

**UT Southwestern**  
Medical Center

Recruitment Audit

Internal Audit Report 17:07

June 8, 2017

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## Executive Summary

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### **Background**

The University of Texas Southwestern (UT Southwestern) hired approximately 4,400 employees and received approximately 219,000 applicants across the Institution between January 2016 and February 2017. Applicants were considered for the following positions: Classified, Administrative and Professional (A&P), Hospital and Faculty.

The Recruiting functions are performed within the Department of Human Resources for staff and by the Provost office for faculty recruitment. The hiring departments also have responsibility for some of the recruiting activities. The table below illustrates the primary recruiting functions, number of staff to support the function and the number of new hires in fiscal year 2016.

UT Southwestern Entity	Number of Recruiters	Number of New Hires
University	9	2,347
Hospital	9	1,913
Faculty	0	177

The Department of Human Resources supports the overall organizational mission of excellence in research, education and patient care by recruiting, establishing programs to develop and retain talent. The recruitment teams described below report to the Department of Human Resources.

- The University Recruitment team sources and evaluates candidates with department input and facilitates the hiring process for Classified, A&P and Ambulatory Clinic positions across the three schools.
- The Hospital Recruitment team sources and evaluates with hospital department input and facilitates the hiring process for Hospital and Hospital based clinic positions.
- Faculty recruitment support is responsible for the full recruitment and hiring process for all Advanced Practice Providers for UT Southwestern.
- The hiring departments are responsible for the majority of sourcing and assessing faculty candidates.

Currently, the PeopleSoft (HCM) Recruiting Module is used for non-Faculty applicant tracking. A new applicant tracking system, Oracle Taleo Cloud, is being implemented to replace HCM Recruiting and is planned to go live in September 2017. A new background verification vendor was recently implemented in January 2017 across the Institution.

## Executive Summary

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### **Scope and Objectives**

The Office of Internal Audit has completed its Recruitment audit. This is a risk based audit and part of the fiscal year 2017 Audit Plan. The audit scope period included recruiting activities from January 1, 2016 to February 28, 2017. Recruitment functions from the approved job posting to day one of the new hire's tenure at UT Southwestern were part of the review. Preapproval of job postings and compensation were not included in the scope of this review. Audit procedures included interviews with stakeholders, review of policies and procedures and other documentation, substantive testing, and data analytics.

We conducted our examination according to guidelines set forth by the Institute of Internal Auditors' International Standards for the Professional Practice of Internal Auditing.

The following primary objectives of the review is to determine if there is:

- Effective execution of recruiting and hiring practices.
- Effective coordination with hiring departments and clear delineation of roles and responsibilities.
- Compliance with regulations, institutional, and departmental policies and procedures.
- Achievement of recruiting goals and objectives, and meeting institutional labor management expectations.
- System integrity, security, and reporting accuracy.

### **Conclusion**

Overall, recruitment processes and internal controls need to be strengthened to provide reasonable assurance that the Institution is complying with employment laws and regulations and tracking progress towards institutional strategic initiatives for diversity and inclusion in the workforce. Specifically, procedures, defined roles and responsibilities, system enhancements and monitoring controls are needed to clarify expectations and ensure key procedures are completed as expected.

A new applicant tracking system is currently being configured and will be implemented in September 2017. Many of the monitoring observations noted within this report will be addressed in the new system.

## Executive Summary

Included in the table below is a summary of the observations noted, along with the respective disposition of these observations within the Medical Center internal audit risk definition and classification process. See Appendix A for Risk Rating Classifications and Definitions.

Priority (0)	High (4)	Medium (3)	Low (0)	Total (7)
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A strength identified during the audit was the implementation of a comprehensive process improvement effort, including the recruitment process, by the Office of Human Resources initiated in early fiscal year 2017. As a result of this process improvement effort, several additional projects are planned to further enhance efficiencies.

The key improvement opportunities risk-ranked as high and medium are summarized below.

