

AGENDA Audit, Risk Management, Compliance, and Ethics Committee February 6, 2025

- I. Approval of Minutes November 21, 2024
- II. Review of Operational Metrics
- III. Action Items Change to Annual Audit Plan (Mr. Wayne Poole)
- IV. Informational Items
 - A. Enterprise Risk Management Update (Mr. Chris Rowland)
 - B. Academic Advising Update previous audit (Dr. Allen Guidry)
 - C. Recent Internal Audits (Mr. Wayne Poole)
- V. Closed Session
- VI. Other Business



Meeting of the Board of Trustees Audit, Risk Management, Compliance & Ethics Committee February 6, 2025

AGENDA ITEM

١.	Approval of Minutes	Vince Smith
		Committee Chair

Situation:	Approval of the minutes from the most recent committee meeting.

Background: N/A

Assessment: N/A

Action: This item requires a vote by the committee.



Minutes from the Audit, Risk Management, Compliance, and Ethics Committee November 21, 2024 – Main Campus Student Center and Online Meeting

The Audit, Risk Management, Compliance, and Ethics Committee of the ECU Board of Trustees met in person on November 21, 2024.

Committee members present: Vince Smith (Chair), Vanessa Workman, Jeff Roberts, Tom Furr, and Anderson Ward.

Trustee Vince Smith, Chair of the Committee, convened the meeting at 12:45 PM. Mr. Smith read the conflictof-interest provisions as required by the State Government Ethics Act. Mr. Smith asked if anyone would like to report an actual or perceived conflict. None were reported.

Mr. Smith asked for the approval of the minutes of the September 26, 2024 committee meeting minutes.

Action Item: The minutes of the most recent committee meeting were approved with no changes.

Operational Metrics Review

The committee reviewed the operational metrics related to Internal Audit and Compliance, for the 2025 fiscal year to date through October 2024.

Action Items

The committee had no action items.

Informational Items

Enterprise Risk Management – Mr. Chris Rowland

Mr. Rowland briefed the committee on the recent work of the ERM Committee. He also shared information from the recent UNC System ERM retreat, including risks that are of interest across the UNC System, which are very similar to the top risks ECU is currently navigating.

Athletics Compliance Update – Ms. Alex Keddie

Ms. Keddie brief the committee on changes in the NCAA student athlete transfer landscape. Most notably she reported that a student athlete now has no limit on the number of transfers. Ms. Keddie also provided an overview of how the transfer process is managed at ECU and the various campus offices that are involved in the process.

Regulatory Compliance Committee Update – Mr. Wayne Poole

Mr. Poole provided an update from the Regulatory Compliance Committee, which was formed in 2023 at the direction of Chancellor Rogers in response to rapidly evolving compliance requirements, which is one of the top risks in the University risk register. Mr. Poole advised that the committee is co-chaired by the University General Counsel and the Chief Audit Officer. The briefing included an overview of key recommendations and accomplishments of the committee, and compliance-related topics that are currently being monitored.

Annual External Audits – Mr. Wayne Poole

Mr. Poole told the committee that the University's annual financial statement audit has been completed by the State Auditor. The audit resulted in a clean unmodified opinion of the University's financial statements and contained no findings and no reported internal control weaknesses. Mr. Poole also told the committee that the external audits of the affiliated entities have been completed. These also resulted in unmodified opinions and no findings or control weaknesses related to the financial statements.



Minutes from the Audit, Risk Management, Compliance, and Ethics Committee November 21, 2024 – Main Campus Student Center and Online Meeting

Recent Internal Audits – Mr. Wayne Poole

Mr. Poole advised that since the Audit Committee's last meeting, Internal Audit has closed 11 engagements. He briefed the committee on one of the audits, related to employee time reporting.

Closed Session

At 1:15 PM Trustee Ward made a motion to go into closed session to discuss items that are not a matter of public record according to applicable North Carolina statutes. The motion was seconded by Trustee Workman and approved unanimously.

At 1:41 PM the committee returned to open session.

Other Business

There was no other business to discuss, and the committee meeting was adjourned at 1:41 PM.

Respectfully submitted, Wayne Poole ECU Office of Internal Audit and Management Advisory Services



II.	Operational Metr	icsWayne Poole
	·	Chief Audit Officer
Situa	tion:	Presentation of the metrics that are monitored by this committee.
Back	ground:	Each committee of the Board receives regular updates on metrics pertaining to their area of oversight. This committee receives metrics related to audit and compliance activities.

