Status as of OCTOBER 1, 2012
UNIVERSITY OF MICHIGAN SAFETY & SECURITY STEERING COMMITTEE
Report on the Status of Management

To Executive Sponsors:
  E. Royster Harper, Vice President for Student Affairs
  Debra Kowich, Interim Vice President and General Counsel
  Ora Pescovitz, Executive Vice President for Medical Affairs
  Timothy Slottow, Executive Vice President and CFO

Cc: Mary Sue Coleman, President
    Sally Churchill, Vice President and Secretary of the University
    Lisa Rudgers, Vice President for Global Communication and Strategic Initiatives
    University Audits

Contents:

Foreword

1. Overview
2. Resources Assigned to Project
3. Organization of this Report

Summary of Current Status

Audit Recommendations and Actions Taken and Planned

1. Develop an extensive set of common guidelines and protocols for reporting security incidents throughout the University.
2. Raise awareness of the patient, employee and student privacy rules.
3. Foster better understanding and sensitivity of duty to report requirements.
4. Review the use of 911 triage and dispatch.
5. Create a shared communication system that facilitates accountability and cooperation.
6. Formally debrief on major security incidents.
7. Develop ongoing team-building training programs.
8. Review the reporting lines and communication structure of police and security units.
9. Consider a DPS liaison office within the Health System.
10. Develop cross-functional teams.
11. Engage an outside expert to conduct a cultural audit.

Change in Steering Committee Focus

Appendix – Safety & Security Work Groups
Foreword:

1. Overview:

Tony Denton, Hank Baier and Suellen Scarnecchia organized the development of the Safety & Security Steering Committee (Committee), formed to address concerns and recommendations highlighted in University Audit’s Report 2012-809, University Safety and Security Communication, Reporting and Incident Investigation. The intended outcomes are the implementation of the actions outlined in their management response, the enhancement of University safety and security for all university members and visitors and improved communication, investigation, and reporting processes within and across security units and related agencies on the Ann Arbor campus. Members of the Steering Committee include those named above plus: Loren Rullman, Tom Peterson, Joe Piersante, Laurita Thomas, Deborah Childs, Virginia Wait, Mark Banaszak Holl and Fred White. Kathleen Donohoe has attended meetings on a regular basis as project manager for the cultural assessment.

This progress report outlines the current status of the management response to the audit recommendations. Most actions have already been implemented and more are planned. While some actions will potentially be informed by and subject to University acceptance of the findings of outside consulting engagements, we have substantially completed the design stage and have moved to the full deployment and continuing oversight. All known remaining actions have been assigned to appropriate campus personnel; any additional actions that will potentially come from the findings of outside consulting engagements will be appropriately assigned.

This document is the report of the Safety & Security Steering Committee, and there is no intent to imply that University Audits is in agreement with our statements. University Audits will perform quarterly follow-up reviews until all noted risks are appropriately mitigated.

2. Resources assigned to this project: This remains a top priority for those involved. The resources include:

A Steering Committee, as described above. The Committee met twice a week February through July. The Committee will be meeting on a less frequent basis during this second stage (i.e.: full deployment and continuing oversight stage).

Twelve work groups: Forty content experts are spread over twelve work groups, many are members of two or more groups, and some also serve on the Steering Committee. Work groups were created to align with the audit recommendations. The individual work groups are each made up of individuals from several departments from across the University who work collaboratively. Because the audit recommendations overlap, the work groups collaborate with other teams, some regularly meeting together. Weekly updates and related documents (draft policies, procedures, training documents, etc.) have been shared by each work group with all other work groups and with the Steering Committee.
University of Michigan Safety & Security Steering Committee  
Status of Management Response to Audit as of October 1, 2012

University administration engaged an outside consultant to conduct a cultural assessment of University safety and security departments and a peer university benchmarking survey. The Board of Regents engaged an outside law firm to conduct an independent investigation concerning an apparent delayed response to an alleged incident, to review internal controls, and to assist in corrective actions. These two outside experts have coordinated their efforts for efficiency and effectiveness.

