## **Texas Tech University System Office of Audit Services**

### ANNUAL REPORT For the Year Ended August 31, 2005



## **Transmittal Letter**

October 31, 2005

Dr. Bob L. Stafford, Chair Board of Regents Audit Committee Texas Tech University System

Dear Dr. Stafford:

We are pleased to submit the annual report of the Office of Audit Services of Texas Tech University System for the year ended August 31, 2005. This report fulfills the requirements set out in the Texas Internal Auditing Act (V.T.C.A., Government Code § 2102.009, Annual Report). It provides information related to our audit plan, a copy of our most recent peer review, a list of completed engagements, a list of external audit services procured, and a list of our other activities.

We believe the work of our office has contributed to the efficient and effective operation of Texas Tech University System by making positive contributions to risk management efforts, control systems, and governance processes. During the year ended August 31, 2005, we issued 63 reports related to various engagements, and the results of our work have been communicated to the Board of Regents Audit Committee and to the administration.

For further information about the contents of this report or any engagement report mentioned herein, please contact me.

Sincerely,

Kimberly F. Turner, CPA Managing Director

Copies: Dr. David R. Smith Texas Tech Board of Regents Audit Committee Legislative Budget Board Office of the Governor State Auditor's Office Sunset Advisory Commission

## **Table of Contents**

| Annual Plan for Fiscal Year 2005                                | 1-16  |
|---|-------|
| External Quality Assurance Review                               | 17-21 |
| List of Audits Completed  | 22-46 |
| List of Consulting Engagements and Non-audit Services Completed | 47-50 |
| Organizational Chart  | 51    |
| Report on Other Audit Activities                                | 52-53 |
| Annual Plan for Fiscal Year 2006                                | 54-69 |
| External Audit Services   | 70    |

The annual audit plan for Texas Tech University System for the year ended August 31, 2005, which is included in this report, was approved by the Chancellor and the Chair of the Audit Committee of the Board of Regents on August 17, 2004. Of the 43 engagements planned for fiscal year 2004, 24 were completed, eight were in progress at year end, four were carried over to fiscal year 2006, and seven were cancelled. Of the eight projects in progress at year end, seven were completed before issuance of this annual report. An additional 17 projects in progress at September 1, 2004, were completed during the year.

The cancelled audits were the result of changing risks and priorities, which were discussed with the Audit Committee. The cancelled audits were listed in the fiscal year 2005 annual audit plan as follows:

Texas Tech University System: SAO Statewide CAFR audit (assist) Texas Tech University System: Investments Risk Assessment (External Consulting Engagement) Texas Tech University System: Continuous Monitoring of Procurement Card Usage Texas Tech University System: Continuous Monitoring of Cellular Telephone Usage Texas Tech University: Small Business Development Center Follow-Up Texas Tech University Health Sciences Center: School of Nursing Billing Compliance Texas Tech University Health Sciences Center: El Paso Control Environment

In addition to the planned engagements, our office began 32 special projects and investigations during the year, of which 20 were completed and 12 were in progress at August 31, 2005. Of the 12 in progress at year end, six were completed before issuance of this annual report.

We also issued 19 status reports. The status reports are the first step in our follow-up process. The status reports are submitted to management so they can provide an update on management's actions. After consideration of the relative magnitude of risks identified in the initial engagement and the status of management's actions, we then select certain engagements for performance of formal follow-up procedures.



**Office of Audit Services** 

ANNUAL PLAN For the Year Ending August 31, 2005



| Table of Contents              |       |   |
|--------------------------------|-------|---|
| Transmittal Letter             | 3     |   |
| Mission Statement              | 4     |   |
| Performance Measures           | 5-6   |   |
| <b>Risk Assessment Process</b> | 7     |   |
| Allocation of Time             | 8     |   |
| Planned Engagements            | 9-11  |   |
| Nature of Work                 | 12-13 |   |
| Audit Process                  | 14-15 |   |
|                                |       |   |
|                                |       | 2 |

August 17, 2004

Mr. E. R. "Dick" Brooks Audit Committee Chair, Texas Tech Board of Regents

Dr. David R. Smith Chancellor, Texas Tech University System

We are pleased to submit the annual plan of the Office of Audit Services of Texas Tech University System for the year ending August 31, 2005. The plan addresses audits that are required by statute or administrative policy, assistance required by external auditors, audits that are currently in progress, and planned engagements based on our assessment of risk. We have scheduled approximately thirty percent of our time for assisting management with additional requests and special investigations and for following up on implementation of prior audit recommendations.

We appreciate the support you offer us in the performance of our responsibilities and formally request that you approve this plan.

Sincerely,

Kimberly F. Turner, CPA Managing Director

| Approved by | : Signature on File     | August 17, 2004 |
|-------------|-------------------------|-----------------|
|             | Mr. E. R. "Dick" Brooks | -               |

Approved by : Signature on File August 17, 2004 Dr. David R. Smith

3

### **Mission Statement**

The staff members of the Office of Audit Services agreed that we should have a mission statement that exhibits the commitment made by Texas Tech to be the institution of choice for high quality students and the best institution of higher education in the State of Texas, as well as our commitment to our professional standards. The result of our contemplation is a mission statement that emphasizes proactive quality service provided by our staff for the benefit of the Board of Regents and management throughout the Texas Tech University System.

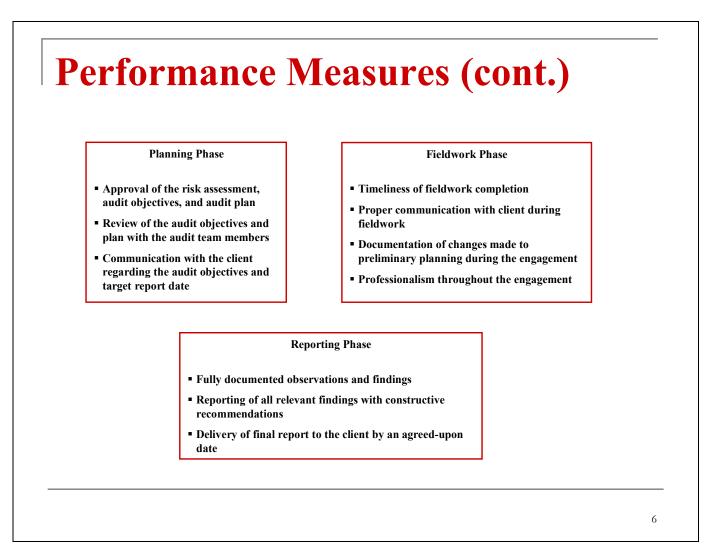
**Mission Statement** 

The mission of the Office of Audit Services is to assist the Board of Regents and other units of Texas Tech University System and its components in identifying, avoiding, and where necessary, mitigating risks.

### **Performance Measures**

We have instituted a continuous quality improvement control effort as required by internal auditing standards. We evaluate the quality of our services by:

- completing a self-assessment questionnaire at the end of each engagement;
- surveying our clients regarding their level of satisfaction with the services we have provided;
- measuring our performance against predetermined benchmarks that we believe will encourage excellence; and
- submitting to periodic assessment by peer review teams comprised of experienced higher education audit professionals.



### **Risk Assessment Process**

The Office of Audit Services allocates its resources in a manner that is consistent with the mission and goals of Texas Tech University System and its components. In accordance with the Texas Internal Auditing Act (V.T.C.A., Government Code, §2102.005), we have prepared this audit plan based on the results of a formal risk assessment process.

The risk assessment process undertaken to prepare this annual plan was multi-layered. The process began when the complete staff of our office, based on its collective institutional knowledge, input from upper management, information from past audit and consulting engagements, and knowledge of nationwide trends and occurrences in higher education and health care, developed risk assessments for all three components of Texas Tech. We identified and prioritized major processes as to their significance to the fulfillment of the missions of Texas Tech University System (TTUS), Texas Tech University (TTU), and Texas Tech University Health Sciences Center (TTUHSC), respectively. We analyzed each process to determine risks related to the achievement of entity objectives, and then classified each risk as to likely impact and probability of occurrence. The highest levels of institutional management at TTUS, TTU, and TTUHSC then executed a similar process to assess risks for their respective institutions.

The results of these assessments were identification of strategic, business, tactical, and environmental risks facing each institution. Any of the defined processes whose related risks were determined to present a high impact and at least a medium probability of occurrence were considered for inclusion in this annual plan.

## **Allocation of Time**

We have 13 audit professionals on our staff, resulting in over 26,000 total working hours for the upcoming year. After consideration of estimated time for holidays, annual leave, sick leave, staff meetings, and continuing professional education, we determined our allocable chargeable time to be approximately 18,000 hours.

Of this 18,000 hours, we estimate 1,900 hours are needed to perform required audits, assist external auditors, and complete other mandatory projects. Additionally, 1,300 audit hours are needed to complete fiscal year 2004 audits in progress. We have set aside approximately 30% of the remaining time (5,000 hours) for unscheduled work, including board and management requests, investigations, committee service, and other special projects. The remaining 9,800 audit hours have been allocated to projects determined through the risk assessment process and listed on pages 9-11.

9

8

## **Planned Engagements**

#### **Texas Tech University System and Components**

| Endowment Administration                                 | Op  |
|--|-----|
| Institutional Risk Assessments                           | Ris |
| Fraud Risk Assessment                                    | Ris |
| Investments Risk Assessment                              | Ris |
| The Institute for Environmental and Human Health*        | Ор  |
| Information Technology                                   | Co  |
| <b>Continuous Monitoring of Procurement Card Usage</b>   | Co  |
| Continuous Monitoring of Cellular Telephone Usage        | Со  |
| Texas Tech Foundation, Inc.                              | Fir |
| Chancellor & Regent Travel                               | Co  |
| State Auditor's Office Statewide CAFR                    | Fir |
| Texas Higher Education Coordinating Board ARP/ATP Grants | Со  |

Operational Risk Assessment Risk Assessment Operational/Controls Controls Compliance Financial Compliance Financial Compliance Financial Compliance

\* A joint project of TTU and TTUHSC

### **Planned Engagements (cont.)**

#### **Texas Tech University**

| Athletics  | Ope  |
|--|------|
| Athletic Ticket Office Follow-Up                               | Fina |
| Rawls Golf Course Follow-Up                                    | Fina |
| Academic Advising  | Con  |
| College of Mass Communications                                 | Ope  |
| Satellite Campus Operations                                    | Ope  |
| Student Mediation Center                                       | Ope  |
| Office of Senior Vice President for Administration and Finance | Ope  |
| College of Visual and Performing Arts                          | Ope  |
| Physical Plant Follow-Up                                       | Con  |
| Cash Controls Follow-Up  | Con  |
| Small Business Development Center Follow-Up                    | Con  |
| Human Resources  | Ope  |
| Student Recruiting and Admissions Process                      | Ope  |
| SACS Financial Statement Review                                | Fina |
| NCAA Compliance  | Con  |
| NCAA Financial Statements                                      | Fina |
| КОНМ-ҒМ  | Fina |
|  |      |

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11

## **Planned Engagements (cont.)**

#### **Texas Tech University Health Sciences Center**

| Amarillo Control Environment                                |
|---|
| Billing Compliance Follow-Up                                |
| Research Compliance   |
| Institutional Review Boards                                 |
| Medical Practice Income Plan (MPIP)                         |
| School of Nursing Billing Compliance                        |
| Texas Higher Education Coordinating Board Reporting Process |
| El Paso Control Environment                                 |
| Safety Services   |
| KPMG Reportable Condition Follow-Up                         |
| Compliance Review of HIPAA / GLBA / FERPA                   |
| Texas Higher Education Coordinating Board Residency Grants  |
| El Paso Family Medicine Contract                            |
|   |

Management Review Compliance Compliance Financial/Operational Compliance Compliance Management Review Compliance Controls Compliance Compliance Compliance Compliance Compliance

11

## **Nature of Work**

The Office of Audit Services evaluates and contributes to the improvement of risk management, control, and governance processes. The nature of the activities is determined by a risk assessment process undertaken annually with the input of senior management and the Board of Regents. Additionally, consulting engagements may be planned to improve the management of risks, to add value, and to improve Texas Tech's operations.

The Office of Audit Services' assessments and recommendations for improving Texas Tech's governance process are for the purpose of accomplishing the following objectives:

- promoting appropriate ethics and values within Texas Tech
- ensuring effective organizational performance management and accountability
- effectively communicating risk and control information to appropriate areas
- effectively coordinating the activities of and communicating information among our office, the Board of Regents, external auditors, and management

## Nature of Work (cont.)

The Office of Audit Services evaluates risk exposures and the effectiveness of controls relating to Texas Tech's governance, operations, and information systems regarding the

- reliability and integrity of financial and operational information;
- effectiveness and efficiency of operations;
- safeguarding of assets; and
- compliance with laws, regulations, and contracts.

