic objectives. By proactively identifying and communicating these risks, we empower our stakeholders to make informed decisions, adjust their strategies, and allocate resources effectively, all while appropriately balancing risk and opportunity.

[Safety in Private Spaces Act](#)



The "Safety in Private Spaces Act" risk alert addresses the potential implications of recent legislation aimed at enhancing safety and privacy in various private spaces, particularly in higher education settings. The alert highlights the importance of understanding and complying with the new legal requirements, which may affect the university's policies and practices related to the use of restrooms, locker rooms, and other private areas. It underscores the need for the university to carefully assess its current facilities, procedures, and training programs to ensure alignment with the act's provisions, while also balancing the safety, privacy, and inclusivity needs of all students, faculty, and staff. The alert emphasizes that failure to comply with the act could lead to significant legal and reputational risks, making it essential for the university to take proactive measures in response to this emerging issue.

[\(View Full Risk Alert\)](#)

[Substitution for Work Experience](#)



The "Substitution for Work Experience" risk alert discusses the potential risks associated with recent trends and policies that allow for the substitution of academic credentials or other qualifications in place of traditional work experience in hiring and promotion decisions. The alert highlights concerns that this approach may lead to gaps in practical skills and real-world experience among employees, potentially affecting job performance and organizational effectiveness. It also stresses the importance of carefully evaluating the balance between academic qualifications and practical experience to ensure that the university maintains a competent and capable workforce. The alert urges the university to consider the long-term implications of such substitutions and to develop strategies that uphold high standards in recruitment and career advancement, thereby safeguarding the institution's operational excellence and reputation. [\(View Full Risk Alert\)](#)

[Mental Health of Students and Employees](#)



The "Mental Health of Students and Employees" risk alert emphasizes the growing concerns surrounding mental health within the university community, particularly in the context of increasing stress, anxiety, and burnout among students and employees. The alert highlights the potential risks to academic performance, workplace productivity, and overall well-being if these mental health challenges are not adequately addressed. It calls for the university to take proactive steps to enhance mental health support services, create a more supportive and inclusive environment, and reduce stigma around seeking help. By prioritizing mental health, the university can not only improve the well-being of its community members but also foster a healthier, more resilient institution better equipped to achieve its strategic goals. [\(View Full Risk Alert\)](#)

Free Speech



The "Free Speech" risk alert addresses the complexities and potential risks associated with maintaining free speech on campus, particularly in the context of higher education's commitment to fostering open dialogue and diverse viewpoints. The alert underscores the challenges of balancing the protection of free speech with the need to ensure a safe and respectful environment for all students, faculty, and staff. It highlights the potential for conflicts, protests, and reputational damage if the university is perceived as either too restrictive or too permissive in its approach to free speech. The alert calls for the university to review its policies, provide clear guidance, and engage in proactive communication and education efforts to navigate these challenges. ([View Full Risk Alert](#))

Value Perception of Higher Education



The "Value Perception of Higher Education" risk alert highlights the growing concern over the public's declining perception of the value of higher education, particularly in terms of its cost versus the return on investment for students. This trend poses significant risks to enrollment, funding, and the overall reputation of institutions like FAMU. The alert emphasizes the need for the university to proactively address these concerns by clearly communicating the tangible benefits of a college degree, enhancing student success initiatives, and demonstrating the university's commitment to affordability, quality, and career readiness. By taking these steps, FAMU can counteract negative perceptions, attract and retain students, and maintain its competitive position in the higher education landscape. ([View Full Risk Alert](#))

Deepfakes in Higher Education



The "Deepfakes" risk alert addresses the emerging threat posed by deepfake technology, which uses artificial intelligence to create highly realistic but fake videos or audio recordings. This technology presents significant risks to the university, including potential damage to reputation, misinformation, and the spread of false or misleading content that could undermine trust within the campus community. The alert emphasizes the importance of increasing awareness about deepfakes, developing strategies to detect and counteract such content, and establishing clear guidelines for responding to incidents involving deepfakes. By proactively addressing this risk, the university can protect its integrity and ensure that its communications and reputation remain credible and trustworthy. ([View Full Risk Alert](#))

