

BOARD OF TRUSTEES AUDIT SUBCOMMITTEE Michael A. Peterson, Chair Molly S. Seals, Vice Chair James E. "Ted" Roberts Anita A. Hackstedde Elsa Khan

Wednesday, September 1, 2021 10:30 a.m. or immediately following previous meeting

Kilcawley Center Presidents' Suites

## **AGENDA**

- A. Disposition of Minutes for Meeting Held June 2, 2021
- B. Old Business
- C. Committee Item
  - 1. Discussion Items
- C.1.a. = Tab 1 a. Donor Restricted Fund Audit Report
  Kelli L. Miller, Director of Internal Audit, will report.
- C.1.b. = Tab 2
   b. 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.
   Kelli L. Miller, Director of Internal Audit, will report.
- C.1.c. = Tab 3 c. FY21 Fourth Quarter Internal Audit Plan Update Kelli L. Miller, Director of Internal Audit, will report.
- C.1.d. = Tab 4 d. Anonymous Reporting Hotline Stats Update
  Kelli L. Miller, Director of Internal Audit, will report.
  - e. Enterprise Risk Management Update
    Kelli L. Miller, Director of Internal Audit, will report.
  - D. New Business
  - E. Adjournment



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Office of Internal Audit 330.941.2015 www.ysu.edu

# Internal Audit Report

Date: July 29, 2021

To: Katrena Davidson, Controller

From: Kelli L. Miller

RE: Internal Audit Testing – Donor Restricted Funds

Audit #: FY2021-02

# Background

Donors contribute gifts that support the educational and strategic objectives of Youngstown State University. These gifts can be in the form of cash, securities, property, or other assets. Donors may specify the purpose of the gift, hence establishing "restrictions" on the use of the gift. Additionally, gifts may be endowed, where the principal portion of the gift is invested in perpetuity, with the generated earnings used to fund expenditures in accordance with established gift restrictions. Gifts may be made directly to the University or via an affiliated organization (i.e. Youngstown State University Foundation, The Penguin Club, and WYSU).

# Engagement

Internal Audit reviewed the system of internal controls related to the University's administration and monitoring of donor restricted funds.

An audit is designed to provide reasonable, but not absolute assurance regarding the effectiveness of internal controls. An audit involves sampling, rather than testing 100% of a population of transaction items. Internal Audit promotes continuous improvements and effective internal controls. However, management is responsible for the design, implementation, and operating effectiveness of internal controls.

#### Objectives

The primary objective of this engagement is to evaluate the adequacy and effectiveness of University controls, which ensure the effective administration of donor restricted funds.

Specific objectives include assessing:

- The efficiency and effectiveness of operational procedures and processes
- Reliability and integrity of financial and operational information
- Compliance with the donor intent and applicable University policies

#### Scope

The scope of this engagement included a review of the University processes related to administration and monitoring of donor restricted funds. The engagement focused on the period from July 1, 2020 through January 31, 2021.



Specific procedures included:

- Review of University and department policies and procedures which address gift acceptance and documentation of donor intent for use of the gift as well as communication of gift restrictions to users
- Inquiries of University staff including process walkthroughs
- Test of University transactions and supporting documentation related to receipt, documentation, and communication of donor intent and ultimate expenditure of gifts

Testing included the flow of funds from point of receipt, in cases where funds were originally received and then transferred to the University, by an external affiliated organization.

#### Conclusion

Overall, the audit indicated that the system of internal controls is operating effectively. However, Internal Audit observed several areas for improvement to strengthen the system of internal controls. Therefore, the audit opinion is *effective*, *opportunities for improvement*.

The observations and audit recommendations are presented in this report along with managements' responses. Management's response includes a planned implementation date for corrective action. Internal Audit will perform follow-up procedures subsequent to the indicated implementation date to verify that corrective actions have been taken.

Kelli L Miller, CPA

Director of Internal Audit

cc:

J. Tressel

N. McNally

Audit Subcommittee

## Observations, Recommendations, and Responses

Increased focus on training, communication and adherence to procedures is necessary to improve efficiency and best practices related to administration of restricted giving throughout the university and affiliated organizations.

#### Observation:

- Stakeholders noted a lack of timely, consistent and relevant restricted giving information.
- Foundation reported that monthly information reports were suspended during the past year and only provided to users upon request. This change was instituted at the time of the university restructuring.
- Chairs and Department Heads indicated an interest in education and training related to handling of donor-restricted funds.

#### Recommendation:

Current procedures and communication mechanisms need to be reassessed and evaluated in order to ensure that individuals throughout the university have the training and necessary information to administer restricted giving, use of restricted funds and relationships with donors in an effective and efficient manner.