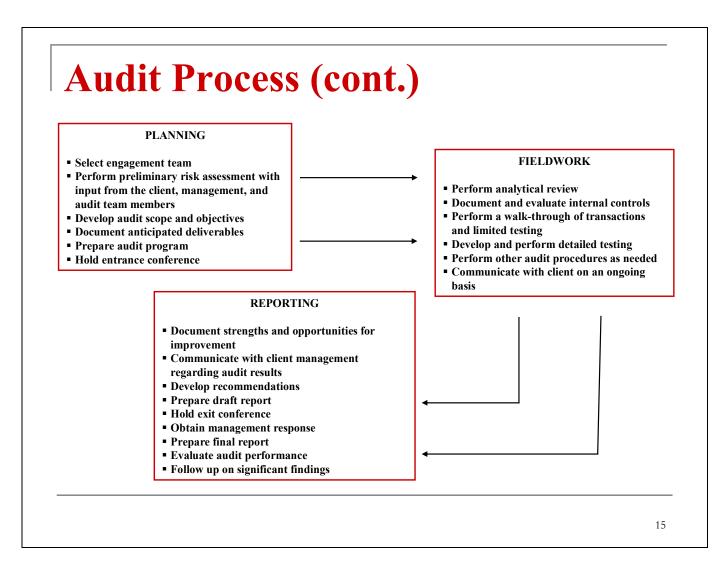
During the planning phase of each engagement, we determine the scope of work to be performed using the standards noted above. Our scope will be based on a risk assessment conducted during the planning phase of the audit. On all planned engagements, we will conduct an entrance conference and/or provide an engagement letter in order to communicate the scope and objectives of our audit to the management personnel involved.

The Institute of Internal Auditors, The Professional Practices Framework. (Altamonte Springs: The Institute of Internal Auditors, 2004). pp 14-17

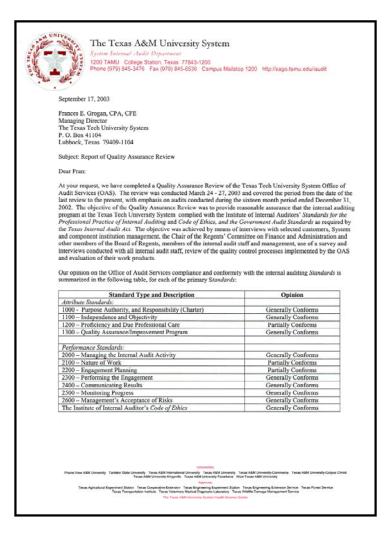
### **Audit Process**

Audits are performed in three phases: Planning, Fieldwork, and Reporting. As indicated earlier, the success of our efforts is monitored through the completion of self-evaluation questionnaires and the compilation of information to monitor our achievement of performance measures. We believe it is important that our process is understood. To document the procedures normally employed in the performance of an audit, we have prepared the illustration on the following page.

14



Our most recent external quality assurance review, dated September 17, 2003, indicates that the Office of Audit Services of Texas Tech University System generally or partially conformed with the *International Standards for the Professional Practice of Internal Auditing* and *Code of Ethics* and with *Government Audit Standards* as required by the Texas Internal Auditing Act for the period reviewed. A copy of the report is included. Our next quality assurance review will be conducted during fiscal year 2006.



#### **Description of Opinion Ratings:**

Generally Conforms: The Office of Audit Services has a charter, policies, and processes that are judged to be in accordance with the *Standards*, with some opportunities for improvements.

**Partially Conforms**: While the Office of Audit Services is making good-faith efforts to comply with all of the *Standards*, deficiencies in their practices have been identified that are judged to deviate from the *Standards*. However, these deficiencies did not preclude the OAS from performing its responsibilities in an acceptable manner.

**Does Not Conform:** This is used when deficiencies in practice are judged to be so significant as to seriously impair or preclude the internal audit activity from performing adequately in all, or in significant areas, of its responsibilities. During this review nothing came to our attention that would warrant this opinion.

The following observations and recommendations are provided to assist the Office of Audit Services in strengthening their operations and services to the System.

Opportunities exist to improve the auditing processes and risk assessment related to Information Technology. Weaknesses in this area are related to both *Standard* 1200 and 2100 below.

• 1200 - Proficiency and Due Professional Care,

The Office of Auditing Services does not have staff members with the knowledge, skills, and abilities to address the risks associated with the information technology systems used by the Texas Tech University System and its component institutions. In addition, the Office of Auditing Services has not contracted for these services. The information technology systems are integral to the successful operation of financial, medical, student, and research programs (applications). *Standard* 1210 states that the internal audit activity should possess, or obtain, the knowledge, skills and other competencies needed to perform its responsibilities.

Currently, the Office of Auditing Services has plans to obtain training in information technology auditing for one of their staff members in an effort to develop skills in this area. We commend the Office on this initiative, and believe that an immediate need is necessary to address this risk while they develop internal resources.

#### Recommendation

The Office of Auditing Services should direct resources toward obtaining expertise in the area of information technology. This could be in the form of hiring an experienced IT auditor, or contracting for these services.

#### • 2100 - Nature of Work

The Office of Audit Services is not effectively evaluating the risks associated with information technology and related systems as part of its overall risk assessment process used to prepare the annual audit plan. As mentioned above, the IT systems are very significant to the major areas of operations in the Texas Tech University System. The lack of monitoring of these risks creates significant exposures both at the enterprise risk level and at the level of the Office of Audit Service's risk assessment of the universe of operations. *Standard* 2100 requires that the internal audit activity evaluates and contributes to the improvement of risk management and control.

#### Recommendation

The Office of Auditing Services should appropriately address the risks associated with the TTUS IT environment in their risk assessment process that is used to produce the annual audit plan.

This recommendation is closely linked to the previous recommendation in that the IT expertise is necessary in order to appropriately evaluate the risks associated with the IT environment.

Opportunities were also identified to strengthen the planning process used for each audit engagement, and are addressed in the following observation and recommendation.

#### • 2200 - Engagement Planning

During our review we noted that the individual audit engagement planning process relies heavily on consultation with management to identify objectives to be addressed during the audit, and little use of a formal risk assessment process to identify risks associated with the operation or program under review. While management's input into the planning process is an important component in the development of audit objectives, it needs to be augmented with an objective assessment of the relevant risks and mitigating controls. *Standard* 2210 requires that the engagement's objectives should address the risks, controls, and governance processes associated with the activities under review.

#### Recommendation

The Office of Audit Services should develop an engagement planning process that identifies the relevant risks of the activity under review. The audit objectives should reflect the results of this risk assessment process and include procedures to assess the controls in place to mitigate the identified significant risks.

#### OAS Managing Director's Response

In response to the above recommendations, the Managing Director of OAS has chosen to address the issues collectively rather than individually due to their overlapping relationship.

Since 1997 OAS has attempted to recruit and retain auditors with IT expertise. If we have been successful in finding an individual who has the dual expertise, we have lost that person within a short period of time to more lucrative/fulfilling opportunities. In September 2002 we employed an auditor who had recently received a degree in both computer information systems and accounting. At the time that the review team was on site, she was still somewhat lacking in experience and training. However, during quality training for her in both IT auditing and in the risk assessment process. We will continue to do so. She has been extremely quick to successfully assume the expected responsibilities. I am confident at this time that she has the necessary expertise to appropriately evaluate IT risks and to audit within the IT audit expertise as a preferred qualification.

OAS adopted a new COSO based approach to its annual risk assessment for the upcoming year. Should we determine that risks exist that are beyond our collective expertise, we will communicate these uncovered risks to the Board of Regents and allow them to determine if they want to accept those risks or to allocate necessary resources to mitigate those risks.

As mentioned above, OAS will be approaching its annual risk assessment by using a new, state-of-the-art methodology. The staff as a group is being comprehensively trained to apply that methodology and will be using it during the engagement planning process.

We appreciate the courteous cooperation and assistance provided to us throughout the course of our review by the members of the Office of Audit Services and the Texas Tech University System community.

Sincerely,

Dick Dinan, CPA Team Leader Internal Audit Director The Texas A&M University System

#### Team Members:

Sherri Magnus, CPA Manager, Audit Services The University of Texas Medical Branch at Galveston

Mark Paganelli, CPA, CIA Executive Director Audit and Consulting Services University of Tennessee

Michael Barone, CPA Director PricewaterhouseCoopers LLP

| Report<br>Number | Report<br>Date      | Name of Report                                     | High–Level Audit<br>Objectives   | Observations/Findings and Recommendations  | Current Status (with brief<br>description if not yet<br>implemented)  | Fiscal Impact/<br>Other Impact   |
|------------------|---------------------|--|--|--|---|--|
|                  |                     |  |  |  | <ul> <li>Implemented</li> <li>Planned</li> <li>In progress</li> <li>Factors delay implementation</li> <li>Agency does not plan to<br/>implement recommendation</li> </ul> |  |
| 2004024          | October 22,<br>2004 | Texas Tech<br>University                           | To verify compliance<br>with NCAA Bylaws<br>related to the areas of                            | There are no violations of NCAA Bylaws related to the areas reviewed.  | Not Applicable  | Not Applicable   |
|                  |                     | NCAA<br>Compliance                                 | recruiting, athletic<br>equipment and apparel,<br>and representatives of<br>athletic interests | Equipment managers do not have written policies<br>and procedures and do not maintain perpetual<br>inventory records for equipment and apparel.<br>Management should enhance procedures related<br>to athletic equipment and apparel inventories.  | Implemented   | Reduce the risk<br>of<br>noncompliance<br>with NCAA<br>Bylaws                                |
| 2004062          | October 22, 2004    | Texas Tech<br>University<br>Research<br>Compliance | To assess the<br>effectiveness of the<br>research compliance<br>function                       | Texas Tech University does not have a centralized<br>compliance function. The responsibility to<br>monitor compliance has been delegated to four<br>committees (Animal Care and Use Committee,<br>Institutional Biosafety Committee, Protection of<br>Human Subjects Committee, and Radiation/Laser<br>Safety Committee).<br>Texas Tech University should designate a chief<br>compliance officer.   | Planned<br>Implementation planned for<br>the next budget cycle.   | Strengthen the<br>control<br>environment   |
|                  |                     |  |  | Texas Tech University does not have a<br>mechanism in place for reviewing and approving<br>non-sponsored projects, creating a risk of<br>unknowingly fostering research that is non-<br>compliant with federal and state regulations.<br>Texas Tech University should consider routing all<br>research, sponsored and non-sponsored, through a<br>central location, thereby ensuring that all research<br>is reviewed, approved, and monitored for<br>compliance with federal and state regulations. | Implemented   | Reduce the risks<br>resulting from<br>noncompliance<br>with federal and<br>state regulations |

| Report<br>Number | Report<br>Date      | Name of Report  | High–Level Audit<br>Objectives  | Observations/Findings and Recommendations   | Current Status (with brief<br>description if not yet<br>implemented)   | Fiscal Impact/<br>Other Impact   |
|------------------|---------------------|---|---|---|--|--|
| 2004056          | October 22,<br>2004 | Texas Tech<br>University<br>Post-Award Grant<br>Administration<br>Process | To evaluate and<br>document the business<br>processes in place to<br>ensure that revenues,<br>expenditures, and<br>personnel activity<br>reporting are properly<br>recorded | Individuals who may not have direct knowledge<br>of the time worked by the employee named on the<br>Personnel Activity Report are certifying time.<br>Texas Tech should develop a training program for<br>principal investigators and their staff regarding<br>the purpose and importance of effort reporting.  | Implemented  | Reduce the risks<br>resulting from<br>noncompliance<br>with federal<br>regulations and<br>the risk of<br>losing federal<br>grant funding or<br>incurring federal<br>sanctions  |
|                  |                     |   |   | Sponsored Programs Accounting and Reporting is<br>allowing a student assistant to review 100 percent<br>of the grant account procurement card<br>expenditures for both grant compliance and Texas<br>Tech University procurement card guideline<br>compliance.<br>Sponsored Programs Accounting and Reporting<br>accountants should perform the review of the<br>grant account procurement card transactions for<br>compliance with grant guidelines. Texas Tech<br>University Purchasing should review the grant<br>account procurement card transactions for<br>compliance with Texas Tech University<br>procurement card guidelines. | In Progress<br>The Purchasing department's<br>implementation of the new<br>web-based procurement card<br>system was delayed. | Reduce the risks<br>resulting from<br>noncompliance<br>with federal and<br>state regulations<br>From September<br>1, 2003, through<br>March 31, 2004,<br>over \$520,000<br>in grant funds<br>was expended<br>using<br>procurement<br>cards |
| 2005034          | October 22, 2004    | Texas Tech<br>University<br>Early Head Start<br>Center Theft              | To review controls over<br>inventory  | Management should improve inventory controls<br>by limiting access to the inventory, maintaining a<br>perpetual inventory of the products, and<br>segregating duties related to the ordering,<br>receiving, and reconciling of the inventory.   | Implemented  | Reduce the risk<br>of loss of<br>institutional<br>resources  |
| 2004051          | October 22, 2004    | Texas Tech<br>University Health<br>Sciences Center                        | To evaluate cash and inventory controls   | The pharmacy has strong controls over drug purchases and the controlled substance inventory process.  | Not Applicable   | Not Applicable   |

