

# **The University of Texas**

## **Permian Basin**

### **ANNUAL INTERNAL AUDIT REPORT**

**For the Fiscal Year Ended  
August 31, 2019**



**Office of Internal Audit  
4901 E. University  
Odessa, Texas 79762**

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**I. Compliance with House Bill 16 (Texas Government Code, Section 2102.015): Posting the Internal Audit Plan, Internal Audit Annual Report, and Other Audit Information on Internet Website**

In accordance with the provisions of House Bill 16, UT Permian Basin will post on its website the approved Annual Internal Audit Report for fiscal year 2019 and the approved Audit Plan for fiscal year 2019. The website address is <https://www.utpb.edu/services/presidents-office/internal-audit>.

Additional required information will be posted to this website, such as: a detailed summary of the weaknesses, deficiencies, wrongdoings, or other concerns, if any, raised by the audit plan or annual report; and a summary of the action taken by the agency to address concerns, if any, that are raised by the audit plan or annual report.

**II. Internal Audit Plan for Fiscal Year 2019**

Senate Bill 20 (84<sup>th</sup> Legislative Session) made several modifications and additions to Texas Government Code (TGC) and Texas Education Code (TEC) related to purchasing and contracting. Effective September 1, 2015, TEC §51.9337 requires that, “*The chief auditor of an institution of higher education shall annually assess whether the institution has adopted the rules and policies required by this section and shall submit a report of findings to the state auditor.*”

The UT Permian Basin Office of Internal Audit conducted this required assessment for fiscal year 2019, which also fulfills the requirement of TGC §2102.005(b), and found the following:

“Based on review of current institutional policy and the UT System Board of Regents’ *Rules and Regulations*, UT Permian Basin has generally adopted, with no exceptions noted, all of the rules and policies required by TEC §51.9337. Review and revision of institutional and System policy is an ongoing process. These rules and policies will continue to be assessed annually to ensure continued compliance with TEC 51.9337.”

A compliance audit of Benefits Proportionality Funding was completed on August 31, 2018 which covered the fiscal years 2015 – 2017. This audit noted that UT Permian Basin undercharged State appropriations by a cumulative amount of \$127,011.12 over the three year period. No other significant issues were noted. This audit was required by Rider 8 of the General Appropriations Act (85<sup>th</sup> Legislature).

FY 2019 Audit Plan	Current Status	Report/Memo Date
<b>Risk Based Audits</b>		
User Access Roles and Permissions in PeopleSoft (Confidential)	Completed	8/13/2019
System Access – Inactive/Terminated Employees (Confidential)	Completed	7/25/2019
Athletics Eligibility	Moved to FY 20	
College of Nursing	Completed	2/18/2019
Research Post-Award Procedures and Controls	Moved to FY 20	

**The University of Texas Permian Basin**  
**Annual Internal Audit Report - FY 2019**



UTS 142.1 – Segregation of Duties and Accts Rec. Monitoring Plan – FY 2017	Completed	1/23/2019
UTS 142.1 – Segregation of Duties and Accts Rec. Monitoring Plan – FY 2018	Completed	6/5/2019
Student Housing	In Progress	
<b>Required Audits (External and Internal)</b>		
Annual Financial Report - FY 2018	Completed	N/A
Annual Financial Report - FY 2019 (interim procedures)	In Progress	
Presidential Travel and Entertainment Expense (UT System)	Completed	1/30/2019
Student Financial Aid Cluster – FY 2019 (interim procedures)	In Progress	
NCAA Agreed Upon Procedures (UT System)	Completed	2/12/2019
TEC 51.9337 - Procurement Compliance Assessment	Completed	8/21/2019
<b>Consulting</b>		
As needed projects		
Administrative Council Meetings	Ongoing	
UT Share - PeopleSoft	Ongoing	
Training provided by Internal Audit	Ongoing	
Compliance/Risk meetings	Ongoing	
Teacher Quality Grant 2016 - 2018	Complete	5/10/2019
Cybersecurity	Ongoing	
Internal control reviews	Cancelled	
<b>Investigations</b>		
Investigations, complaints, hotline tips - General		
18-05	Completed	8/15/2019
19-01	Completed	N/A
19-02	In Progress	
19-03	Completed	N/A
19-04	In Progress	
19-05	Completed	8/7/2019
19-06	In Progress	
<b>Follow Up</b>		
General follow-Up		
John Ben Shepperd Public Leadership Institute	In Progress	
Effort Reporting and Certification	Completed	6/11/2019
Small Business Development Center	In Progress	
<b>Development - Operations</b>		
Annual Risk Assessment and Audit Plan	Complete	6/25/2019
Annual Internal Audit Report - FY 2018	Complete	10/26/2018
Internal Quality Assessment Review Activities	In Progress	
Internal Audit Committee	Ongoing	

