

**2019  
Annual Compliance  
Program Report**



# 2019 Annual Compliance Program Report

## CONTINUALLY ADVANCING A CULTURE OF COMPLIANCE

### Introduction

Compliance at A.T. Still University (ATSU) is the daily responsibility of all individuals and departments across the University who advance ATSU's mission, promote ethical conduct, keep employees and students safe, protect the resources and reputation of the University, respond to opportunities, and guard against threats on many fronts. ATSU's Compliance Program, led by the Office of Vice President & General Counsel (VPGC), brings together individuals and departments to communicate, collaborate, identify compliance challenges, and create solutions.

#### Emphasis on risk

The scope of regulatory compliance is both broad and deep. Organizations, corporations, and institutions of higher education of all types and sizes recognize the need for continual risk assessment, risk-tailored resource allocation, risk-based training, and risk-based processes incorporated into relevant vendor management. The practice of internal audits monitoring high-risk areas is a growing focus of ATSU's Compliance Program.

#### Emphasis on culture

Fostering a culture of compliance and ethics requires commitment from all constituents. ATSU's Board of Trustees, president, and senior leaders set the tone and model ethical conduct. Those charged with day-to-day oversight of compliance functions have the necessary processes and resources in place, and all stakeholders are aware of compliance responsibilities and report concerns or suspicious activity without fear of retaliation.

This 2019 Annual Compliance Report features recent ATSU Compliance Program highlights, describes projects in the works for 2020 and provides context for the overall compliance framework.

### Highlights

2019 Compliance Program accomplishments strengthened and built upon 2018 efforts.

1. Internal audit – workplace safety. An internal safety audit was conducted on the Kirksville, Missouri, campus. A walk-through of facility risk areas identified workplace hazards; trouble spots are being remediated. The audit addressed occupational health and safety standards and Occupational Safety and Health Administration (OSHA) regulations. An occupational health and

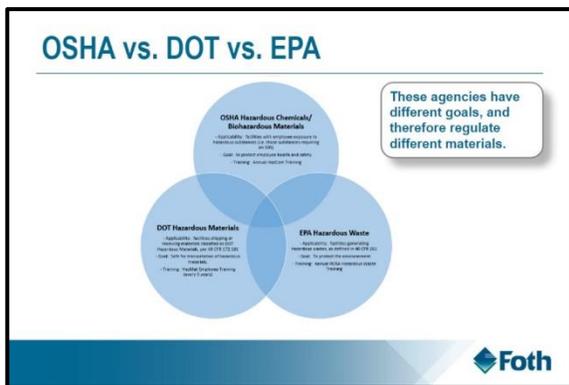
safety consultant was engaged by the Office of VPGC to help guide the process. A similar internal audit of the Mesa, Arizona, campus is planned for 2020.

2. Internal audit – hazardous waste disposal. The Office of VPGC engaged an environmental consulting firm to conduct an internal audit of a sampling of Kirksville, Missouri, campus labs (anatomy, biochemistry, pharmacology, physiology, and microbiology/immunology). The audit focused on proper handling and disposal of hazardous waste. Findings are being remediated, and best practices implemented. This better positions ATSU in the event of a return audit by the Environmental Protection Agency. ATSU's Hazardous Materials Management Committee will apply lessons learned to the Mesa, Arizona, campus.



In 2018, an overarching waste management policy (ATSU Policy No. 95-102: Waste Management) was introduced, along with standard operating procedures (SOP) for compliant disposal of fluorescent tubes, e-waste, batteries, and mercury. Monitoring of hazardous waste practices indicated there would be value in conducting a formal internal audit, which led to the 2019 internal audit which was a collaborative effort by the Office of VPGC, Facilities, and the Hazardous Materials Management Committee.

3. Risk-based training – hazardous waste disposal. The Office of VPGC engaged a consultant to conduct live training on hazardous waste. The training included an overview of hazardous waste



regulations and ATSU responsibilities, the process for making waste determinations, and ATSU policies and procedures related to hazardous waste. The training was attended by over 50 individuals, including basic science faculty and ATSU-Kirksville College of Osteopathic Medicine (ATSU-KCOM) Biomedical Sciences students. Participant feedback was positive with 95% indicating the subject matter was clear and understandable and 91% indicating the training would be helpful to them in their job or role.