# Management response:

A work group has been convened to assess and evaluate training, communication and adherence to procedures for the purpose of improving efficiency and ensuring continued effectiveness in handling of donor restricted funds. Initially, this work group will include representation from the Controller's Office and the YSU Foundation. Consideration will be given to the need to involve stakeholders from other areas within the university as well.

# **AUDIT RECOMMENDATIONS STATUS - FY2021 Q4**

Audit Recommendation Number / Name Audit Date Issued Risk Category Risk Level Division Original Deadline Current Status	Summary of Recommendation	Summary of Response	Current Status Comment	Prior Status Comment
2018-02-04 Risk assessment and monitoring federal grant subrecipients  Research Compliance Audit 2/11/19 research Moderate  Academic Affairs SYSTAGE 12/31/2021 ON SCHEDULE	Develop, and implement procedures for subrecipient risk assessment and monitoring	ORS and orants Accounting are currently finalizing a formal sub-recipient risk assessment process based partially on the federal demonstration partnership best practices, documentation. Of greater concerns the identification of sub-resipients beling to meet the terms and conditions of the sub-award in as obstacles and meety manner. Therefore, much of the focus of this issue will be on development of dear assessment protocols.	Final resolution has been delayed due to staffing shortages and COVID-19. Completion timeline contingent on staffing and remote work considerations. Temporary measures are in place to strengthen oversight until implementation completed.	Final resolution has been delayed due to staffing shortages and COVID-19. Completion timeline contingent on staffing and remote work considerations. Temporary invasures are in place to strengthen oversight until implementation completed.
2018-02-05 Principal investigator communication and training Research Compliance Audit 2/11/19 research Moderate  Academic Affairs 12/31/2021 DEADLINE REVISED	Develop formal, ongoing periodic training für PI's and potential PI's that is aligned with funding agency guidelines. Ensure required trainings are monitored for completion.	Management believes that the autit items can be substantially addressed as a result of the biring a new Director of Research, Compliance and initiatives (Dr. Van slambrouck) and the implementation of an ERA system Pertanent tasks planned include: 1) Division training materials on the use of the ERA software and establish procedures for proposal development and submission, consistent with relevant requirements: 2) Develop training videos which meet the scheduling needs of faculty, staff and students: 3) Develop a recordisceping process within the ERA software for monitoring training.	FRA system training has been the focus. This has been conducted in conjunction with roll-out of new system in module format. This is an engoing task that will extend well into EV 22 and future years.	ERA system training has been the focus. This has been conducted in conjunction with roll-out of new system in module format. This is an ongoing task that will extend well into EY 21 and future years.
2018-02-10 Pre-approval of travel expenses charged to grants  Research Compliance Audit 2/11/19  Financial	includes traffy Accounting in the Concur automated approval workflow conting for expenses charged to grant funds.	Counts Accounting understands the desire to automate workflow approvals in Concur rather than relying on manual counting. We are exploring the use of automated workflows for travel rainthus ements in Concur.	Procurement pesition varancies and LOVID implications continue to delay progress. Target dates contingent on staffing and remote work.	Procurement position variances and COVID implications continue to sicky progress. Target dates continuent on staffing and femote work.

Low

Finance and Business Operations

ON SCHEDULE

Audit Date Issued Nisk Caregory Nisk Evel Division Organial Deadline Corrent Status	Summary of Recommendation	Summary of Response	Current Status Comment Prior Status Comment	Prior Status Comment
2018-02-11 Electronic research administration system Research Compleme Audit 1711/19 research Low 12731/2021 ON SCHEDULE	Develors a formal uniformentation plan for the ENA system software to enable appropriate oversight and management of the project	A viable EBA system was identified and parchased However, the vendor west out of business, rendering the selected platform impractical. The Office of Rewarch has begun the process of exhibiting alternative systems and a potential EBA system has been identified. The procurement of the system is expected in 184 quarter 2020 and implementation will follow.	System has been purchased and is being utilized by a limited number of users. There are still some issues that are being addressed. Write distribution delayed while known issues are addressed.	System has been purchased and is being utilized by a limited number of users. There are still same issues that are bring addressed. Wide distribution delayed while known issues are addressed.
2020-01-01 Politices and Procedures Studiest Organizations Audit 60-2177-0 Financial 10-4 50-4177-0 Student Experience 37117-021 03 50-60046	Update poinces to address branchal hamagement requirements including low-status, an abouting somepts resind keeping, contrast requirements handing and thansing will procedure, debin sement said risk agency account and off sampus, sall accounts	Policies with the dievelopied in this area	Progress, delayed the to CAMD related priorities and recent restructuring in this department	Progress addisped the to a DVID related prorfles and recent restructuing in the department
2020-01-02 Training Oversight Student Organizations Audit 02/23/29 Academic Affairs Low Student Experience 8/31/2021 Ox SCHEDULE	improve startant organization Painting and oversight of transing compliance	Will review and update training delivery methods and subject matter as will as monitoring compliance with: training requirements.	Progress debyed due to COVID related prorties and recent restructuring in this department.	COVID implications have delayed progress. Revised lenger, dates contingent on COVID related proorties, staffing and remote work.
2020-01-03 Activity Management Student Organizations Audit 1024742.0 Academic Affairs Low Student Experience 4/31/2021 ON SCHEDULE	Review, and sandate professes. Units (the and responsibilities and response are accounted to some afficient as space.)	Will record and and deep molecus regarding use of space and meants updates to studie to advisors and reservations as	Rogress delayed due to COVID related pracefuses and recent recent recent and actions of the department.	ACMIT implications have delayed progress. Revised rarged address canding and are made work.
Friday, August 20, 3023				The second