Airplane Wi-Fi Cyberattacks



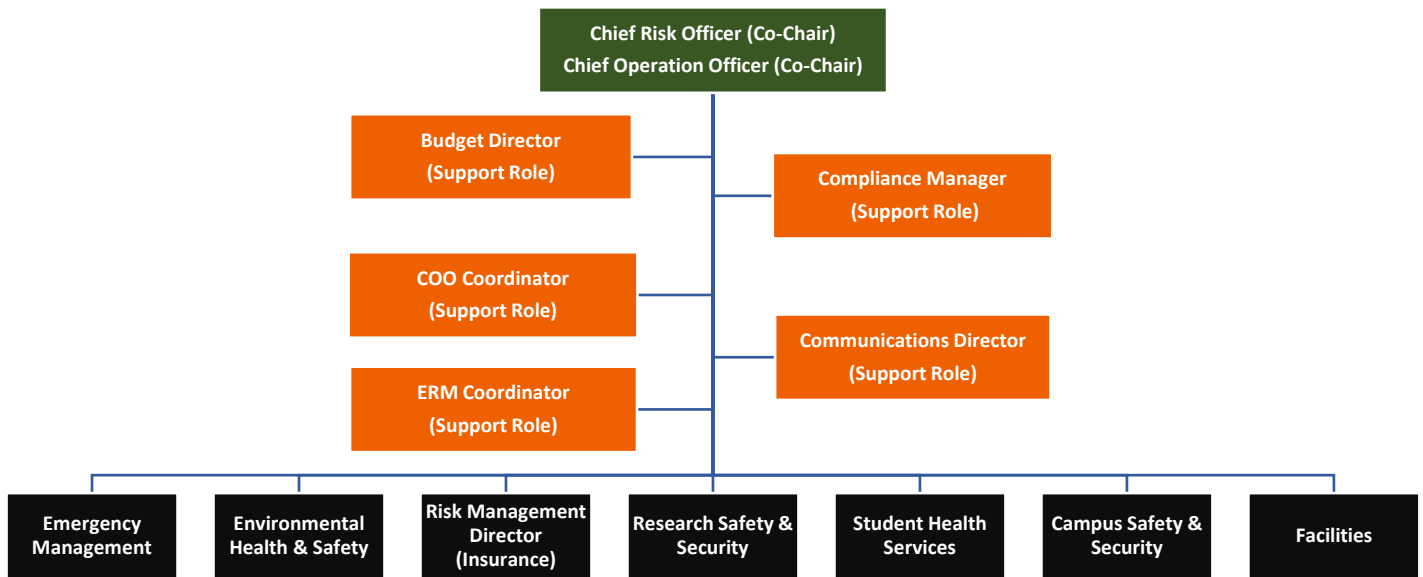
The "Airplane Wi-Fi Cyberattacks" risk alert highlights the growing cybersecurity threats associated with the use of in-flight wi-fi, particularly for university employees and students who may access sensitive information while traveling. The alert outlines the risks of data breaches, unauthorized access, and the potential compromise of personal and institutional information due to vulnerabilities in airplane wi-fi networks. It emphasizes the need for heightened awareness and best practices when using in-flight internet, such as avoiding accessing confidential data and using secure connections. By addressing these risks, the university can better protect its community from cyber threats during air travel and maintain the security of its information assets. ([View Full Risk Alert](#))



ERMAC COMMITTEE

ERMAC Risk Managers Sub-Committee and Its Expanding Impact on FAMU

The Enterprise Risk Management Advisory Committee (ERMAC) at Florida Agricultural and Mechanical University (FAMU) is at the forefront of the university's efforts to proactively manage risks and enhance campus safety. The ERMAC, particularly through its Risk Managers Sub-Committee, plays a crucial role in identifying, assessing, and mitigating risks that could affect the university's ability to achieve its strategic goals. This Sub-Committee is a diverse group that includes representatives from various operational risk areas, the Office of Compliance and Ethics, and the Office of the Chief Operating Officer, all working together to provide FAMU with a comprehensive and systematic approach to risk management.



