

Administrative and Educational Support Report

Compliance Support Services

Annual Action Plan
Annual Assessment Report

June 2007 – May 2008



Annual Action Plan: June 1, 2007–May 31, 2008

Unit: Office of VPBA-Compliance Support Services

UTPA Mission: The University of Texas-Pan American (UTPA) serves the higher education needs of a rapidly growing, international, multicultural population in the South Texas Region. The University preserves, transmits and creates knowledge to serve the cultural, civic, and economic advancement of the region and the state. The University provides students advanced instruction in academic programs offered through innovative delivery systems that lead to professional certification, and baccalaureate, master’s and doctoral degrees. Through teaching, research, creative activity and public service, UTPA prepares students for lifelong learning and leadership roles in the state, nation and world community.

Division: Business Affairs

Unit Head: Wilson Ballard

Unit Mission: The University of Texas-Pan American endeavors to fulfill all of its responsibilities to the people of Texas in an environment based on ethical behavior and compliance to applicable laws and rules (*BPM 63, HOP 2.4.1*)

University Goal: Optimize institutional effectiveness and efficiency consistent with high quality organizational standards

Division Objective: Increase the value added, customer service, and goodwill value to business practices.

Unit Objective	Strategy(ies) to Achieve Unit Objective	Measurable Outcome for Unit Objective	Assessment Criteria, Evaluation Methods for Measurable Outcome	New Resources Needed in FY08
Update formal annual risk assessment to identify areas to receive focus in upcoming year	Build on formal process established last year.	Identification of “A” and “B” list risks based on formal compliance risk assessment process	Risk assessments results turned in to UT System by 2 nd Qtr meeting	No new resources needed.
	Incorporate new risk areas identified by Compliance Committee and parties responsible for compliance risk areas.	Consideration of the following in risk assessment 1] Rec Sports, 2] Threats of violence to students, 3] Export Controls, 4]	Risk assessment workpapers show these issues were considered in the risk assessment results turned in to UT System.	No new resources needed.

Annual Action Plan June 1, 2007–May 31, 2008

Unit Objective	Strategy(ies) to Achieve Unit Objective	Measurable Outcome for Unit Objective	Assessment Criteria, Evaluation Methods for Measurable Outcome	New Resources Needed in FY08
	Keep the High Risk Personal Identifiers risk area on “A” list so that it continues to receive concentrated attention.	Diabetic-related issues. Keep High Risk Personal Identifier risk area on “A” list.	The High Risk Personal Identifier remains on “A” list.	No new resources needed.
Support excellent management of compliance high risk areas	<p>Work with responsible parties that manage high risks to develop and implement training, monitoring and reporting plans, focusing on the most critical high risk items first.</p> <p>Continue to maintain high levels of reporting and focus of designated responsible parties by greater involvement in assessing quarterly results as they are to be reflected in the UT System quarterly/ annual report and other agenda materials.</p> <p>Continue to maximize use of UT System quarterly/ annual report to focus Institutional Compliance Committee on high risk items that need attention.</p>	<p>Extent of “A” and “B” list risk areas covered by quarterly compliance assurance reporting.</p> <p>Extent that no “A” and “B” list risk areas are evaluated as “Significant opportunity for improvement.”</p>	<p>All “A” and “B” list risk areas covered by quarterly compliance assurance reporting.</p> <p>Assessed condition of all “A” and “B” list risks will be either “well controlled,” or “opportunity for improvement.”</p>	<p>No new resources needed.</p> <p>No new resources needed.</p>
Ensure high quality evaluation and follow-through on compliance questions raised	To raise awareness of program: 1] administer compliance acknowledgements THROUGH Oracle as soon	Extent of 1] deployment of compliance acknowledgements by end of Fall, 2] inclusion of compliance-related	95% completion of compliance acknowledgements by end of Dec. 07 Inclusion of compliance-related	<p>No new resources needed.</p> <p>No new resources</p>