| Report<br>Number | Report<br>Date   | Name of Report   | High–Level Audit<br>Objectives  | Observations/Findings and Recommendations  | Current Status (with brief<br>description if not yet<br>implemented) | Fiscal Impact/<br>Other Impact   |
|------------------|------------------|--|---|--|--|--|
|                  |                  | El Paso Pharmacy<br>Cash & Inventory<br>Controls   |   | The pharmacy did not process intra-institutional vouchers to charge clinics timely.<br>Pharmacy management should monitor the process to ensure timely processing of vouchers.   | This pharmacy was closed later in the fiscal year.                   | Increase the<br>effectiveness<br>and efficiency<br>of the operations   |
| 2004071          | October 22, 2004 | Texas Tech<br>University Health<br>Sciences Center<br>Cellular<br>Telephone Abuse<br>at the Department<br>of Pediatrics in<br>Amarillo | To investigate<br>suspected cellular<br>telephone and<br>procurement card abuse | A cellular telephone was used for calls that did<br>not relate to the University. An Administrator<br>gave the University cellular telephone to his<br>spouse for personal use. The Administrator's<br>employment was terminated in May 2004.<br>The Regional Dean should ensure that processes<br>and policies are developed and followed to ensure<br>prompt repayment of personal charges and<br>prohibit abusive personal use. | Implemented  | Reduce the risk<br>of loss of<br>institutional<br>resources<br>From November<br>29, 2002,<br>through March<br>26, 2004,<br>personal charges<br>on the<br>University<br>cellular<br>telephone<br>totaled an<br>estimated \$194. |
| 2005038          | October 22, 2004 | Texas Tech<br>University Health<br>Sciences Center<br>Center for<br>Tobacco<br>Prevention and<br>Control                               | To evaluate inventory controls  | Not Applicable   | Not Applicable   | Not Applicable   |
| 2004084          | October 22, 2004 | Texas Tech<br>University Health<br>Sciences Center<br>Graduate Medical<br>Education<br>Resident Loan<br>Fund                           | To determine if the fund<br>is intact   | Not Applicable   | Not Applicable   | Not Applicable   |

| Report<br>Number | Report<br>Date       | Name of Report   | High–Level Audit<br>Objectives   | Observations/Findings and Recommendations   | Current Status (with brief<br>description if not yet<br>implemented) | Fiscal Impact/<br>Other Impact  |
|------------------|----------------------|--|--|---|--|---|
| 2005037          | October 22, 2004     | Texas Tech<br>University System<br>Fraud Prevention<br>and Elimination<br>Program                    | In accordance with<br>Executive Order RP-36,<br>to evaluate the fraud<br>prevention and<br>elimination program at<br>the Texas Tech<br>University System             | Texas Tech University System has a fairly<br>extensive fraud prevention and elimination<br>program in place.<br>Management planned to implement additional<br>procedures to strengthen the program. Our office<br>will follow up on management's actions in fiscal<br>year 2006.  | Not Applicable   | Not Applicable  |
| 2005037          | October 22, 2004     | Texas Tech<br>University<br>Fraud Prevention<br>and Elimination<br>Program                           | In accordance with<br>Executive Order RP-36,<br>to evaluate the fraud<br>prevention and<br>elimination program at<br>Texas Tech University                           | Texas Tech University has a fairly extensive fraud<br>prevention and elimination program in place.<br>Management planned to implement additional<br>procedures to strengthen the program. Our office<br>will follow up on management's actions in fiscal<br>year 2006.  | Not Applicable   | Not Applicable  |
| 2005037          | October 22, 2004     | Texas Tech<br>University Health<br>Sciences Center<br>Fraud Prevention<br>and Elimination<br>Program | In accordance with<br>Executive Order RP-36,<br>to evaluate the fraud<br>prevention and<br>elimination program at<br>Texas Tech University<br>Health Sciences Center | Texas Tech University Health Sciences Center<br>has a fairly extensive fraud prevention and<br>elimination program in place.<br>Management planned to implement additional<br>procedures to strengthen the program. Our office<br>will follow up on management's actions in fiscal<br>year 2006.  | Not Applicable   | Not Applicable  |
| 2004052          | December<br>17, 2004 | Texas Tech<br>University<br>Investigative<br>Report of<br>Athletics Sports<br>Nutrition<br>Program   | To assist the Texas<br>Tech Police and the<br>Internal Revenue<br>Service in a joint<br>investigation  | The former Director of the Sports Nutrition<br>Program controlled the entire procurement and<br>inventory process for nutritional supplements.<br>The lack of segregation of duties in the<br>purchasing process contributed to purchasing<br>improprieties. Unbeknownst to the University,<br>the Director owned the company supplying the<br>University's nutritional supplements.<br>Management terminated the Director's<br>employment at the University, and he was<br>prosecuted.<br>Department of Athletics management took<br>immediate corrective action to properly segregate<br>the responsibilities associated with the | Not Applicable   | From March<br>2002 to<br>February 2004,<br>the Department<br>of Athletics<br>purchased<br>\$434,687 of<br>nutritional<br>supplements<br>from a company<br>called<br>Performance<br>Edge, Inc. |

| Report<br>Number | Report<br>Date       | Name of Report  | High–Level Audit<br>Objectives  | Observations/Findings and Recommendations   | Current Status (with brief<br>description if not yet<br>implemented)                                | Fiscal Impact/<br>Other Impact   |
|------------------|----------------------|---|---|---|---|--|
|                  |                      |   |   | procurement, storage, and dispensation of nutritional supplements.  |   |  |
| 2004052          | December<br>17, 2004 | Texas Tech<br>University<br>Department of<br>Athletics Sports<br>Nutrition<br>Program | <i>iech</i> To evaluate inventory<br>and purchasing controlsAccess to the supplements was not controlled.Implemented <i>ity</i> and purchasing controlsSupplement use by the student-athletes was not<br>being consistently monitored by the Program<br>staff. Additionally, supplements were sold to<br>athletes from non-participating sports and to the<br>general public for cash. According to AthleticImplemented | Implemented   | Reduce the risk<br>of<br>noncompliance<br>with NCAA<br>bylaws and to<br>reduce the risk<br>of fraud |  |
|                  |                      |   |   | distribution of the nutritional supplements.<br>The Director was the owner of a nutrition website<br>called "Sportsnutrition4u.com". This website is<br>not owned or affiliated with the University. The<br>Director and his assistants conducted personal<br>business related to the website on University time.<br>Department of Athletics management should<br>ensure that any request for student assistants or<br>temporary workers be supported by<br>documentation of the work to be performed.<br>Additionally, all new employees, including<br>student assistants and temporary workers should<br>be provided with copies of the Regents' Rule and<br>Texas Tech University operating policy on ethics | Implemented   | Reduce the risk<br>of fraud and<br>strengthen the<br>control<br>environment                    |
|                  |                      |   |   | and conflicts of interest.<br>In a five month time period (from October 2003<br>through February 2004), the Director's University<br>cell phone bills totaled more than \$1,250. In the<br>same time period, the Director used more than<br>19,000 minutes on his University issued cell<br>phone. Although we did not research each cell<br>phone call, we concluded that there were multiple<br>personal calls made by the Director. The Director<br>made no reimbursements to the University for   | Implemented   | Reduce the risk<br>of loss of<br>institutional<br>resources and<br>reduce the risk<br>of fraud |

| Report<br>Number | Report<br>Date       | Name of Report  | High–Level Audit<br>Objectives   | Observations/Findings and Recommendations  | Current Status (with brief<br>description if not yet<br>implemented) | Fiscal Impact/<br>Other Impact                                      |
|------------------|----------------------|---|--|--|--|---|
|                  |                      |   |  | personal cell phone calls.<br>Department of Athletics management should<br>promulgate a process to review all cellular phone<br>bills in the department.   |  |   |
| 2004049          | December<br>17, 2004 | Texas Tech<br>University<br>Student Financial<br>Aid Controls           | To evaluate controls<br>related to processing<br>federal student financial<br>aid applications               | A former employee deleted system verification<br>codes so that it appeared as if students had never<br>been selected for verification of financial<br>information. Doing so allowed the related<br>financial aid to be fraudulently awarded without<br>further verification of FAFSA information.<br>Management implemented a programming change<br>within the Texas Tech Student Information<br>System that would prevent modification of this<br>code. | Implemented prior to the<br>report being issued                      | Reduce the risk<br>of fraud   |
|                  |                      |   |  | Users in the Student Financial Aid office<br>routinely shared user names and passwords with<br>student assistants or other employees in order to<br>expedite certain tasks.<br>Student Financial aid should discontinue the<br>practice of sharing passwords and all employees'<br>passwords should be reset.  | Implemented prior to the report being issued                         | Reduce the risk<br>of unauthorized<br>access to<br>systems          |
| 2005042          | December<br>17, 2004 | Texas Tech<br>University<br>NCAA Football<br>Attendance<br>Requirements | To review attendance at<br>Texas Tech<br>University's five home<br>football games                            | Texas Tech University's average attendance far<br>exceeded 15,000 per home football game in 2004.  | Not Applicable   | Not Applicable  |
| 2004070          | December<br>17, 2004 | Texas Tech<br>University<br>Travel Services                             | To determine<br>departmental<br>compliance with<br>applicable operating<br>policies and state<br>regulations | Texas Tech University operating policies<br>regarding travel reimbursements are complicated<br>and difficult to understand.<br>Travel Services should clarify existing operating<br>policies and develop new operating polices to<br>address travel expenses that are frequently<br>reimbursed.  | Implemented  | Reduce the risk<br>of<br>noncompliance<br>with University<br>policy |

| Report<br>Number | Report<br>Date      | Name of Report   | High–Level Audit<br>Objectives   | Observations/Findings and Recommendations  | Current Status (with brief<br>description if not yet<br>implemented)   | Fiscal Impact/<br>Other Impact   |
|------------------|---------------------|--|--|--|--|--|
|                  |                     |  |  | Departments submit vouchers that are not in<br>compliance with travel operating policies.<br>Travel Services should continue offering its<br>quarterly training class.   | Implemented  | Reduce the risk<br>of<br>noncompliance<br>with University<br>policy and state<br>regulations |
|                  |                     |  |  | Travel Services does not have formal written<br>procedures regarding its internal processes and<br>activities. However, Travel Services is cross-<br>training its employees on the various<br>departmental activities.<br>Travel Services should develop formal written<br>procedures for the processes and activities of the  | In Progress<br>Travel Services has increased<br>the cross-training of<br>employees and is in the<br>process of documenting<br>departmental policies. | Increase the<br>effectiveness<br>and efficiency<br>of the travel<br>department               |
| 2004086          | December<br>7, 2004 | Texas Tech<br>University<br>College of<br>Agricultural<br>Sciences and<br>Natural<br>Resources | To evaluate state line<br>item and federal funded<br>account expenditures, to<br>evaluate business<br>processes at the<br>Equestrian Center, to<br>review inventory<br>procedures for feed and<br>animals at the New | department.Animal and Food Sciences does not process costtransfers correctly. Rather than processing thesetransactions as cost transfers, they have beenprocessed using intra-institutional vouchers.For these transactions, Animal and Food Sciencesshould submit cost transfer documentation toFinancial Accounting & Reporting or SponsoredPrograms Accounting & Reporting. | Implemented  | Reduce the risk<br>of inaccurate<br>reporting  |
|                  |                     |  | Deal farm  | Certain expenditures were processed with<br>insufficient documentation detailing how the<br>expenses benefited agricultural research.<br>The Dean and Associate Dean should inform the<br>account managers of the purpose of the line item<br>funding and should require documentation<br>detailing how expenditures support or enhance<br>agricultural research.              | Implemented  | Reduce the risk<br>of<br>noncompliance<br>with state<br>regulations                          |
|                  |                     |  |  | During our review of the Equestrian Center<br>(Center), we noticed several opportunities to<br>enhance business practices.<br>Equestrian Center management should begin the<br>process of developing written policies and  | Implemented  | Increase the<br>effectiveness<br>and efficiency<br>of the<br>Equestrian<br>Center            |

