

TENNESSEE BOARD OF REGENTS
Committee on Audit

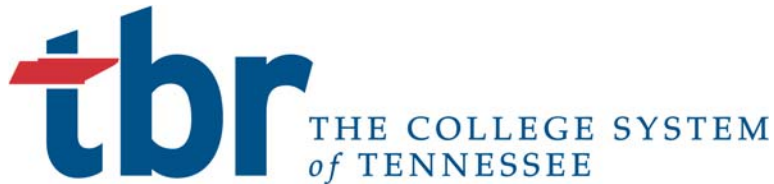
AGENDA
June 1, 2021

- I. INFORMATIONAL REPORTING (Mike Batson)**
 - a. Highlights of Audit Findings and Recommendations**
 - b. Audit Reports and Reviews**
 - c. System-wide Internal Audit Updates**
 - d. University Updates**

- II. CONSENT AGENDA (Mike Batson)**
 - a. Review of Revisions to Fiscal Year 2021 Internal Audit Plans**

- III. REVIEW OF SYSTEM-WIDE INTERNAL AUDIT BUDGET FOR FY 2022 (Mike Batson)**

- IV. NON-PUBLIC EXECUTIVE SESSION (Mike Batson)**



BOARD TRANSMITTAL

MEETING: Committee on Audit

SUBJECT: Highlights of Audit Findings and Recommendations

DATE: June 1, 2021

PRESENTER: Mike Batson

ACTION REQUIRED: Informational Report

STAFF'S
RECOMMENDATION: Accept Report

The following items will be discussed with the Audit Committee:

Comptroller's Office - NeSCC FY 2020 – Single Audit
Recommendation/Finding Logs

STATUS SUMMARY FOR PREVIOUSLY REPORTED FINDINGS

Comptroller's Audit Reports - Following is a summary on the status of previously reported Comptroller's Office findings for informational purposes. Internal Audit generally performs a follow-up review of Comptroller's Office findings within six months of issuance. A follow-up report is prepared and submitted to the Comptroller's Office and the Legislature's Office of Fiscal Review. An executive summary of each follow-up audit is included in the Audit Committee's quarterly materials.

Internal Audit Reports - Following is a summary on the status of previously reported findings and recommendations as of December 31, 2020. Campus auditors conduct follow up procedures to determine if management has taken adequate corrective action and include their conclusions on the summary log. A follow-up report may be issued by the campus auditor if adequate corrective action has not been taken by management.

TBR SWIA - Status Report on State Audit Findings
(Reports sorted by Status, Institution, Report Release Date)

Institution	Report Release Date	Finding	Responsible Staff	Date Management's Actions to be Implemented	Revised Date Management's Actions to be Implemented	# of Changes to Date Management's Actions to be Implemented	Initial Date of Internal Audit Follow-up	Most Recent Date of Internal Audit Follow-up	Status
ChSCC	10/23/2019	ChSCC FY 2018 & 2017 - Finding 1 of 1 Chattanooga State Community College did not provide adequate internal controls in thirteen specific areas. Pursuant to Standard 4.40 of the U.S. Government Accountability Office's Government Auditing Standards, we omitted details from this finding because they are confidential under the provisions of Section 10-7-504(i), Tennessee Code Annotated.	Executive Vice President of Business and Finance, Vice President of Technology	3/20/2020	3/31/2021	1	1/30/2020	4/26/2021	Action Completed
STCC	10/23/2020	STCC FY 2019 & 2018 - Finding 2 of 3 The college did not properly prepare bank reconciliations.	Vice President of Financial and Administrative Services	10/19/2020			4/20/2021		Action Completed
NaScc	10/27/2020	NaScc FY 2019 & 2018 - Finding 1 of 1 Nashville State Community College did not have adequate controls to ensure the accurate reporting of the dollar value of unused sick leave at June 30, 2018	VP of Finance and Administrative Services	10/27/2020	4/15/2021	2	1/4/2021	4/15/2021	In Progress
NeSCC	8/10/2020	NeSCC FY 2019 & 2018 - Finding 1 of 3 Northeast State Community College did not provide adequate internal controls over information technology in two areas. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> .	VP for Finance and Information Technology	6/30/2021			10/16/2020	4/8/2021	In Progress
NeSCC	8/10/2020	NeSCC FY 2019 & 2018 - Finding 3 of 3 College management needs to ensure accurate financial reporting of capital asset activity.	VP for Finance and Information Technology	6/30/2021			10/16/2020	4/8/2021	In Progress
STCC	10/23/2020	STCC FY 2019 & 2018 - Finding 1 of 3 The college does not have adequate controls in place to ensure compliance with the requirements of the Federal Work Study Program.	Vice President of Student Services	4/30/2021	8/31/2021		4/20/2021		In Progress
STCC	10/23/2020	STCC FY 2019 & 2018 - Finding 3 of 3 Southwest Tennessee Community College did not provide adequate internal controls in one area that was reported in the prior three audits. The details of this finding are confidential pursuant to Section 10-7-504(i), Tennessee Code Annotated.	Chief Information Officer	10/30/2021	5/30/2021		4/20/2021		In Progress
TBR System Office	12/17/2020	TBR FY 2019 & 2018- Finding 1 of 3 The System Office did not properly report cash held for the Tennessee Colleges of Applied Technology	Director of Fiscal Services	6/17/2021					Not Yet Due

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TBR System Office	12/17/2020	TBR FY 2019 & 2018- Finding 2 of 3 The System Office did not maintain adequate controls over bank reconciliations.	Director of Fiscal Services	6/17/2021					Not Yet Due
TBR System Office	12/17/2020	TBR FY 2019 & 2018- Finding 3 of 3 As noted in the prior audit, the Tennessee Board of Regents did not provide adequate internal controls in one area. Although management has taken steps since the prior audit to correct the condition, the corrective action was not sufficient. The details of this finding are confidential pursuant to Section 10-7-504(i), Tennessee Code Annotated.	Assistant Vice Chancellor for Information Technology	6/17/2021					Not Yet Due

TBR SWIA - Status Report on Internal Audit Recommendations- Community Colleges
(Reports sorted by Status, Institution, Report Release Date)

Institution	Report Release Date	Recommendation	Responsible Staff	Date Management's Actions to be Implemented	Revised Date Management's Actions to be Implemented	# of Changes to Date Management's Actions to be Implemented	Initial Date of Internal Audit Follow-up	Most Recent Date of Internal Audit Follow-up	Status
ChSCC	6/11/2018	NACHA The Background Check Policy revisions should be updated and approved by the Policy Review Board.	Executive Director Human Resources	12/31/2018	7/31/2021	4	10/8/2018	4/21/2021	Action Completed
ChSCC	1/31/2019	Events- Comp & Time Cards 1 of 3: ChSCC policy 06:78:00 should be evaluated by management for exception language and/or a procedure developed for the types of generally occurring overtime and compensatory time situations including but not limited to special events and on-call employees. All campus supervisors should be informed of the changes to the policy and the approved procedures.	Executive Director Human Resources	6/30/2019	9/30/2021	5	4/25/2019	4/21/2021	Action Completed
ChSCC	10/24/2019	NACHA 1 of 3: Completion of a Background Check Policy including proper approvals from the Policy Review Board.	Executive Vice President Human Resources	5/30/2020	7/31/2021	2	1/29/2020	4/21/2021	Action Completed
ChSCC	12/9/2020	NACHA - Management should complete the revision of the Background Check Policy to properly document the current ChSCC hiring processes. Approval from the Policy Review Board will be required to comply with the college policy development processes.	Executive Vice President Human Resources	7/31/2021			2/1/2021	4/21/2021	Action Completed
ChSCC	1/27/2021	Faculty Credentials: Identified exceptions be corrected through addition of appropriate supporting faculty credential documentation and/or adjustments to the Faculty Qualification Manual.	Dean, Academic Assessment, Accreditation, and Compliance	5/31/2021			4/22/2021		Action Completed
CoSCC	7/22/2019	Update College policy, procedures, and practices to address non-faculty employee conflicts of interest, and ensure conflict of interest review committees have an appropriate level of membership and defined roles and responsibilities.	Vice President, for Financial and Administrative Services	12/31/2019		0	9/17/2019	3/31/2021	Action Completed
CoSCC	7/22/2019	Improve transparency and open communication, strengthen the college culture and governance structure, and enhance the control environment and college-wide competency and accountability by: <ul style="list-style-type: none"> •Maintaining updated policies that reflect college strategic objectives, leadership expectations, and current best practice •Establishing process documentation •Formally assigning roles and responsibilities •Training responsible employees on policy responsibilities and expectations •Establishing monitoring and accountability controls that improve timeliness and effectiveness **Internal Audit Review of Management's Actions - In Progress**	President	8/31/2019		0	10/22/2019	3/31/2021	Action Completed
MSCC	5/4/2018	All supervisory staff should receive training regarding State of Tennessee, TBR, and MSCC policies regarding the approval and processing of outside employment for all institutional staff.	Executive Director of Human Resources	11/4/2018	5/15/2020	4	12/19/2018	8/28/2020	Action Completed

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MSCC	5/21/2018	Human Resources should ensure that the reason recorded for termination of an employee is accurate and matches the appropriate termination definition.	Executive Director of Human Resources 10/16/20 - Vice President of Organizational Development and Leadership	11/21/2018	2/1/2021	6	9/19/2019	3/25/2021	Action Completed
MSCC	5/21/2018	The Admissions policy should be updated and revised to match current practice.	Executive Vice President of Academic Affairs and Student Success, Assistant Vice President of Student Success 10/1/20 - Special Assistant to the President	11/21/2018	5/15/2020	5	9/19/2019	1/15/2021	Action Completed
MSCC	2/14/2020	Signed ethics statements by the Motlow College Foundation Board of Trustees were not available for fiscal year 2019. All signed ethics statements were obtained for fiscal year 2020 by the time of report issuance. It is recommended that foundation staff ensure that signed ethics statements are reviewed and acknowledged by every member of the Motlow College Foundation Board of Trustees annually per TBR Policy 4:01:07:02, <i>Foundations</i> requirements. It is also recommended that a process be developed for clearly documenting all required disclosures regarding potential conflicts of interest.	Chief Financial Officer, Executive Director of the Foundation	7/1/2020				9/30/2020	Action Completed
RSCC	4/30/2020	Review job responsibilities of the faculty member who manages the 2 theaters and determine appropriate release time for his theater management in the summer semester.	Vice President, Student Learning; Dean, Humanities Division	9/30/2020			7/31/2020	8/17/2020	Action Completed
RSCC	4/30/2020	Ensure all full-time faculty are assigned at least 15 calculated workload hours per semester with the exception of teaching more in the fall to have calculated workload adjusted downward in the spring semester by the fall overload. Additionally, 12 month faculty should be assigned 15 calculated workload hours during the summer.	Vice President, Student Learning; Deans	12/31/2020			7/31/2020	8/17/2020	Action Completed

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ChSCC	12/18/2020	TCAT Transportation Repair Technology Client Services and Inventory 3 of 6: As a best practice, supply inventory and equipment listings should be verified by Program Instructors at the end of each semester and reviewed by the Department Head to control supply ordering costs and in preparation for the annual fixed asset review.	Executive Vice President - Technical College	5/31/2021			2/1/2021		In Progress
ChSCC	12/18/2020	TCAT Transportation Repair Technology Client Services and Inventory 5 of 6: TCAT Management should explore and obtain an electronic work order system for each program. Assistance from the Technology Division should be used to identify current software restrictions and capabilities available to build an in-house work order system for the programs.	Executive Vice President - Technical College	8/1/2021			2/2/2021		In Progress
CoSCC	3/12/2018	As cited throughout Federal Regulations, an organization's third party actions on the organization's behalf are, to a significant extent the organization's responsibility. The college should establish a third party risk management program, designate who will coordinate the program, and review processes for selecting, training, and managing third party servicers in order to ensure the GLBA safeguards are established, and the college's third party servicers' risks are identified and managed.	Associate Vice President for Business Services Vice President for Information Technology	6/29/2018		0	8/14/2018	3/31/2021	In Progress
CoSCC	6/17/2020	The financial aid director should implement an independent review of the return to title IV calculations to ensure accurate calculation and timely return of title IV funds.	Director, Financial Aid	8/30/2020		0	10/7/2020	3/31/2021	In Progress
DSCC	9/28/2020	It is recommended that internal controls be improved to ensure that all sick leave is reported correctly and timely in the Human Resources department. When Family Medical Leave time is involved, it is recommended that the employee be required to work out some type of advance schedule with his or her supervisor and that these arrangements are documented thoroughly.	Vice President for Finance and Administrative Services, Director of HR	12/31/2020			1/28/2021		In Progress
DSCC	9/28/2020	It is recommended that internal controls be improved in the Human Resources department to ensure that proper policies and procedures are followed with regard to processing of all records, including Family Medical Leave Act records, alternate work schedule agreements, and requests for changes to benefits. It is also recommended that all steps and procedures regarding the documentation of Family Medical Leave Act filings be written in a more formalized manner or in a policy designated for this purpose. Alternate work schedule processes should be followed, appropriate forms should be submitted weekly and changes to employee benefits should follow DSCC policy.	Vice President for Finance and Administrative Services, Director of HR	12/31/2020			1/28/2021		In Progress
JSCC	9/20/2018	JSCC-INV18-03-Club Account Review Recommendation 1 of 3: Guidelines for fundraising events including cash management procedures should be developed and included in the JSCC Student Life Handbook. Guidelines may also include an approval process and any restrictions or limitations (e.g. raffles).	Vice President for Student Services	3/30/2019	9/1/2021	1		3/5/2021	In Progress

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JSCC	9/20/2018	JSCC-INV18-03-Club Account Review Recommendation 2 of 3: Training should be provided periodically and the JSCC Student Life Handbook should be distributed to club advisors and club officers. Increased communication between student activities and the club advisors could be beneficial and provide benefits to the student clubs.	Vice President for Student Services	3/30/2019	9/1/2021	1		3/5/2021	In Progress
JSCC	9/20/2018	JSCC-INV18-03-Club Account Review Recommendation 3 of 3: The JSCC Student Life Handbook should be reviewed annually and updated (if needed).	Vice President for Student Services	3/30/2019	9/1/2021	1		3/5/2021	In Progress
JSCC	3/29/2019	JSCC-IAR-WFD - Recommendation 1 of 2: For the sample of courses reviewed, the headcount total was overstated by 10 which resulted in an overstatement of 168 contact hours. Headcount and contact hours should be reported according to the instructions for the TBR Workforce Training Contact Hours report.	Dean of Business and Industry/Director of Workforce Development	9/30/2019		0		4/20/2021	In Progress
JSCC	3/29/2019	JSCC-IAR-WFD- Recommendation 2 of 2: There were four courses in the sample that would lead to a certification that were not reported in the TBR Workforce Training Contact Hours report. Certifications should be reported according to the instructions for the TBR Workforce Training Contact Hours report.	Dean of Business and Industry/Director of Workforce Development	9/30/2019		0		4/20/2021	In Progress
JSCC	7/16/2019	JSCC -INV19-01-Timekeeping - Recommendation 1 of 3: Supervisors and employees should be trained on time sheet procedures.	Director of Athletics and Director of Human Resources	1/17/2020		0		4/20/2021	In Progress
JSCC	7/16/2019	JSCC- INV19-01-Timekeeping - Recommendation 2 of 3: Processes should be reviewed to ensure that new hire paperwork and time sheets are completed correctly and periodic training should be provided to supervisors and employees.	Director of Athletics and Director of Human Resources	1/17/2020		0		4/20/2021	In Progress
JSCC	7/16/2019	JSCC-INV19-01-Timekeeping - Recommendation 3 of 3: The hiring process and subsequent periodic training for supervisors and employees should provide an explanation of contract terms. Supervisors should ensure that employees abide by the contract terms.	Director of Athletics and Director of Human Resources	1/17/2020		0		4/20/2021	In Progress

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MSCC	5/4/2018	MSCC should maintain documentation of TBR approval, when required, for changes in MSCC policy.	Executive Vice President of Academic Affairs and Student Success, Assistant Vice President for Academic Affairs	11/4/2018	5/15/2020	5	12/19/2018	9/30/2020	In Progress
MSCC	5/4/2018	MSCC should maintain documentation of TBR approval, when required, for changes in MSCC policy.	Executive Vice President of Academic Affairs and Student Success, Assistant Vice President for Academic Affairs 10/1/20 - Special Assistant to the President	11/4/2018	5/15/2020	6	12/19/2018	3/26/2021	In Progress
MSCC	5/21/2018	Human Resources should ensure that the reason recorded for termination of an employee is accurate and matches the appropriate termination definition.	Executive Director of Human Resources	11/21/2018	5/15/2020	5	9/19/2019	9/30/2020	In Progress
MSCC	5/21/2018	The Admissions policy should be updated and revised to match current practice.	Executive Vice President of Academic Affairs and Student Success, Assistant Vice President of Student Success	11/21/2018	5/15/2020	5	9/19/2019	9/30/2020	In Progress

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MSCC	6/29/2018	Access and diversity scholarships should only be awarded to individuals that meet the stated criteria developed by Motlow State Community College and approved by the Tennessee Board of Regents Office of Organizational Effectiveness and Strategic Initiatives. Written procedures should be developed regarding the process of selecting access and diversity scholarship awardees, and sufficient documentation must be maintained to support the selection of the awardees by the committee based on the approved criteria.	Executive Vice President of Academic Affairs and Student Success, Dean of Students	12/24/2018	1/1/2021	6	10/2/2019	9/30/2020	In Progress
MSCC	6/29/2018	It is recommended that Motlow State Community College develop procedures requiring documentation and approval of Faculty/Staff Recruitment and Retention expenditures by the Access and Diversity Committee. At the time of issuance of the report, the Access and Diversity Committee has developed and is in the process of finalizing procedures for awarding funds for Faculty/Staff Recruitment and Retention.	Executive Director of Human Resources	12/24/2018	1/1/2021	6	10/2/2019	9/30/2020	In Progress
MSCC	6/29/2018	Access and diversity scholarships should only be awarded to individuals that meet the stated criteria developed by Motlow State Community College and approved by the Tennessee Board of Regents Office of Organizational Effectiveness and Strategic Initiatives. Written procedures should be developed regarding the process of selecting access and diversity scholarship awardees, and sufficient documentation must be maintained to support the selection of the awardees by the committee based on the approved criteria.	Executive Vice President of Academic Affairs and Student Success, Dean of Students 10/1/20 - Special Assistant to the President	12/24/2018	1/1/2021	7	10/2/2019	6/30/2021	In Progress
MSCC	6/29/2018	It is recommended that Motlow State Community College develop procedures requiring documentation and approval of Faculty/Staff Recruitment and Retention expenditures by the Access and Diversity Committee. At the time of issuance of the report, the Access and Diversity Committee has developed and is in the process of finalizing procedures for awarding funds for Faculty/Staff Recruitment and Retention.	Executive Director of Human Resources 10/21/19 - Compliance Officer	12/24/2018	1/1/2021	7	10/2/2019	6/30/2021	In Progress