Audit Recommendation Number / Name Audit Date Issued Risk Category Risk Eavel Division Original Deadline Current Status	Summary of Recommendation	Summary of Response	Current Status Comment	Prior Status Comment
2020-01-04 Travel Management  Student Organizations Audit 02/17/20 Academic Affairs Low  Student Experience 8/31/2020 8/31/2021	Clarify roles and responsibilities, reinforce training and modify record retention with regard to student organization travel.	Will clarify roles, enhance training and retain student travel records for three years	Progress delayed due to COVID related priorities and recent restructuring in this department.	COVID implications have delayed progress. Revised target dates contingent on COVID related primities, staffing and remote work.
ON SCHEDULE				
2020-01-05 Cash Account Signers and Cash Handling Student Organizations Audit 02/17/20 Financial Low Student Experience	Clarify tales and responsibilities and monitor compliance with policies related to coal) account signers	Working to bring all organizations into compliance. Will communicate with advisars regarding this policy. Also additional training and policy development in this area will develop component of annual constitution to document compliance with account signatory policies.	Progress delayed due to COVID solder provides and recent restructuring in this department	Progress delayed due to c 0x10 related priorities and recent restructuring in this department.
ON SCHEDULE				
2021-01-01 Monitoring and oversight of Rich Center Agreement  Rich Center  9/30/20  Financial  Moderate	Review and update agreement between YSU and Rich Center and enhance ongoing monitoring and oversignt	Committee will be established to review and update existing agreement. Revisions to be presented to YSU leadership. A process will be established to monitor on a consistent basis.	Administration has determined that agreement is not warranted given relationship between Center and University. This comment has been adequately addressed and is closed 8/13/2021	
Academic Affairs 7/81/2021 CLOSED				
2021-01-02 Monitoring Compliance with Agreement Rich Center 9/30/20 Financial Moderate	Develop procedures to create compliance with tortis of agreement including assignment of asspondulity, evaluation and compliance communication.	Working to establish procedures, assign monitoring cosponsibility institute annual compliance review and seriale process to communication of compliance matters	Administration has determined that agreement is not warranted given relationship between Center and Ontoersity. This comment has been adequately addressed and is closed 8/13/2021.	

CLOSED

Audit Recommendation Number / Name Audit Date Issued	Summary of Recommendation	Summary of Response	Current Status Comment
Risk Greegory Risk Level Division Original Deadline Congrent Status			
2021-01-03 Monitoring Compliance with VSU Policies Rich Center 9/30/20 human resources Moderate Academic Affairs 7/34/2021 PENDING CLOSE	Enhance compliance with YSU policies on training processes, and review and approval of Rich Center specific policies, and procedures	Rich Centrer Aufstin (BCA) administration will review current policies and procedures, identify deficiencies and seek YSU BOT approval for Rich Center specific policies, and procedures.	Draft documents have been submitted to IA, review underway
2021-01-04 Affiliated Organization Policy-Friends of Rich Center Rich Center 9/30/20 N/A University Relations 0/36/2025 ON SCHEDULE	Edmate and informas Dorolatenship between Gouversity. Birth (enter and basens). Ascribe a Democratism of Agreement (MAA) to professelationship between these factors. Ensure alignment with Afrikated Organization. Probases.	8G.A Agministration will absolute for NOA between Eurids and YS/ whelf aligns with Attiliated Giganization Policy.	Orall disconnents have them prepaied and are being treatwest by 85d.) Rich senter and breints
2021-01-05 Fiscal Practices and External Reporting of Friends of Rich Center 8/30/28  N/A  University Relations  9/30/2022  ON SCHEDUSE	Develop policies and procedures and train staff in order to enhance fiscal practices and external reporting of Rich Gentag	Procedures will be developed to address fiscal and reporting markets.	
2021-Adv-02 Noncompliance in Purchasing Contracts Individual Staff Training Advisevy Purchasing Contracts 4/19/3021 Financial Moderate Finance and Business Operations	Direction of COPS, must be extend that she understaints and table complex with proximement requirements, including for any infinited 12 shipped by the examing particles requirements. Specifically the collowing from the experience of the example of the experience of the example of the exampl	Staff regular will utilize the practicement services website to revower all applicable programment discusseds.  Additionally, site will ented in as the refresher Commigned and streets will serve to the service of the interesting partition of the in	Training completed. We participated in final meeting $\mathbb{R}$ when that staff bail completed framing $\mathbb{R}$ miniment closed $\mathbb{R}/2n/3$