| Report<br>Number | Report<br>Date       | Name of Report   | High–Level Audit<br>Objectives   | Observations/Findings and Recommendations  | Current Status (with brief<br>description if not yet<br>implemented) | Fiscal Impact/<br>Other Impact           |
|------------------|----------------------|--|--|--|--|--|
|                  |                      |  |  | procedures to improve the business practices at the Center.  |  |  |
| 2005036          | December<br>17, 2004 | <i>Texas Tech</i><br><i>University</i><br>Hospitality<br>Services Cash<br>Controls and<br>Procedures | To evaluate the cash controls  | A former supervisor failed to report cash<br>shortages totaling \$1,250 to his immediate<br>supervisor.<br>Hospitality Services management should increase<br>its monitoring activities and encourage the Sam's<br>Place manager to perform unannounced cash<br>counts and reviews of the deposit procedures.  | Implemented  | Reduce the risk<br>of fraud              |
| 2004046          | December<br>17, 2004 | Texas Tech<br>University<br>Department of<br>Athletics Fiscal<br>Integrity                           | To follow up on a<br>previous NCAA self-<br>study report and to<br>review practices related<br>to fiscal integrity<br>operating principles | Management has not issued a Request for<br>Proposal once every three years to select an<br>auditing firm as recommended in the self-study.<br>Management should establish a formal policy<br>requiring a Request for Proposal for auditing<br>services to be issued at least once every three<br>years.  | Implemented  | Strengthen the<br>control<br>environment |
| 2005039          | December<br>17, 2004 | Texas Tech<br>University<br>Joint Admission<br>Medical Program<br>Grant                              | To verify compliance<br>with the Joint<br>Admission Medical<br>Program Council<br>requirements   | The grant is being conducted in accordance with<br>the Joint Admission Medical Program Council<br>requirements.  | Not Applicable   | Not Applicable                           |
| 2005047          | December<br>17, 2004 | Texas Tech<br>University<br>Department of<br>Chemistry and<br>Biochemistry<br>Cash Controls          | To evaluate cash<br>controls   | Chemistry collects and deposits monies for coffee<br>and breakfast items. Additionally, a Texas Tech<br>University procurement card is being used for<br>these non-official business purchases.<br>Chemistry should discontinue the practice of<br>collecting and depositing monies and purchasing<br>coffee and breakfast items with a procurement<br>card. | Implemented  | Discontinue<br>commingling of<br>funds   |

| Report<br>Number | Report<br>Date       | Name of Report   | High–Level Audit<br>Objectives   | Observations/Findings and Recommendations  | Current Status (with brief<br>description if not yet<br>implemented) | Fiscal Impact/<br>Other Impact   |
|------------------|----------------------|--|--|--|--|--|
| 2005029          | December<br>17, 2004 | Texas Tech<br>University Health<br>Sciences Center<br>Family Practice<br>Center at El Paso   | To review the<br>Statement of Revenues<br>and Expenditures   | The Statement of Revenues and Expenditures is free of material misstatements.  | Not Applicable   | Not Applicable   |
| 2005050          | December<br>17, 2004 | Texas Tech<br>University Health<br>Sciences Center<br>Department of<br>Obstetrics and<br>Gynecology at El<br>Paso Cash<br>Shortage   | To evaluate cash<br>controls   | Management should strengthen cash controls by<br>periodically changing the cash bag assigned to<br>each employee, conducting surprise cash counts,<br>changing the locks and combinations on a regular<br>schedule, and discontinuing the practice of using<br>the change fund to adjust overages and shortages. | Implemented  | Reduce the risk<br>of loss of<br>institutional<br>resources and<br>reduce the risk<br>of fraud |
| 2005054          | December<br>17, 2004 | Texas Tech<br>University Health<br>Sciences Center<br>Joint Admission<br>Medical Program<br>Grant                                    | To verify compliance<br>with the Joint<br>Admission Medical<br>Program Council<br>requirements   | The grant is being conducted in accordance with<br>the Joint Admission Medical Program Council<br>requirements.  | Not Applicable   | Not Applicable   |
| 2005043          | February<br>25, 2005 | Texas Tech<br>University<br>A Review of<br>Texas Tech<br>University for the<br>Southern<br>Association of<br>Colleges and<br>Schools | To assist the State<br>Auditor's Office with<br>the review of the<br>Statement of Net<br>Assets, Statement of<br>Revenues, Expenses,<br>and Changes in Net<br>Assets, and the<br>Statement of Cash<br>Flows for the fiscal year<br>ended August 31, 2004 | No control weaknesses or errors in the financial<br>statements requiring modification were found.  | Not Applicable   | Not Applicable   |
| 2005051          | February<br>25, 2005 | Follow-Up on the<br>Athletic Ticket<br>Office  | To follow-up on<br>previous audit<br>recommendations   | During our follow-up review of the Ticket Office,<br>we noted several opportunities for improvement<br>related to custody of revenues from minimal sales<br>events, custody of the ticket office change drawer,<br>and verification of identification for checks and<br>credit cards.                            | Implemented  | Reduce the risk<br>of loss of<br>institutional<br>resources                                    |

| Report<br>Number | Report<br>Date       | Name of Report  | High–Level Audit<br>Objectives    | Observations/Findings and Recommendations  | Current Status (with brief<br>description if not yet<br>implemented) | Fiscal Impact/<br>Other Impact   |
|------------------|----------------------|---|-----------------------------------|--|--|--|
|                  |                      |   |                                   | Management implemented new procedures during our audit to strengthen these areas.  |  |  |
| 2005032          | February 25, 2005    | Texas Tech<br>University<br>College of Mass<br>Communications   | To evaluate business<br>practices | The College did not deposit cash receipts from the<br>Grammar, Spelling and Punctuation tests.<br>Instead, these funds were used as petty cash for<br>College expenses.<br>All funds should be deposited, and College<br>expenses should be processed using appropriate<br>purchasing methods. | Implemented  | Reduce the risk<br>of fraud  |
|                  |                      |   |                                   | The Senior Administrative Assistant for the<br>College did not follow several procurement card<br>rules for purchases on her procurement card.<br>Management should reeducate the Senior<br>Administrative Assistant on the University   | Implemented  | Reduce the risk<br>of fraud and<br>reduce the risk<br>of<br>noncompliance<br>with University |
| 2005031          | February<br>25, 2005 | Texas Tech<br>University<br>College of Visual<br>and Performing | To evaluate business<br>practices | guidelines.The School of Music did not have adequate cash<br>controls in place.Management should strengthen cash controls.   | Implemented  | policy<br>Reduce the risk<br>of loss of<br>institutional<br>resources                        |
|                  |                      | Arts  |                                   | Four individuals did not follow several<br>procurement card rules for purchases on their<br>cards.<br>Management should educate purchase card users<br>regarding University guidelines.  | Implemented  | Reduce the risk<br>of<br>noncompliance<br>with University<br>policy                          |
|                  |                      |   |                                   | The School of Music was not following proper<br>bidding requirements and not receiving<br>confirmation of services received.   | Implemented  | Reduce the risk<br>of fraud  |
|                  |                      |   |                                   | University purchasing rules should be followed.<br>Account managers at the School of Music and the<br>School of Art were not completing monthly<br>account ledger reconciliations in a timely manner.  | Implemented  | Reduce the risk<br>of fraud  |
|                  |                      |   |                                   | All accounts should be reconciled monthly by   |  |  |

| Report<br>Number | Report<br>Date       | Name of Report   | High–Level Audit<br>Objectives  | Observations/Findings and Recommendations  | Current Status (with brief<br>description if not yet<br>implemented) | Fiscal Impact/<br>Other Impact  |
|------------------|----------------------|--|---|--|--|---|
|                  |                      |  |   | account managers.  |  |   |
|                  |                      |  |   | The School of Music did not report a stolen asset<br>to the University Police and the Property<br>Inventory Department.<br>All thefts of University property should be   | Implemented  | Strengthen the<br>control<br>environment  |
| 2005025          | February 25, 2005    | Texas TechUniversityAdvancedResearchProgram andAdvancedTechnologyGrants            | To verify compliance<br>with the Texas Higher<br>Education Coordinating<br>Board requirements | properly reported.<br>Although controls are in place to ensure overall<br>compliance with Coordinating Board grant<br>conditions, we found one exception related to an<br>equipment purchase without prior approval from<br>the Coordinating Board. A system should be<br>established to verify that prior approval has been<br>received from the Coordinating Board before<br>equipment is purchased. | Implemented  | Reduce the risk<br>of<br>noncompliance<br>with state<br>regulations and<br>the risk of<br>losing state<br>grant funding |
| 2005055          | February<br>25, 2005 | Texas Tech<br>University<br>Approved Driver<br>Compliance                          | To determine the intent<br>of a Texas Tech<br>University policy                               | Not Applicable   | Not Applicable   | Not Applicable  |
| 2005017          | February<br>25, 2005 | Texas Tech         University         KOHM-FM         Financial         Statements | To assist external<br>auditors in conducting<br>their annual financial<br>audit               | Not Applicable   | Not Applicable   | Not Applicable  |
|                  | February<br>25, 2005 | Texas Tech<br>University<br>KTXT-TV<br>Financial<br>Statements                     | External auditors<br>conducted their annual<br>financial audit                                | Not Applicable   | Not Applicable   | Not Applicable  |

| Report<br>Number | Report<br>Date       | Name of Report   | High–Level Audit<br>Objectives   | Observations/Findings and Recommendations  | Current Status (with brief<br>description if not yet<br>implemented) | Fiscal Impact/<br>Other Impact   |
|------------------|----------------------|--|--|--|--|--|
| 2005033          | February<br>25, 2005 | Texas Tech<br>University Health<br>Sciences Center<br>Facilities,<br>Operations, and<br>Maintenance at<br>Amarillo | To determine the level<br>of compliance with<br>University operating<br>polices, state<br>regulations, and federal<br>laws | Physical Plant management is not following<br>University operating policy bid requirements.<br>The Director should implement a planning<br>process to anticipate annual purchases and set an<br>expectation that bid requirements will be<br>followed.   | Implemented  | Reduce the risk<br>of loss of<br>institutional<br>resources and<br>increase<br>effectiveness |
|                  |                      |  |  | Physical plant hired an employee's son to work as<br>an independent contractor. The employee<br>supervised his son's work and approved his<br>timesheets.  | Implemented  | Reduce the risk<br>of fraud  |
|                  |                      |  |  | Physical Plant management should avoid hiring family members.  |  |  |
|                  |                      |  |  | The invoices for seven different independent<br>contractors were generated using the same<br>computer software. Physical Plant created<br>invoices for at least on of the independent<br>contractors and allowed another independent<br>contractor to use a University computer to create<br>his own invoices. | Implemented  | Reduce the risk<br>of fraud  |
|                  |                      |  |  | Physical Plant management should refrain from allowing departmental resources to be used to generate vendor invoices.  |  |  |
|                  |                      |  |  | The tool room does not have an effective inventory system.   | Implemented  | Reduce the risk<br>of loss of<br>equipment   |
|                  |                      |  |  | Management should develop an effective inventory system.   |  |  |
|                  |                      |  |  | The Physical Plant does not exercise adequate cash controls.   | Implemented  | Reduce the risk<br>of loss of<br>institutional   |
| L                |                      |  |  | Management should strengthen cash controls.  |  | resources  |

| Report<br>Number | Report<br>Date       | Name of Report  | High–Level Audit<br>Objectives   | Observations/Findings and Recommendations  | Current Status (with brief<br>description if not yet<br>implemented)   | Fiscal Impact/<br>Other Impact                |
|------------------|----------------------|---|--|--|--|---|
|                  |                      |   |  | The University operating policy on determination<br>of independent contractor status does not give a<br>definitive basis for determining whether a person<br>is an employee or an independent contractor.<br>The policy should be revised to clarify the process<br>for determining the status of employees versus<br>independent contractors. | Planned<br>Management plans to revise<br>the operating policy.   | Strengthen the<br>control<br>environment      |
| 2005025          | February<br>25, 2005 | Texas Tech<br>University Health<br>Sciences Center<br>Advanced<br>Research<br>Program and<br>Advanced<br>Technology<br>Program Grants | To verify compliance<br>with the Texas Higher<br>Education Coordinating<br>Board requirements          | Not Applicable   | Not Applicable   | Not Applicable                                |
| 2005023          | February<br>25, 2005 | Texas Tech<br>University Health<br>Sciences Center<br>Texas Higher<br>Education<br>Coordinating<br>Board Residency<br>Grants          | To verify compliance<br>with the Texas Higher<br>Education Coordinating<br>Board grant<br>requirements | Not Applicable   | Not Applicable   | Not Applicable                                |
| 2005018          | May 13,<br>2005      | Texas Tech<br>University System<br>Texas Tech<br>Foundation, Inc.   | To assist external<br>auditors in conducting<br>their annual financial<br>audit                        | The auditors recommended that the Foundation<br>formulate written policies operations of the<br>Foundation. They recommended the Foundation<br>adopt a travel and credit card expense policy and<br>a fraud policy.  | In Progress<br>Policies have been drafted and<br>will be adopted at the<br>November Foundation Board<br>meeting. | Strengthen the<br>control<br>environment      |
|                  |                      |   |  | The auditors encouraged the Foundation to continue to improve its interim financial reporting.   | In Progress<br>A committee has been formed<br>to address the format, review<br>and distribution of reports.      | Reduce the risk<br>of inaccurate<br>reporting |