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MSCC	4/12/2019	The recommendation from the previous audit report is repeated. It is recommended that Motlow State Community College improve internal controls over maintaining workforce development documentation to sufficiently support training contact hours reported in the THEC Workforce Training Contact Hours report to THEC/TBR.	Chief Learning Officer, Executive Director of Workforce Development 7/1/20 - Title Change - Executive Vice President of Workforce and Community Development	9/30/2019	11/30/2020	4	12/16/2020	5/15/2021	In Progress
MSCC	4/12/2019	It is recommended that Motlow State Community College establish a formal review and verification process over training data for inclusion in the THEC Workforce Training Contact Hours report prior to submission to THEC/TBR.	Chief Learning Officer, Executive Director of Workforce Development 7/1/20 - Title Change - Executive Vice President of Workforce and Community Development	9/30/2019	11/30/2020	4	12/16/2020	5/15/2021	In Progress
NaSCC	8/2/2019	Form a Conflicts of Interest Committee to receive, review, and issue a recommendation to management for disclosed conflicts of interest.	Director of Human Resources	January 2020	9/30/2020	0	2/6/2020	7/21/2020	In Progress
NaSCC	4/30/2020	The Foundation should ensure that all board members review and acknowledge the Code of Ethics annually	Executive Director of Foundation	6/30/2020	10/31/2020	0	6/30/2020	11/16/2020	In Progress
NaSCC	4/30/2020	The Foundation should develop policies and procedures to ensure compliance with donor intent and conditions	Executive Director of Foundation	6/1/2020	10/31/2020	1	6/1/2020	11/16/2020	In Progress
NaSCC	4/30/2020	The Foundation should develop policies and procedures in regard to disclosure of gift records	Executive Director of Foundation	6/1/2020	10/31/2020	1	6/1/2020	11/16/2020	In Progress
NaSCC	4/30/2020	The Foundation should develop policies and procedures on procurement and contracting activities	Executive Director of Foundation	6/1/2020	10/31/2020	0	6/1/2020	11/16/2020	In Progress

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NaSCC	6/24/2020	Management should take corrective actions to mitigate security risk.	Vice President of Finance and Administrative Services, Associate Vice President of Accounting and Finance, Executive Director of Operations, and Director of Safety and Security	10/31/2020	10/31/2020	1	10/31/2020	10/31/2020	In Progress
NaSCC	8/2/2019	Begin collecting positive confirmation from all employees of the existence or non-existence of a potential conflict of interest.	Director of Human Resources	January 2020	9/30/2020	0	2/6/2020	7/21/2020	In Progress
NeSCC	4/30/2020	Management should ensure that future contracts between the Foundation and independent public accountants for the audit of financial records have the required approvals prior to execution of the contract.	Chief Advancement Officer, Coordinator of Advancement Activities	4/30/2021	6/30/2021	1	4/20/2021		In Progress
RSCC	4/30/2020	Review contracts, job descriptions and responsibilities of the Clinical Coordinators to determine whether each position should be a 9, 10, or 12 month position.	Vice President, Student Learning; Dean, Health Sciences Division	12/31/2020	6/30/2020		7/31/2020	4/25/2021	In Progress
RSCC	4/30/2020	Review positions of Clinical Coordinators and determine an objective method of calculating workload.	Vice President, Student Learning; Dean, Health Sciences Division	12/31/2021			7/31/2020	4/25/2021	In Progress

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CoSCC	10/29/2020	CoSCC-FU Workforce Development Controls Review-10292020 College leadership and departmental management can strengthen the college control environment through improvements to processes that <ul style="list-style-type: none"> • Ensure workforce development objectives are tied to and directed by the college's mission and strategic plan, • Ensure college policies are current and reflect the existing operating environment and expectations, • Support employee competency and accountability with job descriptions specific to the employee's role, and • Ensure all employees complete orientation, receive job specific training, and are fully aware of policies that specifically impact the employee's job responsibilities. 	Vice President, Williamson Campus and External Affairs Operations Manager, Workforce and Continuing Education	2/28/2021		0	1/6/2021	3/31/2021	No Progress
CoSCC	10/29/2020	CoSCC-FU Workforce Development Controls Review-10292020 Strengthen Control Activities by: <ul style="list-style-type: none"> · Clearly identify and prioritize departmental strategic objectives and establish key progress indicators (KPIs) so that departmental expectations are clear to management and staff, and accountability is clear and measurable. • Develop job specific onboarding that provides new employees with the knowledge and resources (for example, process instructions, accountability measurements and timelines, project prioritization, and role-specific policies) to be successful in their role. 	Vice President, Williamson Campus and External Affairs Operations Manager, Workforce and Continuing Education	2/28/2021		0	1/6/2021	3/31/2021	No Progress
JSCC	2/17/2020	JSCC-IAR-Foundation -Recommendation 1 of 2: The Foundation has developed some policies and procedures, however; the foundation should ensure that adequate policies and procedures exist for the Foundation operations as required by TBR Policy 4.01.07.02, <i>Foundations</i> . All policies should be approved by the Foundation Board.	Director of Community Development & Foundation	8/31/2020	7/1/2021	1	12/15/2020	12/15/2020	Not Yet Due
JSCC	2/17/2020	JSCC-IAR-Foundation- Recommendation 2 of 2: Foundation management should create an annual budget and advise the foundation of its needs and priorities for the upcoming year. The budget should be approved by the Foundation Board.	Director of Community Development & Foundation	8/31/2020	7/1/2021	1	12/15/2020	12/15/2020	Not Yet Due

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JSCC	11/15/2016 Updated: 08/27/2020	JSCC-IAR-Payroll -Recommendation 1 of 1: Equity salary increases and reclassifications were reviewed by management and verbally approved at the institution prior to submission to the Tennessee Board of Regents. However, there was no formal institutional approval including signatures and dates for equity salary increases and reclassifications. An appropriate approval process including documentation should be in place for equity salary increases and reclassifications. <i>Updated:</i> Management should develop an institutional approval process for the compensation plan (equity) salary increases including appropriate documentation with signatures and dates.	Payroll Supervisor and Director of Human Resources	5/15/2017	12/31/2021	1	12/3/2019	8/27/2020	Not Yet Due
VSCC	3/16/2021	The college should ensure that federal work study students use sign-in sheets so hours may be tracked and monitored as prescribed in the Volunteer State College Work Study Program booklet.	Financial Aid	11/1/2021					Not Yet Due
VSCC	3/16/2021	The college should ensure that students receiving a work component award do not work during class time. Additionally, the federal work study students should have an approved work schedule that ensures the student is not scheduled to work during class time.	Financial Aid	11/1/2021					Not Yet Due
VSCC	3/16/2021	The college should award the ambassador scholarships in the correct amount. The scholarship award should cover full in-state tuition and fees plus a \$300 book stipend.	Financial Aid	11/1/2021					Not Yet Due
VSCC	3/16/2021	The campus access fee should not be deducted from federal work study student payroll. The students pay this fee through the student fee assessment.	Payroll Services	11/1/2021					Not Yet Due
VSCC	3/16/2021	Evaluations should be completed for all federal work study students and academic service scholarship students.	Financial Aid	11/1/2021					Not Yet Due
VSCC	3/16/2021	The college should accurately report the participant and federal wage amounts of community service activities on the Department of Education FISAP report.	Financial Aid	11/1/2021					Not Yet Due

TBR SWIA - Status Report on Internal Audit Recommendations- Information Systems (Reports sorted by Status, Institution, Report Release Date)									
Institution	Report Release Date	Recommendation	Responsible Staff	Date Management's Actions to be Implemented	Revised Date Management's Actions to be Implemented	# of Changes to Date Management's Actions to be Implemented	Initial Date of Internal Audit Follow-up	Most Recent Date of Internal Audit Follow-up	Status
PSCC	6/19/2020	Pellissippi State Community College did not provide adequate internal controls in one area. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session.	Chief Information Officer	12/31/2020			3/26/2021		Action Completed
PSCC	12/15/2020	Pellissippi State Community College did not provide adequate internal controls in one area. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session.	Chief Information Officer	2/28/2021			3/26/2021		Action Completed
ChSCC	4/12/2016	Chattanooga State Community College did not provide adequate internal controls in one area. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session.	Vice President of Technology and President's Cabinet	10/3/2016	6/30/2021	6	7/14/2017	3/30/2021	In Progress
CISCC	4/6/2015	Cleveland State Community College did not provide adequate internal controls in one area. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session.	Chief Information Officer	12/1/2015	6/30/2019	5	7/14/2017	1/5/2021	In Progress
CISCC	6/29/2018	Cleveland State Community College did not provide adequate internal controls in seven areas. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session. Three of seven areas have been corrected.	Chief Information Officer	11/30/2018	3/31/2019	1	2/4/2019	1/20/2021	In Progress

TBR SWIA - Status Report on Internal Audit Recommendations- Information Systems (Reports sorted by Status, Institution, Report Release Date)									
Institution	Report Release Date	Recommendation	Responsible Staff	Date Management's Actions to be Implemented	Revised Date Management's Actions to be Implemented	# of Changes to Date Management's Actions to be Implemented	Initial Date of Internal Audit Follow-up	Most Recent Date of Internal Audit Follow-up	Status
CoSCC	2/5/2019	Columbia State Community College did not provide adequate internal controls in ten areas. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session. Eight of ten areas have been corrected.	Associate VP for IT	8/31/2019		0	10/17/2019	3/12/2021	In Progress
MSCC	4/15/2016	Motlow State Community College did not provide adequate internal controls in one area. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session.	Chief Information Officer	10/14/2016	12/31/2018	3	7/14/2017	3/30/2021	In Progress
MSCC	1/11/2021	Motlow State Community College did not provide adequate internal controls in eight areas. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session.	Chief Information Officer	5/30/2021		0			In Progress
NaSCC	8/15/2016	Nashville State Community College did not provide adequate internal controls in one area. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session.	Chief Information Officer	4/28/2017	12/31/2018	2	7/14/2017	3/30/2021	In Progress
NaSCC	3/22/2021	Nashville State Community College did not provide adequate internal controls in nine areas. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session. One of nine areas have been corrected.	Chief Information Officer	12/31/2021		0			In Progress

TBR SWIA - Status Report on Internal Audit Recommendations- Information Systems (Reports sorted by Status, Institution, Report Release Date)									
Institution	Report Release Date	Recommendation	Responsible Staff	Date Management's Actions to be Implemented	Revised Date Management's Actions to be Implemented	# of Changes to Date Management's Actions to be Implemented	Initial Date of Internal Audit Follow-up	Most Recent Date of Internal Audit Follow-up	Status
NeSCC	2/17/2017	Northeast State Community College did not provide adequate internal controls in twelve areas. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session. Eight of twelve areas have been corrected.	Chief Information Officer	5/1/2017	6/30/2021	6	7/14/2017	3/30/2021	In Progress
PSCC	9/3/2014	Pellissippi State Community College did not provide adequate internal controls in one area. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session.	Chief Information Officer	3/31/2015	12/31/2020	6	7/14/2017	3/30/2021	In Progress
PSCC	2/14/2020	Pellissippi State Community College did not provide adequate internal controls in one area. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session.	Chief Information Officer and Vice President of Business and Finance	9/30/2020	9/30/2021	2	9/17/2020	3/30/2021	In Progress
PSCC	10/9/2020	Pellissippi State Community College did not provide adequate internal controls in one area. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session.	Chief Information Officer	12/31/2020	5/31/2021	1	3/29/2021		In Progress
RSCC	4/17/2015	Roane State Community College did not provide adequate internal controls in one area. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session.	Chief Information Officer	7/31/2015	12/31/2020	8	7/14/2017	3/30/2021	In Progress

TBR SWIA - Status Report on Internal Audit Recommendations- Information Systems (Reports sorted by Status, Institution, Report Release Date)									
Institution	Report Release Date	Recommendation	Responsible Staff	Date Management's Actions to be Implemented	Revised Date Management's Actions to be Implemented	# of Changes to Date Management's Actions to be Implemented	Initial Date of Internal Audit Follow-up	Most Recent Date of Internal Audit Follow-up	Status
RSCC	4/13/2018	Roane State Community College did not provide adequate internal controls in eight areas. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session. Seven areas have been corrected.	Chief Information Officer	10/12/2018	9/30/2020	3	2/12/2019	1/8/2021	In Progress
VSCC	5/13/2016	Volunteer State Community College did not provide adequate internal controls in two areas. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session. One area has been corrected.	Chief Information Officer	11/30/2016	12/31/2020	4	7/14/2017	3/30/2021	In Progress
NeSCC	1/27/2021	Northeast State Community College did not provide adequate internal controls in three areas. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session.	Assistant Vice President, Chief Information Officer, & Director of Human Resources	1/31/2022					Not Yet Due
PSCC	3/3/2021	Pellissippi State Community College did not provide adequate internal controls in one area. Ineffective internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. The details of this finding are confidential pursuant to Section 10-7-504(i), <i>Tennessee Code Annotated</i> . Details will be provided to the Board during Audit Committee Executive Session.	Chief Information Officer	3/31/2021					Not Yet Due

BOARD TRANSMITTAL

MEETING: Committee on Audit

SUBJECT: Audit Reports and Reviews

DATE: June 1, 2021

PRESENTER: Mike Batson

ACTION REQUIRED: Informational Report

STAFF'S
RECOMMENDATION: Accept Report

Federal Audits

The Audit Committee will review executive summaries for the federal audit reports issued from January 1, 2021 to March 31, 2021.

- Chattanooga State Community College
 - US Small Business Administration- Financial Examination
- Pellissippi State Community College
 - US Small Business Administration- Financial Examination
- Volunteer State Community College
 - US Small Business Administration- Financial Examination

Comptroller's Office

The Comptroller of the Treasury, Division of State Audit, under the authority of TCA 4-3-304, performs financial and compliance audits of each Tennessee Board of Regents community college and the system office, typically every other year. The Comptroller's Office also conducts performance audits of the Tennessee Board of Regents operations, as needed.

FINANCIAL AND COMPLIANCE AUDITS – FINDINGS

- Northeast State Community College
 - FYE June 30, 2020 (Single Audit)

Miscellaneous External Reviews

The Audit Committee will review executive summaries for the miscellaneous external reviews (reports issued by entities other than Internal Audit, State Audit, or Federal agencies) issued from January 1, 2021 to March 31, 2021.

Volunteer State Community College

- Tennessee Small Business Development Center- Financial Review
- Tennessee Small Business Development Center- Program Review
- Tennessee DOL – OSHA Training Institute Education Center Review

TCAT Chattanooga

- Tennessee Department of Transportation- CDL Program Review

Internal Audit

The Audit Committee will receive executive summaries for the internal audit reports issued from January 1, 2021 to March 31, 2021 as well as reports issued after March 31, 2021, which contain information considered to be time-sensitive for the Audit Committee’s consideration*. Below is a listing of the internal audit and investigation reports completed during the reporting period, grouped by type of review. Highlights from these reports were reviewed in agenda item I.a.

Internal Audit Reports for Informational Purposes- Financial Management

VSCC	Work Component Financial Aid Awards FY 2020 Review	Page 39
TCAT	President’s Expense Audit for FY 2020	Page 40
Livingston		
TCAT	President’s Expense Audit FY 2020	Page 42
Shelbyville		

Internal Audit Reports for Informational Purposes- Institutional Support

CoSCC	Campus Safety and Security	Page 45
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Internal Audit Reports for Informational Purposes- Instruction & Academic Support

ChSCC	Faculty Credential 2020	Page 47
NaSCC	Confidentiality of Student Records	Page 48
PSCC	Faculty Credentials Fall 2020	Page 49

Internal Audit Reports for Informational Purposes- Investigations

TCAT	TBR 21-01: Cosmetology Program Allegations	Page 51
Hohenwald		

Internal Audit Reports for Informational Purposes- Follow-up

CoSCC	Follow-up on Policy Review and Conflict of Interest	Page 53
JSCC	Follow-up to the Foundation Audit	Page 54
NeSCC	Follow-up to the State Audit Report for FY 2019 & 2018	Page 56

* Limited Official Use Only reports for Columbia State Community College- Information Security Audit Follow-up; Motlow State Community College- Information Systems General Controls Audit; Nashville State Community College- Information Systems General Controls Audit; Northeast State Community College- Network Access Termination 2020; Northeast State Community College- Follow-up to the LOU State Audit Report for FY 2019 & 2018; and Pellissippi State Community College- Banner Document Management System Vulnerability Assessment. These reports will be shared in the Audit Committee Executive Session.