- Assessment: Metrics for FY 2025 to date are generally on track. Some items dipped in December as is expected but will be back in the green as the new calendar year progresses.
- Action: This item is for information only.

ECU.

CEO Tracking Sheet Fiscal Year - 2025

Audit, Risk Management, Compliance & Ethics Committee

Audit, Risk Management, Compliance & Ethio			_							_							
KPI	Measurement	Prior Year	Target	Variance	July	August	September			December	January	February	March	April	May	June	Total
	Percent of			Plan	6.6%	6.6%	6.6%	6.6%	6.7%	6.7%	6.7%	6.7%	6.7%	6.7%	6.7%	6.7%	80.09
Audit Plan Completion	projects on annual	92.0%	80%	Actual	7.2%	7.4%	9.0%	9.0%	9.1%	1.8%							43.5%
(Internal Audit)	plan that are			+/-	0.6%	0.8%	2.4%	2.4%	2.4%	-4.9%							
	completed			YTD +/-	0.6%	1.4%	3.8%	6.2%	8.6%	3.7%							
				Plan	75.0%	75.0%	75.0%	75.0%	75.0%	69.0%	76.0%	76.0%	76.0%	76.0%	76.0%	76.0%	75.09
Auditor Productivity	Direct Audit &	76.3%	75%	Actual	72.6%	77.4%	79.7%	74.5%	75.1%	55.8%							72.0
(Internal Audit)	Consult hrs vs.			+/-	-2.4%	2.4%	4.7%	-0.5%	0.1%	-13.2%						_	
(Total hours			YTD +/-	-2.4%	-0.1%	1.5%	1.0%	0.8%	-3.0%							
	rotarnours													1			
	Percent of		1	Plan	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
Management Corrective Actions Completion	recommendations	96.6%	95%	Actual	100.00%	100.00%	83.30%	100.00%	83.30%	100.00%	33.00%	33.0078	33.0078	33.0078	33.00%	33.00%	92.30
Rate		90.0%	9370	+/-	5.00%	5.00%	-6.70%	5.00%	-11.70%	5.00%						_	92.50
(Internal Audit)	resolved when								-11.70%							_	
	IA follows up			YTD %	5.00%	5.00%	-2.70%	-0.90%	-5.30%	-2.70%							
	1		-														
	Number of			Plan	25	25	25	25	25	25	25	25	25	25	25	25	30
Number of Rules Education Sessions (Athletics	sessions spent	343	300	Actual	16	34	30	25	20	24							14
Compliance)	educating athletes,			+/-	-9	9	5	-	-5	-1							
	staff & others			YTD +/-	-9	0	5	5	0	-1							
Number (All) Education and Consultation	Sessions spent			Plan	4	4	4	4	4	4	4	4	4	4	4	4	4
Number of NIL Education and Consultation	educating athletes,	86	48	Actual	8	10	10	8	4	5							4
Sessions	staff & others			+/-	4	6	6	4	-	1							
(Athletics Compliance)	(NIL-specific)			YTD +/-	4	10	16	20	20	- 21							
	(The specific)			112 17		10	10	20	20					1			
	Number of sessions			Plan	63	63	63	63	63	63	63	63	63	63	63	63	75
Number of Education Sessions		776	75.0	Actual	62	65	71	65	65	69	05	05	05	05	05	05	73
	spent educating	776	756		62	00	/1	05	05	69							39
(Healthcare Compliance)	providers and			+/-	-1	2	8	2	2	6						_	
	staff			YTD +/-	-1	1	9	11	13	19						_	
	1																
Number of Proactive Provider Documentation	Number of			Plan	23	23	23	23	23	23	23	23	23	23	23	23	27
Reviews	providers whose	298	276	Actual	25	25	25	25	25	25							15
(Healthcare Compliance)	doc. accuracy			+/-	2	2	2	2	2	2							
(nearthcare compliance)	was reviewed			YTD +/-	2	4	6	8	10	12							
Deve Dete Develop of the data and Development	Percent of			Plan	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%
Pass Rate Results of Healthcare Provider	reviewed providers	98.3%	90%	Actual	100.0%	95.0%	100.0%	100.0%	100.0%	95.0%							98.3%
Documentation Reviews	receiving a			+/-	10.0%	5.0%	10.0%	10.0%	10.0%	5.0%							
(Healthcare Compliance)	passing score			YTD +/-	10.0%	7.5%	8.3%	8.8%	9.0%	8.3%						- 1	
	pussing score																
Number of Operational	Number of audits			Plan	0	0	5	5	E	E	E	5	5	E	5	5	5
Billing Compliance Reviews		0	50	Actual	0	0	5	5	5	5	5	5	5	5		5	2