TeamMate, IDEA, IT issues, website development/maintenance	Ongoing	
Performance Metrics - UT System	Ongoing	
Other Required Work - UT System	Ongoing	
Outside Audit Coordination/Tracking	Ongoing	
UT System - Council Meetings	Ongoing	
<b>Development - Initiatives &amp; Education</b>		
Professional Organizations	Ongoing	
Continuing Professional Education	Ongoing	
Other Training	Ongoing	

Two audits, Athletics Eligibility and Research Post-Award Procedures and Controls, were not started during the year and were postponed until FY 2020. These were part of the 2020 Audit Plan approved by the UTPB Audit Committee in June 2019.

### III. Consulting Services and Non-Audit Services

Project Name	Report Date	Overall Objective	Observations/Results/Recommendations
Teacher Quality Grant 2016 - 2018	5/10/2019	Review for compliance with grantor requirements	Exceptions of \$82,883 found and returned to the grantor agency (Texas Higher Education Coordinating Board)

### IV. External Quality Assurance Review

An external quality assurance review was completed in FY 2018. The executive summary is included with this report in the Attachments.

### V. Internal Audit Plan for Fiscal Year 2020

The approved Fiscal Year 2020 audit plan is presented as required by the State Auditor's Office guidelines: 1) The requirements of TEC §51.9337 and TGC §2102.005(b) will be fulfilled by the Procurement Compliance assessment; 2) A compliance audit of Benefits Proportionality Funding for fiscal years 2018 - 2019; 3) A list of risks ranked as high that were identified, but have not been included in the Fiscal Year 2020 Audit Plan, is included after the Plan; and 4) A brief description of the risk assessment methodology used to develop the Plan, including consideration of risks applicable to information technology, is included as well.

FY 2020 Audit Plan	Budget
<b>Assurance (Audit) Engagements</b>	
Student Financial Accounting Process	350
Workflow Process and Controls	240

Revenue Reporting – Third Party Applications	300
Research Post-Award Procedures and Controls	240
Roles and Permissions – Third Party Applications	240
Athletics Eligibility	350
<b>Risk Based Audits Subtotal</b>	<b>1720</b>
<b>Required Engagements (External and Internal)</b>	
Benefits Proportionality by Fund	300
Executive Travel and Entertainment	120
Annual Financial Report - FY 2019	10
Annual Financial Report - FY 2020 (interim procedures)	5
Presidential Travel and Entertainment Expense (UT System)	5
Student Financial Aid	5
AFR Financial Review – 2019	10
TEC 51.9337 – Procurement Compliance Assessment	20
<b>Required Audits (External and Internal) Subtotal</b>	<b>475</b>
<b>Advisory and Consulting Engagements</b>	
Reserve for consulting engagements	300
TAC 202 – Incident Response	80
Meetings with Management	40
Training provided by Internal Audit	20
Compliance Meetings/Coordination	40
<b>Consulting Subtotal</b>	<b>480</b>
<b>Investigations</b>	
As needed	340
<b>Investigations Subtotal</b>	<b>340</b>
<b>Follow Up</b>	
General follow-up	100
<b>Follow Up Subtotal</b>	<b>100</b>
<b>Reserve</b>	
Special requested or unanticipated audits/projects	340
<b>Reserve Subtotal</b>	<b>340</b>
<b>Development - Operations</b>	
Annual Risk Assessment and Audit Plan	160
Annual Internal Audit Report	30
Quality Assurance Review Activities	160
Internal Audit Committee	360
TeamMate, IDEA, IT issues, website development/maintenance	120
Performance Metrics - UT System	20