**Tennessee Board of Regents
Audit Committee
June 1, 2021**

Federal Audit Reports

Chattanooga State Community College
U.S. Small Business Administration: Financial Examination of the Tennessee Small
Business Development Center
Period Coverage: Program Year 2019
September 22, 2020
Executive Summary

Introduction	<p>The overall objective of the SBA financial examination process is to determine whether the SBDC network has controls in place to ensure: (1) the accuracy of the reported financial and management data; (2) whether costs incurred and claimed for reimbursement were reasonable, allowable, and allocable; (3) compliance with program policies, operating procedures, and applicable laws and regulations.</p> <p>Pursuant to 15 USC 648 § 21(k) (1) of the Small Business Act (the Act) and the Code of Federal Regulations (CFR) 13, Part 130 which require the Office of Small Business Development Centers (OSBDC) to perform a financial and programmatic examination of each SBDC network every two years.</p>
Scope	<p>This examination covered the SBDC’s operations for Program Year 2019. Please note that the TN-SBDC is operating under a one-year budget. The budget period is from January 1, 2019 to December 31, 2019. Our examination focused on the financial activities of the TN-SBDC. The Centers included in our review were as follows:</p> <ul style="list-style-type: none"> •SBDC Lead Center, Middle Tennessee State University •Chattanooga State Community College, Chattanooga, TN •Pellissippi State Technical Community College, Knoxville, TN •Volunteer State Community College, Gallatin, TN
Conclusion	<p>Based on the limited testing of the data available from the lead center and the selected service centers, it was determined that the TN-SBDC network:</p> <ol style="list-style-type: none"> 1. Is in compliance with reporting requirements; 2. Is in compliance with monitoring of the financial activities of its service centers; 3. Is in compliance with time & effort reporting; 4. Is in compliance with monitoring of cash disbursement requirements; 5. Is in compliance with indirect cost requirements; 6. Is in compliance with in-kind match requirements; 7. Is in compliance with program income requirements; and 8. Is in compliance with contract management requirements. <p>The examination had no findings.</p>

Pellissippi State Community College
U.S. Small Business Administration: Financial Examination of the Tennessee Small
Business Development Center
Period Coverage: Program Year 2019
September 22, 2020
Executive Summary

Introduction	<p>The overall objective of the SBA financial examination process is to determine whether the SBDC network has controls in place to ensure: (1) the accuracy of the reported financial and management data; (2) whether costs incurred and claimed for reimbursement were reasonable, allowable, and allocable; (3) compliance with program policies, operating procedures, and applicable laws and regulations.</p> <p>Pursuant to 15 USC 648 § 21(k) (1) of the Small Business Act (the Act) and the Code of Federal Regulations (CFR) 13, Part 130 which require the Office of Small Business Development Centers (OSBDC) to perform a financial and programmatic examination of each SBDC network every two years.</p>
Scope	<p>This examination covered the SBDC’s operations for Program Year 2019. Please note that the TN-SBDC is operating under a one-year budget. The budget period is from January 1, 2019 to December 31, 2019. Our examination focused on the financial activities of the TN-SBDC. The Centers included in our review were as follows:</p> <ul style="list-style-type: none"> •SBDC Lead Center, Middle Tennessee State University •Chattanooga State Community College, Chattanooga, TN •Pellissippi State Technical Community College, Knoxville, TN •Volunteer State Community College, Gallatin, TN
Conclusion	<p>Based on the limited testing of the data available from the lead center and the selected service centers, it was determined that the TN-SBDC network:</p> <ol style="list-style-type: none"> 1. Is in compliance with reporting requirements; 2. Is in compliance with monitoring of the financial activities of its service centers; 3. Is in compliance with time & effort reporting; 4. Is in compliance with monitoring of cash disbursement requirements; 5. Is in compliance with indirect cost requirements; 6. Is in compliance with in-kind match requirements; 7. Is in compliance with program income requirements; and 8. Is in compliance with contract management requirements. <p>The examination had no findings.</p>

Volunteer State Community College
U.S. Small Business Administration: Financial Examination of the Tennessee Small
Business Development Center
Period Coverage: Program Year 2019
September 22, 2020
Executive Summary

Introduction	<p>The overall objective of the SBA financial examination process is to determine whether the SBDC network has controls in place to ensure: (1) the accuracy of the reported financial and management data; (2) whether costs incurred and claimed for reimbursement were reasonable, allowable, and allocable; (3) compliance with program policies, operating procedures, and applicable laws and regulations.</p> <p>Pursuant to 15 USC 648 § 21(k) (1) of the Small Business Act (the Act) and the Code of Federal Regulations (CFR) 13, Part 130 which require the Office of Small Business Development Centers (OSBDC) to perform a financial and programmatic examination of each SBDC network every two years.</p>
Scope	<p>This examination covered the SBDC’s operations for Program Year 2019. Please note that the TN-SBDC is operating under a one-year budget. The budget period is from January 1, 2019 to December 31, 2019. Our examination focused on the financial activities of the TN-SBDC. The Centers included in our review were as follows:</p> <ul style="list-style-type: none"> •SBDC Lead Center, Middle Tennessee State University •Chattanooga State Community College, Chattanooga, TN •Pellissippi State Technical Community College, Knoxville, TN •Volunteer State Community College, Gallatin, TN
Conclusion	<p>Based on the limited testing of the data available from the lead center and the selected service centers, it was determined that the TN-SBDC network:</p> <ol style="list-style-type: none"> 1. Is in compliance with reporting requirements; 2. Is in compliance with monitoring of the financial activities of its service centers; 3. Is in compliance with time & effort reporting; 4. Is in compliance with monitoring of cash disbursement requirements; 5. Is in compliance with indirect cost requirements; 6. Is in compliance with in-kind match requirements; 7. Is in compliance with program income requirements; and 8. Is in compliance with contract management requirements. <p>The examination had no findings.</p>

Standards followed by the Comptroller of the Treasury In Relation to Audits of Tennessee Board of Regents Institutions

Audit reports issued for TBR institutions indicate that the Division of State Audit conducts audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in generally accepted government auditing standards. Standards generally accepted in the U.S. are generally the accounting standards issued by the Governmental Accounting Standards Board or Financial Accounting Standards Board of the American Institute of Certified Public Accountants. Generally accepted government auditing standards (GAGAS) are those included in Government Auditing Standards, issued by the Comptroller General of the United States. The types of findings described below are based on the guidance provided in these standards.

Types of Findings

Deficiencies in Internal Control¹

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis.

Significant Deficiency¹

A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Material Weakness¹

A material weakness is a deficiency, or combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis.

A finding normally results when auditors consider a deficiency in internal control to be a significant deficiency or a material weakness.

Instance of Non-Compliance Required to be Reported²

When performing GAGAS financial audits, auditors should communicate in the report on internal control over financial reporting and compliance, based upon the work performed, (1) significant deficiencies and material weaknesses in internal control; (2) instances of fraud and noncompliance with provisions of laws or regulations that have a material effect on the audit and any other instances that warrant the attention of those charged with governance; (3) noncompliance with provisions of contracts or grant agreements that has a material effect on the audit; and (4) abuse that has a material effect on the audit.

¹ Statement on Auditing Standard 115, *Communicating Internal Control Related Matters Identified in an Audit*, was effective for periods ending on or after December 15, 2009.

² The December 2011 Revision of Government Auditing Standards, issued by the Comptroller General of the United States, Government Accountability Office.

**Tennessee Board of Regents
Audit Committee
June 1, 2021**

***Review of Comptroller's Office Audit Reports
Financial and Compliance Audits—Findings Reported***

Institution	For the Year Ended	Auditor's Opinion on Financial Statements	Report on Internal Control	Report on Compliance	Findings
Northeast State Community College (Single Audit)	June 30, 2020	Unmodified Opinion	Two findings identified as significant deficiencies	Two instances of noncompliance required to be reported	2

Finding 1 – Northeast State Community College staff did not adequately monitor attendance for Pell recipients

Northeast State Community College instructors did not adequately monitor and report attendance for students receiving Pell. We reviewed a sample of 40 students who received Title IV Student Financial Assistance during the 2019-2020 award year. Errors were noted for four of 40 students tested (10%) who either never attended; or withdrew, dropped out, or were terminated from classes prior to completing 60% of the term for which the award was made, resulting in federal questioned costs of \$397.

Recommendation – Northeast State Community College should provide additional training to instructors to ensure that the instructors document and report attendance properly. The training should emphasize that the information is necessary to determine the amounts of Title IV awards and potential returns of Title IV funds. The college should also continue to use its recently modified Purge Report.

Management's Comment – Management concurs that attendance was not adequately monitored during the audit period, and the college's Purge Report was not adequately designed to identify students who attended, but dropped or withdrew, on or prior to the census date. In order to correct this deficiency, Northeast State will provide training to all faculty members responsible for recording student attendance. Training will initially be provided to all academic Deans during the Academic Council meeting, and then to faculty members within each academic discipline during individual division meetings. The training will include the potential impacts on the students and institution if attendance is not accurately tracked and the appropriate methods to record and communicate class attendance. The training will be conducted each academic year and provided to new faculty members during the onboarding process. Management will monitor the recording of attendance through division reports at the census date to ensure attendance has been recorded for all students. As described in the audit finding, management corrected the Purge Report programming during the audit. Northeast State will continue to use the updated Purge Report.

Finding 2 – Northeast State Community College did not provide adequate internal controls in one area

Northeast State Community College did not design and monitor internal controls in one specific area. For this area, we found an internal control deficiency related to the college's information technology control environment that was not in compliance with industry-accepted best practices. This deficiency is considered a significant deficiency in internal control. Ineffective implementation of internal controls increases the likelihood of errors, data loss, and unauthorized access to college information. Pursuant to Standard 4.40 of the U.S. Government Accountability Office's Government Auditing Standards, we omitted details from this finding because they are confidential under the provisions of Section 10-7-504(i), Tennessee Code Annotated. We provided the college with detailed information regarding the specific condition we identified, as well as the related criteria, cause, and our specific recommendation for improvement.

Recommendation – Management should ensure that this condition is corrected by promptly developing and consistently implementing internal controls in this area. Management should implement effective controls to ensure compliance with applicable requirements; assign staff to be responsible for ongoing monitoring of the risks and mitigating controls; and take action if deficiencies occur.

Management's Comment – Management concurs with the finding. We have already begun to implement controls to address the finding.

Internal Audit Follow-Up: An internal audit follow-up report on these findings will be presented to the Audit Committee at a subsequent meeting.

**Tennessee Board of Regents
Audit Committee
June 1, 2021**

*Miscellaneous External
Reviews*

Volunteer State Community College
Tennessee Small Business Development Center Financial Review
Period Coverage: January 1, 2019 – December 31, 2019
December 15, 2020
Executive Summary

Introduction	The purpose of this review is to assist in accomplishing the management oversight function of the Tennessee Small Business Development Lead Center under the Small Business Administration (SBA) Office of Small Business Development Cooperative Agreement. The review was conducted on November 24, 2020 by the Financial Reporting and Accounting Manager.
Conclusion	Based upon our limited testing of the data available, we have determined that the center: <ul style="list-style-type: none"> 1. is adequately monitoring the financial aspects of their operations; 2. is in compliance with cash disbursement requirements; 3. is in compliance with indirect cost requirements; 4. is in compliance with in-kind cost requirements; and 5. is in compliance with program income requirements.
Findings/ Recommendations	None

Volunteer State Community College
Tennessee Small Business Development Center Programmatic Review
Period Coverage: January 1, 2020 – December 31, 2020
December 1, 2020
Executive Summary

Introduction	The purpose of this review is to assist in accomplishing the programmatic review of the Tennessee Small Business Development Lead Center under the Small Business Administration’s (SBA) Office of Small Business Development Centers via a Cooperative Agreement. The review was conducted on November 15, 2020 by the Executive State Director and the TSBDC Associate State Director.																																								
Conclusion	<p>Summary of Results for Programmatic for 2020 as of December 1, 2020:</p> <p>1. Capital Formation and Business Starts</p> <table border="1" data-bbox="423 674 1500 894"> <thead> <tr> <th>Goal for 2020</th> <th>Milestone</th> <th>Actual CY YTD</th> <th>Percentage of Goal</th> </tr> </thead> <tbody> <tr> <td>Capital Formation</td> <td>\$3,540,419</td> <td>\$2,201,000</td> <td>62%</td> </tr> <tr> <td>Business Starts</td> <td>8</td> <td>8</td> <td>100%</td> </tr> <tr> <td>Unique Clients</td> <td>117</td> <td>228</td> <td>195%</td> </tr> <tr> <td>Jobs Supported</td> <td>540</td> <td>1,148</td> <td>212%</td> </tr> </tbody> </table> <p>2. Training Events</p> <table border="1" data-bbox="423 978 1500 1058"> <thead> <tr> <th>Goal for 2020</th> <th>Milestone</th> <th>Actual CY YTD</th> <th>Percentage of Goal</th> </tr> </thead> <tbody> <tr> <td>Training Attendance</td> <td>560</td> <td>415</td> <td>74%</td> </tr> </tbody> </table> <p>3. Banker Visits and Legislative Affairs:</p> <p style="padding-left: 40px;">The Center had 2 legislative affairs visits, 5 banker visits and a total of 20 professional development hours.</p> <p>4. Client Satisfaction Survey:</p> <p>The client satisfaction survey is submitted to each client after they have completed at least one initial and follow-on session with each counselor at the Center. Below defines the metrics.</p> <table border="1" data-bbox="423 1430 1500 1812"> <thead> <tr> <th>Metrics</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>1. Did your request for assistance receive prompt response?</td> <td>100%</td> </tr> <tr> <td>2. Did the counselor respond to your needs?</td> <td>98%</td> </tr> <tr> <td>3. Did the range of counseling services available meet your needs?</td> <td>96%</td> </tr> <tr> <td>4. Would you recommend other small business persons to contact the counselor?</td> <td>97%</td> </tr> <tr> <td>5. Best marketing for TSBDC is</td> <td>Chamber of Commerce Billboard</td> </tr> </tbody> </table>	Goal for 2020	Milestone	Actual CY YTD	Percentage of Goal	Capital Formation	\$3,540,419	\$2,201,000	62%	Business Starts	8	8	100%	Unique Clients	117	228	195%	Jobs Supported	540	1,148	212%	Goal for 2020	Milestone	Actual CY YTD	Percentage of Goal	Training Attendance	560	415	74%	Metrics	Percentage	1. Did your request for assistance receive prompt response?	100%	2. Did the counselor respond to your needs?	98%	3. Did the range of counseling services available meet your needs?	96%	4. Would you recommend other small business persons to contact the counselor?	97%	5. Best marketing for TSBDC is	Chamber of Commerce Billboard
Goal for 2020	Milestone	Actual CY YTD	Percentage of Goal																																						
Capital Formation	\$3,540,419	\$2,201,000	62%																																						
Business Starts	8	8	100%																																						
Unique Clients	117	228	195%																																						
Jobs Supported	540	1,148	212%																																						
Goal for 2020	Milestone	Actual CY YTD	Percentage of Goal																																						
Training Attendance	560	415	74%																																						
Metrics	Percentage																																								
1. Did your request for assistance receive prompt response?	100%																																								
2. Did the counselor respond to your needs?	98%																																								
3. Did the range of counseling services available meet your needs?	96%																																								
4. Would you recommend other small business persons to contact the counselor?	97%																																								
5. Best marketing for TSBDC is	Chamber of Commerce Billboard																																								
Findings/ Recommendations	None																																								

**Volunteer State Community College
Tennessee Department of Labor
OSHA Training Institute Review – Page 1 of 2
Period Coverage: July 1, 2019 – June 30, 2020
January 21, 2021
Executive Summary**

Introduction	<p>The following is the FY 2020 year in review for Volunteer State Community College (VSCC). The review focuses on the ten performance elements in the FY 2020 <i>OSHA Training Institute (OTI) Education Center Annual Performance Criteria</i>. Due to the unique and challenging COVID-19 restrictions faced in FY 2020, OTI Education Centers (OTIECs) were not rated on individual elements or provided an overall total score. The review was conducted by the Acting Director.</p>
Conclusion	<p>COVID-19 Response</p> <p>VSCC was one of nine OTIECs to pilot a program for delivery of OTIEC courses using a Virtual Instructor-Led Training (VILT) model. VSCC adapted multiple course curricula to a VILT delivery modality and then developed and executed a pilot program using video conferencing technologies. These technologies contained tools and features which support engaging and interactive remote synchronous course delivery.</p> <p>As a direct result of VSCC’s efforts, DTE announced a change to OTIEC policy allowing all OTIECs to request exceptions to standard classroom delivery. Throughout the pandemic, VSCC has worked to ensure the delivery of high-quality training continues to be the focus for its program. VSCC’s flexibility, innovation, and leadership helped all OTIECs meet the challenges presented by COVID-19 restrictions on classroom delivery.</p> <p>Performance Elements</p> <p>1) Number of Students Trained</p> <p>VSCC trained 667 students during FY 2020.</p> <p>2) Present OTI Education Center Courses</p> <p>VSCC conducted 90 classes during FY 2020. VSCC conducted eight required courses at least twice and conducted seven elective courses and three short courses.</p> <p>3) Provide Training on a Regional Basis</p> <p>During FY 2020, VSCC delivered off-site training courses in three of the eight states throughout Region IV and established three regional training sites. VSCC also conducted remote synchronous training that was available throughout the entire region.</p> <p>4) Outreach Monitoring Plan Activities</p> <p>In FY 2020, VSCC completed eight record audits. The annual average classes per audit was 6.6. VSCC completed four training observations. VSCC completed 88 total monitoring activities. All monitoring activities were thorough, timely, and accurate.</p>

**Volunteer State Community College
Tennessee Department of Labor
OSHA Training Institute Review – Page 2 of 2
Period Coverage: July 1, 2019 – June 30, 2020
January 21, 2021
Executive Summary**

<p>Cont. Conclusion</p>	<p>5) Administrative Requirements</p> <p>OTIECs are responsible for ensuring students have met all course prerequisites for both training and experience prior to registration. Quarterly record audits by DTE revealed VSCC had no discrepancies in classes audited in FY 2020.</p> <p>6) Quality of Instruction and Customer Service</p> <p>VSCC student surveys revealed an average above 4.75 for both instruction and curriculum. DTE received no formal complaints from customers.</p> <p>7) Responsiveness to Monthly Reporting and DTE Requests for Information</p> <p>OTIECs are responsible for ensuring courses are reported accurately and in a timely manner. VSCC submitted all monthly course summary reports on time with no discrepancies. VSCC responded to all other DTE requests accurately and on time.</p> <p>8) Other Outreach Training Program Administrative Requirements</p> <p>VSCC processed 11,760 Outreach Training Program student course completion cards during FY 2020. VSCC facilitated timely card distribution to trainers, maintained an accurate Outreach training recordkeeping system, and submitted timely Outreach training reports.</p> <p>9) Partnering Efforts</p> <p>VSCC continued to maintain excellent communication with the Region IV and Area Offices. VSCC is an active participant in an Alliance Agreement with the Region and Region IV OTIECs. VSCC supported the National Fall Prevention Safety Stand Down campaigns. VSCC attends Field Federal Safety and Health Council meetings. VSCC led an effort to collaborate on VILT pilot offerings amongst OTIECs. VSCC participated in the Outreach Monitoring Improvement project team.</p> <p>10) Marketing and Promotion</p> <p>VSCC provided monetary support for the OTIEC program national marketing effort. VSCC participates in regional or local conferences. VSCC promoted the OTIECs through email blasts, social media platforms, list serve emails, websites, print materials, and other media.</p>
<p>Findings/ Recommendations</p>	<p>None</p>

TCAT Chattanooga
Tennessee Department of Safety and Homeland Security
Commercial Driver License (CDL) Program Review – Page 1 of 4
Period Coverage: March, 2019 – March 30, 2020
February 16, 2021
Executive Summary

Introduction	On August 25, 2020, the Internal Audit Division of the Tennessee Department of Safety & Homeland Security (TDOSHS) audited Tennessee College of Applied Technology – Chattanooga (TCAT2), a Commercial Driver License (CDL) third party tester. The audit was conducted by Auditor 4 and Auditor 3. The audit was conducted using the Federal Motor Carrier Safety Administration (FMCSA) regulations, American Association of Motor Vehicle Administrators (AAMVA) 2005 CDL Examiner’s Manual revised August 2017, State law requirements, and the TDOSHS CDL Third Party Policy and Procedures, updated April 8, 2015.
Scope	General CDL information completed by Third Party Examiners Dexter Truss (Ex. DT), George Hendricks (Ex. GH), Matt Clem (Ex. MC) and James Jones (Ex. JJ) was reviewed for the period of February 1, 2017 through March 31, 2020. A sample period of March 1, 2019 through March 31, 2020 was chosen, and analytical procedures were applied. During this period, 190 drivers were tested by the agency and 16 (8%) drivers’ records were selected for compliance testing. In total, the 16 drivers tested on 36 separate days. Examiner Truss conducted 19 tests using the eCDL tablet, one test using the mCDL tablet and ten tests using manual score sheets. Examiner Hendricks conducted four tests using the mCDL tablet and three tests using manual score sheets. In addition, six drivers with seven test dates from previous examiners Clem and Jones were selected for compliance testing. A field visit was conducted to scan the required on-site Company, Examiner, and Driver Files, and other records found to be applicable for compliance testing.
Prior Audits	The previous audit conducted on March 9, 2017 was also reviewed to ensure implementation of corrective action. The prior audit had six findings and three weaknesses, of which two findings are repeated.
Findings/ Recommendations	<p>COMPANY</p> <p>Finding 1 - Out-of-State Driver Tested – Not Trained by TCAT2</p> <p>Two of the 22 drivers (9%) included in the sample, that were not residents of Tennessee, were recorded in CSTIMS as “Outside” drivers, (not employees or students of the testing organization). Both of the TCAT2 Driver’s files contained the documents required for an Outside driver and no documents specific to drivers trained by TCAT2. Further review was done using the CSTIMS Test Results analysis Report. During the period starting February 4, 2017 and ending January 15, 2020, an additional 55 non-residents that were recorded on CSTIMS as Outside drivers passed all three parts of the Basic Skills Tests. Of the 55 not-resident drivers, 49 drivers were tested by Examiner James Jones, 2 by Matt Clem and 4 by Dexter Truss.</p>

