

A.T. STILL UNIVERSITY | ATSU

2018 ANNUAL COMPLIANCE REPORT



Office of Vice President
& General Counsel

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2018 Annual Compliance Program Report

CONTINUALLY ADVANCING A CULTURE OF COMPLIANCE

Purpose

The Office of Vice President & General Counsel (VPGC) compliance program supports the ATSU mission by 1) promoting the highest standards of compliant and ethical behavior across the University and 2) continually advancing adherence to local, state, and federal laws and regulatory requirements. The ATSU compliance program promotes a culture of compliance by increased awareness, communication, collaboration, and supportive accountability.

Office structure

The Office of VPGC consists of Matthew Heeren, JD, vice president & general counsel, Dawn Shaffer, compliance manager, and Ashlea Costello, executive assistant. Heeren serves as chief compliance officer and chief information privacy officer. Heeren and the Office of VPGC are responsible for ATSU risk management, which encompasses compliance, insurance, and all legal matters affecting the University. For more information, see the Office of VPGC web page: atsu.edu/office-of-vice-president-and-general-counsel.

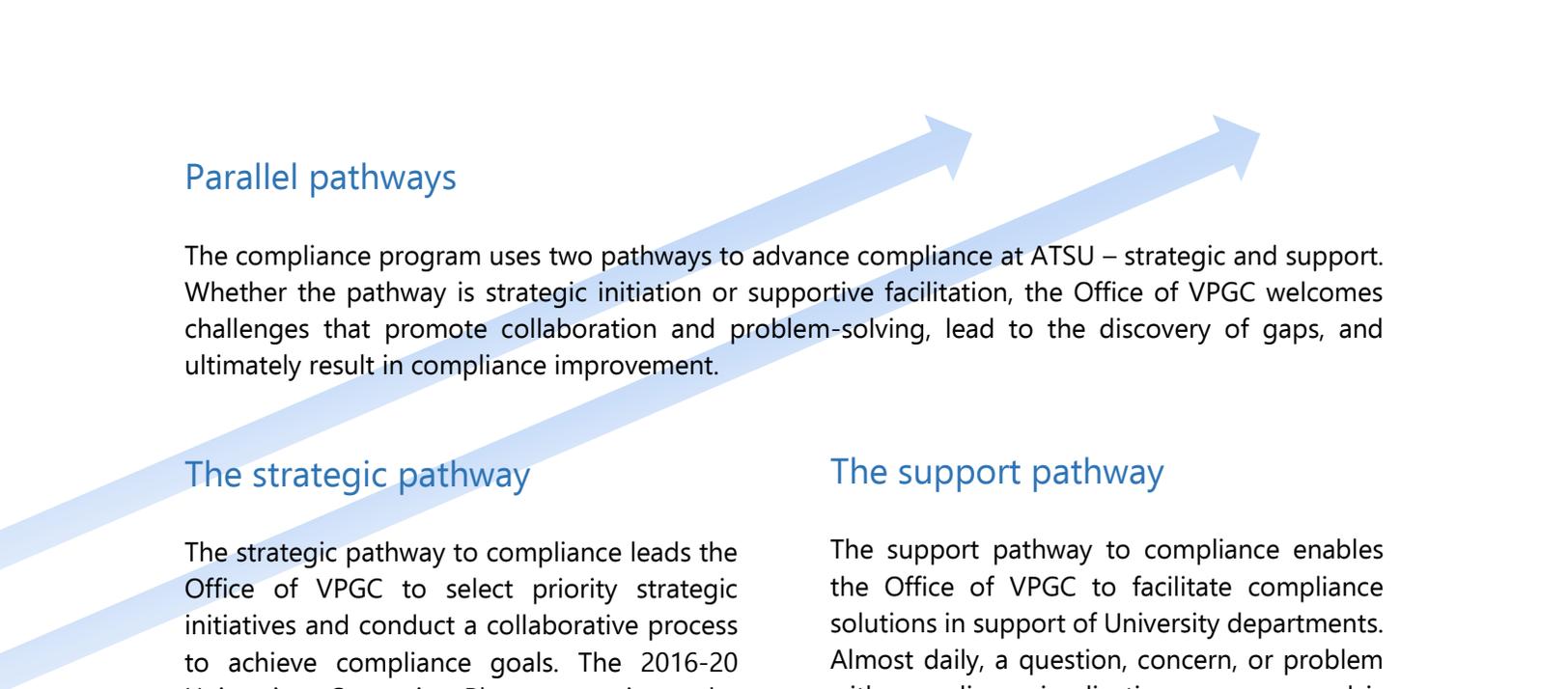
Values

Listening, valuing the perspectives of others, and problem solving are values of the Office of VPGC and the ATSU compliance program.

