

# District of Columbia Water and Sewer Authority **Board of Directors**

Audit and Risk Committee July 24, 2025 / 11:00am

**Microsoft Teams meeting** 

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1.	Call to Order	Christopher Herrington, Chairperson
2.	Roll Call	Michelle Rhodd, Board Secretary
3.	Enterprise Risk Management Briefing	Janai Pinkney, Manager EPMO
4.	Internal Audit Update  A. FY 2025 Internal Audit Plan Status Update  B. Status Update on Prior Audit Findings  C. Hotline Update	Cherry Bekaert, Internal Audit
5.	Adjournment	Christopher Herrington

This meeting is governed by the Open Meetings Act. Please address any questions or complaints arising under this meeting to the Office of Open Government at <a href="mailto:opengovoffice@dc.gov">opengovoffice@dc.gov</a>.

1The DC Water Board of Directors may go into executive session at this meeting pursuant to the District of Columbia Open Meetings Act of 2010, if such action is approved by a majority vote of the Board members who constitute a quorum to discuss certain matters, including but not limited to: matters prohibited from public disclosure pursuant to a court order or law under D.C. Official Code § 2-575(b)(1); terms for negotiating a contract, including an employment contract, under D.C. Official Code § 2-575(b)(2); obtain legal advice and preserve attorney-client privilege or settlement terms under D.C. Official Code § 2-575(b)(4)(A); collective bargaining negotiations under D.C. Official Code § 2-575(b)(5); facility security matters under D.C. Official Code § 2-575(b)(8); disciplinary matters under D.C. Official Code § 2-575(b)(9); personnel matters under D.C. Official Code § 2-575(b)(10); third-party proprietary matters under D.C. Official Code § 2-575(b)(11); train and develop Board members and staff under D.C. Official Codes § 2-575(b)(12); adjudication action under D.C. Official Code § 2-575(b)(13); civil or criminal matters or violations of laws or regulations where disclosure to the public may harm the investigation under D.C. Official Code § 2-575(b)(14); and other matters provided under the Act.



# Enterprise Risk Management

July 24, 2025

# dcd Today's Agenda



Timeline of Bottoms-Up Approach



**Road Shows** 



**ERM Refresher Trainings** 



Enterprise Risk Assessment (ERA) Overview

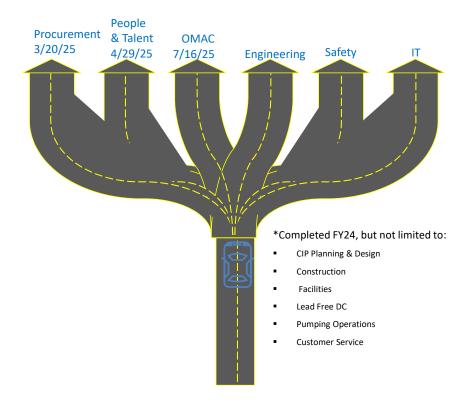
## Proposed Timeline for Bottoms-Up Approach

This approach refers to starting risk management activities at the functional, operational and/or department level. Advancing this method of Risk Management will support the Authority in gaining a more detailed and nuanced understanding of the specific/functional risks, allowing for targeted and effective risk management strategies



## dc

## **Bottoms Up Approach Roadshows**



### Value of Roadshows

- ☐ Deeper understanding of departmental risks and ability to identify and evaluate risks in your area of responsibility.
- ☐ More effective risk-informed decisions
- ☐ Continued efforts to drive a riskaware culture
- □ Reduces silos by fostering collaboration between departments.
- ☐ Creates opportunities for employees to ask questions, share concerns, and feel heard.



## **ERM Refresher Trainings**



## **Compliance Suite Training- ERM101**

- All non-union DC Water Employees must complete.
- Training is currently rolled out for the fiscal year and is expected to be completed from all employees by <u>August 29</u>, 2025.
- The purpose of this training is to promote better, faster, riskinformed decisions and support a risk-aware culture across the Authority.



