



VIRGINIA COMMONWEALTH UNIVERSITY

**VIRGINIA COMMONWEALTH
BOARD OF VISITORS
AUDIT, INTEGRITY AND COMPLIANCE COMMITTEE
MARCH 21, 2024
12:00 pm
James Branch Cabell Library
901 Park Avenue – Room 303**

AGENDA

- 1. CALL TO ORDER** *Mr. Peter Farrell, Chair*
- 2. ACTION ITEMS** *Mr. Peter Farrell, Chair*
(1 minute)
 - a. Approval of Minutes December 7, 2023**

FOR INFORMATION:

- 3. REPORT FROM EXECUTIVE DIRECTOR OF
AUDIT AND COMPLIANCE SERVICES** *Mr. David Litton, Interim Executive
Director, Audit and Compliance Services*
(20 minutes) *Ms. Suzanne Milton, Chief Ethics and
Compliance Officer*
 - a. Committee Dashboard Measures
 - b. Internal Audit Reports
 - i. Service Contract Management
 - ii. SCHEV Reporting
 - c. Handout: Audit Work Plan Status FY24
 - d. Modification of FY2024 Audit Work Plan
 - e. Ethics and Compliance Update
- 4. DATA GOVERNANCE UPDATE** *Mr. Michael Bourgeois, Associate
Vice Provost, Institutional Research
and Decision Support*
(15 minutes)
- 5. INFORMATION TECHNOLOGY UPDATE** *Mr. Alex Henson, Chief Information
Officer*
(10 minutes)
- 6. EQUITY AND ACCESS SERVICES UPDATE** *Ms. Cleopatra Magwaro, Associate
Vice President, Equity and Access
Services*
(15 minutes)

7. **CLOSED SESSION** – *Freedom of Information Act Sections 2.2-3711 (A)(7), (8), and (19), specifically:*
(10 minutes)

- a. Audit Reports for Discussion
 - i. Sunapsis ICCR

Mr. Blake Bialkowski, *Deputy Director, IT Audit, VCU and VCUHS*

- b. University Counsel Litigation Update

Mr. Jacob Belue, *Associate University Counsel*

8. **RETURN TO OPEN SESSION AND CERTIFICATION**

Mr. Peter Farrell, *Chair*

Resolution and Certification

Action Items, if any

9. **ADJOURNMENT**

Mr. Peter Farrell, *Chair*

AUDIT, INTEGRITY, AND COMPLIANCE COMMITTEE

DASHBOARD MEASURES

INFORMATION TECHNOLOGY GOVERNANCE - DATA INTEGRITY



DATA GOVERNANCE PROGRAM (development of program)



Program progressing successfully

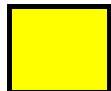


Barriers / challenges encountered that may have an impact on issue resolution or implementation. Executive Council to resolve challenge.



Significant challenge encountered; will require decision from Executive Leadership Team to resolve

The new Associate Vice Provost for Institutional Research and Decision Support joined VCU in mid-Fall. Efforts continue to evaluate and strengthen the policy and process infrastructure around data governance, to reconstitute the data governance committee to better cover all data domains and to install a tactical data governance team to enact day-to-day governance. Early priority continues to focus on standardizing and enhancing the collection and maintenance of faculty data, with active projects underway to revitalize the system used to collect faculty credentials and report those as necessary. Efforts to relaunch the data warehouse effort will resume in the spring.



DATA SECURITY (number of security incidents / breaches)



No data breaches have occurred or seem likely to occur; security risks are well understood and being mitigated; resources viewed as aligned with threat and risk environment



No breach has occurred, but minor security incidents or near-misses have occurred; significant audit findings have occurred but are being mitigated; some overload or barriers / challenges encountered that may require adjustment or reallocation of resources



Significant breach requiring notification has occurred or conditions exist where significant barriers/challenges are likely to produce unacceptably high levels of risk

Security Incidents and Trends: VCU has not directly experienced any cybersecurity incident in the past quarter that led to any significant impact. However, threat actors are continuing to evolve their tactics, and VCU is actively monitoring vulnerabilities and threats and assessing its own environment and capabilities to manage the risks.

Enhancement of multifactor authentication (MFA) system: In response to modern threats that can allow threat actors to bypass traditional MFA systems, VCU is enhancing its existing MFA system with phishing-resistant features designed to better safeguard the credentials of VCU employees, students, and affiliates from sophisticated MFA bypass attacks. Enhancements to DUO are rolling out in March, 2024.

Next generation security architecture: VCU is continuing to fully implement a location-agnostic and Zero-Trust security architecture Secure Access Server Edge, or SASE). The completion of VCU's SASE deployment has allowed VCU to gain unprecedented protection and visibility for its workforce regardless of location, and continuous enhancements are being made to the platform. Between November 1, 2023 and January 31, 2024, the VCU SASE platform has inspected over 3.8 billion network transactions and stopped 3.07 million threats targeting VCU computers and resources. In addition to the continuous SASE development, VCU is in the process of deploying advanced endpoint protection technology to all managed computers. Previously reserved for the highest sensitivity assets, these advanced endpoint protection systems will provide further protection for all computers against modern threats and further reduce the university's cyber risks.

Secured Research Environment: The Secured Research environment is still in piloting phase, awaiting migration to the new VCU data center before it is opened to the broader population. Additional work is being performed to ensure the research data pipeline is adequately provisioned to support the environment. Gramm-Leach-Bliley Act (GLBA)

Compliance: VCU has successfully reviewed and addressed the additional gaps between its practices and the new GLBA safeguards rule. A security penetration test is

ERM PROGRAM



Status of ERM mitigation plans



Program progressing on schedule

Program not on schedule; ERM Committee to address.

Program significantly behind schedule; Executive Management attention required.

The ERM Steering Committee has voted three (3) risks previously out of tolerance back within tolerance. This decision will be reviewed by the Cabinet in September for approval and presented to the Board in December.

PLANNED AUDIT STATUS



PLANNED AUDITS (status of audits - planned and unplanned to available resources)



SPECIAL PROJECTS (status of special projects - planned and unplanned to available resources)



Progressing as planned and within overall budget

Some overload or barriers / challenges encountered that may require adjustment or reallocation of resources to resolve




Significant overload or barriers / challenges encountered resulting in major delays or changes to scheduled work plan

The audit plan is progressing well; however we are short one university auditor position and plan to hold on filling the position to accommodate FY24 budget cuts. The audit team is assessing how the vacancy will affect our workplan schedule and will defer lower risk audits until later in the year. Investigations have been increasing and this work further affects our workplan schedule, but currently we are managing this work effectively.

INSTITUTIONAL COMPLIANCE PROGRAM

 **Compliance requirements compared to known material violations**

 **Compliance Program Oversight & Effectiveness**

-  No known material noncompliance; or ownership and accountability for compliance risks are established and operating at explicitly or implicitly approved levels of risk tolerance or appetite
-  Challenges encountered that have an impact on visibility, verification, strategy implementation or resolution
-  Significant challenges to institutional compliance strategy or resolution encountered

Notes: There are no known material compliance violations related to regulatory, legal or university policies. The Integrity and Compliance Office (ICO) is on track with a three-year workplan focused on improving effectiveness in six areas: Program Structure, Culture, Policies, Investigations/ Accountability, Training/Communication, Risk Assessment/Monitoring. Also good progress in building trust with departments and schools so that they understand how we can support them with independent reviews and guidance. (examples: School of Nursing, School of Pharmacy, VCU Police, VCU Arts Qatar, OVPRI, Office of the Provost, Facilities, School of Medicine).



VCU

VIRGINIA COMMONWEALTH UNIVERSITY

Service Contract Management

Final Report
February 19, 2024

Audit and Compliance Services

Overview

Procurement Services (Procurement) has an oversight role in managing decentralized service contracts administered by various departments, including units and schools. Procurement designates department contract stakeholders within the departments to administer contracts, which includes monitoring vendor performance and ensuring vendors adhere to the terms and conditions of the contract.

Department contract stakeholders are designated in one of two ways. If the contract is less than \$10,000, RealSource (the University's procure to pay system) automatically designates the submitter of the contract request as the stakeholder. If \$10,000 or greater, the assigned buyer designates the contract requestor as the stakeholder.

Procurement also provides decentralized administration for widely utilized contracts such as; printing, lab, and office services as well as support to centralized administration units such as the units shown below. Both types of contracts total more than \$107 million annually.

- Business Services (Dining, Mail, and Bookstore)
- Campus Security
- Parking and Transportation Services
- Technology Services

In addition, the Facilities Management Department (FMD) contract administration team centrally manages select service contracts with a value of approximately \$26 million between the Monroe Park and VCU Health Sciences campuses. FMD contract administrators are responsible for ensuring vendors bill the university accurately, the university pays invoices timely, and vendors adhere to the contract's terms and conditions.

FMD contract administrators centrally manage the following types of service contracts (not all inclusive):

- Custodial
- Waste management
- Building automation systems
- Electrical
- Fire systems
- HVAC, mechanical and refrigeration

Purpose

The objective of the audit was to determine whether there were adequate procedures for the management of centralized and decentralized service contracts.

