

THE UNIVERSITY OF CONNECTICUT CONSULTING PROGRAM FY 2021 ANNUAL REPORT

SUMMARY

FY 21 (July 1, 2020 – June 30, 2021) represented the thirteenth 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. As discussed later in this report, the Faculty Consulting Offices (FCOs) work with other relevant offices at the University of Connecticut on an active program of continuous improvement with regard to the faculty consulting program.

Vice Provost Gladis Kersaint took over as Provost's Designee at Storrs & regionals, on March 1, 2021. Dr. Jody Terranova was hired in May 2021 to succeed Dr. Scott Wetstone (formally taking the role of Director of Faculty Consulting at UConn Health on July 1, 2021) and Ms. Razan Jazeh became the Administrative Program Coordinator in the UConn Health Faculty Consulting Office.

The FCOs continue to maintain close working relationships with the Office of the Vice President for Research, the Office of Research Compliance, and the Clinical Conflict of Interest Committee at UConn Health. Both FCOs now regularly receive updates on the establishment of new faculty affiliated companies.

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 twelfth annual report with the UConn Board of Trustees and to the Legislature in the winter of 2021. This was a positive report. The Oversight Committee continues to monitor all audit reports related to the program and will issue its thirteenth report in the winter of 2022.

CONSULTING MANAGEMENT COMMITTEE

The Consulting Management Committee (CMC) met multiple times in Spring of 2021 to discuss that sanctions can be issued for a pattern of continual under-reporting of remuneration for consulting activities by faculty, and issues related to dual employment and contracting with other state agencies by faculty engaged in consulting activities.

The Consulting Management Committee (CMC) is being reconstituted in FY22 to ensure representation across all campuses and faculty levels and will now have clearly defined terms for committee members. The CMC will continue to review the audit reports, monitor the implementation of management plans, and will provide feedback relating to the consulting policy and system from the perspective of faculty. However, questions related to the approval of specific cases will no longer be addressed by the committee. The consulting approval process is a complex regulatory space that can cross multiple University, State, and even Federal policies and statutes. These decisions can be complex and have the potential to create personal risk for faculty and institutional risk for the University. Complex decisions related to

specific consulting requests are usually examined collaboratively between the FCOs, Compliance, and the Office for the Vice President for Research, with others at the University (e.g., Labor Relations) involved when relevant. No faculty have appealed to the CMC in relation to decisions related to consulting approvals in the last several years, but policy and procedures are in the process of being updated and will no longer include the option for appeal to the CMC.

PERFORMANCE NUMBERS: STORRS+ CAMPUS

The FCO on the Storrs+ Campus received 1,075 consulting requests from 482 individuals, accounting for approximately 30% of the full-time faculty who would be eligible to consult¹ (Table 1). Of these, 1,014 were approved (94.3% of the total), 55 were withdrawn (5.1%), and 6 were “stuck” in the OFCAS system at stages below the FCO (0.1%). In FY20, the FCO received 1,133 requests from 503 individuals with 94.3% approved, 0.9% denied, 2.7% withdrawn, and 1.9% “stuck” in the OFCAS system.

All data were analyzed using the information submitted on the FY21 Annual Reconciliation Report. Reconciliation reports have been received from all individuals who engaged in consulting activities.

Of the 1,014 approved and reconciled activities, 876 occurred (86%) and 138 (14%) were not performed. The Storrs+ FCO issued first-offense verbal or written counseling sanctions to 67 faculty members. One faculty member also received three-month suspension from submitting new requests as a result of not reconciling 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 3.97 days. Two 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). Nine faculty members (1.8% of those who consulted) indicated on their reconciliation reports (9 unique activities) that they used more time during the normal work hours than originally estimated (Table 2). The maximum number of additional days was 9 with a mean of 3.0 days.

PERFORMANCE NUMBERS: UCONN HEALTH CAMPUS

In FY21 the FCO on the UConn Health Campus received 762 consulting requests from 218 individuals (Table 3). Of these, 727 were approved (95.4% of the total), 25 (3.3%) were withdrawn or system errors, and 9 (1.2%) were denied, and 1 request was a test (0.1). In FY 20 the FCO received 690 requests from 207 individuals with 95.9% approved and 2.2% 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 12 approved activities did not have reconciliation reports.

¹ The total number eligible faculty was obtained from the UConn 2021 Fact Sheet.

Of the 727 approved activities, 611 occurred (84%) and 104 (14.3%) did not occur, all of which were reconciled. There were 218 unique members who performed at least one consulting activity during the fiscal year. The mean amount of time spent consulting during normal work time per faculty member was 3.10 days with a maximum of 36.0 days and a median of 1.0 day. The UConn Health FCO issued verbal or written counseling (sanctions) to seven faculty members. Of these, six were for late submissions or unanticipated compensation. It was determined that all six of these requests would have been approved if submitted on time. One request resulted in disciplinary action, supported by Labor Relations. All instances of counseling and disciplinary action were recorded on the sanctions log.

Eight faculty members used more time during the normal work hours than originally estimated and approved (Table 4). Based on our pre-established threshold of more than 1 day, the department head level approver was notified of 4 faculty members who used more than one authorized day than was approved. The department chair will determine the appropriate action.

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 year².

The sixteenth audit, covering the period of time from July 1, 2019 - June 30, 2020 (FY 20) was issued on June 10, 2021. 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 20 Annual Report of the Faculty Consulting Office was materially correct and no new observations were identified in their report. No management responses were requested from this audit as many issues had been preemptively addressed through OFCAS-4 upgrades.

