



TENNESSEE BOARD OF REGENTS
Committee on Audit

AGENDA
May 31, 2023

- 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 2023 Internal Audit Plans**

- III. REVIEW OF SYSTEM-WIDE INTERNAL AUDIT BUDGET FOR FY 2024 (Mike Batson)**

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

- *This meeting will include members of the Tennessee Board of Regents who are participating by electronic means of communication and will be live-streamed and archived on the TBR website at <https://www.tbr.edu/board/may-31-2023-committee-chairs-personnel-compensation-and-audit-committee-meetings>.*
- *Persons who want to request to address the Board may follow the process authorized by [TBR Policy 1.02.12.00 – Requests to Address the Board](#).*

BOARD TRANSMITTAL

MEETING: Committee on Audit

SUBJECT: Highlights of Audit Findings and Recommendations

DATE: May 31, 2023

PRESENTER: Mike Batson

ACTION REQUIRED: Informational Report

STAFF'S
RECOMMENDATION: Accept Report

The following items will be discussed with the Audit Committee:

External Miscellaneous Reviews
Federal Audits
Internal Audit Reports
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 March 31, 2023. 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 Internal Audit Recommendations- Community Colleges (Reports sorted by Status, Institution, Report Release Date)										
Institution	Report Release Date	Recommendation	Responsible Staff	TBR Vice Chancellor Area	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	Notes and Dates	Status
ChSCC	7/29/2022	Follow-up to Campus Safety and Security Upgrades: Management should work to complete installation of phase three hardware in the warehouse and eliminate door chaining risk.	Executive Vice President - Business and Finance	Business and Finance	9/30/2022	3/31/2023	1	9/27/2022		Action Completed
ChSCC	10/3/2022	Campus Safety Equipment Inventory 2 of 6: The Police Department equipment inventory should be added to the sensitive equipment listing and items tagged as appropriate per the Sensitive Equipment policy, 04:12:01.	Executive Vice President - Business and Finance	Business and Finance	6/30/2023			11/18/2022		Action Completed
VSCC	6/14/2022	The Manager of Adult Learners and Veterans Affairs (ALVA) should implement a supervisory review of the student files and VA submissions each semester to ensure accuracy and completeness.	ALVA	Policy and Strategy	2/1/2023		0	2/1/2023		Action Completed
VSCC	6/14/2022	Management should review the current Banner reporting to determine if all changes in schedule can be identified for potential reporting to the VA.	ALVA	Policy and Strategy	2/1/2023		0	2/1/2023		Action Completed
VSCC	6/14/2022	Management should ensure that applicable financial aid awards are deducted from the veteran benefits	ALVA	Policy and Strategy	2/1/2023		0	2/1/2023		Action Completed
VSCC	6/14/2022	Management should review the eligibility of the International Education Fee for education benefits and obtain approval from the Tennessee State Approving Agency (SAA) for certification to the VA.	ALVA	Policy and Strategy	4/1/2023		0	2/1/2023		Action Completed
WSCC	4/22/2022	Segregation of duties can be an effective internal control. Although the SCO reports to the Executive Director of Counseling and Testing, his work is not currently being reviewed by a second party. To provide oversight, the SCO should provide the Executive Director of Counseling and Testing or another designated employee with "Read Only" access and high-level training to create familiarity with the certification process and related requirements.	Veterans Coordinator and School Certifying Official (SCO)	Policy and Strategy	10/1/2022	12/1/2022	1	9/7/2022		Action Completed
ChSCC	10/3/2022	Campus Safety Equipment Inventory 1 of 6: The definition of sensitive equipment should be expanded to include Police Department equipment in the Sensitive Equipment Policy.	Executive Vice President - Business and Finance	Business and Finance	2/1/2023	8/31/2023		10/26/2022	10/26/2022 - Submitted policy language to Policy Review Committee for Spring session. 4/27/2023 - Policy to be on agenda for Summer Policy Review Committee/Board meetings.	In Progress
ChSCC	10/3/2022	Campus Safety Equipment Inventory 4 of 6: The Fire Extinguisher listing should be updated to ensure it includes all fire extinguishers and appropriate identification information. Changes made during annual inspections, six-year servicing, hydro testing, or twelve-year replacement should be reflected in a timely manner.	Executive Vice President - Business and Finance	Business and Finance	12/31/2023			11/18/2022	10/3/2022 - Completion date depends on date of hire for new coordinator. 11/18/2022 - Coordinator hired November 2022. 4/27/2023 - Auditor to review progress at end of May 2023	In Progress
ChSCC	10/3/2022	Campus Safety Equipment Inventory 5 of 6: Documentation of the required OSHA employee trainings including the date and time of the activity completed should be developed and retained.	Executive Vice President - Business and Finance	Business and Finance	12/31/2023			11/18/2022	10/3/2022 - Completion date depends on date of hire for new coordinator. 11/18/2022 - Coordinator hired November 2022. 4/27/2023 - Auditor to review progress at end of May 2023	In Progress
ChSCC	10/3/2022	Campus Safety Equipment Inventory 6 of 6: A procedures manual should be developed to define and document the processes for inspection, replacement, and inventory of Fire Extinguishers, AEDs, and other safety equipment and ensure compliance with college, TBR, and federal/state OSHA requirements.	Executive Vice President - Business and Finance	Business and Finance	12/31/2023			11/18/2022	10/3/2022 - Completion date depends on date of hire for new coordinator. 11/18/2022 - Coordinator hired November 2022. 4/27/2023 - Auditor to review progress at end of May 2023.	In Progress

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	TBR Vice Chancellor Area	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	Notes and Dates	Status
CISCC	4/13/2021	When setting or reducing budgets, management should consider requirements for different programs, if any, set forth by outside regulatory boards and agencies, to ensure the requirements can be met.	VP of Academic Affairs and VP of Finance and Operations	Business and Finance; Policy and Strategy	7/1/2021			2/1/2022	VPAA is verifying that the budget she requested (in order to comply with outside regulatory agency for Nursing instruction) gets funded properly in the FY23 Revised Oct budget. Waiting on Oct budget to be loaded into Banner to review. <u>Update:</u> On 1/17/23, new VP of Finance, new VPAA and new President were all given the 2021 Audit Report to review and consider for action. There has been no response to-date from any of them to Internal Audit on this topic.	In Progress
CISCC	6/16/2021	Management should complete the upgrading of exterior doors in a timely manner.	VP of Finance and Operations	Business and Finance	1/31/2022			6/29/2022	As a follow-up to the 6/16/21 Safety Audit, all doors have been properly replaced except for 3 sets in the Gym. <u>Update:</u> 3 more sets of doors with improper handles were found in the Student Center for a total of 6 sets. 4/17/23--VPFO says there is no change and advised new Dir.of Maintenance of situation.	In Progress
CoSCC	6/7/2021	CoSCC-FU-Financial Aid-06072021 Ensure GLBA safeguards are established. (Initial Outcome from CoSCC-IAR-Financial Aid-03122018)	Vice President for Information Technology	Business and Finance	5/30/2021	6/7/2021	0	12/2/2021	6/24/2022 - key personnel transition in November 2021 delayed management action. 7/13/2022 - IA Follow-up scheduled for October 2022 8/1/2022 - Management reports completion of a GLBA specific IT risk assessment. 8/29/22 - management provided with GLBA safeguard checklist to initiate IA follow-up 10/4/22 - no change 11/1/22 - mgmt. completed GLBA checklist, working to schedule review 11/30/22 - Internal Audit Reviewing 12/19/2022 - Internal Audit Report with Management 1/31/23 - Management Response under review 2/27/23 - With Internal Audit 3/31/23 - With Internal Audit 4/1/23 - Management Initiated Data Security Committee	In Progress

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

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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	Business and Finance	6/30/2022	6/30/2023	1		06/27/2022- Responsible parties notified of the new recommendations process. 06/27/2022. Follow up work was conducted in Spring and Fall 2021. IA needs to review the work and determine the status. 11/28/2022 IA is in the process of reviewing prior follow up work. 01/26/2023 IA met with the HR Coordinator to discuss the follow up. JSCC Payroll and some HR processes have been moved to TBR Shared Services. IA has requested transition dates and other information as an initial step. 03/01/2023 IA received a response back from HR on the information request. IA will follow up as schedule allows. 04/04/2023 IA is working on finalizing the follow up.	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	Business and Finance	6/30/2022	06/30/2023	1		06/27/2022- Responsible parties notified of the new recommendations process. 06/27/2022. Follow up work was conducted in Spring and Fall 2021. IA needs to review the work and determine the status. 11/28/2022 IA is in the process of reviewing prior follow up work. 01/26/2023 IA met with the HR Coordinator to discuss the follow up. JSCC Payroll and some HR processes have been moved to TBR Shared Services. IA has requested transition dates and other information as an initial step. 03/01/2023 IA received a response back from HR on the information request. IA will follow up as schedule allows. 04/04/2023 IA is working on finalizing the follow up.	In Progress

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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	Business and Finance	6/30/2022	6/30/2023	1		06/27/2022- Responsible parties notified of the new recommendations process. 06/27/2022. Follow up work was conducted in Spring and Fall 2021. IA needs to review the work and determine the status. 11/28/2022 IA is in the process of reviewing prior follow up work. 01/26/2023 IA met with the HR Coordinator to discuss the follow up. JSCC Payroll and some HR processes have been moved to TBR Shared Services. IA has requested transition dates and other information as an initial step. 03/01/2023 IA received a response back from HR on the information request. IA will follow up as schedule allows. 04/04/2023 IA is working on finalizing the follow up.	In Progress
JSCC	5/17/2022	JSCC-IAR- Veterans Affairs - Recommendation 1 of 2: Supporting documentation was missing from some of the student files including student fee schedules, Certificate of Eligibility (COE), Notice of Indebtedness (NOI) letters and original VA ONCE printouts showing credit hours prior to any amendments. Management should review the student files and ensure that adequate supporting documentation exists. It was recommended that a checklist be created and included in each student file.	Dean for Students/School Certifying Official	Policy and Strategy	1/31/2023		0		01/17/2023 -IA notified the SCO in January 2023 of the upcoming follow-up. A copy of the audit was provided. The SCO provided some documentation needed for the follow-up. The SCO requested additional time due to Spring registration and other tasks. Planned timeframe to continue the follow-up is late February.	In Progress
JSCC	5/17/2022	JSCC-IAR- Veterans Affairs - Recommendation 2 of 2: No evidence of student file review was determined. Management should implement review of a sample grouping of student files for each semester. A designated employee, such as the backup SCO, should conduct the review and initial, sign and date the newly implemented checklist in the student file. In addition, the reviewer should email the SCO a listing of the examined files at the completion of the review and include any requests for updates.	Dean for Students/School Certifying Official	Policy and Strategy	1/31/2023		0		01/17/2023 -IA notified the SCO in January 2023 of the upcoming follow-up. A copy of the audit was provided. The SCO provided some documentation needed for the follow-up. The SCO requested additional time due to Spring registration and other tasks. Planned timeframe to continue the follow-up is late February.	In Progress

TBR SWIA - Status Report on Internal Audit Recommendations- Community Colleges
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NaSCC	4/30/2020	The Foundation should develop policies and procedures on procurement and contracting activities.	Executive Director of Foundation	External Affairs	6/1/2020	10/31/2020	0	6/1/2020	6/30/2022 The former Executive Director of Foundation had been working with VP Business and Finance on developing the policies and procedures. The director position is currently vacant; auditor will follow up once a new director is hired. 9/1/2022 Auditor has emailed the new Executive Director about the recommendation. The Executive Director has not responded yet. 10/3/2022 Auditor has sent a follow-up email to the Executive Director. 11/1/2022 The Executive Director has prepared a draft procurement and contracting policy for review and vote by the Foundation board at the next board meeting. 12/1/2022 The draft procurement and contracting policy will be on the agenda for the foundation board meeting on 12/8/2022. 1/3/2023 The discussion of the policy is postponed to the next board meeting on 3/2/2023. 5/1/2023 The discussion of the policy is postponed to the next meeting to be scheduled.	In Progress
STCC	4/20/2022	Each Individual student employed in a Federal Work study position should have an individual job description.	Student Services	Policy and Strategy	5/31/2022	12/30/2022	1		10/03/2022- The Federal Work-Study program currently has no student in the program	In Progress
STCC	4/20/2022	Management should ensure Federal Work Study Students are supervised during their work hours by a Center employee.	Student Services	Policy and Strategy	5/31/2022	12/30/2022	1		10/03/2022- The Federal Work-Study program currently has no student in the program	In Progress
WSSC	4/22/2022	To address unanticipated risks, the SCO should create a Business Continuity Plan using Quali Ready software.	Veterans Coordinator and School Certifying Official (SCO)	Policy and Strategy	10/1/2022	5/31/2023	5	9/7/2022	4/30/2023- With VA ONCE being replaced by Enrollment Manager, additional training was required. The Quali BCP was delayed but remains partially completed at this point in time.	In Progress
ChSCC	12/15/2022	NACHA 2022 1 of 1: A review of the TouchNet SOC II report should be performed annually to ensure third party vendor risks are identified in a timely manner.	Executive Vice President - Business and Finance, Interim Vice-President - Technology	Business and Finance, Technology	8/31/2023					Not Yet Due
CISCC	1/31/2023	Management should obtain a copy of the 2023 NACHA Operating Rules & Guidelines to ensure knowledge of and compliance with any guideline changes.	VP of Finance and Operations	Business and Finance	6/30/2023				4/17/23--sent an email to VPFO & new Dir.of Finance to follow up, but no response.	Not Yet Due