Other Required Work - UT System	60
Outside Audit Coordination/Tracking	40
UT System - Council Meetings	60
<b>Development - Operations Subtotal</b>	<b>1010</b>
<b>Development - Initiatives &amp; Education</b>	
Professional Organizations	20
Required Continuing Professional Education (CPE)	160
Other Training	40
<b>Development - Initiatives &amp; Education Subtotal</b>	<b>220</b>
<b>Total Hours</b>	<b>4685</b>

**V. (continued) Identified High Risks Not Covered in FY 2020 Audit Plan**

Area	Detailed Risk Description	Risk Score	Risk Mitigation Notes
Enrollment Management	Unable to significantly increase the number of students and graduates over the next several years in order to serve the educational needs of the regional workforce within the Permian Basin	Critical	Existing processes and procedures in enrollment management are being evaluated/implemented in order to maximize student enrollment growth.
Human Resources	Unable to attract and retain faculty and staff due to compensation levels not being commensurate with local job market and cost of living factors	Critical	Compensation study is in progress.
Enrollment Management	Unable to invest in new technology/systems and unable to attract and maintain experienced staff in Admissions and Financial Aid	Critical	Additional funding is being sought to address institutional needs.
Campus-wide	Over-reliance on manual business processes	Critical	Existing business processes are being evaluated. New business processes being implemented.
Facilities Management	Because of insufficient resources, unsafe facilities; equipment breakdown due to lack of maintenance/age; repairs not performed on a regular basis	Critical	Additional significant funding resources being sought to address deferred maintenance issues.
Facilities Management	Risk of injury to students, employees and visitors due to existing hazardous entrance to Midland campus from FM 1788 - which will become more hazardous once the new travel center opens	Critical	Management is working with City of Midland, TexDOT, and UT System with plans to minimize or eliminate hazards.

UTPB Police	Inability to lock down buildings remotely and monitor potential threats or criminal activity in case of an emergency, and to monitor building access due to lack of electronic card entry into all buildings	<b>Critical</b>	Ongoing program of outfitting major campus buildings with electronic access control and monitoring systems expected to begin in FY 20.
Academic Affairs	Loss of accreditation or sanctions could impact enrollment and ability to attract new students; and also affect ability to secure new grants and other external funds	<b>Critical</b>	Currently undergoing 10 year re-accreditation process by SACSOC.
Enrollment Management	Lack of automated processes for admissions and financial aid that result in delayed and/or inaccurate results	<b>Critical</b>	Existing processes and procedures in enrollment management are being implemented in order to maximize student enrollment growth.
Compliance	Established policies and procedures with regard to Title IX are disregarded and incidents are not reported	<b>Critical</b>	Continue with online and face-to-face training/Policies are updated continuously/Monthly Title IX meetings are held with key stakeholders.
Compliance	Established policies and procedures are disregarded and policies not updated as necessary	<b>Critical</b>	Continue with online and face-to-face training/Policies are updated continuously.
Information Resources	Data loss may occur when critical information is stored on non-sanctioned devices or services	<b>Critical</b>	Oversight by management. Monitoring progress.
Information Resources	Lack of ongoing training and employee awareness may lead to compromise of end-user credentials or unauthorized access of critical data	<b>Critical</b>	Oversight by management. Monitoring progress.
Information Resources	Critical business processes or functions processed using end user applications	<b>Critical</b>	Oversight by management. Monitoring progress.
Information Resources	Inactive or terminated workers retain access to IT systems up to six months after separation	<b>Critical</b>	Audit performed in FY 2019.
Information Resources	Redundant or secondary network circuit to internet not available	<b>Critical</b>	Oversight by management. Monitoring progress.
Information Resources	Lack of current DRP/BCP for critical assets	<b>Critical</b>	Oversight by management. Monitoring progress.