- **#1 Develop Standard Recruiting Practices Across the Institution** – Inconsistent processes across the recruiting functions result in non-compliance with regulations and policies and contributes to a lack of clarity in defining roles and responsibilities.
- **#2 Define Faculty Recruitment Documentation Requirements to Ensure Compliance with Laws and Regulations** – Departments do not follow consistent practices or maintain documentation to support applicant screening, evaluation and selection to ensure compliance with applicable laws and regulations.
- **#3 Define Criteria for Evaluating Results of Candidate Assessments** – Evaluation criteria has not been defined for candidate assessments to ensure consistent application of results.
- **#4 Implement System Access Security Controls within HCM Recruitment Module** – Security access roles are not defined and consistently applied, resulting in access in excess of the minimum necessary requirements.
- **#5 Define the Institution’s Strategic Workforce Needs** – A strategic workforce needs assessment has not been performed, resulting in a reactive response to open position requests, longer time to fill positions, resulting in higher disruption impact on operations.
- **#6 Confirm Consistent Verification of Completed Background Checks for Temporary Resources** – Confirmation is not obtained to validate key employment activities are being completed by a third party vendor prior to their first day of work.
- **#7 Implement Monitoring Controls to Ensure Key Recruiting Activities are Completed** – Key recruiting activities are not consistently tracked to ensure completion prior to the candidate’s first day.

## Executive Summary

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Management has plans to address the issues identified in the report and in some cases have already implemented corrective actions. These responses, along with additional details for the key improvement opportunity listed above and other lower risk observations are listed in the Detailed Observations and Action Plans Matrix (Matrix) section of this report.

We would like to take the opportunity to thank the departments and individuals included in this audit for the courtesies extended to us and for their cooperation during our review.

Sincerely,

Valla Wilson, Associate Vice President for Internal Audit, Chief Audit Executive

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## Detailed Observations and Action Plans Matrix

Observation	Recommendation	Management Response
<p><b>Risk Rating: High ●</b></p> <p><b>1. Develop Non-Faculty Standard Recruiting Practices and Monitoring Controls</b></p> <p>Decentralized recruiting practices, processes, and procedures across the Institution significantly increase risks of non-compliance with regulations and litigation. Opportunities are as follows:</p> <ul style="list-style-type: none"> <li>• Roles and responsibilities are not clearly defined between recruiters and hiring leaders.</li> <li>• Procedures are not developed, or are not in place, to cover key aspects of the recruiting process.</li> <li>• Training is not available for hiring leaders to ensure compliance with regulations for candidate interviews and evaluations.</li> <li>• Documentation does not support criteria used for selection procedures to provide evidence for an objective selective process.</li> </ul> <p>Key steps identified as missing include:</p> <ul style="list-style-type: none"> <li>• Ensuring signed disclosures are obtained prior to initiation of background checks</li> <li>• I-9 verification forms are completed within the first three days of hire</li> </ul> <p>A checklist is used by some of the recruiters to track key functions.</p>	<ol style="list-style-type: none"> <li>1. Define roles and responsibilities for recruiters and hiring leaders.</li> <li>2. Define standard recruiting practices to be implemented across the Institution, including: <ul style="list-style-type: none"> <li>• Evaluation of candidates</li> <li>• Interviews</li> <li>• Required documentation to support evaluation process</li> <li>• Access to candidate information</li> <li>• Final candidate selection documentation</li> </ul> </li> <li>3. Document and implement procedures to include all key all key aspects of the recruiting process.</li> <li>4. Develop tracking to identify steps that have not been completed during the recruiting process in the existing Applicant Tracking System (ATS).</li> <li>5. Develop tracking and workflow within the new ATS to identify steps that have not been completed during the recruiting process.</li> </ol>	<p><b><u>Management Action Plans:</u></b></p> <ol style="list-style-type: none"> <li>1. We will clearly define roles and responsibilities for recruiters and hiring leaders.</li> </ol> <p><b><u>Action Plan Owners:</u></b></p> <p>Vice President, Office of Human Resources &amp; Chief Human Resources Officer Assistant Vice President, HR Administration Assistant Vice President, HR University Hospitals</p> <p><b><u>Target Completion Dates:</u></b></p> <p>September 30, 2017</p> <p><b><u>Management Action Plans:</u></b></p> <ol style="list-style-type: none"> <li>2. We will collaborate with key stakeholders to define standard recruiting practices, including evaluation criteria and required documentation.</li> </ol> <p><b><u>Action Plan Owners:</u></b></p> <p>Vice President, Office of Human Resources &amp; Chief Human Resources Officer Assistant Vice President, HR Administration Assistant Vice President, HR University Hospitals Office of Diversity &amp; Inclusion and Equal Opportunity</p>