TBR SWIA - Status Report on Internal Audit Recommendations- Community Colleges
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Institution	Report Release Date	Recommendation	Responsible Staff	TBR Vice Chancellor Area	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	Notes and Dates	Status
DSCC	1/13/2023	All NJCAA, TCCAA, TBR and DSCC bylaws, policies and procedures should be followed at all times. Annual training of these procedures should be administered to all coaches and Athletic staff members and the training should be documented. This may include online training provided by NJCAA and TCCAA but should also include direct training related to DSCC specific policies. The DSCC Athletic Handbook should be issued and reviewed in this training. The historical issues surrounding athlete housing at DSCC should be discussed as part of this training. The administration of this training should be assigned to the Athletic Director.	DSCC President and DSCC Vice President of Advancement & External Affairs	Policy & Strategy	7/1/2023					Not Yet Due
DSCC	1/13/2023	The DSCC Athletic Policy 04:07:01:00 should be updated to include a reference to DSCC staff members not providing direct or indirect housing arrangements for student athletes. This is in reference to the TCCAA <i>Financial Administration in Intercollegiate Athletics: 8.03, Section 8, A.</i> , which prohibits direct or indirect housing arrangements. Other additions and updates to this policy may be made as deemed necessary to help prevent future housing problems with student athletes and violations of NJCAA and TCCAA policies.	DSCC President and DSCC Vice President of Advancement & External Affairs	Policy & Strategy	7/1/2023					Not Yet Due
DSCC	1/13/2023	A list of possible rental properties and landlords should be developed by the Athletic Department Administration or the Student Services Department. This list should be the one list that is provided to all coaches for distribution to student athletes. The properties provided on this list should have a reputation for being safe and for being open to renting to DSCC students. There should not be multiple lists that are given out by the various coaches. The housing information provided on the DSCC website is not helpful and should not be used as a substitute for specific housing options.	DSCC President and DSCC Vice President of Advancement & External Affairs	Policy & Strategy	7/1/2023					Not Yet Due
DSCC	1/13/2023	While Athletic scholarships are based largely upon athletic ability as determined by a particular coach, there should be some oversight or review of individual award amounts by the Athletic Director or designee. Currently, once the total athletic scholarship funds are designated for each sport by Financial Aid or by specific donors, the coach for each sport makes the individual student athlete awards without any review or discussion with Athletic Department management. Documentation of this review process should be maintained by the Athletic Director.	DSCC President and DSCC Vice President of Advancement & External Affairs	Policy & Strategy	7/1/2023					Not Yet Due
STCC	9/29/2022	Management should create a system to collect required data to be used to ensure students with the highest point averages are the students admitted into the Special Admission Process Programs.	Academic Affairs	Policy and Strategy	5/30/2023		1			Not Yet Due

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

Institution	Report Release Date	Finding	Responsible Staff	TBR Vice Chancellor Area	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	Notes & Date	Status
STCC	8/18/2022	STCC FY 2021 & 2020 - Finding 1 of 3 The college did not comply with requirements in one area.	Associate Vice President of Information Systems	Business and Finance	7/30/2023					Action Completed
STCC	8/18/2022	STCC FY 2021 & 2020 - Finding 2 of 3 The college incorrectly reported, or did not report, student status changes to the National Student Loan Database System.	Vice President of Student Services	Policy & Strategy	7/30/2023					Action Completed
ChSCC	10/5/2021	ChSCC FY 2020 & 2019- Finding 1 of 1 Chattanooga State Community College did not provide adequate internal controls in four areas that were reported in the prior audit	Vice President Technology	Business and Finance	12/17/2021	7/1/2023	3	2/2/2022	06/29/2022: Two areas completed and two areas in process. 8/1/2022 - Remaining corrections hampered by staffing issues and divisional restructuring. 9/29/2022 - Lack of staff and divisional reorganization continue to affect the development of automated processes to complete corrections for these issues. 11/18/2022 - One area completed with one area remaining. 12/20/2022- Final item has been completed but has not been tested by Internal Audit. 3/1/2023 - Additional changes are in the process of being implemented to continue improvements. Testing will not be performed till after implementation. 5/1/2023 - Improvements have been made including new reports and are being evaluated for success rate.	In Progress
NeSCC	11/7/2022	NeSCC FY 2021 & 2020 Finding 1 of 1 Northeast State Community College did not provide adequate internal controls in two specific areas. The details of this finding are confidential pursuant to Section 10-7-504(i), Tennessee Code Annotated.	VP for Finance and Information Technology	Business and Finance	5/7/2023	6/30/2023	1	12/1/2022	4/4/2023 Action completed in one of the 2 areas. 2nd area scheduled for completion by 06/30/2023	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	Policy & Strategy	4/30/2021	1/31/2023	3	4/20/2021	9/1/2022-Currently no students in the Work Study program.	In Progress
STCC	8/18/2022	STCC FY 2021 & 2020 - Finding 3 of 3 The college incurred over \$10,000 in unnecessary payroll costs for an employee who stopped reporting to work.	Associate Vice President of Human Resources	Business and Finance	7/30/2023				01/31/2023- Repeat follow-up scheduled.	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	TBR Vice Chancellor Area	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
CISCC	4/6/2015	CISCC ITGCR: Cleveland State Community College did not provide adequate internal controls in one area. Ineffective internal controls increase 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	Business and Finance	12/1/2015	12/31/2022	6	7/14/2017	3/1/2023	Action Completed
CoSCC	2/5/2019	CoSCC Information Security Review: Columbia State Community College did not provide adequate internal controls in ten areas. Ineffective internal controls increase 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.	Associate VP for IT	Business and Finance	8/31/2019	12/31/2022	1	10/17/2019	8/10/2022	Action Completed
PSCC	10/12/2022	Pellissippi State Community College did not provide adequate internal controls in eight areas. Ineffective internal controls increase 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	Business and Finance	3/31/2023			1/30/2023	3/31/2023	Action Completed
ChSCC	6/10/2022	ChSCC Information Security Review: Chattanooga State Community College did not provide adequate internal controls in seventeen areas. Ineffective internal controls increase 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. Eleven of seventeen areas have been corrected.	Chief Information Officer	Business and Finance	12/31/2022			8/10/2022	4/25/2023	In Progress
CoSCC	12/15/2022	CoSCC Information Security Review: Columbia State Community College did not provide adequate internal controls in eight areas. Ineffective internal controls increase 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. Four of eight areas have been corrected.	Associate VP for IT	Business and Finance	5/31/2023			3/30/2023		In Progress
NeSCC	1/7/2022	NeSCC ITGCR: Northeast State Community College did not provide adequate internal controls in ten areas. Ineffective internal controls increase 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. Six of ten areas have been corrected.	Chief Information Officer	Business and Finance	6/30/2022	12/31/2022	1	8/9/2022	1/13/2023	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	TBR Vice Chancellor Area	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	1/7/2022	RSCC ITGCR: Roane State Community College did not provide adequate internal controls in nine areas. Ineffective internal controls increase 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 nine areas have been corrected.	Chief Information Officer	Business and Finance	12/31/2022				4/27/2023	In Progress
VSCC	6/10/2022	VSCC ITGCR: Volunteer State Community College did not provide adequate internal controls in six areas. Ineffective internal controls increase 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. Five of six areas have been corrected.	Chief Information Officer	Business and Finance	12/31/2022			8/10/2022	1/11/2023	In Progress

BOARD TRANSMITTAL

MEETING: Committee on Audit

SUBJECT: Audit Reports and Reviews

DATE: May 31, 2023

PRESENTER: Mike Batson

ACTION REQUIRED: Informational Report

STAFF'S
RECOMMENDATION: Accept Report

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 October 1, 2022, to December 31, 2022.

- Chattanooga State Community College
 - Tennessee Small Business Development Center (TSBDC)
Programmatic Review
- Chattanooga State Community College
 - Tennessee Small Business Development Center (TSBDC)
Financial Review
- Jackson State Community College
 - Tennessee Small Business Development Center (TSBDC)
Financial Review

Federal Audits

The Audit Committee will review executive summaries for the federal audit reports issued before December 31, 2022.

- Volunteer State Community College
 - US Department of Defense
Institutional Compliance Program Review
- TCAT Paris
 - Department of Veterans Affairs
Compliance Survey

Internal Audit

The Audit Committee will receive executive summaries for the internal audit reports issued from January 1, 2023, to March 31, 2023, as well as reports issued after March 31, 2023, 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

CISCC	NACHA Security Audit	Page 22
CoSCC	HEERF Public Reporting Review	Page 23
TCAT Jackson/Whiteville	President's Expense Audit FY 2021	Page 24

Internal Audit Reports for Informational Purposes- Institutional Support

PSCC	Faculty Credentials Fall Semester 2022	Page 26
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Internal Audit Reports for Informational Purposes- Investigations

DSCC	INV 23-01: Athletic Housing-Conflict of Interest	Page 28
STCC	INV 20-03: Club and Organization Review	Page 31

Internal Audit Reports for Informational Purposes- Follow-up

CoSCC	Follow-up to the Financial Aid Outcomes	Page 35
MSCC	Additional Follow-up Access and Diversity	Page 36
STCC	Follow-up to the State Audit Report for FY 2021 and 2020	Page 38

* A Limited Official Use Only report for Southwest Tennessee Community College- Follow-up to the LOU State Audit Report for FY 2021 and 2020 was completed during this period. This report will be shared in the Audit Committee Executive Session.

**Tennessee Board of Regents
Audit Committee
May 31, 2023**

*Miscellaneous External
Reviews*

Chattanooga State Community College
Tennessee Small Business Development Center Programmatic Review
Period Coverage: January 1, 2022 – November 17, 2022
November 30, 2022
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 (SBA) Office of Small Business Development Cooperative Agreement. The review was conducted by the Associate State Director.
Findings	No findings were noted.
Recommendations	N/A

Chattanooga State Community College
Tennessee Small Business Development Center Financial Review
Period Coverage: January 1, 2021 – December 31, 2021
February 23, 2023
Executive Summary

Introduction	The purpose of this review is to assist in accomplishing the financial review of the Tennessee Small Business Development Lead Center under the Small Business Administration (SBA) Office of Small Business Development Centers via a Cooperative Agreement. The review was conducted by the Financial Reporting and Account Manager.
Findings	No findings were noted.
Recommendations	N/A

Jackson State Community College
Tennessee Small Business Development Center Financial Review
Period Coverage: January 1, 2021 – December 31, 2021
February 24, 2023
Executive Summary

Introduction	The purpose of this review is to assist in accomplishing the financial review of the Tennessee Small Business Development Lead Center under the Small Business Administration (SBA) Office of Small Business Development Centers via a Cooperative Agreement. The review was conducted by the Financial Reporting and Account Manager.
Findings	No findings were noted.
Recommendations	N/A

**Tennessee Board of Regents
Audit Committee
May 31, 2023**

Federal Audit Reports

Volunteer State Community College
U.S. Department of Defense-
Voluntary Education Institutional Compliance Program Review
February 8, 2023
Executive Summary

Introduction	The Voluntary Education (VolEd) program provides Service members with educational opportunities to advance their professional development and education. The goal of the Institutional Compliance Program is to provide oversight to reduce collective risk while increasing opportunities for Service members, institutions, and the Department of Defense (DoD) as a whole. This report is intended to provide each institution with specific feedback on the results of the DoD VolEd compliance assessment, along with general findings from across the population of 250 institutions under consideration.
Findings and Recommendations	None

Tennessee College of Applied Technology - Paris
U.S. Department of Veterans Affairs- Compliance Survey
January 18, 2023
Executive Summary

Introduction	A routine compliance survey was conducted on site at TCAT Paris on January 10, 2023, as required by Title 38, USCS Section 3693. The Entrance Briefing and Exit Briefing were also conducted on this day.
Scope	<p>The sample size consisted of ten (10) VA beneficiaries, and one randomly selected non-VA beneficiary records. This is in accordance with the compliance survey requirements specified in Approval, Compliance, and Liaison (AC&L) FY21 Compliance Survey Guidance. The “Active Student Count” reflected forty-five (45) VA beneficiaries.</p> <p>One non-VA student file was reviewed to verify that the cost of tuition and fees for VA beneficiaries was not greater than the cost for similarly circumstanced students. The results were consistent with the VA beneficiary records. No issues were identified.</p>
Discrepancies	No discrepancies were identified during the compliance survey.