3. **Organization of this report:**

This report is structured to align with the recommendations contained in the Management Response to the Audit. However, there is interplay between the responses such that similar text will appear more than once.

**Summary of Current Status:**

- The many improvements already implemented and planned will be continued.
- Work groups that have completed their work (as detailed in “Audit Recommendations and Actions Taken and Planned” section below) no longer meet, but will be reformed if needed.
- Two of the work groups (Duty to Report, and Team Building Training Programs) will continue to meet to make additional improvements.
- New permanent cross department teams and permanent collaborative cross department meetings are now in place to ensure continuation of recently implemented improvements, as well as to make additional improvements going forward. Cross department teams and cross departmental meeting groups include:
  - Lessons learned (post-incident review).
  - Domestic Workplace Violence: Stalking/PPOs. Identify situations and share information.
  - Cross functional training for DPS, HHC Security and Housing Security: to include response and basic crime scene preservation protocols.
  - Cross–functional training team: to develop opportunities for all Campus, Housing, and Hospital staff to train together such as FTO training, ACOP, incident report writing, bike patrol training. When possible they will use team instructors from all three departments.
  - Weekly Crime Team: UMPD Crime meetings that include Hosing and Hospital investigators.
  - Crime Alert/Cleary Team: weekly crime meetings.
  - Resources Sharing Team: Capture and identify resources.
  - Disaster-Weather-Emergency Team
  - Mutual Aid/Mass Deployment/Establish Perimeter Team
- DPS Liaison Officers make daily connections with Hospital Security shift supervisors.
- The directors of the three public safety and security departments meet regularly.
- The Safety and Security Steering Committee continues to work to fully implement the changes outlined in the University Audits report to provide oversight to insure that the recently implemented policy and procedures are sustained.
Additionally, the outside consulting firm of Margolis, Healy & Associates (MHA) is working with the University administration to determine how best the University might learn from and utilize the information gained in the benchmarking survey and the cultural assessment, both performed by MHA.

AUDIT RECOMMENDATIONS AND ACTIONS TAKEN AND PLANNED
(Audit workgroups are numbered corresponding to the numbered audit recommendations below. Lists of workgroup members are listed in the appendix).

1. **Audit Recommendation: Develop an extensive set of common guidelines and protocols for reporting security incidents throughout the University.**
   Management response to audit recommendation is substantially complete and the work group no longer meets. The Steering Committee with the help of University Management has one step to complete – see next step below.

Actions completed:

- The following documents were written and Office of General Counsel review has been completed: (1) Guidelines for Security Cooperation During Investigations; (2) Response/Incident reporting guidelines for HHC Security; (3) Common Reporting Guidelines for Housing Security; (4) Chart of Investigative Duties regarding allegations of criminal misconduct. The guidelines have been implemented as applicable by the three safety & security units and by most of the other university investigative and security units.
- Regulations concerning patient and student privacy were incorporated into the relevant guidelines. The guidelines have been incorporated into training modules described in #2 and #3 below.

Next step below by the Steering Committee with the help of the University Management (Steering Committee lead: Fred White):

   Documents (1) Guidelines for Security Cooperation During Investigations and (4) Chart of Investigative Duties regarding allegations of criminal misconduct need to be implemented by a few investigative units and security units that were not initially involved. An individual has been identified from the Provost Office to assure that museum security guards (which are UM employees) are brought into the training/process as appropriate.

2. **Audit Recommendation: Raise awareness of the patient, employee and student privacy rules.**
   Management response to audit recommendation is complete; the work group continues to meet, together with group #3, to make further improvements.

Actions Completed:

- A new policy on Mandatory Privacy Training for UM Law Enforcement and UM Security Personnel has been written. While privacy training has been incorporated into on-line
training as described below, the permanent form that this policy statement will take (e.g.: SPG section or something else) has yet to be determined.

- An on-line training module was developed. A number of scenarios involving conflicts with duty to report (where patient/student/individual legal privacy rights may restrict or slow down providing information under duty to report laws) have been written to underscore the education. Each scenario is done in a story format and includes ‘crucial moments’ which should trigger critical thinking around the appropriate response to each situation.
- Online training for DPS, HHC Security and Housing Security was implemented the week of July 16, 2012.