Annual Action Plan June 1, 2007–May 31, 2008

Unit Objective	Strategy(ies) to Achieve Unit Objective	Measurable Outcome for Unit Objective	Assessment Criteria, Evaluation Methods for Measurable Outcome	New Resources Needed in FY08
	<p>as electronic timecards are universal, and 2] include questions on program on biannual every-employee organizational excellence questionnaire (Note- redeploying re-written general compliance training as discussed below will also help)</p> <p>Continue existing process for evaluating compliance questions raised via hotline, email, telephone, in person, etc.</p> <p>Develop Compliance Specialist's support of compliance question and follow-up processes to handle all related office support functions, guiding the Compliance Coordinator in attending to each issue within appropriate timeframe thus allowing him to concentrate much more exclusively on the evaluation of the questions.</p> <p>Evaluate and decide upon software in collaboration with Policy Coordinator and Assistant to the President to make follow-up on action items much easier, not just</p>	<p>questions on biannual every-employee organizational excellence questionnaire.</p> <p>Consistency in following existing processes.</p> <p>Reduction in Compliance Coordinator's time in support processes for compliance questions.</p> <p>Extent of progress in implementing software that facilitates follow-up on action items 1] evaluation complete, 2] decision reached, 3]</p>	<p>questions on biannual every-employee organizational excellence questionnaire when administered by OIRE this current year (exact timing not yet known).</p> <p>Zero departures for existing process as reflected in documentation of each question raised.</p> <p>Zero Compliance Coordinator time spent on compliance question support functions, except for review of action item follow-up survey prior to release, as reflected in Compliance Support Services time reporting system.</p> <p>Software to facilitate follow-up on actions items will be implemented and in use by 1] Compliance Support Services, 2] Policy Coordinator, and 3] Assistant to the President by May 2008.</p>	<p>needed.</p> <p>No new resources needed.</p> <p>No new resources needed.</p> <p>Funds for licensing and implementing selected software.</p>

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Unit Objective	Strategy(ies) to Achieve Unit Objective	Measurable Outcome for Unit Objective	Assessment Criteria, Evaluation Methods for Measurable Outcome	New Resources Needed in FY08
	for Compliance Support Services, but also for the campus as a whole. Defend UTPA's "Raise Compliance Question" approach.	software purchased, 4] software implemented UT System acceptance of UTPA's "raising compliance question" approach.	OGC approval of our Revised HOP 2.4.1 in a form that leaves the "raising compliance question" approach intact.	No new resources needed.

University Goal:

Optimize institutional effectiveness and efficiency consistent with high quality organizational standards

Division Objective:

Identify and provide staff professional development opportunities

Unit Objective	Strategy(ies) to Achieve Unit Objective	Measurable Outcome for Unit Objective	Assessment Criteria, Evaluation Methods for Measurable Outcome	New Resources Needed in FY08
Provide and/or support appropriate compliance training to the campus	Develop Compliance Specialist to conduct high quality New Employee Orientation sessions introducing the compliance program.	Reduction in Compliance Coordinator's time in conducting New Employee Orientations.	Zero Compliance Coordinator time spent on New Employee Orientations, except to cover absences and to keep in supervisory touch with the process, as reflected in Compliance Support Services time reporting system.	No new resources needed.
	Develop Compliance Specialist to conduct high quality Compliance Training for Supervisors.	Reduction in Compliance Coordinator's time in conducting Compliance Training for Supervisors.	Zero Compliance Coordinator time spent on Compliance Training for Supervisors, except to cover absences and to keep in supervisory touch with the process, as reflected in Compliance Support Services time reporting system.	No new resources needed.

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Unit Objective	Strategy(ies) to Achieve Unit Objective	Measurable Outcome for Unit Objective	Assessment Criteria, Evaluation Methods for Measurable Outcome	New Resources Needed in FY08
	<p>Use feedback instrument on trainee impressions of the two above trainings to maintain high quality and to attract attention to opportunities to improve them.</p> <p>Rewrite general compliance training in a format that highlights main points while making supporting detail readily available to those interested. Redeploy on a campus-wide basis via Training Post.</p> <p>Constantly publicize the need for either automated or comprehensive manual interface necessary to support accurate reporting by Training Post.</p> <p>Develop Compliance Specialist to focus attention and support on designated responsible parties who are not developing and deploying training plans for their high risks.</p>	<p>Either consistent positive trend or corrective actions to achieve a consistent positive trend as reflected on feedback instrument.</p> <p>Extent of re-write and re-deployment of General Compliance Training on Training Post</p> <p>1] Automatic interface achieved, or 2] comprehensive manual interface achieved, or 3] managers tolerant of inaccurate Training Post reporting to a degree that high levels of participation are achieved in spite of the inaccuracies.</p> <p>Extent of appropriate training plans for "A" and "B" list risk areas;</p>	<p>Either consistent positive trend or corrective actions to achieve a consistent positive trend as reflected on feedback instrument.</p> <p>Training Post materials 100% re-written; 95% completion rate achieved by May 08.</p> <p>1] Automatic interface achieved</p> <p>Zero high risk areas with training plans not implemented as reported in the agenda materials for the 3rd quarter meeting of the Institutional Compliance Committee.</p>	<p>No new resources needed.</p> <p>No new resources needed.</p> <p>HR business analyst and staff support OR Executive Committee support to achieve high levels of Training Post participation in spite of inaccurate reporting on past due training.</p> <p>No new resources needed.</p>