**Tennessee Board of Regents
Audit Committee
May 31, 2023**

***Internal Audit Reports
Financial Management***

**Cleveland State Community College
NACHA Security Audit
December 2022
Executive Summary**

Key Staff Personnel	VP of Finance & Operations (former Bursar) and Director of Information Technology	Internal Auditor	Denise Callais, Director Internal Audit
Introduction	<p>National Automated Clearing House Association (NACHA) is a not-for-profit association that oversees the Automated Clearing House (ACH) Network, an electronic payment network. NACHA provides the legal foundation for the ACH Network through the development and enforcement of the <i>NACHA Operating Rules & Guidelines</i> which establish a set of requirements in order to provide a minimum amount of protection for WEB entries. WEB entries are internet- initiated entries that NACHA defines as “a debit entry to a Consumer Account initiated by an Originator pursuant to an authorization that is obtained from the Receiver via the Internet.”</p> <p><i>NACHA Operating Rules & Guidelines</i> obligate Originators to:</p> <ul style="list-style-type: none"> • Obtain the consumer’s written authorization prior to initiating a debit entry • Mitigate risks associated with Internet-based payments by: <ul style="list-style-type: none"> ○ Authenticating the identity of the Receiver ○ Employing a fraudulent transaction detection system ○ Establishing secure Internet sessions ○ Verifying the Receiving Depository Financial Institution’s routing number ○ Reviewing security control procedures 		
Objectives	<p>The objectives of the audit were to determine the college’s compliance with <i>NACHA Operating Rules & Guidelines</i> for WEB entries related to:</p> <ul style="list-style-type: none"> • Authorization requirements • Formatting requirements • Risk management requirements to adequately protect consumer financial information 		
Conclusion	<p>CLSCC complies with the authorization, formatting, and risk management requirements of the <i>NACHA Operating Rules & Guidelines</i>. However, Internal Audit suggests one recommendation to ensure continued compliance with the <i>NACHA Operating Rules & Guidelines</i>.</p>		
Recommendation	<p>Based on the performed audit procedures, Internal Audit recommends that the college:</p> <ul style="list-style-type: none"> • obtain a copy of the 2023 NACHA Operating Rules & Guidelines to ensure knowledge of and compliance with any guideline changes. 		
Management Response	<p>Management concurs with the recommendation to obtain a copy of the 2023 NACHA Operating Rules & Guidelines.</p>		

**Columbia State Community College
Higher Education Emergency Relief Funds (HEERF) Public Reporting Review
Fiscal Years 2020-2022
February 23, 2023
Executive Summary**

Key Staff Personnel	Associate Vice President, Business Services	Internal Auditor	Erica Smith, CPA, CIA
Introduction	<p>As part of the Higher Education Emergency Relief Fund, or HEERF, the Office of Postsecondary Education awarded funding to institutions of higher education to help alleviate the negative impacts of the COVID-19 pandemic. The aid provided fast and direct economic aid to institutions and students.</p> <p>The U.S. Department of Education directed institutions to post on the institution’s primary website, in a format and location easily accessible to the Public, specific informational items related to Emergency Financial Aid Grants to students, and to post standard reports of institutional expenditures on the same page as the informational items related to Emergency Financial Aid Grants to students.</p>		
Objectives	<p>The objectives of the internal audit engagement focused on whether the internal control structure provided reasonable assurance that the college posted HEERF information in the manner directed by the Department of Education, and to verify the posted information agreed to the college’s financial records.</p>		
Conclusion	<p>The engagement outcomes reflect management has established internal controls sufficient to ensure timely posting of HEERF reporting as directed by the U.S. Department of Education.</p>		

Tennessee College of Applied Technology-Jackson/Whiteville
Audit of President's Expenses
For the Period July 1, 2020 – June 30, 2021
January 6, 2023
Executive Summary

President	Mr. Heath McMillian, Interim Dr. Jeff Sisk, Past President	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, 2021; 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, 2021:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">President</th> <th style="text-align: right;">Jackson</th> <th style="text-align: right;">Whiteville</th> <th style="text-align: right;">Total</th> </tr> </thead> <tbody> <tr> <td>Salary & Benefits</td> <td style="text-align: right;">\$199,213</td> <td style="text-align: right;">-</td> <td style="text-align: right;">\$199,213</td> </tr> <tr> <td>Administrative Allowance</td> <td style="text-align: right;">\$2,250</td> <td style="text-align: right;">-</td> <td style="text-align: right;">\$2,250</td> </tr> <tr> <td>Housing Allowance</td> <td style="text-align: right;">\$6,600</td> <td style="text-align: right;">-</td> <td style="text-align: right;">\$6,600</td> </tr> <tr> <td>Vehicle Allowance</td> <td style="text-align: right;">-</td> <td style="text-align: right;">-</td> <td style="text-align: right;">-</td> </tr> <tr> <td>Cell Phone Allowance</td> <td style="text-align: right;">\$600</td> <td style="text-align: right;">-</td> <td style="text-align: right;">\$600</td> </tr> <tr> <td>Business Meals & Hospitality</td> <td style="text-align: right;">\$551</td> <td style="text-align: right;">-</td> <td style="text-align: right;">\$551</td> </tr> <tr> <td>Travel</td> <td style="text-align: right;">-</td> <td style="text-align: right;">-</td> <td style="text-align: right;">-</td> </tr> <tr> <td>Other</td> <td style="text-align: right;">-</td> <td style="text-align: right;">-</td> <td style="text-align: right;">-</td> </tr> <tr> <td>President's Office</td> <td style="text-align: right;">-</td> <td style="text-align: right;">-</td> <td style="text-align: right;">-</td> </tr> <tr> <td>Salary & Benefits</td> <td style="text-align: right;">\$155,840</td> <td style="text-align: right;">\$197,480</td> <td style="text-align: right;">\$353,320</td> </tr> <tr> <td>Travel</td> <td style="text-align: right;">\$10</td> <td style="text-align: right;">-</td> <td style="text-align: right;">\$10</td> </tr> <tr> <td>Other</td> <td style="text-align: right;">\$25,636</td> <td style="text-align: right;">\$53,860</td> <td style="text-align: right;">\$79,496</td> </tr> <tr> <td>Total Expenses</td> <td style="text-align: right;">\$390,700</td> <td style="text-align: right;">\$251,340</td> <td style="text-align: right;">\$642,040</td> </tr> </tbody> </table> <p>The allowances were provided to the President during the year. Use of the expense allowances was not included in tests performed during the audit because the president elected for the allowances to be paid as taxable income. The President used a TCAT motor pool vehicle when traveling on TCAT business.</p>				President	Jackson	Whiteville	Total	Salary & Benefits	\$199,213	-	\$199,213	Administrative Allowance	\$2,250	-	\$2,250	Housing Allowance	\$6,600	-	\$6,600	Vehicle Allowance	-	-	-	Cell Phone Allowance	\$600	-	\$600	Business Meals & Hospitality	\$551	-	\$551	Travel	-	-	-	Other	-	-	-	President's Office	-	-	-	Salary & Benefits	\$155,840	\$197,480	\$353,320	Travel	\$10	-	\$10	Other	\$25,636	\$53,860	\$79,496	Total Expenses	\$390,700	\$251,340	\$642,040
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Conclusion	The audit of the President's Expenses for the Tennessee College of Applied Technology-Jackson/Whiteville for the period July 1, 2020, through June 30, 2021, revealed no significant deficiencies in internal controls, no large or unusual expenditures, and the expenditures were in compliance with TBR purchasing policies and regulations.																																																											

**Tennessee Board of Regents
Audit Committee
May 31, 2023**

***Internal Audit Reports
Institutional Support***

**Pellissippi State Community College
Faculty Credentials
Fall Semester 2022
February 16, 2023
Executive Summary**

Key Staff Personnel	President & Vice President of Academic Affairs	Internal Auditor	Interim Director, Internal Audit
Introduction	The audit of faculty credentials was requested by the President of Pellissippi State Community College. This is an annual audit to ensure that all full-time and part-time faculty hired by Pellissippi State meet the requirements of the College’s accrediting agency. The ability to provide all required documents in a timely fashion 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 Pellissippi State Community College was sufficient to document compliance with the criteria; and to recommend improvements if any are necessary.		
Conclusion	Pellissippi State Community College needs to continue to make improvements in documenting that faculty hired to teach are qualified. After discussions with the President, as well as with the Vice President of Academic Affairs, it appears that management understands the problem and will continue making every effort to prevent it from occurring in the future.		
Recommendations	There were no formal audit recommendations related to this audit.		

**Tennessee Board of Regents
Audit Committee
May 31, 2023**

***Internal Audit Reports
Investigations***

Dyersburg State Community College
Internal Audit Investigation 23-01:
2022 Athletics Department – Men’s Basketball – Housing Conflict of Interest – Page 1 of 3
January 13, 2023
Executive Summary

Key Staff Personnel	DSCC President, DSCC Dean of Student Services, Athletic Director/Men’s Basketball Coach, Assistant Men’s Basketball Coach	Internal Auditors	Sandra Pruett, DSCC Director of Internal Audit; Jennifer Garoutte, TBR Investigative Audit Manager
Introduction	<p>In late July, a community member alleged to the President that the Assistant Men’s Basketball Coach had been involved with the purchase of a property in Dyersburg that was planned to be used for student athlete housing. The Dean of Student Services did some preliminary investigation and found no evidence of the Assistant Coach owning property in the area. In late September, the community member reiterated concerns to the President and included with this information that the Head Coach’s brother-in-law now owned the property and athletes were living on the property. The President notified the Director of Internal Audit of the allegations and requested her to review. An investigation conducted by the Director of Internal Audit and the TBR Investigative Audit Manager determined that potential conflicts of interest and policy violations were present.</p> <p>As a result of this investigation, DSCC management terminated the employment of the DSCC Assistant Men’s Basketball Coach. The Athletic Director, who also served as the Men’s Head Basketball Coach, resigned his position. The Athletic Department has been reassigned from Student Services to External Affairs and a new fully administrative Athletic Director position has been created. This new position will have no coaching duties. The President has met personally with all coaching staff to emphasize the importance of and necessity of following the rules and to act with integrity and honesty in all matters.</p>		
Objectives	<p>The objectives of this investigation were to determine the validity of the issues expressed by the community member, and the extent of any violations of DSCC, the Tennessee Board of Regents (TBR), the Tennessee Community College Athletic Association (TCCAA), and/or the National Junior College Athletic Association (NJCAA) policies.</p>		

Dyersburg State Community College
Internal Audit Investigation 23-01:
2022 Athletics Department – Men’s Basketball – Housing Conflict of Interest – Page 2 of 3
January 13, 2023
Executive Summary

<p>Conclusion</p>	<p>The allegation was confirmed. In June 2022, the Assistant Men’s Basketball Coach signed a contract to purchase the property in Dyersburg. Between the signing of the contract and closing on the property, the Assistant Coach assigned the contract to the brother-in-law of the Athletic Director/Head Men’s Basketball Coach. It was also found that 11 of the 17 DSCC men’s basketball players were living at this property and that the coaches had promoted this property and provided very limited options regarding other housing in Dyersburg. Both coaches attempted to mislead DSCC management and investigators as to their knowledge and involvement in this housing arrangement. The student athletes involved did not know that any potential TCCAA or NJCAA violations had occurred.</p>
<p>Recommendations & Management Responses</p>	<p>Recommendation 1: All NJCAA, TCCAA, TBR and DSCC bylaws, policies and procedures should be followed at all times. Annual training in these areas should be administered to all coaches and Athletics staff members and the training should be documented.</p> <p>Management Response 1: Management concurs with the recommendation. As VP of Advancement and External Affairs responsible for the oversight of Athletics, an annual training session will be scheduled for all coaches with a representative of NJCAA or TCCAA moving forward. All coaches and the Athletic Director will also complete a yearly examination to ensure they are familiar with NJCAA policy and regulations. The recommendation will be scheduled once a new Athletic Director is hired.</p> <p>Recommendation 2: The DSCC Athletic Policy 04:07:01:00 should be updated to include a reference to DSCC staff members shall not provide direct or indirect housing arrangements for student athletes. This is in reference to the TCCAA <i>Financial Administration in Intercollegiate Athletics: 8.03, Section 8, A.</i>, which prohibits direct or indirect housing arrangements.</p> <p>Management Response 2: Management concurs with the recommendation. The VP of Advancement and External Affairs will review the policy and propose updates to the policy by April 2023 with the requested language per the recommendation.</p> <p>Recommendation 3: A list of possible rental properties and landlords should be developed by the Athletic Department Administration or the Student Services Department. This list should be the one list that is provided to all coaches for distribution to student athletes. The properties provided on this list should have a reputation for being safe and for being open to renting to DSCC students. There should not be multiple lists that are given out by the various coaches. The housing information provided on the DSCC website is not helpful and should not be used as a substitute for specific housing options.</p>

Dyersburg State Community College
Internal Audit Investigation 23-01:
2022 Athletics Department – Men’s Basketball – Housing Conflict of Interest – Page 3 of 3
January 13, 2023
Executive Summary

<p>Cont. Recommendations & Management Responses</p>	<p>Management Response 3: Management concurs with the recommendation; however, we feel that there should be a clear separation of Athletics and any information related to housing, given the most recent incident. Therefore, we propose that the list of housing/rental properties be created within the Division of Student Affairs, specifically as a function of Student Life Offices at our main campus and campus centers. With the list published and maintained by Student Life and shared on its website for all students to access, this would prevent any suggestion of favoritism for athletes acquiring housing or the opportunity being provided only to athletes. Moving this request to Student Life would also offer additional distance for coaches and the Athletic Director. The coaches and Athletic Director can point all prospective student-athletes to the same list that other students can access via the college website.</p> <p>Recommendation 4: While Athletic scholarships are based largely upon athletic ability as determined by a particular coach, there should be some oversight or review of individual award amounts by the Athletic Director or designee. Currently, once the total athletic scholarship funds are designated for each sport by Financial Aid or by specific donors, the coach for each sport makes the individual student athlete awards without any review or discussion with Athletic Department management. Documentation of this review process should be maintained by the Athletic Director.</p> <p>Management Response 4: Management concurs with the recommendation. Athletic awards will be subject to discussions and final approval of the Athletic Director once a full-time Athletic Director is hired. Management would also like to explore the current assignment of aid in 2023 and determine how other TCCAA colleges use award language, such as “full scholarship based on federal, state, local, donor, or athletic aid awarded” or partial scholarship based on federal, state, local, donor, or athletic aid awarded,” so that students are awarded all the other assistance first before a dollar amount is given from the athletic scholarship pool of funds. This will help ensure all avenues of aid are awarded first, and athletic scholarship funding is used more efficiently and effectively. Hopefully, the language could be revised based on data collected from other TCCAA Colleges and updated in the 2024-2025 academic recruitment year for all athletes.</p>
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Southwest Tennessee Community College
Investigation STCC 20-03, Club and Organization Review – Page 1 of 3
March 28, 2023
Executive Summary