| Report<br>Number | Report<br>Date          | Name of Report   | High–Level Audit<br>Objectives   | Observations/Findings and Recommendations   | Current Status (with brief<br>description if not yet<br>implemented)   | Fiscal Impact/<br>Other Impact                                      |
|------------------|-------------------------|--|--|---|--|---|
| 2004053          | 2004053 May 13,<br>2005 | 5 University System<br>Controls over the<br>Use and<br>Administration of | University Systemconducting its auditControls over the<br>Use and  | TTUHSC and TTU should consider modifying<br>their policies and procedures to address<br>exceptions to the prohibition on purchasing<br>restricted items.  | Implemented  | Increase the<br>effectiveness of<br>the process                     |
|                  |                         | Cards at Selected<br>Institutions of<br>Higher Education                 |  | The institutions should ensure that cardholders are<br>aware of and comply with their per-transaction<br>spending limits and monthly limits.  | Implemented  | Increase the<br>effectiveness of<br>the process                     |
|                  |                         |  | TTU should strengthen its controls to ensure that<br>cards are not used by employees other than the<br>cardholders, except in instances where clearly<br>defined and published exceptions to this rule<br>apply. | Implemented   | Reduce the risk<br>of loss of<br>institutional<br>resources and<br>reduce the risk<br>of<br>noncompliance<br>with University<br>policy |   |
|                  |                         |  |  | TTUHSC should establish controls to minimize<br>the risks associated with allowing cardholders to<br>share cards. It should also ensure that<br>departments and cardholders are aware of the<br>controls and include procedures in its monitoring<br>to detect noncompliance. | Implemented  | Reduce the risk<br>of loss of<br>institutional<br>resources         |
|                  |                         |  |  | TTU should establish a policy concerning unused cards and implement procedures to periodically review card activity.  | Implemented  | Reduce the risk<br>of loss of<br>institutional<br>resources         |
|                  |                         |  |  | TTU and TTUHSC should develop processes to<br>help ensure that cardholders verify vendor<br>warrant hold status prior to initiating purchases or<br>payments.   | Implemented  | Reduce the risk<br>of<br>noncompliance<br>with state<br>regulations |
|                  |                         |  |  | TTU should formally document the procedures for conducting independent monitoring.  | In Progress<br>Management is currently<br>documenting policies.  | Increase the<br>effectiveness of<br>the process                     |

| Report<br>Number | Report<br>Date  | Name of Report   | High–Level Audit<br>Objectives   | Observations/Findings and Recommendations  | Current Status (with brief<br>description if not yet<br>implemented) | Fiscal Impact/<br>Other Impact   |
|------------------|-----------------|--|--|--|--|--|
| 2005058          | May 13,<br>2005 | Texas Tech<br>University<br>The Institute of<br>Environmental<br>and Human<br>Health | To evaluate controls<br>related to information<br>technology security,<br>building security,<br>personnel procedures,<br>fixed assets, and<br>purchasing | The Institute does not have written policies<br>covering all aspects of information technology<br>security.<br>Management should either develop written<br>policies and procedures for information<br>technology security or follow Texas Tech<br>University policies.   | Implemented  | Reduce risk of<br>unauthorized<br>access to<br>systems   |
|                  |                 |  |  | Building evacuation and building security<br>procedures have not been updated since 1998 and<br>2003, respectively.<br>Management should evaluate the building<br>evacuation and security risks that exist and then<br>use the results of the risk assessment process to<br>develop and/or update he procedures. | Implemented  | Reduce safety<br>risks   |
|                  |                 |  |  | Time keeping records in the administrative office<br>are not consistent with what is recorded in the<br>University's time capture system.<br>Management should review the records and<br>complete the paperwork required to correct any<br>inaccuracies.   | Implemented  | Reduce risk of<br>inaccurate<br>reporting  |
| 2005057          | May 13,<br>2005 | Texas Tech<br>University<br>Cash Controls<br>Follow-up                               | To evaluate cash<br>controls in selected<br>departments  | University Copy Services should strengthen cash<br>controls by emptying copy machines on a regular<br>basis, balancing cash registers daily, and<br>submitting deposits within two days.   | Implemented  | Reduce the risk<br>of loss of<br>institutional<br>resources and<br>reduce the risk<br>of fraud |

| Report<br>Number | Report<br>Date | Name of Report   | High–Level Audit<br>Objectives  | Observations/Findings and Recommendations  | Current Status (with brief<br>description if not yet<br>implemented)  | Fiscal Impact/<br>Other Impact   |
|------------------|----------------|--|---|--|---|--|
|                  |                |  |   | The Student Union Building should strengthen<br>cash controls by disallowing employees to cash<br>personal checks using the University change fund,<br>endorsing checks received through the mail upon<br>receipt, and segregating duties related to accounts<br>receivable.   | Implemented   | Reduce the risk<br>of loss of<br>institutional<br>resources and<br>reduce the risk<br>of fraud |
| 2005059          | May 13, 2005   | Texas Tech<br>University<br>Student Judicial<br>Programs | To determine if Student<br>Judicial Programs is<br>meeting its mission<br>To determine if the<br>process outlined by the<br>department is being<br>followed and is<br>successful<br>To evaluate the | Alleged violations of the Code of Student<br>Conduct are not always adjudicated in a timely<br>manner.<br>Student Judicial Programs should implement a<br>process to ensure that the adjudication process is<br>completed in a timely manner.  | In Progress<br>Factors Delay Implementation<br>Management implemented a<br>process in spring 2005 and it<br>was working very effectively.<br>However, the employee that<br>was involved in the process<br>left and a replacement was<br>recently hired. Management<br>hopes to begin this process<br>again in November. | Increase the<br>effectiveness of<br>the process  |
|                  |                |  | recordkeeping and<br>reporting process  | Student Judicial Program case files do not always<br>contain all supporting documentation relating to<br>the case, and they sometimes contain inconsistent<br>documentation regarding allegations, decisions,<br>and deadlines.<br>Hearing officers should review the case files<br>throughout the adjudication process to ensure that<br>all related documents are included in each file and<br>are accurate. | Implemented   | Increase the<br>effectiveness of<br>the process  |
|                  |                |  |   | Student Judicial Programs does not ensure that<br>students comply with assigned disciplinary<br>conditions.<br>Student Judicial Programs should implement a<br>process to monitor student compliance with<br>assigned disciplinary conditions.   | Implemented   | Increase the<br>effectiveness of<br>the process  |

| Report<br>Number | Report<br>Date  | Name of Report                                 | High–Level Audit<br>Objectives   | Observations/Findings and Recommendations  | Current Status (with brief<br>description if not yet<br>implemented) | Fiscal Impact/<br>Other Impact                                |
|------------------|-----------------|--|--|--|--|---|
| 2005045          | May 13,<br>2005 | Texas Tech<br>University<br>NCAA<br>Compliance | To determine whether<br>policies and procedures<br>related to camps and<br>camp income ensure<br>compliance with NCAA<br>Bylaws and University<br>operating policy | Camp records for selected 2004 summer camps<br>indicate that nine campers did not pay the full<br>amount of their camp fees.<br>New payment guidelines should be incorporated<br>by all coaches for their individual camps to ensure<br>timely payment of camp fees.   | Implemented  | Reduce the risk<br>of<br>noncompliance<br>with NCAA<br>Bylaws |
|                  |                 |  |  | We learned that the Compliance Office<br>occasionally experiences difficulty in obtaining<br>camp information from coaches.<br>The Director of Athletics should remind head<br>coaches of their obligation to provide camp<br>information to the Compliance Office upon<br>request.  | Implemented  | Reduce the risk<br>of<br>noncompliance<br>with NCAA<br>Bylaws |
|                  |                 |  |  | NCAA Bylaws require that outside income from<br>all sources, including sports camps, be reported<br>on an annual basis to the institution's chief<br>executive officer. Although the Compliance<br>Office has a procedure in place to solicit financial<br>information from all Athletics staff, two head<br>coaches did not report any outside income from<br>their camps. We believe the reason for the<br>omissions was confusion.  | Implemented  | Reduce the risk<br>of<br>noncompliance<br>with NCAA<br>Bylaws |
|                  |                 |  |  | The Director of Athletics and the Compliance<br>Office should educate Athletics personnel that the<br>NCAA requirement to report all outside income<br>applies to all sources of income, even when that<br>income is excluded by contract from guaranteed<br>outside income calculations. The compliance<br>staff should review the information received from<br>coaches for inclusion of all known income<br>sources and report to the Director of Athletics any<br>possible income sources that may not have been<br>reported. |  |   |
|                  |                 |  |  | We chose a sample of coaches, including head<br>coaches, from several sports and found that 70%<br>of the coaches tested did not report vacation leave   | Implemented  | Reduce the risk<br>of<br>noncompliance                        |

| Report<br>Number | Report<br>Date  | Name of Report   | High–Level Audit<br>Objectives   | Observations/Findings and Recommendations   | Current Status (with brief<br>description if not yet<br>implemented)   | Fiscal Impact/<br>Other Impact   |
|------------------|-----------------|--|--|---|--|--|
|                  |                 |  |  | during the time spent conducting camps.<br>The Texas Tech University Department of<br>Athletics must enforce annual leave rules and<br>regulations contained in University operating<br>policy and the individual coaches' contracts.   |  | with University<br>policy and state<br>regulations   |
| 2005071          | May 13,<br>2005 | Texas Tech<br>University<br>Health, Exercise,<br>and Sport<br>Sciences –<br>Purchase and<br>Rental of Scuba<br>Equipment | To evaluate the<br>purchasing and rental<br>procedures for scuba<br>equipment  | The relationship between Texas Tech and a part-<br>time scuba instructor creates a potential conflict<br>of interest in the purchasing and rental of scuba<br>equipment.<br>To increase monitoring, management has<br>implemented an additional layer of authorization<br>for scuba equipment purchases. In addition,<br>Purchasing will request bids from multiple<br>vendors on all purchases orders, regardless of the<br>purchase amount.   | Implemented  | Reduce the risk<br>of fraud  |
| 2005060          | May 13,<br>2005 | Texas Tech<br>University Health<br>Sciences Center<br>KPMG<br>Reportable<br>Condition<br>Follow-up                       | To evaluate actions<br>taken by the School of<br>Medicine to address<br>KPMG's concerns<br>related to segregation of<br>duties | The majority of users with full access to all three<br>patient receivable functions in IDX are not<br>routinely involved in cash handling. However,<br>some of the users have access to cash or are cross-<br>trained in cash handling duties. In these cases,<br>monitoring by departmental management is<br>critical.<br>We identified users as having unnecessary or<br>inappropriate access. We recommend that School<br>of Medicine management perform an internal<br>review of user access on at least an annual basis. | Implemented  | Reduce the risk<br>of loss of<br>institutional<br>resources and<br>reduce the risk<br>of fraud |
| 2005053          | May 13,<br>2005 | Texas Tech<br>University Health<br>Sciences Center<br>Office of Billing<br>Compliance<br>Follow-up                       | To evaluate the<br>progress made in<br>implementing the new<br>organizational structure<br>and new procedures                  | The Amarillo and El Paso campuses have formed<br>Billing Compliance Advisory Committees. The<br>Lubbock and Odessa campuses plan to implement<br>Billing Compliance Advisory Committees soon.<br>We encourage implementation of Billing<br>Compliance Advisory Committees on all<br>campuses.<br>The Office of Billing Compliance has established   | Factors Delay Implementation<br>Executive management is<br>currently working on<br>restructuring the compliance<br>functions, which has caused a<br>delay in implementation. | Reduce the risk<br>of<br>noncompliance<br>with federal<br>regulations<br>Reduce the risk       |
|                  |                 |  |  | a full-time and independent staff at all campuses   | Executive management is  | of   |

| Report<br>Number | Report<br>Date | Name of Report | High–Level Audit<br>Objectives | Observations/Findings and Recommendations   | Current Status (with brief<br>description if not yet<br>implemented)   | Fiscal Impact/<br>Other Impact  |
|------------------|----------------|----------------|--------------------------------|---|--|---|
|                  |                |                |                                | and has begun to standardize the chart auditing<br>and reporting processes across each campus.<br>Management should finalize the policies related<br>to the auditing and monitoring process.  | currently working on<br>restructuring the compliance<br>functions, which has caused a<br>delay in implementation.  | noncompliance<br>with federal<br>regulations                          |
|                  |                |                |                                | A database is currently being developed for the<br>Office of Billing Compliance to track and report<br>compliance training as well as chart audit results.<br>Management should complete the database and<br>implement its use at all campuses.   | Factors Delay Implementation<br>Executive management is<br>currently working on<br>restructuring the compliance<br>functions, which has caused a<br>delay in implementation. | Reduce the risk<br>of<br>noncompliance<br>with federal<br>regulations |
|                  |                |                |                                | A draft disciplinary policy has been developed to<br>address unsatisfactory audit results.<br>Management should finalize the disciplinary<br>policy.  |  | Reduce the risk<br>of<br>noncompliance<br>with federal<br>regulations |
|                  |                |                |                                | The Office of Billing Compliance recently<br>conducted exclusion screening of all University<br>employees against a federal database. However,<br>based on interviews conducted with various<br>University employees, exclusion screening is not<br>being consistently performed for all required<br>employees on each campus.  | Factors Delay Implementation<br>Executive management is<br>currently working on<br>restructuring the compliance<br>functions, which has caused a<br>delay in implementation. | Reduce the risk<br>of<br>noncompliance<br>with federal<br>regulations |
|                  |                |                |                                | Management should consider centralizing or<br>outsourcing the exclusion screening process.<br>Currently, the billing compliance and HIPAA<br>compliance functions report directly to the Chief<br>Medical Officer. The Chief Medical Officer<br>reports to the Vice President for Clinical Affairs.<br>The Vice President for Clinical Affairs has dual<br>responsibilities because he also serves as the Dean<br>of the School of Medicine. The perception of<br>independence of the Office of Billing Compliance<br>may be impaired by the multiple layers of the<br>current reporting structure. | In Progress<br>Executive management is<br>currently working on<br>restructuring the compliance<br>functions.   | Reduce the risk<br>of<br>noncompliance<br>with federal<br>regulations |
|                  |                |                |                                | Additionally, the Executive Vice President for<br>Academic Affairs is responsible for "Institutional  |  |   |