Ongoing:

- Meetings of this committee will continue, with meetings currently scheduled through 2012, to improve upon and develop additional subject matter specific content.

3. Audit Recommendation: Foster better understanding and sensitivity of duty to report requirements.
Management response to audit is complete, with only one item (Clery Act module) in final development. The work group continues to meet, together with group # 2.

Actions completed:

- An electronic memo was issued on February 20, 2012 by the three Executive Vice Presidents, the VP of Division of Student Affairs and the V.P. and General Counsel to the deans, department heads, and directors explaining faculty and staff responsibilities to report suspected criminal activity and other wrongdoing.
- The following communication plan is in place:
  - An email reminder will be sent each Fall and Winter semesters from the three Executive Vice Presidents, the VP of Division of Student Affairs and the V.P. and General Counsel to the Deans, Directors, and Departments Heads. The email will be a reminder explaining responsibilities to report suspected criminal activity and other wrongdoing. It will include a sentence, “We encourage you to share the information in this message with faculty, students and staff under your direction.”
  - The person responsible for Clery Act reporting will send an email each May to the Deans, Directors, and Department Heads as well as to identified Campus Security authorities (total of approximately 3,800) to collect and report data on any crimes that previously had not been reported to police.
  - The reporting requirements will be reported in the Annual Security Report & Annual Fire Safety Report.
- The scenarios described in point 2 above have been made available to safety and security officers via website. The Work Group also decided to include “Lessons Learned” as described in point 6 below. All applicable officers and staff have completed the on-line training.
- An online training program regarding Clery Act reporting requirements is in development and will be completed by the end of September. The training material will be referenced in future annual reminders that DPS sends out to Campus Security Authorities (CSAs) regarding Clery Act reporting requirements.
- Incident reporting/duty to report has been incorporated into Health System Compliance Mandatory Training for healthcare providers.

Next step:
- Although not subject to the initial audit or response, the Steering Committee believes museum security and contract security officers should be included in a base line training (e.g.: FERPA and Clery Act training) so that all security personnel are held to a similar standard. The Steering Committee and appropriate work group staff and management will work to include the museum security guards (University employees) and the North Campus Research Center contracted security guards in training as appropriate.

4. Audit Recommendation: Review the use of 911 triage and dispatch.
Management response to audit recommendation is substantially complete and the work group no longer meets. DPS has one step to complete – see next step below.

Actions completed and ongoing processes:
- The review of the two locations that receive 911 calls originating from University phone lines has been completed. Several enhancements have been made.
- In February, HHC-Facility Control Center (HHC-FCC) scripts for answering 911 calls were improved by: a) stressing that the communications officers answering the calls clearly identify themselves as Hospital Security, and b) informing the caller as to who (i.e.: which department) will respond to the call.
- Also as of February, HHC 911 calls have been separately logged/tracked manually and review of calls began by HHC Security (calls were previously logged/reviewed but emergency and non-emergency call data could not previously be separated). Approximately 69,000 calls for service are made to the HHC-FCC annually, approximately one percent of which are 911 calls. All calls for service are recorded and are categorized as to emergency or non-emergency type call. The logs are reviewed. The voice recordings are reviewed as necessary. HHC-FCC security officer dispatch calls are also recorded and logged. Since calls were first tracked, separated, and reviewed in February through current, there have been no police/crime related HCC-FCC 911 calls – the majority has been in-house medical emergencies or patient management type calls. All phone lines in HHC-FCC are and will continue to be logged and reviewed by Hospital Security.
- DPS continues the practice of monitoring all Hospital Security officer dispatch calls in real time, and continues to have the ability to respond to any and all Hospital Security dispatched calls where DPS thinks it appropriate.
University of Michigan Safety & Security Steering Committee
Status of Management Response to Audit as of October 1, 2012

- A feature has been added recently to the HHC-FCC system which allows HHC to bring DPS into an HHC 911 call when appropriate (crimes in progress are to be transferred directly to DPS). New features allow either a) conference call or b) dedicated transfer. Staff have completed training on the new features/procedures.

