SUMMARY

FY 18 (July 1, 2017 – June 30, 2018) represented the tenth full year of operation of the University’s consulting program that was implemented in mid FY 08. The policies and procedures remained materially the same throughout the year. Dr. John Volin was appointed the Director of the Storrs+ Faculty Consulting Office, Dr. Craig Kennedy was appointed Provost, and at the end of FY 18, Mr. Brandon Murray, the primary administrative support person for the Storrs+ Faculty Consulting Office, took on a new position.¹

The Faculty Consulting Offices (FCO) continue to maintain close working relationships with the Office of the Vice President for Research, the Office of Research Compliance, and the newly convened Clinical Conflict of Interest Committee at UConn Health. Both FCOs now regularly receive updates on the establishment of new faculty affiliated companies. In addition to standard language in offer letters, the UConn Health Human Resources Department now sends each new incoming faculty member a letter from the FCO regarding the program, need to obtain prior approval, and an offer to provide support before the first day of employment.

During the year, the faculty consulting request form was revised to include more specific information concerning the level of compensation. Unfortunately, this resulted in an unanticipated glitch OFCAS (on-line faculty consulting approval system), that was identified and corrected a few weeks later. The FCO has reviewed the OFCAS system with our IT support staff and believe the system is robust and will be serviceable well into the future.

As mandated by legislation, the Faculty Consulting Oversight Committee (including a member of the Citizen’s Ethics Advisory Board and members appointed by the Legislature) filed its tenth annual report with the UConn Board of Trustees and to the Legislature in the winter of 2018. This was a positive report. The Oversight Committee continues to monitor all audit reports related to the program and will issue its tenth report in the winter of 2019.

CONSULTING MANAGEMENT COMMITTEE

The Consulting Management Committee (CMC) did not need to make any significant revisions to its previous decisions on consulting. It continued to review the audit reports and monitor the implementation of management plans.

¹ While out of scope for FY 18, Mr. Murray’s equivalent for the UConn Health Faculty Consulting Office, Ms. Dorothy Linnhoff also left her position in early August 2018
PERFORMANCE NUMBERS: STORRS+ CAMPUS

The Faculty Consulting Office (FCO) on the Storrs Campus received 1,014 consulting forms from 468 individuals or 31% of those eligible to consult\(^2\) (Table 1). Of these, 986 were approved (97.2% of the total), 6 (<1%) were denied, and 22 were withdrawn (2.2%). In FY 17, the FCO received 984 requests from 417 individuals with 98.5% approved, <1% denied, and 1.3% withdrawn.

All data were analyzed using the information submitted on the FY18 Annual Reconciliation Report. Reconciliation reports have been received from all individuals who engaged in consulting activities. Eleven individuals (17 requests) left employment with UConn-Storrs+ and did not complete a report.

Of the 986 approved activities, 893 occurred (90.6%) and 76 (7.7%) were not performed. The remaining 17 (1.7%) requests were not reconciled, due to employees who left UConn employment. The Storrs+ FCO issued first-offense verbal or written sanctions to 12 faculty members and 1 second-time offense to 1 faculty member. Of these, sanctions were issues for failure to submit, late submission, unanticipated compensation, starting consultation activity prior to receiving approval, and failure to reconcile on time. There were no known cases of other non-compliance with the consulting policy.

The mean amount of time spent consulting during normal work time was 2.66 days. Of these, 4 faculty members reported exceeding the Provost’s recommended maximum of an average of one day per week during normal work hours (39 days for a nine-month appointment). 22 faculty members (4.7% of those who consulted) indicated on their reconciliation reports (25 unique activities) that they used more time during the normal work hours than originally estimated (Table 2). The maximum number of additional days was 28 with a mean of 4.3 days.

PERFORMANCE NUMBERS: UCONN HEALTH CAMPUS

The FCO on the UConn Health Campus received 761 consulting requests from 201 individuals (Table 3). Of these, 711 were approved (93.4% of the total), 22 (2.9%) were withdrawn or system errors, and 28 (3.7%) were denied. In FY 17 the FCO received 677 requests from 184 individuals with 95.0% approved and 1.8% denied.

Reconciliation reports were received on time from all those who engaged in consulting activities and who remained on the payroll when reconciliation reports were due. Several individuals left employment with UConn Health and therefore 18 approved activities did not have reconciliation reports.

