

EthicsPoint Reporting Hotline Workflow

1. Intake by EthicsPoint (telephonic or online) may be anonymous or identifiable.
2. EthicsPoint issues a code (for telephonic reports) or log-in information (for online reporters) to check on case status and communicate with USU officials. For anonymous reporters, this would be the sole means of communication about the report.
3. Ticket opened by EthicsPoint in USU's system with access to administrators based on USU instructions to EthicsPoint
4. Internal notification sent from the assigned Hotline Administrator to all Hotline Administrators to review and approve assignment of a Case Review Team (which could be predetermined for certain issues). Members of the team, and all others that become involved in the investigation should use reasonable efforts to maintain principles of confidentiality, anonymity, noninterference, nonretaliation, and avoidance of conflicts of interest.
5. The Case Review Team works with General Counsel to complete an initial assessment. During the assessment the following determinations would be made:
 - a. **Emergency.** Does the report involve an immediate threat to the safety or security of persons or to property?. If so, the report will be immediately referred to appropriate emergency response units and other authorities, and the Case Review Team will be notified of the referral. EthicsPoint also escalates cases that are emergent, including threat of harm and the possible need for evacuation.
 - b. **Conflict of Interest.** Does the report include a specific allegation against any employee or officer that has been or might be assigned to the Case Review Team? If so, that individual would be excluded from access to EthicsPoint records for that report, and would not participate on the team assigned to that report or have any responsibility for investigation, determinations or sanctioning associated with the case.
 - c. **Assessment of Major Risk.** Does the report pose a substantial risk to the institution? If so, the Responsible Executive over the area involved in the report might be vetted for a conflict of interest, and if cleared, notified to make sure the risk is identified and mitigated. The Responsible Executive would work with General Counsel and others to consider and implement appropriate interim measures.
 - d. **Frivolous or Non-actionable Complaints.** The Team determines if the report is implausible on its face or, if found true, would not constitute a legal or policy violation? The team assesses whether there is sufficient evidence, or the opportunity to find sufficient evidence, to investigate the report? If not, the complainant would be notified through EthicsPoint

that the case will not be considered without further actionable information being made available.

- e. **Mandatory Reporting Obligation.** Does the report necessitate mandatory reporting based on information already available? If so, General Counsel will work with appropriate USU officials to make reports. Might the report necessitate mandatory reporting if additional evidence of non-compliance is developed during an investigation? If so, appropriate officials will be notified of the possible need for reporting based on findings of the investigation.
- f. **Initiate Formal Investigation.** Does the report warrant formal investigation? If so, the Case Review Team shall be directed to conduct the investigation with a Primary Case Manager appointed by the Hotline Administrators (if not predetermined based on policy).

- 6. Investigations would be initiated only after the assessment is completed. Reports related to any compliance or misconduct area already assigned by policy to a specific USU official or USU body shall be referred to that person or entity, and except in cases where a conflict of interest exists, the lead individual assigned by policy to oversee the investigation would be appointed as the Primary Case Manager (PCM).
- 7. In cases where policy does not assign specific responsibility for reported non-compliance, the Hotline Administrators would appoint a PCM.
- 8. The PCM could have direct responsibility to carry out the investigation. Or the PCM could coordinate with the Case Review Team, could make assignments as required to members of the team or others as appropriate, or could use the team in the capacity of an investigative committee if allowed by regulation.
- 9. Investigations would include the follow activities:
 - a. Prior to initiating an investigation, the PCM and the Case Management would develop an investigation strategy that might include:
 - The scope of the investigation
 - The compliance issues and related risks to the university
 - The individuals and offices that should be involved in the investigation
 - An initial list of interviews that should be conducted, which may be expanded as circumstances dictate
 - Documents to be collected, and any directive to preserve documents that should be issued
 - A communication strategy
 - b. During the investigation the PCM, in consultation with General Counsel, would determine whether information coming forward triggers timely notification or reporting requirements.

- c. The PCM and other appropriate USU officials would implement appropriate interim measures.
 - d. The PCM would seek additional facts and evidence from the reporter, if self-identified, and in the case that the PCM is unable to obtain such evidence after a reasonable period, would proceed with an investigation based on the facts and evidence available.
 - e. When possible without compromising the investigation, the respondent would be notified of the allegation and an opportunity to respond. The respondent would also be informed of USU's nonretaliation policy, and the need to maintain confidentiality of information related to the investigation.
 - f. The PCM would interview other witnesses and gather additional information, based on information discovered during the investigation.
 - g. Throughout the process, the PCM and others involved in the investigation would collect and preserve documents and information, and findings.
 - h. For reporters who remain anonymous, EthicsPoint would be used to update complainants about their reports and to request additional information when needed. If the report contains insufficient information to support findings in the case, and the reporter does not provide additional information sufficient to proceed, the PCM would pursue the limited investigation possible and inform the complainant that USU will be unable to pursue the report further.
10. After the PCM makes certain that the status of the report is updated and tracked in EthicsPoint. If final resolution is reached, it should be reported in EthicsPoint, including any finding, the ultimate resolution, and any referrals to other USU officials or bodies.
11. After the PCM communicates the finding, resolutions and referrals to the complainant and the respondent, the case is closed out in EthicsPoint.

EthicsPoint Workflow Diagram

EthicsPoint Report Received or Other reports assigned to EthicsPoint

Review by Hotline Administration Team

Assign to pre-approved unit or Form a CRT & provide charge

Assign Primary Case Manager

CRT Initial Evaluation - make referrals and/or report intent to investigate

Formulate Investigation Plan and Communication Plan with General Counsel

Conduct Investigation
Coordinate interim measures
Follow all applicable policies and procedures
Collect and preserve documentation
Review and update case in EthicsPoint regularly

Make findings and resolutions
Record findings, resolutions, referrals made within USU and to outside agencies in EthicsPoint

Document close-out in EthicsPoint
Include any informal resolutions made outside the CRT

CRT or assigned unit to coordinate with University Compliance and
General Counsel to recommend and implement changes to internal controls