	of clinic accuracy		50		0	0	5	5	5	5							۷
(Healthcare Compliance)	for copays, ABN doc,	New		+/-	-		0	0	0	0						_	
	place of service			YTD +/-			U	U	U	U							
					-	-	-			-	- 1	-	-	-			
				Plan	2	2	2	2	2	2	2	2	2	2	2	2	2
	Number of sessions					2											
Number of Group Education Sessions	Number of sessions spent educating	41	24	Actual	1	4	6	4	5	1							2
Number of Group Education Sessions (Human Subjects Research/IRB)		41	24	Actual +/-	1 1	4	6 4	4	5	1 -1							2
	spent educating	41	24	Actual	1 -1 -1	4 2 1	6 4 5	4 2 7	5 3 10	1 -1 9							2
	spent educating groups of	41	24	Actual +/-	1 -1 -1	4	6 4 5	4 2 7	5 3 10	1 -1 9							2
(Human Subjects Research/IRB)	spent educating groups of	41	24	Actual +/-	1 -1 -1 3	4 2 1 3	6 4 5 3	4 2 7 3	5 3 10 3	1 -1 9 3	3	3	3	3	3	3	3
(Human Subjects Research/IRB) Number of Compliance Monitoring Reviews	spent educating groups of researchers Number of human	41	24	Actual + / - YTD +/-	1 -1 -1 3 2	4 2 1 3 3	4	4 2 7 3 8	5 3 10 3 3	1 -1 9 3 2	3	3	3	3	3	3	3
(Human Subjects Research/IRB) Number of Compliance Monitoring Reviews (Human Subjects Research/REDE Compliance	spent educating groups of researchers Number of human subjects studies			Actual +/- YTD +/- Plan Actual	1 -1 -1 3 2 -1	4 2 1 3 3 0	4 5 3	4 2 7 3 8	5 3 10 3 3 0	1 -1 9 3 2 -1	3	3	3	3	3	3	3
(Human Subjects Research/IRB) Number of Compliance Monitoring Reviews	spent educating groups of researchers Number of human subjects studies reviewed for			Actual + / - YTD +/- Plan Actual + / -	1 -1 -1 3 2 -1	4 2 1 3 3 0	4 5 3	4 2 7 3 8 5	5 3 10 3 3 0	1 -1 9 3 2 -1	3	3	3	3	3	3	3
(Human Subjects Research/IRB) Number of Compliance Monitoring Reviews (Human Subjects Research/REDE Compliance	spent educating groups of researchers Number of human subjects studies			Actual +/- YTD +/- Plan Actual	1 -1 -1 3 2 -1 -1	2 4 2 1 3 3 0 -1	4 5 3	4 2 7 3 8 5 1	5 3 10 3 3 0 1	1 -1 9 3 2 -1 0	3	3	3	3	3	3	3
(Human Subjects Research/IRB) Number of Compliance Monitoring Reviews (Human Subjects Research/REDE Compliance	spent educating groups of researchers Number of human subjects studies reviewed for compliance			Actual +/- YTD +/- Plan Actual +/- YTD +/-	1 -1 -1 3 2 -1 -1	2 4 2 1 3 3 3 0 -1	4 5 3	4 2 7 3 8 5 1	5 3 10 3 3 0 1	1 -1 9 3 2 -1 0	3	3	3		3	3	1
(Human Subjects Research/IRB) Number of Compliance Monitoring Reviews (Human Subjects Research/REDE Compliance Monitoring Office)	spent educating groups of researchers Number of human subjects studies reviewed for compliance Percent of	40	36	Actual +/- YTD +/- Plan Actual +/- YTD +/- Plan	1 1 -1 -1 3 2 2 -1 -1	4 2 1 3 3 0 -1	4 5 3	4 2 7 3 8 5 1	5 3 10 3 3 0 1	1 -1 9 3 2 -1 0	3	3	3	3	3	3	100.05
(Human Subjects Research/IRB) Number of Compliance Monitoring Reviews (Human Subjects Research/REDE Compliance Monitoring Office) Employee COI Disclosure Rate	spent educating groups of researchers Number of human subjects studies reviewed for compliance Percent of employees who			Actual +/- YTD +/- Plan Actual +/- YTD +/- Plan Actual	1 -1 -1 3 2 -1 -1	2 2 3 3 0 -1	4 5 3	4 2 7 3 8 5 1	5 3 10 3 3 0 1	1 -1 9 3 2 -1 0	3	3	3		3	3	100.05
(Human Subjects Research/IRB) Number of Compliance Monitoring Reviews (Human Subjects Research/REDE Compliance Monitoring Office)	spent educating groups of researchers Number of human subjects studies reviewed for compliance Percent of	40	36	Actual +/- YTD +/- Plan Actual +/- YTD +/- Plan	1 -1 -1 3 2 -1 -1	2 1 3 3 0 -1	4 5 3	4 2 7 3 8 5 1	5 3 10 3 3 0 1	1 -1 9 3 2 -1 0	3	3	3		3	3	2 3 1 100.09 0.009