## **ERM 201/ERM202**

### **ERM 201**

 Focus on Steps 1) Identify & Assess and 2) Prioritize of the Risk Management process.

### **ERM 202**

- Focus on Steps 3) Treat and 4)
   Monitor & Report, leveraging the same case study we discussed in the first training session.
- Understand the differences between departmental risks and enterprise risks.



## **Board Training**

- The training will reinforce the Board's role in overseeing the organization's risk management framework and processes.
- An overview of the training content and objectives will be provided in advance to the Board Chair for review and input.

## C Enterprise Risk Assessment (ERA) Overview

DC Water will conduct an annual enterprise risk assessment to identify and prioritize the top risks facing the organization.



### 1. Risk Identification Interviews

Surveys/Interviews will be conducted in August/September at the Director & VP levels across clusters to gain an understanding of existing risk management practices and enterprise risks.



### 2. Leadership Risk Identification Interviews

Leveraging the results of management discussions, interviews will be conducted with DC Water Senior Executive Team (SET) and select Board Members to further understand potential risks and identify those that require additional management attention and resources.



## 3. Develop List of Potential Top Enterprise Risks

The interview results will be synthesized and shaped into a preliminary set of potential top enterprise risks. These risks will be documented and shared as a pre-read for the Risk Prioritization Workshop.



### 4. Risk Prioritization Workshop

A risk prioritization workshop will be conducted, with a group of DC Water leadership to discuss, align, and prioritize DC Water's top enterprise risks.



5. Enterprise Risk Assessment Results and Executive Summary



## FY 2025 Internal Audit Plan

Audit and Risk Committee Report July 24, 2025



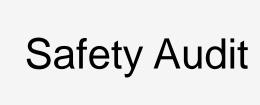
## Internal Audit Plan FY 2025 Timeline & Status

	Oct - 24	Nov - 24	Dec - 24	Jan - 25	Feb - 25	Mar - 25	Apr –25	May-25	Jun -25	Jul –25	Aug -25	Sept – 25	Oct -25	Status
•Work Order Management Audit - Facilities												,		Completed
•Al Policy Governance Assessment														Completed
•Safety Audit									<b>—</b>					Completed
•Strategic Plan Monitoring Audit														In - Process
•SCADA Penetration Testing (in-person)						)								In - Process
•Data Governance and Reporting Assessment														Moved FY2026
•Budget Monitoring Audit										Σ				Not Started
Contract Compliance Audit														In - Process
•Third-party Vendor Management Audit														In - Process
•Cloud Security Audit											<b>)</b>			Not Started
•FY 2026 Risk Assessment														Not Started
•Ongoing Follow-up Procedures	)													Ongoing
•Ongoing Hotline Monitoring	)				55 s							y.		Ongoing

## **Safety Audit**

Based upon the DC Water FY2025 Risk Assessment results, we conducted an audit to evaluate the adequacy of safety policies and procedures, training, data governance, and general safety controls Authority-wide. The data examined ranged from January 1, 2020, through April 21, 2025. The audit scope included the following objectives:

- Review the most recent version of safety policies and procedures to determine whether the design and implementation of safety controls will effectively and efficiently provide reasonable assurance that DC Water's liability is mitigated.
- 2. Ensure all applicable employees have completed required training to be educated and compliant with policies, procedures, applicable laws and regulations.
- 3. Assess DC Water practices related to managing safety data, to ensure that data is accurate, accessible, secure and used effectively to inform safety decisions, by assessing processes for data collection, storage, access controls, and quality assurance.
- Evaluate the effectiveness and compliance of the current workplace risk and hazard identification and mitigation processes against established safety standards and regulations.
- 5. Evaluate how DC Water supports job satisfaction and productivity by ensuring employees are provided with a safe work environment.



Audit results are included in the table. However, only details related to high-risk findings are presented in this report.