Current Status

Conem 218(0)

2021-Adv-03 Noncompliance in Purchasing Contracts Enhanced Training

Advisory-Purchasing Contracts

4/19/2021

Financial

Risk Category Risk Level Division Original Deadline

Moderate

Finance and Business Operations

12/31/2021

ON SCHEDULE

The stated mission of Procurement Services is to provide assistance for the purchase and payment of quality goods and services at competitive costs in accordance with University guidelines and applicable faws. In this case, there were numerous indications that a key user managing a significant continct needed assistance with the process. Procurement Services should evaluate user knowledge and conduct consolitations and training when circumstances warrant. Procurement services should also consider the need for new employee training in this area (particularly at the suporvisory level) and refresher training for key employees involved in non-routine trainsactions.

Training opportunities, including eCUBE training are communicated to new employees when they are given access as a new user to Banner Finance. It is up to the employee to schedule training, the training is not mandated. Additionally, Procurement Services is in process of evaluating all aspects of training including content, frequency of availability, and delivery methods.

2021-02-04 Training, communication and adherence to procedures re

Donor Restricted Funds

7/29/2021

Financial

Low

Finance and Business Operations

1/31/2022

NEW

Current procedures and communication mechanisms need to be reossessed and evaluated in order to ensure that individuals throughout the investigation place the training and accessary information to administer restricted giving, use of restricted funds and relationships with donors in an effective and ethicine manner.

Work group has been convened. This group will include representatives from University and Foundation. The group will assess and evaluate training, communication and adherence to procedures for the purpose of ensuring continued effectiveness, improving efficiency and establishing hest practices.

## Youngstown State University Office of Internal Audit Audit Plan Quarterly Update Fiscal Year 2021 April 1, 2021 - June 30, 2021

			July	/ 2020 - June	2021		
,	July - Sep	Oct - Dec	Jan - Mar	Apr - Jun	FY21 t	o date as of Ju	ıne 30
	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	Budget	Difference
Audit and Assurance:							
Audit Engagements:							
Rich Center for Autism	175	34	o	o	209	160	49
Donor Restricted Funds	0	30	100	45	175	170	5
Banner User Access	0	o	30	15	45	280	-235
Faculty Workload	0	30	10	10	50	208	-158
Continuous Auditing/Analytics Open Audit Recommendation Follow	133	249	220	220	822	600	222
up	10	70	30	30	140	140	0
Hotline Monitoring	<u>25</u>	<u>30</u>	<u>30</u>	<u>15</u>	100	<u>60</u>	40
	343	443	420	335	1541	1618	-77
Advisory	40	57	110	125	332	360	-28
Administrative & Planning:							1
Administrative	40	27	48	40	155	240	-85
Audit Risk Assessment, Annual Planning, Audit Subcommitte							
Prep and Meetings	20	15	20	40	95	90	5
ERM Assistance	15	15	25	20	75	80	.5
Professional Development &							
Training	4	25	10	10	49	40	9
Holiday, Vacation/Sick	87	<u>73</u>	43	<u>66</u>	269	136	133
	166	155	146	176	643	586	57
<u> </u>							
Total Hours	549	655	676	636	2516	2564	-48

Comment	
Completed	
Completed	
Preliminary	
Postponed	
FY21-Q3	
·	
Cares, Intl, Detect, Compliance, Pcard	
•	
-	

# YSU Anonymous Reporting Hotline

# Aggregated Statistics Fiscal Year 2022 Quarter 1

As of 8/2/2021

Hotline Activity	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Fiscal Year To Date Total
Reports received	1				1
Closed					
Unsubstantiated/insufficient information	-				22
Process enhancements noted	-				-
Investigation	1				1
Referred	-				0
Total Closed	1				1
Under review at quarter end	0				

Reporting Method	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Fiscal Year To Date Total
Ethicspoint Phone					0
Ethicspoint Website	1				1
Total:	1				1

Reporter Anonymity	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Fiscal Year To Date Total
Anonymous	1				1
Not anonymous	-				-
Total:	ı				1