III.	Action Items	Wayne Poole
		Chief Audit Officer

- Situation:The University's annual audit plan and internal audit charter, and any significant
changes to them, must be approved by this committee.
- **Background:** The committee hears proposed added or removed assurance engagements for approval. New investigative audits and small-scope consultative/advisory engagements are generally not presented to the committee.
- Assessment: The Chief Audit Officer will present one added assurance engagement for the committee's approval at this meeting. The new engagement is a new annual requirement that was mandated by a UNC System Regulation that the Board of Governors approved in November 2024.
- Action: This item requires a vote by the committee.

East Carolina University Office of Internal Audit Annual Engagement Plan By Type FY 2025

(
Desired Description		Budgeted	%	Key	Strategy/	Division
Project Description Integrated/Internal Controls/Operational/Performance Audits:		Hours	of Total	Risk	Mission	Division
HR Benefits Processes and Accounting	WIP	100	0.6%	х		۸E
Cashier's Office	WIP	100	0.6%	x		AF AF
	WIP	200	1.2%			AF
Research Systems Data and User Access - Financial Aid				X		
	OP	200	1.2%	X		AA
Data and User Access - Finance	OP	300	1.8%	X		AF
Office Space Utilization	OP	300	1.8%	Х	Ň	ALL
Lab Safety	OP	300	1.8%	Х	Х	AF, AA
Travel Expense Analytics Review	OP	300	1.8%	Х	Х	ALL
Emeritus Staff and Faculty Access to Resources	OP	300	1.8%	Х		ALL
Athletics Facility Security	OP	300	1.8%	Х		AT
Aquatics Center	OP	300	1.8%	Х		AT
Student Emergency Response Process	OP	300	1.8%	Х	Х	SA
Central Reservations and Ticketing Operations	OP	300	1.8%			SA
, , , , , , , , , , , , , , , , , , ,						
		3300	19.7%			
Compliance Audits:	0.5	000	1.001	Ň	N/	
Research Security	OP	300	1.8%	Х	X	AA
Expense Review for External Sponsor - Climate Initiative Grant	OP	200	1.2%		Х	AA
Admissions Process Compliance (selected programs only)	OP	300	1.8%	Х	Х	AA
ProCard Program Compliance (rev 2)	ADD	100	0.6%	Х		AF
			- 404			
		900	5.4%			
Information Technology Audits:	00	2000	4.00/	V	X	45
IT Disaster Recovery	OP	260	1.6%	Х	Х	AF
Teams, OneDrive, Sharepoint Configuation and Processes	OP	300	1.8%	Х		AF
Enterprise Apps and Storage Activity Logging	OP	300	1.8%	Х		AF
		860	5.1%			
Investigative Reviews:		000	0.170			
Triage of Allegations, Complaints, Concerns	OP	300	1.8%			ALL
Investigative Reviews - Details not included	OP	1500	8.9%			ALL
		1000	0.070			
		1800	10.7%			
Follow-Up Reviews:						
Action Plan Tracking and Follow-Up	OP	600	3.6%			ALL
2nd Follow Up - Campus Safety Systems	OP	100	0.6%			AF
Follow Up - ECU Transit (rev 1)	ADD	120	0.7%	Х		SA
Consultations/Advisory Convisos		820	4.9%			
Consultations/Advisory Services		600	2 60/			A11
Routine and Unplanned Consultations	OP	600	3.6%			ALL
Continuous Auditing and Monitoring Analytics	OP	300	1.8%			ALL
University Committees, Workgroups, Education, and Client Relations	OP	400	2.4%			ALL
ERM and Regulatory Compliance Committee Support	OP	200	1.2%			ALL
Student Athlete Course Clustering	OP	40	0.2%			AA
ECU Health Rev Cycle Integration	OP	200	1.2%			ECUH
Generative AI Policies and Practices	OP	100	0.6%			ALL
Public Consulting Services (orig planned as Assurance) (rev 1)	OP*	200	1.2%			ALL
		20.40	40.00/			
Other/Presid Prejector		2040	12.2%			
Other/Special Projects:						