Next step below by Department of Public Safety (lead: Joe Piersante):

DPS will hire an outside consultant to review the quality level of its communications center operation.

5. Audit Recommendation: Create a shared communication system that facilitates accountability and cooperation.
   Management response to audit recommendation is substantially complete and the work group no longer meets. DPS has one step to complete – see next step below.

Actions completed:

- A “UM Security Data Repository and report writing system” (UM Security Data Repository) with shared access by all three safety & security departments was developed and put in place in February and became fully operational in June. The UM Security Center combines records and datasets comprising safety and security information from various internal and external sources to allow the information to be accessible and searchable by the University’s police and security communities through a secured web application.

- Data is not available in real time in the UM Data Repository. The process to support the new UM Security Data Repository generally involves obtaining permission from the information owners, extracting the records on predefined schedules (hourly, weekly, etc.), transforming the data to fit the particular operational need, and loading it into the underlying database supporting the UM Security Data Repository. Examples of datasets available for sharing include Parking and Transportation Services’ parking permit database, ITS Communications and MCIT phone location records, trespass records, arrest and call for service information from the DPS records management system (known as Courts and Law Enforcement Management Information System or CLEMIS.) The UM Security Data Repository also provides a report writing system for security reports authored by campus units. All officers from Housing Security and HHC Security are now using the new report system that resides on the UM Security Data Repository. Other resources have been transferred to the UM Security Data Repository, and the Infonet (Infonet was the old data DPS incident reporting system that was shared with HHC Security and Housing Security – all criminal reports were written on this system) has been retired.

Next step below by Department of Public Safety (lead: Joe Piersante):

An RFP has been written to replace the DPS Computer Aided Dispatch software. Expect completion of the replacement by November 2012. This will allow HHC Security and
Housing Security to access that DPS data for which access is not limited to law enforcement agencies directly from the DPS Dispatch System in real time, rather than having to wait for the UM Security Data Repository to be updated. Once the DPS Computer Aided Dispatch system is replaced, the DPS Dispatch System will continue to operate as the (PSAP) Primary Answering Point for the University. The UM Security Data Repository will continue to provide additional information and a report writing system for Hospital and Housing Security.

6. Audit Recommendation: Formally debrief on major security incidents.

Actions completed:

- Two documents were developed for use by the Safety and Security units to document the post-incident debrief process. The first document is an After Action Report (AAR) guidance document, which describes the method and process for formal debrief of a major incident; and the second document is the AAR Template, which is the form to be used in each debrief, to document the event, and the lessons learned from each.
- The process of formal post-incident debrief was implemented May 15, 2012 together with use of the two documents described above.

7. Audit Recommendation: Develop ongoing team-building training programs.

Management response to audit recommendation is complete. However the work group continues to meet, as it is committed to identifying additional training programs and improving the existing training programs; and its training activities may be informed by the results of the MHA consulting results. The work group will provide periodic reports to the executive sponsors.

Actions Completed:

- A two-pronged approach to U-M Safety and Security team development was created:
  - Team building through shared experiences that occur “in the field” through intentional joint activities and joint technical training.
  - Team building in the form of trainings/events that are focused specifically on building trust, common expectations, an enhanced set of skills, consistent approaches, and common language that enable the group to perform as a high performance cross-functional team.
- The work of other work groups was incorporated into plans for current and future team building.
- The work group has completed the compilation of the “shared experiences” team building activities, and implementation dates are scheduled (some have already begun).
8. **Audit Recommendation:** Review the reporting lines and communication structure of police and security units. 
Management response to audit recommendation is complete and the work group no longer meets.

**Actions Completed:**

- The outside consulting firm of Margolis Healy & Associates (MHA) was engaged to perform a benchmarking survey on organizational structures for security agencies at other comparable universities and to provide findings and recommendations on organization structure (also see point 11 below for other consulting work by this outside firm).
- MHA has completed the survey of eight universities.
- MHA has shared their findings with the outside law firm of Latham & Watkins retained by the Regents, and has also shared them with University management in late August.