<p>Key Staff Person: Deputy Chief Financial Officer, Finance</p>	<p>Auditor: Charlotte Johnson, Director of Internal Audit</p>
<p>Introduction</p>	<p>Internal Audit received an allegation regarding the discrepancies in accessibility to financial information for Phi Theta Kappa. The allegation stated club officers had approached club advisors for access to information about the club’s budget and financial information. It also stated the club advisors and Student Development were withholding financial information from club officers following repeated requests.</p>
<p>Objective</p>	<p>The primary objective of this review was to determine if the allegation was substantiated.</p>
<p>Scope</p>	<p>Upon receiving the allegation, the Internal Audit Director reviewed all club accounts and provided the Director of Student Services with detailed reports from 2016 through 2021.</p>
<p>Results of the Review</p>	<p>In 2017, the President issued a directive that club funds be maintained by Southwest Tennessee Community College (STCC) finance officials, not club advisors. Financial staff changed several times during the transition of club account fund control to the college. Incorrect journal entries were prepared and posted to the general ledger accounts for several clubs. The journal entries have been corrected and the year-to-date balances for the club accounts are correct.</p> <p>Recommendation 1 Southwest Tennessee Community College policy, <i>Student Organizations: Official Registration Policy No: 3:01:01:00/4</i> should be updated to contain a statement that advisors are prohibited from operating external bank accounts for the clubs.</p> <p>Management’s Response A statement will be added to Southwest policy, <i>Student Organizations: Official Registration 3:01:01:00/4</i>, that states that club advisors are prohibited from operating external bank accounts. The responsible party for the policy is the Vice President of Student Affairs, (VPSA). In addition to advising the VPSA of the policy revision, the policy will be shared with governance groups across the campus during the next scheduled meetings and during the next President’s Cabinet meeting in February of 2023.</p> <p>Recommendation 2 The Deputy Chief Financial Officer should start providing each club advisor, club officer, and the Director of Student Development with a monthly statement showing income and distributions for each club.</p>

Southwest Tennessee Community College
Investigation STCC 20-03, Club and Organization Review – Page 2 of 3
March 28, 2023
Executive Summary

<p>Results of the Review (continued)</p>	<p>Management’s Response Monthly financial statements are now provided to each club advisor as well as to the club student officers via an email distribution. In addition, the Director of Student Development receives a report for each club. Clubs with current year activity receive a detailed list of all transactions for the time period reported. This report distribution began in November 2022.</p> <p>Recommendation 3 The Deputy Chief Financial Officer may want to consider periodic training for club advisors regarding the financial controls in place and how to properly make requests for expenditure of funds.</p> <p>Management’s Response Finance representatives have generally conducted training for the club advisors on an annual basis. We will ensure this training continues annually.</p> <p>Recommendation 4 All check requests, including travel advances, made payable to the club advisor must be reviewed to ensure proper supporting documentation is attached to the check request. For travel advances, documentation should be submitted within 30 days of completed travel.</p> <p>Management’s Response Accounts Payable procedures currently include proper review of check requests and travel advance support prior to disbursement. Proper approval is currently required for all payment requests. Per Southwest’s current signature requirements guideline, Department Chair or Director approval is required for all payment requests, travel authorizations and travel reimbursement claims. Travel advances are regularly reconciled.</p> <p>Recommendation 5 The Phi Theta Kappa Club advisor did not close the club’s existing bank account and maintained a petty cash fund for twenty months after the President’s directive. The President may want to consider disciplinary action for the Phi Theta Kappa advisor for not closing the chapter’s bank account at the requested date and for maintaining a petty cash account.</p> <p>Management’s Response Declining to follow the referenced directive for twenty months is concerning and will be addressed. Relevant Southwest policies will be considered, as well as reprimands for similar offenses. Thereafter, a determination will be made regarding the Phi Theta Kappa Club advisor. The auditor will receive notice of the reprimand.</p>
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Southwest Tennessee Community College
Investigation STCC 20-03, Club and Organization Review – Page 3 of 3
March 28, 2023
Executive Summary

Conclusion	<p>Periodic reports were not developed and distributed to club members by Student Development or club advisors. Twenty-seven clubs and organizations transitioned to the new system. Two clubs violated a presidential directive and maintained petty cash accounts separate from their school account, and one club continued to maintain an external bank account. Detailed documents were not always maintained by these two clubs.</p> <p>Checks were issued to club advisors when the check request provided no supporting documentation.</p>
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**Tennessee Board of Regents
Audit Committee
May 31, 2023**

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

**Columbia State Community College
Financial Aid Outcomes Follow-up
January 31, 2023
Executive Summary**

Key Staff Personnel	Matt Lewis, Director, Financial Aid	Internal Auditor	Erica Smith, CPA, CIA
Introduction	<p>Columbia State Internal Audit released two reports focused on the financial aid internal control environment: in March 2018, <i>Financial Aid</i> and in June 2021, <i>Follow-up on Financial Aid Outcomes Released March 2018, and June 2020</i>.</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 whether the internal control environment resulted in an accurate Eligibility and Certification Approval Report (ECAR) on file with the Department of Education.</p>		
Conclusion	<p>The engagement outcomes reflect management has established monitoring controls to resolve the root cause of previous ECAR inaccuracies and untimely reporting.</p>		

Motlow State Community College
Follow-Up Review #3 of the Access and Diversity Audit – Page 1 of 2
March 8, 2023
Executive Summary

Auditee	Vice President of Student Success, Dean of Students, Executive Director of Diversity, Equity, and Inclusion	Auditor	Tammy Wiseman, Internal Auditor
Objectives	The objective of the review was to determine whether adequate corrective actions have been taken to address the remaining two of four recommendations from the audit of Access and Diversity funds and the first and second follow-up reviews.		
Scope	This third follow-up review describes the current status of actions taken by Motlow State Community College management to correct deficiencies reported. The review was conducted in accordance with the <i>International Standards for the Professional Practice of Internal Auditing</i> issued by The Institute of Internal Auditors. The review included tests of the records and other procedures considered necessary to achieve the audit objective.		
Conclusion	Management has taken sufficient corrective actions to clear the two outstanding audit recommendations.		
Current Status of Recommendations	<p>Recommendation 1: Access and diversity scholarships should only be awarded to individuals that meet the stated criteria developed by MSCC and approved by the TBR Office of OESI. 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.</p> <p>Current Status: The recommendation has been cleared. The follow-up review completed in Spring of 2022, demonstrated that written procedures, “Student Access & Diversity Scholarship Awards” were developed, and the scholarship awarding process was sufficiently documented and complied with the established guidelines.</p>		

Motlow State Community College
Follow-Up Review #3 of the Access and Diversity Audit – Page 2 of 2
March 8, 2023
Executive Summary

<p style="text-align: center;">Current Status of Recommendations (Continued)</p>	<p>Recommendation 2: 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.</p> <p>Current Status: The recommendation has been cleared. The follow-up review conducted Summer 2022, found that procedures had been developed but were not being followed specifically regarding the requirement that all “committee members must reply to the confirmation with an approval or denial.” Seven of the eleven transactions reviewed did not have the required votes from all committee members. In November 2022, MSCC Policy 6:22:00:01 <i>Access and Diversity Committee</i> was made effective establishing a quorum requirement to conduct business; however, new language contained in the procedures “Faculty and Staff Professional Development, Retention, and Recruitment Grant Criteria” did not align with TBR expectations. After consulting with the TBR Vice Chancellor for Organizational Effectiveness, revisions have been made to the grant criteria and are now available on MSCC’s intranet.</p>
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Southwest Tennessee Community College
Follow-up to the State Audit Report – Page 1 of 2
For Fiscal Years Ending June 30, 2021 and June 30, 2020
January 31, 2023
Executive Summary

Key Staff Personnel	Director of Financial Aid and Chief Financial Officer	Internal Auditor	Charlotte Johnson, Director of Internal Audit
Introduction	The Comptroller of the Treasury, Division of State Audit issued a financial and compliance audit of Southwest Tennessee Community College for the fiscal years ended June 30, 2021 and June 30, 2020, on August 18, 2022. The report included three audit findings. The current status of areas addressed in the findings is presented in the Results of the Current Audit section below.		
Objective	The objective of the review was to determine whether adequate corrective actions have been taken to address the audit findings, implement the audit recommendations, and mitigate the risks that errors or fraud could occur and not be detected in a timely manner.		
Results of the Current Audit	<p><u>Current Status of State Audit Findings</u></p> <p><u>Finding 1</u></p> <p>Southwest Tennessee Community College did not comply with requirements in one area.</p> <p><u>Recommendation</u></p> <p>Management should take corrective action to ensure the college complies.</p> <p><u>Current Status</u></p> <p>A committee under the direction of the Director of IT Security meets monthly to review the area and ensure compliance with risk management standards.</p> <p><u>Finding 2</u></p> <p>Southwest Tennessee Community College incorrectly reported, or did not report, student status changes to the National Student Loan Database System.</p> <p><u>Recommendation</u></p> <p>The Registrar should coordinate with the information systems staff to ensure that computer processes run by the college’s staff are generating appropriate results and that the programming errors are resolved for the flat file.</p>		

Southwest Tennessee Community College
Follow-up to the State Audit Report – Page 2 of 2
For Fiscal Years Ending June 30, 2021 and June 30, 2020
January 31, 2023
Executive Summary

<p>Results of the Current Audit</p>	<p><u>Current Status</u></p> <p>New processes have been put in place to ensure that Southwest Tennessee Community College’s reports are correct.</p> <p><u>Finding 3</u></p> <p>The College incurred over \$10,000 in unnecessary payroll costs for an employee who stopped reporting to work.</p> <p><u>Recommendation</u></p> <p>Management should continue to strengthen written policies and procedures to address all common considerations associated with involuntary terminations for job abandonment.</p> <p><u>Current Status</u></p> <p>Policies and Procedures are in the process of being reviewed and updated. The new deadline is March 1, 2023.</p>
<p>Conclusion</p>	<p>Based on the results of tests and procedures performed, management has taken adequate actions, or plans to take adequate corrective actions by March 1, 2023, to address the audit findings, implement the audit recommendations, and mitigate the risks that errors or fraud could occur and not be detected in a timely manner.</p> <p>The Office of Internal Audit will continue to follow up on outstanding issues until management has completed the corrective action.</p>

BOARD TRANSMITTAL

MEETING: Committee on Audit

SUBJECT: System-wide Internal Audit Updates

DATE: May 31, 2023

PRESENTER: Mike Batson

ACTION REQUIRED: Informational Report

STAFF'S
RECOMMENDATION: Accept Report

Mike Batson will give brief updates for the following items:

- Jackson State Community College- Internal Auditor
- External Quality Assurance Review Update
- Management's Risk Assessment Update

BOARD TRANSMITTAL

MEETING: Committee on Audit

SUBJECT: University Updates

DATE: May 31, 2023

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 – NO FINDINGS

Austin Peay State University
— FYE June 30, 2022

Middle Tennessee State University
— FYE June 30, 2022

Tennessee Technological University
— FYE June 30, 2022

FINANCIAL AND COMPLIANCE AUDITS –FINDINGS

East Tennessee State University
— FYE June 30, 2022

University of Memphis
— FYE June 30, 2022

**Tennessee Board of Regents
Audit Committee
May 31, 2023**

***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, 2022	Unmodified Opinion	Two findings were identified as significant deficiencies	No instances of noncompliance required to be reported	2

Finding 1 – University staff did not conduct proper collection procedures on accounts receivable

As noted in the prior audit, management did not ensure collection procedures for accounts receivable were performed timely by Bursar's Office and ETSU College of Nursing personnel. We tested a sample of 32 delinquent receivables, which consisted of 27 student accounts receivable and 5 College of Nursing clinic receivables that were more than 90 days old at June 30, 2022. All items in the sample required collection letters and referral to a collection agency.

Recommendation - Management should ensure that staff charged with monitoring and collecting accounts receivable adhere to the written institutional and departmental policies to ensure timely collections.

Management's Comment – We concur with the finding and recommendation. Management has taken several steps to ensure that staff charged with monitoring and collecting accounts receivable adhere to the written institutional and departmental policies to ensure timely collections. Following the issuance of the prior year report in February 2022, the policy *Collection of Accounts Receivable* was updated and subsequently approved by ETSU University Council in June. In addition, a new collections calendar was implemented in the Bursar's Office to improve the timeline of e-mailed and mailed notifications as well as provide date ranges for placements with an outside agency after proper notification of the debt. In April of 2022, a new semi-automated monthly notification process was put into place which creates e-mails to students' campus and personal accounts on a monthly basis. Bursar's Office staff are also working with our vendor, Campus Receivables Collector, to clarify certain system processes to increase automation.

The College of Nursing has been working with the Office of Practice to review the clinic accounts receivable procedures and ensure adherence to collection policies. The Office of Practice is aware of the need to consistently follow ETSU and College of Nursing policies and procedures. The Office of Practice has contracted a temporary employee for 15 hours a week to review delinquent accounts, prepare the final collection letter, and move the account into a final collection status after 10 days with no response. Additionally, a new Business Director started January 3, 2023, filling a position which was vacant for 5 years. Hiring the staff and temporary positions is a critical step forward to ensure proper internal management.