Risk Assessments

Throughout the year, committee representatives have conducted assessments of the risks germane to their respective areas. These endeavors have culminated in identifying the foremost risks necessitating immediate attention and mitigation. Presenting their findings before the entire committee, each representative has undergone a rigorous review, with subsequent inquiries and commentary from fellow committee members improving the collective understanding of the risks in question and their intricate interplay with other business units. Working individually with each representative, the ERM team has isolated the underlying root causes of the identified risks, consequences, and impacts. We formulated well-calibrated risk response actions through this analysis. Timelines for execution accompany each action.

Key Highlights

The Risk Managers Sub-Committee continues to advance our Enterprise Risk Management (ERM) efforts, focusing on enhancing campus safety and addressing critical risks. Key initiatives include upgrading the Blue Light System, improving siren capabilities, and enhancing the public announcement system. We've identified the need to transition to a wireless blue light system, ensure dispatcher readiness, and improve lighting around blue light locations. Efforts are also underway to make the siren system audible across the entire campus and integrate it with our mass notification system. Significant progress has been made with the Everbridge System, including exploring underutilized features such as the SOS feature and desktop monitoring. We are also considering re-establishing the Safe Team (Student Escort Service) and addressing Clery Act compliance through updated maps and scheduled training.



TRAINING & AWARENESS

At FAMU, the importance of comprehensive risk management cannot be overstated. Our Enterprise Risk Management (ERM) program is dedicated to fostering a culture of proactive risk awareness and strategic decision-making across the entire campus. Through targeted training and awareness activities, we aim to equip our university community with the knowledge and tools necessary to identify, assess, and manage risks effectively. These initiatives are not just about mitigating potential threats; they are about empowering our students, faculty, and staff to take an active role in safeguarding the university's mission and ensuring its continued success.

Training and awareness activities are the cornerstone of our ERM efforts, serving as critical platforms for education and engagement. By providing tailored workshops, interactive sessions, and strategic discussions, we create opportunities for every member of our community to understand the vital role they play in the university's risk management framework. These activities help to embed risk awareness into the daily operations of the university, fostering a shared sense of responsibility and accountability. As we continue to expand our training and awareness initiatives, we are not only strengthening our university's resilience but also preparing our community to navigate an increasingly complex and dynamic risk landscape.

Privacy and Data Governance Workshop

What it means to be a Privacy Champion at FAMU

A "privacy champion" is an individual who advocates for, promotes, and supports strong privacy practices within an organization. This role isn't limited to a specific job title or department; rather, it's a function or responsibility that can be taken on by anyone passionate about privacy.

Champion Roles

- Leadership
- Advocacy
- Collaboration
- Problem-Solving
- Resourcefulness

During International Privacy Week on January 24, 2024, Chief Privacy Officer LaTonya Baker and Chief Risk Officer Deidre Melton joined forces to lead a pivotal workshop for the university's privacy and data governance leaders. This workshop was a critical platform for discussing the vital role of privacy champions within our institution and for developing strategic approaches to tackle the complex challenges of privacy and data governance risks. The session not only provided valuable insights and strategies but also issued a powerful call to action, encouraging leaders to take proactive steps in safeguarding sensitive information and reinforcing the university's commitment to privacy excellence. This collaborative effort highlighted the importance of unified leadership in addressing the ever-evolving landscape of data governance and privacy at FAMU.