9. **Audit Recommendation:** Consider a DPS liaison office within the Health System. 
Management response to audit recommendation is complete and the work group no longer meets.

**Actions Completed:**

- The Steering Committee determined that rather than a physical DPS liaison office in the HHC, DPS should instead establish a DPS Liaison Officer role that will make daily connections with Hospital Security shift supervisors. This was implemented on April 9 and occurs on both the day and afternoon shifts. This has gone well with positive feedback from both groups.
- This model was expanded to include offsite HHC Community Oriented Patrol officers (e.g.: Brianwood, KMS, Eisenhower, East Ann Arbor, etc.), which includes routine exchange of information, and assistance as needed.
- In May, orientation/cross training task lists were developed by and for HHC Security, Housing Security, and DPS for incorporation into each unit’s Field Training Guide and Field Training Officer programs, in which all newly hired officers participate. DPS Police and HHC Security orientation checklists were distributed.

10. **Audit Recommendation:** Develop cross-functional teams. 
Management response to audit recommendation is complete and the work group no longer meets.

**Actions Completed:**

- Eight areas have been identified for cross functional teams: 1) Domestic Workplace Violence; 2) Cross functional training for DPS, HHC Security & Housing Security to include response and basic crime scene preservation protocols; 3) Cross-functional
training team to develop opportunities for all Campus, Housing, and Hospital safety & security officers/staff to train together; 4) Weekly Crime Team; 5) Crime Alert Team; 6) Resources Sharing Team; 7) Disaster-Weather-Emergency Team; and 8) Mutual Aid/Mass Deployment/Establish Perimeter Team.

- Cross functional teams have been populated and regular meetings begun.

11. Audit Recommendation: Engage an outside expert to conduct a culture audit.
Management response to audit recommendation is complete and the work group no longer meets.

Actions Completed:

- Margolis Healy & Associates (MHA) was contracted April 4 and arrived onsite on April 9. From April 10-12, MHA’s team of seven conducted meetings with President Coleman, the Executive Sponsors, the Safety and Security Steering Committee, University Audits and senior executives in the relevant University offices. In addition they completed 70 individual interviews, met with officers and staff of the three safety and security units, residence hall student staff, and conducted a Visioning Workshop attended by 30 stakeholders representing units, faculty and staff. The three safety and security units’ operational and written directives were provided to MHA. (Also see point 8 above for other work that MHA has been engaged to perform.)
- MHA has shared their findings with the Regents’ outside law firm of Latham & Watkins, and has also shared them with University management in late August. Central University resources remain available to assist the public safety and security units and other units to make best use of this information.

Change in Focus of Steering Committee:

The Safety & Security Steering Committee is moving from a “design” stage to the “full deployment and continuing oversight” stage, with the following implications:

- The Committee will provide oversight to insure full deployment and to insure that improvements are sustained. Primary accountability and responsibility for improvements as well as operations in general continue to be the responsibility of the leaders of the respective departments.
- The Committee will meet less frequently, monthly or as needed.
- Additional individuals from other departments not involved to date will be brought into the process in order for full deployment of various policies and procedures (i.e.: Provost Office for deployment of certain policies and procedures for museums).
- As work progresses, the Committee may consider submitting names of individuals to the Executive Sponsors to be added to or excused from membership on the Committee.
- Work Groups that have completed their work will be suspended. They will be reconstituted if needed.
- Work Groups that have not completed their work, or that wish to continue to meet to accomplish things beyond the management response to the audit, will continue as needed.
The Committee will a) oversee the implementation of remaining steps whether by continuation of work groups or by operational staff, and b) the continued adherence to the improvements described in this document.
APPENDIX - SAFETY & SECURITY WORK GROUPS – page 1 of 4

Names of members with their titles and departments are listed at the end of this appendix.