In 2018, a hazardous waste training webinar tailored specifically to ATSU, including the new SOPs described in No. 2 above, was presented by ATSU's consultant. The webinar was streamed to both campuses with a link available for six months. It was decided to change up the annual training using different modalities; live, interactive training was elected for 2019.

4. Internal audit – security information/Health Insurance Portability and Accountability Act (HIPAA). Many high- and medium-priority tasks identified in the 2018 security information/HIPAA audit were accomplished. Examples include controls for mobile devices used to conduct ATSU business (standards for security settings, awareness training, and encryption), policy statements addressing texting of protected health information (PHI) and other confidential information, and practices of contracted third parties handling PHI for ATSU. Information Technology Services (ITS) was extremely instrumental in many of the tasks accomplished.

In 2018, an information security risk analysis resulted in a 38-step prioritized action plan. The first accomplishment was a major policy review, which replaced 58 HIPAA policies with 19 new, updated information security/HIPAA policies. A focus on the HIPAA breach notification process resulted in new HIPAA breach risk assessment and reporting forms and SOPs. A new standardized notice of privacy practices was developed and rolled out in English and Spanish to all ATSU patient care centers and websites. Work on the action plan began in 2018 and continued throughout 2019. A new 2020 risk analysis will refine and further improve HIPAA compliance.

5. Risk-based training – HIPAA. A HIPAA risk assessment determined HIPAA training was occurring at each ATSU patient care center, but could be improved by offering consistent, standardized training to the 350 ATSU employees with access to PHI for ATSU patients. Various online training vendors were evaluated, and HealthStream was chosen for its engaging, scenario-based training. Deans and other designated individuals reviewed and approved the training. The Office of VPGC worked with Human Resources and ITS to implement the training, which will be rolled out in early 2020. Employee completion of the training will be monitored and documented by Human Resources.



Beginning in 2018, HIPAA reminders were periodically emailed to patient care center employees. Topics included social media restrictions, technology (e.g., prohibition of texting PHI), confidential verbal communication, and password protection. Employees were reminded of roles and identities of the University's chief information privacy office and chief information security officer. It was determined there was a need for standardized HIPAA compliance training for all ATSU patient care center employees. This led to the 2019 project to identify and implement such training.

6. Clery Act compliance. The Clery Act addresses campus safety and is one of the most complex, high-risk regulations for institutions of higher education. The Department of Education (ED) regulates Clery Act compliance and has authority to audit, issue hefty fines, and make public its findings. ED has issued a 14-chapter Handbook for Campus Safety and Security Reporting, which contains detailed guidance for Clery Act compliance, including over 115 policy statements



ATSU is required to publish within its Annual Security Report (ASR). ATSU publishes 15 separate versions of the ASR due to Clery Act geography requirements. Each year, the Office of VPGC provides training for ATSU's 100-plus Campus Security Authorities (CSA), as required by the Clery Act. In 2019, a new CSA training video was developed by the Office of VPGC. An online crime report form and Clery Act travel form were developed to streamline collection of needed information. An internal audit by a legal intern working in the Office of VPGC resulted in a report leading to several Clery Act-related improvements.

Each year, ATSU evaluates the ASR policy statements and seeks to improve processes as needed. In 2018, an internal audit of ATSU's distribution practices for ASRs and Drug and Alcohol Abuse Prevention Program ensured ATSU is compliant with the distribution procedures approved by ED in its 2014 audit. ATSU's Clery Act geography was scrutinized and updated. A need for yearly changes to the CSA training modality led to the development of new training in 2019. More automated reporting processes were also identified as needs and were addressed in 2019.

