

BOARD OF TRUSTEES AUDIT SUBCOMMITTEE John R. Jakubek, Chair Michael A. Peterson, Vice Chair David C. Deibel Charles T. George Lexi E. Rager

Wednesday, September 5, 2018 1:00 p.m. or immediately following previous meeting Tod Hall Board Meeting Room

AGENDA

А.	Disposition of Minutes for Meeting Held June 7, 2018					
В.	Old Business					
C.	Committee Item					
	1. Discussion Items					
Tab C.1.a.	 Audit Matrix Open Audit Recommendations Update This matrix tracks the progress of the implementation of recommendations for improvement or correction made by internal and external auditors. Sarah Gampo, Director of Internal Audit, will report. 					
Tab C.1.b.	 b. FY18 Fourth Quarter Internal Audit Plan Update Sarah Gampo, Director of Internal Audit, will report. 					
Tab C.1.c.	c. Anonymous Reporting Hotline Stats Update Sarah Gampo, Director of Internal Audit, will report.					
	d. Enterprise Risk Management Update Sarah Gampo, Director of Internal Audit, will report.					
	e. Update on External Audit Neal McNally, Vice President for Finance and Business Operations, will report.					
	 f. Cybersecurity Update Chris Wentz, Director of IT Security Services, will report. 					

- D. New Business
- E. Adjournment

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AUDIT RECOMMENDATIONS STATUS - FY2019 Q1

Audit Recommendation Number / Name Audit Date issued	Summary of Recommendation	Summary of Response	Current Status Comment	Prior Status Comment	
lisk Category lisk Level					
Division Original Deadline Revised Deadline					
Current Status					
2014-02-01 Payroll Time Entries	There is a lack of segregation of duties for manual payroll				
	time entries. There are employees who have the ability to	The Payroll Department, based on approved source documentation, is responsible to enter hours/time for the	Implementation date was revised to hold recommendation open during FY19 HR-Payroll Process Review Engagement.	Reports needed to implement corrective action are still under development by IT. FY19 Internal Audit plan includes a review	
PT Segregation of Duties	enter manual time entries without additional approval or	minority of hourly timesheets that were not electronically	Issues noted in recommendation will be assessed during this	of the payroll process; during the engagement Internal Audit	
Apr. 2014	verification. This lack of segregation of duties increases the risk that incorrect or fraudulent paychecks may be issued.	processed through self-service Banner. As a compensating control, a report will be developed to identify any hours	engagement.	will assess this audit recommendation.	
Financial	Manual time entries should be tracked and an individual	manually entered. This report will be compared to the			
High	should be assigned to confirm the validity of all manual time	source documents by a different individual than the			
ngu	entries. This individual should not have access to create a manual time entry.	individual entering from the source document. Also, the Banner HR/Payroll security role classes were reviewed and			
Finance and Business Operations, Legal		the number of individuals with both duties has been reduced			
1/31/2016 3/31/2019		and segregated.			
DEADLINE REVISED					
2014-02-02 Payroll Processing PT Segregation of Duties Apr. 2014 Financial Moderate Finance and Business Operations, Legal 12/31/2015 3/31/2019 DEADLINE REVISED	There are 4 individuals with the ability to process/calculate payroll. Of these individuals, they all have ability to generate paychecks and add/approve hours, and 3 have access to record payroll in the general ledger and the ability to make general ledger entries. This lack of segregation within the process of generating the payroll creates and increases risk of error or fraud within a paycheck or payroll. We recommend a review of the workflow steps from running (calculating) the payroll through the financial recording of the payroll and reassign rights in the system to maximize segregation of duties.	Security access has been redesigned to limit the ability to perform the above workflow to only the Associate Controller. These functions are necessary for the Associate Controller in order to supervise the Payroll Department as well as the general accounting functions in the Controller's Office. However, any manual entry of hours by the Associate Controller will be reviewed in the audit report mentioned in Management's Response to Audit Finding & Recommendation #2. The security access for all of the other individuals mentioned has been segregated between entering, processing payroll, generating checks, and posting to the ledger.	Implementation date was revised to hold recommendation open during FY19 HR-Payroll Process Review Engagement. Issues noted in recommendation will be assessed during this engagement.	Reports needed to implement corrective action are still unde development by IT. FY19 Internal Audit plan includes a review of the payroll process; during the engagement Internal Audit will assess this audit recommendation.	
2014-02-03 Manual Payroll Checks	There is a lack of segregation of duties with the manual (off- cycle) check process. There are individuals who can print	In order to segregate duties, the individuals who had access to the blank check stock no longer have the ability to initiate	Implementation date was revised to hold recommendation open during FY19 HR-Payroll Process Review Engagement.	Payroll has identified a report and is currently evaluating whether it could be used to perform a periodic review. FY19	
PT Segregation of Duties	manual checks and who have access to the check stock. An	a manual check except for one person. As a compensating	Issues noted in recommendation will be assessed during this	Internal Audit plan includes a review of the payroll process;	
Apr. 2014	individual who has the ability to generate a manual (off- cycle) check should not have access to the check stock.	control, any manual entry of hours by that person will be reviewed in the audit report mentioned in Management's	engagement.	during the engagement Internal Audit will assess this audit recommendation.	
Human Resources		Response to Audit Finding & Recommendation #2.			
Moderate					
inance and Business Operations, Legal					
2/31/2015 3/31/2019					
3/31/2013					