Work groups:

1. Develop an extensive set of common guidelines and protocols for reporting security incidents throughout the University.
   Lead: Dave Masson
   Other members: Jeanne Strickland, Rick Boothman, Joe Piersante, Melissa Overton, Robert Neumann, Marilyn Hollier, Teresa Oesterle, Chuck McDermott, Perry Spencer
   Work is substantially completed. The Steering Committee (lead Fred White) will work toward implementation as appropriate in a few remaining investigative and security units.

Duty to Report (work groups 2 and 3 combined into a single work group).

2. Raise awareness of the patient, employee and student privacy rules.
   Lead: Jeanne Strickland
   Other members: Joe Piersante, Marilyn Hollier, Martha Boonstra, Teresa Oesterle, Perry Spencer

3. Foster better understanding and sensitivity of duty to report requirements.
   Leads: Jeanne Strickland
   Other members: Deborah Childs, Joe Piersante, Melissa Overton, Robert Neumann, Martha Boonstra, Teresa Oesterle, Dec Lugin, Erik Mattila
   The combined Duty to Report work group continues to meet and the work group will provide periodic reports to the executive sponsors.

4. Review the use of 911 triage and dispatch.
   Leads: Joe Piersante, Marilyn Hollier
   Other members: Tom Peterson, Crystal James, Jeff McDole, Marilyn Lanzon, Bruce Cadwallander, Kim Deitz
   Work is completed by the work group. DPS (lead Joe Piersante) will hire an outside consultant to review quality level of communications center operation.

5. Create a shared communication system that facilitates accountability and cooperation.
   Leads: Teresa Oesterle
   Other members: Tom Peterson, Marilyn Hollier, Joe Piersante, Jeff McDole, Melissa Overton, Dave Masson, Chuck McDermott, Mike Dillard
   Work is completed by the work group. DPS (lead Joe Piersante) will issue and RFP and will replace the DPS Computer Aided Dispatch software.
6. Formally debrief on major security incidents.
   Leads: Tom Peterson
   Other members: Skip Campbell, Marilyn Hollier, Joe Piersante, Jesse Lewit, Terry Alexander, Teresa Oesterle, Dec Lugin, Perry Spencer
   Work is completed.

7. Develop ongoing team-building training programs.
   Leads: Deborah Childs, Catherine Lilly
   Other members: Marilyn Hollier, Tom Peterson, Joe Piersante, Crystal James, Teresa Oesterle, Ann Marie Carder, Dec Lugin, Veretta Nix, Susan Powers, Sabrina Garrett-Owens
   The work group continues to meet and the work group will provide periodic reports to the executive sponsors. Laurita Thomas and Loren Rullman are also available to assist with the work of this group.

8. Review the reporting lines and communication structure of police and security units.
   Leads: Hank Baier, Tony Denton, Loren Rullman
   Other members: Deborah Childs, Tom Peterson, Marilyn Hollier, Joe Piersante, Melissa Overton, Teresa Oesterle, Linda Newman, Laurita Thomas
   Work is complete. However, members are available to assist University management is working with our external consultant to

9. Consider a DPS liaison office within the Health System.
   Leads: Joe Piersante
   Other members: Tom Peterson, Marilyn Hollier, Melissa Overton, Erik Patterson
   Work is completed.

10. Develop cross-functional teams.
    Leads: Joe Piersante
    Other members: Tom Peterson, Marilyn Hollier, Melissa Overton, Teresa Oesterle, Perry Spence
    Work is completed.