Findings (Total:8)	Risk Rating							
<b>Audit Themes</b>	HIGH	MEDIUM	LOW					
Governance and Oversight	1	1	0					
Policies and Procedures	0	1	0					
Training and Awareness	2	0	0					
Risk Management	1	1	0					
Employee Engagement	0	1	0					
Totals	4	4	0					

**Objective 2:** Ensure all applicable employees have completed required training to be educated and compliant with policies, procedures, applicable laws and regulations.

Finding 2 Rating (High): We reviewed the training records of 118 employees across 63 departments, and none were currently compliant with their required training. Based on procedures performed during the audit, including a virtual walkthrough on 2/27/25 with Management, the trainings are being conducted and monitored for compliance. Although, based on the absence of training records we were unable to confirm the training was completed. This poses several risks, including potential non-compliance with regulatory requirements, financial penalties and potential unsafe environments due to employees lacking required knowledge to perform job duties.

Repeat Finding: This was a finding from the FY19 DOSH Internal Audit Report, still not remediated.

Recommendation: Safety should be made a priority by leadership and monitoring of the completion of safety trainings would be a supportive behavior that the leadership team should adopt. We recommend the department develop a timeline with People and Talent to provide the necessary documents to move all eligible safety training courses to Oracle LMS and have People and Talent upload them to Oracle. Required trainings for all DCW employees to be uploaded to Oracle for each position. Recommended trainings should also be added to allow employees to obtain extra safety awareness in the workplace. We recommend historical records be imported into Oracle and stored for easy access to determine individual safety compliance.

Management Action Plan: Management acknowledges the finding, and the department is developing a timeline with People and Talent to move all eligible safety trainings courses to Oracle LMS. Required safety trainings for all DC Water employees will be uploaded to Oracle and categorized by position. Additionally, Safety will maintain historical records in Oracle to improve accessibility and better track each individual employee's safety compliance.

**Objective 2:** Ensure all applicable employees have completed required training to be educated and compliant with policies, procedures, applicable laws and regulations.

Finding 3 Rating (High): The Training Matrix is a key document developed to define employee training requirements by specific position/job title to track compliance completion. The matrix has not been updated since September 2024. Required safety trainings are not accurate for all positions on the matrix, especially newer positions.

### Recommendation:

- We recommended the matrix is thoroughly updated based on the current positions at DC Water before uploading to Oracle.
- The matrix should also be updated whenever a new position is added, removed, or amended. The matrix should be reviewed at least monthly to confirm any updates and audit the matrix annually to Oracle to ensure the requirements are being met.
- We recommend a control/process owner be identified to be responsible for keeping the matrix up-to-date and performing the reviews.

### **Management Action Plan:**

Management acknowledges the finding and will identify a process improvement that includes the following:

- The matrix will be regularly updated and maintained based on the current positions at DC Water before uploading to Oracle.
- The matrix will be updated whenever a new position is added, removed, or amended. The matrix will be reviewed at least monthly to confirm any updates and audit the matrix annually to Oracle to ensure the requirements are being met.
- Safety will identify a process owner to be responsible for keeping the matrix up-to-date and performing the reviews.

**Objective 3:** Assess DC Water practices related to managing safety data, to ensure that data is accurate, accessible, secure and used effectively to inform safety decisions, by assessing processes for data collection, storage, access controls, and quality assurance.

Finding 5 Rating (High): 185 DC Water Employees were granted access and have an active user account but have not had a business need to use the system in 6 months to 5 years. In addition, 58 users were granted access to the system but never logged in or accessed the system at all. 58 Terminated employees still have access.

There are an excessive number of active third-party vendor accounts assigned to origami staff that do not have a current business need to access to DC Water's SRS to use the system as indicated by not logging in to the system within 6 month to 10 years. In addition, 12 accounts were created but have never logged in to the system.

We sent two inquires to management to determine if there is a user access monitoring process in place. Management did not respond to either inquiry. Based on the available data there is no evidence to support a user access monitoring process.