| Report<br>Number | Report<br>Date  | Name of Report  | High–Level Audit<br>Objectives   | Observations/Findings and Recommendations   | Current Status (with brief<br>description if not yet<br>implemented)   | Fiscal Impact/<br>Other Impact   |
|------------------|-----------------|---|--|---|--|--|
|                  |                 |   |  | Compliance," but does not oversee the billing<br>compliance and HIPAA compliance functions.<br>Compliance is a complex institutional issue<br>affecting all schools, departments, and programs<br>within the University. As such, compliance<br>should be promoted and monitored consistently<br>throughout the University. Having all compliance<br>functions report to a single high-level member of<br>management would provide a stronger and more<br>cohesive compliance program for the University. |  |  |
| 2005065          | May 13,<br>2005 | Texas Tech<br>University Health<br>Sciences Center<br>Lubbock Medical<br>Practice Income<br>Plan Business<br>Office Follow-up | To follow-up on prior<br>audit recommendations<br>related to the controls in<br>the cashier's office | Business Office management has created policies<br>to document the processes in the Business Office.<br>Some of these policies still need to be updated.<br>Business Office management should finish<br>updating its written policies and procedures.   | In Progress<br>Management is completing<br>the updates to policies.  | Increase the<br>effectiveness of<br>the office   |
| 2005064          | May 13,<br>2005 | Texas Tech<br>University Health<br>Sciences Center<br>Department of<br>Obstetric and<br>Gynecology Cash<br>Shortage           | To evaluate cash<br>controls   | The Department's cash control policy was<br>updated to include a procedure to verify cash<br>deposited into the Department's safe at the end of<br>each day. This new procedure will become<br>effective immediately and other basic cash control<br>procedures will be reviewed with the staff at the<br>next staff meeting.   | Implemented  | Reduce the risk<br>of loss of<br>institutional<br>resources and<br>reduce the risk<br>of fraud |
| 2005068          | August 12, 2005 | Texas Tech<br>University System<br>Endowment<br>Administration  | To analyze processes<br>within endowment<br>administration   | The account process provides limited oversight<br>over endowment expenditures.<br>Texas Tech should consider options to increase<br>the level of oversight for endowment<br>expenditures.   | In Progress<br>Advancement Services will<br>distribute an annual summary<br>of endowments to each<br>college/unit.<br>The Office of Cash and<br>Investments will distribute an<br>annual budget projection for<br>endowment spending account<br>revenues to each college/unit.<br>A sample of spending | Reduce the risk<br>of<br>noncompliance<br>with donors'<br>intents                              |

| Report<br>Number | Report<br>Date     | Name of Report  | High–Level Audit<br>Objectives  | Observations/Findings and Recommendations   | Current Status (with brief<br>description if not yet<br>implemented)  | Fiscal Impact/<br>Other Impact  |
|------------------|--------------------|---|---|---|---|---|
|                  |                    |   |   | Endowment account managers are provided with<br>little training or guidance related to their<br>responsibilities as account managers.<br>Texas Tech should develop policies detailing   | accounts will be audited each<br>year to determine if<br>expenditures are being made<br>in accordance with the<br>endowment agreement.<br>In Progress<br>Upper management is<br>working through a consultant<br>to improve the<br>communication and | Reduce the risk<br>of<br>noncompliance<br>with University<br>policies |
|                  |                    |   |   | <ul> <li>endowment account managers' responsibilities<br/>and expectations.</li> <li>The annual reporting process does not include key<br/>departments from the process and does not<br/>provide adequate time for review by development<br/>officers or account managers.</li> <li>Texas Tech has already begun to reengineer the<br/>reporting process to involve key departments.<br/>Additionally, Texas Tech should consider<br/>preparing a timeline that provides for adequate<br/>and timely review.</li> </ul> | understanding of the various<br>roles.<br>In Progress<br>A committee has been formed<br>to address the format, review,<br>and distribution of reports.  | Reduce the risk<br>of inaccurate<br>reporting                         |
|                  |                    |   |   | Limited communication occurs among the<br>multiple departments involved in endowment<br>administration.<br>The Office of the Chief Financial Officer should<br>continue the training sessions scheduled with<br>development officers regarding financial<br>processes. The fiscal officers of Texas Tech<br>should also provide this training, as appropriate,<br>to endowment account managers.  | In Progress<br>Upper management is<br>working through a consultant<br>to improve the<br>communication and<br>understanding of the various<br>roles.   | Increase the<br>effectiveness of<br>administration                    |
| 2005091          | August 12,<br>2005 | Texas Tech<br>University System<br>Selected Texas<br>Tech Foundation,<br>Inc. Endowment<br>Accounts | To determine whether<br>endowment earnings are<br>being spent in<br>accordance with the<br>donor agreements | Expenditures from the selected endowment<br>accounts were spent in accordance with the<br>donors' intended purposes and appear reasonable.  | Not Applicable  | Reduce the risk<br>of<br>noncompliance<br>with donors'<br>intents     |

| Report<br>Number | Report<br>Date     | Name of Report  | High–Level Audit<br>Objectives   | Observations/Findings and Recommendations   | Current Status (with brief<br>description if not yet<br>implemented)   | Fiscal Impact/<br>Other Impact   |
|------------------|--------------------|---|--|---|--|--|
| 2005052          |                    | University System<br>eRaider Account<br>Management  | Evaluate the controls<br>surrounding the eRaider<br>Account Management<br>System | Informing new employees of their eRaider<br>account information is slow and inefficient<br>because of manual hiring processes at the<br>institutions.<br>As hiring processes at the institutions are<br>modified and automated, management of the<br>Information Technology divisions should research<br>options to efficiently and securely communicate<br>eRaider account information directly to<br>employees. | Planned<br>When management<br>implements an automated<br>hiring process, management<br>will look at options to<br>securely communicate<br>eRaider account information. | Increase the<br>efficiency and<br>effectiveness for<br>communicating<br>account<br>information |
|                  |                    |   |  | Controls for ensuring strong eRaider passwords<br>are not adequate.<br>Management of the Information Technology<br>divisions should strengthen eRaider password<br>controls.  | Implemented  | Reduce the risk<br>of unauthorized<br>access to<br>systems                                     |
| 2005021          | August 12,<br>2005 | Texas Tech<br>University System<br>Agreed-Upon<br>Procedures<br>Report Credit<br>Card and Travel<br>Expenses of<br>Board of Regents,<br>Chancellor, and<br>Presidents | To assist external<br>auditors   | Not Applicable  | Not Applicable   | Not Applicable   |
| 2005019          | August 12,<br>2005 | Texas Tech<br>University<br>Intercollegiate<br>Athletics Program<br>Agreed-Upon<br>Procedures<br>Report   | To assist external<br>auditors   | Not Applicable  | Not Applicable   | Not Applicable   |

| Report<br>Number | Report<br>Date     | Name of Report  | High–Level Audit<br>Objectives  | Observations/Findings and Recommendations  | Current Status (with brief<br>description if not yet<br>implemented)  | Fiscal Impact/<br>Other Impact   |
|------------------|--------------------|---|---|--|---|--|
| 2005083          | August 12,<br>2005 | Texas Tech<br>University<br>Follow-up on<br>Jerry S. Rawls<br>Golf Course | To follow up on prior<br>audit recommendations<br>To evaluate golf<br>tournament procedures | The Rawls Course has made marked<br>improvements in controls and procedures since<br>the previous audit.   | Not Applicable  | Reduce the risk<br>of loss of<br>institutional<br>resources and<br>reduce the risk<br>of fraud                 |
|                  |                    |   | To review controls over<br>equipment  | The Rawls Course has not developed written<br>internal policies and procedures regarding<br>hosting, organizing, receipting, and recording<br>tournaments.<br>The Rawls Course should develop written internal   | Implemented   | Increase the<br>efficiency and<br>effectiveness of<br>tournaments  |
|                  |                    |   |   | policies for hosting, organizing, receipting, and recording tournaments.   |   |  |
|                  |                    |   |   | The Rawls Course uses tournament revenue to<br>offset the cost of merchandise donated at the<br>request of Texas Tech departments.   | Implemented   | Reduce the risk<br>of inaccurate<br>reporting  |
|                  |                    |   |   | The Rawls Course should develop a new method<br>of recording donated merchandise that does not<br>understate tournament revenue.   |   |  |
| 2005078          | August 12,<br>2005 | Texas Tech<br>University<br>Personnel<br>Department                       | To evaluate the<br>processes and<br>procedures  | The Personnel Department has delegated a large<br>amount of responsibility to hiring departments.<br>Personnel Department management should<br>implement a verification system to assure these<br>duties are being performed.  | In Progress<br>Management is reviewing<br>current processes and<br>procedures and is assessing<br>the feasibility of<br>implementing new processes. | Reduce the risk<br>of<br>noncompliance<br>with University<br>policies, and<br>state and federal<br>regulations |
|                  |                    |   |   | The Personnel Department does not have an<br>effective process in place to ensure employees<br>campus wide receive timely evaluations.<br>Personnel Department management should seek<br>the support of upper level administration for<br>timely evaluations to become a more valued part<br>of the Texas Tech University culture. | In Progress<br>Management is seeking the<br>support of upper level<br>administration.   | Increase the<br>effectiveness of<br>the evaluation<br>process  |
|                  |                    |   |   | The Personnel Department has delegated the responsibility for the collection of state property   | In Progress<br>Management is reviewing  | Reduce the risk of loss of   |

| Report<br>Number | Report<br>Date     | Name of Report                                 | High–Level Audit<br>Objectives  | Observations/Findings and Recommendations  | Current Status (with brief<br>description if not yet<br>implemented)  | Fiscal Impact/<br>Other Impact   |
|------------------|--------------------|--|---|--|---|--|
|                  |                    |  |   | and revocation of information system access to<br>departments.<br>Personnel Department management should<br>implement a verification system for assuring the<br>termination process provides for the safeguarding<br>of state property.  | current processes and<br>procedures and is assessing<br>the feasibility of<br>implementing new processes.   | institutional<br>resources and<br>reduce the risk<br>of unauthorized<br>access to<br>systems |
|                  |                    |  |   | Current procedures do not adequately address the<br>transition of employees between Texas Tech<br>University and Texas Tech University Health<br>Sciences Center.<br>Texas Tech University Personnel Department<br>management should work closely with Texas<br>Tech University Health Sciences Center Human<br>Resources management to develop procedures<br>and processes to educate departmental<br>administrators and employees regarding<br>transitioning between the institutions. | In Progress<br>Management will convene a<br>series of meetings with<br>TTUHSC Human Resource<br>management to assess the<br>feasibility of implementing<br>new processes. | Increase the<br>efficiency and<br>effectiveness of<br>the process                            |
| 2005070          | August 12,<br>2005 | Texas Tech<br>University<br>Center at Junction | To evaluate controls<br>related to cash,<br>purchasing, fixed assets,<br>and personnel<br>procedures<br>To evaluate Red Raider<br>Camp security | Several opportunities for enhancement exist in the<br>cash handling process.<br>The Center should revise policies and procedures<br>to strengthen cash controls. The policies should<br>ensure separation of duties, timely deposits in<br>accordance with University guidelines, and<br>security of funds.  | Implemented   | Reduce the risk<br>of loss of<br>institutional<br>resources                                  |
|                  |                    |  | procedures  | The Center is located outside the Junction city<br>limits and is not regularly patrolled by the County<br>Sheriff or Junction. Additionally, the Center does<br>not have alarms on buildings.<br>Management should perform a building security<br>risk assessment and develop a plan to address the<br>identified risks.   | Implemented   | Reduce security<br>risks   |

| Report<br>Number | Report<br>Date     | Name of Report  | High–Level Audit<br>Objectives  | Observations/Findings and Recommendations  | Current Status (with brief<br>description if not yet<br>implemented) | Fiscal Impact/<br>Other Impact   |
|------------------|--------------------|---|---|--|--|--|
| 2005090          | August 12,<br>2005 | Texas Tech<br>University<br>Follow-Up on the<br>Physical Plant                                | To follow up on prior<br>audit recommendations  | Prior recommendations were implemented.  | Not Applicable   | Not Applicable   |
| 2005081          | August 12,<br>2005 | Texas Tech<br>University Health<br>Sciences Center<br>Traffic and<br>Parking Cash<br>Controls | To evaluate cash<br>controls  | Not Applicable   | Not Applicable   | Not Applicable   |
| 2005076          | August 12, 2005    | Texas Tech<br>University Health<br>Sciences Center<br>Safety Services                         | To determine if the<br>department is<br>effectively meeting its<br>mission of ensuring that<br>laboratories and<br>individuals comply with<br>institutional policies<br>and federal safety<br>regulations | Notification letters to employees who have not<br>completed the New Employee Safety Orientation<br>Program Level 2 are often not being sent in a<br>timely manner and in some instances are not<br>being sent at all.<br>Safety Services should follow its own established<br>procedures and ensure all notification letters are<br>sent in a timely manner.   | Implemented  | Reduce safety<br>risks   |
|                  |                    |   |   | During routine inspections of radiation<br>laboratories, it has not been a regular practice to<br>document if laboratory workers are not wearing<br>their laboratory coats or their personal dosimeters.<br>During radiation laboratory inspections, the<br>Radiation Safety Manager should report to the<br>Principal Investigator when laboratory workers<br>are not wearing their laboratory coats or their<br>personal dosimeters. | Implemented  | Reduce safety<br>risks and reduce<br>the risk of<br>noncompliance<br>with University<br>policy |