Finding 2 – The ETSU Office of Financial Aid and Scholarships did not adequately monitor the eligibility of Title IV financial aid recipients

East Tennessee State University's Office of Financial Aid and Scholarships did not adequately monitor the eligibility of Title IV financial aid recipients. We reviewed the entire population of students enrolled at ETSU who received Title IV student financial assistance during the 2021-2022 award year. The population we reviewed also included students in the university's Colleges of Medicine and Pharmacy. A total of 8,036 students were tested (7,593 enrolled at ETSU, 222 enrolled at the College of Medicine, and 221 enrolled at the College of Pharmacy). Of the 7,593 students at ETSU, 13 students

(0.17%) received excess financial aid based on their eligibility, resulting in overpayments totaling \$77,329. We did not identify errors for the College of Medicine or the College of Pharmacy.

Recommendation - East Tennessee State University should provide additional training to the Office of Financial Aid and Scholarships staff and student advisors to ensure that they properly confirm the eligibility of Title IV recipients prior to disbursement of Title IV funds. Controls should be in place to monitor enrollment changes, recipients' enrollment in eligible programs, adherence to annual and aggregate loan limits, and satisfactory academic progress.

Management's Comment – We concur with the finding and recommendation. Management has implemented procedures to confirm student eligibility for financial aid. Additional training for Financial Aid and Scholarships Office staff has been initiated, and additional levels of review have been added to procedures moving forward. Management has met with the Executive Director of Academic Advising to schedule additional training for academic advisors regarding university policy relative to declaring a major. Additionally, a report has been created that identifies students that have earned more than 60 credits and have not declared a major. The report is being electronically delivered weekly to academic advisors for outreach and processing. The Director of Financial Aid and Scholarships and the Assistant Director of Financial Aid Operations also receive and review the report to ensure ineligible students do not receive financial aid.

Institution	For the Year Ended	Auditor's Opinion on Financial Statements	Report on Internal Control	Report on Compliance	Findings
University of Memphis	June 30, 2022	Unmodified Opinion	One finding was identified as a significant deficiency	No instances of noncompliance required to be reported	1

Finding 1 – The university did not obtain state-level approvals for accounts receivable write-offs

As part of the oversight authority of the State of Tennessee, the Department of Finance and Administration (F&A) has a rule that accounts receivable write-offs are subject to approval by both the Commissioner of F&A and the Comptroller of the Treasury. The intent of the rule is to ensure appropriate collection efforts before discharging amounts owed to the state. According to Chapter 0620-1-9.02 of the *Rules of Department of Finance and Administration*:

For write-offs of accounts of five thousand dollars (\$5,000) or greater, or accounts aggregating to twenty-five thousand dollars (\$25,000) or greater, the agency, department, or institution shall obtain written approval of the Commissioner of Finance and Administration and the Comptroller of the Treasury. . . . Write-offs of accounts less than five thousand dollars (\$5,000) or accounts aggregating less than twenty-five thousand dollars (\$25,000) may be authorized by the head of the agency, department, or institution.

The University of Memphis has policies and procedures that mirror the language of the F&A rule: Policy BF4033, “Collection of All University Accounts Receivable” and the related procedure “Process for Recovery of Accounts Receivable.”

While the rule does not define the time period of write-offs, common practice is to analyze and submit approvals for the accounts receivable annually. As part of this process, universities and state departments compile a list of receivables where collection efforts have been exhausted and accumulate a total write-off amount for approval. While annual submissions are common, more frequent submissions have historically been acceptable.

Management shared with us that their intention is for the University Student Business Services Office (USBS) to submit the accounts for write-off up to the amount permitted by the rule on a monthly basis, in addition to the annual submission to F&A and the Comptroller as they had been doing previously.

When we examined the university’s write-off requests, we noted that more than \$149,000 was written off in a six-month period, without the additional approvals from F&A and the Comptroller. The Chief Financial Officer and the President approved the first grouping, totaling \$74,936 and covering January through March, on March 28 and 29, 2022. They approved the second grouping, totaling \$74,067 and covering April through June, on June 23 and 29, 2022. Both groupings accumulated to totals larger than the \$25,000 threshold requiring state approval, but management did not submit them for F&A and Comptroller approval.

University management’s position was that since each month accumulated to less than \$25,000, the additional approval was not required. We disagree with that interpretation of the rule. In addition to accumulations for the President’s approval, the aggregated amounts for all six individual months between January 2022 and June 2022 were between \$24,380 and \$24,998.

We concluded the write- offs were not in compliance with the spirit of the policy and resulted in the avoidance of appropriate approvals.

Even with these smaller monthly write-offs, the university still had a large annual write-off for over \$1 million that had to be submitted to the state. Due to staffing shortages earlier in the year and the ensuing backlog from those shortages, the larger write-off was not submitted until December 2022, six months after the June 30 fiscal year ended.

Recommendation - University management should ensure write-off policies and practices are in compliance with both the letter and the spirit of the F&A rule. Management should ensure the write-offs of accounts receivable are appropriately accumulated and approved.

Management's Comment – Management acknowledges the finding described above and appreciates the concerns expressed regarding compliance with both the letter and spirit of the F&A rule. Going forward, the university will ensure that uncollectible debts of any denomination recommended for write-off will be submitted to the Commissioner of F&A and the Comptroller of the Treasury and written off only upon their approval. We will aim to do so on a regular basis to ensure that aged balances do not increase as was the case prior to the practice of regular review and write-off of balances implemented in fiscal year 2019.

BOARD TRANSMITTAL

MEETING: Committee on Audit

SUBJECT: Review of Revisions to Fiscal Year 2023 Audit Plans

DATE: May 31, 2023

PRESENTER: Mike Batson

ACTION REQUIRED: Roll-Call Vote

STAFF'S
RECOMMENDATION: Approve

The Office of Internal Audit at each campus and the system office prepare 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.

According to the *Audit Committee Charter*, the Audit Committee is required to “review and approve the annual audit plans for the system office and the colleges’ audit functions, including management’s request for unplanned audits”.

A summary of significant revisions to the plans from July 2022 to March 2023 is attached, followed by the revised plan for each of the audit offices.

**Tennessee Board of Regents
Summary of Revisions
Fiscal Year 2023 Audit Plans**

Overview of Significant Revisions: Below are revisions to the audit plans created in July 2022, reflecting changes which occurred from July 1, 2022, to March 31, 2023. 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 July 1, 2022
ChSCC	Added INV-2023-01, INV-2023-02, INV-2023-03, INV-2023-04, INV-2023-05, TCAT Athens Veterans Benefit Certification, and Basketball Tournament Event Process. Removed Sensitive Equipment Student Loaner Processes, Segregation of Duties Review-Payroll/HR, and CCTA Element Audit.
ClSCC	Added QAR Self-Assessment. Removed P-Card Usage Policies in Foundation.
CoSCC	Added DoD Compliance Review and TCAT Hohenwald-Veterans Affairs Removed CCTA-Element Audit and PPA Compliance Check
DSCC	Added TCAT Veterans Affairs Benefit Audit and INV 23-01- Athletic Housing Conflict of Interest Removed CCTA Funding Formula, Athletic Camps, Clinics, Fundraising, and Scholarships, Records Management and Retention, and Payroll and Payroll Deductions
JSCC	Added TCAT Jackson/Whiteville Veterans Affairs Audit. Removed CCTA Element Audit, CCTA Element Audit- Completion Follow-up.
MSCC	Added Other Internal Audit Follow-up, Student Activity Fees Audit, External Affairs Consulting Engagement, Cash Handling Audit, and Veterans Affairs Follow-up. Removed Clearing House Audit.
NaSCC	Removed State Audit Follow-up and CCTA Element Audit.
NeSCC	Removed CCTA Element Audit.
PSCC	Removed CCTA Funding Formula.
RSCC	Added Release Time/Workload Audit Follow-up, Adjuncts Having More than One Position at RSCC, TCAT Harriman Veterans Affairs Benefit Certification, INV 23-01, INV 23-02, and INV 23-03. Removed CCTA and Equipment Inventory & Tagging.
VSCC	Removed CCTA Funding Formula.
WSCC	Removed WSCC Risk Assessment, IAR-CCTA, IT Governance, and Accounts Receivable.

TBR-IA	Added Risk Assessment Activities and Complaint-TCAT Crossville. Removed Cash Disbursements.
TBR-INV	Added INV-23-02, INV 23-03, INV 23-04, INV 23-05, INV 23-06, INV 23-07, and INV-DSCC-23-01. Removed Presidents Expense Audit-VSCC.
TBR-TCAT	Added INV 23-07: FY23 Memphis.

Chattanooga State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2023
Revised April 2023

Area	Type	Audit	Risk Factor	Estimated Audit Start Date	Original Hours Planned	Revised to Original			FN	Planned to Actual		Completion Date	Current Status
						Revised Plan	Change in Hours	Change in Percentage		Actual Hours	Variance		
IS	C	Management Advisory Services	5.0	Jul-22	100.0	110.0	10.0	10%		85.0	25.0		In Progress
FM	F	State Audit Assist/Follow-up	5.0	Jul-22	20.0	20.0	0.0	0%		5.5	14.5		In Progress
IS	F	Follow up Reviews	5.0	Jul-22	70.0	70.0	0.0	0%		45.0	25.0		In Progress
IS	I	Unscheduled Investigations	5.0	Jul-22	80.0	0.0	-80.0	-100%	1	0.0	0.0		Removed
IS	I	Developing Investigations-Assist TBR	5.0	Jul-22	15.0	15.0	0.0	0%		8.0	7.0		In Progress
IS	I	INV-2022-02	5.0	May-22	20.0	10.0	-10.0	-50%	1	7.0	3.0	October-22	Completed
IS	I	INV-2023-01	5.0	Sep-22	0.0	45.0	45.0	100%	1	36.0	9.0		In Progress
IS	I	INV-2023-02	5.0	Sep-22	0.0	10.0	10.0	100%	2	5.0	5.0		In Progress
IS	I	INV-2023-03	5.0	Aug-22	0.0	20.0	20.0	100%	1	20.0	0.0	Dec-22	Completed
IS	I	INV-2023-04	5.0	Dec-22	0.0	45.0	45.0	100%	1	34.0	11.0		In Progress
IS	I	INV-2023-05	5.0	Feb-23	0.0	60.0	60.0	100%	1	36.5	23.5		In Progress
IS	M	Enterprise Risk Assessment	5.0	Dec-22	35.0	35.0	0.0	0%		5.0	30.0		In Progress
FM	S	YE Procedures FYE 2022	5.0	Jun-22	10.0	10.0	0.0	0%		10.0	0.0	August-22	Completed
FM	S	YE Procedures FYE 2023	5.0	Jun-23	15.0	15.0	0.0	0%		0.0	15.0		Scheduled
SS	R	CCTA Element Audit	5.0	Apr-23	100.0	0.0	-100.0	-100%	3	0.0	0.0		Removed
FM	R	HEERF	5.0	Apr-23	100.0	100.0	0.0	0%		0.0	100.0		Scheduled
IS	R	QAR - Self Assessment and External	5.0	Nov-22	75.0	75.0	0.0	0%		52.5	22.5		In Progress
IA	S	Faculty Credentials	5.0	Mar-23	50.0	50.0	0.0	0%		10.0	40.0		In Progress
IT	S	IAR-NACHA-2022	5.0	Nov-22	70.0	70.0	0.0	0%		72.0	-2.0	Dec-22	Completed
FM	R	President's Expense Audit - Motlow	5.0	Aug-22	80.0	80.0	0.0	0%		84.5	-4.5	Oct-22	Completed
IS	F	Safety Security Upgrade Follow-up	5.0	May-22	10.0	10.0	0.0	0%		12.5	-2.5	Jul-22	Completed
IS	S	Segregation of Duties Review - Payroll/ HR	5.0	Apr-23	40.0	0.0	-40.0	-100%	3	0.0	0.0		Removed
IT	A	Technology Access Fee (TAF Fund)	3.3	May-22	75.0	75.0	0.0	0%		24.0	51.0		In Progress
PP	A	Campus Safety Equipment Inventory	3.1	Jan-22	25.0	25.0	0.0	0%		26.0	-1.0	Oct-22	Completed
IT	A	Sensitive Equipment Student Loaner Processes	3.0	Jan-23	60.0	0.0	-60.0	-100%	3	0.0	0.0		Removed
S	R	TCAT-Athens Veteran's Benefit Certification	5.0	Feb-23	0.0	50.0	50.0	100%	3	20.0	30.0		In Progress
S	AT	Basketball Tournament Event Processes	5.0	Jan-23	0.0	50.0	50.0	100%	3	38.0	12.0		In Progress

Total Planned Audit Hours: 1050.0 1050.0 0.0 636.5 413.5

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 - Reduced Investigation placeholder and added new investigative projects.
 FN2 - Item in development for audit project most likely to occur in FY 2024.
 FN3 - Added special requests and removed audits to accommodate.