## Detailed Observations and Action Plans Matrix

Observation	Recommendation	Management Response
<p>Inconsistent processes and practices across the recruiting functions result in non-compliance with laws and regulations and Institutional policies. Thus contributing to a lack of clearly defining roles and responsibilities between recruiters and hiring leaders.</p>	<p>6. Provide training to internal and hiring leaders that will be impacted by (responsible for executing and managing) new processes and procedures.</p>	<p>Office of International Affairs</p> <p><b><u>Target Completion Dates:</u></b></p> <p>September 30, 2017</p> <p><b><u>Management Action Plans:</u></b></p> <p>3. We will document a comprehensive procedure manual for the Recruiting processes to ensure key steps are completed.</p> <p><b><u>Action Plan Owners:</u></b></p> <p>Vice President, Office of Human Resources &amp; Chief Human Resources Officer</p> <p>Assistant Vice President, HR Administration</p> <p>Assistant Vice President, HR University Hospitals</p> <p><b><u>Target Completion Dates:</u></b></p> <p>October 31, 2017</p> <p><b><u>Management Action Plans:</u></b></p> <p>4&amp;5. We will ensure tracking and monitoring is implemented within the new ATS.</p> <p><b><u>Action Plan Owners:</u></b></p> <p>Vice President, Office of Human Resources &amp; Chief Human Resources Officer</p> <p>Assistant Vice President, HR Administration</p>



## Detailed Observations and Action Plans Matrix

Observation	Recommendation	Management Response
		<p>Assistant Vice President, HR University Hospitals</p> <p><b><u>Target Completion Dates:</u></b> October 31, 2017</p> <p><b><u>Management Action Plans:</u></b> 6. We will provide training to all hiring leaders of the new processes and procedures.</p> <p><b><u>Action Plan Owners:</u></b> Vice President, Office of Human Resources &amp; Chief Human Resources Officer Assistant Vice President, HR Administration Assistant Vice President, HR University Hospitals</p> <p><b><u>Target Completion Dates:</u></b> October 31, 2017</p> <p>Monitoring of new processes and adjustments as needed to finalize new process by December 31, 2017</p>

## Detailed Observations and Action Plans Matrix

Observation	Recommendation	Management Response
<p><b>Risk Rating: High</b> ●</p> <p><b>2. Define Faculty Recruitment Documentation Requirements to Ensure Compliance with Laws and Regulations</b></p> <p>The recruiting process for Faculty hires is not consistently followed by hiring departments and current practices are not in compliance with Institutional Faculty Recruitment Policy (FAC152).</p> <ul style="list-style-type: none"> <li>• Applicant pool, screening methods, candidate and final selection evaluation documentation is not sufficiently maintained.</li> <li>• The Office of Diversity &amp; Inclusion and Equal Opportunity (ODIE) does not review the methods for recruiting and approve the final appointment in accordance with policy FAC152.</li> <li>• Office of Vice President of Human Resources is not involved in approving final faculty appointment in accordance with policy FAC152.</li> <li>• The methods to gather and maintain key applicant tracking information required by Federal regulations needs improvement.</li> </ul> <p>Missing recruitment and selection data can increase the risk on non-compliance.</p>	<ol style="list-style-type: none"> <li>1. Coordinate with key stakeholders to define standard Faculty recruiting process and documented requirements, including: <ul style="list-style-type: none"> <li>• Applicant pool criteria and tracking</li> <li>• Evaluation requirements</li> <li>• Final selection requirements</li> </ul> </li> <li>2. Update policy FAC152 “Faculty Recruitment Policy” to reflect updated standards.</li> <li>3. Update Department manual procedures to reflect updated standards.</li> <li>4. Provide training to departments on updated hiring standards and processes.</li> <li>5. Develop monitoring procedures to ensure updated requirements are being followed.</li> </ol>	<p><b><u>Management Action Plans:</u></b></p> <ol style="list-style-type: none"> <li>1. We will collaborate with key stakeholders to define standard faculty recruiting practices, including evaluation criteria and required documentation.</li> <li>2. We will update policy FAC152 to reflect updated practices.</li> <li>3. We will update Department manual procedures to currently reflect standards and changes to standards.</li> <li>4. We will provide training to departments on updated practices.</li> <li>5. We will develop tracking and monitoring to ensure key steps are completed.</li> </ol> <p><b><u>Action Plan Owners:</u></b></p> <p>Director, Office of the Dean Vice President, Office of Human Resources &amp; Chief Human Resources Officer</p> <p><b><u>Target Completion Dates:</u></b></p> <ol style="list-style-type: none"> <li>1. – 3. September 30, 2017</li> <li>4. – 5. December 31, 2017</li> </ol> <p>Monitoring of new processes and adjustments as needed through February 28, 2018</p>