**Recommendation:** We recommend a user access policy be created which outlines when the system will be audited, who will perform the audit, who is responsible for updates to user access, how changes in employee status will be sent to this person, and who will approve changes to access.

**Management Action Plan:** Safety acknowledges this finding and will work with DC Water's IT department to integrate Origami's user access management process into DC Water's corporate user access management process.

**Objective 4:** Evaluate the effectiveness and compliance of the current workplace risk and hazard identification and mitigation processes against established safety standards and regulations.

Finding 6 Rating (High): Corrective actions are not monitored to verify their timely resolution. 699 out of 943 corrective actions are missing a completion. There is no process in place to ensure observations are entered into SRS. 426 out of 943 correction actions are missing an assigned user to ensure the issue is corrected. Corrective action serves as the principal mechanism by which the Authority addresses existing safety risks. Its objective is to establish measures that will prevent the recurrence of identified risks or avert future accidents. Effective communication of necessary corrective actions, coupled with thorough follow-up safety inspections to verify their implementation, are crucial. Failure to do so may result in unmitigated risks and potential accidents. Severe safety incidents can lead to reputational, political, and financial repercussions. Therefore, the consistent execution of corrective actions is essential to mitigate the likelihood of such accidents.

Repeat Finding: This was a finding from the FY19 DOSH Internal Audit Report, still not remediated.

**Recommendation:** We recommend establishing a protocol for the corrective actions to be reviewed and closed out on a periodic basis. Tasks should be assigned to department staff and tracked to ensure completion. A KPI should be developed and monitored on a monthly basis to track this metric.

Management Action Plan: Safety acknowledges this finding and is working to develop a process for the corrective actions to be reviewed and closed out on a periodic basis. Tasks will be assigned to department staff and tracked to ensure completion. A KPI will be developed and monitored monthly to track this metric.

## **C** FY 2025 Internal Audit Plan - Fieldwork (In Process)

Strategic Plan Monitoring

External IP Block SCADA Environment Penetration Testing Audit Internal Production SCADA Environment Penetration Testing Management Assessment

# GC FY 2025 Internal Audit Plan – Information Gathering (In Process)

Third-Party
Vendor
Management
Audit

Contract Compliance Audit Budget Monitoring Audit



## PRIOR AUDIT FINDINGS- FOLLOW UP STATUS

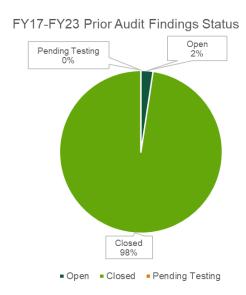
# dc Quarterly Progress Highlights

- We have now transitioned from tracking quarters to the number of months from audit finding issuance to closure to show management's efforts to achieve timelier audit finding closures.
- 4 total prior audit findings were closed including the following:
  - One FY19 Safety Audit Finding was validated and closed as of 4/21.
  - All remaining FY24 Audit Findings have been validated and closed as of 6/3/25.
    - Final average time from issue to closure for FY24 was 8.60 months.
- As of 7/15, all audit closing meetings have been completed for closed audits in FY24 and previous years.
- Open and pending validation findings were updated based on responses received from the responsible parties, specifics are detailed on their respective slides.



# C Status Update on FY17-FY23 Prior Audit Findings

	Report Issue	Corrective Actions							
Audit Report/Subject	Date	Total	Open	Closed	Pending Testing				
Prior to FY 2023 Audit Findings									
Entity Level Review	10/26/2017	7	1	6	0				
Payroll & Timekeeping Audit	7/23/2023	7	1	6	0				
Work Order Management Audit-DWO	7/23/2023	3	1	2	0				
Fleet Management Audit	10/27/2023	6	2	4	0				
Total C	187	0	187	0					
	Total	210	5	205	0				