Scope and Audit Procedures

Our scope of Service Contract Management encompassed centralized and decentralized administration of service contracts; vendor performance per the contract's terms and conditions, monitoring of vendor performance, and timely and accurate payment to vendors.

Audit procedures consisted of the following:

- Interviews with personnel in FMD's contract administration
- Meetings with Procurement
- Review of:
 - Procurement's procedures for contract management for decentralized contracts
 - FMD's contract administration team's monitoring procedures for service contracts
- Evaluation of:
 - Compliance with Procurement's Prompt Pay policy for a select sample of contracts
 - Quality assurance inspectors' performance checks in relation to the FMD custodial contract
 - A select sample of centralized and decentralized service contracts to determine if evergreen clauses were present
- Testing a select sample of contracts for:
 - Vendor compliance with terms and conditions for a select sample of contracts
 - Vendor completion of projects and/or services in a timely manner
 - Sign off by zone supervisor and/or end users that vendors completed work satisfactorily
 - Timely and accurate payments to vendors

Conclusion

In our opinion, based on the results of our audit, there were adequate procedures for the management of centralized and decentralized service contracts.

A recommendation to strengthen Procurement Services' communication process with department contract stakeholders was included in a separate report furnished to management.

Prior to releasing this report in final form, the draft report was reviewed by, and management's action plans were provided or approved by, the following officials:

Sylvia Britt	Director of Support Services and Contract Management
Richard Sliwoski	Associate Vice President of Facilities Management
Ramona Taylor	Assistant Director, Contracts and Compliance, Procurement Services
John McHugh	Director of Procurement Services
Patricia Perkins	Associate Vice President for Finance

Meredith Weiss

Interim Vice President for Finance and CFO and Vice
President for Administration

Our audit was conducted in conformance with the *International Standards for the Professional Practice of Internal Auditing* and included an evaluation of internal controls and such procedures as we considered necessary in the circumstances.



**Interim Executive Director
Audit and Compliance Services**



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VIRGINIA COMMONWEALTH UNIVERSITY

SCHEV Reporting

Final Report
February 26, 2024

Audit and Compliance Services

Overview

The State Council of Higher Education in Virginia (SCHEV) maintains data and statistics about Institutions (Institutions) of Higher Education on their website for public information. Institutions provide data and statistics according to SCHEV's Data Collection Calendar and instructions on how to submit data. The calendar lists reports to submit and deadlines for submission, and links to reporting instructions.

VCU SCHEV Reporting Responsibility

Institutional Research and Decision Support (IRDS) shares data collection and reporting efforts with VCU departments. Departments are responsible for data collection, verification and security and IRDS develops methods departments use to extract information from authoritative data systems. The SCHEV reporting process is data intensive, requiring appropriate data sourcing to ensure accurate and timely reporting.

Data Sourcing

Banner is the university's system of record that contains financial, student, and human resources data and is the authoritative data source for SCHEV reporting. Banner's Operational Data Store (ODS) is a copy of the production database that aggregates and centralizes data for reporting capabilities. Departments obtain some data elements outside of the ODS such as departments' projected tuition and fees, and admissions data from Health Sciences schools that use separate systems to manage this data. IRDS develops SQL code and scripts in the ODS to extract data for Strategy, Enrollment Management and Student Success to meet their SCHEV reporting requirements. Below are many of the data elements Strategy, Enrollment Management and Student Success reports to SCHEV:

- **Strategy, Enrollment Management and Student Success** – Semester enrollments and headcounts, degrees conferred, fall and spring cohorts, early enrollment, student financial aid, and admissions summaries (including first time freshmen and admission requirements for example)

In addition, several departments are responsible for compiling data which they report to SCHEV, below are examples of data they report:

- **Grants and Contracts** – Sponsored research activities
- **Office of Budget, Resource and Financial Analysis** – Tuition and fees
- **Facilities Management** – Space utilization

To assist data compilation efforts, SCHEV provides instructional guides on report preparation. IRDS references these guides to prepare internal step by step instructions for preparation of reports produced for Strategy, Enrollment and Student Success. IRDS also provides guidance and logistical support for student financial aid reporting.

Purpose

The objective of the audit was to determine whether sufficient measures were in place to ensure that VCU submits required SCHEV reports timely and accurately.

Scope and Audit Procedures

Our scope of the audit of SCHEV Reporting encompassed processes of developing data for SCHEV required reports, data management and sourcing for data used in SCHEV reporting, and verification of report data.

Our audit procedures included

- Process interviews and demonstrations with process owners for the various reporting units
- Review of:
 - Process instruction narratives
 - The SCHEV reporting calendar
 - Verification of codes used in producing data
- Inquiries of verification, monitoring and confirmation methods
- Examination of data manipulation processes

Conclusion

In our opinion, based on the results of our audit, sufficient measures were in place to ensure that VCU submits required SCHEV reports timely and accurately.

Prior to releasing this report in final form, the draft report was reviewed by the following officials:

Constance Peyton	Director, Institutional Research
Michael Bourgeois	Associate Vice Provost for Institutional Research and Decision Support
Hernan Bucheli	Interim Vice President for Strategic Enrollment Management and Student Success
Fotis Sotiropoulos	Provost and Senior Vice President for Academic Affairs

We conducted our audit in conformity with the *International Standards for the Professional Practice of Internal Auditing* and included an evaluation of internal controls and such procedures as we considered necessary in the circumstances.



**Interim Executive Director
Audit and Compliance Services**

Audit and Management Services
Status of Fiscal Year 2023-2024 Audit Work Plan
February 29, 2024

Area	Status
<u>Current Year Risk-based Audits and Assessments</u>	
Financial & Operational Audits:	
President's Office ICCR	Completed
SCHEV Reporting	Completed
Service Contract Management	Completed
Ancillary Systems Integrity	In Progress
VCU Card Office	In Progress
Telecommunications	In Progress
Qatar Campus ICCR	In Progress
Human Resources – Compensation	Not Started
Facilities Management – Deferred Maintenance	Not Started
College of Health Professions ICCR	Not Started
Online Distance Learning*	Not Started
Procurement Office ICCR*	Not Started
IT Audits:	
Sunapsis (Visa Management) System Review	Completed
Canvas IT Security Review	In Progress
Massey Cancer Center IT Review	In Progress
Centers and Institutes Technical Review	Not Started
Pyramed (Student Health) System Review	Not Started
<u>Annual Engagements and Activities</u>	
VCU Police Department – Unannounced Property Inspection – FY24 Part 1	Completed
President's FY 23 Discretionary Fund and Travel Activity Review	Completed
Audit Risk Assessment for FY 2025-2027 Three Year Plan	In Progress
Annual Review of Audit Recommendations Outstanding – FY24	In Progress
VCU Police Department – Unannounced Property Inspection – FY24 Part 2	Not Started

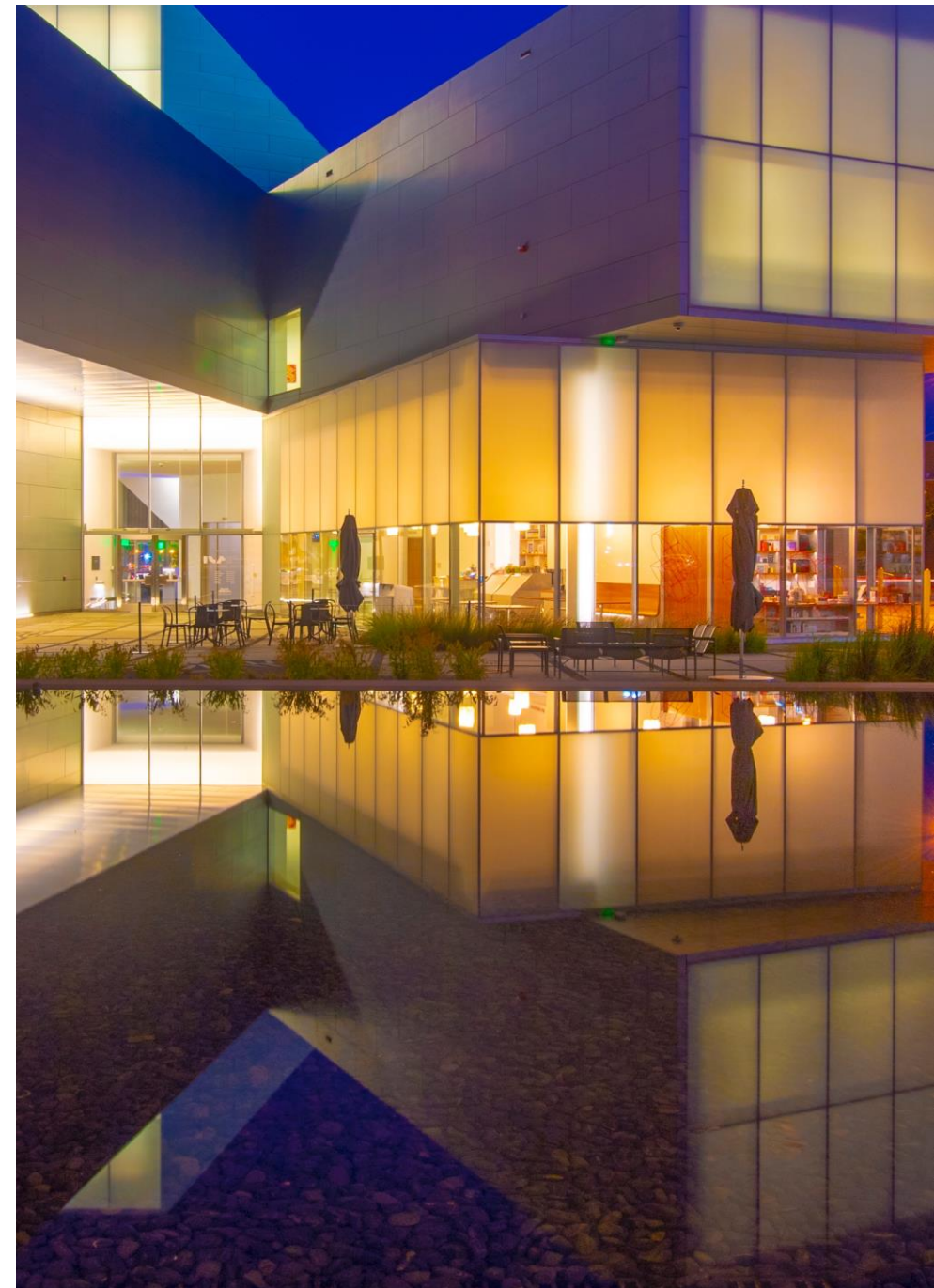
Audit and Management Services
Status of Fiscal Year 2023-2024 Audit Work Plan
February 29, 2024