Information Resources	Lack of governance over implementation of system and business initiatives	Critical	Oversight by management. Monitoring progress.
Information Resources	Lack of internal network vulnerability management process	Critical	Oversight by management. Monitoring progress.
Enrollment Management	Notices of scholarship awards and financial aid packages are not transmitted in a timely manner	High	Implementing new processes to accelerate financial aid award notices.
Enrollment Management	Student applications and acceptance letters are not processed in a timely manner	High	Implementing new processes to accelerate the processing of applications and notices of acceptance.
Student Services	Facilities and/or procedures do not promote a safe living environment in Student Housing and elsewhere on campus	High	Oversight by management. Monitoring progress.
Information Resources	IT not adequately staffed to cover critical IT operations or business functions	High	Oversight by management. Monitoring progress.
Information Resources	IT policies and procedures are not consistent with Federal, State, or System rules and regulations	High	Oversight by management. Monitoring progress.
Academic Affairs	Supervision and controls are ineffective and negatively impact effectiveness of ancillary activities	High	Oversight by management. Monitoring progress.
Athletics	NCAA rules are not adhered to regarding recruitment of student-athletes and involvement of boosters	High	Direct management oversight/monitoring. Provide additional education to student-athletes and boosters.
STEM Academy Charter School	Facilities and/or procedures are inadequate and do not promote student safety on a college campus	High	Oversight by management. Monitoring progress.
Athletics	Confidential student-athlete personal and medical information is not properly secured.	High	Oversight by management. Monitoring progress.
Research	Oversight procedures are ineffective to ensure compliance with requirements regarding human and animal research, and biosafety and biosecurity.	High	Oversight by management. Monitoring progress.

Undergraduate Success	Insufficient number of faculty qualified to teach developmental courses	High	Increased monitoring and oversight provided by new position of Director of Developmental Education
Student Services	A child leaving the Child Care Center unnoticed due to no alarm connected to the playground gates	High	Oversight by management. Monitoring progress.
Environmental Health and Safety	Non-compliance with State and Federal regulations regarding safety and compliance with State and Federal emergency management programs	High	Oversight by management. Monitoring progress.
Environmental Health and Safety	Due to changes in facilities and staffing, not having updated evacuation plans and procedures that could result in personal injury	High	Oversight by management. Monitoring progress.
UTPB Police	Lack of a secondary communications center to handle incoming emergency calls in case of an emergency evacuation of the Mesa Building	High	Backup communications center planned at Midland Campus in FY 20
Enrollment Management	Administration of financial aid and awards does not conform to Federal, state and other requirements	High	Assist external auditors in audit covering FY 2019. Audit findings from FY 14 audit have been cleared.
Enrollment Management	Confidential information is not properly secured due to over-reliance on paper files	High	Migrating to all electronic files over the next year
Information Security	Critical university data may not be properly classified	High	Oversight by management. Monitoring progress.
Communications	Lack of an effective and coordinated marketing/branding plan using print, radio and social media information to enhance the image of the University	High	New leadership in this office is implemented new branding initiatives.
Communications	Website information is not current and provides inconsistent message and inaccurate information	High	Website is undergoing comprehensive update with rollout scheduled for FY 20.

## **V. (continued) Risk Assessment Methodology**

The FY 2020 Audit Plan indicates planned internal audit activities that will be performed during the fiscal year. This Plan is prepared using a risk-based approach to ensure that areas and activities specific to UT Permian Basin are identified for consideration to be audited.

The goals for this risk assessment approach were to start at the top with an awareness of critical initiatives and objectives to ensure the risks assessed were the most relevant. An emphasis was placed on collaboration with other functions that assess, handle, or manage risk. Information Technology risks represent a broad, high-risk category in our risk assessment and includes specific information technology risks related to Title 1, Texas Administrative Code, Chapter 202. Information Security Standards (TAC 202). An audit of compliance with TAC 202 requirements was completed during the 2018 FY on March 26, 2018. In FY 2020, TAC 202 compliance will be addressed with the Incident Response Review, as budgeted in the Audit Plan.