11. Engage an outside expert to conduct a cultural audit.
    Leads: Laurita Thomas, Deborah Childs, Loren Rullman
    Other members: Hank Baier, Tony Denton, Skip Campbell, Suellyn Scarnecchia, Marilyn Hollier, Tom Peterson, Joe Piersante, Teresa Oesterle, Ann Marie Carder
    Work is completed.
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<thead>
<tr>
<th>Names</th>
<th>Title and Department</th>
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<tbody>
<tr>
<td><strong>Members of Steering Committee</strong></td>
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<tr>
<td>Hank Baier</td>
<td>Associate Vice President for Facilities &amp; Operations</td>
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<tr>
<td>Mark Banaszak Holl</td>
<td>Professor of Chemistry and Macromolecular Science and Engineering: Assoc VP for Research, Natural Sciences and Engineering</td>
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<tr>
<td>Deborah Childs</td>
<td>Chief Human Resource Officers, UMHS</td>
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<tr>
<td>Tony Denton</td>
<td>Executive Director, University Hospital &amp; Chief Operating Officer, UMHHC</td>
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<tr>
<td>Kathleen Donohoe</td>
<td>Associate Director, UHR</td>
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<tr>
<td>Tom Peterson</td>
<td>Associate Director, Operations &amp; Support Services, UMHHC</td>
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<td>Joe Piersante</td>
<td>Interim Executive Director Department of Public Safety</td>
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<td>Loren Rullman</td>
<td>Associate Vice President, Division of Student Affairs</td>
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<tr>
<td>Suellyn Scarnecchia</td>
<td>Special Advisor to the President, and Former Vice President &amp; General Counsel</td>
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<td>Laurita Thomas</td>
<td>Associate Vice President for Human Resources</td>
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<td>Virginia Wait</td>
<td>Executive Director, Resource Planning and Management, College of Engineering</td>
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<tr>
<td>Fred White</td>
<td>Project Manager, Finance Project Mgmt Ofc</td>
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<tr>
<td><strong>Leads of Work Groups, other than Steering Committee Members</strong></td>
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<tr>
<td>Marilyn Hollier</td>
<td>Director Hospital Security and Entrance Services, UMH Operations</td>
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<td>Catherine Lilly</td>
<td>Senior Advisor to the EVPCFO, Office of Executive VP &amp; CFO</td>
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<td>David Masson</td>
<td>Associate Vice President and Deputy General Counsel</td>
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<td>Jeanne Strickland</td>
<td>Chief Compliance Officer/Privacy Director/Security Officer/HHC Compliance Office, UMHS Compliance</td>
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<td><strong>Members of Work Groups</strong></td>
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<tr>
<td>Terry Alexander</td>
<td>Executive Director Office of Campus Sustainability, Occupational Safety &amp; Environ</td>
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<td>Martha Boonstra</td>
<td>Associate General Counsel</td>
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<td>Rick Boothman</td>
<td>Risk Management Top Executive, UMH Chief of Clinical Affairs and Adjunct Assistant Professor of Surgery, Medical School</td>
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<td>Bruce Cadwallander</td>
<td>Safety Director, UMH Safety Management Services</td>
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<td>Darrell ‘Skip’ Campbell</td>
<td>HR Officer Lead, Central Admin, Student Residences. DSA</td>
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<td>Ann Marie Carder</td>
<td>Supervisor II, Security Services</td>
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<td>Kim Deitz</td>
<td>Supervisor I, Security Services</td>
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<td>Mike Dillard</td>
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<td>Sabrina Garrett-Owens</td>
<td>Associate Director for Labor Relations, UHR</td>
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<td>Crystal James</td>
<td>Police Lieutenant, Department of Public Safety</td>
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<td>Marilyn Lanzon</td>
<td>Interim Chief Information Officer, UMHHC</td>
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<td>Jesse Lewit</td>
<td>Police Lieutenant, Department of Public Safety</td>
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<tr>
<td>Declan Lugin</td>
<td>Associate Director Housing Security</td>
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<td>Erik Mattila</td>
<td>Supervisor II, Security Services</td>
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<td>Chuck McDermott</td>
<td>Associate Director Housing Security</td>
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<td>Jeff McDole</td>
<td>Information Technology Planning Manager, Department of Public Safety</td>
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<td>Robert Neumann</td>
<td>Police Lieutenant, Department of Public Safety</td>
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<td>Linda Newman</td>
<td>University Housing Director, Student Residences</td>
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<td>Veretta Nix</td>
<td>Human Resource Director, UMHS Human Resources</td>
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<td>Teresa Oesterle</td>
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<td>Perry Spencer</td>
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