Special Project	Status
<u>Continuing Projects</u>	
State Employees Fraud, Waste, and Abuse Hotline	In Progress – 2; Closed – 1
Special Projects	In Progress – 1; Closed – 5
<u>Other Projects</u>	
Facilities Management and Accounts Payable Project	Completed

*Audits removed for FY 2024 due to vacancies and increase in special projects. Will reconsider these audits in the upcoming 2025 risk assessment and three-year audit plan

VCU BOARD OF VISITORS

Audit, Integrity and Compliance Committee
March 21, 2024



For Action: Approval of Minutes

- Audit, Integrity and Compliance Committee Meeting held on December 7, 2023
- Motion to approve the Minutes

Committee Dashboard Measures

- Data Governance Program
- Data Security
- ERM Mitigation Plans
- Planned Audits
- Planned Special Projects
- Ethics and Compliance Program Oversight

Service Contract Management

Conclusion: There were adequate procedures for the management of centralized and decentralized service contracts.

No Board Level Findings

Audit Scope:

- Vendor performance per the contract's terms and conditions
- Monitoring of vendor performance
- Timely and accurate payment to vendors



SCHEV Reporting

Conclusion: Sufficient measures were in place to ensure that VCU submits required SCHEV reports timely and accurately.

No Findings

Audit Scope:

- Processes of developing data for SCHEV required reports
- Data management and sourcing for data used in SCHEV reporting
- Verification of report data



Audit Findings Status Update

VP's attested that 26 of 32 audit recommendations outstanding are on target to meet their due date. Full schedule provided in handouts.

Finding	Due Date	Revised Due Date	VP on Target
Include the Data and Intellectual Property Addendum in the Maxient Contract (Maxient IT Control Review)	Jan 2024	March 2024	N
Evaluate and Improve Usage of the BlackbaudAward Management System Globally (Unused Scholarships)	Dec 2023	December 2024	N
Strengthen Policy Statements for Clarity and to Designate Process Ownership (Unused Scholarships)	Dec 2023	December 2024	N



N – Target in Jeopardy or Already Missed

Audit Findings Status Update

Continued

Finding	Due Date	Revised Due Date	VP on Target
Improve Banner Reconciliation Process (University College Internal Control Compliance Review)	Aug 2023	August 2024	N
Improve Records Management Processes (Global Education Internal Control Compliance Review)	Sept 2023	April 2024	N
Improve ARMICS Testing and Documentation (Global Education Internal Control Compliance Review)	April 2024	May 2024	N

N – Target in Jeopardy or Already Missed

Item For Information

Discussion of Modification to FY2024 Audit Work Plan

Integrity and Compliance Mid-year Report

Fiscal Year 2024



Reported Concerns Mid-year Update

- Reported concerns volume steady compared to last year
- Substantiated cases demonstrate comfort of students, staff in reporting despite pressure, fear of retaliation
- Anonymous rate continues to be low (21%) indicating trust in the process
- Top substantiated matters
 - Ethics violations (6)
 - Health and safety (4)
 - Abuse of power (2)
 - Fraud/accounting issues (2)

Good progress on first distribution of COIC questionnaire to faculty/select staff; continue to support supervisors in reviewing, resolving disclosures

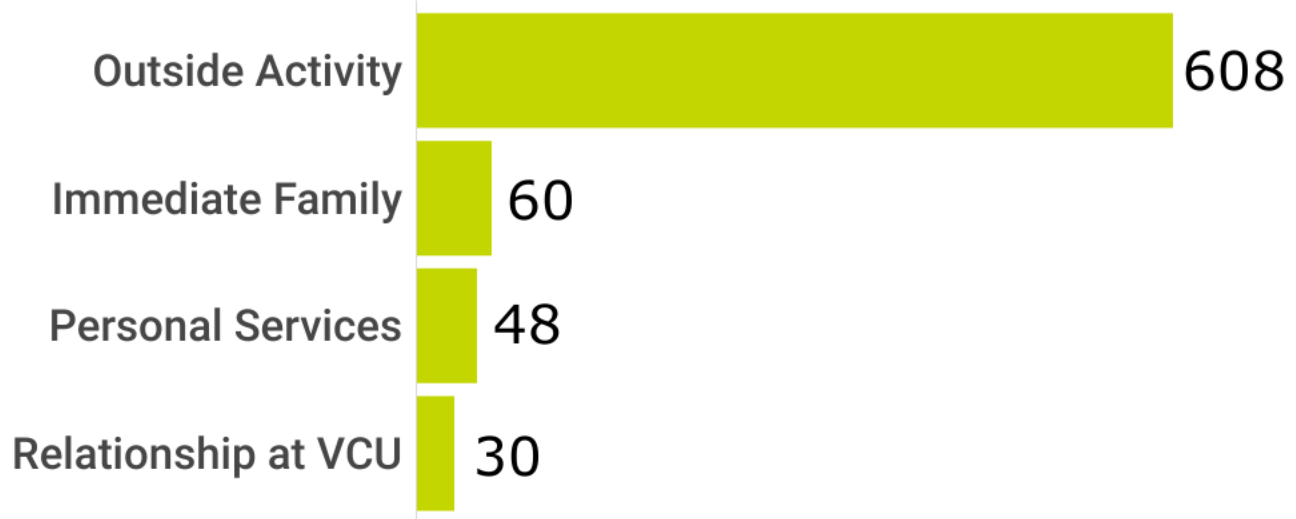
2,039

employees received the questionnaire prompting disclosures.

804

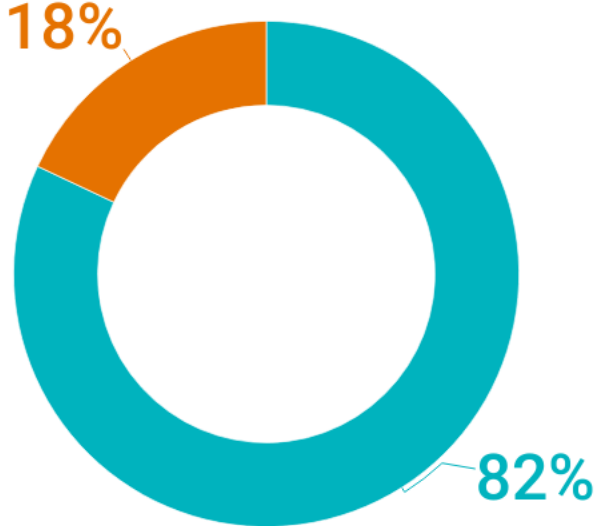
disclosures of outside activities or relationships have been submitted so far.