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Unit Objective	Strategy(ies) to Achieve Unit Objective	Measurable Outcome for Unit Objective	Assessment Criteria, Evaluation Methods for Measurable Outcome	New Resources Needed in FY08
	Support implementation of Oracle iLearning as soon as the campus is ready to make this move.	Amount of time dedicated to iLearning implementation	Compliance Coordinator will dedicate 25% of his time to iLearning implementation whenever it is open to work on; time as shown on the Compliance Support Systems time reporting system.	Institutional support for implementation of Oracle iLearning.

FY08 AES Assessment Results Report

UTPA

Admin - Compliance Support Services

Unit Mission: The University of Texas-Pan American endeavors to fulfill all of its responsibilities to the people of Texas in an environment based on ethical behavior and compliance to applicable laws and rules (BPM 63, HOP 2.4.1)

Unit Head: Wilson Ballard

Division: Division of Business Affairs

Intended Outcomes	Means of Assessment & Criteria for Success / Tasks	AES Assessment Results	Use of Result & Follow-Up
<p>Admin - Compliance Support Services - Compliance Risk Assessment (original outcome) - We will update formal annual risk assessment to identify areas to receive focus in upcoming year</p> <p>Outcome Types: Administrative - Fiscal Year 2008</p> <p>Start Date: 06/01/2007</p> <p>End Date: 05/31/2008</p> <p>Outcome Status: No Longer Desired</p> <p>Strategies: 1. Build on formal process established last year. 2. Incorporate new risk areas identified by Compliance Committee and parties responsible for compliance risk areas. 3. Keep the High Risk Personal Identifiers risk area on "A" list so that it continues to receive concentrated attention.</p>	<p>Assessment Method: 1. Risk assessments results turned in to UT System by 2nd Qtr meeting</p> <p>Criterion for Success: Identification of "A" and "B" list risks based on formal compliance risk assessment process</p>	<p>06/12/2008 - Risk assessment results turned in to UT System in 1st Qtr.</p> <p>Result Type: Criterion Met</p> <p>Next Step: Mark Outcome as No Longer Desired</p>	<p>06/12/2008 - Item to be included in new intended outcome: Demonstrate effective compliance processes through appropriate metrics</p>
	<p>Assessment Method: 2. Risk assessment workpapers show these issues were considered in the risk assessment results turned in to UT System.</p> <p>Criterion for Success: Consideration of the following in risk assessment 1] Rec Sports, 2] Threats of violence to students, 3] Export Controls, 4] Diabetic-related issues.</p>	<p>06/12/2008 - Only item pending is detailed consideration of risk for Export Controls.</p> <p>Result Type: Criterion Not Met</p> <p>Next Step: Mark Outcome as No Longer Desired</p>	<p>10/01/2008 - Item to be included in new intended outcome: Demonstrate effective compliance processes through appropriate metrics.</p>
	<p>Assessment Method: 3. The High Risk Personal Identifier remains on "A" list.</p> <p>Criterion for Success: Keep High Risk Personal Identifier risk area on "A" list.</p>	<p>06/12/2008 - 1. The High Risk Personal identifier remained on "A" list</p> <p>Result Type: Criterion Met</p> <p>Next Step: Mark Outcome as No Longer Desired</p>	<p>10/01/2008 - Item recognized to be too detailed for a strategic plan. In general effectiveness of risk assessment process is to be included in new intended outcome: Demonstrate effective compliance processes through appropriate metrics.</p>
<p>Admin - Compliance Support Services - High Risk Area Management (original outcome) - We will support excellent management of compliance high risk areas</p>	<p>Assessment Method: 1. Extent of "A" and "B" list risk areas covered by quarterly compliance assurance</p>	<p>06/12/2008 - 1 of 5 "A" list risks still not covered: Export Controls (new area in FY 08) 1 of 8 "B" list risks still not covered: Stewardship</p>	<p>06/12/2008 - Item to be included in new intended outcome: Demonstrate effective compliance</p>