- Entity Level Review: Finding was reopened on 2/20\*. 3 out of 9 are completed as of 5/29. Labor relations continues to encounter resistance from Local 631, Local 872, and Nage as these three unions demand bargaining, but the proposed changes do not materially impact working conditions and DCW does not intend to bargain with the Unions. Labor Relations is hoping to complete dialogue with the Unions and be resolved by Friday, July 18, 2025. Conservative completion date of year end of 9/30/2025.
- Payroll & Timekeeping Audit: Completion date extended to 9/30/25. Finding was reopened on 2/20 as the Management Action Plan has not been fully implemented. Note: As of 6/26, the finding action plan is on track to be completed by 9/30.
- Work Order Management Audit-DWO: Management Action Plan will not be fully implemented until 2028.
- Fleet Management Audit (1): Open finding regarding policies and procedures has an extended, estimated completion date of 9/30/2025. Note: As of 6/26, the finding action plan is on track to be completed by 9/30.
- Fleet Management Audit (2): Open finding regarding the manual tracking of employee credentials estimated completion date was extended again to 10/31/2025.

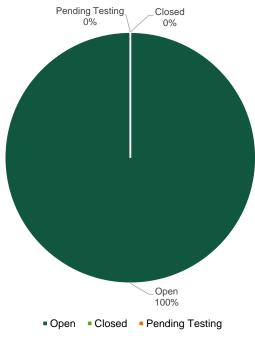
<sup>\*</sup> The remediation of the management action plans are not complete and pending testing, as the policies are not fully approved. To be consistent with other findings these findings were reopened. \*Data before FY2023 was provided by RSM

# dc Status Update on FY25 Audit Findings

	Draft Report	Corrective Actions							
Audit Report/Subject	Issue Date	Total	Open	Closed	Pending Testing				
FY 2025 Audit Findings									
Work Order Management-Facilities Audit	4/11/2025	13	13	0	0				
Safety Audit	6/18/2025	8	8						
	Total	21	21	0	0				

- Work Order Management Facilities Audit: As of 7/7/25, management action plans and completion dates have been
- Safety Audit: As of 7/15, management action plans and completion dates have been developed.

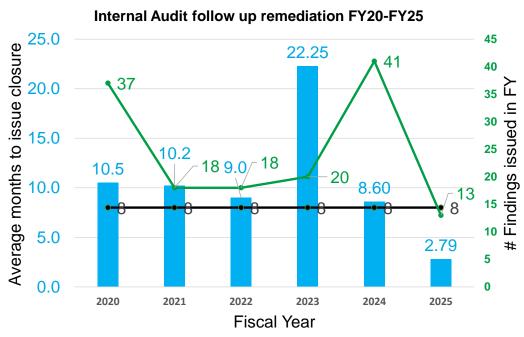
## FY25 Prior Audit Findings Status





## Time to closure by fiscal year

The below graph illustrates the average number of months from audit finding issuance to audit finding closure yearover year as of July 2025. Management has made significant improvements to achieve timelier audit finding closure as illustrated by the decline from FY23 to FY24. Management's target time to closure is 8 months.





# **Allegations Update**



## **Allegations Update**

Below is a summary of the cases received in FY25 as of July 16, 2025. There are four open cases.

FY 25 Allegation	n Summar	У				FY 25 Closed A					
FY 25 Allegation	ns Receive	ed			9	Fraud, Waste, a	 ):				
FY 25 Cases C	losed				5	Theft of Time		0			
FY 25 Allegation					4			4			
FY 25 Open Al	legation Br	eakdown				Theft or Misuse		<u> </u>			1
Three cases ar	e heina inv	estinated.				Non-Fraud, Waste, and Abuse Related Allegations:					
Three cases are being investigated.  One of the above cases was logged as two calls.						Policy Issues					0
						Employee Relations					2
Allegation Sou	rce					Sexual Harassı		1			
Hotline					8			1			
Management A	lert				1	Substance Abu		0			
Employee Ema	ıil				0	Wage/Hour Iss		0			
Personal Conv	ersation				0	Workplace Viol		1			
Total Allegations by Fiscal Year:						FY25 Alleg					
Year	FY 20	FY 21	FY 22	FY 23	FY 24	Year	Q1	Q2	Q3	Q4	Total
# of Cases	10	7	18	15	25	# of Cases	4	4	1	0	9
Action Taken	0	0	2	2	1	Action Taken	1	2	0	0	3