DEADLINE REVISED

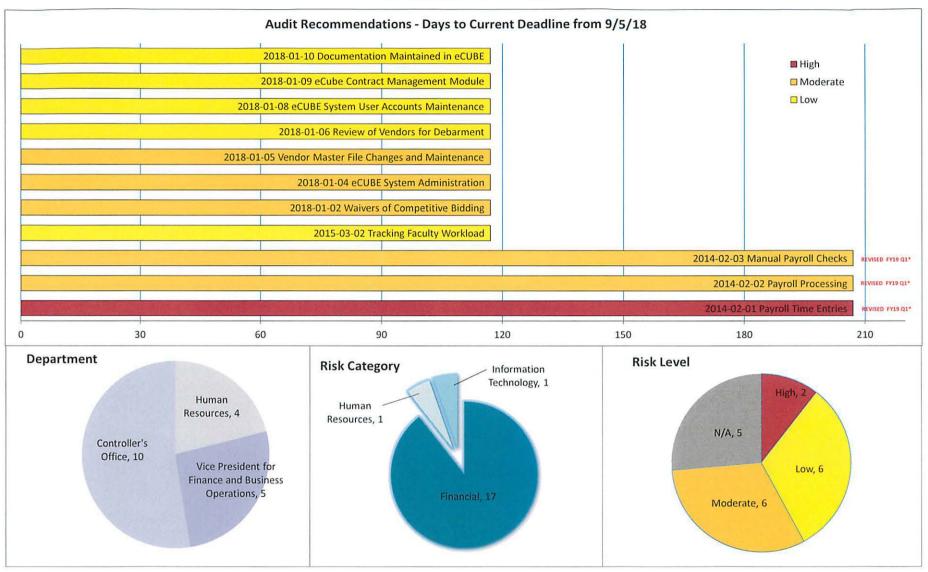
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Current Status				
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2015-03-02 Tracking Faculty Workload	We recommend that further research be done to determine if the Banner System has the capability to calculate and track	Banner has the ability to monitor faculty workload, and there	on schedule - no change to report at this time	Data reconfiguration is necessary before corrective action
T Academic Processes	teaching hours, non-teaching time, and total faculty	is faculty workload non-teaching capability. A more detailed analysis of Banner system capabilities should be completed.		noted in management response can be implemented.
eb. 2015	workload, and if the system does, then the use of the system	The academic division is currently working with the		
	should be implemented.	Registrar's office to implement a full year scheduling and		
inancial		registration system; this system will make much of the data available at an earlier time and improve tracking and		
ow		reporting processes.		
Academic Affairs, Legal				
2/31/2016 12/31/2018				
ON SCHEDULE - REVISED				
2 TO 4 Darks				
2017-01-02 Reporting from YSUF	Quarterly reports from Foundation are not consistent with reporting obligations in the	The Foundation's reporting requirements	Revised Development and Service Agreement with YSUF	Pending finalization of agreement with YSUF
SUF Agreement Audit	agreement and do not include information	in the agreement are presently under review. Management agrees that	through June 30, 2020 was approved by YSU Board of Trustees at June 2018 meeting. With finalization of the	
1ay 2017	necessary to project cash flows for longterm	procedures should be developed that more	agreement, YSUF Agreement audit recommendations have	
	financial planning.	clearly define reporting requirements.	been considered and are deemed closed.	
inancial	 Monitor Foundation reporting for compliance with agreement 			
I/A	Evaluate the need for supplemental			
	reporting			
inance and Business Operations	 Periodically evaluate the adequacy of reporting from Foundation 			
2/31/2017 6/30/2018	reporting from Foundation			
CLOSED				
2017-01-03 Individual gift support review	Individual gifts paid in multiple increments			
2017-01-03 Individual gift support review	that in total exceed \$100,000 may not be	Criteria will be developed to facilitate additional support detail regarding	Revised Development and Service Agreement with YSUF through June 30, 2020 was approved by YSU Board of	Pending finalization of agreement with YSUF
SUF Agreement Audit	identified to ensure supporting	monthly gift transfers from the	Trustees at June 2018 meeting. With finalization of the	
1ay 2017	documentation is obtained; in addition, this	Foundation. Executive oversight committee	agreement, YSUF Agreement audit recommendations have	
	threshold is not reviewed for appropriateness on a periodic basis.	will collaborate with Foundation staff to develop a reporting template(s) as a means	been considered and are deemed closed.	
inancial	Periodically evaluate criteria for obtaining	of improving gift documentation.		
/A	and reviewing supporting documentation			
	for significant gifts Ensure sufficient information is obtained 			
inance and Business Operations	from the Foundation to identify gifts			
2/31/2017 6/30/2018	meeting above criteria			
CLOSED				
2017-01-04 Coordinating fundraising efforts	Procedures for coordinating fundraising	Management agrees and will develop and	Pauland Development and Capica Agreement with Verin	built built for a farmer with verie
2017-01-04 Coordinating fundraising efforts	efforts between the Foundation and	Management agrees and will develop and implement institutional procedures to	Revised Development and Service Agreement with YSUF through June 30, 2020 was approved by YSU Board of	Pending finalization of agreement with YSUF
SUF Agreement Audit	division/college/department are not in	enhance and align fundraising activities	Trustees at June 2018 meeting. With finalization of the	
1ay 2017	place. Reporting from the Foundation to	with the Foundation.	agreement, YSUF Agreement audit recommendations have	
	individual University units is not in the agreement and does not appear to be in		been considered and are deemed closed.	
inancial	agreement and does not appear to be in place.			
/A	Enhance coordination of			
	division/college/department level			
	fundraising efforts with the Foundation with institutional procedures. Ensure			
inance and Business Operations	with institutional procedures. Ensure			
	procedures include periodic reporting from the Foundation and reporting obligations			