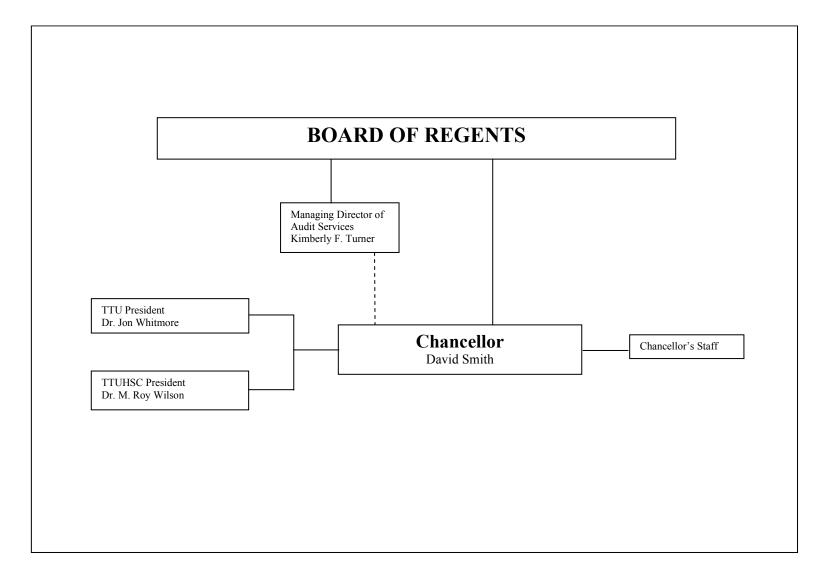
| Report<br>Number | Report<br>Date   | Name of Report                           | High–Level<br>Engagement Objectives  | Observations and Recommendations  | Current Status (with brief description if not yet implemented)   | Fiscal Impact/<br>Other Impact                                  |
|------------------|------------------|--|--|---|--|---|
|                  |                  |  |  |   | <ul> <li>Implemented</li> <li>Planned</li> <li>In progress</li> <li>Factors delay implementation</li> <li>Agency does not plan to<br/>implement recommendation</li> </ul>  |   |
| 2004080          | October 22, 2004 | Texas Tech<br>University                 | To assist the new<br>director in evaluating<br>the activities and  | We noted no control weaknesses.   | Not Applicable   | Not Applicable  |
|                  |                  | Financial<br>Accounting and<br>Reporting | responsibilities of the<br>department<br>To evaluate<br>departmental operations<br>for inefficiencies or<br>redundancies of work | Financial Accounting and Reporting<br>processes, including the preparation of the<br>annual financial reports, are primarily<br>manual. Management has submitted<br>requests to the Information Technology<br>department regarding the development of<br>automated processes and additional<br>interfaces; however, there are no visible<br>results from these project requests.<br>Financial Accounting and Reporting<br>management should follow up with<br>Information Technology regarding the<br>status of these project requests. | In Progress<br>The Financial Systems Director has<br>been working on automating the<br>first AFR financial statement using<br>Web Focus which should be<br>finished soon.  | Increase the<br>efficiency and<br>effectiveness of<br>processes |
|                  |                  |  |  | Accounting transactions, such as cost<br>transfers, inter-departmental transfers, and<br>journal vouchers, are reviewed and<br>approved multiple times throughout the<br>accounting process.<br>To improve efficiencies, one of the reviews<br>and approvals should be eliminated.  | Implemented  | Increase the<br>efficiency of the<br>processes                  |
|                  |                  |  |  | On a monthly basis, Financial Accounting<br>and Reporting distributes copies of<br>scholarship reports and computer CDs with<br>additional financial information to Texas<br>Tech departments. The process to prepare<br>and distribute this information is ineffective<br>and costly.<br>Financial Accounting and Reporting should   | Factors Delay Implementation<br>It was determined that IT could not<br>reproduce the sort feature needed to<br>be useful for the users. The next<br>plan is to see if the Financial<br>Systems Director can reproduce the<br>data format and sort feature on the<br>Financial System website using<br>Web Focus. | Increase the<br>efficiency and<br>effectiveness of<br>processes |

| Report<br>Number | Report<br>Date | Name of Report | High–Level<br>Engagement Objectives | Observations and Recommendations  | Current Status (with brief<br>description if not yet implemented)   | Fiscal Impact/<br>Other Impact   |
|------------------|----------------|----------------|-------------------------------------|---|---|--|
|                  |                |                |                                     | increase the volume of information<br>available through the secure website.   |   |  |
|                  |                |                |                                     | The Financial Accounting and Reporting<br>accountant assigned to endowments is<br>solely responsible for calculating the<br>"parking fee" on Texas Tech University and<br>Texas Tech Foundation, Inc. endowments.<br>The accountant must perform the<br>complicated and time-consuming<br>calculation several times each month.<br>Financial Accounting and Reporting should<br>work with Institutional Advancement to<br>transition responsibility of calculating the<br>"parking fee" to Institutional<br>Advancement's accounting department.<br>Both departments should also work toward<br>improving and streamlining the process of<br>calculating the "parking fee." | Not Implementing<br>Endowments are no longer subject<br>to a "parking fee" and there is no<br>longer a need for a calculation.  | Increase the<br>efficiency and<br>effectiveness of<br>processes                                    |
|                  |                |                |                                     | Over the past couple of years, Financial<br>Accounting has been realigned a few times.<br>As a result, the staff is unclear of where the<br>department truly belongs. In most cases,<br>the staff is not informed of the "big picture"<br>at Texas Tech or of its place in this picture.<br>Management should evaluate how the<br>department's strategic plan aligns with<br>Texas Tech's strategic plan and<br>communicate these results with the staff,<br>explaining how the department's<br>productivity positively impacts Texas Tech.   | Planned<br>The Administration & Finance<br>Strategic Plan will be shared with<br>the staff as soon as it has been<br>finalized. | Increase the<br>effectiveness of<br>the department<br>and strengthen<br>the control<br>environment |

| Report<br>Number | Report<br>Date       | Name of Report  | High–Level<br>Engagement Objectives   | Observations and Recommendations  | Current Status (with brief<br>description if not yet implemented) | Fiscal Impact/<br>Other Impact   |
|------------------|----------------------|---|---|---|---|--|
| 2004075          | December<br>17, 2004 | Texas Tech<br>University<br>Risk Assessment<br>for Student Union  | To facilitate a risk<br>assessment  | A risk footprint was provided to<br>management to assist them in managing<br>risks.       | Not Applicable  | Strengthen the<br>control<br>environment<br>and assist<br>management in<br>allocating<br>resources to<br>high risk areas |
| 2005040          | December<br>17, 2004 | Texas Tech<br>University<br>Risk Assessment<br>for Hospitality<br>Services  | To facilitate a risk<br>assessment  | A risk footprint was provided to<br>management to assist them in managing<br>risks.       | Not Applicable  | Strengthen the<br>control<br>environment<br>and assist<br>management in<br>allocating<br>resources to<br>high risk areas |
| 2005041          | December<br>17, 2004 | Texas Tech<br>University<br>Risk Assessment<br>for Housing and<br>Residence Life                                      | To facilitate a risk<br>assessment  | A risk footprint was provided to<br>management to assist them in managing<br>risks.       | Not Applicable  | Strengthen the<br>control<br>environment<br>and assist<br>management in<br>allocating<br>resources to<br>high risk areas |
| 2005040          | May 13,<br>2005      | Texas Tech<br>University<br>Risk Assessment<br>for Hospitality<br>Services:<br>Identification of<br>Critical Controls | To facilitate a risk<br>assessment and aid<br>management in<br>identifying critical<br>controls | A list of key controls was provided to<br>management to assist them in managing<br>risks. | Not Applicable  | Strengthen the<br>control<br>environment<br>and assist<br>management in<br>allocating<br>resources to<br>high risk areas |

| Report<br>Number | Report<br>Date  | Name of Report   | High–Level<br>Engagement Objectives  | Observations and Recommendations  | Current Status (with brief description if not yet implemented) | Fiscal Impact/<br>Other Impact   |
|------------------|-----------------|--|--|---|--|--|
| 2004085          | May 13,<br>2005 | Texas Tech<br>University Health<br>Sciences Center<br>Central Financial<br>Screening Process | To determine the<br>effectiveness of the<br>current financial<br>screening policy and the<br>procedures practiced in<br>clinics to monitor self- | The Central Financial Screening policy<br>could be clarified by specifying the<br>programs for which the Central Financial<br>Screening office screens  | In Progress<br>Management is updating the policy.              | Increase the<br>effectiveness of<br>the central<br>financial<br>screening<br>process |
|                  |                 |  | pay patients   | All clinic personnel should attend the front-<br>desk training provided through the Patient<br>Services Program and should be held<br>accountable for following the guidelines<br>presented in the training and in the Central<br>Financial Screening policy.               | Implemented  | Increase the<br>effectiveness of<br>the central<br>financial<br>screening<br>process |
|                  |                 |  |  | Central Financial Screening depends on the<br>clinics to refer the appropriate patients.<br>However, Central Financial Screening<br>could help the clinic personnel in the<br>process by providing informational<br>handouts for patients and timely<br>information in IDX. | Implemented  | Increase the<br>effectiveness of<br>the central<br>financial<br>screening<br>process |

## **Organizational Chart**



## **Other Audit Activities**

| Activity  | Impact  |
|---|---|
| Served as a resource for the task force preparing for the<br>Southern Association of Colleges and Schools (SACS)<br>reaffirmation review of Texas Tech University                   | Contributed to Texas Tech University's efforts to provide timely, accurate, and relevant information to SACS                                    |
| Served on the City of Lubbock Audit Committee   | Reinforced community relationships and strengthened professional commitment and knowledge base  |
| Served as board member for Association of College &<br>University Auditors (ACUA)   | Strengthened professional commitments and knowledge base  |
| Served as board member and secretary for Texas Association<br>of College & University Auditors (TACUA)  | Strengthened professional commitments and knowledge base  |
| Served as board member, treasurer, and president for the South<br>Plains Chapter of the Texas Society of CPAs   | Strengthened professional commitments and knowledge base  |
| Developed and presented classes related to control<br>environment and cash controls for all levels of employees on<br>all campuses  | Heightened the awareness of the need for a strong control environment<br>and presented specific best practices related to cash controls         |
| Served on the Banner Project Steering Committee   | Contributed to Texas Tech University System's efforts to enhance services to students, faculty, and staff                                       |
| Served on the Social Security Number Elimination Project<br>Committee   | Contributed to Texas Tech University System's efforts to comply with federal and state laws   |
| Made presentations at new employee orientation events   | Increased new employees' understanding of Office of Audit Services' role at Texas Tech and our interaction with departmental personnel          |
| Served on the HIPAA Security subcommittee   | Contributed to institutional compliance efforts of Texas Tech<br>University Health Sciences Center  |
| Chaired a committee to implement a hotline for the Texas Tech<br>University System  | Contributed to the University's efforts to prevent and detect fraud   |
| Facilitated quality service training  | Contributed to the quality service initiative at Texas Tech University<br>System  |
| Made presentations related to Enterprise Risk Management at<br>the Association of College & University Auditors' Annual<br>Conference and the Big XII Internal Auditor's Conference | Contributed to continuing education efforts aimed at college and<br>university auditors within Texas, the Big XII Conference, and<br>nationwide |

## **Other Audit Activities**

| Made presentations related to Enterprise Risk Management and | Contributed to continuing education efforts of Texas Tech University's |
|--|--|
| Internal Control & Fraud at the Southwest School of          | Center for Professional Development                                    |
| Governmental Finance   |  |
| Presented a session on Enterprise Risk Management to the     | Increased Texas Tech University's awareness of risk management         |
| Texas Tech University Strategic Planning Committee           |  |
| Assisted administration with the annual risk assessment      | Contributed to Texas Tech's risk assessment and risk management        |
|  | efforts  |
| Participated in the State Agency Internal Audit Forum's      | Helped improve communications between state agencies, including        |
| (SAIAF) SAO coordination committee                           | higher education institutions, and the State Auditor's Office          |

