

## **Goals for the Session**

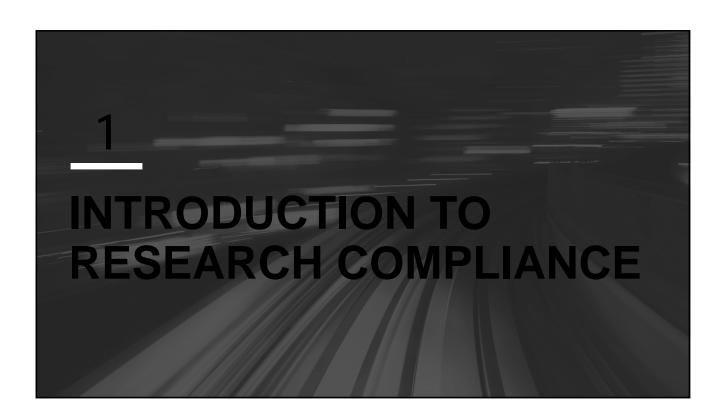
- Introduce those (fairly) new to sponsored research compliance to key concepts
- Cover the basics of the Uniform Guidance, the cost principles and how these regulations shape sponsored research administration
- Discuss how these, and other, regulations drive requirements for grant funded activity and affect your day-to-day responsibilities

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# **Agenda**

- 1. Introduction to Research Compliance
- 2. Key Concepts
- 3. Financial Challenges
- 4. Emphasis on Internal Control
- 5. Compliance: Your Institutional Approach





# **Introduction to Research Compliance**

#### PERSPECTIVE ON THE CURRENT INDUSTRY LANDSCAPE

#### **Internal Concerns and Challenges**

- · Expectations for research growth;
- Increase in complexity of research fiscal management;
- Reduction of resources to fund research and operations.

#### **External Concerns and Challenges**

- Federal and non-federal funding for sponsored research has decreased in real terms.
- Increase in federal reporting and transparency requirements;
- Stream of federal fraud cases in the university research;
- Increase in proactive compliance site visits.

#### **Regulatory Trends**

- Significant increase in penalty recoveries from federal investigations and audits.
- · Increasing emphasis on accountability.



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# **Introduction to Research Compliance**

#### **DHHS OIG WORKPLAN ELEMENTS**

 Work planning is a process used by OIG to meet priorities and respond to emerging issues with resources available.

DHHS Focus Areas	2013	2014	2015	2016	2017
Review of Data Controls to Ensure the privacy and Protection of Volunteers in the Precision Medicine Initiative (New)					х
Controls over Subcontracting of NIH Grant and Contract Work				x	x
Superfund Financial Activities for FY2015 (Mandatory Review)	х	х	х	х	х
Review of Environmental Health Sciences' Funding for Bisphenol A Safety Research				х	х
Colleges' and Universities Compliance with Cost Principles	х	x	x	x	x
Use of Appropriated Funds for Contracting		х	х	х	
Oversight of Grants Management Policy Implementation	х	х	х		
Extramural Construction Grants at NIG Grantees	Х	Х	Х		
Integrity of Recovery Act Expenditures		х			
Enforcement of whistleblower protections		х			

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# **Introduction to Research Compliance**

#### **CONSEQUENCES OF NON-COMPLIANCE**

- Operational
  - Exceptional status of awards;
  - Suspension/termination of award;
  - · Special terms and conditions of award;
  - Reduced flexibility in the management of federally provided resources;
  - Significant difficulty negotiating F&A rates;
  - Extrapolation to additional grants.
- Negative publicity;
- Financial
  - Audit findings;
  - Disallowance of costs;
  - · Large financial settlements;



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# Introduction to Research Compliance