Of the 711 approved activities, 617 occurred and were reconciled (86.8%). There were 180 unique faculty members who performed at least one consulting activity during the fiscal year. The mean amount of time spent consulting normal work time per faculty member was 4.0

\(^2\) The total number eligible faculty was obtained from the UConn 2018 Fact Sheet.
days with a maximum of 32.6 days and a median of 2.5 days. The UConn Health FCO issued first-offense verbal or written sanctions to 20 faculty members. Of these, all of the “offenses” were for late submissions or unanticipated compensation. All of these requests would have been approved if submitted on time. There was one case in which a faculty member performed an activity prior to submitting a consulting request and this activity would not have been approved if a request had been submitted. That faculty member is no longer an employee of UConn Health.

Four faculty members used more time during the normal work hours than originally estimated (Table 4). Based on our pre-established threshold of more than 1 day, one of these faculty members and the department chairman will be notified accordingly.

**AUDIT FINDINGS**

By State statute, the consulting program must be audited by the internal audit office of each constituent unit which is currently the Office of Audit and Management Advisory Services. The original audit schedule was twice a year, but starting in FY 13 the requirement was revised to once each year.

The thirteenth audit, covering the period of time from July 1, 2016 - June 30, 2017 (FY 17) was issued on June 6, 2018. The auditors’ overall conclusions were that the University is in compliance with CGS 1-84(r) and the University’s Policy on Consulting. The auditors also concluded that the FY 17 Annual Report of the Faculty Consulting Office was materially correct.

The auditors identified a number of faculty who were engaged in consulting but who did not obtain prior approval to do so. This resulted in a significant increase in the number of sanction letters issued in FY 18.

The auditors identified a number of situations in which Storrs-based management exempt faculty did not take vacation days when consulting during normal work time. This issue was addressed by the Provost’s Office.

In addition to more minor issues raised by the auditors, the Provost agreed to three more substantive actions:

a) Management agreed to reconsider its policy and practices regarding the total amount of time the faculty can devote to consulting.

b) Management agreed to reconsider its policy and practices related to whether management-exempt faculty on both campuses should be treated the same as each other or as the non-management exempt faculty.

c) Management agreed to consider how to best prevent full-time clinical faculty from being non-compliant with the ban in the University’s By-Laws prohibiting them from engaging in private practice.
Active discussions on each of the three issues listed above has taken place and it is expected the outcomes will be reported at the December 2018 meeting of the Board of Trustees Joint Audit and Compliance Committee.

OPEN PAYMENTS

The Open Payments program mandated by the Federal Affordable Care Act has completed its fifth cycle including the public release in June 2018 of payment information for CY 17. This program requires medical/dental device manufacturers and pharmaceutical companies to report payments made to certain healthcare providers (including physicians and dentists) to the Center for Medicare and Medicaid Services (CMS). The current Open Payments web site is extremely easy to use. To date, no known negative press coverage regarding UConn Health faculty have occurred. The strong collaboration between the Communications Office and the FCO continues and as was needed in the past, we are ready to explain how the faculty consulting program and its oversight mechanisms vigorously monitor and manage possible conflicts of interest.

ISSUES FOR FY 19

- Addressing all previously raised and new audit findings.
- Continued training of the new staff assigned to the Faculty Consulting Offices.

J. Shoulson
S. Wetstone
December 6, 2018
Table 1 – Storrs Requests to Consult

<table>
<thead>
<tr>
<th>Requests</th>
<th>Total</th>
<th>ATHL</th>
<th>BUS</th>
<th>CAHNR</th>
<th>CLAS</th>
<th>ED</th>
<th>ENG</th>
<th>FA</th>
<th>LAW</th>
<th>NURS</th>
<th>PHARM</th>
<th>SW</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>#</td>
<td>1014</td>
<td>15</td>
<td>39</td>
<td>129</td>
<td>278</td>
<td>146</td>
<td>102</td>
<td>74</td>
<td>36</td>
<td>32</td>
<td>80</td>
<td>11</td>
<td>72</td>
</tr>
<tr>
<td>%</td>
<td>100%</td>
<td>1.5%</td>
<td>3.8%</td>
<td>12.7%</td>
<td>27.4%</td>
<td>14.4%</td>
<td>10.1%</td>
<td>7.3%</td>
<td>3.6%</td>
<td>3.2%</td>
<td>7.9%</td>
<td>1.1%</td>
<td>7.1%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Unique Faculty</th>
<th>Total</th>
<th>ATHL</th>
<th>BUS</th>
<th>CAHNR</th>
<th>CLAS</th>
<th>ED</th>
<th>ENG</th>
<th>FA</th>
<th>LAW</th>
<th>NURS</th>
<th>PHARM</th>
<th>SW</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>#</td>
<td>468</td>
<td>7</td>
<td>30</td>
<td>58</td>
<td>148</td>
<td>49</td>
<td>55</td>
<td>30</td>
<td>13</td>
<td>20</td>
<td>24</td>
<td>6</td>
<td>28</td>
</tr>
<tr>
<td>%</td>
<td>100%</td>
<td>1.5%</td>
<td>6.4%</td>
<td>12.4%</td>
<td>31.6%</td>
<td>10.5%</td>
<td>11.8%</td>
<td>6.4%</td>
<td>2.8%</td>
<td>4.3%</td>
<td>5.1%</td>
<td>1.2%</td>
<td>6.0%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Requests/faculty</th>
<th>Total</th>
<th>ATHL</th>
<th>BUS</th>
<th>CAHNR</th>
<th>CLAS</th>
<th>ED</th>
<th>ENG</th>
<th>FA</th>
<th>LAW</th>
<th>NURS</th>
<th>PHARM</th>
<th>SW</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>mean</td>
<td>2.24</td>
<td>2.14</td>
<td>1.30</td>
<td>2.22</td>
<td>1.87</td>
<td>2.98</td>
<td>1.85</td>
<td>2.47</td>
<td>2.77</td>
<td>1.60</td>
<td>3.33</td>
<td>1.83</td>
<td>2.57</td>
</tr>
<tr>
<td>10 or more requests</td>
<td>7</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>