Framework

The ATSU compliance program framework incorporates the elements of an effective compliance and ethics program described in the Federal Sentencing Guidelines (United States Sentencing Commission Guidelines Manual, Section 8B2.1). The guidelines are the accepted standard for compliance programs not only for corporations but also for higher education. ATSU compliance program elements include:

- Implementing written policies, procedures, and standards of conduct
- Designating a compliance officer and compliance committee
- Conducting effective training and education
- Conducting internal monitoring and auditing
- Enforcing standards through well-publicized disciplinary guidelines
- Responding promptly to detected offenses and undertaking corrective action



Parallel pathways

The compliance program uses two pathways to advance compliance at ATSU – strategic and support. Whether the pathway is strategic initiation or supportive facilitation, the Office of VPGC welcomes challenges that promote collaboration and problem-solving, lead to the discovery of gaps, and ultimately result in compliance improvement.

The strategic pathway

The strategic pathway to compliance leads the Office of VPGC to select priority strategic initiatives and conduct a collaborative process to achieve compliance goals. The 2016-20 University Strategic Plan recognizes the importance of compliance initiatives. Awareness of the compliance landscape in higher education and healthcare enables the Office of VPGC to identify emerging compliance hot topics and lead priority strategic initiatives. In 2018, the Office of VPGC selected advancing compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) as a priority strategic focus. HIPAA is a federal law protecting the privacy and security of certain health information.

Preserving patient trust and protecting ATSU's reputation and financial assets are important goals that could be negatively impacted by a large-scale HIPAA breach or findings from a Department of Health and Human Services Office for Civil Rights audit.

The Office of VPGC retained an information security consultant and worked with ITS, deans, clinic directors, and others to conduct an updated HIPAA risk analysis and create a prioritized action plan, which is in the process of being implemented.

For more information on the progress of the HIPAA compliance action plan, please refer to the "Accomplishments" section of this report.

The support pathway

The support pathway to compliance enables the Office of VPGC to facilitate compliance solutions in support of University departments. Almost daily, a question, concern, or problem with compliance implications emerges and is brought to our office. The ATSU compliance framework enables the Office of VPGC to facilitate collaboration to advance compliance when gaps or issues become evident.

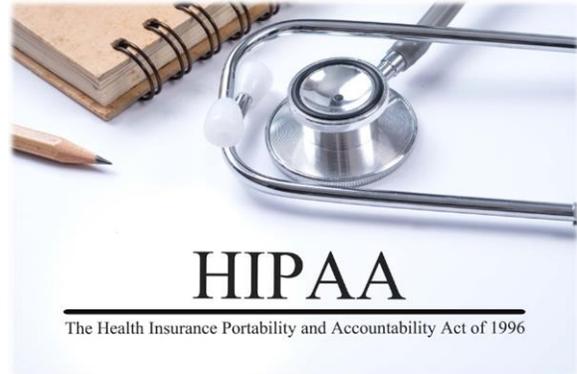
For example, a question arose as to the disposal of a specific type of waste. The Office of VPGC researched laws and regulations, and then conducted a survey of practices across the University. There was need for updated policy language and standardized practices. The Office of VPGC facilitated communication among Facilities, deans, and clinics and drafted new policy language.

When the revised policy reached the General Order Review Committee, another question arose about a section of the policy involving tuberculosis screenings, as state regulations differ between Missouri and Arizona. The Office of VPGC again conducted legal research and facilitated discussions among Student Affairs, Human Resources, deans, and clinic directors to arrive at clarified policy language and improved practices. All affected departments were included in the process.

Accomplishments

Following are major compliance advancements in 2018.

1. HIPAA. HIPAA compliance was identified as a priority risk by the Risk Management & Compliance Committee for the 2018-20 enterprise risk management (ERM) cycle. The Office of VPGC retained an information security consultant to assist with an updated HIPAA risk analysis for ATSU clinics. The process included interviews of system administrators on both campuses and an on-site visit to the KCOM clinic with inspection of physical security features. Risk profiles and a risk analysis report led to a 38-step prioritized University-wide HIPAA compliance action plan. Several of the action plan tasks are completed; others are in process, including a mobile device management plan.



As part of the HIPAA compliance action plan, new and amended policies will update and consolidate 58 HIPAA compliance policies into 19 policies. The new policies are in the final approval stage. New categories for policies related to HIPAA will include Information Technology & Information Security policies (11); Clinic Care & Patient Rights policies (5); and three others – Whistleblower, Code of Ethical Standards, and Handling Credit Card Information. This was a several-month process involving multiple policy iterations and collaboration with deans, medical directors, clinic directors, ITS, and Communication & Marketing. Next, relevant employees will become familiar with the new policies to ensure University practices align with the policies.

A new standardized notice of privacy practices using Department of Health & Human Services content, with ATSU branding, is being provided to patients at all ATSU clinics and on clinic websites. At a clinic director request, a Spanish version is also available.

Written Standard Operating Procedures (SOP) for HIPAA breaches, along with new forms including a breach log, breach reporting form, and breach risk assessment form, are now in use. A few minor alleged breaches in 2018 provided opportunity to utilize and refine the new SOP and forms.