Cleveland State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2023
Revised April 2023

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-22	100.0	100.0	0.0	0%		105.0	-5.0		In Progress
IS	F	State Audit-Assist Follow-up	5.0	Jul-22	100.0	100.0	0.0	0%		20.0	80.0		In Progress
IS	I	Unscheduled Investigations	5.0	Jul-22	80.0	80.0	0.0	0%		8.0	72.0		In Progress
IS	F	Campus Safety and Physical Security	5.0	Jul-22	20.0	20.0	0.0	0%		26.0	-6.0	Sep-22	Completed
FM	S	YE Procedures FYE 2022	5.0	Jul-22	10.0	10.0	0.0	0%		10.0	0.0	Jul-22	Completed
FM	R	President's Audit-Roane State	5.0	Aug-22	180.0	180.0	0.0	0%		185.0	-5.0	Oct-22	Completed
FM	R	CARES Act/HEERF (Higher Ed Emergency Relief Fund)	5.0	Feb-23	200.0	200.0	0.0	0%		10.0	190.0		In Progress
FM	S	Stipend calculation/awarding procedures	5.0	Feb-23	115.0	115.0	0.0	0%		50.0	65.0		In Progress
AD	S	P-Card Usage Policies in Foundation	5.0	Apr-23	80.0	0.0	-80.0	-100%	1	0.0	0.0		Removed
FM	R	NACHA 2023 Audit	5.0	Dec-22	90.0	90.0	0.0	0%		52.0	38.0	Jan-23	Completed
SS	S	VA Audit 2023	5.0	May-23	75.0	75.0	0.0	0%		0.0	75.0		Scheduled
IS	R	QAR Self-Review	5.0	Dec-22	0.0	70.0	70.0	100%	2	80.0	-10.0	Jan-23	Completed
Total Planned Audit Hours:					1050.0	1040.0	-10.0			546.0	494.0		

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- This audit was requested by the former president; current president requested it to be removed from the audit plan.

FN2- Campus Internal Auditor was new to the position and was unaware to plan for time for the QAR process when the initial audit plan was drafted.

Columbia State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2023
Revised April 2023

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-23	22.5	22.5	0.0	0%		1.9	20.7		In Progress
FM	R	HERF Reporting	5.0	Apr-23	150.0	75.0	-75.0	-50%	1	87.4	-12.4	Feb-23	Complete
FM	R	Complete College Tennessee Act - Element	5.0	Oct-22	150.0	0.0	-150.0	-100%	4	0.0	0.0		Removed
IT	F	GLBA Outcome Follow-up	5.0	Oct-22	37.5	52.0	14.5	39%		17.9	34.1		In Progress
IA	F	WF/CE IA Engagement Follow-up	5.0	Sep-22	37.5	8.5	-29.0	-77%		8.4	0.1	Dec-22	Complete
SS	F	Financial Aid IA Engagement FU	5.0	Aug-22	22.5	20.5	-2.0	-9%		8.6	12.0	Jan-23	Complete
SS	F	Veterans Affairs FU	5.0	PY	10.0	42.0	32.0	320%	2	42.0	0.1	Nov-22	Complete
SS	F	Financial Aid Peer Review FU	5.0	Feb-23	150.0	150.0	0.0	0%			150.0	23-Jan	Complete
FM	M	Review Management's Risk Assessment	5.0	Nov-22	22.5	22.5	0.0	0%		0.5	22.0		In Progress
IS	O	5 Year Quality Assurance Review	5.0	Oct-22	75.0	15.0	-60.0	-80%	6	12.8	2.3	Dec-22	Complete
MC	C	Privacy Policy & Language Compliance Check	4.0	PY	37.5	37.5	0.0	0%		8.8	28.7		Scheduled
SS	C	Business Process Review: Records	4.0	PY	50.0	75.0	25.0	50%		14.9	60.1		In Progress
SS	C	PPA Compliance Check	3.6	PY	22.5	0.0	-22.5	-100%	6	1.3	-1.3		Removed
IS	C	Records Retention	3.3	Aug-22	22.5	22.5	0.0	0%		0.0	22.5		
IS	F	Engagement Follow-up/Monitoring		Aug-22	15.0	15.0	0.0	0%		2.7	12.3	Jan-23	Complete
IS	P	IA Data Analytics	1.2	Sep-22	75.0	125.0	50.0	67%		0.0	125.0		
IS	C	Informal Consulting		Aug-22	150.0	300.0	150.0	100%	3	204.7	95.3		In Progress
SS	C	DoD Compliance Review	5.0	PY	0.0	7.0	7.0	100%	2	7.2	-0.2	Oct-22	Complete
SS	S	TCAT-Hohenwald - Veterans Affairs		Feb-23	0.0	60.0	60.0	100%	5	46.1	14.0		In Progress
Total Planned Audit Hours:						1050.0	1050.0	0.0		464.8	585.2		

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 Name Change from Cares Review to HERF Reporting
- 2 Project delays
- 3 value added partnerships
- 4 Removed by SWIA - Rescheduled to 2024
- 5 TBR SWIA Assigned January 2023
- 6 Unused hours moved to support other projects

Dyersburg State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2023
Revised April 2023

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	CCTA Funding Formula		Jan-22	90.0	0.0	-90.0	-100%	(1)	0.0	0.0		Removed
FM	R	Year End Bank Confirmations		Jun-22	30.0	30.0	0.0	0%		4.0	26.0		In Progress
IS	P	PII Review		Jul-22	75.0	75.0	0.0	0%		46.0	29.0		In Progress
IS	C	General Consultation		Jul-22	75.0	75.0	0.0	0%		52.0	23.0		In Progress
IS	A	Human Resources		Jul-22	40.0	60.0	20.0	50%		37.0	23.0		In Progress
PP	A	Building Security and Key Control		May-23	80.0	80.0	0.0	0%		0.0	80.0		Scheduled
IS	M	Risk Assessment		Oct-22	70.0	70.0	0.0	0%		29.0	41.0		In Progress
AT	A	Athletic Camps, Clinics, Fundraising and Scholarships		Nov-22	40.0	0.0	-40.0	-100%	(2)	0.0	0.0		Removed
IS	P	QAR External Review		Aug-22	120.0	120.0	0.0	0%		125.0	-5.0	Jan-23	Completed
IS	F	Follow-up Audits		Jul-22	75.0	75.0	0.0	0%		42.0	33.0		In Progress
FM	A	Records Mgmt and Retention		Sep-22	40.0	0.0	-40.0	-100%	(3)	0.0	0.0		Removed
IS	I	Unscheduled Investigations		Jul-22	75.0	0.0	-75.0	-100%		0.0	0.0		Removed
FM	R	HERFF Funding/Cares Act		Nov-22	130.0	130.0	0.0	0%		52.0	78.0		In Progress
FM	A	Payroll and Payroll Deductions		Mar-22	110.0	0.0	-110.0	-100%	(4)	0.0	0.0		Removed
SS	R	TCAT VA Benefits Audit		Jun-23	0.0	90.0	90.0	100%	(5)	0.0	90.0		Scheduled
AT	I	INV 23-01- Athletic Housing Conflict of Interest		Dec-22	0.0	245.0	245.0	100%		389.0	-144.0	Feb-23	Completed
Total Planned Hours:					1050.0	1050.0	0.0			776.0	274.0		

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) Removed per TBR SWIA. To be performed in FY2024.
- (2) Removed due to additional hours spent on investigations.
- (3) Removed due to additional hours spent on investigations.
- (4) Removed due to addition of TCAT VA Benefits audit.
- (5) Added by SWIA.

Jackson State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2023
Revised April 2023

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- Completion		In Progress	60.0	15.0	-45.0	-75%			15.0		Scheduled
IS	R	CARES Act		March 2023	125.0	125.0	0.0	0%			12.0	113.0	Scheduled
IS	R	CCTA Element Audit		January 2023	125.0	0.0	-125.0	-100%			0.0		Removed
IS	R	Quality Assurance Review (QAR)		September 2022	75.0	60.0	-15.0	-20%	1		60.0	0.0	1/6/2023 Completed
IS	R	TCAT Veterans Affairs Audit - Jackson/Whiteville		January 2023	0.0	18.5	18.5	0%	1		18.5	0.0	In Progress
IS	S	President's Expense - DSCC		August 2022	125.0	241.0	116.0	93%	1		241.0	0.0	10/25/2022 Completed
FM	F	Payroll Follow up		In Progress	50.0	60.0	10.0	20%	1		60.0	0.0	11/30/2022 Completed
SS	F	Inv 18-03 Follow up		In Progress	50.0	25.0	-25.0	-50%				25.0	6/30/2022 Completed
AT	F	Inv 19-01 Follow up		In Progress	75.0	50.0	-25.0	-33%			5.5	44.5	In Progress
AD	F	Foundation Follow up		November 2022	75.0	50.0	-25.0	-33%			39.0	11.0	8/8/2022 Completed
IA	F	CCTA Element Audit -Completion Follow up		March 2023	50.0	0.0	-50.0	-100%				0.0	Removed
IS	F	Veterans Affairs Follow up		February 2023	50.0	50.0	0.0	0%			1.0	49.0	In Progress
IS	M	Risk Assessment		November 2022	50.0	50.0	0.0	0%			6.5	43.5	Scheduled
FM	R	Year-end Procedures		June 2023	40.0	40.0	0.0	0%				40.0	Scheduled
IS	C	General Consultation		As needed	50.0	240.5	190.5	381%	1		262.0	-21.5	Scheduled
IS	I	Unscheduled Investigations and Special Requests		As needed	50.0	25.0	-25.0	-50%				25.0	Scheduled
Total Planned Audit Hours:					1050.0	1050.0	0.0				705.5	344.5	

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: Available hours reduced from QAR (-15), TCAT Veterans Affairs Audit (81.5), President's Expense Audit -DSCC (-34), Payroll Follow up (-15) to support hours needed for General Consultation (+145.5)

Motlow State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2023
Revised February 2023

Note: Plan has not been updated due to vacant Auditor position at MSCC.

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	Procurement Card/Continuous Monitoring		Aug-22	125.0	10.0	-115.0	-92%	2	10.5	-0.5		Removed
AT	A	Athletics/Cash Handling Audit	4.9	Jan-23	60.0	70.0	10.0	17%	3	2.3	67.7		In Progress
FM	R	CARES Funding		Apr-23	125.0	100.0	-25.0	-20%			100.0		Scheduled
IS	R	CCTA Completion		Jul-22	40.0	40.0	0.0	0%		5.0	35.0		In Progress
IS	R	CCTA Element Audit		Mar-23	75.0	0.0	-75.0	-100%	4		0.0		Removed
IS	R	Veterans Affairs Audit		Jul-22	0.0	13.0	13.0	100%		13.0	0.0	Jul-22	Completed
IA	M	Risk Assessment		Mar-23	30.0	30.0	0.0	0%			30.0		Scheduled
IA	F	Follow Up Workforce Development #2		Jul-22	40.0	70.0	30.0	75%		49.6	20.4		In Progress
AT	F	Follow Up INV 1604		Apr-23	50.0	40.0	-10.0	-20%			40.0		Scheduled
SS	F	Follow Up INV 1801		Apr-23	40.0	40.0	0.0	0%			40.0		Scheduled
AT	F	Follow Up INV 1802		Jul-22	35.0	35.0	0.0	0%		5.5	29.5		In Progress
FM	F	Follow Up Access and Diversity #3		Jul-22	40.0	35.0	-5.0	-13%		34.8	0.2	Aug-22	Completed
FM	C	General Consultation		Jul-22	50.0	70.0	20.0	40%		64.8	5.2		In Progress
FM	R	State Audit Assistance - Yr End		Jul-22	20.0	20.0	0.0	0%			20.0		In Progress
IS	I	Unscheduled Investigations		Jul-22	50.0	50.0	0.0	0%		42.6	7.4		In Progress
FM	R	Other Internal Audit Follow Up		Jul-22	0.0	50.0	50.0	100%		43.9	6.1		In Progress
IS	R	Quality Assurance Review		Jul-22	75.0	50.0	-25.0	-33%		19.3	30.7		In Progress
FM	F	Follow Up Access and Diversity #4		Nov-22	40.0	40.0	0.0	0%		9.0	31.0		In Progress
IS	A	Human Resources (Outprocessing/Access)	4.8	Nov-22	50.0	57.0	7.0	14%		8.3	48.7		In Progress
FM	A	Clearing House Audit	4.8	Sep-22	75.0	0.0	-75.0	-100%	1	5.0	-5.0		Removed
SS	A	Student Activity Fees Audit	5.0	Sep-22	0.0	125.0	125.0	100%	2	84.7	40.3		In Progress
MC	S	External Affairs Consulting Engagement		Oct-22	0.0	45.0	45.0	100%	1	37.4	7.6		In Progress
FM	A	Cash Handling Audit	4.7	Dec-22	0.0	0.0	0.0	100%	3		0.0		Removed
IS	R	Veterans Affairs Follow Up		Oct-22	0.0	30.0	30.0	100%	1	11.5	18.5		In Progress
Total Planned Audit Hours:					1020.0	1020.0	0.0			447.2	572.8		

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

The Internal Auditor submitted a resignation 2/8/23 with a last day of 3/8/23. Revised Audit Plan and notes provide an update as to current engagements.

FN 1 Engagements and budgeted time were revised due to increased effort required to conduct follow up reviews and new engagements from assessed risks and management requests.

FN 2 Additional time added for the Student Activity Fees Audit from the Procurement Card/Continuous Monitoring project.

FN 3 Cash Handling Audit time was combined with the Athletics Audit as this is an identified risk for this area.

FN 4 CCTA Element Audit is no longer a required audit from TBR SWIA this fiscal year. It has been removed from the plan.