“Other” includes faculty affiliated with the Provost’s Office and the Vice President for Research, including four UConn Health employees.
Table 2 – Storrs Reconciliation Report Variances for Time During Normal Work Hours

<table>
<thead>
<tr>
<th>Effort During Normal Work Days</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td># of requests with extra days</td>
<td>25</td>
</tr>
<tr>
<td>% of faculty with extra days</td>
<td>(4.5%)</td>
</tr>
<tr>
<td>min</td>
<td>0.10</td>
</tr>
<tr>
<td>max</td>
<td>28.0</td>
</tr>
</tbody>
</table>

Table 3 – UConn Health Requests to Consult

<table>
<thead>
<tr>
<th>Requests</th>
<th>Total</th>
<th>SoDM</th>
<th>SoM</th>
</tr>
</thead>
<tbody>
<tr>
<td>#</td>
<td>761</td>
<td>104</td>
<td>657</td>
</tr>
<tr>
<td>%</td>
<td>13.7%</td>
<td>86.3%</td>
<td></td>
</tr>
<tr>
<td>Individual faculty</td>
<td>Total</td>
<td>SoDM</td>
<td>SoM</td>
</tr>
<tr>
<td>#</td>
<td>201</td>
<td>35</td>
<td>166</td>
</tr>
<tr>
<td>%</td>
<td>17.4%</td>
<td>82.6%</td>
<td></td>
</tr>
<tr>
<td>Requests/faculty</td>
<td>Total</td>
<td>SoDM</td>
<td>SoM</td>
</tr>
<tr>
<td>mean</td>
<td>3.8</td>
<td>3.0</td>
<td>4.0</td>
</tr>
<tr>
<td>median</td>
<td>2.0</td>
<td>2.0</td>
<td>2.0</td>
</tr>
<tr>
<td>10 or more requests</td>
<td>14</td>
<td>2</td>
<td>13</td>
</tr>
</tbody>
</table>

Table 4 – UConn Health Reconciliation Report Variances for Time During Normal Work Hours

<table>
<thead>
<tr>
<th>Effort During Normal Work Days</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td># with extra days</td>
<td>4</td>
</tr>
<tr>
<td>% of faculty with extra days</td>
<td>(2.0%)</td>
</tr>
<tr>
<td>min</td>
<td>1.0</td>
</tr>
<tr>
<td>max</td>
<td>2.0</td>
</tr>
</tbody>
</table>
REPORT ON THE UNIVERSITY OF CONNECTICUT’S
COMPLIANCE WITH CGS 1-84(r)
FACULTY CONSULTING PROGRAM

January 29, 2019
Report Issued by the Faculty Consulting Oversight Committee

SUMMARY

Pursuant to a change in the Connecticut State Statutes and action by the University of Connecticut Board of Trustees, new policies and procedures for approving consulting activities for the Faculty and members of the AAUP bargaining unit were implemented in December 2007. The Board of Trustees approved the latest revisions to these policies in April 2013.

Faculty Consulting Offices (FCOs) were established in Storrs and at the UCHC that have provided training to those who consult and for those who must participate in the consulting approval process, such as department heads and deans. A University-wide Consulting Management Committee (CMC) was convened to provide recommendations regarding the identification and management of potential Conflicts of Interest arising from consulting activities.