TCAT Chattanooga
Tennessee Department of Safety and Homeland Security
Commercial Driver License (CDL) Program Review – Page 2 of 4
Period Coverage: March, 2019 – March 30, 2020
February 16, 2021
Executive Summary

Findings/ Recommendations	<p>Recommendation - TCAT2 examiners must never test drivers with an out-of-state CLP/DL except when that driver is an employee or student of a Tennessee College of Applied Technology, in order to comply with 49 CFR §383.79 and with TDOSHS’s interpretation as stated in a January 21, 2016 memo; <i>“As a result of an FMCSA meeting today and compliance with new Final Rules, effective immediately, any out-of-state CDL permit holder applying for a CDL license must have been trained by the testing Organization.”</i>.</p> <p>Finding 2 - Basic Control Skills Pad – Out of Compliance (repeat finding from 2017 and 2014) Twelve of the Basic Control Skills Pad measurements were not in compliance with the standard requirements and varied from AAMVA requirements. The surface was hard packed gravel and marked with steel pegs, string, and cones. The variance between the actual measurements and AAMVA requirements was between 1 inch and 33 feet.</p> <p>A “Skills Test Pad Measurements by CDL Company” form was left with Examiner Truss to be completed by TCAT and returned to TDOSHS after permanent corrections are made. This form was received by TDOSHS on September 29, 2020 indicating the Skills Pad is in compliance.</p> <p><i>The response to this finding in the previous audits stated,</i></p> <ol style="list-style-type: none"> a. We agree with this finding but not with the statement that the form has not been received by TDSOSHS. b. Corrective Action: On 3/15/17 we paid a company to set up concrete blocks and correct the measurements to be in compliance. The concrete blocks are painted appropriately for all the backing maneuvers along with the stop line for class A and class B trucks. This was approved by TDOSHS on 4/7/17. <p>Recommendation – TCAT2 must ensure the Skills Pad is always in compliance with the <i>2005 CDL Examiner’s Manual</i> revised August 2017, Appendix B – Skills Exercises, Instructions & Score Sheets.</p> <p>EXAMINER Finding 3 - Outside Testing – Receipt Missing, Not Dated or Not Signed by Examiner (repeat finding from 2017) Six of the 18 (33%) receipts for outside drivers were either missing from the driver’s file, undated, and/or missing a signature.</p>
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TCAT Chattanooga
Tennessee Department of Safety and Homeland Security
Commercial Driver License (CDL) Program Review – Page 3 of 4
Period Coverage: March, 2019 – March 30, 2020
February 16, 2021
Executive Summary

<p>Findings/ Recommendations</p>	<p>Note: A review of TCAT2 driver files indicated that the drivers made payments directly to the business office and a copy was sent to the examiner. There appears to be a lack of receipts for retesting. There must be a valid receipt for each test, they must be signed by the driver and the agency, even if no fee is charged. In a “no fee charged” instance, a receipt showing zero payment must be signed and dated by both the examiner and driver and a copy placed in the driver’s file. A formal memo updating and clarifying the policy was issued September 6, 2020.</p> <p>Recommendation – TCAT2 examiners must ensure that all outside driver files are complete, including a copy of a receipt between the driver and the agency stating the amount charged for the administration of the skills tests, in order to comply with the <i>Rules of Tennessee Department of Safety, Division of Driver License Issuance, Classified and Commercial Driver Licenses and Temporary Driver Licenses, Third Party Testing</i>, Chapters 1340-1-13-.22(1)(h)4 and (h)5 and with TDOSHS <i>CDL Third Party Policy and Procedures</i>, updated April 8,2015, paragraphs C.3.f.i.</p> <p>Finding 4 - CSTIMS – Schedule Comments Do Not Indicate Inside/Outside Testing No Schedule Comments were entered into CSTIMS for the period of February 16, 2017 through March 31, 2020 stating whether tests were administered to Inside or Outside drivers. The ability to track and analyze Inside Outside testing is vital to the TDOSHS CDL Administration and to verify Third Party compliance.</p> <p>Recommendation – TCAT2 must enter comments when a test is being scheduled to indicate whether the test is for an Inside or Outside driver, in order to comply with <i>Rules of Tennessee Department of Safety, Division of Driver License Issuance, Classified and Commercial Driver Licenses and Temporary Driver Licenses, Third Party Testing</i>, Chapters 1340-1-13-.22(3)(c).</p> <p>Finding 5 - CDL Driver Test File – Completed Awareness Form Not in Driver’s File Seventeen of the 22 (77%) driver test files reviewed, where the driver had passed all Skills Tests, did not have an Awareness Form in file, was improperly dated and signed, or the form was incomplete.</p> <p>Recommendation – TCAT2 must ensure that a copy of the TDOSHS Awareness Form is kept in each driver file as required by TDOSHS <i>CDL Third Party Policy and Procedures</i>, updated April 8, 2015, paragraph C.3.e., and must ensure that an Awareness Form is signed on the eCDL/mCDL tablet, in order to comply with instructions given at CDL training conducted since April 6, 2015. The Awareness Form must be signed and dated on the date the driver passes the CDL examination.</p>
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TCAT Chattanooga
Tennessee Department of Safety and Homeland Security
Commercial Driver License (CDL) Program Review – Page 4 of 4
Period Coverage: March, 2019 – March 30, 2020
February 16, 2021
Executive Summary

Findings/ Recommendations	<p>Finding 6 - CDL Manual Score Sheets – Mathematical Errors Three of the 13 (23%) manual test score sheets reviewed did not have the points counted correctly. This caused the scores recorded on CSTIMS and the State’s DL recording system to be incorrect.</p> <p>Recommendation – Examiners must ensure that the points are accurately and carefully counted and recorded on each CDL Skills Tests Score Sheet in order to comply with the AAMVA CDL Examiner’s Manual revised August 2017, Section 6.6, Calculating the Driver's Score.</p> <p>Finding 7 - CDL Manual Skills Tests Score Sheets - Final Position Not Marked One of the 7 (14%) Manual Score Sheets reviewed, that included the Basic Control Skills Tests, did not have marks for the final position of the vehicle after completing each exercise. The Examiner must mark the 0 or the 10 to indicate the final position of the vehicle at the completion of the Basic Control Skills Tests.</p> <p>Recommendation – Examiners must ensure that the 0 or the 10 are marked in order to comply with the AAMVA <i>2005 CDL Examiner’s Manual</i> revised August 2017, Section 5.2, General Scoring Procedures, <i>Position</i>.</p>
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**Tennessee Board of Regents
Audit Committee
June 1, 2021**

***Internal Audit Reports
Financial Management***

**Volunteer State Community College
Work Component Financial Aid Awards
Fiscal Year 2020
Report Date: March 16, 2021
Executive Summary**

Key Staff Personnel	Financial Aid Office	Internal Auditor	Nancy Batson
Introduction	Volunteer State Community College offers a variety of financial aid programs to help students meet or defray the cost of education. Within the financial aid options, four award opportunities include a work component requirement: Federal Work Study Program; Academic Service Scholarship; President’s Ambassador Scholarship; and Pioneer Connections Peer Mentor Program.		
Objectives	The objective of the audit is to determine if the financial aid awards that include a work component comply with applicable requirements.		
Scope	The audit reviewed work component awards for fiscal year 2019-2020.		
Conclusion	Except as noted, the work component financial aid awards, including the Federal Work Study Program, the Academic Service, the President’s Ambassadors, and the Pioneer Connections Peer Mentor Program, appear to comply with applicable requirements.		
Recommendations	<ol style="list-style-type: none"> 1. The college should ensure that federal work study students use sign-in sheets so hours may be tracked and monitored as prescribed in the Volunteer State College Work Study Program booklet. 2. The college should ensure that students receiving a work component award do not work during class time. Additionally, the federal work study students should have an approved work schedule that ensures the student is not scheduled to work during class time. 3. The college should award the ambassador scholarships in the correct amount. The scholarship award should cover full in-state tuition and fees plus a \$300 book stipend. 4. The campus access fee should not be deducted from federal work study student payroll. The students pay this fee through the student fee assessment. 5. Evaluations should be completed for all federal work study and academic service scholarship students. 6. The college should accurately report the participants and federal wage amounts of community service activities on the Department of Education FISAP report. 		

Tennessee College of Applied Technology-Livingston
Audit of President's Expenses – Page 1 of 2
For the Period July 1, 2019 – June 30, 2020
Executive Summary
March 22, 2021

President	Dr. Myra West	Internal Auditor	Helen Vose, TCAT Internal Auditor																																																																				
Objectives	To comply with Tennessee Code Annotated, Title 49, Chapter 7, by performing an internal financial audit of the Office of the President for the fiscal year ended June 30, 2020; to determine compliance with institutional and Tennessee Board of Regents policies regarding expenses; to identify and report all expenses incurred by, at the direction of, or for the benefit of the President regardless of the funding source; and to search for and report any expenses not disclosed on expense schedules prepared by the institution.																																																																						
Scope	The audit scope included all accounts under the direct budgetary control of the President and expenses funded by institutional funds, foundations, or vendors and any expenses made by, at the direction of, or for the benefit of the President during the fiscal year. The audit was conducted in accordance with the <i>International Standards for the Professional Practice of Internal Auditing</i> , issued by the Institute of Internal Auditors and accordingly included tests of the accounting records and such other auditing procedures considered necessary.																																																																						
Analysis	<p>The following is a summary of (1) certain expenses made by, at the direction of, or for the benefit of the President, and (2) salaries, benefits, and other operating expenses for the President's office during the fiscal year ended June 30, 2020:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">TCAT Livingston</th> <th style="text-align: center;">Foundation</th> <th style="text-align: center;">Vendor</th> <th style="text-align: center;">Total</th> </tr> </thead> <tbody> <tr> <td colspan="5">President (1):</td> </tr> <tr> <td>Salary</td> <td style="text-align: right;">\$113,378</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: right;">\$113,378</td> </tr> <tr> <td>Benefits</td> <td style="text-align: right;">\$26,735</td> <td></td> <td></td> <td style="text-align: right;">\$26,735</td> </tr> <tr> <td>Travel</td> <td style="text-align: right;">\$1,483</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: right;">\$1,483</td> </tr> <tr> <td>Business Meals & Hospitality</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> </tr> <tr> <td>Other</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> </tr> <tr> <td colspan="5">Office (2):</td> </tr> <tr> <td>Salaries & Benefits</td> <td style="text-align: right;">\$46,007</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: right;">\$46,007</td> </tr> <tr> <td>Travel</td> <td style="text-align: center;">\$0</td> <td></td> <td></td> <td style="text-align: center;">\$0</td> </tr> <tr> <td>Other Operating</td> <td style="text-align: center;">\$0</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">\$0</td> </tr> <tr> <td>Total Expenses</td> <td style="text-align: right;">\$187,603</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: right;">\$187,603</td> </tr> </tbody> </table> <p>In addition, the allowances listed below were provided to the President during the year. Use of the expense allowances were not included in tests performed during the audit because the President elected for the allowance to be paid as taxable income. Any personal use value of the vehicle is reported to the President as taxable income.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td>Expense Allowance</td> <td style="text-align: right;">\$2,000</td> </tr> <tr> <td>Housing Allowance</td> <td style="text-align: right;">\$6,000</td> </tr> <tr> <td>Vehicle Allowance</td> <td style="text-align: right;">\$8,400</td> </tr> </tbody> </table>						TCAT Livingston	Foundation	Vendor	Total	President (1):					Salary	\$113,378	-	-	\$113,378	Benefits	\$26,735			\$26,735	Travel	\$1,483	-	-	\$1,483	Business Meals & Hospitality	-	-	-	-	Other	-	-	-	-	Office (2):					Salaries & Benefits	\$46,007	-	-	\$46,007	Travel	\$0			\$0	Other Operating	\$0	-	-	\$0	Total Expenses	\$187,603	-	-	\$187,603	Expense Allowance	\$2,000	Housing Allowance	\$6,000	Vehicle Allowance	\$8,400
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Tennessee College of Applied Technology-Livingston
Audit of President's Expenses – Page 2 of 2
For the Period July 1, 2019 – June 30, 2020
Executive Summary
March 22, 2021

Conclusion	The audit of the President's Expenses for the Tennessee College of Applied Technology-Livingston for the period July 1, 2019 through June 30, 2020, revealed no significant deficiencies in internal controls, no large or unusual expenditures, and the expenditures were in compliance with TBR purchasing policies and regulations.
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Tennessee College of Applied Technology-Shelbyville
Audit of President's Expenses – Page 1 of 2
For the Period July 1, 2019 – June 30, 2020
Executive Summary
March 22, 2021

President	Dr. Laura Monks	Internal Auditor	Helen Vose, TCAT Internal Auditor																																																																				
Objectives	To comply with Tennessee Code Annotated, Title 49, Chapter 7, by performing an internal financial audit of the Office of the President for the fiscal year ended June 30, 2020; to determine compliance with institutional and Tennessee Board of Regents policies regarding expenses; to identify and report all expenses incurred by, at the direction of, or for the benefit of the President regardless of the funding source; and to search for and report any expenses not disclosed on expense schedules prepared by the institution.																																																																						
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Tennessee College of Applied Technology-Shelbyville
Audit of President's Expenses – Page 2 of 2
For the Period July 1, 2019 – June 30, 2020
Executive Summary
March 22, 2021

Conclusion	The audit of the President's Expenses for the Tennessee College of Applied Technology-Shelbyville for the period July 1, 2019 through June 30, 2020, revealed no significant deficiencies in internal controls, no large or unusual expenditures, and the expenditures were in compliance with TBR purchasing policies and regulations.
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**Tennessee Board of Regents
Audit Committee
June 1, 2021**

***Internal Audit Reports
Institutional Support***

**Columbia State Community College
Campus Safety & Security: Door Allocation
FY 2018-2020
November 5, 2020
Executive Summary**

Key Staff Personnel	Dr. Tim Hallmark, Director, Facilities & Campus Safety Elaine Curtis, Vice President, Financial and Administrative Services	Internal Auditor	Erica Smith, CPA
Introduction	In March 2016, the Acting Tennessee Board of Regents (TBR) Chancellor created the Campus Safety and Security Task Force to be proactive in maintaining campus safety across the Tennessee Board of Regents System. Based on a TBR administered Faculty and Staff Campus Safety Climate survey, the Task Force determined three of the most beneficial safety measures related to locking mechanisms on classroom and building doors. Columbia State Community College’s three-year allocation to address locking mechanisms on classroom and building doors totaled \$128,340.		
Objectives	The objectives of the audit engagement focused on ascertaining whether Columbia State Community College expended the Tennessee Board of Regent’s campus safety and security door allotment as intended and providing recommendations for future security improvements.		
Conclusion	The engagement outcomes reflect the college’s adherence to the Tennessee Board of Regents restricted use of the campus safety & security door allocation.		

**Tennessee Board of Regents
Audit Committee
June 1, 2021**

***Internal Audit Reports
Instruction & Academic Support***

**Chattanooga State Community College
Faculty Credentials
Spring, Summer, and Fall Semesters 2020
January 27, 2021
Executive Summary**

Key Staff Personnel	Executive Director, Institutional Effectiveness, Research and Planning Dean, Academic Assessment, Accreditation and Compliance	Internal Auditor	Kimberly Clingan Director, Internal Audit
Introduction	The audit of faculty credentials was requested by the President of the college to ensure that all full-time and part-time faculty hired by the College meet the requirements of the College’s accrediting agency, Southern Association of Colleges and Schools (SACS). The ability to hire qualified faculty continues to be an area of concern as documented in the College’s risk assessment for instruction and academic support.		
Objectives	The objectives of the audit were: <ul style="list-style-type: none"> • To determine the requirements necessary for compliance with SACS criteria and college policies. • To determine whether faculty employed meet credential requirements. • To determine whether documentation maintained was sufficient to document compliance. 		
Conclusion	ChSCC’s Faculty Credential policy and procedures are well defined and provide adequate internal controls to maintain compliance with SACSCOC requirements. However, incomplete supporting documentation for credentials of seven faculty tested and issues with defined requirements for the Therapy programs caused compliance issues with the Faculty Qualifications Manual.		
Recommendations	Based on the performed audit procedures, Internal Audit recommends that the identified exceptions be corrected through addition of appropriate supporting faculty credential documentation and/or adjustments to the Faculty Qualification Manual.		
Management Response	Management concurs with the recommendation. The Dean of Academic Assessment, Accreditation, and Compliance will work with the Academic Divisions to correct the identified deficiencies by May 31, 2021.		

**Nashville State Community College
Confidentiality of Student Records
July 1, 2019 through June 30, 2020
March 30, 2021
Executive Summary**

Key Staff Personnel	Vice President of Student Affairs and Enrollment Management, Director of Records and Registration	Internal Auditor	Henry Ho, CPA, CGFM
Introduction	TBR establishes policy 3.02.03.00, <i>Confidentiality of Student Records</i> , to protect the confidentiality of student’s records. Appropriate references to the policy should be included in the faculty and staff handbook and in orientation sessions for new employees who work with or have access to student records. Each institution should develop policies and procedures consistent with policy 3.02.03.00 and the related guideline S-020, and students should be informed annually of their rights under the institutional policies and procedures.		
Objectives	<p>The objectives of our audit were to:</p> <ul style="list-style-type: none"> • determine if the College complies with TBR policies related to confidentiality of student records; and • determine if the College has developed policies and procedures consistent with TBR guidelines. 		
Scope	<p>We have audited Nashville State Community College’s confidentiality of student records for the period July 1, 2019, through June 30, 2020.</p> <p>We conducted our audit in accordance with the <i>International Standards for the Professional Practice of Internal Auditing</i> issued by the Institute of Internal Auditors. The audit included tests of controls and other procedures considered necessary to achieve the audit objectives.</p>		
Conclusion	The College generally complies with Tennessee Board of Regents’ policy 3.02.03.00, <i>Confidentiality of Student Records</i> , and has developed policies and procedures consistent with TBR guideline S-20.		