The latest compliance audit of Benefits Proportionality Funding was completed on August 31, 2018, which covered the fiscal years 2015 – 2017. This audit was required by Rider 8 of the General Appropriations Act (85<sup>th</sup> Legislature). Annually, risks associated with benefits proportionality are weighed and assessed as part of the annual risk assessment process, which is ultimately approved by the UT Permian Basin Audit Committee. For FY 2020, an audit of Benefits Proportionality Funding for fiscal years 2018 and 2019 have been budgeted in the Audit Plan.

Our risk assessment approach is based on a top-down process that includes conversations with, and requests for input from executive management, deans, and department heads. Risk factors evaluated are probability of occurrence and impact to the achievement of the objective. An IT risk assessment was also prepared, of which the results were rolled into the overall UTPB risk assessment. This is a collaborative process that includes the direct assistance of Information Security and the Compliance Office.

The resulting Risk Assessment for 2020 was discussed with the Audit Committee at its June 2019 meeting, and was subsequently approved as part of the 2020 Audit Plan.

## **VI. External Audit Services Procured in Fiscal Year 2019**

UT Permian Basin contracted with the public accounting firm of Belt Harris Pechacek to perform the financial audit of the STEM charter school for the year ended August 31, 2019. While no other external audit services were procured by UT Permian Basin during Fiscal Year 2019, other engagements were performed by outside entities (contracted by UT System), and include the following for FY 2019:

- Deloitte Touche LLP, conducted audit procedures related to the FY 2018 Annual Systemwide Consolidated Financial Report, and interim procedures for the audit of the FY 2019 Systemwide Consolidated Annual Financial Report.
- Deloitte Touche LLP, performed a review of UTPB internal controls over financial reporting for the FY 2018, and interim procedures for a review of UTPB's annual financial report for the year ended August 31, 2019.

- Deloitte Touche LLP, performed interim procedures for an audit of UTPB's Federal Student Financial Aid program for the year ended August 31, 2019.

## VII. Reporting Suspected Fraud and Abuse

The following actions have been taken by the University of Texas Permian Basin to implement the following requirements:

**Fraud Reporting** - Section 7.09, General Appropriations Act (85<sup>th</sup> Legislature, Conference Committee Report), Article IX.

Sec 7.09 Fraud Reporting. A state agency or institution of higher education appropriated funds by this Act shall use appropriated funds to assist with the detection and reporting of fraud involving state funds as follows:

- (a) By providing information on the home page of the entity's website on how to report suspected fraud, waste, and abuse involving state resources directly to the State Auditor's Office. This shall include, at a minimum, the State Auditor's Office fraud hotline information and a link to the State Auditor's Office website for fraud reporting; and
- (b) By including in the agency or institution's policies information on how to report suspected fraud involving state funds to the State Auditor's Office.

*UT Permian Basin has a link for reporting fraud, waste, and abuse at the University's home page, [www.utpb.edu](http://www.utpb.edu), which provides a direct link to the State Auditor's fraud website and hotline.*

**Coordination of Investigations** - Texas Government Code, Section 321.022.

Sec. 321.022. Coordination of Investigations.

- (a) If the administrative head of a department or entity that is subject to audit by the state auditor has reasonable cause to believe that money received from the state by the department or entity may have been lost, misappropriated, or misused, or that other fraudulent or unlawful conduct has occurred in relation to the operation of the department or entity, the administrative head shall report the reason and basis for the belief to the state auditor. The state auditor may investigate the report or may monitor any investigation conducted by the department or entity.
- (b) The state auditor, in consultation with state agencies and institutions, shall prescribe the form, content, and timing of a report required by this section.
- (c) All records of a communication by or to the state auditor relating to a report to the state auditor under Subsection (a) are audit working papers of the state auditor.