As required by CGS 1-84(r), the Faculty Consulting Oversight Committee was convened including members appointed by the Legislature/Executive branch and from the Citizens’ Ethics Advisory Board. This Committee has met on a regular basis to review the implementation of the consulting program and to review the audits of the program conducted by the Office of Audit and Management Advisory Services formerly the Office of Audit, Compliance and Ethics.

Implementing this program required development of policies, procedures, forms and databases; identification and training of staff; and awareness and training of faculty, department heads, and deans. The Office of Audit and Management Advisory Services has carried out annual (and previously semiannual) audits as required and, as expected, have identified areas in which clarifications and improvements have been recommended. The University addresses each of the issues raised in a timely and appropriate manner.

The Faculty Consulting Oversight Committee has determined that the University of Connecticut is complying with CGS 1-84(r). The oversight required by the Act, including the Faculty Consulting Oversight Committee itself and the audits, has and should continue to enable ongoing review and improvement of the program.

The Oversight Committee has no explicit recommendations for improvement of the program over the next year, and has concluded that the University has made an ongoing and serious effort to implement improvements.

To date, the program, with its policies, procedures, and implementation, have resulted in a system that pro-actively identifies and manages potential conflicts of interest. Any individual who does not participate with the program is subject to sanctions by the University and may also be subject to additional sanctions by the Office of State Ethics.
BACKGROUND

Public Act (PA) 07-166 (Section 12), approved on June 19, 2007, created a carve-out from the portion of the State Ethics Code dealing with consulting. Participating in appropriate consulting activities is viewed as being mutually beneficial for the University and its faculty and the intent of the Act is to enable such activities.

This carve-out applies to faculty and members of the faculty bargaining unit (herein fore referenced as “faculty”) of a constituent unit of the State system of higher education. In the context of the Act, “consulting” represents situations in which faculty are compensated for services rendered while not acting as a State employee. The request to consult must be based on the faculty member’s expertise in a field or prominence in such field and not due to the State position held. Faculty must receive prior approval before such consulting begins. No other State agency requires prior approval or any such mandated disclosure of outside employment activities.

The Act transfers final authority for approval of such activities to the University and it allows management plans to be implemented for addressing perceived conflicts of interest. Specifically, the legislation allowed these individuals to enter into a consulting agreement with a public or private entity, provided such agreement or project does not conflict with the individual’s employment as determined by policies established by the Board of Trustees for such constituent unit.

This carve-out from the State Ethics Code is predicated on a set of requirements being met including significant institutional oversight. The University of Connecticut Board of Trustees (BOT) approved the University’s “Policy on Consulting for Faculty and Members of the Faculty Bargaining Unit,” and reviewed the operational procedures for implementation, on September 25, 2007. The Policy and Procedures define a consistent set of rules for consulting for all the faculty of the University. These documents have been reviewed and revised by the BOT several times since 2007 in order to make improvements to the program.

The new consulting system became fully operational on December 15, 2007. Since that time, both the Storrs Campus and UConn Health campus have each established a Faculty Consulting Office (FCO) with reporting lines and staffing. Usage data systems have been developed by each FCO. Further, both campuses have developed on-line and live training programs.

Requests to consult must be reviewed and approved by each faculty member’s department head, dean, and the provost’s designees (one for each campus). A subset of consulting activities with very low risk of conflict of interest are eligible for an accelerated approval process that only requires the approval of the department head.

Consulting may not negatively impact the faculty member’s ability to fully and satisfactorily address his/her assigned job duties. At the end of the fiscal year, each faculty member must submit a reconciliation report indicating variances from the requested time spent consulting during the normal work time and confirming any and all appropriate reimbursements for use of University resources, if any.

1 See http://consulting.uconn.edu/state-statutes/
2 The policy and procedures governing consulting may be found at: http://consulting.uconn.edu/consulting-policies-procedures/
If a faculty member does not adhere to the provisions described in the Act or the University’s Consulting Policy and Procedures, the Office of State Ethics will retain jurisdiction over the activity and have the responsibility for determining whether it complies with the State Code of Ethics and whether sanctions should be imposed. Violations of the University’s Consulting Policy and Procedures will in addition be subject to sanctions issued by the University which may result in termination.