#### **GREATEST RISK AREAS**

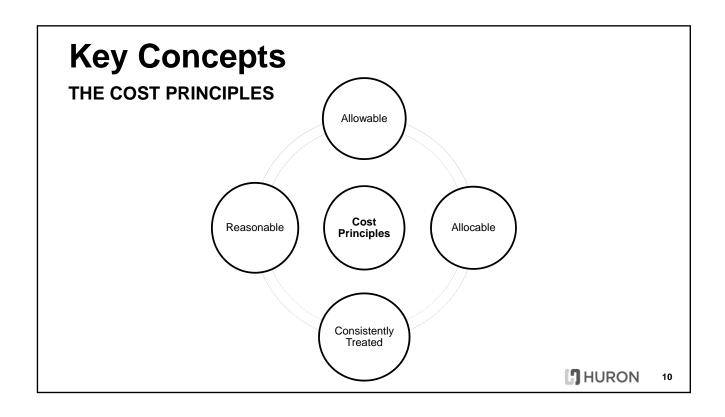
- Time & Effort Reporting (Payroll Verification)
- Cost Transfers
- Award Closeouts

We will explore the challenges and risks associated with these areas in more detail....

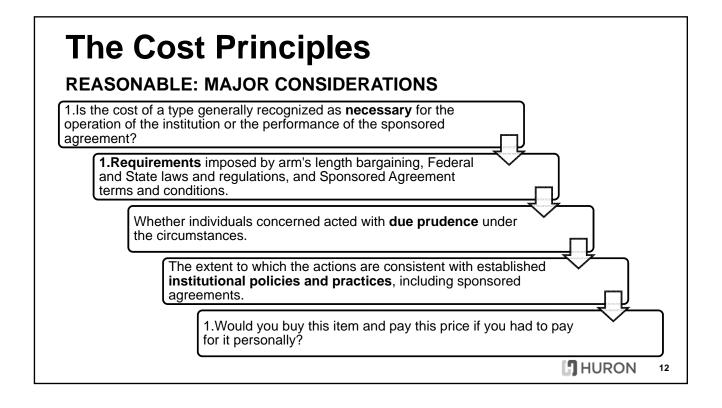
But FIRST - the basics.

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# The Cost Principles REASONABLE A cost is reasonable if, in its nature and amount, it does not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost.



#### **REASONABLE**

#### Major Challenges

- •Late Fees associated with a bill paid late for an allowable charge to a sponsored project due to departmental inefficiency
- •Charging valet parking \$22/day when daily parking is available at \$14/day
- •Architectural fees for building plans on a site that proved to be cost inefficient (included in an F&A Proposal)

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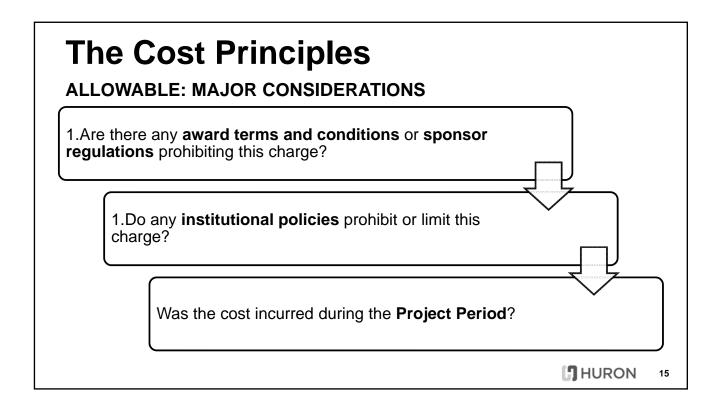
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# **The Cost Principles**