Audit Recommendation Number / Name Nudit Date Issued Nisk Category Nisk Level	Summary of Recommendation	Summary of Response	Current Status Comment	Prior Status Comment
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2017-01-07 Affiliated Organizations Policy SUF Agreement Audit May 2017 inancial /A inance and Business Operations 1/2018 6/30/2018 CLOSED	University's Affiliated Organizations Policy requires the University have representation on the Foundation's Board; however, this requirement is not in the agreement and the University cannot ensure compliance. Review University Affiliated Organizations Policy and ensure it aligns with the relationship between the Foundation and the University and the fundraising service agreement.	Management agrees and will submit a revised policy to the Board of Trustees for review and consideration.	Revised Development and Service Agreement with YSUF through June 30, 2020 was approved by YSU Board of Trustees at June 2018 meeting. With finalization of the agreement, YSUF Agreement audit recommendations have been considered and are deemed closed. Affiliated Organizations policy next review is 2020.	Pending finalization of agreement with YSUF
017-01-08 Gifts for Benefit of University Policy SUF Agreement Audit av 2017 nancial (A nance and Business Operations 1/2018 6/30/2018 CLOSED	Gifts for the Benefit of the University Policy authorizes the University to refuse gifts but does not identify who within the University has this authority. Enhance Gifts for the Benefit of the University Policy by identifying who within the University is authorized to refuse a gift to the University.	Management agrees and will submit a revised policy to the Board of Trustees for review and consideration.	Revised Development and Service Agreement with YSUF through June 30, 2020 was approved by YSU Board of Trustees at June 2018 meeting. With finalization of the agreement, YSUF Agreement audit recommendations have been considered and are deemed closed. Gifts for the Benefit of the University next review is 2020.	Pending finalization of agreement with YSUF
018-01-01 Conflicts of interest in purchasing ocurement Audit 22/18 nancial gh nance and Business Operations 30/2018 CLOSED	Conflict of interest procedures do not include evaluation of potential conflict prior to requisition approval. Develop and document procedures to systematically evaluate purchases from vendors with potential conflicts.	Conflict of Interest procedures will be updated and distributed to staff. Staff training will be conducted. New Vendor Form will be revised to incorporate conflict of interest verification.	Procedures for evaluating conflicts of interest have been developed and documented. Correction action has been implemented. Audit recommendation has been addressed and is closed.	N/A-new
018-01-02 Waivers of Competitive Bidding occurement Audit (22/18 nancial loderate nance and Business Operations /31/2018 ON SCHEDULE	Waivers of competitive bidding require only approval of Procurement Director and financial manager of the requesting department. Implement a review by the Vice President for Finance and Business Operations to approve or deny bid waiver requests after they are reviewed and approved by the Procurement Director.	There is a new Director of Procurement Services effective May 16, 2018. Evaluation of the recommendation will continue as an additional review of the Bid Waiver process.	on schedule - no change to report at this time	N/A - new