Intended Outcomes	Means of Assessment & Criteria for Success / Tasks	AES Assessment Results	Use of Result & Follow-Up
Outcome Types: Administrative - Fiscal Year 2008 Start Date: 06/01/2007 End Date: 05/31/2008	reporting. Criterion for Success: All "A" and "B" list risk areas covered by quarterly compliance assurance reporting.	by Account Manager (needs to be updated for new processes in Oracle) Result Type: Criterion Not Met Next Step: Mark Outcome as No Longer Desired	processes through appropriate metrics.
Outcome Status: No Longer Desired Strategies: 1. Work with responsible parties that manage high risks to develop and implement training, monitoring and reporting plans, focusing on the most critical high risk items first. 2. Continue to maintain high levels of reporting and focus of designated responsible parties by greater involvement in assessing quarterly results as they are to be reflected in the UT System quarterly/annual report and other agenda materials. 3. Continue to maximize use of UT System quarterly/ annual report to focus Institutional Compliance Committee on high risk items that need attention.	Assessment Method: 2. & 3. Extent that no "A" and "B" list risk areas are evaluated as "Significant opportunity for improvement." Criterion for Success: Assessed condition of all "A" and "B" list risks will be either "well controlled," or "opportunity for improvement."	06/12/2008 - 3 of 5 "A" list risks still evaluated "Significant opportunity for improvement." These are Time and Effort, Personal Information Security, Export Controls. 2 of 8 "B" list risks still evaluated "Significant opportunity for improvement." These are Endowment Compliance, Stewardship by Account Managers. Result Type: Criterion Not Met Next Step: Mark Outcome as No Longer Desired	06/12/2008 - Item to be included in new intended outcome: Demonstrate effective compliance processes through appropriate metrics
Admin - Compliance Support Services - Compliance Questions (original outcome) - We will ensure high quality evaluation and follow-through on compliance questions raised Outcome Types: Administrative - Fiscal Year 2008 Start Date: 06/01/2007 End Date: 05/31/2008	Assessment Method: 1a. Extent of deployment of compliance acknowledgements by end of Fall Criterion for Success: 95% completion of compliance acknowledgements by end of Dec. 07	06/12/2008 - Compliance acknowledgements were deployed in Oracle in January 08 and reporting to follow up on completion established in May 08. We do not yet have a method of measuring percent completion, but it is probably still less than 95%. Result Type: Criterion Not Met Next Step: Mark Outcome as No Longer Desired	06/12/2008 - Item to be included in new intended outcome: Demonstrate effective compliance processes through appropriate metrics.