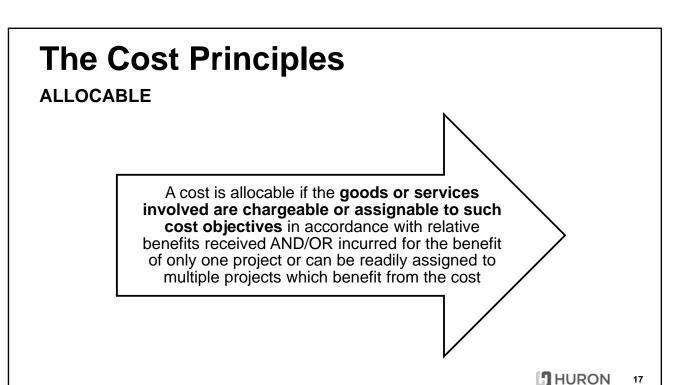
#### **ALLOWABLE**

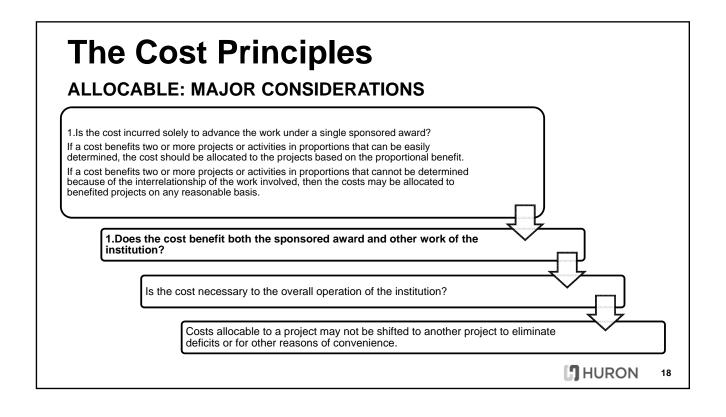
A cost is allowable if it **conforms to any limitations** or regulations set forth in the regulations that govern the award (OASC-3, Uniform Guidance, institution or system policies, etc.) or in the sponsored award

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# The Cost Principles ALLOWABLE Major Challenges •Lack of understanding/awareness of sponsor terms and conditions •Workplace conflict of interest: Individuals with authority insisting a charge should be applied when it should not





#### **ALLOCABLE**

Major Challenges

- Lack of a policy or insufficient policy
- •Insufficient or no training
- Lack of central system or processes to detect and monitor charges which involve cost allocation transactions

Lack of proper documentation for allocation decision and methodology

Determination of a "Reasonable Basis" for allocation

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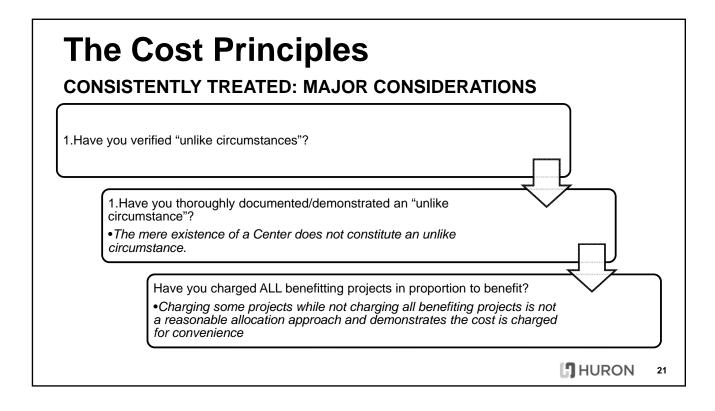
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# The Cost Principles

**CONSISTENTLY TREATED** 

A cost is treated consistently if the costs incurred for the same purpose, in like circumstances, are either direct costs only or F&A costs only with respect to final cost objectives. This assures that the same types of costs are not charged to awards both as direct costs AND as indirect costs.

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#### **CONSISTENTLY TREATED**

Major Challenges

- •"Indirect types" of costs are the most at risk: Clerical and Administrative Costs, Office Supplies, Local Phone Charges, Memberships, Postage
- •Each of these cost categories is included in the Departmental Administration component of the F&A Rates (generally in large amounts)
- •Economic factors may affect doing the right thing
- •In all but exceptional circumstances, these costs benefit multiple activities, and thus meet the definition of an indirect cost

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**CONSISTENTLY TREATED** 

# **Spotlight on the Uniform Guidance**

Consistent guidance has been issued that allows for administrative costs to be treated as direct costs when they meet certain conditions to demonstrate that they are directly allocable to a Federal award.





# **Time and Effort Reporting**

#### FINANCIAL CHALLENGES

**Effort:** Proportion of time spent on any activity, expressed as a % of the total compensated activity for which an individual is employed by the institution.