2. Consumer information. The Office of VPGC collaborated with Communication & Marketing, Enrollment Services, Financial Aid, and Institutional Effectiveness to reorganize, restructure, and publish a new ATSU Student Consumer Information web page. The new site complies with disclosure requirements under the Higher Education Act and with Department of Education guidance for “three clicks or less” for accessing content. The Risk Management and Compliance Committee is now responsible to annually audit consumer information content.
3. Clery Act. In addition to continued enhancements to the ATSU Annual Security (& Fire Safety) Reports (ASRs), other Clery improvements were implemented. The compliance manager conducted an internal audit to ensure current distribution practices for the ASRs and Drug and Alcohol Abuse

Prevent Program follow the ATSU distribution policy approved by the Department of Education (ED). An analysis of student housing arrangements through the Area Health Education Centers and certain community health centers (CHCs) determined those locations do not meet the criteria for ATSU Clery geography. Following a safety incident at a SOMA CHC, the Office of VPGC collaborated with key administrators for process improvement. A comprehensive Clery compliance binder was assembled with supporting documentation to demonstrate ATSU compliance with critical Clery components in the event of an ED audit.

4. Enterprise risk management (ERM). The vice president & general counsel and compliance manager co-chair the Risk Management & Compliance Committee. In 2018, the committee, through its biennial ERM process, identified three priority University risks: 1) HIPAA compliance; 2) safety of minors on campus; and 3) student behavioral health. Assigned risk owners are developing and implementing risk response plans for their areas. The Office of VPGC oversees the ERM process and is the risk owner for HIPAA compliance.
5. Training. The compliance manager created two four-minute animated, close-captioned videos for ATSU employees. The videos provide an overview of "Risk Management at ATSU" and "Compliance at ATSU." The videos are available on the portal. The compliance manager also created an infographic on "Safeguarding Confidential Information" as it relates to social media, which was distributed to all ATSU employees, including residents working at ATSU clinics. The compliance manager participates in new employee orientations, highlighting a culture of compliance, the Code of Ethical Standards, the location of ATSU policies on the portal, and options for reporting potential compliance and other violations or issues.
6. Compliance partners. The compliance manager meets regularly with compliance partners (ATSU employees with day-to-day operational compliance responsibilities). The meetings build relationships, provide opportunity for sharing of information, and identify ways the compliance manager can support compliance partners.
7. Record retention. The Office of VPGC is revising the University's record retention schedule, which is part of ATSU Policy No. 10-209: Record Retention. The process includes working with departments to identify all documents that should be retained, the system of record for each document type, and the amount of time each type of document must be retained. In 2018, the record retention schedules for Financial Aid and Human Resources were completed.

COMPLIANCE MATRIX

The ATSU Compliance Matrix contains laws and regulations (with citations), descriptions of reporting requirements, and deadlines. It is organized by department and calendar month and is used to monitor compliance reporting.

In 2018, the matrix was particularly helpful to a few departments with employees new to their positions. The matrix triggered communication between the compliance manager and new employees, provided valuable information, and helped ensure compliance deadlines were timely met.

8. Waste disposal. The Office of VPGC worked with ATSU's environmental consultant to develop four Standards of Procedure for compliant disposal of fluorescent tubes, e-waste, batteries, and mercury. This led to the development of new ATSU Policy No. 95-102: Waste Management. The Office of VPGC collaborated with Facilities and ATSU's environmental consultant to present a hazardous waste training webinar, streamed to both campuses with a link available for up to six months.

On the horizon

The Office of VPGC has identified the following focus areas for 2019:



1. Clinic employee training. Standardized required training for ATSU clinic employees will be explored, with a focus on HIPAA compliance, and other content to be determined by deans, clinic directors, and Human Resources. The feasibility of developing unique ATSU training versus purchasing training modules from third party vendors will be determined.
2. Cybersecurity and other training. ATSU has licenses for the SANS training platform that contains modules for cybersecurity awareness, compliance, and other topics. The SANS training is in the pilot program stage. The Office of VPGC will work with ITS and Human Resources to develop an effective plan to roll out, assign, and monitor the SANS training platform.
3. HIPAA. The HIPAA compliance action plan will continue to be implemented. Top priority tasks include a mobile device management (MDM) program, encryption on mobile devices, and a user agreement for mobile devices containing ATSU confidential information. The Office of VPGC monitors tasks as they are addressed by ITS. The rollout of the MDM program will be followed by security awareness training related to the appropriate use of mobile devices used to conduct ATSU business.
4. Record retention. Work on the record retention schedule will continue, addressing student records, financial records, intellectual property, purchasing, real estate, construction, sponsored programs, and public safety records.
5. Data privacy regulations. A 2019 compliance challenge will involve addressing two new data privacy regulations: the General Data Protection Regulation, which affects several ATSU departments handling personal data of European Union residents, and the state of California's new data privacy law that takes effect in 2020 and will impact future ATSU programs located in California.

Continually advancing a culture of compliance*

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

The 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 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 have been made. A culture of compliance gives a voice to everyone, regardless of position or title, and holds everyone accountable for their actions. It provides protection from retaliation for good faith reports or questions.