Intended Outcomes	Means of Assessment & Criteria for Success / Tasks	AES Assessment Results	Use of Result & Follow-Up
<p>Outcome Status: No Longer Desired</p> <p>Strategies:</p> <p>1. To raise awareness of program: a) administer compliance acknowledgements THROUGH Oracle as soon as electronic timecards are universal, b) include questions on program on biannual every-employee organizational excellence questionnaire (Note- redeploying re-written general compliance training as discussed below will also help)</p> <p>2. Continue existing process for evaluating compliance questions raised via hotline, email, telephone, in person, etc.</p> <p>3. Develop Compliance Specialist's support of compliance question and follow-up processes to handle all related office support functions, guiding the Compliance Director in attending to each issue within appropriate timeframe thus allowing him to concentrate much more exclusively on the evaluation of the questions.</p> <p>4. Evaluate and decide upon software in collaboration with Policy Coordinator and Assistant to the President to make follow-up on action items much easier, not just for Compliance Support Services, but also for the campus as a whole.</p> <p>5. Defend UTPA's "Raise Compliance Question" approach.</p>	<p>Assessment Method: 1b. Inclusion of compliance-related questions on biannual every-employee organizational excellence questionnaire when administered by OIRE this current year (exact timing not yet known).</p> <p>Criterion for Success: Inclusion of compliance-related questions on biannual every-employee organizational excellence questionnaire.</p> <p>Assessment Method: 2. Number of departures from following existing processes.</p> <p>Criterion for Success: Zero departures for existing process as reflected in documentation of each question raised.</p>	<p>06/12/2008 - We included questions in bi-annual every employee survey to raise awareness of compliance question process.</p> <p>Result Type: Criterion Met</p> <p>Next Step: Mark Outcome as Complete</p> <hr/> <p>06/12/2008 - There were zero departures from existing compliance question process.</p> <p>Result Type: Criterion Met</p> <p>Next Step: Mark Outcome as No Longer Desired</p>	<p>10/01/2008 - Item recognized as too detailed for strategic plan. We will review survey results when they become available, but no longer report at the level of strategic planning and assessment.</p> <hr/> <p>10/01/2008 - Item recognized to be too detailed for strategic plan. In general, effectiveness in carrying out compliance question process to be included in new intended outcome: Demonstrate effective compliance processes through appropriate metrics.</p>
<p>3. Reduction in Compliance Director time in support processes for compliance questions.</p> <p>4. Evaluate and decide upon software in collaboration with Policy Coordinator and Assistant to the President to make follow-up on action items much easier, not just for Compliance Support Services, but also for the campus as a whole.</p>	<p>Assessment Method: 3. Reduction in Compliance Director time in support processes for compliance questions.</p> <p>Criterion for Success: Zero Compliance Director time spent on compliance question support functions, except for review of action item follow-up survey prior to release, as reflected in Compliance Support Services time reporting system.</p>	<p>06/12/2008 - Compliance Support Services office achieved this level of performance during the 1st Qtr and continued throughout the year.</p> <p>Result Type: Criterion Met</p> <p>Next Step: Mark Outcome as Complete</p>	<p>10/01/2008 - Further outcomes to be pursued in staff development will be included in new intended outcome: We will develop Katrina's ability to fill all aspects of the Compliance Analyst role and start the learning in aspects of the Compliance Director role.</p>
<p>4. Extent of progress in implementing software that facilitates follow-up on action items 1] evaluation complete, 2] decision reached, 3] software purchased, 4] software implemented</p>	<p>Assessment Method: 4. Extent of progress in implementing software that facilitates follow-up on action items 1] evaluation complete, 2] decision reached, 3] software purchased, 4] software implemented</p> <p>Criterion for Success: Software to facilitate follow-up on actions items will be implemented and in use by Compliance Support Services, Policy Coordinator, Assistant to the President by</p>	<p>06/12/2008 - Modifications of software used by IT was tested and changes needed have been communicated.</p> <p>Result Type: Criterion Not Met</p> <p>Next Step: Mark Outcome as No Longer Desired</p>	<p>06/12/2008 - This strategy will be included under new intended outcome: Improve compliance processes on campus</p>