Audit Recommendation Number / Name Audit Date Issued Risk Category Risk Level	Summary of Recommendation	Summary of Response	Current Status Comment	Prior Status Comment
KIIK LEVEI Division Original Deadline Revised Deadline Current Status				
2018-01-03 eCUBE Requisition Approval Overrides Procurement Audit 5/22/18 Financial Moderate	Several eCube users in Procurement are assigned to a user group that enables the user to override other approvals in the workflow. Evaluate the eCUBE user group permission that enables a user to override approvals to determine if it can be removed.	Buyer role in eCUBE has been updated to turn off ability to override requisition approval rules and approve requisitions on behalf of other approvers.	As noted in management response, override ability was removed from buyer role in eCube. Correction action has been implemented. Audit recommendation has been addressed and is closed.	N/A-new
Finance and Business Operations 5/21/2018 CLOSED				
2018-01-04 eCUBE System Administration Procurement Audit 5/22/18 Information Technology Moderate	System administrator users have ability to manually create eCube user accounts ("direct logins"), circumventing the controls of automated creation of users from Banner. Evaluate structure of system administration to ensure monitoring of elevated system administration accounts. Strengthen controls around manually created eCUBE "direct login" accounts.	Site administration has been removed from anyone with a buyer role in eCUBE system. Roles of individuals with site administration access will be reviewed; availability of system activity logs will be evaluated. Based on system review, certain roles require setup as direct logins. Procedures will be updated to require all direct logins follow same approval process as requestors and approvers.	on schedule - no change to report at this time	N/A - new
Finance and Business Operations 12/31/2018 ON SCHEDULE				
2018-01-05 Vendor Master File Changes and Maintenance Procurement Audit 5/22/18 Financial Moderate	Procedures for changes to vendor master file not consistently implemented. Vendor master file not periodically reviewed for duplicate records. Ensure supporting documentation for changes to vendor master file are complete and maintained. Review vendor master file for duplicates and scrub eCube vendor list against Banner vendor master file at least annual.	Staff were reminded of procedures for set up of new vendor. New Vendor Form will be revised to incorporate conflict of interest verification. Vendor maintenance procedures will be updated for procedures for additions, changes, and inactivation of vendor records and annual review of records.	on schedule - no change to report at this time	N/A - new
Finance and Business Operations 12/31/2018 ON SCHEDULE				
2018-01-06 Review of Vendors for Debarment Procurement Audit 5/22/18 Financial Low	Purchases processed outside of eCube are not reviewed for debarment from state or federal funding (for purchases on federal grants). Ensure procedures include verification vendors are not debarred from state or federal (for purchases on federal grant) purchasing.	New Vendor Form will be revised to add a review and verification that vendor was not debarred from state or federal funding. Departmental procedures for processing purchase orders in eCUBE will be reviewed and updated to incorporate standards, including responsibilities of buyers and information required to be maintained. Training on any updates will be provided to relevant staff.	on schedule - no change to report at this time	N/A - new
Finance and Business Operations 12/31/2018 ON SCHEDULE				