Human Resources Outreach



On January 30th, we had the opportunity to engage with the Human Resources team during a staff meeting focused on the critical role of Enterprise Risk Management (ERM) at FAMU. During this session, we explored strategies to fortify the university's culture of strategic decision-making by deeply integrating ERM practices into everyday operations. Our discussion emphasized the importance of active engagement, continuous education, transparent reporting, and accountability across all levels of the institution. To ensure easy access to ERM resources, we provided a handout featuring three QR codes, conveniently linking staff to our website, the reporting hotline, and service request forms. This initiative not only reinforced the vital connection between ERM and Human Resources but also empowered staff with the tools and knowledge necessary to support FAMU's commitment to proactive risk management.

SLT Risk Workshop: Top Risk Mid-Year Update



A defining highlight of our ERM program this year was the Risk Workshop held on January 30th with our Senior Leadership Team. This collaborative session was instrumental in evaluating our progress on mitigating the university's top ten risks and in identifying new and emerging areas of concern. The workshop was not just a review; it was a forward-thinking dialogue that allowed our leadership to engage deeply with the challenges and opportunities that lie ahead. By fostering such strategic conversations, we ensure that our risk management practices remain agile, proactive, and aligned with the university's long-term goals, positioning FAMU to navigate the complexities of the future with confidence and resilience..

Enterprise Risk Management Awareness Month



In a dynamic effort to deepen campus-wide engagement with risk management, the ERM Team designated February as Enterprise Risk Management Awareness Month, an initiative spearheaded entirely by our dedicated student interns. These emerging leaders took the helm in designing and executing a series of innovative events aimed at raising awareness of ERM among both students and staff. The month kicked off with a vibrant 'Student Game Night' in the Villages, where students came together in a fun, interactive setting to explore how FAMU's ERM program directly benefits their university experience. Building on this momentum, a Jeopardy-themed event for staff provided an engaging platform to expand outreach and highlight the critical role of ERM in our daily operations. This awareness month not only showcased the creativity and initiative of our interns but also significantly advanced our mission to embed a culture of risk awareness across the FAMU campus.



RISK LANDSCAPE



In today’s rapidly evolving higher education environment, understanding and navigating the complex risk landscape is paramount to ensuring the long-term success and resilience of our university. At Florida A&M University (FAMU), we recognize that the challenges we face are multifaceted, ranging from faculty workload and mental health concerns to the ever-present threats of cybersecurity and financial management. Our comprehensive 2024 Risk Assessment has provided valuable insights into the most pressing risks confronting both our faculty and the university as a whole. These risks have significant implications not only for the day-to-day operations of our institution but also for our ability to fulfill our strategic goals and uphold our commitment to academic excellence. ([View Full Report Here](#))

Top 5 Faculty Risks	
1	Workload and Burnout
2	Mental Health and Well-being
3	Research Funding and Grant Competition
4	Academic Freedom and Censorship
5	Job Security and Tenure Uncertainty

Top 10 University Risks			
1	Staff and Student Mental Health	6	Campus Safety and Security
2	Talent Management	7	Organizational Change Management
3	Culture of Accountability	8	Human Resources Operations
4	Financial Management	9	Financial Aid
5	IT/Cybersecurity	10	Political Impact and Legislation

Through a collaborative process involving extensive surveys, horizon scanning, and strategic dialogues with our Senior Leadership Team, we have identified and prioritized the top risks that demand our immediate attention. This year, the spotlight is on critical areas such as staff and student mental health, talent management, and IT/cybersecurity, among others. These risks, if not adequately addressed, could impede our progress and affect the well-being of our community. As we delve into the details of these risks in this report, it is clear that proactive and strategic risk management is essential for maintaining the stability and growth of FAMU. By staying vigilant and responsive to the shifting risk landscape, we can continue to support our faculty, staff, and students in achieving their full potential while safeguarding the university’s future.