Calls that do not pertain to fraud, waste, or abuse are automatically referred to the appropriate department head and closed by Internal Audit. These calls will never result in corrective action by Internal Audit.



# **Appendix**

# dc Illustrative 5 Year Audit Plan

Year 1	Year 2	Year 3	Year 4	Year 5	Frequency	Legend: Business Cycle Process Audit
Administration	A CONTRACTOR OF THE PARTY OF TH		the same the same	-		IT Cycle Audit
Administration	Physical Security- Blue Plains		Physical Security-Location TBD	T	Every 2 years (rotating locations)	Business Process Ad Hoc Audit
	Physical Security- Bryant Street		Physical Security-Location TBD		Every 2 years (rotating locations)	IT Ad Hoc Audit
Work Order Management-Facilities					Every 1 year (rotating depts-other depts in Engineering & Ops)	Ongoing IA Activity
	Billing and Collections			Billing and Collections	Every 3 years	
Strategic Plan Monitoring					Every 3 years	
Safety		Business Continuity Assessment (DEM)	ESG Management Assessment	Fleet Management Audit	Ad Hoc	
			Customer Complaints Assessment		Ad Hoc	
Finance, Procurement & Compliance	-			-	The second secon	
	Payroll & Timekeeping			Payroll & Timekeeping	Every 3 years	
	Accounts Payable	English Charles		Accounts Payable	Every 3 years	
water to be a strong and the	B	Purchasing Card			Every 3 years Every 1 year	
Contract Compliance	Contract Compliance	Contract Compliance	Contract Compliance	Contract Compliance	Every 2 years (FY25 scope to evaluate broader vendor risk based	-
					on risk assessment themes)	
Third-Party Vendor Risk Management		Procurement		Procurement		
Budget Monitoring	Materials Management	Market and the second s	Grant Administration	Annual Budget Process Audit	Ad Hoc	
People & Talent						
		Training and Recruiting			Every 3 years	
				Succession Planning	Ad Hoc	
		4				
Information Technology				*	and the same of th	
	Applications Inventory and Mapping Assessment	IT Contract Management & Service Provider Assessment	Oracle ITGC and SOD Audit	Data Governance and Strategy	Ad Hoc	
Al Policy Governance Assessment		Records Management Audit			Ad Hoc	
Cloud Security Audit	PROFITE TO THE PROFITE	222243000000000000000000000000000000000	- 12 Company (1992) - 12 C	Commence of the Commence of th	Ad Hoc	
SCADA Penetration Testing	Internal and External Network Pen Testing	PCS Penetration Testing	Internal and External Network Pen Testing	External Wi-Fi Penetration Testing	Every 2 years (In/Ext pen testing in off years, rotating systems)	
Operations & Engineering						
	Work Order Management- DMS	Work Order Management- DSO	Work Order Management-DWO	Work Order Management- DPSO	Every 2 year (rotating departments)	
			Construction Design and Asset Management		Ad Hoo	
	J		Business Development Plan Subcontractor Assessment		Ad Hoc	
Government & Legal Affairs		The state of the s			Access to	
	Compliance Monitoring Assessment	Legal Operations Case Management Audit			Ad Hoc	
Ongoing Internal Audit Activity	white the same of					
Remediation of Open Findings	Remediation of Open Findings	Remediation of Open Findings	Remediation of Open Findings	Remediation of Open Findings	Ongoing.	
Hotline Monitoring	Hotline Monitoring	Hotline Monitoring	Hotline Monitoring	Hotline Monitoring	Ongoing	
Risk Assessment	Risk Assessment	Risk Assessment	Risk Assessment	Risk Assessment	Every 1 year	