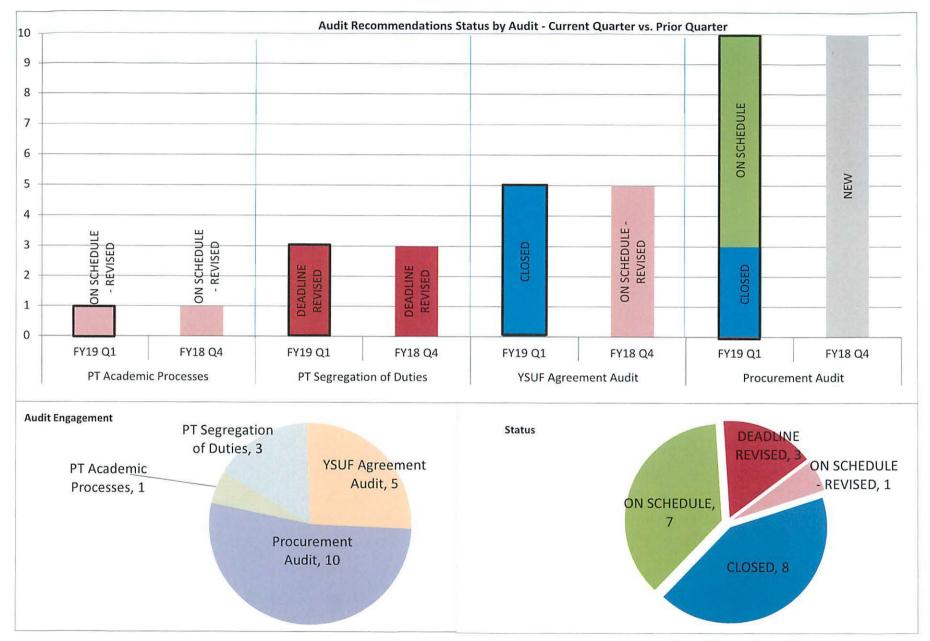
Audit Recommendation Number / Name	Summary of Recommendation	Summary of Response	Current Status Comment	Prior Status Comment	
te issued k Category k Level rision iginal Deadline <i>Revised Deadline</i> Current Status					
2018-01-07 Capturing and Reporting Cost Savings rocurement Audit /22/18 inancial ow inance and Business Operations /30/2018 CLOSED	Procedures have not been developed for capturing or determining and reporting the corresponding cost savings for purchase under each one of these policy and procedure requirements.	Develop procedures for capturing or determining and reporting corresponding cost savings for purchases made in accordance with university purchasing policy. Though a high level cost savings analysis was completed for the Governor's Taskforce report a, spreadsheet will be created and maintained beginning with PY19. This spreadsheet will capture cost savings for purchases made by utilizing group purchasing agreements, obtaining three quotes, and through competitive selection process.	Procedures for capturing, tracking, and aggregating cost savings have been developed, documented, and implemented. Corrective action has been implemented. Audit recommendation has been addressed and is closed.	N/A - new	
018-01-08 eCUBE System User Accounts Maintenance ocurement Audit 22/18 nancial w nance and Business Operations /31/2018 ON SCHEDULE	Periodic review of eCUBE user list against a list of active employees is not performed. Procedures for changes to manual direct login accounts not documented. There are a large number of inactive eCube user accounts.	At least annually, scrub eCUBE user list against active employees list. Document procedures for ensuring direct login account access is removed timely. Evaluate purging inactive eCUBE accounts. eCUBE System User Account Maintenance procedures will be updated to incorporate procedures for additions, changes, and inactivation of user accounts as well as annual review of records for possible inactivation and purging.	on schedule - no change	N/A - new	
D18-01-09 eCube Contract Management Module ocurement Audit 22/18 nancial w nance and Business Operations /31/2018 ON SCHEDULE	eCube contracts module not consistently implemented.	Evaluate fully implementing the eCUBE contracts module for enhancing contract compliance monitoring. Director of Procurement Services will evaluate eCUBE contract module and determine if it is an appropriate solution for contract compliance monitoring and managing contract expiration and milestone tracking.	on schedule - no change to report at this time. Note: Procurement is in the process of evaluating the current contract management capabalities of eCube against the needs of the University.	N/A - new	
018-01-10 Documentation Maintained in eCUBE rocurement Audit /22/18 mancial ww nance and Business Operations /31/2018 ON SCHEDULE	Few instances were noted where manual supporting documentation maintained in eCUBE was not consistent across all transactions or was not complete.	Ensure departmental procedures include standards for documentation captured and maintained in eCUBE. Ensure procedures are documented and communicated to relevant Purchasing Department staff. Departmental procedures for processing purchase orders in eCUBE will be reviewed and updated to incorporate standards, including responsibilities of buyers and information required to be maintained in eCUBE. Relevant staff will be trained on any updates.	on schedule - no change to report at this time	N/A - new	