#### **Texas Tech University System**

**Office of Audit Services** 

ANNUAL PLAN For the Year Ending August 31, 2006



| Table of Contents              |       |   |  |  |  |
|--------------------------------|-------|---|--|--|--|
| Transmittal Letter             | 3     |   |  |  |  |
| Mission Statement              | 4     |   |  |  |  |
| Performance Measures           | 5-6   |   |  |  |  |
| <b>Risk Assessment Process</b> | 7-8   |   |  |  |  |
| Allocation of Time             | 9     |   |  |  |  |
| Planned Engagements            | 10-12 |   |  |  |  |
| Nature of Work                 | 13-14 |   |  |  |  |
| Audit Process                  | 15-16 |   |  |  |  |
|                                |       |   |  |  |  |
|                                |       | 2 |  |  |  |

| August 12, 2005   |  |                            |  |  |
|---|--|----------------------------|--|--|
| Dr. Bob L. Stafford<br>Audit Committee Chair, Texas Tech B  | pard of Regents                        |                            |  |  |
| Dr. David R. Smith<br>Chancellor, Texas Tech University Sys   | tem                                    |                            |  |  |
| We are pleased to submit the annual plan of the Office of Audit Services of Texas Tech University System for the year ending<br>August 31, 2006. The plan includes audits that are required by statute or administrative policy, assistance required by external<br>auditors, audits that are currently in progress, and planned engagements based on our assessment of risk. We have scheduled<br>approximately thirty percent of our time for assisting management with additional requests, special investigations, follow-up on<br>implementation of prior audit recommendations, and other value-added work. |  |                            |  |  |
|   |  | vestigations, follow-up on |  |  |
| implementation of prior audit recomm  |  |                            |  |  |
| implementation of prior audit recomm<br>We appreciate the support you offer u   | endations, and other value-added work. |                            |  |  |

#### **Mission Statement**

The staff members of the Office of Audit Services agreed that we should have a mission statement that reflects Texas Tech's commitment to educational excellence, as well as our commitment to our professional standards. The result of our contemplation is a mission statement that emphasizes proactive quality service provided by our staff for the benefit of the Board of Regents and management throughout the Texas Tech University System.

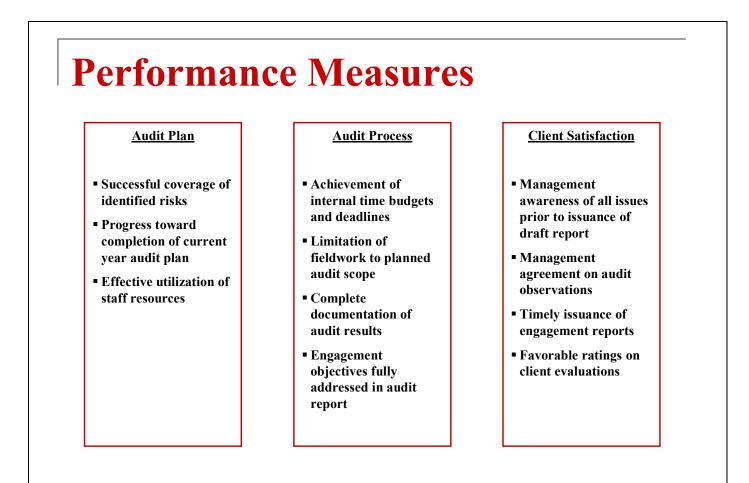
**Mission Statement** 

The mission of the Office of Audit Services is to assist the Board of Regents and other units of Texas Tech University System and its components in identifying, avoiding, and where necessary, mitigating risks.

#### **Quality Assurance**

We have instituted a continuous quality improvement control effort as required by internal auditing standards. We evaluate the quality of our services by:

- completing a self-assessment questionnaire at the end of each engagement;
- measuring our performance against predetermined benchmarks that we believe will encourage excellence;
- surveying our clients regarding their level of satisfaction with the services we have provided;
- completing a periodic self-evaluation of our office's operations to gauge compliance with internal auditing standards; and
- submitting to periodic assessment by peer review teams comprised of experienced higher education audit professionals.



#### **Risk Assessment Process**

The Office of Audit Services allocates its resources in a manner that is consistent with the mission and goals of Texas Tech University System and its components. In accordance with the Texas Internal Auditing Act (V.T.C.A., Government Code, §2102.005), we have prepared this audit plan based on the results of a formal risk assessment process.

The risk assessment process undertaken to prepare this annual plan was multi-layered. One year ago, the complete staff of our office, based on its collective institutional knowledge, input from upper management, information from past audit and consulting engagements, and knowledge of nationwide trends and occurrences in higher education and health care, developed risk assessments for all three components of Texas Tech. We identified and prioritized major processes as to their significance to the fulfillment of the missions of Texas Tech University System (TTUS), Texas Tech University (TTU), and Texas Tech University Health Sciences Center (TTUHSC), respectively. We analyzed each process to determine risks

#### **Risk Assessment Process (cont.)**

related to the achievement of entity objectives and classified each risk as to likely impact and probability of occurrence. The highest levels of institutional management at TTUS, TTU, and TTUHSC then executed a similar process to assess risks for their respective institutions.

During the past month, institutional management for TTUS, TTU, and TTUHSC updated the risk documents from the prior year for recent changes in environmental conditions and other factors. Our office reviewed the updated documents for additional considerations.

The result of these assessments was the identification of strategic, business, tactical, and environmental risks facing each institution. Any of the defined processes whose related risks were determined to present a high impact and at least a medium probability of occurrence were considered for inclusion in this annual plan.

#### **Allocation of Time**

Our staff contains 13 audit professionals. After consideration of estimated time for staff meetings, continuing professional education, holidays, and annual leave, we determined our allocable chargeable time to be approximately 16,100 hours.

Of this 16,100 hours, we estimate 2,300 hours are needed to perform required audits, assist external auditors, and complete other mandatory projects. Additionally, 1,100 audit hours are needed to complete engagements from the fiscal year 2005 annual audit plan that are in progress at year end. We have set aside approximately 30 percent of total chargeable time (4,750 hours) for unscheduled projects and other valueadded work, including board and management requests, investigations, committee service, and special projects. The remaining 8,000 audit hours have been allocated to projects determined through the risk assessment process and listed on pages 10-12.

#### **Planned Engagements**

#### **Texas Tech University System and Components**

| Endowment Spending  | Compliance             |
|---|------------------------|
| Construction Management                                     | Operational            |
| Fraud Risk Assessment                                       | <b>Risk Assessment</b> |
| Follow-up on 2004 Fraud Prevention and Elimination Reports  | Compliance             |
| Texas Tech University Foundation, Inc.                      | Financial              |
| Regents, Chancellor, and Presidents Travel and Credit Cards | Compliance             |
| Information Technology Data Center Services Inventory       | Compliance             |
| Office of Audit Services Self-Study                         | Compliance             |
| Office of Audit Services Peer Review                        | Compliance             |
| Office of Audit Services Annual Plan and Report             | Compliance             |
| State Auditor's Office Miscellaneous Projects               | Miscellaneous          |
|   |                        |

#### Planned Engagements (cont.)

#### **Texas Tech University**

**Office of Student Financial Aid Graduate-On-Time Contract Credit Card Customer Information Security Information Technology General Controls Review Information Technology Risk Assessment Financial Affairs** Library Financial Review **Student Recruiting and Admissions Process Academic Advising Processes Information Technology Help Central Student Course Fees President's Office Financial Review Academic Advising Financial Review** NCAA Compliance **Athletics Financial Review KOHM-FM** 

**Operational/Controls** Controls IT Controls **IT Controls Risk Assessment Operational/Controls Financial/Controls Operational Controls/Consulting Operational** Compliance Financial Financial Compliance Financial Financial

#### Planned Engagements (cont.)

#### **Texas Tech University Health Sciences Center**

| Odessa Operational and Financial Review                    | O  |
|--|----|
| Credit Card Customer Information Security                  | Ī  |
| Information Technology General Controls Review             | IT |
| Institutional Animal Use and Care Committee                | Co |
| El Paso and Border Funding                                 | Co |
| Medical Practice Income Plan (MPIP) Trust Fund             | Co |
| Health Care Systems  | O  |
| Information Technology Risk Assessment                     | Ri |
| Institutional Review Board                                 | Co |
| School of Medicine   | Co |
| Grant Expenditures   | Co |
| Information Technology Help Desk                           | Op |
| IDX and Related Controls                                   | C  |
| Texas Higher Education Coordinating Board Residency Grants | Co |
| Correctional Managed Health Care Committee Contract        | Co |
| El Paso Family Medicine Contract                           | Co |
|  |    |

**D**perational/Financial T Controls T Controls **Compliance/Controls Compliance/Controls** Controls **Operational** kisk Assessment **Compliance/Controls Compliance/Controls** Compliance **Derational** Controls Compliance Compliance Compliance

#### **Nature of Work**

The Office of Audit Services evaluates and contributes to the improvement of risk management, control, and governance processes. The nature of the activities is determined by a risk assessment process undertaken annually with the input of senior management and the Board of Regents. Additionally, consulting engagements may be planned to improve the management of risks, to add value, and to improve Texas Tech's operations.

The Office of Audit Services' assessments and recommendations for improving Texas Tech's risk management, control, and governance processes are for the purpose of accomplishing the following objectives:

- promoting appropriate ethics and values within Texas Tech
- ensuring effective organizational performance management and accountability
- effectively communicating risk and control information to appropriate areas
- effectively coordinating the activities of and communicating information among our office, the Board of Regents, external auditors, and management

#### Nature of Work (cont.)

The Office of Audit Services evaluates risk exposures and the effectiveness of controls relating to Texas Tech's governance, operations, and information systems regarding the

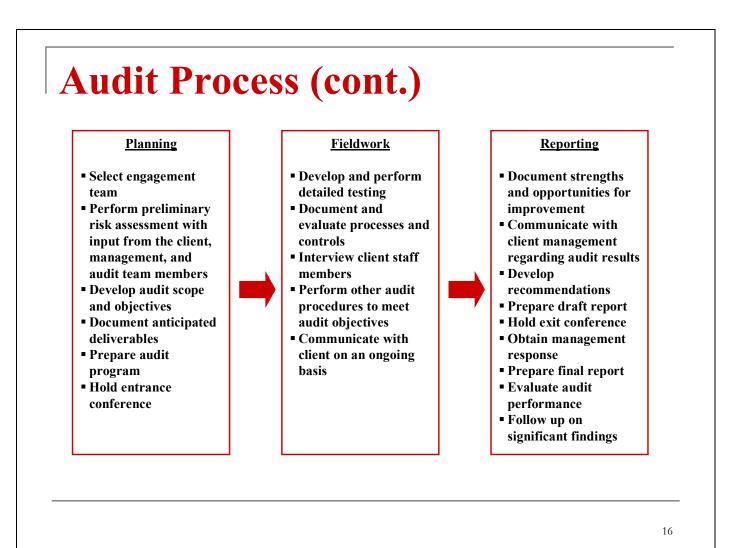
- reliability and integrity of financial and operational information;
- effectiveness and efficiency of operations;
- safeguarding of assets; and
- compliance with laws, regulations, and contracts.

During the planning phase of each engagement, we determine the scope of work to be performed using the standards noted above. Our scope will be based on a risk assessment conducted during the planning phase of the audit. On all planned engagements, we will conduct an entrance conference and/or provide an engagement letter in order to communicate the scope and objectives of our audit to the management personnel involved.

The Institute of Internal Auditors, The Professional Practices Framework. (Altamonte Springs: The Institute of Internal Auditors, 2004). pp 14-17

#### **Audit Process**

Audits are performed in three general phases: planning, fieldwork, and reporting. As indicated earlier, the success of our efforts is monitored through the completion of self-evaluation questionnaires and the compilation of information to monitor our achievement of performance measures. We believe it is important that our process is understood. The illustration on the following page documents the procedures normally employed in the performance of an audit.



#### **External Audit Services**

| Service   | Firm                                    |
|---|---|
| Credit Card and Travel Expenses of Board of Regents,<br>Chancellor, and Presidents Agreed-Upon Procedures | Bolinger Segars Gilbert & Moss, LLP     |
| KOHM-FM Financial Statements  | Robinson Burdette Martin & Seright, LLP |
| KTXT-TV Financial Statements  | Robinson Burdette Martin & Seright, LLP |
| Texas Tech Foundation, Inc.   | Bolinger Segars Gilbert & Moss, LLP     |
| Intercollegiate Athletics Program Agreed-Upon<br>Procedures   | Bolinger Segars Gilbert & Moss, LLP     |
| Risk Assessment of Certain Departments  | PriceWaterhouseCoopers, LLP             |