Most Common Disclosure Types



● Disclosure Categories

Questionnaire Completion as of 3/1/24



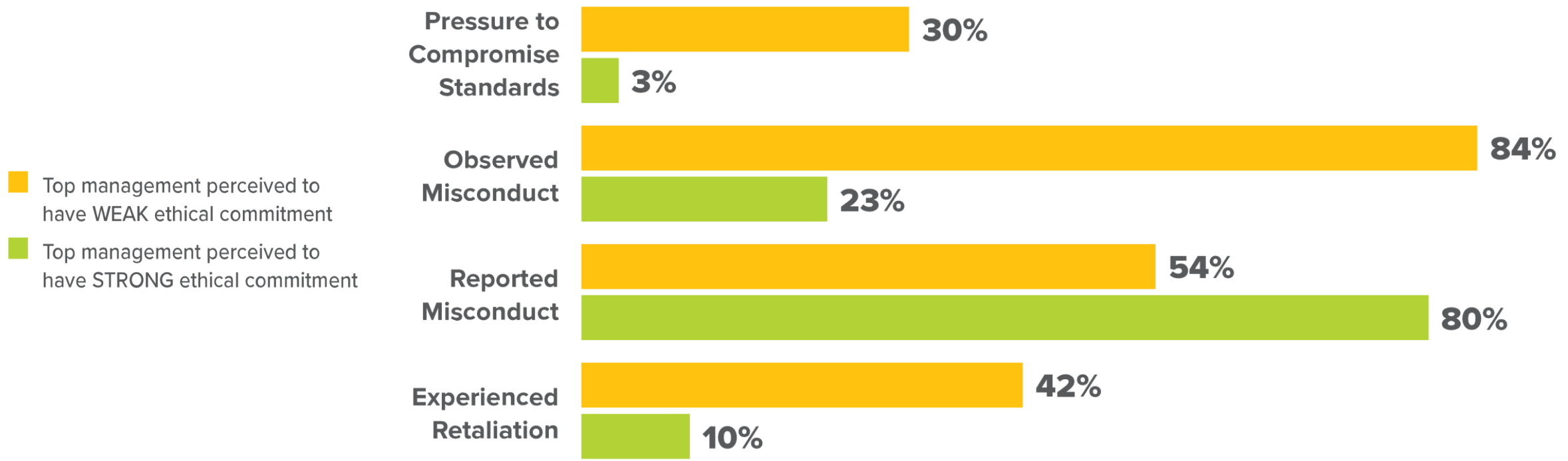
● Complete ● Incomplete

Culture: Integrity Survey Launches April 5, 2024

- Hosted externally by Ethics and Compliance Initiative (ECI) to ensure maximum comfort and confidentiality for responders
- 15 questions, all but two benchmarked to larger U.S. data set and/or smaller data set of other colleges and universities, designed to get at key perceptions of culture and integrity
- ICO will report this data to business units and departments, and actively partner with them to understand their results and make progress in sustaining a culture of integrity and openness.

Why Measure Culture

When leaders demonstrate a commitment to ethics, workplace integrity improves significantly.*



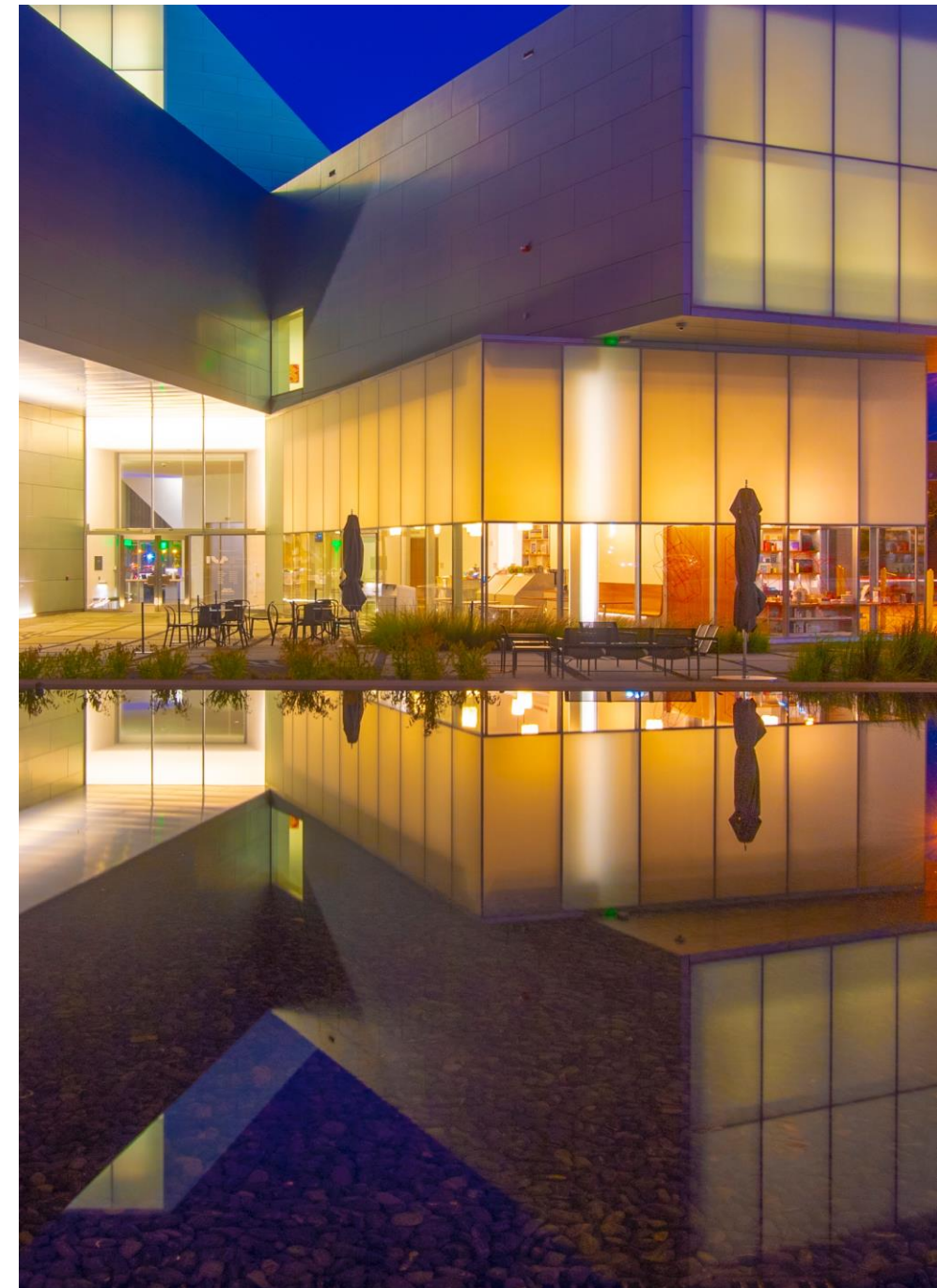
*Ethics and Compliance Initiative (ECI), July 2023 Fellows Meeting, taken from 2023 Global Business Ethics Survey (GBES), Fall 2023.

Clery Act Reporting Update

- In December, 2023, **VCU issued a correction to its Clery data for 2021 and 2022** in four categories, based on a staff error. The correction was **accompanied by a press release** explaining what happened and committing to improve our data collection process. As required by the Clery Act, we also **posted the corrected copy** and notified our VCU community of the change.
- **VCU Police hired a consultant** to perform a **review of our data collection and consolidation process** for the Annual Security Report. The consultant **conducted a site visit and interviews on March 6 and 7** and **will issue his report and recommendations soon**.
- **VCU has created a Clery Executive Review Committee** that will **receive and review the Annual Security Report and Clery data 45-60 days before release** each year. This committee will be **chaired by our office (ICO)** and **will also include Safety and Risk Management, Student Affairs, EAS** and others, as needed. VCU has also **reinstated regular collaboration meetings involving VCU Police, Student Affairs, Title IX** and others **to ensure timely data comparison/validation** throughout the year.