OP=Original Plan WIP=Carry over from prior year ADD=Added since July 1 CX=Cancelled PPD=Postponed

East Carolina University Office of Internal Audit Annual Engagement Plan By Type FY 2025

		Budgeted	%	Key	Strategy/	
Project Description		Hours	of Total	Risk	Mission	Division
External Audits, SBI Reports, Routine Mtgs, BOT Comm	OP	1600	9.5%			ALL
Audit Software Admin and Maintenance	OP	100	0.6%			CH
Student Intern Program	OP	120	0.7%			СН
Annual Self-Assessment and QAIP Activities	OP	160	1.0%			СН
Risk Assessment/Audit Planning 2025-2026	OP	160	1.0%			ALL
u u u u u u u u u u u u u u u u u u u						
		2140	12.8%			
Total Direct/Chargeable Hours		11860	71%			
Administration		1800	10.7%			NA
Leave/Holiday		2300	13.7%			NA
Professional Development		800	4.8%			NA
Total Indirect Hours:		4900	29%		-	
Grand Total Hours		16760	100%			

Original Plan Approved by Chancellor Rogers on 03/20/2024

Original Plan Approved by ECU Board of Trustees Audit, Risk Management, Compliance, and Ethics Committee on 4/11/2024

Rev 1 - Changes approved by BOT Audit, Risk Management, Compliance, and Ethics Committee Approval on 9/26/2024

Rev 2 - Changes for BOT Audit, Risk Management, Compliance, and Ethics Committee Approval on 2/6/2025



Meeting of the Board of Trustees Audit, Risk Management, Compliance & Ethics Committee February 6, 2025

AGENDA ITEM

IV.A. Enterprise Risk Management (ERM) Update Chris Rowland Associate Vice Chancellor for Administration and Finance

Situation:	Regular update to the committee on the University's top enterprise risks and emerging risks.
Background:	This committee oversees ERM. The ERM function is owned by University senior management and is tightly integrated with Internal Audit, which develops and executes the annual risk-based audit plan.
Assessment:	Mr. Rowland will update the committee on the current risk matrix, any recent events and changes that impact the risk landscape, and/or activities and updates from the University's ERM Committee.
Action:	This item is for information only.

East Carolina University Enterprise Risk Management 2024-2026 Cycle Top Risks (as of May 2024)