*UT Permian Basin complies with this requirement, as applicable, in conjunction with the UT System Policy UTS118, Statement of Operating Policy Pertaining to Dishonest or Fraudulent Activities, located at <https://www.utsystem.edu/sites/policy-library/policies/uts-118-dishonest-or-fraudulent-activities>.*

September 20, 2017

Mr. Glenn Spencer, Chief Audit Executive  
The University of Texas of the Permian Basin

In September 2017, The University of Texas of the Permian Basin (UTPB) Office of Internal Audit (OIA) completed a self-assessment of internal audit activities in accordance with guidelines published by the Institute of Internal Auditors (IIA) for the performance of a quality assessment review (QAR). UTPB OIA engaged an independent review team consisting of three internal audit professionals with extensive higher education experience to perform an independent validation of OIA's QAR self-assessment. The primary objective of the validation was to verify the assertions made in the QAR report concerning OIA's conformity to the Institute of Internal Auditor's *International Standards for the Professional Practice of Internal Auditing* (the *IIA Standards*) and Code of Ethics, Generally Accepted Government Auditing Standards (GAGAS), and the relevant requirements of the Texas Internal Auditing Act (TIAA).

The IIA's *Quality Assessment Manual* suggests a scale of three ratings, "generally conforms," "partially conforms," and "does not conform." "Generally conforms" is the top rating and means that an internal audit activity has a charter, policies, and processes that are judged to be in conformance with the *Standards*. "Partially conforms" means deficiencies in practice are noted that are judged to deviate from the *Standards*, but these deficiencies did not preclude the internal audit activity from performing its responsibilities in an acceptable manner. "Does not conform" means deficiencies are judged to be so significant as to seriously impair or preclude the internal audit activity from performing adequately in all or in significant areas of its responsibilities.

Based on our independent validation of the QAR performed by OIA, we agree with OIA's overall conclusion that the internal audit function "**Generally Conforms**" with the Institute of Internal Auditors' *International Standards for the Professional Practice of Internal Auditing* and Code of Ethics, as well as with OIA's conclusions regarding GAGAS and TIAA requirements. Our review noted strengths as well as opportunities for enhancing the internal audit function.

This information has been prepared pursuant to a client relationship exclusively with, and solely for the use and benefit of, UTPB and The University of Texas System Administration and is subject to the terms and conditions of our related contract. Baker Tilly disclaims any contractual or other responsibility to others based on its use and, accordingly, this information may not be relied upon by anyone other than The University of Texas of the Permian Basin and The University of Texas System Administration.

The review team appreciates the cooperation, time, and candid feedback of executive leadership, stakeholders, and OIA personnel.

Very truly yours,

*Baker Tilly Virchow Krause, LLP*

**Audit Recommendation Status  
FY 2019**

	Recommendation - Summary	Original Implementation Date	New Implementation Date	Current Status 8/31/2019
9/26/2016	<b>Effort Reporting and Certification</b>			
	<i>Effort Reporting and Additional Compensation</i>			
17-01	Total effort of all individuals involved on sponsored programs should be reflected on the PO-1 payroll form for data to flow to the ECRT application in order for total effort to be reported and certified.	3/31/2017		Implemented
3/26/2018	<b>TAC 202 System Security</b>			
	<i>DIR Security Standards Catalog Self-Assessment</i>			
18-02	Required system security standards should be implemented. With the President's approval, any exceptions to required controls should be justified, documented, and communicated as part of the risk assessment process.	9/30/2018	11/1/2018	Implemented
5/11/2017	<b>Athletics Academic Integrity</b>			
	<i>Staff Compliance Training</i>			
17-04	Both live and online orientations for staff and student athletes should include specific information on how to report possible violations. This should include a verification process that student athletes understand the policy of being able to report possible violations without fear of reprisal.	9/1/2017	9/1/2018	Implemented