Data Governance Update

Michael Bourgeois, Ph.D.
Associate Vice Provost, IRDS

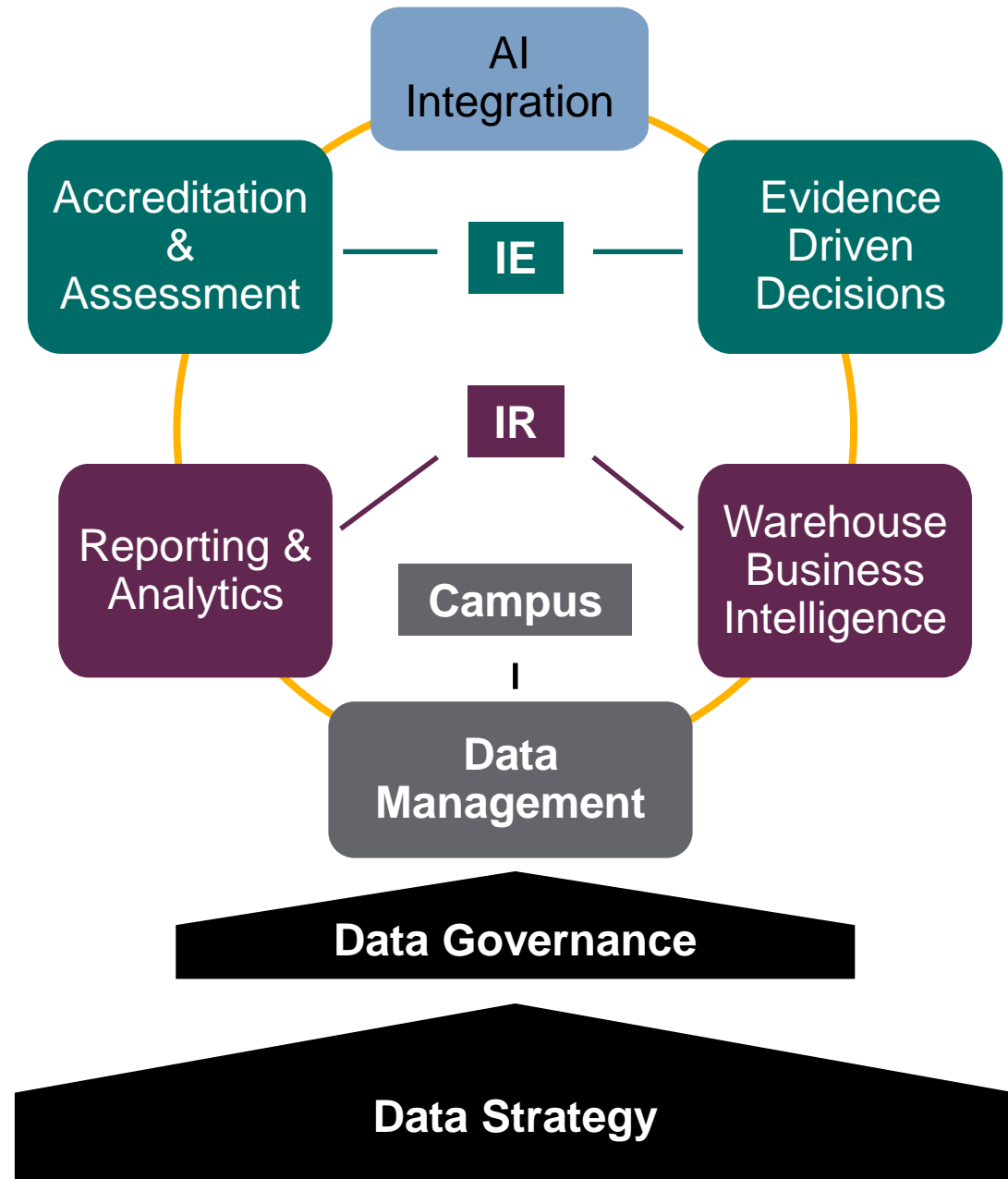


You can't manage what you don't define

“**Data Governance** is a system of decision rights and accountabilities for information-related processes, executed according to agreed-upon models which describe who can take what actions with what information, and when, under what circumstances, using what methods.”

Data Governance Institute retrieved 11.28.2023

Data governance, with a data strategy, is the foundation for institutional data maturity.



What does a mature, data and analytic-informed institution look like?



Data are valid & reliable



Data system ensures consistency and quality



There are minimal intermediaries; they are responsive to changing needs



Centralizing unit & data managers have strong partnerships



Data are centrally stored & maintained



Data access is simple

What solutions do we need to get there?

Break through silos and
improve data integration

Ensure data consistency
and reliability

Increase availability of data
to stakeholders

**Elevate trust to add
value to a data-
informed culture**

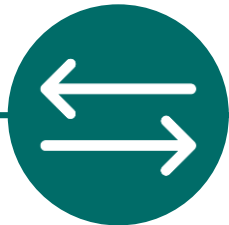
Where are we now?



We are aligning our DIMC efforts to support a mature data culture



We are evaluating existing and potential data warehouse solutions



Culture shift: There is a desire for data maturity

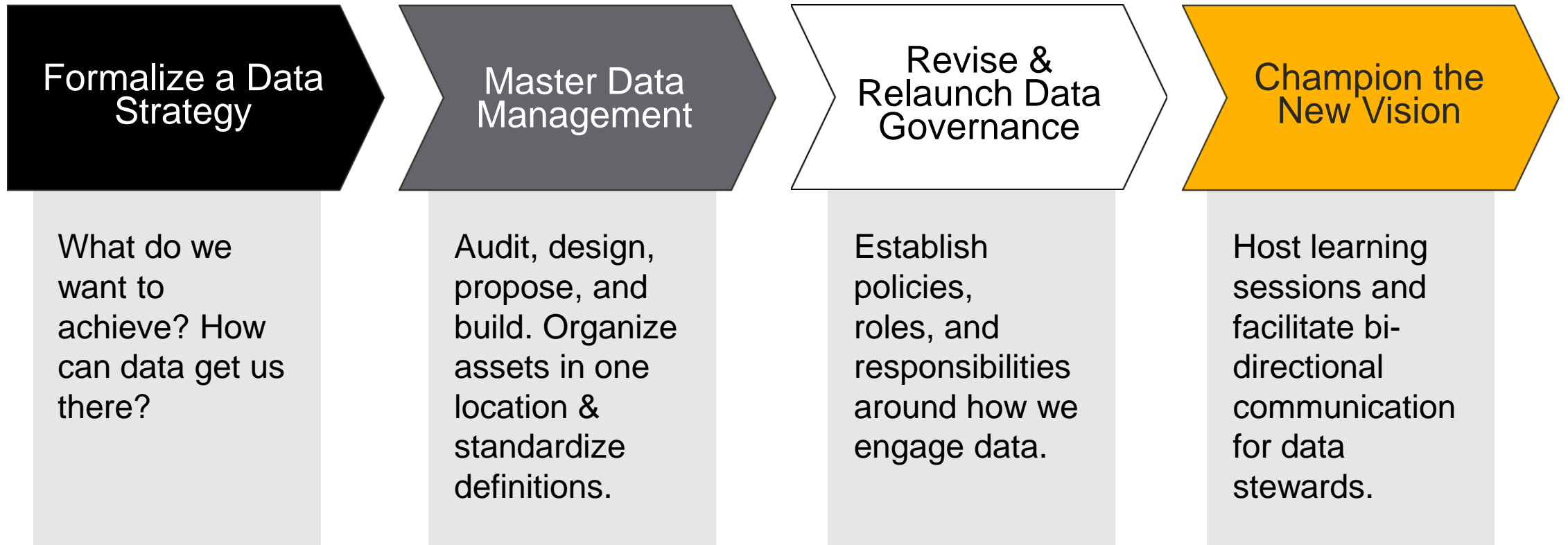


The response rate from data owners is improving



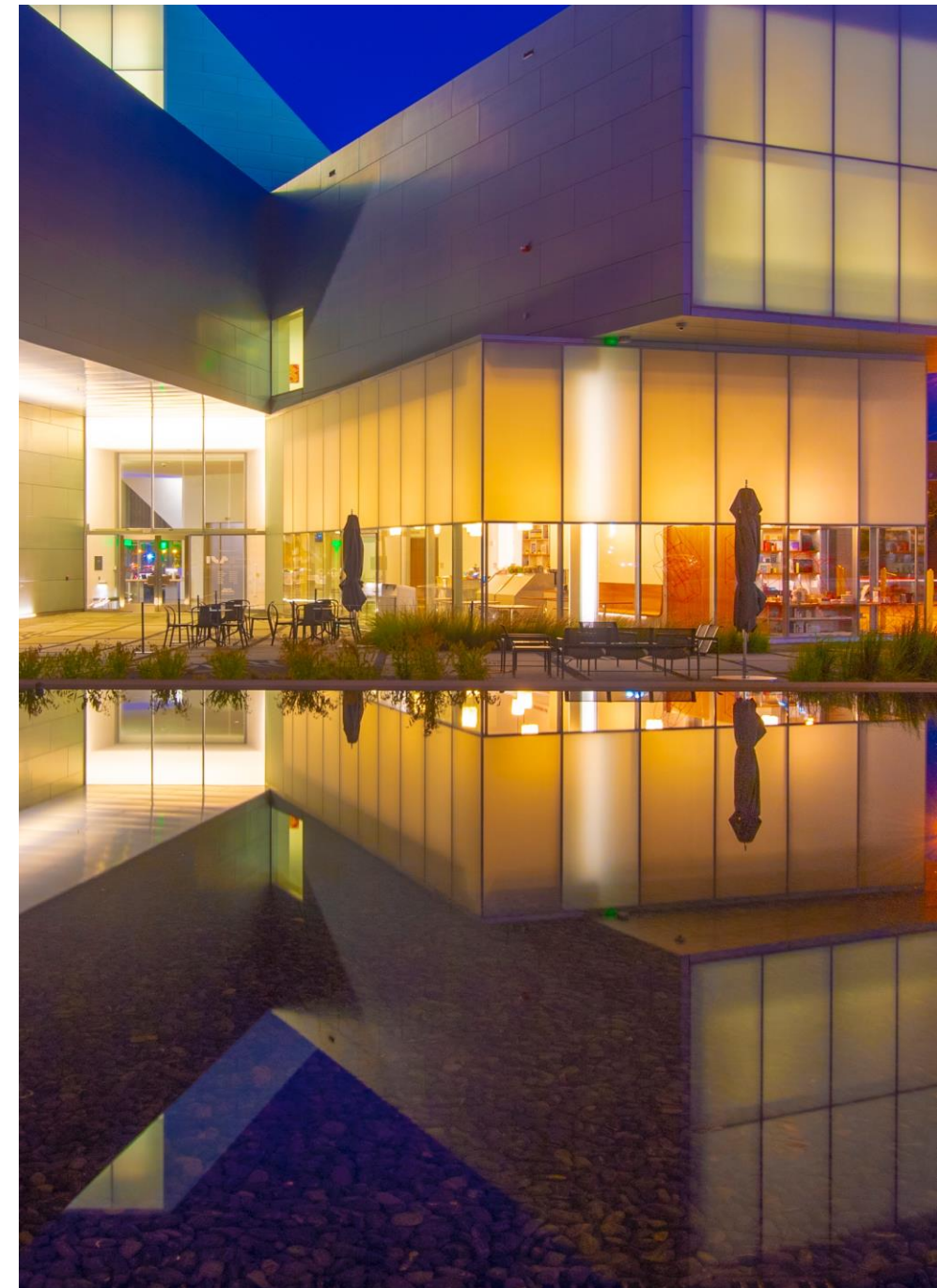
We are modernizing and creating new data dashboards