Risk	Advisory Team(s)	Sponsor(s)
University workforce challenges: Recruiting and retaining qualified and diverse faculty and staff, including healthcare professionals; Retaining institutional knowledge for long-term success and sustainability; Competitive compensation; Maintaining strong internal controls and mitigating key personnel vacancies; Faculty and staff wellness, stress, and burnout concerns; Morale and workforce effectiveness. Employee flexibility and remote work are key ways to mitigate these challenges, but these opportunities present risks related to cybersecurity, tax, export controls, compliance, and accountability of University assets.	Cabinet, Human Resources	All VCs
University financial sustainability: The ability to maintain sustainable revenues from all sources (enrollment, auxiliaries, appropriations), understanding the impacts of the new funding model, and the impact of economic conditions during the period covered by this risk assessment	Cabinet, Finance	VCAF
Student recruitment and retention in an increasingly competitive market, magnified by reputation/perception challenges outside eastern NC	Strategic Enrollment Planning Team	Provost and All VC's
Student crisis management, including basic necessities, mental and physical health, and other urgent needs	Cabinet, Student Affairs	VCSA
Cyber threats (from external and internal sources) to the confidentiality, integrity, and availability of data and information systems	CIO, CISO	VCAF
Significant changing regulatory compliance requirements, including healthcare, HIPAA, research, foreign influence/research security, DoD cybersecurity requirements, athletics, Title IX, personnel, equal opportunity, and privacy	Legal Affairs, Internal Audit, Compliance Offices	Chancellor, VC Legal Affairs
Clinical Healthcare: financial sustainability, dependence on external relationships for healthcare delivery, and risks related to the ECU Health integration	BSOM Dean	Chancellor, BSOM Dean
Maintaining campus infrastructure, including routine and deferred maintenance, and hiring of external contractors/service providers	Campus Operations	VCAF
Protecting ECU's reputation and visibility from negative publicity, lack of differentiation in the market, or failure to effectively communicate its strengths and achievements	Cabinet	Chancellor
Social unrest , such as protests, demonstrations, or riots, due to various factors, including political tensions, social injustice issues, or campus-specific grievances. These events have the potential to create unsafe conditions for individuals on campus, disrupt academic activities, and result in property damage or loss	Cabinet	Chancellor

East Carolina University Enterprise Risk Management 2024-2026 Cycle Secondary Risks

(These were considered by the ERM Committee but are not presently considered "top risks")

- Sustainability of academic and student support programming and services and ability to meet student needs and parent and societal expectations, especially in the current environment
- Technology backup, recovery, and continuity and coordination of priorities between IT and functional management
- Increased risk in academic integrity issues with the number of remote students and exams
- Legal liability issues, including health and safety, student access, accommodations, and employment matters (EEOC, ADA, etc.)
- Inability to sustain innovation and economic development due to resource constraints, impacting the engagement with and positive outcomes for eastern NC
- Business continuity planning that could be insufficient to prevent an operational failure from a disaster or other significant event(s)
- Lack of dedicated identification and monitoring of sponsored program expenditures and tracking of institutional metrics for externally funded research amplified by inadequate interfaces between the information systems used for research
- Conflicts of interest in research and patient care, which could result in loss of external funding and reputational damage
- Affiliated Entities' risk of noncompliance with operating agreements, misalignment with the university's mission, and potential for reputational damage
- Responding to the changing demographics of our students. Adult learners' needs will be different than traditional college-aged students. Adult learners will not be as interested in student affairs services such as clubs, organizations, activities, etc., or perhaps athletics. The University will need to right-size these and other services to meet the needs of our different student populations.
- Artificial intelligence the rising availability and use of which presents opportunities in higher education, but also increases risks related to academic integrity, research, data privacy and security, and student educational outcomes.
- The collegiate athletics landscape NIL, employer status, amateurism model, revenue model, etc.

East Carolina University Enterprise Risk Management Emerging Risks

- Inability to sustain extramural research and sponsored programs due to resource constraints, impacting faculty scholarship, discoveries and advances, faculty recruitment and retention, and student engagement.
- New UNC System DEI policy and the elimination of DEI-related positions and associated state funding.



Meeting of the Board of Trustees Audit, Risk Management, Compliance & Ethics Committee February 6, 2025

IV.B.	Academic Advising Update	Dr. Allen Guidry
		Associate Provost, Learner Operations

Situation:	This committee receives updates on the status of efforts to remediate previous audit recommendations. An internal audit of Academic Advising resulted in several recommendations which University leadership is addressing.
Background:	Academic Advising is crucial to the University's Student Success goals and a concerted effort is being placed on standardizing students' experiences and level of service across colleges, schools, and departments. Dr. Guidry is leading this effort, which includes a commission with participants from the various colleges and schools.
Assessment:	Dr. Guidry will update the committee on the efforts that have occurred to date and the goals/timeline for completing the work towards addressing the audit recommendations and optimizing the student advising experience and expectations.
Action:	This item is for information only.