**Pellissippi State Community College
Faculty Credentials
Fall Semester 2020
January 29, 2021
Executive Summary**

Key Staff Personnel	L. Anthony Wise, President & Kathryn Byrd, Interim Vice President of Academic Affairs	Internal Auditor	Suzanne L. Walker, Director of Internal Audit
Introduction	The audit of faculty credentials was requested by the president of the College. This audit is an annual audit requested by the president to ensure that all full- and part-time faculty hired by the College each fall meet the requirements of the College’s accrediting agency. Additionally, the ability to hire qualified faculty continues to be an area of concern as documented in the College’s risk assessment for instruction and academic support.		
Objectives	To determine whether the requirements necessary for compliance with Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) criteria were being met; to determine whether the documentation maintained by the College was sufficient to document compliance with the criteria; and to recommend improvements, if any are necessary.		
Conclusion	The College needs to continue to make improvement in documenting that faculty hired to teach are qualified. After discussions with the President, as well as with the Interim Vice President of Academic Affairs, it appears that management understands the problem and has been making every effort to prevent it from occurring in the future. The Interim Vice President is to be commended for her efforts to ensure that the college hires only qualified faculty and that documentation provided is sufficient to satisfy the requirements of the SACSCOC accreditation standards.		
Recommendations	There were no formal audit recommendations related to this audit.		

**Tennessee Board of Regents
Audit Committee
June 1, 2021**

***Internal Audit Reports
Investigations***

Tennessee College of Applied Technology - Hohenwald
Review of Allegations regarding the Cosmetology Program
For the Period July 1, 2019 to September 4, 2020
March 18, 2021
Executive Summary

Auditee	TCAT – Hohenwald	Auditor	Jennifer M. Garoutte, Investigative Audit Manager
Introduction	<p>The investigative audit began due to several allegations regarding the termination of a cosmetology instructor. Upon further review, it was reported to us that the Cosmetology Cash drawer was found to be short approximately \$89 on September 3, 2020. When questioned about the shortage by the President and Vice President, the Cosmetology Instructor initially stated the money must have been in a different location. When the money could not be found, the President scheduled a meeting with the Cosmetology Instructor and the Adjunct Cosmetology Instructor for the following day. The instructor did not attend the meeting and later in the day submitted her resignation effective immediately.</p>		
Objectives	<p>The objectives of the investigation were to determine if all fees paid for cosmetology services were deposited with the business office.</p>		
Scope	<p>The investigation covered cosmetology services provided between July 1, 2019 and September 4, 2020.</p>		
Findings & Recommendations	<p>Finding – Weaknesses in controls over collections leave us unable to determine if or how much money may be missing from the Cosmetology Program.</p> <p>Recommendations –</p> <p>In accordance with TBR and TCAT policy, deposits of Cosmetology funds are made weekly; however, the program should consider making deposits from the classroom to the business office at the end of each salon day.</p> <p>Reconciliations should be completed daily and signed by both the instructor and the student. The TCAT should consider requiring daily deposits from the classroom to the business office for programs collecting cash regularly.</p> <p>Only instructors should be allowed to sign for service ticket books.</p> <p>Information on service tickets and work order documents should be completed and the total collected included on the service ticket. The TCAT may want to consider amending their service tickets to include a space to mark whether a new work order was issued and if the fee was paid with this service ticket.</p> <p>If the TCAT wishes to continue using discounts for various individuals, these should be put into a written policy and approved by TBR.</p> <p>The Cosmetology Program may want to use special service tickets for free haircut days to help maintain a record of the services provided.</p>		

**Tennessee Board of Regents
Audit Committee
June 1, 2021**

***Internal Audit Reports
Follow-ups***

Columbia State Community College
Follow-up on Policy Review and Conflict of Interest
March 2021
Executive Summary
March 29, 2021

Key Staff Personnel	Dr. Janet F. Smith, President Elaine Curtis, Vice President, Financial and Administrative Services	Internal Auditor	Erica Smith, CIA, CPA
Introduction	<p>In July 2019, Columbia State Internal Audit released two reports: <i>Policy Review</i> and <i>Conflict of Interest</i> that contained observations focused on strengthening the control environment.</p> <p>Internal Audit conducted this follow-up engagement to determine the status of management’s actions to remedy the root causes identified.</p>		
Objectives	<p>The objectives of the internal audit engagement focused on ascertaining the internal controls implemented by management to address the Internal Audit engagement outcomes and assessing whether those controls were in place and functioning at the time of review.</p>		
Scope	<p>The auditor verified controls in place between July 2020 and March 2021.</p>		
Conclusion	<p>The engagement outcomes reflect management has completed agreed upon actions and the implemented controls are in place and operational at the time of review.</p>		

Jackson State Community College
Follow-up to JSCC Foundation Audit – Page 1 of 2
For July 2019 – October 2020
December 15, 2020
Executive Summary

Key Staff Personnel	Director of Community Development & Foundation	Internal Auditor	Chrystal Pittman
Introduction	<p>An audit of the Jackson State Community College (JSCC) Foundation was conducted for fiscal year 2018-2019. The report was issued on February 17, 2020 with the objective of obtaining an understanding of the Foundation’s control environment and its effectiveness, assessing the Foundation’s compliance with the formal written agreement between the Foundation and the College, and determining the Foundation’s compliance with TBR Policy 4.01.07.02, <i>Foundations</i>.</p> <p>The report included two recommendations.</p>		
Objective	To determine if management implemented adequate corrective actions to address recommendations noted in the internal audit of the JSCC Foundation.		
Scope	The current review covered the July 2019- October 2020 timeframe.		
Conclusion	Based on tests performed for the period under review, more work is needed to adequately address the recommendations noted in the audit report. A second follow-up will be conducted at a future date.		
Recommendations	<p>Recommendation 1: The Foundation has developed some policies and procedures, however; the foundation should ensure that adequate policies and procedures exist for the Foundation operations as required by TBR Policy 4.01.07.02, <i>Foundations</i>. All policies should be approved by the Foundation Board.</p> <p>Management’s Response: Management concurs with this recommendation. The Director of Development and Community Relations is currently reviewing existing documents to determine which policies already exist, which policies are in need of revision, and which policies need to be created. Work has also begun on the creation of a policy manual for the Foundation Board. While this project will take time to complete, policies will be presented to the Foundation Board for approval as they are finalized. These policies will then be compiled into a manual as they are approved. Currently, the following policies are ready for approval by the Foundation Board: Travel, Computer, Events, Cellphone, Purchasing Policy, and Social Media. These policies will be presented and approved by the June 4, 2020 meeting.</p>		

Jackson State Community College
Follow-up to JSCC Foundation Audit – Page 2 of 2
For July 2019 – October 2020
December 15, 2020
Executive Summary

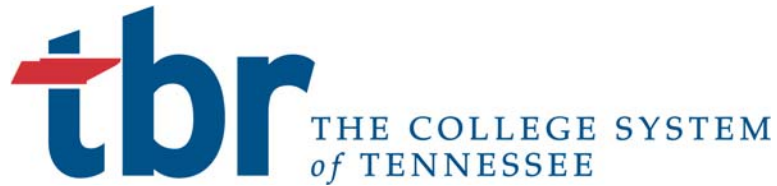
<p>Cont. Recommendations</p>	<p>Current Status: Management is in the process of developing foundation policies and procedures for review and approval by the foundation board.</p> <p>Recommendation 2: An annual report was issued for the period under review; however, the Foundation staff did not provide a budget or a listing of needs or priorities to the Foundation Board as required by TBR Policy 4.01.07.02, <i>Foundations</i>.</p> <p>Foundation management should create an annual budget and advise the foundation of its needs and priorities for the upcoming year. The budget should be approved by the Foundation Board.</p> <p>Management’s Response: Management concurs with this recommendation. Beginning with the current year, the annual budget for the Foundation will be completed during the budget submission period for the college (i.e., generally during the month of March). The budget will be reviewed with the Foundation chair and the Budget, Investment, and Finance (BIF) committee. At this time, the Director of Development will advise the chair and the committee of needs and priorities for the upcoming year. Once approved by the chair and the BIF committee, the proposed budget, as well as needs and priorities for the upcoming year will be presented to the Foundation Board for final approval during the June board meeting. The budget for 2019-2020 will be presented for approval at the June 4, 2020 meeting.</p> <p>Current Status: Management is in the process of developing a budget and priority listing for review and approval by the foundation board.</p>
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Northeast State Community College
Follow-Up to the State Audit Report Issued August 10, 2020 – Page 1 of 2
For Fiscal Years Ending June 30, 2019 and June 30, 2018
Executive Summary

Key Staff Personnel	Chief Financial Officer and Vice President of Administrative Services	Internal Auditor	Christopher Hyder
Introduction	Northeast State Community College’s financial statement audit for the years ended June 30, 2019 and June 30, 2018 contained three findings. As required, Internal Audit has performed a follow-up review of actions taken in response to the finding.		
Objective	The objective of this review is to determine if management has implemented corrective actions for the finding noted in the Division of State Audit’s annual audit report for the fiscal years ended June 30, 2019 and June 30, 2018.		
Current Status of Findings	<p>1. <u>Northeast State Community College did not provide adequate internal controls in two areas, including one area noted in the three prior audits</u></p> <p><i><u>Current Status</u></i> Partially complete. Progress has been made in both areas cited and it appears that management’s actions are on schedule for completion by the end of fiscal year 2021.</p> <p>2. <u>College management did not ensure the accuracy of its statement of cash flows for the fiscal year ended June 30, 2018</u></p> <p><i><u>Current Status</u></i> Complete. Management continues with the actions cited in the original audit recommendation and management’s comment.</p> <p>3. <u>College management needs to ensure accurate financial reporting of capital asset activity</u></p> <p><i><u>Current Status</u></i> Partially complete. The responsibility for capital asset accounting is scheduled to be transitioned to a Senior Accountant/Analyst by the end of March 2021. All other actions cited in the original audit recommendation and management’s comment have been completed.</p>		

Northeast State Community College
Follow-Up to the State Audit Report Issued August 10, 2020 – Page 2 of 2
For Fiscal Years Ending June 30, 2019 and June 30, 2018
Executive Summary

Conclusion	Based on the results of tests and procedure performed, management has taken appropriate actions to address the audit findings, implement the audit recommendations, and mitigate the associated risks. While some of the actions were not complete at the time of this review, those remaining appear to be on schedule for completion by the end of fiscal year 2021.
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BOARD TRANSMITTAL

MEETING: Committee on Audit

SUBJECT: System-wide Internal Audit Updates

DATE: June 1, 2021

PRESENTER: Mike Batson

ACTION REQUIRED: Informational Report

STAFF'S
RECOMMENDATION: Accept Report

Mike Batson will give brief updates for the following items:

- TCAT Management's Risk Assessments to be Discussed in Executive Session
- TBR System Office Performance Review
- Internal Quality Assessments
- Internal Audit April Training Session

BOARD TRANSMITTAL

MEETING: Committee on Audit

SUBJECT: University Updates

DATE: June 1, 2021

PRESENTER: Mike Batson

ACTION REQUIRED: Informational Report

STAFF'S
RECOMMENDATION: Accept Report

The Chief Audit Executive will provide an update regarding the university audit activities under the FOCUS Act. The following is a summary of key actions received by the Office of System-wide Internal Audit.

Summary of Recent Activities

- The State of Tennessee Comptroller of the Treasury released the Financial and Compliance Audit Report for the below universities.

FINANCIAL AND COMPLIANCE AUDITS –FINDINGS

East Tennessee State University
— FYE June 30, 2020

FINANCIAL AND COMPLIANCE AUDITS –NO FINDINGS

Austin Peay State University
— FYE June 30, 2020

Middle Tennessee State University
— FYE June 30, 2020

University of Memphis
— FYE June 30, 2020

**Tennessee Board of Regents
Audit Committee
June 1, 2021**

***Review of Comptroller's Office Audit Reports- Universities
Financial and Compliance Audits—Findings Reported***

Institution	For the Year Ended	Auditor's Opinion on Financial Statements	Report on Internal Control	Report on Compliance	Findings
East Tennessee State University	June 30, 2020	Unmodified Opinion	One internal control finding was identified as a material weakness	No instances of noncompliance required to be reported	1

Finding 1 – East Tennessee State University did not have adequate internal controls in three areas

The university did not design and monitor effective internal controls in three areas. For two of the areas, we found internal control deficiencies related to one of the university's systems that were in violation of university policies or industry-accepted best practices. We also observed another condition where adequate written internal controls were not in place.

Ineffective implementation and operation of internal controls increases the likelihood of errors, data loss, and unauthorized access to university information. Pursuant to Standard 4.40 of the U.S. Government Accountability Office's *Governmental Auditing Standards*, we omitted details from this finding because they are confidential under the provisions of Section 10-7-504(i), *Tennessee Code Annotated*. We provided the university with detailed information regarding the specific conditions we identified, as well as the related criteria, causes, and our specific recommendations for improvement.

Recommendation - Management should ensure that these conditions are remedied by promptly developing and consistently implementing internal controls in these areas. Management should implement effective controls to ensure compliance with applicable requirements; assign staff to be responsible for ongoing monitoring of the risks and mitigating controls; and take action when deficiencies occur.

Management's Comment – We concur with the finding and recommendation. The three areas indicated in the report have undergone review by management. Internal controls have been developed to address the conditions identified. New procedures have been established to ensure separation of duties as well as to assign responsibility for ongoing monitoring to staff. Annual training of staff will be conducted, and documentation of attendance will be maintained.

BOARD TRANSMITTAL

MEETING: Committee on Audit

SUBJECT: Review of Revisions to Fiscal Year 2021 Audit Plans

DATE: June 1, 2021

PRESENTER: Mike Batson

ACTION REQUIRED: Roll-Call Vote

STAFF'S
RECOMMENDATION: Approve

The Office of Internal Audit at each campus and the system office prepares an annual Audit Plan at the beginning of each fiscal year. Each plan is based upon the staffing and hours available to perform audits and is prepared in conjunction with an annual risk analysis of the audit universe. The audit plans include required audits, risk-based audits, known investigations and special requests or projects. During the year, changes in audit priorities and staffing may result in alterations to the plan.

A summary of significant revisions to the plans from January 2021 to March 2021 is attached, followed by the revised plan for each of the audit offices.

**Tennessee Board of Regents
Summary of Revisions
Fiscal Year 2021 Audit Plans**

Overview of Significant Revisions: Below are revisions to the audit plans created in July 2020, reflecting changes which occurred from January 1, 2021 to March 31, 2021. Changes in audit priorities result in most revisions to audit plans. Investigations and special projects occur and sometimes replace risk-based or other planned audits. However, time budgets may also be increased or decreased depending on circumstances encountered during an audit and the time needed to achieve the audit objectives.

Institution	Significant Revisions to Audit Plans Since January 1, 2021
ChSCC	Added CCTA Outcome Measure review.
CISCC	Removed Workforce Training Hours and CARES Act Reviews. Added CCTA-Completion Review, QAR Self Review, and Nursing Adjunct Hours Review.
DSCC	Removed Workforce Development Contact Hours Review and CARES Act Review.
MSCC	Removed CARES Act Review Added CCTA-Completion Review.
NaSCC	Removed CARES Act Review and Police Department Review. Added Internal QAR Assessment and Foundation Audit Follow-up.
NeSCC	Removed CARES Act Review.
PSCC	Removed CARES Act Review.
RSCC	Removed CARES Act Review.
STCC	Removed Follow-up to Whitehaven Federal Work Study Review.
VSCC	Removed CARES Act Review.
TBR- Investigations	Added Investigations TBR 21-02, TBR 21-03, TBR 21-04, TBR 21-05, TBR 21-06.
TBR- TCAT	Removed FY 20 Perkins Audit and FY 20 TCAT Dickson SFA Review.

Chattanooga State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2021
Revised April 2021

Area	Type	Audit	Risk Factor	Estimated Audit Start Date	Original Hours Planned	Revised Plan	Revised to Original		FN	Planned to Actual		Completion Date	Current Status
							Change in Hours	Change in Percentage		Actual Hours	Variance		
IS	C	Management Advisory Services	5.0	Jul-20	120.0	95.0	-25.0	-21%	1	73.0	22.0		In Progress
FM	F	State Audit Assist/Follow-up	5.0	Jul-20	40.0	40.0	0.0	0%		15.0	25.0		In Progress
IS	F	Follow up Reviews	5.0	Jul-20	75.0	75.0	0.0	0%		49.0	26.0		In Progress
IS	I	Unscheduled Investigations	5.0	Jul-20	100.0	25.0	-75.0	-75%	3	0.0	25.0		Scheduled
IS	I	Developing Investigations-Assist TBR	5.0	Jul-20	15.0	40.0	25.0	167%	3	30.0	10.0		In Progress
IS	I	INV-2020-02	5.0	Jan-20	60.0	75.0	15.0	25%	3	45.0	30.0		In Progress
IS	I	INV-2020-03	5.0	Apr-20	40.0	40.0	0.0	0%		41.0	-1.0	Jul-20	Completed
IS	P	QAR Self Assessment	5.0	Apr-21	60.0	60.0	0.0	0%		6.0	54.0		In Progress
FM	S	YE Procedures FYE 2020	5.0	Jun-21	10.0	10.0	0.0	0%		10.0	0.0	Jul-20	Completed
FM	S	YE Procedures FYE 2021	5.0	Jun-20	15.0	15.0	0.0	0%		0.0	15.0		Scheduled
IS	M	Enterprise Risk Assessment	5.0	Nov-20	35.0	35.0	0.0	0%		31.0	4.0	Jan-21	Completed
SS	R	Workforce Training Hours	5.0	Feb-21	100.0	60.0	-40.0	-40%	3	50.0	10.0		In Progress
IA	S	TCAT Auto Client Services	5.0	Nov-19	40.0	40.0	0.0	0%		44.0	-4.0	Dec-20	Completed
IS	R	Campus Safety	5.0	May-20	40.0	40.0	0.0	0%		43.0	-3.0	Jul-20	Completed
IS	S	Campus Safety Task Force Recommendations	5.0	Jul-20	40.0	40.0	0.0	0%		39.0	1.0	Sep-20	Completed
IA	S	Faculty Credentials	5.0	Oct-20	100.0	100.0	0.0	0%		102.0	-2.0	Jan-21	Completed
IT	S	IAR-NACHA-2020	5.0	Sep-20	60.0	60.0	0.0	0%		59.0	1.0	Dec-20	Completed
FM	A	Procurement Card Purchases	3.4	Mar-21	100.0	100.0	0.0	0%		11.0	89.0		In Progress
IA	M	Barbering Program Inventory	5.0	Sep-20	0.0	25.0	25.0	100%	1	25.0	0.0	Sep-20	Completed
FM	R	CARES Act Funding	5.0	May-21	0.0	0.0	0.0	100%	2	0.0	0.0		Removed
SS	R	CCTA Outcome Measure	5.0	May-21	0.0	75.0	75.0	100%	2	0.0	75.0		Scheduled

Total Planned Audit Hours: 1050.0 1050.0 0.0 673.0 377.0

Estimated Available Audit Hours = 1050

Functional Areas:

- AD - Advancement
- AT - Athletics
- AX - Auxiliary
- FM - Financial Management
- IA - Instruction & Academic Support
- IS - Institutional Support
- IT - Information Technology
- MC - Marketing and Campus Activities
- PP - Physical Plant
- RS - Research
- SS - Student Services

Audit Types:

- R - Required
- A - Risk-Based (Assessed)
- S - Special Request
- I - Investigation
- P - Project (Ongoing or Recurring)
- M - Management's Risk Assessment
- C - Consultation
- F - Follow-up Review
- O - Other

Status:

- Scheduled
- In Progress
- Completed
- Removed

FN1 - Added request from TCAT Management and reduced hours for management advisory services.
 FN2 - Removed request for CARES Act due to delays in guidance and added CCTA Outcome Measure.
 FN3 - Projects reduced to facilitate investigations and other requests.