	Recommendation - Summary	Original Implementation Date	New Implementation Date	Current Status 8/31/2019
5/17/2018	<b>John Ben Shepperd Public Leadership Institute</b>			
	<i>Assets Not Recorded Nor Capitalized</i>			
18-07	All assets of the Presidential Museum and Archives should be identified and catalogued in order to increase security against loss or theft, and to assist in developing an estimated value for the collection as a whole. As required by the Texas State Controller, UTPB should capitalize the museum and library archives, including the Bush Home, using the guidelines of Governmental Accounting Standards Board Statement No. 34 (GASB 34). All donations of works of art or historical treasures should be recognized as revenue according to Governmental Accounting Standards Board Statement No. 33 (GASB 33).	8/31/2019		Partially Implemented
	<i>Outside Organizations</i>			
18-09	UTPB should execute a formal written agreement with the Friends of the Presidential Archives, in which the rights, responsibilities and liabilities for each party are clearly defined.	5/31/2018		Implemented
8/21/2018	<b>Title IX Compliance</b>			
	<i>Improvement needed in communication of UTPB policy</i>			
18-16	The UTPB Sexual Harassment/Misconduct Policy should be edited and updated to ensure that it is clearly understood by the University community. The locations of the policy on the University website should also be reviewed to ensure that it is easy to find for students, faculty, and staff. All posters, brochures, and other printed materials should be updated.	12/31/2018		Partially Implemented

	Recommendation - Summary	Original Implementation Date	New Implementation Date	Current Status 8/31/2019
1/23/2019	<b>UTS 142.1 Segregation of Duties and Reconciliation of Accounts Monitoring Plan - FY 2017</b>			
19-01	<i>Completeness and Timeliness of Monthly Account Reconciliations</i>			
	The Office of Accounting should continue to take proactive measures to encourage budget heads to: 1) complete their account reconciliations in a timely manner; 2) review and approve each reconciliation; and 3) ensure that all the proper signatures and dates for both the preparer and reviewer are included. Ongoing training of the reconciliation process should be continued, both as a refresher and also due to employee turnover.	9/1/2019		In progress
2/19/2019	<b>College of Nursing</b>			
19-02	<i>Incomplete SimLab Inventory Records</i>			
	The College of Nursing should coordinate with the Office of Accounting to determine or estimate the value of unlisted items and to update the SimLab's inventory listing. Also, the College of Nursing should notify the Advancement Office of all donated assets in order to accurately record in-kind gifts.	8/31/2019		Implemented
19-03	<i>Discrepancy in Inventory Records</i>			
	In order to reflect the accuracy of ownership and responsibility, the College of Nursing should coordinate with the Office of Accounting to transfer all eleven computers from the IRD inventory to the College of Nursing.	Immediately	N/A	Not implemented - IRD refused to transfer ownership
19-04	<i>Travel Expenses in Excess of State Limit</i>			
	Since state funds are more restrictive than local/ institutional funds, any excess lodging or other travel expenses above the GSA rate should be paid with local/ institutional funds.	Immediately		Implemented



	Recommendation - Summary	Original Implementation Date	New Implementation Date	Current Status 8/31/2019
6/5/2019	<b>UTS 142.1 Segregation of Duties and Reconciliation of Accounts Monitoring Plan - FY 2018</b>			
19-05	<i>Timing of Monitoring</i> The Office of Accounting should conduct monitoring on at least a quarterly basis.	4/30/2019		In progress
19-06	<i>Subcertification Letters</i> The Office of Accounting should ensure receipt of the subcertification letters by each Account Owner (department) and perform follow-up procedures as necessary to ensure that all subcertification letters have been submitted.	9/30/2019		In progress
19-07	<i>Completeness and Timeliness of Monthly Account Reconciliations</i> The Office of Accounting should continue to take proactive measures to encourage budget heads to: 1) complete their account reconciliations in a timely manner; 2) review and approve each reconciliation; and 3) ensure that all the proper signatures and dates for both the preparer and reviewer are included. Ongoing training of the reconciliation process should be continued, both as a refresher and also due to employee turnover.	9/1/2019		In progress