UPDATE: Advising Audit Progress

Allen Guidry, EdD - Associate Provost for Learner Operations

Angela Anderson - Associate Vice Chancellor of Student Academic Success



Refresher - Observations from audit

- 1. No centralized oversight or codified expectations of academic advising.
- 2. Roles and responsibilities of advisors are not clearly defined and vary by college.
- 3. Advising resources and tools are inconsistent among the colleges.
- 4. Advising loads and telework expectations are not consistent and may warrant review and/or adjustment.
- 5. Data to identify at-risk student behaviors is not consistently monitored and reviewed among colleges.



Refresher - Recommendations from audit

- Consider establishing a centralized office or person to oversee academic advising and/or establish standard procedures and expectations.
- Develop a clear role and document responsibilities for academic advisors. These expectations should be consistent among all advisors within each of the colleges and communicated with administrators, faculty, advisors, and students.
- Determine the feasibility of moving towards the use of common systems, tools, and communication methods by advising centers. This could potentially result in cost savings and a more consistent experience for students in the various colleges and schools.
- Work with college deans and advising directors to evaluate advising loads and the roles and responsibilities of academic advisors to determine whether their advising loads are reasonable to provide adequate advising and attention to their students. This includes revisiting appropriate mix of telework.
- Determine the criteria for identifying "at-risk" student behaviors and what data is available to identify them in a timely manner. Determine who is responsible for identifying and communicating with these students to determine how the University can support them and encourage their success.



Action - Advising Standardization Commission

- Charge: investigate the five major areas identified within the audit to revisit and reframe organization, policy and, procedure related to the Advising Collaborative.
- 3 sub-committees on
 - (a) <u>Advising standards and practices (to address observations 1 and 2; roles,</u> responsibilities, loads, scheduling, standard expectations of service)
 - (b) <u>Advising systems</u> (to address observations 3 and 5; utilization of uniform systems like ECU Connect, Degree Works, CRM, Scheduler, etc.)
 - (c) <u>Advising workforce policy</u> (to address observation 4; telework expectations, job classifications, and career ladder).



ASC Phase 1 timeline

	May 7- 2024 Sub-co meetin	ommittee charge	2024	per 25-27 treats with 3 ittees	with all p	er 2 ng Retreat articipants ft of SOP)	2024 Stake	ober 25 holder conversation SGA president
0	C)	•	•	0	SOP	Retreat	• Work groups
		Data needs planning stakeholder identifica May 16- June 4 2024		with UG	older conversations deans nber 26-October	with a (revis	all participants e SOP) ber 18	finalize SOP to prepare for CRM January 13- February 7 2025
	EC							

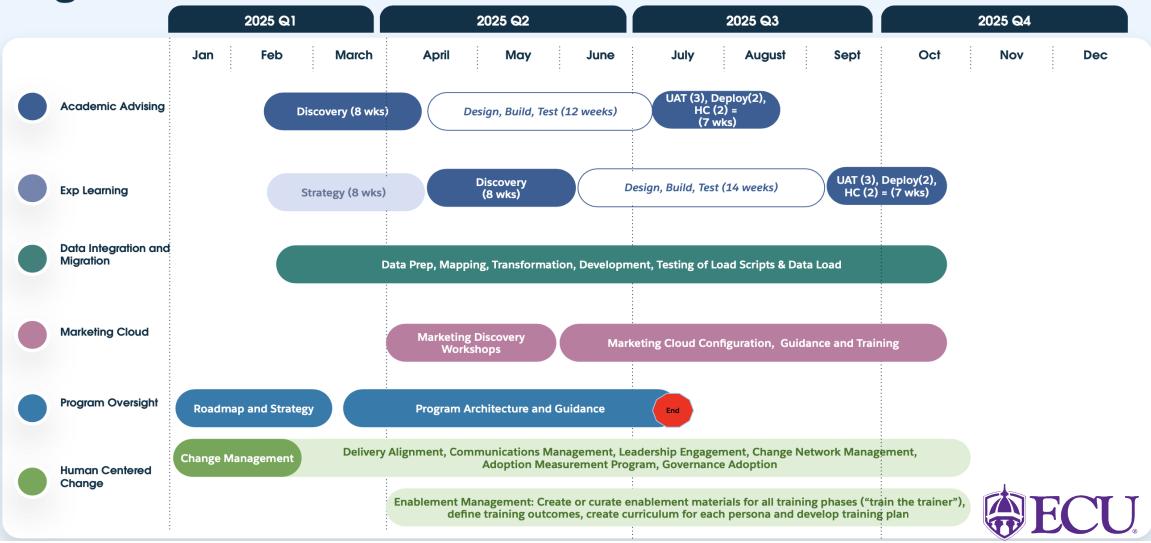
Wins during/after Phase 1...