Our Path Forward

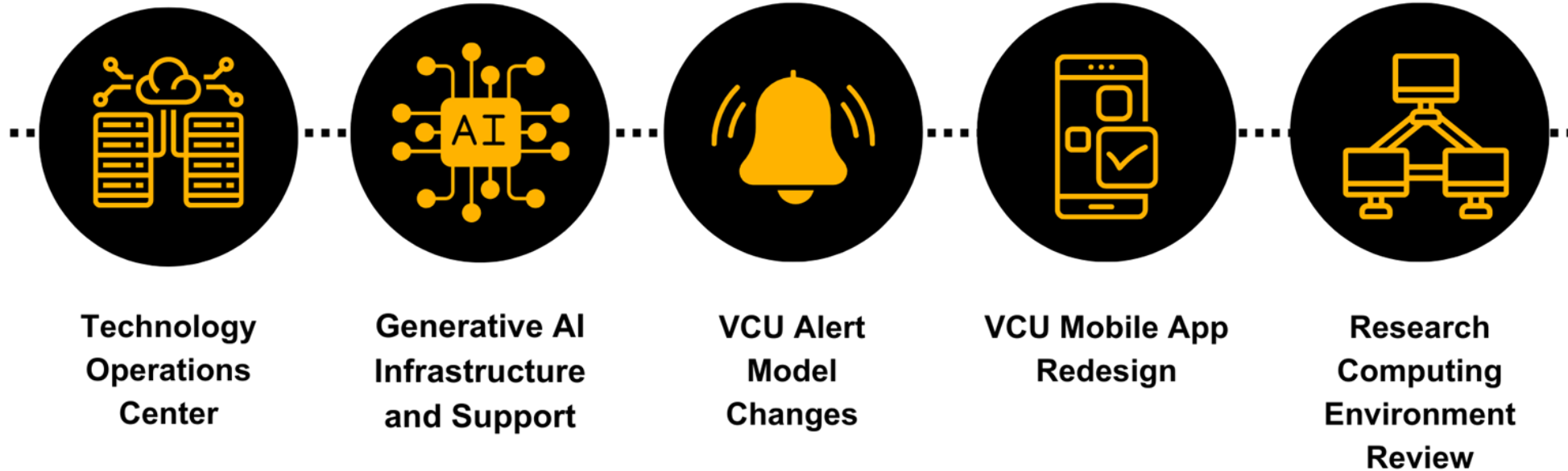


Information Technology Update

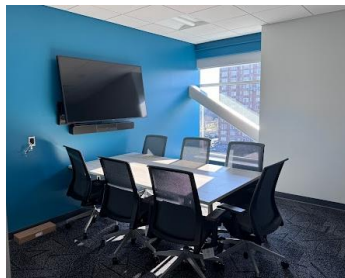
Alex Henson, Chief Information Officer



Major Project Updates



Technology Operations Center



Key Milestones:

- Notified of requirement to vacate 900 E. Main in April, 2021
- Construction of new building approved by BOV in October, 2021
- Construction started in Spring, 2022
- Building completed in March, 2024
- Data Center Migration underway with expected completion July, 2024

Scope of Data Center Migration:

- Rebuilding entire campus data and telephony network in new facility
- 256 pieces of equipment presently in scope
 - 154 new devices to be installed in TOC
 - 102 devices to be moved from 900 E. Main
- Miles of fiber will be rerouted/installed
- No substantial down time allowed
- Decommissioning of 900 E. Main facility

Security Updates

**Mandatory
IT Security
Training**



**Multi Factor
Authentication
Changes**



**Security
Infrastructure
Improvements**

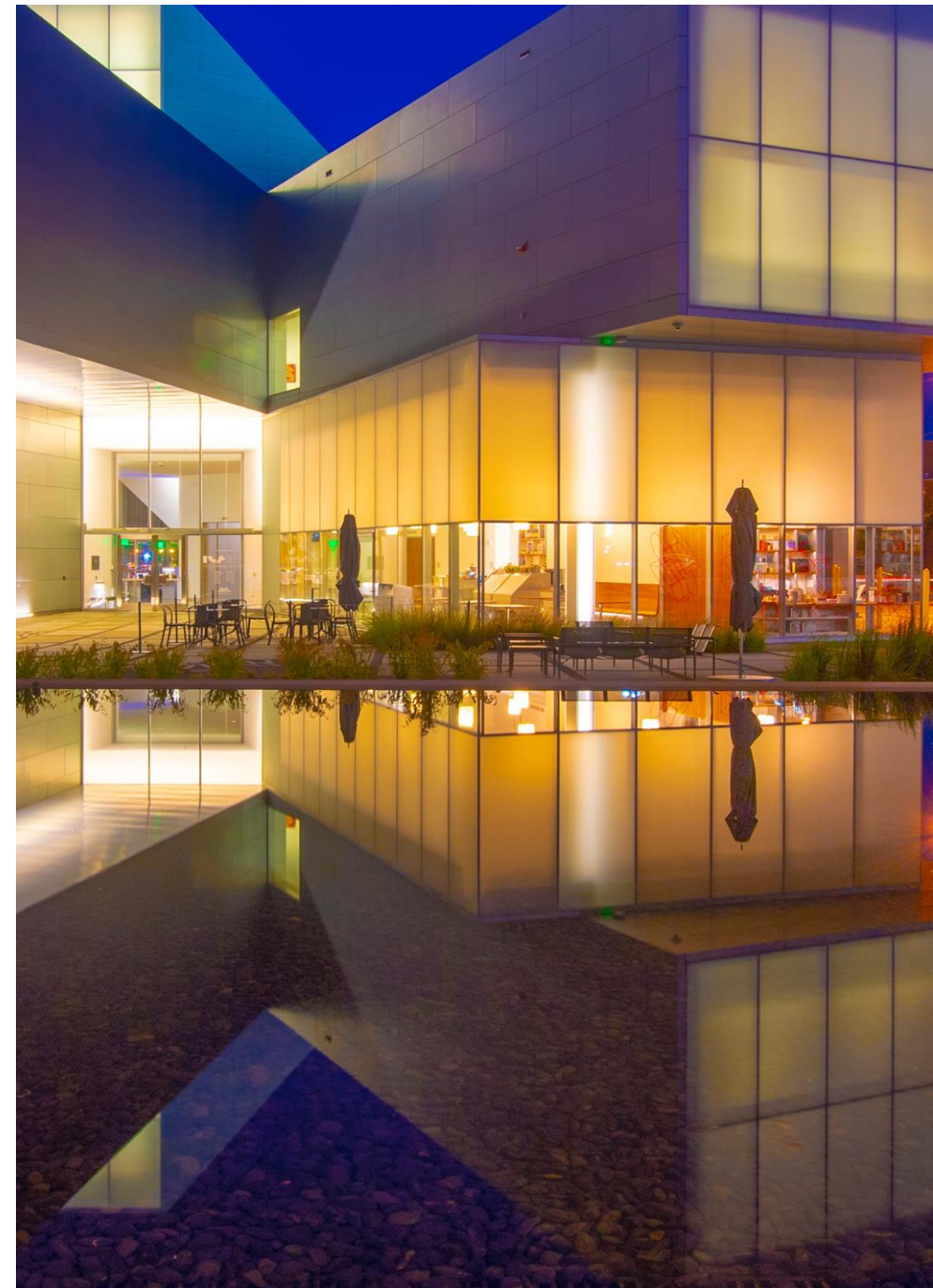


Audit & Compliance Activity



- Internal Audits: Average of 5 per year
 - 3 risk based IT audits larger in scope
 - 2 IT control reviews
- Annual IT Control Review by Virginia Auditor of Public Accounts
- Annual Penetration Testing as part of GLBA and PCI DSS compliance
- This Year: Cybersecurity Audit of Higher Ed institutions being conducted by Office of the State Inspector General
- Information Security Office conducts Security and Accessibility Reviews of IT purchases through VCU IT Governance
- Information Security Office conducts annual review of key third party providers

Equity & Access Services



Overview

VCU

EAS achieves compliance with state and federal civil rights laws and regulations across 4 units:

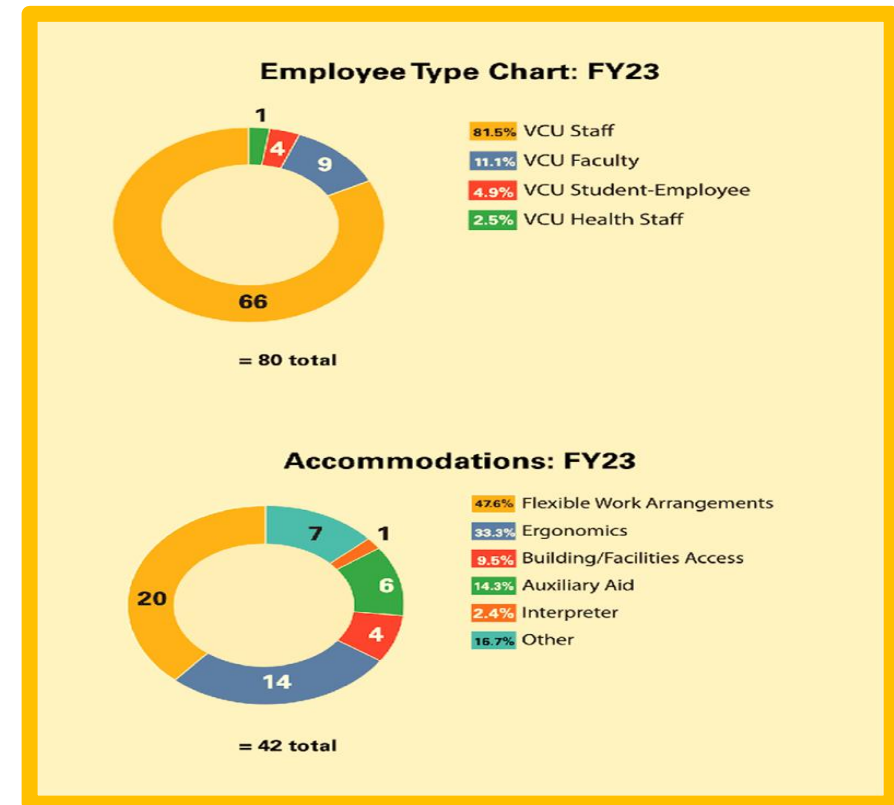
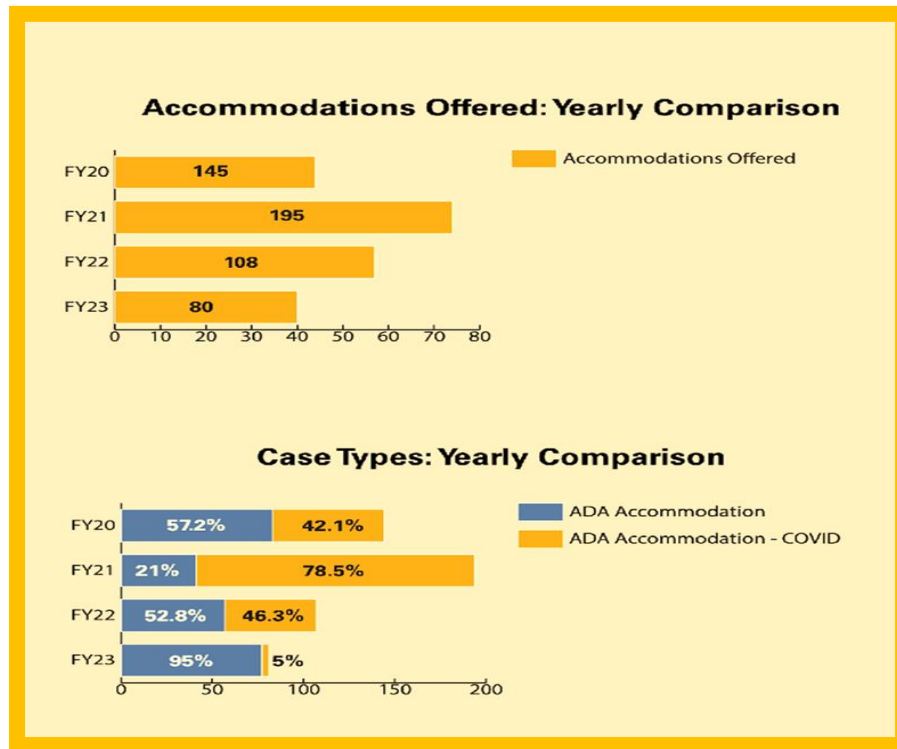
- [ADA/Accessibility Services Office](#)
- [Equal Opportunity and Affirmative Action Office](#)
- [Protection of Minors Office](#)
- [Title IX Office](#)

Our [Annual Reports](#) highlight our data. There has been improvement in data collection since 2021, and we will have more robust trends data for comparison, over time.

ADA & Accessibility



ADA accommodations data highlights how flexibility creates inclusion.



Accommodations offered show a correlation with COVID— FY2020-FY2023.

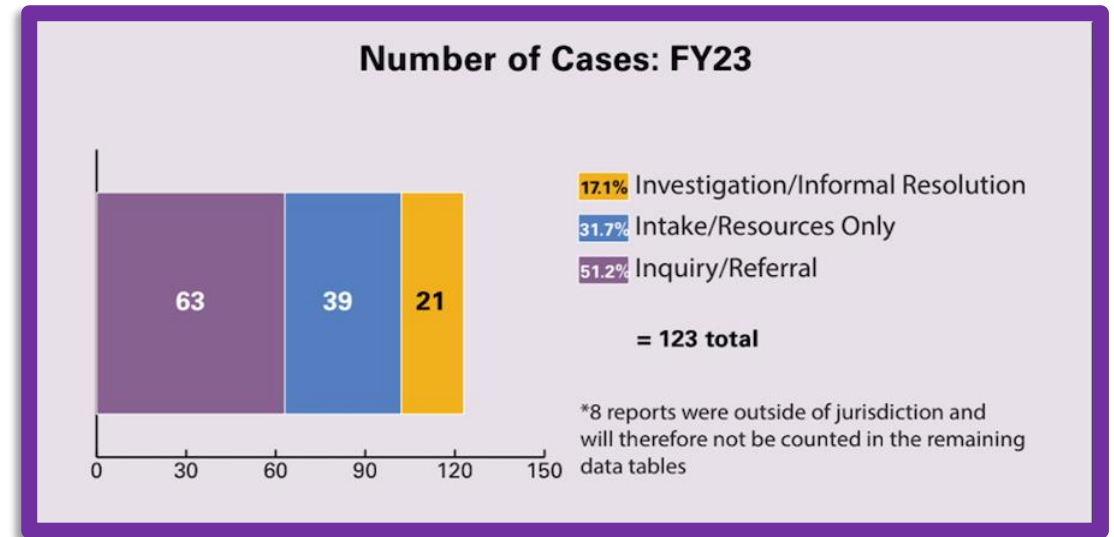
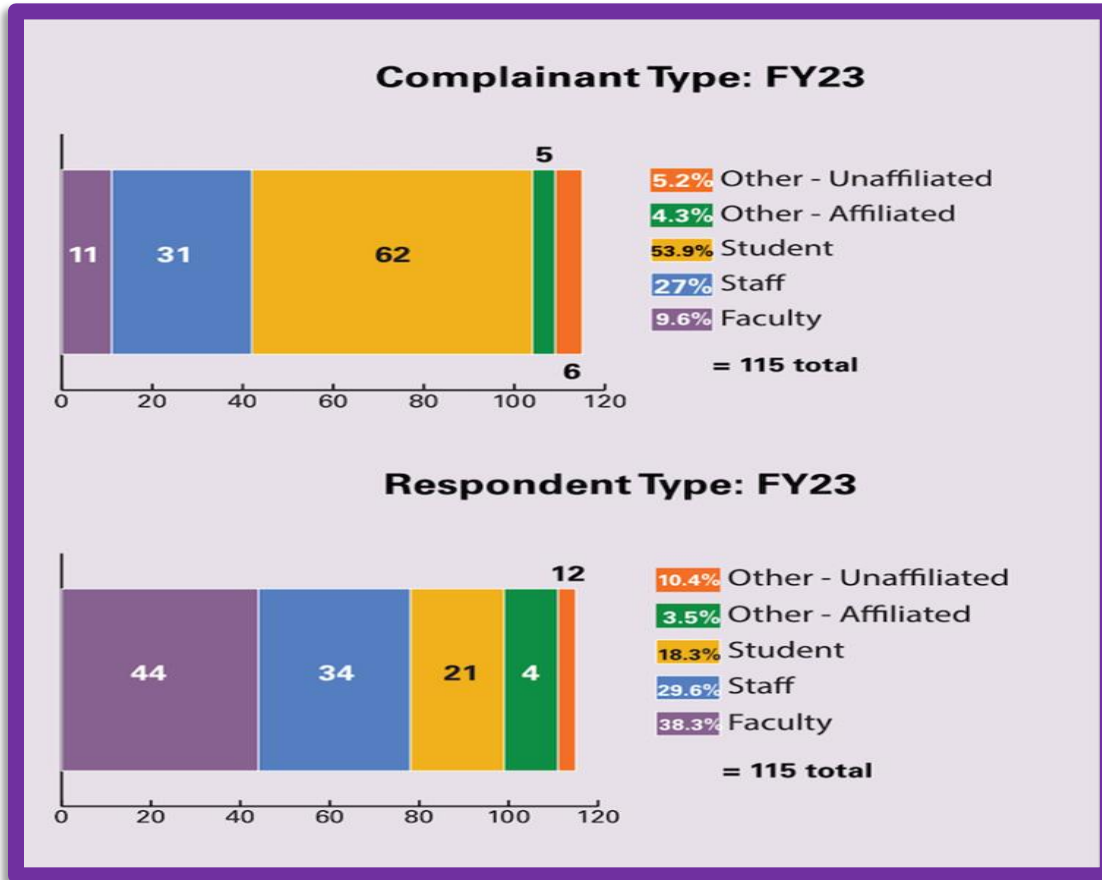
Most ADA accommodations— 47.6% = zero dollars spent.