Nashville State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2023
Revised April 2023

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	3.4	TBD	150.0	0.0	-150.0	-100%	2	0.0	0.0		Removed
FM	R	CARES Act	3.7	Mar-23	150.0	150.0	0.0	0%		30.0	120.0		In Progress
IS	R	QAR Self-Assessment	3.4	Oct-22	150.0	150.0	0.0	0%		150.0	0.0	Jan-23	Completed
IS	C	Internal Control Awareness	3.0	Aug-22	150.0	150.0	0.0	0%		100.0	50.0		In Progress
FM	F	State Audit Follow Up	3.3	Sep-22	50.0	0.0	-50.0	-100%	1	0.0	0.0		Removed
IS	C	Consulting Activities	3.0	As Needed	150.0	150.0	0.0	0%		100.0	50.0		In Progress
IS	F	Physical Security / Campus Safety Follow Up	4.4	Feb-23	150.0	150.0	0.0	0%		50.0	100.0		In Progress
FM	A	Travel	3.5	Jan-23	100.0	100.0	0.0	0%		40.0	60.0		In Progress
Total Planned Audit Hours:					1050.0	850.0	-200.0			470.0	380.0		

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 Removed due to no state audit findings.
 FN2 Audit moved to next fiscal year

Northeast State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2023
Revised April 2023

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	HEERF	5.0	Aug-22	100.0	100.0	0.0	0%		36.0	64.0		In Progress
FM	R	Walters State President Expense Audit	5.0	Aug-22	100.0	100.0	0.0	0%		104.0	-4.0	Oct-22	Completed
IS	P	QAR Self-Assessment	5.0	Aug-22	100.0	100.0	0.0	0%		105.0	-5.0	Feb-23	Completed
FM	R	State Audit Follow-Up Audits	5.0	Oct-22	100.0	100.0	0.0	0%		83.0	17.0		In Progress
SS	R	Complete College Tennessee Act Element	5.0	Jan-23	100.0	0.0	-100.0	-100%	2	0.0	0.0		Removed
FM	S	HEERF I Student Distributions Audit	5.0	Jul-22	20.0	20.0	0.0	0%		21.5	-1.5	Dec-22	Completed
FM	S	HEERF II Student Distributions Audit	5.0	Jul-22	40.0	40.0	0.0	0%		30.0	10.0		In Progress
FM	S	HEERF III Student Distributions Audit	5.0	Jul-22	40.0	40.0	0.0	0%		24.5	15.5		In Progress
IS	S	Attendance Reporting	5.0	Jul-22	75.0	75.0	0.0	0%		26.5	48.5		In Progress
IS	I	Developing Investigations-Assist TBR	5.0	Jul-22	30.0	130.0	100.0	333%	1	104.0	26.0		In Progress
IS	I	Unscheduled Investigations	5.0	Jul-22	30.0	30.0	0.0	0%			30.0		Scheduled
FM	R	State Audit Assistance - Year End	5.0	May-23	30.0	30.0	0.0	0%			30.0		Scheduled
IS	S	Special Requests and Projects	5.0	Jul-22	100.0	100.0	0.0	0%		89.0	11.0		In Progress
IS	F	Other Audit Follow-Up	5.0	Jul-22	50.0	50.0	0.0	0%		47.0	3.0		In Progress
IS	M	Risk Assessment	5.0	Oct-22	35.0	35.0	0.0	0%		2.5	32.5		In Progress
IS	C	Management Advisory Services	5.0	Jul-22	100.0	100.0	0.0	0%		95.5	4.5		In Progress
Total Planned Audit Hours:					1050.0	1050.0	0.0			768.5	281.5		

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

1. Assisted TBR SWIA Investigation at another TBR institution- hours moved from Complete College Tennessee Act project
2. Rescheduled for FY 2024. Hours moved to Developing Investigations- Assist TBR

**Pellissippi State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2023
Revised April 2023**

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	Jan-23	150.0	150.0	0.0	0%		47.0	103.0		In Progress
FM	R	Year End Inventory & Cash Counts	5.0	Jul-22	30.0	30.0	0.0	0%		2.0	28.0		In Progress
IS	R	Funding Formula	5.0	Mar-23	112.5	0.0	-112.5	-100%	1	0.0	0.0		Removed
IS	R	Quality Assurance Self Assessment	5.0	Oct-22	112.5	112.5	0.0	0%		79.5	33.0	Feb-23	Completed
FM	F	Audit Follow-Ups	5.0	Jul-22	30.0	30.0	0.0	0%		19.0	11.0		In Progress
IS	M	Risk Assessment	5.0	Nov-22	22.5	60.0	37.5	167%	2	14.5	45.5		In Progress
IA	S	Faculty Credentials	5.0	Oct-22	150.0	150.0	0.0	0%		145.0	5.0	Feb-23	Completed
IA	S	Review of Compliance Assist	5.0	Apr-23	52.5	52.5	0.0	0%		0.0	52.5		Scheduled
AD	C	Advancement Management Advisory Services, Consultation, etc.	5.0	Jul-22	22.5	22.5	0.0	0%		17.5	5.0		In Progress
FM	C	Finance Management Advisory Services, Consultation, etc.	5.0	Jul-22	22.5	22.5	0.0	0%		13.0	9.5		In Progress
IS	C	Institutional Support Management Advisory Services, Consultation, etc.	5.0	Jul-22	75.0	75.0	0.0	0%		13.0	62.0		In Progress
IS	I	Unscheduled Investigations and Special Requests	5.0	Jul-22	37.5	37.5	0.0	0%		0.0	37.5		Scheduled
IT	C	IT Audit Management Advisory Service - Phishing Campaign & Building Security Review	5.0	Jul-22	150.0	150.0	0.0	0%		66.5	83.5		In Progress
IT	C	IT Audit Management Advisory Service - General Security Review	5.0	Jul-22	150.0	150.0	0.0	0%		91.5	58.5		In Progress
IT	C	IT Audit Management Advisory Service - PCI & ACH Review	5.0	Jul-22	150.0	150.0	0.0	0%		99.5	50.5		In Progress
IT	A	Vulnerability Assessment - College Website Server	4.05	Jul-22	150.0	172.5	22.5	15%		165.0	7.5	Sep-22	Completed
Total Planned Audit Hours:					1417.5	1365.0	-52.5			773.0	592.0		

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 - The Board of Regents made a decision to not make this a required audit in FY23 so this audit was removed from the audit plan.

FN2 - Hours were increased because I was hired as the Interim Director October of 2022 and this is the first time I had been involved in the risk assessment process. Additionally, the board requested information related to the risk mitigation inventory and this was not included in the original audit plan.

**Roane State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2023
Revised April 2023**

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	CCTA	5.0	Jan-23	65.0	0.0	-65.0	-100%	6		0.0		Removed
FM	R	Year End Cash Counts	5.0	May-23	35.0	30.0	-5.0	-14%		10.0	20.0		In Progress
IS	M	Enterprise Risk Assessment	5.0	Aug-22	75.0	60.0	-15.0	-20%	7	51.3	8.8		In Progress
FM	A	Grants	3.6	Aug-22	75.0	75.0	0.0	0%		55.0	20.0		In Progress
FM	R	CARES Act (HERRF)	5.0	Jan-22	75.0	50.0	-25.0	-33%	7	30.0	20.0		In Progress
IS	A	Sick Leave Bank	3.5	Jul-22	50.0	50.0	0.0	0%		38.0	12.0		In Progress
FM	F	State Audit Follow-up	5.0	Jul-22	75.0	70.0	-5.0	-7%		45.0	25.0		In Progress
FM	F	IAR Audit Follow-up	5.0	Jul-22	75.0	25.0	-50.0	-67%	1	18.0	7.0		In Progress
FM	I	Unscheduled Investigations	5.0	Jul-22	90.0	30.0	-60.0	-67%	3	25.0	5.0		In Progress
IS	C	Management Advisory Services	5.0	Jul-22	142.5	142.5	0.0	0%		92.3	50.3		In Progress
AX	S	Foundation - Restricted Funds	4.7	Jul-22	60.0	60.0	0.0	0%		40.0	20.0		In Progress
IA	S	Nursing Program Review	4.9	Jul-22	55.0	50.0	-5.0	-9%		41.0	9.0		In Progress
PP	A	Police/Safety Equipment Inventory	3.1	Jul-22	22.5	20.5	-2.0	-9%		6.5	14.0		In Progress
FM	A	Equipment Inventory & Tagging	3.7	Jan-23	45.0	0.0	-45.0	-100%	2	0.0	0.0		Removed
IS	R	Campus Safety & Security	5.0	Jul-22	10.0	10.0	0.0	0%		2.0	8.0		In Progress
AD	R	CCTA - Graduation	5.0	Jul-22	25.0	25.0	0.0	0%		15.8	9.3		In Progress
IS	R	QAR - Self Assessment and External	5.0	Jul-22	75.0	62.0	-13.0	-17%		61.3	0.8	Jan-23	Completed
IA	R	Release Time/Workload IAR Follow-up	5.0	Jul-22	0.0	50.0	50.0	100%	1	42.5	7.5		In Progress
FM	S	Adjuncts Having More than 1 Position at RSCC	5.0	Nov-22	0.0	50.0	50.0	100%	4	41.0	9.0		In Progress
SS	R	VA - TCAT Harriman	5.0	Feb-23	0.0	30.0	30.0	100%	5	22.5	7.5		In Progress
IS	I	INV 23-01	5.0	Feb-23	0.0	110.0	110.0	100%	8	75.0	35.0		In Progress
IS	I	INV 23-02	5.0	Feb-23	0.0	45.0	45.0	100%	8	43.3	1.8		Scheduled
IS	I	INV 23-03	5.0	Apr-23	0.0	5.0	5.0	100%	8	0.0	5.0	Apr-23	Completed
Total Planned Audit Hours:					1050.0	1050.0	0.0			755.3	294.8		

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- Reduced IAR Follow-up due to adding Release Time/Workload Follow-up IAR Follow-up audit
 FN2- Removed Equipment Inventory & Tagging due to added audits and investigations
 FN3- Revised Unscheduled Audits downward due to added audits and investigations
 FN4- Audit added due to concerns about adjuncts having more than one position and their pay
 FN5- Audit assigned during FY23
 FN6- Audit removed by SWIA
 FN7- Revised due to other audit work
 FN8- Added Investigations

Southwest Tennessee Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2023
Revised April 2023

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	S	Out of State Tuition		Aug-22	97.5	66.5	(31.0)	-32%			66.5		Scheduled
FM	S	Review of Driver License		Jul-22	25.0	25.0	0.0	0%			25.0		Scheduled
IA	P	Review of Medical Programs with Special Admission Process		Mar-23	97.5	137.5	40.0	41%		123.5	14.0	Sep-22	Completed
FM	R	CARES		Feb-23	97.5	57.5	(40.0)	-41%		2.0	55.5		In Progress
FM	A	Capitalized Equipment		Apr-23	97.0	51.5	(45.5)	-47%		21.5	30.0		In Progress
FM	P	QAR		Jun-22	55.0	86.0	31.0	56%		86.0	0.0		In Progress
FM	A	Cash Count		May-23	30.0	30.0	0.0	0%		13.0	17.0		In Progress
AT	A	Athletic General Compliance		Jan-23	52.0	52.0	0.0	0%			52.0		Scheduled
FM	E	Inv 20-3 Investigation Clubs		Nov-22	25.0	112.0	87.0	348%		112.0	0.0	Mar-23	Completed
IS	A	Risk Management		Dec-22	50.0	50.0	0.0	0%		10.5	39.5		In Progress
IS	F	FU-Campus Safety		Sep-22	47.0	22.0	(25.0)	-53%			22.0		Scheduled
IT	F	FU-State Audit		Oct-22	30.0	42.0	12.0	40%		42.0	0.0	Jan-23	Completed
FM	S	FU-Review Ghost Employee		Nov-22	50.0	75.0	25.0	50%		67.0	8.0	Oct-22	Completed
SS	R	FU Veteran's Affairs Benefit		Jul-22	25.0	55.0	30.0	120%		53.5	1.5	Nov-22	Completed
FM	P	ACM-Audit Software		Jul-22	75.0	90.5	15.5	21%		90.5	0.0		In Progress
SS	C	IAR-General Consultant		Jul-22	97.0	88.0	(9.0)	-9%		88.0	0.0		In Progress
FM	I	Unscheduled Investigation		Jul-22	97.0	7.0	(90.0)	-93%		5.0	2.0		Scheduled
Total Planned Audit Hours:					1047.5	1047.5	0.0			714.5	333.0		

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

Volunteer State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2023
Revised April 2023

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	CCTA Funding Formula	8.3	Apr-23	175.0	0.0	-175.0	-100%	(1)	0.0	0.0		Removed
FM	R	President's Expense Reporting	6.0	Aug-22	175.0	175.0	0.0	0%		190.5	-15.5	10/25/2022	Completed
FM	R	State Audit Year-End Work	5.0	May-23	40.0	40.0	0.0	0%		13.0	27.0		Scheduled
IS	F	Follow-Up Activities	5.0	Jul-22	50.0	50.0	0.0	0%		40.5	9.5		In Progress
IS	C	General Consultation	5.0	Jul-22	100.0	125.0	25.0	25%		93.0	32.0		In Progress
IS	P	IIA QAIP Self Assessment	5.0	Jul-22	100.0	175.0	75.0	75%	(2)	146.5	28.5		In Progress
IS	M	Management Risk Assessment	5.0	Oct-22	125.0	125.0	0.0	0%		17.0	108.0		In Progress
IS	I	Unscheduled Investigations	5.0	Jul-22	40.0	40.0	0.0	0%		3.0	37.0		In Progress
IS	R	CARES Act	5.0	Feb-23	175.0	175.0	0.0	0%		52.5	122.5		In Progress
Total Planned Audit Hours:					980.0	905.0	-75.0			556.0	349.0		

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): Audit rescheduled for FY 2024 by SWIA.

Footnote (2): Increase time budget to prepare supporting documentation for external review.