- Be a reasonable estimate of time spent on activities
- Total effort = 100%
- · Effort is not based on a 40 hour week

#### **Challenges: PI/Faculty**

- Lack of understanding of effort reporting
- Lack of effective training
- Appointment/Salary documentation lack clarity
- Deprioritized effort reports (unsigned/not timely)
- Salary from >5 awards OR 100% charged
- Salary cost transfers after effort certified
- Salary > DHHS Salary Cap

#### **Challenges: Research Administrators**

- Insufficient or outdated policies and procedures
- Lack of **ownership** of the process/system
- Insufficient training and education programs
- Paper-based processes that are burdensome to monitor

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# Time and Effort Reporting

#### REGULATIONS

Uniform Guidance:

- "Effort Reporting" still required (not dead)
- Additional flexibility: Institutions can determine the means and frequency of their process

Other Regulations/Guidance

- NIH Policy Statement
- OIG Audit Reports
  - http://oig.hhs.gov/reports-andpublications/oas/nih.asp
  - http://www.nsf.gov/oig/auditpubs.jsp

#### **AUDITS & FINDINGS**

- \$13 Million Settlement (in 2018!)
- University of North Texas Health Science Center
- Self-discloser from January 2011 through February 2016
- Due to effort reporting errors:
  - UNTHSC received payments for inaccurately and untimely time and effort certifications
  - UNTHSC received federal reimbursement when salary payments did not match the accompanying time and effort reports

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## **Cost Transfers**

#### FINANCIAL CHALLENGES

A **Cost Transfer** is an after-the-fact reallocation of the cost associated with a transaction from one project (account) to another

#### •Challenges: Institution-wide

- Policies and Documentation: Inadequate or outdated
- Lack of training
- Limited monitoring
- Excessive transfers and transfers of transfers
- Transfers impacting previously certified effort
- Non-compliant transfers:
  - Near/After project end
  - Solely to remove deficit from another project
  - Appearance of utilizing unspent funds



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### **Cost Transfers**

#### **REGULATIONS**

NIH Grants Policy Statement:

- "Corrections of clerical or bookkeeping errors should be accomplished within 90 days of discovery of the error."
- "Transfers must be supported by documentation that fully explains how the error occurred, and a certification of the correctness of the new charge by a responsible organizational official of the grantee."

#### **AUDITS & FINDINGS**

- \$500,000 settlement
  - 266,000 transactions on NSF award funds over a 3-yr period reviewed
- Lack of documentation was primary reason that cost transfers were disallowed
- Commonly cited Cost Transfer violations by DHHS OIG:
  - Lack of "effective controls and accountability for ---"
  - "Adequate safeguards to assure that assets are used for authorized purposes" not present
  - Insufficient "accounting records that are supported by source documentation"



## **Closeouts**

#### FINANCIAL CHALLENGES

- The Department and PI cease using the project/account number
- Transactions are no longer approved by units outside of the department
- The financial system blocks expenditures from posting to the project
- TOTAL EXPENDITURES = TOTAL BUDGET = TOTAL CASH

#### Challenges: Institution-wide

- Unallowable expenditures posted that should have been removed
- Debits or credits posted that were not captured on the financial report or final invoice
- Loss of carry forward funds
- Continued posting of expenditures after funding is de-obligated
- · Variance between final report and financial system



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## **Closeouts**

#### REGULATIONS

Uniform Guidance:

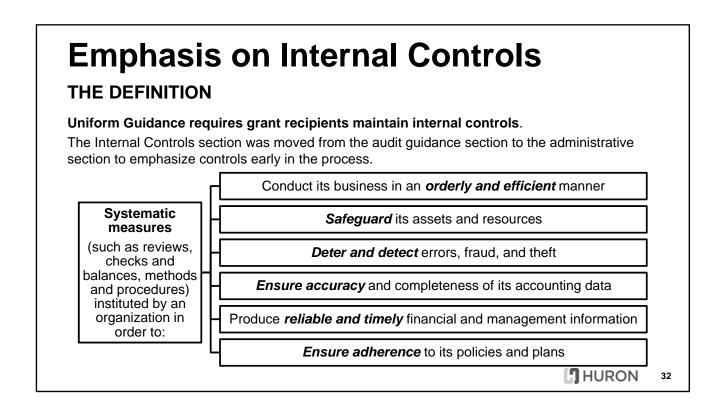
- Submit all sponsor required reports and liquidate all obligations within 90 calendar days
- Refund any balances of unobligated cash that was paid by the sponsor
- Disclose information on any property acquired with funds or received from the sponsoring agency