A large, diverse crowd of students is walking across a paved area on a university campus. The students are dressed in casual attire, many wearing backpacks. In the background, there are trees, a building, and a large yellow sculpture that appears to be the letters 'WCU'. The scene is brightly lit, suggesting a sunny day. Overlaid in the center of the image is the text 'Equal Opportunity & Affirmative Action' in a large, white, sans-serif font.

Equal Opportunity & Affirmative Action

Majority of complainants are students, while majority of respondents are faculty & staff.

Most concerns do not rise to the level of illegal discrimination.



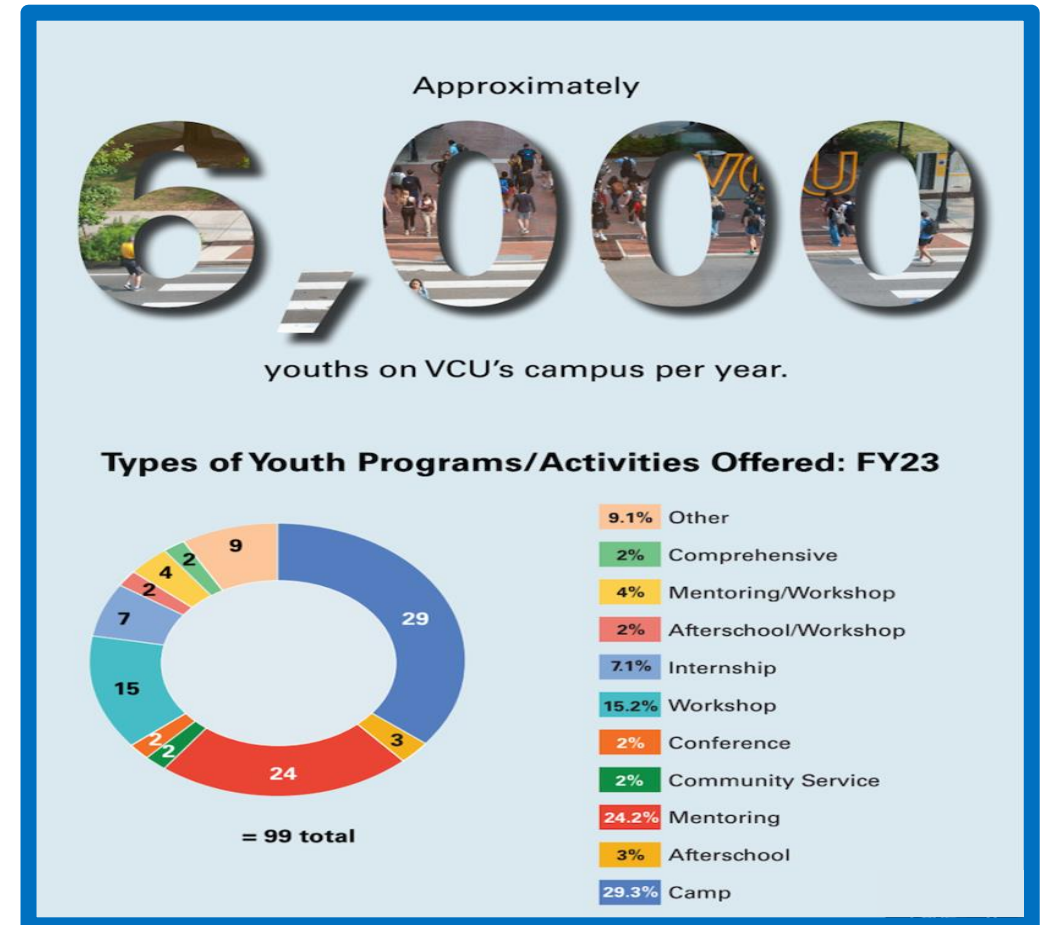
Protection of Minors



Minors fully migrated to EAS in 2023. As the Minors program strengthens, we will gather more data and trends.

EAS led identification of Minors as an emerging risk across VCU, through the Enterprise Risk Management steering subcommittee.

Increasing programs that build strong ties to VCU's brand and mission creates future students.





Title IX

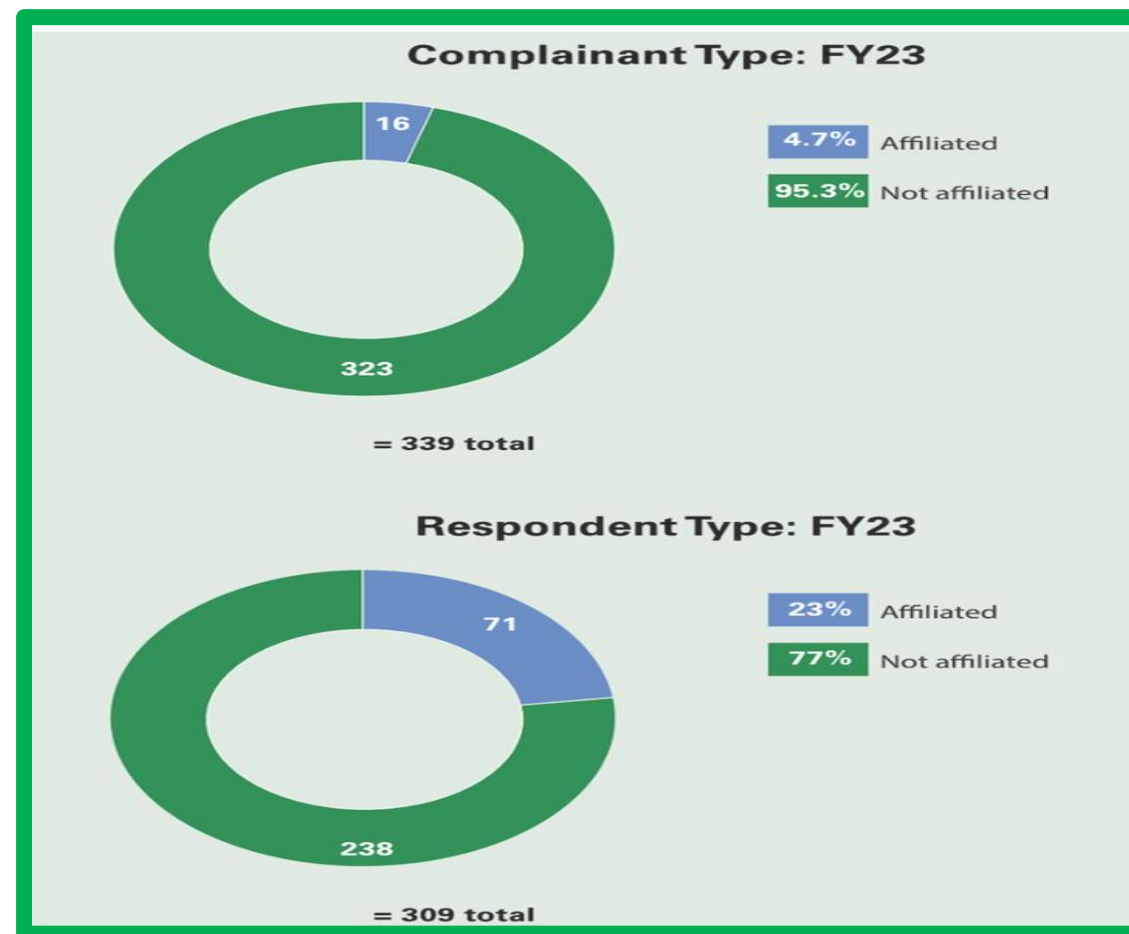
13,104

sexual assault awareness trainings completed.

Alleged conduct reported FY23:

- 21.3% - sexual harassment
- 16.7% - rape
- 14.3% - fondling
- 14% - stalking
- 12.4% - sexual exploitation
- 10% - dating violence
- 7.8% - conduct outside TIX / SBM policies (not in jurisdiction)
- 3.2% - domestic violence
- 0.3% - retaliation

Most complainants and respondents were not affiliated with VCU.



Thank you for your interest in civil rights outreach and support at VCU

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Closed Session