CONSULTING MANAGEMENT COMMITTEE (CMC)

As required by the implementation procedures, a University-wide Consulting Management Committee (CMC) was first convened on December 10, 2007. The CMC is authorized to review and recommend disposition of certain consulting situations that do not have obvious resolution. The CMC also offers input on unforeseen situations put before it that may arise as a result of consulting activities. To date, the CMC provided advice to the directors of the Faculty Consulting Offices on an ad hoc basis, and has also reviewed eleven general situations resulting in formal position papers. For example, based on one position paper, participation in promotional presentations with pharmaceutical companies has been banned.3

AUDITS

As required in CGS 1-84(r), the University’s Office of Audit and Management Advisory Services has conducted audits on the University’s faculty consulting program4. Per standard practice, management has had the opportunity to provide responses to each audit finding and recommendation. These audits are reviewed by the Joint Audit and Compliance Committee of the Board of Trustees as well as by the Faculty Consulting Oversight Committee.5

FACULTY CONSULTING OVERSIGHT COMMITTEE

As required in CGS 1-84(r), the Faculty Consulting Oversight committee meets on an on-going basis in order to review the University’s compliance with CGS 1-84(r), and to file annual reports regarding such compliance with the University’s Board of Trustees and to the Legislature. This document is the eighth of such reports.6 The Committee’s responsibility is to ensure that the University complies with the provisions of the Act and the University’s policies and procedures on consulting. It may also make recommendation for improvements to the consulting program.

The membership of the Faculty Consulting Oversight Committee is:

<table>
<thead>
<tr>
<th>Name</th>
<th>Background</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cobb, C.</td>
<td>Professor, School of Education</td>
</tr>
<tr>
<td>Dennis-Lavigne, A</td>
<td>Member, Board of Trustees</td>
</tr>
</tbody>
</table>

3 These position papers and the minutes of the CMC may be found at http://consulting.uconn.edu/consulting-management-committee/actions/
4 Initially, audits were required twice a year but the legislature changed this to a once a year audit schedule starting in FY 12.
5 Copies of past audits may be found at: http://consulting.uconn.edu/reports-and-audits/
6 Past reports may be found at: http://consulting.uconn.edu/reports-and-audits/
Chiusano, C.  Chair, Citizen’s Ethics Advisory Board Member
Fox, K.  Professor Emerita, School of Business
Freedman, J. (chair)  Former Legislator
Krisst, I.  Former UConn Administrator
Nair, S  Professor, School of Business
Siegle, D  Professor, School of Education

The Committee last met on January 11, 2019, and reviewed and approved this annual report by email on January 29, 2019. It has reviewed the FY 17 final audit report and the FY 18 annual report of the Faculty Consulting Offices (attached). The former was presented at the Joint Audit and Compliance Committee of the University’s Board of the Trustees and the latter will be reviewed at an upcoming meeting of the Board of Trustees along with this report from the Oversight Committee.

The Committee believes the program was effectively initiated and through on-going revisions has been improved. In fact, in many regards the program is more rigorous than how consulting is handled for other State employees not covered by CGS 1-84(r), especially through the requirement for approval prior to the consulting activities taking place.

The audits have led to improvements to the Consulting Program including revisions to the consulting request form, enhancements to the training program, improving the clarity and predictability of decision making, and assuring sufficient information is available to inform the decision making of the approvers. The University has developed an on-line request form/approval process that became operational in FY 12 and has been revised in FY 13, FY 14 and FY 15. This system has successfully addressed its objectives. All of these actions should ensure complete compliance with CGS 1-84(r).

The initial implementation of the consulting program, both in terms of logistics and compliance, has met initial expectations. There have been areas of different interpretations regarding the requirements of CGS 1-84(r) and the University’s Policy and Procedures. The audit processes in place appear to be working to identify such areas and to report them to senior management and to the Faculty Consulting Oversight Committee. Management has demonstrated its willingness to address the audit findings in a timely manner. Management appears to be keenly aware of the need to fully comply with CGS 1-84(r).

The Committee takes note that number and severity of audit finding has decreased over time and this demonstrates management’s commitment to operate the program optimally and in full compliance with the Legislature’s intent for the program. The Committee also takes notes that the two Faculty Consulting Offices (Storrs/regional campuses and at UConn Health) work together exceedingly well and thus present a consistent and reliable approach to consulting across all the units of the University.

The Oversight Committee did not issue recommendations for improvement for FY 19.

**VOLUME OF CONSULTING ACTIVITIES**

In FY 18, the tenth full year of operations, the Faculty Consulting Office on the Storrs Campus received 1,014 requests to consult from 468 individuals. The UConn Health office received 761 requests from 201 individuals. Both campuses had a 100% response rate for those individuals
required to complete reconciliation reports. The FY 18 annual report of the University’s Faculty Consulting Program is attached.