2024-2025 ERM WORK PLAN



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

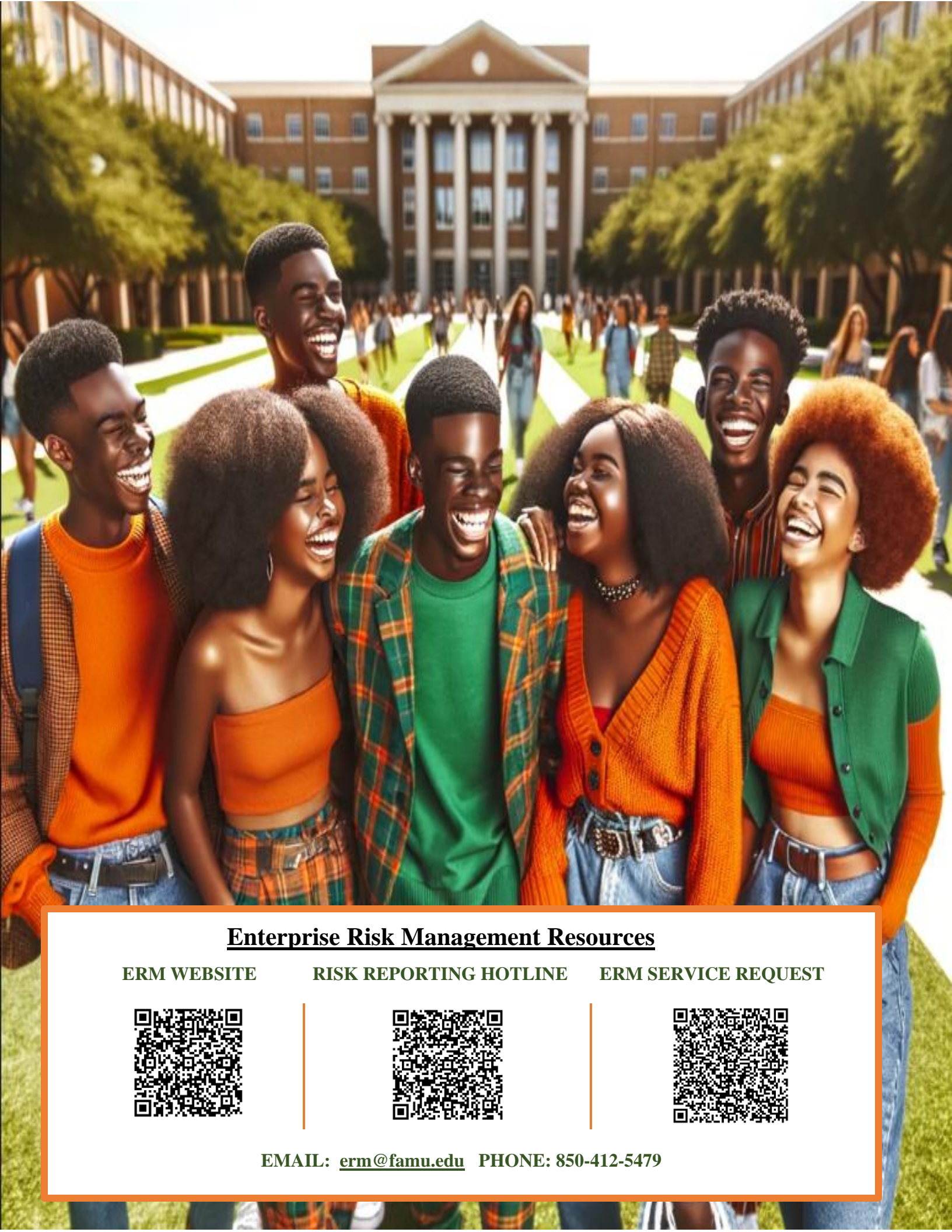
This year, we will prioritize the expansion of training and awareness initiatives across the university to deepen understanding and engagement with ERM principles. We will develop targeted training programs and awareness campaigns to equip faculty, staff, and stakeholders with the knowledge and tools 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.





Enterprise Risk Management Resources

ERM WEBSITE



RISK REPORTING HOTLINE



ERM SERVICE REQUEST



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