- 1. Collaborative solutioning and understanding current practices across campus
- 2. Single vision of the student experience
- 3. Process simplification/improvements
- 4. New and revised reports with detailed/specific information that makes advising less cumbersome (freeing time for engagement)



Phase 2 – Integration of ASC SOPs into CRM

High-Level Timeline



Discovery

AA Subject Matter Experts



Discovery: Activities and Time Commitment (Feb - April) Subject Matter Experts

- → Weeks 1 5: Attend workshops (2-5 hours/week)
- → Weeks 6 7: Review user stories, follow-up meetings (3-5 hours/week)*
- → Weeks 7 8: Approve and prioritize user stories for build (5+ hours/week)

*Project Team is comprised of representatives of each advising center piloting the CRM in Phase 2 (HHP, COB, and MAP) as well as 1 representative from each UG advising center





Build for Pilot Implementation



AA Subject Matter Experts

Build: Activities and Time Commitment (April - July) Subject Matter Experts*

- → Attend stand-up (3x per week, 1.5 total hours/week)
- → Weekly Backlog refinement (1.5 hours/week)
- \rightarrow Attend fortnightly demo (90 mins)
- \rightarrow Perform testing and provide feedback (3 5 hours/week)





User Acceptance Testing (UAT) – Pilot implementation



AA Subject Matter Experts

UAT: Activities and Time Commitment (July - August) Subject Matter Experts*

- → Attend stand-up (3x per week, 1.5 total hours/week)
- → Perform end to end testing and participate in feedback sessions (10 hours/week)





Sample of activities – Phase 2

colocford

Calendar View Example for Discovery (2/12 - 4/12)

	February 10	February 11	February 12	February 13	February 14
W 1	EXAMPLE		Kick off Meetings (½ day)	Discovery Workshop (1.5 hours)	
	February 17	February 18	February 19	February 19	February 20
W2	Student 360 Discovery Workshop (90 mins)	Agile Development Enablement (90 mins)	Change Mgmt Weekly Meeting (60 mins)	Student 360 Discovery Workshop (90 mins)	Alerts Discovery Workshop (90 mins)
	February 24	February 25	February 26	February 27	February 28
W3	Appointment Scheduling Discovery Workshop (90 mins)	Data and Integration Strategy Kick Off (60 mins, Tech Group)	Change Mgmt Weekly (60 mins) Care Plans Discovery Workshop (90 mins)	Data and Integration Strategy (60mins, Tech Group)	Appointment Scheduling Discovery Workshop (90 mins) Student 360 Discovery Workshop (90 mins)
	March 3	March 4	March 5	March 6	March 7
W 4	Change Mont Stakeholder Interviews (30 mins)	Care Plans Discovery Workshop (90 mins)	Change Mgmt Weekly (60 mins)	Data and Integration Strategy (60 mins, Tech Group)	Change Mgmt - Stakeholder Interviews (30 mins)

Questions?





IV.C. Recent Internal Audits	Wayne Poole	
Chief A	Audit Officer	

Situation:	The committee receives a briefing at each meeting on selected internal audit engagements that have been closed.
Background:	Committee Chair Smith and Vice Chair Workman selected the engagements to be discussed at this meeting.
Assessment:	Mr. Poole will present background and results of the selected engagements. Members of University management will also be present to answer questions about the status of resolving any audit recommendations.
Action:	This item is for information only.



V.	Closed Session	Vince Smith
		Committee Chair

- **Situation:** This committee receives updates on specific audits, compliance, and other related topics that are not a matter of public record in accordance with applicable North Carolina General Statutes.
- **Background:** The committee does need to receive updates on some non-public matters at this meeting.
- Assessment: The committee will receive updates on the relevant issues from University administrators.
- Action: This item is for discussion only.



VI.	Other Business	Vince Smith
		Committee Chair

- **Situation:** This agenda item is for any other business deemed necessary by the committee.
- **Background:** This committee members will suggest any other items needing discussion.
- Assessment: The committee will discuss the relevant issues.
- Action: This item is for discussion only.