Intended Outcomes	Means of Assessment & Criteria for Success / Tasks	AES Assessment Results	Use of Result & Follow-Up
	<p>May 2008.</p> <hr/> <p>Assessment Method: 5. OGC approval of our Revised HOP 2.4.1 in a form that leaves the "raising compliance question" approach intact.</p> <p>Criterion for Success: UT System acceptance of UTPA's "raising compliance question" approach.</p>	<p>06/12/2008 - Modifications of software used by IT was tested and changes needed have been communicated. Result Type: Criterion Not Met Next Step: Mark Outcome as No Longer Desired</p> <hr/> <p>10/01/2008 - Achieved- revised HOP 2.4.1 posted 6/26/08. Result Type: Criterion Met Next Step: Mark Outcome as Complete</p>	<p>06/12/2008 - This strategy will be included under new intended outcome: Improve compliance processes on campus</p> <hr/> <p>10/01/2008 - No further action required.</p>
<p>Admin - Compliance Support Services - Compliance Training (original outcome) - We will provide and/or support appropriate compliance training to the campus</p> <p>Outcome Types: Administrative - Fiscal Year 2008</p> <p>Start Date: 06/01/2007</p> <p>End Date: 05/31/2008</p>	<p>Assessment Method: 1. Reduction in Compliance Director's time in conducting New Employee Orientations.</p> <p>Criterion for Success: Zero Compliance Director time spent on New Employee Orientations, except to cover absences and to keep in supervisory touch with the process, as reflected in Compliance Support Services time reporting system.</p>	<p>06/12/2008 - Compliance Support Services office achieved this level of performance in the 1st Qtr, and continued throughout the rest of the year. Result Type: Criterion Met Next Step: Mark Outcome as Complete</p>	<p>10/01/2008 - Further outcomes to be pursued in staff development will be included in new intended outcome: We will develop Katrina's ability to fill all aspects of the Compliance Analyst role and start the learning in aspects of the Compliance Coordinator role.</p>
<p>Outcome Status: No Longer Desired</p> <p>Strategies: 1. Develop Compliance Specialist to conduct high quality New Employee Orientation sessions introducing the compliance program. 2. Develop Compliance Specialist to conduct high quality Compliance Training for Supervisors. 3. Use feedback instrument on trainee impressions of the two above trainings to maintain high quality and to attract attention to opportunities to improve them.</p>	<p>Assessment Method: 2. Reduction in Compliance Director's time in conducting Compliance Training for Supervisors.</p> <p>Criterion for Success: Zero Compliance Director time spent on Compliance Training for Supervisors, except to cover absences and to keep in supervisory touch with the process, as reflected in Compliance Support Services time reporting system.</p>	<p>06/12/2008 - Compliance Support Services office achieved this level of performance in the 3rd Qtr and will continue throughout the future. Result Type: Criterion Met Next Step: Mark Outcome as Complete</p>	<p>10/01/2008 - Further outcomes to be pursued in staff development will be included in new intended outcome: We will develop Katrina's ability to fill all aspects of the Compliance Analyst role and start the learning in aspects of the Compliance Coordinator role.</p>
	<p>Assessment Method: 3. Responses reflected on feedback instrument at the end of in-person New</p>	<p>06/12/2008 - Very positive trends in feedback instrument for new employee and supervisor trainings started in 1st Qtr and have continued</p>	<p>06/12/2008 - Item to be included in new intended outcome: Demonstrate effective compliance</p>

Intended Outcomes	Means of Assessment & Criteria for Success / Tasks	AES Assessment Results	Use of Result & Follow-Up
<p>4. Rewrite general compliance training in a format that highlights main points while making supporting detail readily available to those interested. Redeploy on a campus-wide basis via Training Post.</p> <p>5. Constantly publicize the need for either automated or comprehensive manual interface necessary to support accurate</p>	<p>Employee Orientation Compliance Training and Supervisor Compliance Training.</p> <p>Criterion for Success: Either consistent positive trend or corrective actions to achieve a consistent positive trend as reflected on feedback instrument.</p>	<p>throughout.</p> <p>Result Type: Criterion Met</p> <p>Next Step: Mark Outcome as No Longer Desired</p>	<p>processes through appropriate metrics.</p>
<p>6. Develop Compliance Specialist to focus attention and support on designated responsible parties who are not developing and deploying training plans for their high risks.</p> <p>7. Support implementation of Oracle iLearning as soon as the campus is ready to make this move.</p>	<p>Assessment Method: 4. Extent of re-write and re-deployment of General Compliance Training on Training Post</p> <p>Criterion for Success: Training Post materials 100% re-written; 95% completion rate achieved by May 08.</p>	<p>06/12/2008 - Training materials were re-written in much improved format on 4/7/08. Their deployment on Blackboard/WebCT is pending.</p> <p>Result Type: Criterion Not Met</p> <p>Next Step: Mark Outcome as No Longer Desired</p>	<p>06/12/2008 - This item to be included in new intended outcome: Demonstrate effective compliance processes through appropriate metrics.</p> <p>The strategy of deploying the re-written General Compliance Training will be included under new intended outcome: Improve compliance processes on campus.</p>
	<p>Assessment Method: 5. Acceptability of outcome from publicizing need for automated interface for Training Post.</p> <p>Criterion for Success: 1] Automatic interface achieved, or 2] comprehensive manual interface achieved, or 3] managers tolerant of inaccurate Training Post reporting to a degree that high levels of participation are achieved in spite of the inaccuracies.</p>	<p>06/12/2008 - Automatic interface achieved on 4/15/08</p> <p>Result Type: Criterion Met</p> <p>Next Step: Mark Outcome as Complete</p>	<p>10/01/2008 - No further action required.</p>
	<p>Assessment Method: 6. Extent of appropriate training plans for "A" and "B" list risk areas</p> <p>Criterion for Success: Zero high risk areas with training plans not implemented as reported in the agenda materials for the 3rd quarter meeting of the Institutional Compliance Committee.</p>	<p>06/12/2008 - 3 of 5 "A" list risks still lack appropriate training plans: Time and Effort, Personal Information Security, Export Control.</p> <p>Result Type: Criterion Not Met</p> <p>Next Step: Mark Outcome as No Longer Desired</p>	<p>06/12/2008 - Item to be included in new intended outcome: Demonstrate effective compliance processes through appropriate metrics.</p>
	<p>Assessment Method: 7. Amount of time dedicated to iLearning implementation</p>	<p>06/12/2008 - Implementation of iLearning or similar system was not initiated this year.</p>	<p>06/12/2008 - This strategy will be included under new intended</p>

