


<b>Name of Policy:</b> <b>Mandatory training</b> <b>Policy Number:</b> 3364-25-127 <b>Approving Officer:</b> President <b>Responsible Agent:</b> Chief Human Resources Officer, Executive Director Compliance and Internal Audit <b>Scope:</b> All University of Toledo Campuses		 <b>Effective date:</b> October 20, 2023 <b>Original effective date:</b> October 30, 2017	
<b>Keywords:</b> Do not capitalize unless a proper noun			
	New policy	X	Minor/technical revision of existing policy
	Major revision of existing policy		Reaffirmation of existing policy

(A) Policy statement

It is the policy of the university of Toledo that employees adhere to all applicable federal, state, and university rules and regulations in the course of their jobs. It is the obligation and responsibility of administrators and university personnel to educate and update university personnel when applicable to ensure compliance with these rules and regulations.

(B) Purpose of policy

To offer compliant and standardized training on federal/state regulatory programs, or trainings otherwise deemed appropriate.

(C) Procedures

The primary components of the university’s compliance training for employees include, but are not limited to the following:

- (1) New hire orientation: employees will receive an overview of the most significant university policies, information about the

university's anonymous reporting line, and the state of Ohio's ethics hotline. They will also learn where and how to find additional guidance on these subjects.

- (2) First thirty days of employment: The university will use the first thirty days of employment to supplement the following compliance information the employee received at new hire orientation:
  - (a) Ohio ethics (including conflict of interest – all employees)
  - (b) Title IX – violence against women act (“VAWA”) (including supervisor anti-harassment – all employees)
  - (c) Health insurance portability and accountability act of 1996 (“HIPAA”) basics (all departments listed as part of the hybrid and affiliated covered entity, and all employees who reside on the health science campus, according to rule 3364-15-01 of the Administrative Code (the HIPAA organizational structure and administrative responsibilities)).
- (3) Recurring training; Employees will receive compliance training on a regular and ongoing basis. Most recurring compliance training occurs on a one to two year cycle from date of hire.
  - (a) One-year cycle
    - (i) Ohio ethics including conflict of interest (all employees)
    - (ii) Health insurance portability and accountability act of 1996 (“HIPAA”) (all departments listed as part of the hybrid and affiliated covered entity, and all employees who reside on the health science campus, according to rule 3364-15-01 of the Administrative Code (the HIPAA organizational structure and administrative responsibilities)).
  - (b) Two-year cycle  
Title IX – violence against women act (“VAWA”) (all employees; there may be areas required to have the training annually)
- (D) Roles and responsibilities
  - (1) Internal audit and compliance: provide training content

- (2) Human resources: deliver training content, monitor participation, take necessary follow-up actions
- (3) Department heads: ensure all employees attend and/or take the specific training
- (E) Compliance education for non-traditional staff
- (1) Non-traditional staff for purpose of this policy, are defined as contract, agency, and temporary employees working at the university of Toledo for a limited period of time.
- (2) It is the responsibility of department managers, directors, and contract supervisors to ensure that all non-traditional staff employees who will not be attending the new employee orientation held twice monthly are educated on basic compliance protocols.
- (F) Senior leadership reserves the right to add additional training as needed.
- (G) Failure to follow university policies may result in discipline up to and including termination.

<p><b>Approved by:</b></p> <p><i>/s/</i></p> <hr/> <p>Gregory Postel, MD President</p> <p><b>Date:</b> Date</p> <p><b>Review/revision completed by:</b></p> <ul style="list-style-type: none"> <li>• Chief Human Resources Officer</li> <li>• Senior Leadership Team</li> </ul>	<p><b>Policies superseded by this policy:</b></p> <ul style="list-style-type: none"> <li>• None</li> </ul> <p><b>Original effective date:</b> <i>October 30, 2017</i></p> <p><b>Review/revision date:</b> <i>November 20, 2019</i> <i>October 20, 2023</i></p> <p><b>Next review date:</b> <i>October 20, 2026</i></p>
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