The auditors recognized that efforts have been made to address recurring observations identified in the FY20 audit. These efforts were operationalized in FY 21 and would not be fully reflected in the data they reviewed. These included: 1) The use of accrued leave by management exempt employees with a faculty title for consulting activities performed during normal work time. 2) Accelerated approval routing logic to account for foreign consulting activities and expected compensation exceeding the \$5,000 threshold. 3) The use of University resources in consulting activities including equipment, service centers, and travel expenses.

The auditors will confirm and evaluate the corrective actions in the FY2021 Faculty Consulting Audit.

² All finalized audit reports, FCO annual reports, and Oversight Committee annual reports are posted on the University's consulting web site: <https://consulting.uconn.edu/>

The auditors identified a small number of cases in which faculty submitted requests after the expected start date or with insufficient lead time for review and timely approval, approvals received after the expected start date and reconciliations after the September 15th deadline. Review of the Sanctions Log indicated that appropriate sanctions were applied in these cases.

Through interviews and questionnaires completed by a sampling of department heads, the auditors noted that while a majority of department heads were familiar with the consulting policy, they did identify a lack of knowledge of aspects of the Faculty Consulting Policy pertaining to Faculty Affiliated Companies and characterization of consulting activities. The FCOs implemented department head training in the summer of 2020 to address these gaps.

The auditors noted that Faculty Affiliated Companies are a risk area in terms of potential conflicts of interest. They encouraged more data sharing between the FCO and the Office of the Vice President for Research. OVPR now has full, real-time access to the new OFCAS-4 system and its data.

The auditors identified that some UConn faculty members did not adhere to the practice of spending an average of one day per week, or less, of normal work time on consulting activities. They also found consulting activities performed during the summer months that 9-month and 10-month faculty did not account for in effort reporting.

The auditors also identified that consulting requests with foreign entities were occasionally routed through the Accelerated Approval process in OFCAS. This has since been corrected with the addition of a question addressing work with a foreign entity in OFCAS-4.

Similarly, a finding that faculty were not accurately reporting use of state resources has since been addressed with changes to data collection in OFCAS-4.

ISSUES FOR FY 22

- Transition to InfoEd: FY21 has been our first full fiscal year utilizing our upgraded consulting system (OFCAS-4). However, we are working toward a significant system change and in the current fiscal year will be transitioning to InfoEd. This will enable better integration with financial conflicts of interest reporting (including with regard to faculty affiliated companies), and with information related to consulting required for the purpose of grant applications or other information needed for compliance with grant funding and research activities. We are working closely with the Office of the Vice President of Research (OVPR) and are planning an implementation of the new system in early April 2022. This will also require the production of new training materials.
- Revisions and updates to the Faculty Consulting Website: We will continue to update the website with updated training materials and relevant FAQs as we roll out the updated InfoEd-based consulting request form. The website was substantially updated in 2021 to provide clear and accessible information to faculty.

- We are working on revisions of the faculty consulting policy and procedures. The aim is to bring these in line with current policy standards (readability, formatting); to update procedures related to low-COI risk activities (better identifying truly low-COI risk activities, while ensuring all other activities go through appropriate approval pathways); and updating requirements for faculty affiliated companies (FACs) to make clear reporting requirements for consulting for any active FAC.
- We are working with the Office of University Compliance to produce a training module on the Saba platform. This will be optional for any faculty who wish to update their knowledge and can also be assigned in the process of counseling faculty for noncompliance with the policy (*i.e.*, sanctions). We anticipate that this will be complete by March 2022.

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January 20, 2022

Table 1 – Storrs+ Requests to Consult

Requests	Total	ATHL	BUS	CAHNR	CLAS	ED	ENG	FA	LAW	NURS	PHARM	SW	Other
#	1075	28	49	106	361	125	88	49	38	38	102	10	81
%	100%	2.60%	4.56%	9.86%	33.58%	11.63%	8.19%	4.56%	3.53%	3.53%	9.49%	0.93%	7.53%
Unique Faculty	Total	ATHL	BUS	CAHNR	CLAS	ED	ENG	FA	LAW	NURS	PHARM	SW	Other
#	482	14	30	40	174	44	46	30	14	19	26	7	38
%	100%	2.90%	6.22%	8.30%	36.10%	9.13%	9.54%	6.22%	2.90%	3.94%	5.39%	1.45%	7.88%
Requests/faculty	Total	ATHL	BUS	CAHNR	CLAS	ED	ENG	FA	LAW	NURS	PHARM	SW	Other
mean	2.23	2	1.6	2.7	2.1	2.8	1.9	1.6	2.7	2	3.9	1.4	2.1
10 or more requests	13	0	0	2	4	1	1	0	0	0	3	0	2

“Other” includes faculty affiliated with the Provost’s Office, the Center for Excellence in Teaching and Learning, and the Vice President for Research, including four UConn Health employees.

Table 2 – Storrs+ Reconciliation Report Variances for Time During Normal Work Hours

Effort During Normal Work Days	
# of faculty with extra days	13
% of faculty with extra days	(2.7%)
min	0.4
max	20.75

Table 3 – UConn Health Requests to Consult

Requests	Total	SoDM	SoM
#	762	84	677
%		11.02%	88.85%
Individual faculty	Total	SoDM	SoM
#	218	33	185
%		15.14%	84.86%
Requests/faculty	Total	SoDM	SoM
mean	3.5	2.5	3.7
median	2.0	2.0	2.0
10 or more requests	12	1	11

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

Effort During Normal Work Days	
# of faculty with extra days	8
% of faculty with extra days	(3.67%)
min	0
max	2