## Going forward

2020 Compliance Program efforts will include the following.

1. Enterprise risk management (ERM). Now that ERM is well established at ATSU, the 2020 ERM cycle will focus on process improvement with the goal of facilitating a more robust, mature process. ERM is a primary responsibility of ATSU's Risk Management & Compliance Committee led by the Office of VPGC. The committee will collaborate to develop a comprehensive risk register, rate the risks as to potential impact and likelihood, and choose three or four high-priority risk areas to be mitigated in 2020-21.
2. Workplace safety/Occupational Safety and Health Administration (OSHA). A charter to establish a new University-wide Safety Committee has been drafted. ATSU's Safety Committee will oversee a University safety program, including an overarching safety policy, SOPs, and training for relevant employees. High-risk safety areas to be addressed by SOPs and training include hazardous energy (lockout/tagout), bloodborne pathogens, fire safety, fall protection, confined spaces, hearing protection, illness and injury protection, and personal protective equipment.

Risk-based safety training will occur in early 2020 on the Kirksville, Missouri campus. An internal safety audit and risk-based safety training are planned for the Mesa, Arizona campus in 2020.



3. Data privacy. ATSU's Office of VPGC is collaborating with ITS to build a data privacy program incorporating effective data privacy strategies and best practices. One goal of the data privacy program will be to advance compliance with emerging federal and state data privacy regulations, as well as the European Union General Data Protection Regulation. This will be a broad-based process involving ITS, Human Resources, Admissions, Academic Affairs, Alumni, Research and Sponsored Programs, Finance, and others.

4. Information security/HIPAA. An updated information security/HIPAA risk analysis will occur in 2020. New controls developed since the 2018 risk analysis will be added to the new risk profiles. ATSU's Office for VPGC will lead the risk analysis effort and will work with ITS and deans with responsibility for ATSU patient care centers to implement an updated action plan.
5. Record retention. A comprehensive reworking of the University's record retention schedule involving many departments across the University is nearly complete. The effort has involved many departments. The new schedule will clearly state specific documents that must be retained under the law and a schedule for purging records.

## Framework

Every action undertaken by ATSU's Compliance Program aligns with one or more of the seven elements of an effective compliance and ethics program contained in the Federal Sentencing Guidelines (See visual on next page.). These elements are widely recognized by compliance programs across industries, including higher education.

### Recent guidance

ATSU also looks to recent guidance by the U.S. Department of Justice (DOJ). In its April 2019 publication, "Evaluation of Corporate Compliance Programs," the DOJ discusses in practical, detailed terms the traits of a well-designed, effective compliance and ethics program. In the event of an investigation into criminal conduct, DOJ prosecutors examine the effectiveness of an institution's compliance program as a mitigating factor. While ATSU does not foresee such a scenario, the guidance is a valuable resource to help assess and direct ATSU's Compliance Program. The DOJ expects a "well-designed" compliance program "applied earnestly and in good faith" that "works in practice." The guidance emphasizes risk assessment, tone from the top, policies and procedures, training and communication, confidential reporting and non-retaliation, and third-party management.

## Advancing the 7 Elements of an Effective Compliance & Ethics Program



Implementing written policies, procedures, and standards of conduct



Designating a compliance officer and compliance committee



Conducting effective training and education



Developing effective lines of communication



Conducting internal monitoring and auditing



Enforcing standards through well-publicized disciplinary guidelines



Responding promptly to detected offenses and taking corrective actions

### Questions or comments? Contact:

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#### Sources:

Federal Sentencing Guidelines, Section 8A1.2

Department of Health & Human Services, Office of Inspector General, Vol. 63, No. 35

## Continually advancing a culture of compliance\*

Thank you for taking time to review this report. We value your participation in advancing compliance at ATSU.

ATSU's Office of VPGC welcomes feedback and questions on this report or anything related to risk management, compliance, or legal matters potentially affecting ATSU.

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\*A culture of compliance promotes transparency and accountability. It encourages individuals to seek guidance when the right course of action is unclear. It creates confidence and trust in the process that encourages individuals to speak up when mistakes are made or questionable conduct is observed. A culture of compliance gives a voice to everyone, regardless of position or title, and holds everyone responsible for their actions. It provides protection from retaliation for good faith reports or questions.