**Columbia State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2021
Revised March 2021**

Area	Type	Audit	Risk Factor	Estimated Audit Start Date	Original Hours Planned	Revised Plan	Revised to Original		FN	Planned to Actual		Completion Date	Current Status
							Change in Hours	Change in Percentage		Actual Hours	Variance		
FM	R	State Audit Year End Work	5.0	May-21	22.5	22.5	0.0	0%			22.5		
PP	R	Campus Safety & Security	5.0	Jul-20	37.5	36.0	-1.5	-4%	2	35.8	0.3	Nov-20	Completed
FM	S	President's Expense - CISCC	5.0	Oct-20	75.0	66.0	-9.0	-12%	2	66.1	0.0	Oct-20	Completed
IA	R	CCTA-Progression	5.0	Jan-21	52.5	120.0	67.5	129%	3	2.8	117.3		
FM	R	CARES Act Review	5.0	Apr-21	150.0	120.0	-30.0	-20%	2		120.0		
IS	F	Engagement Follow-up/Monitoring	5.0	Aug-20	60.0	22.5	-37.5	-63%	5	12.6	9.9	Oct-20, Jan-21	In Progress
IT	F	SWIA LOU Follow-up	5.0	Jul-20	52.5	82.5	30.0	57%	2	82.5	0.0	Mar-21	Completed
IA	F	WF/CE IA Engagement Follow-up	5.0	Jul-20	22.5	35.0	12.5	56%	2	34.2	0.9	Nov-20	Completed
SS	F	Financial Aid (3rd Party Risk Mgmt) IA Engagement FU	5.0	Dec-20	22.5	47.5	25.0	111%	2	44.3	3.3		In Progress
IS	F	Policy Review Engagement FU	5.0	Jul-20	15.0	35.0	20.0	133%		34.7	0.4	Mar-21	Completed
IS	F	Conflict of Interest FU	5.0	Jul-20	0.0	4.0	4.0	100%	4	4.00	0.0	Mar-21	Completed
AD	F	Foundation Engagement Follow-up	5.0	Jul-20	7.5	1.6	-5.9	-79%	2	1.6	0.0	Jul-20	Completed
FM	F	State Audit Findings FU	5.0	Jun-20	0.0	1.6	1.6	100%		1.60	0.0	Jul-20	Completed
FM	M	Review Management's Risk Assessment	5.0	Jan-21	22.5	13.8	-8.7	-39%	2	13.8	0.1	Jan-21	Completed
AT	C	Title IX Gender Equity Assessment	3.5	Aug-20	75.0	52.5	-22.5	-30%	2	25.1	27.4		In Progress
IS	C	Informal Consulting		Jul-19	75.0	73.7	-1.3	-2%	2	64.9	8.8		In Progress
IS	P	Data Analytics - QAIP		Nov-20	202.5	74.0	-128.5	-63%	2		74.0		
IS	P	Awareness & Education		Dec-20	105.0	30.0	-75.0	-71%	2	23.55	6.5		Scheduled
IS	P	Quality Assurance Review - 3yr		Aug-20	52.5	55.0	2.5	5%	2	55.00	0.0		In Progress
IS	C	Complaint Processing		Aug-20	0.0	0.5	0.5	100%	2	3.50	-3.0	Aug-20	Completed
SS	C	Financial Aid 2019	5.0	May-19	0.0	1.3	1.3	100%	6	1.25	0.0	Feb-21	Completed
IS	P	COVID Value-Added Services		Aug-20	0.0	255.0	255.0	100%	1	242.95	12.1		In Progress
Total Planned Audit Hours:					1050.0	1150.0	100.0				749.9	400.1	
Estimated Available Audit Hours =					1050								

Functional Areas:
AD - Advancement
AT - Athletics
AX - Auxiliary
FM - Financial Management
IA - Instruction & Academic Support
IS - Institutional Support
IT - Information Technology
MC - Marketing and Campus Activities
PP - Physical Plant
RS - Research
SS - Student Services

Audit Types:
R - Required
A - Risk-Based (Assessed)
S - Special Request
I - Investigation
P - Project (Ongoing or Recurring)
M - Management's Risk Assessment
C - Consultation
F - Follow-up Review
O - Other

Status:
Scheduled
In Progress
Completed
Removed

FN1 - Value-added services during COVID-19
FN2 - Adjustments to meet needs of engagements
FN3 - Audit Renamed - SWIA changed focus from WFD to Progression; increased audit hours to accommodate new focus
FN4 - Separated from Policy Review FU
FN5 - Adjusted Follow-up Process; individually listed engagements
FN6 - Administratively Close September 2019; document not previously filed with SWIA

Dyersburg State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2021
Revised April 2021

Area	Type	Audit	Risk Factor	Estimated Audit Start Date	Original Hours Planned	Revised Plan	Revised to Original		FN	Planned to Actual		Completion Date	Current Status
							Change in Hours	Change in Percentage		Actual Hours	Variance		
PP	R	Physical Security/Campus Safety		Jun-20	20.0	42.0	22.0	110%		42.0	0.0	Aug-20	Completed
AD	R	Workforce Development Contact Hours		Dec-20	38.0	0.0	-38.0	-100%	1	0.0	0.0		Removed
IS	P	PII Review		Aug-20	60.0	90.0	30.0	50%		76.0	14.0		In Progress
IS	C	General Consultation		Jul-20	100.0	90.0	-10.0	-10%		81.0	9.0		In Progress
IS	A	Human Resources		Nov-20	65.0	150.0	85.0	131%		88.0	62.0		In Progress
FM	A	Cash Handling		Dec-20	45.0	45.0	0.0	0%		33.0	12.0		In Progress
AT	A	Athletics Eligibility		Jul-20	25.0	50.0	25.0	100%		48.0	2.0		In Progress
AT	A	Athletics, Camps, Clinics & Fundraising		Jan-21	65.0	65.0	0.0	0%		0.0	65.0		Scheduled
IS	R	Risk Assessment		Oct-20	80.0	65.0	-15.0	-19%		65.0	0.0	Dec-20	Completed
IS	R	Follow-up Audits		Jul-20	16.0	6.0	-10.0	-63%		0.0	6.0		In Progress
IS	R	Follow-up on Foundation Audit		Dec-20	54.0	54.0	0.0	0%		54.0	0.0	Dec-20	Completed
IS	R	Follow-up on Investigative Audits		Apr-21	30.0	30.0	0.0	0%		0.0	30.0		Scheduled
FM	A	Records Management and Retention		Apr-21	95.0	80.0	-15.0	-16%		0.0	80.0		Scheduled
IS	I	Unscheduled Investigations		Jul-20	80.0	80.0	0.0	0%		57.0	23.0		In Progress
IS	P	QAR Self Assessment		Nov-20	60.0	106.0	46.0	77%		94.0	12.0		In Progress
SS	R	CARES Act		May-21	120.0	0.0	-120.0	-100%	2	0.0	0.0		Removed
PP	R	Building Security and Keys Audit		Jun-21	110.0	110.0	0.0	0%		0.0	110.0		Scheduled
FM	R	Year End Bank Confirmations		Jun-21	30.0	30.0	0.0	0%		0.0	30.0		Scheduled
Total Planned Audit Hours:					1093.0	1093.0	0.0			638.0	455.0		

Estimated Available Audit Hours = 1093.0

Functional Areas:

- AD - Advancement
- AT - Athletics
- AX - Auxiliary
- FM - Financial Management
- IA - Instruction & Academic Support
- IS - Institutional Support
- IT - Information Technology
- MC - Marketing and Campus Activities
- PP - Physical Plant
- RS - Research
- SS - Student Services

Audit Types:

- R - Required
- A - Risk-Based (Assessed)
- S - Special Request
- I - Investigation
- P - Project (Ongoing or Recurring)
- M - Management's Risk Assessment
- C - Consultation
- F - Follow-up Review
- O - Other

Status:

- Scheduled
- In Progress
- Completed
- Removed

Footnotes: (1) Audit removed at the recommendation of SWIA, will possibly be completed in FY2022.
(2) Audit postponed until FY2022.

Jackson State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2021
Revised April 2021

Area	Type	Audit	Risk Factor	Estimated Audit Start Date	Original Hours Planned	Revised Plan	Revised to Original		FN	Planned to Actual		Completion Date	Current Status	
							Change in Hours	Change in Percentage		Actual Hours	Variance			
IA	R	CCTA Element Audit		April 2021	150.0	150.0	0.0	0%			150.0		Scheduled	
SS	S	Veterans Affairs Student Records		January 2021	125.0	125.0	0.0	0%			111.5	13.5	In Progress	
IS	R	CARES Act		March 2021	200.0	0.0	-200.0	-100%			0.0		Removed	
FM	F	Access and Diversity Follow up		September 2020	125.0	109.5	-15.5	-12%			109.5	0.0	Oct-20	Completed
FM	F	Payroll Follow up		In Progress	100.0	115.5	15.5	16%			115.5	0.0	Aug-20	Completed
IS	F	Conflict of Interest Follow up		March 2021	125.0	31.5	-93.5	-75%			31.5	0.0	Sep-20	Completed
IA	F	Workforce Development Follow up		April 2021	75.0	150.0	75.0	100%			68.5	81.5		In Progress
SS	F	Inv 18-03 Follow up		September 2020	140.0	140.0	0.0	0%			46.5	93.5		In Progress
AT	F	Inv 19-01 Follow up		October 2020	140.0	140.0	0.0	0%			24.0	116.0		In Progress
AD	F	Foundation Follow up		November 2020	140.0	55.0	-85.0	-61%			55.0	0.0	Jan-21	Completed
IS	M	Risk Assessment		December 2020	40.0	101.5	61.5	154%			101.5	0.0	Jan-21	Completed
FM	R	Year-end Procedures		July 2020	40.0	40.0	0.0	0%				40.0		Scheduled
IS	C	General Consultation		As needed	150.0	150.0	0.0	0%			98.0	52.0		Scheduled
IS	F	EMP Follow-up		prior year	0.0	20.0	20.0		1		20.0	0.0	Jun-20	Completed
IS	P	Quality Assurance Review - Year 3		June 2021	0.0	150.0	150.0				18.0	132.0		Scheduled
IS	I	Unscheduled Investigations and Special Requests		As needed	100.0	172.0	72.0	72%				172.0		Scheduled
Total Planned Audit Hours:					1650.0	1650.0	0.0				799.5	850.5		

Estimated Available Audit Hours = 1650

Functional Areas:

- AD - Advancement
- AT - Athletics
- AX - Auxiliary
- FM - Financial Management
- IA - Instruction & Academic Support
- IS - Institutional Support
- IT - Information Technology
- MC - Marketing and Campus Activities
- PP - Physical Plant
- RS - Research
- SS - Student Services

Audit Types:

- R - Required
- A - Risk-Based (Assessed)
- S - Special Request
- I - Investigation
- P - Project (Ongoing or Recurring)
- M - Management's Risk Assessment
- C - Consultation
- F - Follow-up Review
- O - Other

- Scheduled
- In Progress
- Completed
- Removed

FN1: Audit completed in prior fiscal year with time spent on work paper documentation in the current year.

Motlow State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2021
Revised April 2021

Area	Type	Audit	Risk Factor	Estimated Audit Start Date	Original Hours Planned	Revised Plan	Revised to Original		FN	Planned to Actual		Completion Date	Current Status
							Change in Hours	Change in Percentage		Actual Hours	Variance		
AD	R	Workforce Development and Follow Up		Dec-20	80.0	60.0	-20.0	-25%		29.9	30.1		In Progress
PP	R	Security - Physical Observation - Supplemental		Apr-21	75.0	0.0	-75.0	-100%	FN3	3.0	-3.0		Removed
FM	R	CARES Funding		Apr-21	125.0	0.0	-125.0	-100%	FN4	0.0	0.0		Removed
IA	A	Faculty Credentials	5.0	Jul-20	100.0	100.0	0.0	0%		27.0	73.0		In Progress
FM	S	President's Expense Review (Special Request)		Apr-21	75.0	40.0	-35.0	-47%		0.0	40.0		Scheduled
IA	M	Risk Assessment		Nov-20	30.0	35.0	5.0	17%		36.6	-1.6	Jan-21	Completed
IT	A	Information Technology - Follow Up		Sep-20	20.0	15.0	-5.0	-25%		10.6	4.4		In Progress
AT	F	Follow Up INV 1604		Jul-20	30.0	30.0	0.0	0%		1.0	29.0		In Progress
SS	F	Follow Up INV 1801		Jul-20	30.0	120.0	90.0	300%	FN 2	94.2	25.8		In Progress
AT	F	Follow Up INV 1802		Jul-20	30.0	20.0	-10.0	-33%		14.9	5.1		In Progress
SS	F	Follow Up Access and Diversity #2		Jul-20	40.0	85.0	45.0	113%	FN 1	84.9	0.1	Oct-20	Completed
SS	F	Follow Up Access and Diversity #3		Feb-21	40.0	75.0	35.0	88%	FN5	49.3	25.7		In Progress
AD	F	Follow Up Foundation		Aug-20	40.0	40.0	0.0	0%		18.4	21.6		In Progress
AD	I	INV 20-03		Jul-20	50.0	25.0	-25.0	-50%		16.0	9.0		In Progress
FM	C	General Consultation		Jul-20	50.0	100.0	50.0	100%		80.7	19.3		In Progress
IS	P	IIA Quality Assurance Self-Assessment		May-21	20.0	40.0	20.0	100%		0.0	40.0		Scheduled
FM	R	State Audit Assistance - Yr End		Jul-20	20.0	10.0	-10.0	-50%		3.7	6.3		In Progress
IS	I	Unscheduled Investigations		Jul-20	50.0	150.0	100.0	200%		144.2	5.8		In Progress
FM	P	Data Analytics Project		Dec-20	75.0	50.0	-25.0	-33%		17.5	32.5		In Progress
SS	A	Admissions & Records	5.0	Jun-21	80.0	80.0	0.0	0%		0.0	80.0		Scheduled
IS	A	Compliance - Trainings and Disclosures	4.9	Jun-21	80.0	5.0	-75.0	-94%		0.0	5.0		Scheduled
IS	R	CCTA Audit - Completion		May-21		60.0	60.0	N/A	FN6	0.0	60.0		Scheduled
Total Planned Audit Hours:					1140.0	1140.0	0.0			631.9	508.1		
Estimated Available Audit Hours = 1140.0													

Functional Areas:

AD - Advancement
 AT - Athletics
 AX - Auxiliary
 FM - Financial Management
 IA - Instruction & Academic Support
 IS - Institutional Support
 IT - Information Technology
 MC - Marketing and Campus Activities
 PP - Physical Plant
 RS - Research
 SS - Student Services

Audit Types:

R - Required
 A - Risk-Based (Assessed)
 S - Special Request
 I - Investigation
 P - Project (Ongoing or Recurring)
 M - Management's Risk Assessment
 C - Consultation
 F - Follow-up Review
 O - Other

Status:

Scheduled
 In Progress
 Completed
 Removed

FN1 Access and Diversity Follow Up #2 actual hours exceeded budgeted hours.
 FN2 Follow Up on INV 1801 has exceeded budgeted hours and is ongoing.
 FN3 Review by external agency that will cover physical security review
 FN4 Required TBR audit being rescheduled for next fiscal year
 FN5 Access and Diversity Follow Up #3 has exceeded budgeted hours and is ongoing.
 FN6 Audit added as required audit by TBR

Nashville State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2021
Revised April 2021

Area	Type	Audit	Risk Factor	Estimated Audit Start Date	Original Hours Planned	Revised Plan	Revised to Original		FN	Planned to Actual		Completion Date	Current Status
							Change in Hours	Change in Percentage		Actual Hours	Variance		
IS	F	Physical Security / Campus Safety Follow Up	4.3	May-21	100.0	100.0	0.0	0%		0.0	100.0		Scheduled
FM	R	CARES Act	3.7	Mar-21	112.5	0.0	-112.5	-100%	1	0.0	0.0		Removed
IA	R	CCTA Element (Workforce Development)	3.7	Apr-21	112.5	112.5	0.0	0%		0.0	112.5		Scheduled
FM	F	State Audit Follow Up	3.6	Jan-21	37.5	37.5	0.0	0%		37.5	0.0	Apr-21	Completed
IS	A	Police Department	3.4	Feb-21	100.0	0.0	-100.0	-100%	2	0.0	0.0		Removed
IS	A	Disaster Recovery/Continuity of Operations Plan (COOP)	4.2	Sep-20	75.0	75.0	0.0	0%		30.0	45.0		Scheduled
FM	A	Travel	3.4	Aug-20	75.0	75.0	0.0	0%		52.5	22.5		In Progress
FM	A	Purchase Card / Procurement	3.4	Oct-20	112.5	112.5	0.0	0%		30.0	82.5		In Progress
FM	A	Cash Collection	3.3	Apr-21	100.0	100.0	0.0	0%		0.0	100.0		Scheduled
FM	A	Payroll/ Time and Leave	3.4	Dec-20	75.0	75.0	0.0	0%		30.0	45.0		In Progress
IS	C	Consulting Activities	3.0	As needed	37.5	37.5	0.0	0%		37.5	0.0		In Progress
IT	A	Confidentiality of Student Records	3.9	Nov-20	112.5	112.5	0.0	0%	3	112.5	0.0	Mar-21	Completed
IS	R	Internal QAR Assessment	3.0	Apr-21	0.0	75.0	75.0	N/A	4	0.0	75.0		Scheduled
AD	F	Foundation Audit Follow Up	3.0	Mar-21	0.0	37.5	37.5	N/A	4	22.5	15.0		In Progress

Total Planned Audit Hours: 1050.0 **950.0** **-100.0** **352.5** **597.5**
 Estimated Available Audit Hours = 1050

Functional Areas:

AD - Advancement
 AT - Athletics
 AX - Auxiliary
 FM - Financial Management
 IA - Instruction & Academic Support
 IS - Institutional Support
 IT - Information Technology
 MC - Marketing and Campus Activities
 PP - Physical Plant
 RS - Research
 SS - Student Services

Audit Types:

R - Required
 A - Risk-Based (Assessed)
 S - Special Request
 I - Investigation
 P - Project (Ongoing or Recurring)
 M - Management's Risk Assessment
 C - Consultation
 F - Follow-up Review
 O - Other