#### **AUDITS & FINDINGS**

- Audit resulted in new NIH Sub-Accounting Procedures
- OIG audited DHHS's closeout procedures, specifically funds allocated within the Payment Management System:
  - 88% of DHHA grants are closed out late (on the federal side)
  - Billions of unspent dollars remained allocated to closed awards
  - Federal agencies had to tighten their monitoring and controls

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# **Emphasis on Internal Controls**

#### THE BEST PRACTICES

The Uniform Guidance states that internal controls should be in line with guidance in:

- "Standards for Internal Control in the Federal Government" [i.e., **the Green Book**], issued by the Comptroller General of the United States;
- "Internal Control Integrated Framework", issued by the Committee of Sponsoring Organizations (COSO);
- OMB Compliance Supplement, Part 6.

These documents contain best practices....BUT:

- It is not required to document or evaluate internal controls prescriptively in accordance with these documents.
- It is not required to audit or reconcile technical differences.
- Non-federal entities and their auditors should exercise judgment in determining the most appropriate and cost effective internal control in a given environment or circumstance to provide reasonable assurance for compliance with Federal program requirements.

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# **Internal Controls**

#### **MONITORING COMPLIANCE**



Evaluate internal policies and procedures to ensure the right level of internal controls are integrated.



Evaluate the OIG Compliance Supplement for new changes and reforms.



Consider developing a data-base to monitor compliance:

- Analyze sponsor project financial data, cost allocations can point to control breakdowns;
- Dashboards and reports.

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# **Compliance: Your Institutional Approach**

#### **KEY ELEMENTS OF EFFECTIVE COMPLIANCE PROGRAMS**

Elements of Effective Compliance

- Elements of 1. Compliance Leadership
- Compliance 2. Policies and Procedures
  - 3. Training
  - 4. Communication
  - 5. Monitoring
  - 6. Enforcement
  - 7. Corrective Response
  - 8. Roles and Responsibilities

Some strategies to mitigate risk based on these elements are discussed further...

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# **Compliance: Your Institutional Approach**

#### **KEY ELEMENTS OF EFFECTIVE COMPLIANCE PROGRAMS**

#### Compliance Leadership

- Must have a Compliance Officer
- Committee to oversee compliance

#### Monitoring

- Leverage systems and reports
- Use internal audits
- Don't assume everything is OK!

# Policies & Procedures

- Documented
- Up-to- Date
- Publicized to community
- · Consistent with practice

#### Enforcement

- Mandate policies and procedures
- Have follow-up actions for non-compliance

#### Training

- Relevant and tailored content
- Periodically offered via multiple mediums

#### **Corrective Action**

- Action plans to mitigate further noncompliance
- Additional trainings

#### Communication

- Working groups and discussion
- Focus on policy changes, new developments

# Roles & Responsibilities

 Clear division of responsibilities including oversight

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# **Compliance: Your Institutional Approach**

#### **RISK MITIGATION STRATEGIES**

#### **Effort Reporting**

- Review faculty salary if:
  - •> 95% charged to award
  - Charged to > 5 projects
  - salary cap
- Monitor uncertified effort reports
- Do not allow cost transfers to federal projects after certification has been done

#### **Cost Transfers**

- Minimizing # of late cost transfers
- Cautious of transfers:
- B/w federal projects
- At end of a project
- Utilizing unspent funds or moving deficits
- Linked to previous transfer
- · Check transfers for:
- Timeliness
- PI approval
- Documentation

#### Award Closeout

- Establish an internal closeout procedure
- Provide training
- Send 60-, 90- day notification letters
- Submit timely financial reports and invoices
- Track terminated projects and awards
- Utilize 'Hold' or 'Freeze' account status

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