Intended Outcomes	Means of Assessment & Criteria for Success / Tasks	AES Assessment Results	Use of Result & Follow-Up
	<p>Criterion for Success: Compliance Director will dedicate 25% of his time to Learning implementation whenever it is open to work on; time as shown on the Compliance Support Systems time reporting system.</p>	<p>Result Type: Criterion Not Met Next Step: Mark Outcome as No Longer Desired</p>	<p>outcome: Improve compliance processes on campus.</p>
<p>Admin - Compliance Support Services - Staff Development (added) - We will take advantage of staff development opportunities that arise during the year.</p> <p>Outcome Types: Administrative - Fiscal Year 2008</p> <p>Start Date: 06/01/2007</p> <p>End Date: 05/31/2008</p> <p>Outcome Status: Complete</p> <p>Strategies: 1. Director obtain Corporate Compliance and Ethics Professional certification.</p>	<p>Assessment Method: 1. Progress in completing the certification requirements of the Society of Corporate Compliance and Ethics for Corporate Compliance and Ethics Professional.</p> <p>Criterion for Success: Director will obtain certification</p>	<p>06/12/2008 - Director obtained certification in June 2007.</p> <p>Result Type: Criterion Met Next Step: Mark Outcome as Complete</p>	<p>10/01/2008 - No further action required.</p>
<p>Admin - Compliance Support Services - UT System Recognition (added) - We will achieve recognition by UT System that UTPA's approaches to high risk area management and reporting/evaluating compliance questions are effective and appropriate.</p> <p>Outcome Types: Administrative - Fiscal Year 2008</p>	<p>Assessment Method: 1. Evaluate extent that the results from UT System's effort to define compliance policies respect UTPA's approaches.</p> <p>Criterion for Success: UT System's compliance policies respect UTPA's approaches to high risk area management.</p>	<p>06/12/2008 - 6/1/08 meeting of the System-wide Institutional Compliance Advisory Council approved final substantive changes in the drafts- these drafts respect UTPA's approaches to high risk area management.</p> <p>Result Type: Criterion Met Next Step: Mark Outcome as Complete</p>	<p>10/01/2008 - Next year will require integration of UTPA's compliance program with the direction of new UT System Compliance Officer. This is included under new intended outcome: We will advance effective collaboration within UT System-wide compliance program</p>
<p>Start Date: 06/01/2007</p> <p>End Date: 05/31/2008</p> <p>Outcome Status: No Longer Desired</p> <p>Strategies:</p>	<p>Assessment Method: 2. UT System inspection of UTPA Compliance Support Services office.</p> <p>Criterion for Success: Inspection report shows that UTPA's approaches to high risk area management</p>	<p>06/12/2008 - UT System's 5/13/08 inspection report of UTPA Compliance Support Services office showed that UTPA's approaches to high risk area management and reporting/evaluating compliance questions are effective and appropriate.</p>	<p>10/01/2008 - Next year will require preparation for peer review. This outcome is included under new intended outcome: We will advance effective collaboration with UT System-wide Compliance Program.</p>

Intended Outcomes	Means of Assessment & Criteria for Success / Tasks	AES Assessment Results	Use of Result & Follow-Up
<p>1. Actively participate in UT System compliance policy process as a forum for explaining UTPA's approaches.</p> <p>2. Take advantage of UT System inspection of Compliance Support Services for explaining UTPA's approaches.</p>	<p>and reporting/evaluating compliance questions are effective and appropriate.</p>	<p>Result Type: Criterion Met</p> <p>Next Step: Mark Outcome as Complete</p>	