# **C** Prior Audits Performed by RSM

### FY 2015

Intellectual Property SCADA/PCS Review

Procurement Pre-Award Selection Process Retail Rates Pre-Implementation Monitoring

Engineering - Vendor/Contractor Monitoring & Project Administration-Phase 1

Timekeeping

IT Vendor Risk Management/Compliance and Monitoring Information Security Policy Review

Network Penetration Testing (Corp/SCADA/Wi-Fi)

### FY 2016

Blue Horizons - Strategic Monitoring Contract Monitoring & Compliance Review Business Development Plan Customer Billing & Collections

Retail Rates Post-Implementation Monitoring Training, Certification and Licensing Engineering - Construction Management Phase 2

Overtime

Annual Budgeting & Planning Rolling Owner Controlled Insurance Program (ROCIP) IT Incident Management & Response Review Enterprise Project Governance Maturity Assessment

### FY 2017

Contract Monitoring & Compliance Review Entity-Level Assessment Work Order Management (Maintenance Services) Materials Management 0 Operations and Inventory

Purchasing Cards (Pcard Program)

Automated Meter Reading (AMR) Implementation MTU Implementation Review Fleet - Accident and Incident Reporting

Engineering - Construction Management Phase 3 Intermunicipal Agreement IT Human Resource/Employee Data Privacy Review Vulnerability Management Review and Platform Technical Audit (Windows/UNIX)

### FY 2018

Accounts Payable

Recruiting, Selection, and On-Boarding Automated Meter Replacement (AMR) Implementation Progress Update Office of Emergency Management Review DB/OS Privileged User

**Network Penetration Testing** Affordability Programs Contract Monitoring & Compliance Review Crisis Management/Business Continuity Integrated Work Order Management (DWS, DSS, DDCS) CIS Post-Implementation Review Payroll & Timekeeping

### FY 2019

Permit Operations - Reimbursable Projects Mail Room Procedures Fleet Management Legal Operations

Occupational Safety and Health Automated Meter Reading Implementation Progress Update Cloud Security Rapid Assessment Active Directory Cloud Migration Security Review

Purchasing Card Internal Audit Severance Assessment Wi-Fi Security Testing CIS Application Security Segregation of Duties (SOD) Review Contractual Services Asset Management Assessment Physical Security and Social Engineering

### FY 2020

Work Order Planning Assessment

Phase 2: Physical Security Penetration Testing Facilities Management Audit Benefits and Compensation Audit Engineering Change Order Assessment Industrial Control System (ICS) Review Customer Billing and Collections Audit Oracle Embedded Risk Assurance Phase 1



# Prior Audits Performed by RSM (Continued)

### FY 2021

Department of Maintenance Services (DMS) Work Order Management Remote Workforce Assessment Succession Planning Procurement PreAward Selection

Contract Compliance

Materials Management PCS Review

### FY 2022

Contract Compliance Accounts Payable

Expenditure Analytics Assessment Work Order Management - DSO Supply Chain Assessment Employee Retention Assessment

Strategic Plan Monitoring Physical Security Audits Incident Response Tabletop

CTI Program Development

### FY 2023

Fleet Management Business Continuity Assessment (OEM) Payroll & Timekeeping Work Order Management - DWO

Contract Compliance - CIP Scope

Procurement - CIP Scope Metering, Billing, and Collections Oracle ITGC Assessment (CM & CO) Oracle Identity & Access Management Review Penetration Testing-Wi-Fi

### FY 2024

Physical Security - Fleet Facility Physical Security - HQO Purchasing Card

Contract Compliance Training and Recruiting Genesys ITGC Review Penetration Testing - Internal and External Network Penetration Testing - Mobile Applications Work Order Management - DPSO Permit Operations

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