Status:

Scheduled
 In Progress
 Completed
 Removed

FN1 Moved to FY2022
 FN2 Moved to FY2022
 FN3 Previously named Personal Identifiable Information / Data Security
 FN4 New Projects Added

Northeast State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2021
Revised April 2021

Area	Type	Audit	Risk Factor	Estimated Audit Start Date	Original Hours Planned	Revised Plan	Revised to Original		FN	Planned to Actual		Completion Date	Current Status
							Change in Hours	Change in Percentage		Actual Hours	Variance		
SS	R	Complete College Tennessee Act: Completion	5.0	May-21	100.0	100.0	0.0	0%		0.0	100.0		Scheduled
SS	R	Workforce Development Training Hours	5.0	Oct-20	75.0	2.0	-73.0	-97%	1	2.0	0.0		Removed
FM	R	CARES Act Funding Audit	5.0	Mar-21	150.0	0.0	-150.0	-100%	1	0.0	0.0		Removed
FM	R	State Audit Follow-Up	5.0	Nov-20	60.0	100.0	40.0	67%	2	99.5	0.5	Feb-21	Completed
IS	R	Campus Safety	5.0	Apr-20	50.0	50.0	0.0	0%		53.5	-3.5	Sep-20	Completed
IS	S	Gramm Leach Bliley Act Program	5.0	Jul-20	100.0	125.0	25.0	25%	2	89.5	35.5		In Progress
IS	C	QAR Self-Study	5.0	Nov-20	75.0	75.0	0.0	0%		54.0	21.0		In Progress
IT	S	Access Termination	5.0	Oct-19	35.0	83.0	48.0	137%	2	89.5	-6.5	Jan-21	Completed
FM	A	NorCard Procurement Cards	5.0	Sep-20	75.0	150.0	75.0	100%	2	124.0	26.0		In Progress
IS	I	Unscheduled Investigations	5.0	Jul-20	100.0	50.0	-50.0	-50%	3	0.0	50.0		Scheduled
FM	R	State Audit Assistance - Year End	5.0	Jul-20	30.0	30.0	0.0	0%		2.5	27.5		In Progress
IS	S	Special Requests and Projects	5.0	Jul-20	100.0	100.0	0.0	0%		109.0	-9.0		In Progress
IS	F	Other Audit Follow-Up	5.0	Jul-20	50.0	50.0	0.0	0%		40.5	9.5		In Progress
IS	M	Risk Assessment	5.0	Oct-20	50.0	50.0	0.0	0%		51.0	-1.0	Jan-21	Completed
IS	C	Management Advisory Services	5.0	Jul-20	100.0	150.0	50.0	50%	3	117.5	32.5		In Progress
Total Planned Audit Hours:					1150.0	1115.0	-35.0			832.5	282.5		

Estimated Available Audit Hours = 1115.0

Functional Areas:

AD - Advancement
AT - Athletics
AX - Auxiliary
FM - Financial Management
IA - Instruction & Academic Support
IS - Institutional Support
IT - Information Technology
MC - Marketing and Campus Activities
PP - Physical Plant
RS - Research
SS - Student Services

Audit Types:

R - Required
A - Risk-Based (Assessed)
S - Special Request
I - Investigation
P - Project (Ongoing or Recurring)
M - Management's Risk Assessment
C - Consultation
F - Follow-up Review
O - Other

Status:

Scheduled
In Progress
Completed
Removed

Footnote 1: Removed by TBR. Hours allocated to expand the scopes of other projects.

Footnote 2: Hours increased due to complexity

Footnote 3: Hours reallocated to other projects

**Pellissippi State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2021
Revised April 2021**

Area	Type	Audit	Risk Factor	Estimated Audit Start Date	Original Hours Planned	Revised Plan	Revised to Original		FN	Planned to Actual		Completion Date	Current Status
							Change in Hours	Change in Percentage		Actual Hours	Variance		
IS	R	Cares Act Funding	5.0	Apr-21	200.0	0.0	-200.0	-100%	5	0.0	0.0		Removed
FM	R	Year End Inventory & Cash Counts	5.0	Jun-21	15.0	15.0	0.0	0%		0.0	15.0		Scheduled
IS	R	Funding Formula - Completion	5.0	Mar-21	75.0	120.0	45.0	60%	6	7.5	112.5		In Progress
IS	R	QAR Self Assessment	5.0	Aug-20	75.0	75.0	0.0	0%		65.0	10.0	Nov-20	Completed
FM	F	Audit Follow-Ups	5.0	Dec-20	15.0	15.0	0.0	0%		0.0	15.0		Scheduled
IS	M	Risk Assessment	5.0	Dec-20	22.5	22.5	0.0	0%		25.0	-2.5	Jan-21	Completed
IA	S	Faculty Credentials	5.0	Nov-20	105.0	105.0	0.0	0%		91.5	13.5	Jan-21	Completed
IA	S	Review of Compliance Assist	5.0	Feb-21	37.5	37.5	0.0	0%		37.5	0.0	Mar-21	Completed
IT	S	Vulnerability Assessment - Electronic Key System	5.0	Oct-20	187.5	187.5	0.0	0%		164.0	23.5	Dec-20	Completed
AD	C	Advancement Management Advisory Services, Consultation, etc.	5.0	Jul-20	52.5	52.5	0.0	0%		20.5	32.0		In Progress
FM	C	Finance Management Advisory Services, Consultation, etc.	5.0	Jul-20	37.5	37.5	0.0	0%		27.0	10.5		In Progress
IS	C	Institutional Support Management Advisory Services, Consultation, etc. (includes Covid-19 MAS)	5.0	Jul-20	445.0	445.0	0.0	0%		314.5	130.5		In Progress
IS	I	Unauthorized Change to Bank Routing and ACH Information	5.0	Aug-20	30.0	150.0	120.0	400%	1	142.5	7.5	Nov-20	Completed
IT	C	IT Audit Management Advisory Service - Phishing Campaign	5.0	Jul-20	52.5	202.5	150.0	286%	4	157.5	45.0		In Progress
IT	C	IT Audit Management Advisory Service - General Security Review	5.0	Jul-20	165.0	165.0	0.0	0%		156.5	8.5		In Progress
IT	C	IT Audit Management Advisory Service - PCI & ACH Review	5.0	Jul-20	150.0	100.0	-50.0	-33%	3	66.5	33.5		In Progress
IT	A	Computer Center - Disaster Recovery	3.6	Dec-20	112.5	0.0	-112.5	-100%	2	0.0	0.0		Removed
IT	A	Computer Center - Physical Security	3.5	Apr-21	202.5	202.5	0.0	0%		0.0	202.5		Scheduled
IT	A	Vulnerability Assessment - Print Servers	3.5	Aug-20	187.5	210.0	22.5	12%		211.0	-1.0	Oct-20	Completed
IT	A	Vulnerability Assessment - BDMS (scanned documents from Finance, HR and Student)	3.5	Jan-21	187.5	187.5	0.0	0%		184.0	3.5	Mar-21	Completed
IT	A	Vulnerability Assessment - PSDB (store degree works data and Luminus Information)	3.4	Mar-21	187.5	187.5	0.0	0%		23.5	164.0		In Progress

Total Planned Audit Hours: 2542.5 2517.5 -25.0 1694.0 823.5
 Estimated Available Audit Hours = 2515

Functional Areas:

- AD - Advancement
- AT - Athletics
- AX - Auxiliary
- FM - Financial Management
- IA - Instruction & Academic Support
- IS - Institutional Support
- IT - Information Technology
- MC - Marketing and Campus Activities
- PP - Physical Plant
- RS - Research
- SS - Student Services

Audit Types:

- R - Required
- A - Risk-Based (Assessed)
- S - Special Request
- I - Investigation
- P - Project (Ongoing or Recurring)
- M - Management's Risk Assessment
- C - Consultation
- F - Follow-up Review
- O - Other

Status:

- Scheduled
- In Progress
- Completed
- Removed

FN1 - Item was originally place holder for unplanned investigation. Item listed occurred in August of 2020 and was joint investigation with the Information Services Division of the College. College policy requires that Chief Information Officer be the lead investigator on this type of review therefore an internal audit report on this will not be issued.
FN2 - This audit was removed from the audit plan because of the amount of time spent reviewing unauthorized changes made to payroll bank routing and ACH information.
FN3 - Planned hours were reduced because office has received fewer request for assistance from Bursars office than in the past.
FN4 - This originally started out as IT Audit Management Advisory Service related to building security. However, due to limited building access in FY21 it was changed to a Phishing Campaign. This campaign was coordinated with the Network and Technical Services Department of the college and involved internal audit designing the campaign as well as implementing the campaign. Prior to conducting the campaign extensive testing was performed by internal audit as well as Network and Technical Services. Because this was the first campaign conducted extra time was required to design, test and determine proper deployment techniques.
FN5 - This audit was removed from the audit plan because federal guidance related to it had not been finalized as of April of 2021. Since complete guidance was not available at this time it was determined by the Tennessee Board of Regents that this audit would be postponed.
FN6 - Audit was changed from funding formula workforce development to completion so hours were increased to reflect approximate time this audit took the last time it was completed.

**Roane State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2021
Revised April 2021**

Area	Type	Audit	Risk Factor	Estimated Audit Start Date	Original Hours Planned	Revised Plan	Revised to Original		FN	Planned to Actual		Completion Date	Current Status
							Change in Hours	Change in Percentage		Actual Hours	Variance		
SS	R	Workforce Development	5.0	Jul-20	75.0	37.5	-37.5	-50%	6	5.0	32.5		In Progress
FM	R	Year End Cash Counts	5.0	Jul-20	45.0	45.0	0.0	0%		2.0	43.0		In Progress
IA	A	International Education	3.4	Oct-20	60.0	0.0	-60.0	-100%	2		0.0		Removed
IS	M	Enterprise Risk Assessment	5.0	Nov-20	75.0	40.0	-35.0	-47%	4	40.0	0.0	Jan-21	Completed
FM	A	Grants	3.4	Dec-20	75.0	85.0	10.0	13%	9	47.0	38.0		In Progress
IA	S	Healthcare Programs Admissions	4.0	Oct-20	105.0	0.0	-105.0	-100%	1	0.0	0.0		Removed
FM	R	CARES Act	5.0	Feb-20	75.0	0.0	-75.0	-100%	5	0.0	0.0		Removed
IS	A	Sick Leave Bank	3.5	Mar-20	22.5	32.5	10.0	44%	7	15.0	17.5		In Progress
FM	F	State Audit Follow-up	5.0	Jul-20	52.5	52.5	0.0	0%		22.5	30.0		In Progress
FM	F	IAR Audit Follow-up	5.0	Jul-20	70.0	70.0	0.0	0%		45.0	25.0		In Progress
FM	I	Unscheduled Investigations	5.0	Jul-20	90.0	90.0	0.0	0%		0.0	90.0		In Progress
IS	C	Management Advisory Services	5.0	Jul-20	142.5	142.5	0.0	0%		60.0	82.5		In Progress
AX	S	Foundation - Restricted Funds	4.1	Jul-20	80.0	110.0	30.0	38%	8	60.0	50.0		In Progress
FM	R	President's Expense - PSTCC	5.0	Aug-20	60.0	60.0	0.0	0%		60.0	0.0	Nov-20	Completed
IS	R	QAR - Self-Review	5.0	May-20	22.5	22.5	0.0	0%		7.5	15.0		In Progress
IS	R	Campus Safety & Security	5.0	Jul-20	0.0	22.5	22.5	N/A		20.0	2.5		In Progress
AX	S	Foundation - Data Security Consulting	5.0	Jul-20	0.0	100	100.0	N/A	3	90.0	10.0		In Progress
IA	S	Nursing Program Review	5.0	Jan-21	0.0	140.0	140.0	N/A	1	82.5	57.5		In Progress
Total Planned Audit Hours:					1050.0	1050.0	0.0			556.5	493.5		

Estimated Available Audit Hours = 1050

Functional Areas:

- AD - Advancement
- AT - Athletics
- AX - Auxiliary
- FM - Financial Management
- IA - Instruction & Academic Support
- IS - Institutional Support
- IT - Information Technology
- MC - Marketing and Campus Activities
- PP - Physical Plant
- RS - Research
- SS - Student Services

Audit Types:

- R - Required
- A - Risk-Based (Assessed)
- S - Special Request
- I - Investigation
- P - Project (Ongoing or Recurring)
- M - Management's Risk Assessment
- C - Consultation
- F - Follow-up Review
- O - Other

Status:

- Scheduled
- In Progress
- Completed
- Removed

- 1 Added Nursing Program Review at Management's Request and removed Healthcare Admissions.
- 2 Removed International Education Audit due to trip cancellations Related to Covid
- 3 Added Foundation Data Security Consulting Review and increased hours
- 4 Moved additional hours from Enterprise Risk Assessment to Nursing Program Review
- 5 Removed the CARES Act Audit to be scheduled next fiscal year
- 6 Reduction in scope of Workforce Development audit (CCTA Completion Audit)
- 7 Added hours due to difficulty in obtaining information
- 8 Added hours due to complexity of Foundation donor agreements
- 9 Added hours due to complexity of grant documents

**Southwest Tennessee Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2021
Revised March 2021**

Area	Type	Audit	Risk Factor	Estimated Audit Start Date	Original Hours Planned	Revised Plan	Revised to Original		FN	Planned to Actual		Completion Date	Current Status
							Change in Hours	Change in Percentage		Actual Hours	Variance		
FM	A	IAR-Cash Count		Jun-20	37.5	37.5	0.0	0%		0.0	37.5		Scheduled
SS	S	Out of State Tuition		Jul-20	97.5	62.5	-35.0	-36%		0.0	62.5		In Progress
FU	R	FU-Foundation Audit		Sep-20	22.5	17.5	-5.0	-22%		13.0	4.5		In Progress
FM	S	Review of Accounts Payable Vendors		Aug-20	97.5	70.0	-27.5	-28%		11.5	58.5		In Progress
FU	S	FU-Time Sheet Preparation		Oct-20	22.5	54.5	32.0	142%		54.5	0.0	Dec-20	Completed
IS	R	Campus Safety Audit		Jul-20	97.5	171.0	73.5	75%		171.0	0.0	Dec-20	Completed
SS	R	Workforce Development Audit		Nov-20	97.5	0.0	-97.5	-100%	1	2.0	-2.0		Removed
FM	F	FU-State Audit		Dec-20	90.0	74.5	-15.5	-17%		0.0	74.5		In Progress
FM	S	Review of Driver License		Jan-21	97.5	38.0	-59.5	-61%		0.0	38.0		Scheduled
FM	F	FU-Whitehaven Federal Work Study		Oct-20	45.0	2.5	-42.5	-94%	2	2.5	0.0		Removed
FM	S	Review of Ghost Employees		Feb-21	87.5	115.5	28.0	32%		115.5	0.0		In Progress
FM	I	INV-Investigation of Clubs		Mar-21	45.5	91.5	46.0	101%		91.0	0.5		In Progress
FM	F	FU-IT Audit		Apr-21	20.0	36.0	16.0	80%		36.0	0.0	Dec-20	Completed
IS	A	IAR Risk Assessment		May-21	34.5	15.5	-19.0	-55%		16.0	-0.5	Jan-21	Completed
IS	F	FU-Internal Audit Follow Up		Jul-20	15.0	0.0	-15.0	-100%		0.0	0.0		In Progress
SS	C	IAR-General Consultant		Jul-20	82.5	79.5	-3.0	-4%		78.5	1.0		In Progress
FM	I	Unscheduled Investigation		Jul-20	62.5	0.0	-62.5	-100%		0.0	0.0		In Progress
FM	P	ACM-Audit Software		Jul-20	60.0	62.5	2.5	4%		52.0	10.5		In Progress
FM	I	INV-Investigation of Cafeteria		May-21	35.0	19.0	-16.0	-46%		0.0	19.0		Scheduled
FM	R	IAR-President Audit		Sep-20	0.0	80.5	80.5	N/A		80.5	0.0	Oct-20	Completed
IA	I	INV-21-01 Abuse of Power		Sep-20	0.0	49.0	49.0	N/A		48.0	1.0	Sep-20	Completed
FM	R	Cares Act		May-21	0.0	47.0	47.0	N/A	1	0.0	47.0		Scheduled
IA	I	INV 21-02 Digital Learning Guidelines		Sep-20	0.0	23.5	23.5	N/A		22.5	1.0	Sep-20	Completed

Total Planned Audit Hours: 1147.5 1147.5 0.0 794.5 353.0

Estimated Available Audit Hours = 1147.5

Functional Areas:

AD - Advancement
 AT - Athletics
 AX - Auxiliary
 FM - Financial Management
 IA - Instruction & Academic Support
 IS - Institutional Support
 IT - Information Technology
 MC - Marketing and Campus Activities
 PP - Physical Plant
 RS - Research
 SS - Student Services

Audit Types:

R - Required
 A - Risk-Based (Assessed)
 S - Special Request
 I - Investigation
 P - Project (Ongoing or Recurring)
 M - Management's Risk Assessment
 C - Consultation
 F - Follow-up Review
 O - Other

Status:

Scheduled
 In Progress
 Completed
 Removed

FN1: Workforce Development was removed from the audit plan and the Cares Act was scheduled for audit,
 FN2: Work Study funds were transferred to the Federal Supplemental Educational Opportunity Grands funds.

Volunteer State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2021
Revised April 2021

Area	Type	Audit	Risk Factor	Estimated Audit Start Date	Original Hours Planned	Revised Plan	Revised to Original		FN	Planned to Actual		Completion Date	Current Status
							Change in Hours	Change in Percentage		Actual Hours	Variance		
IS	R	Security Funding Allocation	5.0	May-20	100.0	30.0	-70.0	-70%		29.5	0.5	Jul-20	Completed
SS	S	Work Component Financial Aid	8.5	Aug-20	175.0	460.0	285.0	163%		460.5	-0.5	Mar-21	Completed
IA	R	CCTA Funding Formula Elements	7.4	Mar-21	200.0	200.0	0.0	0%		0.0	200.0		Scheduled
IS	R	CARES Act	5.0	Mar-21	175.0	0.0	-175.0	-100%	(1)	0.0	0.0		Removed
IS	M	Management Risk Assessment	5.0	Oct-20	40.0	95.0	55.0	138%		95.0	0.0	Jan-21	Completed
FM	R	State Audit Year-End Work	5.0	May-21	40.0	40.0	0.0	0%		0.0	40.0		Scheduled
IS	P	IHA QAIP Self Assessment	5.0	Jul-20	100.0	100.0	0.0	0%		22.5	77.5		In Progress
IS	R	Follow-up Activities	5.0	Jul-20	50.0	50.0	0.0	0%		5.5	44.5		In Progress
IS	C	General Consultation	5.0	Jul-20	75.0	75.0	0.0	0%		10.5	64.5		In Progress
IS	I	Unscheduled Investigations	5.0	Jul-20	40.0	40.0	0.0	0%		0.0	40.0		Scheduled
FM	A	Cash Receipts	4.7	Apr-21	175.0	0.0	-175.0	-100%	(2)	0.0	0.0		Removed
Total Planned Audit Hours:					1170.0	1090.0	-80.0			623.5	466.5		

Estimated Available Audit Hours = 1090

Functional Areas:

AD - Advancement
AT - Athletics
AX - Auxiliary
FM - Financial Management
IA - Instruction & Academic Support
IS - Institutional Support
IT - Information Technology
MC - Marketing and Campus Activities
PP - Physical Plant
RS - Research
SS - Student Services

Audit Types:

R - Required
A - Risk-Based (Assessed)
S - Special Request
I - Investigation
P - Project (Ongoing or Recurring)
M - Management's Risk Assessment
C - Consultation
F - Follow-up Review
O - Other

Status:

Scheduled
In Progress
Completed
Removed

(1) Audit was postponed by TBR.