Walters State Community College
Internal Audit Plan
Fiscal Year Ending June 30, 2023
Revised April 2023

							Revised to Original			Planned to Actual			
Area	Type	Audit	Risk Factor	Estimated Audit Start Date	Original Hours Planned	Revised Plan	Change in Hours	Change in Percentage	FN	Actual Hours	Variance	Completion Date	Current Status
IS	C	Management Advisory Services/Consulting	5.0	Jul-22	50.0	165.0	115.0	230%		136.0	29.0		In Progress
FM	F	State Audit Assist/Follow-up	5.0	Sep-22	12.0	12.0	0.0	0%		4.0	8.0	Jul-22	Completed
IS	R	IAR-CARES Act HEERF 2023	5.0	Mar-23	40.0	60.0	20.0	50%		20.0	40.0		In Progress
FM	R	WSCC Risk Assessment T/B/A	5.0	May-23	37.5	0.0	-37.5	-100%	1	0.0	0.0		Removed
FM	R	WSCC Enterprise-wide Risk Assessment	5.0	May-23	7.5	45.0	37.5	500%	1	19.5	25.5		In Progress
IS	M	WSCC IET and Fin Aid Risk Assessments	5.0	Dec-22	37.5	37.5	0.0	0%		29.5	8.0	Aug-22	Completed
SS	R	IAR-CCTA-T/B/D	5.0	Mar-23	105.0	0.0	-105.0	-100%	2	0.0	0.0		Removed
FM	S	YE Procedures FYE 2022	5.0	Jul-22	22.5	22.5	0.0	0%		11.0	11.5	Jul-22	Completed
FM	S	YE Procedures FYE 2023	5.0	Jun-23	22.5	33.0	10.5	47%		0.0	33.0		Scheduled
IT	S	IAR-NACHA-2022	5.0	Oct-22	75.5	95.0	19.5	26%		70.0	25.0		In Progress
IS	S	Unscheduled Investigations	5.0	Jul-22	105.0	105.0	0.0	0%		22.5	82.5		In Progress
IS	R	QAR Self-Assessment	5.0	Sep-22	75.0	75.0	0.0	0%		75.0	0.0	Jan-23	Completed
FM	C	Business Continuity Planning	5.0	Jul-22	225.0	275.0	50.0	22%		221.5	53.5		In Progress
IT	M	IT Governance	5.0	Jul-22	75.0	0.0	-75.0	-100%	3	0.0	0.0		Removed
FM	M	Accounts Receivable	5.0	Jul-22	65.0	0.0	-65.0	-100%	4	0.0	0.0		Removed
IA	C	Faculty Workload Reports	5.0	Jul-22	75.0	75.0	0.0	0%		75.0	0.0		In Progress
SS	F	Veterans Affairs Benefits	5.0	Sep-22	20.0	50.0	30.0	150%		15.0	35.0		In Progress
Total Planned Audit Hours:					1050.0	1050.0	0.0			699.0	351.0		

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 - Combined into a single Enterprise-wide Risk Assessment
- 2 - Deferred into next fiscal year
- 3 - Determined to be unnecessary due to completion of Information Systems Audit by TBR SWIA
- 4 - Determined to be unnecessary to lack of findings by State Audit

TCAT
Internal Audit Plan
Fiscal Year Ending June 30, 2023
Revised April 2023

Area	Type	Audit	Risk Factor	Estimated Audit Start Date	Original Hours Planned	Revised to Original			FN	Planned to Actual		Completion Date	Current Status
						Revised Plan	Change in Hours	Change in Percentage		Actual Hours	Variance		
FM	R	FY 23 Risk Assessment	NA	Oct-22	200.0	22.5	-177.5	-89%	2	15.0	7.5		In Progress
FM	C	FY 23 TCAT Consultation	NA	Jul-22	250.0	315.0	65.0	26%	2	266.0	49.0		In Progress
FM	C	FY 23 TCAT Year End Procedures	NA	Jul-22	50.0	50.0	0.0	0%		23.5	26.5		In Progress
FM	C	FY 23 Audit Program	NA	Jul-22	75.0	75.0	0.0	0%		74.0	1.0		In Progress
FM	A	FY 23 TCAT Memphis Controls Review	5.0	Sep-22	75.0	75.0	0.0	0%		15.0	60.0		In Progress
FM	A	FY 23 TCAT McMinnville Controls Review	5.0	Jul-22	37.5	75.0	37.5	100%		15.0	60.0		In Progress
FM	R	FY 23 Oneida VA Audit	4.7	Jul-22	75.0	75.0	0.0	0%		22.5	52.5		In Progress
FM	R	FY 23 Jacksboro VA Audit	4.7	Aug-22	75.0	7.5	-75.0	-100%	1	7.5	0.0		Removed
FM	R	FY 21 TCAT Nashville President's Expense	4.6	Jan-23	75.0	75.0	0.0	0%		75.0	0.0	22-Sep	Completed
FM	A	FY 21 TCAT Oneida President's Expense	2.6	Jan-23	37.5	37.5	0.0	0%		37.5	0.0	22-Dec	Completed
FM	R	FY 21 TCAT Jackson/Whiteville President's Expense	3.7	Oct-22	75.0	75.0	0.0	0%		75.0	0.0	Jan-23	Completed
FM	R	FY 21 TCAT Ripley President's Expense	2.7	Oct-22	37.5	37.5	0.0	0%		45.0	-7.5	Jul-22	Completed
FM	R	FY 22 TCAT Chattanooga President's Expense	1.3	Feb-23	75.0	100.0	25.0	33%	2	95.0	5.0	23-Apr	Completed
FM	R	FY 21 Cosmetology Controls Review	1.3	Jul-22	75.0	100.0	25.0	33%	2	75.0	25.0		In Progress
FM	I	INV 23-07: FY 23 Memphis	1.3	Apr-23	0.0	100.0	100.0	100%	2	0.0	100.0		In Progress
Total Planned Audit Hours:					1212.5	1120.0	0.0			841.0	279.0		

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 Audit was removed since audit was scheduled by another Agency
 FN2 Audit hours were re-assigned to other projects due to timing and personnel changes

Tennessee Board of Regents-System Office
Internal Audit Plan
Fiscal Year Ending June 30, 2023
Revised April 2023

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	VA Audit-TCAT-TCAT McKenzie		Oct-22	75.0	75.0	0.0	0%		65.0	10.0		In Progress
SS	R	VA Audit-TCAT-TCAT TBD		Nov-22	75.0	75.0	0.0	0%		0.0	75.0		Scheduled
FM	R	State Audit Follow Up FY 2020 and 2021		Oct-22	45.0	15.0	-30.0	-67%	1	0.0	15.0		Scheduled
FM	S	Cash Disbursements		Nov-22	150.0	0.0	-150.0	-100%	5	0.0	0.0		Removed
IS	R	Internal Quality Assurance Review		Jan-23	30.0	30.0	0.0	0%		30.0	0.0	Jan-23	Completed
IS	C	TBR Website Content review		Feb-23	225.0	150.0	-75.0	-33%	2	35.0	115.0		In Progress
FM	S	Tn eCampus		Mar-23	150.0	150.0	0.0	0%		0.0	150.0		Scheduled
FM	R	Audit of President's Expenses-VSCC		Aug-22	75.0	105.0	30.0	40%	3	105.0	0.0	Oct-22	Completed
FM	M	Risk Assessment Activities		Jan-23	0.0	60.0	60.0	100%	4	25.0	35.0		In Progress
IA	I	Complaint-TCAT Crossville		Jan-23	0.0	40.0	40.0	100%	3	30.0	10.0		In Progress
IS	C	General Consultation		Jul-22	200.0	325.0	125.0	63%		275.0	50.0		In Progress
Total Planned Audit Hours:					1025.0	1025.0	0.0			565.0	460.0		

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-Adjusted hours due to no findings for TBR System office
 FN2-Adjusted hours for website content review. Also changed type to Consulting.
 FN3-Adjusted hours due to investigation of complaint.
 FN4-Adjusted hours to reflect hours for coordination of risk assessment activities
 FN5-Removed/Move to FY 24-due to unplanned investigaton/consultation activities

**TBR - Investigations
Internal Audit Plan
Fiscal Year Ending June 30, 2023
Revised April 2023**

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-22	125.0	35.0	-90.0	-72%		22.5	12.5		In Progress
IS	P	Investigation Management		Jul-22	200.0	200.0	0.0	0%		121.5	78.5		In Progress
FM	I	Unscheduled Investigations		Jul-22	400.0	0.0	-400.0	-100%	1	0.0	0.0		Removed
PP	I	INV TBR 21-05		Feb-21	40.0	40.0	0.0	0%		11.5	28.5		In Progress
FM	I	INV TBR 22-03		Sep-21	75.0	75.0	0.0	0%		10.0	65.0		In Progress
IA	I	INV TBR 23-01		Jul-22	22.5	19.0	-3.5	-16%		19.0	0.0	Jul-22	Completed
IA	I	INV TBR 23-02		Aug-22	0.0	211.5	211.5	100%	1	211.5	0.0		In Progress
IA	I	INV TBR 23-03		Sep-22	0.0	150.0	150.0	100%	1	22.5	127.5		In Progress
AT	I	INV TBR 23-04		Dec-22	0.0	75.0	75.0	100%	1	64.5	10.5		In Progress
AT	I	INV TBR 23-05		Dec-22	0.0	38.0	38.0	100%	1	38.0	0.0	Jan-23	Completed
IS	I	INV TBR 23-06		Jan-23	0.0	400.0	400.0	100%	1	304.0	96.0		In Progress
FM	I	INV TBR 23-07		Mar-23	0.0	150.0	150.0	100%	1	37.5	112.5		In Progress
AT	I	INV DSCC 23-01		Oct-22	0.0	134.0	134.0	100%	1	134.0	0.0	Jan-23	Completed
IS	S	Application Data Review		Jul-21	75.0	75.0	0.0	0%		0.0	75.0		In Progress
FM	R	Presidents Expense Audit - VSCC		Sep-21	112.5	0.0	-112.5	-100%	2	0.0	0.0		Removed
Total Planned Audit Hours:					1050.0	1602.5	552.5			996.5	606.0		

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- Investigation Added and hours removed from Unscheduled Investigations.
 FN2- Audit assigned to another auditor.

**TBR - Information Systems
Internal Audit Plan
Fiscal Year Ending June 30, 2023
Revised April 2023**

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	CISCC Information Systems	5.0	Dec-22	150.0	150.0	0.0	0%		282.0	-132.0		In Progress
IT	R	CoSCC Information Systems	5.0	Jul-22	150.0	150.0	0.0	0%		252.5	-102.5	Dec-22	Completed
IT	R	JSCC Information Systems	5.0	Mar-23	150.0	150.0	0.0	0%		53.0	97.0		In Progress
IT	R	PSCC Information Systems	5.0	Oct-22	150.0	150.0	0.0	0%		222.5	-72.5	Oct-22	Completed
IT	R	STCC Information Systems	5.0	Apr-23	150.0	150.0	0.0	0%			150.0		Scheduled
IT	R	TCAT Information Systems	5.0	May-23	150.0	150.0	0.0	0%			150.0		Scheduled
IT	R	TBR System Office	5.0	Jun-23	150.0	150.0	0.0	0%			150.0		Scheduled
Total Planned Audit Hours:					1050.0	1050.0	0.0			810.0	240.0		

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

BOARD TRANSMITTAL

MEETING: Committee on Audit

SUBJECT: Review of System-wide Internal Audit Budget for Fiscal Year 2024

DATE: May 31, 2023

PRESENTER: Mike Batson

ACTION REQUIRED: Roll-Call Vote

STAFF'S
RECOMMENDATION: Approve

According to the *Audit Committee Charter*, the Audit Committee is responsible for ensuring “adequate resources in terms of staff and budget are provided to enable the department to effectively perform its responsibilities”. The committee will review the Fiscal Year 2024 budget for the Office of System-wide Internal Audit. The Fiscal Year 2023-2024 budget is presented on the following page.

**Tennessee Board of Regents
Office of System-wide Internal Audit
Proposed Budget for Fiscal Year 2023-2024**

	<u>FY 2024 Budget</u>		<u>FY 2023 Budget</u>	
	<u>Amount</u>	<u>Percentage</u>	<u>Amount</u>	<u>Percentage</u>
Salaries	596,512	63%	565,215	67%
Employee Benefits	239,004	25%	216,898	26%
Total Salaries and Benefits	<u>835,516</u>	<u>89%</u>	<u>782,113</u>	<u>93%</u>
Travel				
In State Travel	29,000	3%	16,000	2%
Out of State Travel	3,000	0%	5,000	1%
Total Travel	<u>32,000</u>	<u>3%</u>	<u>21,000</u>	<u>3%</u>
Operating Expenses	<u>76,210</u>	<u>8%</u>	<u>32,810</u>	<u>4%</u>
Total Budget	<u>943,726</u>	<u>100%</u>	<u>835,923</u>	<u>100%</u>

Notes:

Salaries and Benefits includes 6 staff positions for System-wide Internal Audit: Chief Audit Executive, Director of Internal Audit, Investigative Audit Manager, Information Systems Auditor, TCAT Internal Auditor IV, and Administrative Assistant III/Complaints Officer. This amount does not include COLA increases for FY 23-24.

Travel 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 out of state travel for training/professional development. These lines also include non-recurring travel reimbursement for External QAR volunteers for Fall 2023.

Operating Expenses include the general operating costs for the system audit office such as copier lease, supplies, computer software, conference registrations, instructors for group training, and consultants for external peer reviews. In FY 2024, a training retreat is planned without the audit staff of the University of Tennessee and TBR will need to cover a majority of the cost. This line also includes a proposed \$42,000 for contractors for assistance with investigations.