AUDIT RECOMMENDATIONS DASHBOARD 1st QUARTER FISCAL YEAR 2019



* recommendation held open pending FY19 HR-Payroll Process Review engagement

AUDIT RECOMMENDATIONS DASHBOARD 1st QUARTER FISCAL YEAR 2019



Youngstown State University Office of Internal Audit Audit Plan Quarterly Update Fiscal Year 2018 July 1, 2017 - June 30, 2018

		July 2017 - June 2018						July - Sept	
	July - Sept	Oct - Dec	Jan - Mar	Apr - Jun	FY18 t	o date as of J	une 30	FY19 Quarter 1	
	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	Budget	Difference	Budget	Comment
Audit and Assurance:									
Audit Engagements:						11.18			
Purchasing	230	176	114	14	534	445	(89)	-	
Grants/Research Compliance		10	26	241	277	440	163	90	
Payroll Process Review	144	2	·	42	42	-	(42)	65	planning and scoping in FY18Q4
Student Organizations	-			-	-		-		moved to FY19Q4 audit plan based on FY19 audit risk assessment
Continuous Auditing/Analytics	99	177	281	76	633	576	(57)	120	IDEA audit analytics software will be implemented beginning with FY18 Q4 analytics performed in FY19Q1
Open Audit Recommendation Follow-up	20	10	13	16	59	142	83	35	
Hotline Monitoring	2	5	16	5	28	60	32	15	
	351	378	450	394	1,573	1,663	90	325	
Advisory	-	-	67	11	78	180	102	70	
Administrative & Planning:									
Administrative	87	61	62	60	270	218	(52)	45	
Audit Risk Assessment, Annual Planning, Audit Subcommitte Prep and Meetings	71	91	64	49	275	153	(122)	15	
Enterprise Risk Management assistance	1	25	32	28	85	100	15	20	
Professional Development &						1000		2012	FY19 Q1 includes 24 hours of training IDEA audit analytics
Training	4	30	11	22	67	40	(27)	30	software
Holiday, Vacation/Sick	84	91	30	25	230	220	(10)	80	
	246	298	199	184	927	731	(196)	190	
Total Hours	597	676	716	589	2,578	2,574	(4)	* 585	

Internal Audit Department staffing resources:

Internal Audit Director

Internal Audit Intern (15-20 hours per week duing Fall and Spring semesters)

• difference in total hours from budget is due to variability in intern hour:

YSU Anonymous Reporting Hotline Aggregated Statistics Fiscal Year 2019 Quarter 1

As of 8/3/18

Hotline Activity	Quarter 1	Fiscal Year To Date Total	Prior Fiscal Year Total
Open from previous quarter	-		
Reports received	1	1	8
Closed			
Unsubstantiated/insufficient information	-	-	4
Process enhancements noted		12	-
Formal investigation	-		-
Referred	-	-	<u>2</u>
Total Closed		-	6
Under review at quarter end	1		

Reporting Method	Quarter 1	Fiscal Year To Date Total	Prior Fiscal Year Total
Ethicspoint Phone	-	-	-
Ethicspoint Website	1	1	<u>8</u>
Total:	1	1	8

Reporter Anonymity	Quarter 1	Fiscal Year To Date Total	Prior Fiscal Year Total
Anonymous	1	1	8
Not anonymous			-
Total:	1	1	8