(2) Audit was added back to the audit plan after the CARES Act audit was postponed.

**Walters State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2021
Revised April 2021**

Area	Type	Audit	Risk Factor	Estimated Audit Start Date	Original Hours Planned	Revised Plan	Revised to Original		FN	Planned to Actual		Completion Date	Current Status
							Change in Hours	Change in Percentage		Actual Hours	Variance		
IS	C	Management Advisory Services/Consulting	5.0	Jul-20	300.0	300.0	0.0	0%		225.0	75.0		In Progress
FM	F	State Audit Assist/Follow-up	5.0	Oct-20	12.0	0.0	-12.0	-100%	1	0.0	0.0	N/A	Removed
IS	R	IAR-NeSCC President's Expenses Audit 2021	5.0	Aug-19	90.0	90.0	0.0	0%		90.0	0.0	Oct-20	Completed
SS	F	IAR-FU-CCTA-Workforce Training Hours 2019	5.0	Dec-20	22.5	0.0	-22.5	-100%	2		0.0		Removed
IS	R	IAR-CARES Act Review 2021	5.0	Feb-21	40.0	80.0	40.0	100%		30.0	50.0		In Progress
A	IT	IT Governance	5.0	Feb-21	105.0	105.0	0.0	0%		40.0	65.0		In Progress
M	IS	WSCC Enterprise-wide Risk Assessment	5.0	Dec-20	22.5	0.0	-22.5	-100%	3		0.0		Removed
IS	M	WSCC Risk Assessment - Student Success	5.0	Dec-20	22.5	22.5	0.0	0%	3	22.5	0.0	Dec-20	Completed
A	M	Accounts Receivable	5.0	Oct-20	45.0	62.0	17.0	38%		45.0	17.0		In Progress
IS	M	WSCC IT and Fin Aid Risk Assessments	5.0	Dec-20	37.5	37.5	0.0	0%			37.5		Scheduled
IS	P	IAR-QAR Self & External	5.0	Jun-21	22.5	22.5	0.0	0%			22.5		Scheduled
FM	S	YE Procedures FYE 2021	5.0	Jun-21	22.5	22.5	0.0	0%			22.5		Scheduled
FM	S	YE Procedures FYE 2020	5.0	Jul-20	22.5	22.5	0.0	0%		15.0	7.5	Jul-20	Completed
IT	S	IAR-NACHA-2021	5.0	Jan-21	75.5	75.5	0.0	0%		60.0	15.5		In Progress
I	IS	Unscheduled Investigations	5.0	Jul-20	105.0	105.0	0.0	0%		82.5	22.5		In Progress
SS	R	IAR-CCTA-Workforce Training Hours 2021	5.0	Mar-21	105.0	30.0	-75.0	-71%	2	30.0	0.0		Removed
SS	R	IAR-CCTA-Progression	5.0	Jul-20	0.0	75.0	75.0	#DIV/0!	2	7.5	67.5		Scheduled
Total Planned Audit Hours:					1050.0	1050.0	0.0			647.5	402.5		
Estimated Available Audit Hours = 1050.0													

Functional Areas:

AD - Advancement
 AT - Athletics
 AX - Auxiliary
 FM - Financial Management
 IA - Instruction & Academic Support
 IS - Institutional Support
 IT - Information Technology
 MC - Marketing and Campus Activities
 PP - Physical Plant
 RS - Research
 SS - Student Services

Audit Types:

R - Required
 A - Risk-Based (Assessed)
 S - Special Request
 I - Investigation
 P - Project (Ongoing or Recurring)
 M - Management's Risk Assessment
 C - Consultation
 F - Follow-up Review
 O - Other

Status:

Scheduled
 In Progress
 Completed
 Removed

- 1 - Since State Audit issued no findings with respect to the bi-annual audit of WSCC, no State Audit follow-up is needed.
- 2 - IAR-CCTA-Workforce Training Hours was initially deferred and then tabled indefinitely, ultimately being replaced by IAR-CCTA-Progression 2021.
- 3 - The Enterprise-side Risk Assessment was performed as an inherent part of the Student Success Risk Assessment.

Tennessee Board of Regents - Investigations
Internal Audit Plan
Fiscal Year Ending June 30, 2021
Revised April 2021

Area	Type	Audit	Risk Factor	Estimated Audit Start Date	Original Hours Planned	Revised Plan	Revised to Original		FN	Planned to Actual		Completion Date	Current Status
							Change in Hours	Change in Percentage		Actual Hours	Variance		
IS	C	Consultation with Campus Auditors		Jul-20	200.0	68.5	-131.5	-66%		55.0	13.5		In Progress
IS	PR	Investigation Management		Jul-20	200.0	300.0	100.0	50%		285.0	15.0		In Progress
IS	I	State Audit Follow-up for TBR		Jul-20	75.0	10.0	-65.0	-87%		0.0	10.0		
FM	I	Unscheduled Investigations		Jul-20	347.5	0.0	-347.5	-100%	2	0.0	0.0		Removed
FM	I	INV TBR 21-01		Sep-20	0.0	187.5	187.5	N/A		187.5	0.0	21-Mar	Completed
IS	I	INV TBR 20-03		Mar-20	75.0	41.5	-33.5	-45%		41.5	0.0	20-Sep	Completed
IS	I	INV TBR 20-04		Jun-20	75.0	21.0	-54.0	-72%		21.0	0.0	20-Sep	Completed
SS	I	INV TBR 19-03		Apr-19	37.5	5.0	-32.5	-87%	1	5.0	0.0	Feb-21	Completed
FM	I	INV TBR 19-06		Jul-19	20.0	2.0	-18.0	-90%	1	2.0	0.0	Feb-21	Completed
IS	I	INV TBR 19-07		May-19	20.0	2.0	-18.0	-90%	1	2.0	0.0	Feb-21	Completed
IS	O	INV TBR 21-02		Nov-20	0.0	75.0	75.0	N/A		75.0	0.0	20-Dec	Completed
AT	S	INV TBR 21-03		Jan-21	0.0	75.0	75.0	N/A		75.0	0.0	20-Dec	Completed
IS	S	INV TBR 21-04		Feb-21	0.0	75.0	75.0	N/A		50.0	25.0		In Progress
PP	I	INV TBR 21-05		Feb-21	0.0	150.0	150.0	N/A		75.0	75.0		In Progress
FM	I	INV TBR 21-06		Apr-21	0.0	37.5	37.5	N/A		15.0	22.5		In Progress

Total Planned Audit Hours: 1050.0 1050.0 0.0 889.0 161.0
 Estimated Available Audit Hours = 1050.0

Functional Areas:

- AD - Advancement
- AT - Athletics
- AX - Auxiliary
- FM - Financial Management
- IA - Instruction & Academic Support
- IS - Institutional Support
- IT - Information Technology
- MC - Marketing and Campus Activities
- PP - Physical Plant
- RS - Research
- SS - Student Services

Audit Types:

- R - Required
- A - Risk-Based (Assessed)
- S - Special Request
- I - Investigation
- P - Project (Ongoing or Recurring)
- M - Management's Risk Assessment
- C - Consultation
- F - Follow-up Review
- O - Other

Status:

- Scheduled
- In Progress
- Completed
- Removed

FN1- After additional review, deemed not Fraud, Waste, or Abuse and no additional work necessary.
 FN2- Place holder removed.

**TBR- Information Systems
Internal Audit Plan
Fiscal Year Ending June 30, 2021
Revised April 2021**

Area	Type	Audit	Risk Factor	Estimated Audit Start Date	Original Hours Planned	Revised Plan	Revised to Original		FN	Planned to Actual		Completion Date	Current Status
							Change in Hours	Change in Percentage		Actual Hours	Variance		
IT	R	MSSC Information Security	5.0	Jan-21	150.0	150.0	0.0	0%		96.0	54.0	Jan-21	Completed
IT	R	NASCC Information Security	5.0	Dec-20	150.0	150.0	0.0	0%		148.0	2.0	Mar-21	Completed
IT	R	VSSC Information Security	5.0	Feb-21	150.0	150.0	0.0	0%	1	8.0	142.0		In Progress
IT	R	WSSC Information Security	5.0	Feb-21	150.0	150.0	0.0	0%		110.0	40.0		In Progress
IT	R	CISCC Information Security	5.0	Apr-21	150.0	150.0	0.0	0%		0.0	150.0		Scheduled
IT	R	RSSC Information Security	5.0	Mar-21	150.0	150.0	0.0	0%	2	12.0	138.0		In Progress
IT	R	PSSC Information Security	5.0	Jun-21	150.0	150.0	0.0	0%		0.0	150.0		Scheduled
Total Planned Audit Hours:					1050.0	1050.0	0.0			374.0	676.0		

Estimated Available Audit Hours = 1050

Functional Areas:

AD - Advancement
 AT - Athletics
 AX - Auxiliary
 FM - Financial Management
 IA - Instruction & Academic Support
 IS - Institutional Support
 IT - Information Technology
 MC - Marketing and Campus Activities
 PP - Physical Plant
 RS - Research
 SS - Student Services

Audit Types:

R - Required
 A - Risk-Based (Assessed)
 S - Special Request
 I - Investigation
 P - Project (Ongoing or Recurring)
 M - Management's Risk Assessment
 C - Consultation
 F - Follow-up Review
 O - Other

Status:

Scheduled
 In Progress
 Completed
 Removed

FN #1 Audit has been delayed because VSSC is currently involved in a State of Tennessee audit.
 FN #2 Audit has be delayed to a COVID issue at RSSC.

**TCAT
Internal Audit Plan
Fiscal Year Ending June 30, 2021
Revised April 2021**

Area	Type	Audit	Risk Factor	Estimated Audit Start Date	Original Hours Planned	Revised Plan	Revised to Original		FN	Planned to Actual		Completion Date	Current Status
							Change in Hours	Change in Percentage		Actual Hours	Variance		
FM	A	FY 20 Perkins Audit	NA	Jan-21	100.0	0.0	-100.0	-100%		0.0	0.0		Removed
FM	C	FY 20 TCAT Consultation	NA	Jul-20	200.0	222.5	22.5	11%		207.0	15.5		In Progress
FM	R	FY 20 TCAT Risk Assessment	NA	Oct-20	75.0	100.0	25.0	33%		119.0	-19.0		In Progress
FM	C	FY 20 TCAT Audit Program	NA	Jul-20	75.0	125.0	50.0	67%	FN3	135.5	-10.5		In Progress
FM	C	FY 20 TCAT Year End Procedures	NA	Jun-21	50.0	50.0	0.0	0%		13.5	36.5		FN1
FM	R	FY 20 TCAT Foundation	NA	Jul-20	37.5	37.5	0.0	0%		0.0	37.5		In Progress
FM	A	FY 21 TCAT Memphis Controls Review	5.0	Jan-21	37.5	37.5	0.0	0%		0.0	37.5		FN1
FM	A	FY 21 TCAT McMinnville Controls Review	5.0	Jan-21	15.0	15.0	0.0	0%		0.0	15.0		In Progress
FM	R	FY 20 TCAT Knoxville President's Expense	4.7	Jul-20	37.5	37.5	0.0	0%		26.0	11.5		In Progress
FM	R	FY 19 TCAT Elizabethton President's Expense	4.7	Jul-20	37.5	37.5	0.0	0%		26.0	11.5		In Progress
FM	R	FY 19 TCAT Murfreesboro President's Expense	4.7	Jul-20	37.5	37.5	0.0	0%		23.5	14.0		In Progress
FM	R	FY 19 TCAT Nashville President's Expense	4.6	Jul-20	37.5	37.5	0.0	0%		30.0	7.5		In Progress
FM	A	FY 20 Nashville-IAR-Equipment/Security Review	4.6	Nov-20	15.0	15.0	0.0	0%		0.0	15.0		FN1
FM	R	FY 20 TCAT Livingston President's Expense	3.9	Sep-20	37.5	37.5	0.0	0%		39.5	-2.0	Mar-21	Completed
FM	R	FY 19 TCAT Jackson/Whiteville President's Expense	3.7	Aug-20	37.5	37.5	0.0	0%		35.0	2.5		In Progress
FM	R	FY 20 TCAT Hohenwald President's Expense	3.2	Oct-20	37.5	37.5	0.0	0%		29.5	8.0		In Progress
FM	R	FY 19 TCAT Morristown President's Expense	3.2	Jul-20	15.0	15.0	0.0	0%	FN2	28.5	-13.5	Aug-20	Completed
FM	R	FY 20 TCAT Crossville President's Expense	3.1	Aug-20	37.5	37.5	0.0	0%		26.5	11.0		In Progress
FM	R	FY 20 TCAT Ripley President's Expense	2.7	Mar-21	22.5	22.5	0.0	0%		22.5	0.0		In Progress
FM	R	FY 20 TCAT Pulaski President's Expense	2.7	Apr-21	37.5	62.5	25.0	67%	FN4	46.5	16.0		In Progress
FM	R	FY 20 TCAT Shelbyville President's Expense	2.6	Feb-21	22.5	22.5	0.0	0%		44.5	-22.0	Mar-21	Completed
FM	R	FY 20 TCAT Newbern President's Expense	2.6	Mar-21	37.5	37.5	0.0	0%		23.0	14.5		In Progress
FM	R	FY 20 TCAT Oneida President's Expense	2.6	Feb-21	22.5	22.5	0.0	0%		27.0	-4.5		In Progress
FM	R	FY 20 TCAT Crump President's Expense	2.6	May-21	37.5	37.5	0.0	0%		16.5	21.0		In Progress
FM	A	FY 20 TCAT Dickson SFA Review	2.5	May-21	22.5	0.0	-22.5	-100%		0.0	0.0		Removed
FM	R	FY 20 TCAT Jacksboro President's Expense	2.1	Mar-21	22.5	22.5	0.0	0%		23.0	-0.5		In Progress
FM	R	FY 19 TCAT Hartsville President's Expense	1.7	Aug-21	22.5	22.5	0.0	0%		37.5	-15.0	Nov-20	Completed
FM	R	FY 19 TCAT Athens President's Expense	1.6	Nov-21	22.5	22.5	0.0	0%		37.5	-15.0	Dec-20	Completed
FM	R	FY 20 TCAT Chattanooga President's Expense	1.3	Apr-21	22.5	22.5	0.0	0%		0.0	22.5		FN1
FM	A	FY 19 TCAT Harriman Security Review		Mar-20	0.0	0.0	0.0	0%	FN2	12.5	-12.5	Sep-20	Completed

Total Planned Audit Hours: 1212.5 1212.5 0.0 1030.0 182.5
 Estimated Available Audit Hours = 1212.50

Functional Areas:

- AD - Advancement
- AT - Athletics
- AX - Auxiliary
- FM - Financial Management
- IA - Instruction & Academic Support
- IS - Institutional Support
- IT - Information Technology
- MC - Marketing and Campus Activities
- PP - Physical Plant
- RS - Research
- SS - Student Services

FN1: These audits have not been started.
 FN2: Security Review was added in during the President's Review

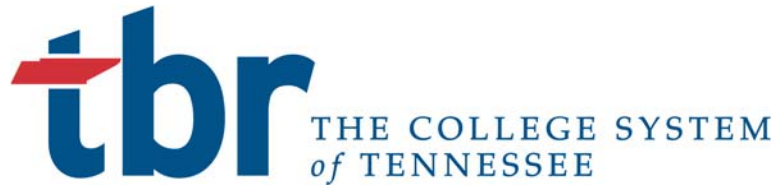
Audit Types:

- R - Required
- A - Risk-Based (Assessed)
- S - Special Request
- I - Investigation
- P - Project (Ongoing or Recurring)
- M - Management's Risk Assessment
- C - Consultation
- F - Follow-up Review
- O - Other

FN3: Auditor is on the Audit Program Committee and more hours were required
 FN4: Due to the Corona Virus, the auditor was asked to review additional policies

Status:

- Scheduled
- In Progress
- Completed
- Removed



BOARD TRANSMITTAL

MEETING: Committee on Audit

SUBJECT: Review of System-wide Internal Audit Budget for Fiscal Year 2022

DATE: June 1, 2021

PRESENTER: Mike Batson

ACTION REQUIRED: Roll-Call Vote

STAFF'S
RECOMMENDATION: Approve

The committee will review the Fiscal Year 2022 budget for the Office of System-wide Internal Audit. The Fiscal Year 2021-2022 budget is presented on the following page.

**Tennessee Board of Regents
Office of System-wide internal Audit
Operating Budget for Fiscal Year 2021-2022**

	<u>FY 2022 Budget</u>		<u>FY 2021 Budget</u>	
	<u>Amount</u>	<u>Percentage</u>	<u>Amount</u>	<u>Percentage</u>
Salaries	441,078	66%	431,733	64%
Employee Benefits	181,513	27%	196,854	29%
Total Salaries and Benefits	622,591	93%	628,587	94%
Travel and Professional Development				
In State Travel and Professional Development	17,500	3%	14,600	2%
Out of State Travel and Professional Development	4,000	1%	-	0%
Total Travel and Professional Development	21,500	3%	14,600	2%
Operating Expenses	24,850	4%	26,395	4%
Total Budget	668,941	100%	669,582	100%

Notes:

Salaries and Benefits includes 5 staff positions for System-wide Internal Audit: Chief Audit Executive, Investigative Audit Manager, Information Systems Auditor, TCAT Internal Auditor IV, and Administrative Assistant III.

Travel and Professional Development categories include the costs for system office audit staff to travel in state for audits and investigations, meetings and other business activities. It also includes the costs of in state and out of state professional development activities and any related out of state travel costs for the training. There is a decrease in budgeted travel since SWIA-run training costs (speakers, etc.) are now included in the Operating Budget.

Operating Expenses include the general operating costs for the system audit office such as copier lease, supplies, computer software, non-capitalized equipment, meeting expenses and when applicable, instructors for group training and consultants for external peer reviews. In FY 2021, a joint training retreat is planned with the audit staff of the University of Tennessee and the locally governed universities, for which TBR will share in the cost of the training (pending pandemic situation). External peer review costs are not included but will need to be reserved from the FY 2020-FY2023 funding to cover the FY2023 external peer review.