## Detailed Observations and Action Plans Matrix

Observation	Recommendation	Management Response
<p><b>Risk Rating: High ●</b></p> <p><b>3. Define Criteria for Evaluating Results of Candidate Assessments</b></p> <p>Evaluation criteria has not been defined for behavioral and skills assessment to ensure consistent application of results in evaluating candidates. Our review noted the following:</p> <p><u>Behavioral assessments</u></p> <ul style="list-style-type: none"> <li>Assessments are not consistently used for the same position.</li> <li>Selection procedures do not provide documentation to support criteria evaluated.</li> </ul> <p><u>Skills Assessments</u></p> <ul style="list-style-type: none"> <li>Assessments were taken multiple times as allowed by the recruiter or requested by the hiring manager.</li> <li>Inconsistencies in procedures to dictate how many times a candidate can take the assessment.</li> </ul> <p>Inconsistencies in the recruitment practice can increase the risk of non-compliance with laws and regulations as well as the potential for hiring unqualified candidates or potentially overlooking more qualified candidates.</p>	<ol style="list-style-type: none"> <li>Coordinate with the Office of Legal Affairs and the Office of Diversity &amp; Inclusion and Equal Opportunity to evaluate and determine assessments to be used and for what manner. Provide guidance on evaluation criteria.</li> <li>Define and document evaluation criteria for recruiters and hiring managers to follow.</li> </ol>	<p><b><u>Management Action Plans:</u></b></p> <ol style="list-style-type: none"> <li>We will review the methodology supporting these assessments with Legal Affairs and Diversity and Inclusion and Equal Opportunity Offices.</li> <li>We will develop procedures to ensure consistent use of assessments, including evaluation criteria and documentation requirements for exceptions to the defined criteria</li> </ol> <p><b><u>Action Plan Owners:</u></b></p> <p>Vice President, Office of Human Resources &amp; Chief Human Resources Officer</p> <p>Assistant Vice President, HR Administration</p> <p>Assistant Vice President of Organizational Development and Training</p> <p>Vice President of Legal Affairs</p> <p>Assistant Vice President of Diversity &amp; Inclusion and Equal Opportunity</p> <p><b><u>Target Completion Dates:</u></b></p> <ol style="list-style-type: none"> <li>August 31, 2017</li> <li>September 30, 2017</li> </ol>

## Detailed Observations and Action Plans Matrix

Observation	Recommendation	Management Response
<p><b>Risk Rating: High ●</b></p> <p><b>4. Implement System Security Controls within HCM Recruitment Module</b></p> <p>Users have excessive access to perform key recruitment functions in the HCM Recruitment module, which contains sensitive information regarding job applicants that could be used inappropriately if users have access greater than required for their job function.</p> <p>Per Policy ISR-111 “<i>System Access Management</i>,” user access is required to be maintained at the minimum level required for their job function.</p> <p>Specifically:</p> <ul style="list-style-type: none"> <li>• All HR Recruiting staff, regardless of their position, have the same access to add, update and make corrections to all applicant records.</li> <li>• Information Resources staff have access to add applicants, post jobs, generate recruitment letters, approve employee rewards and generate openings from postings.</li> <li>• One user retained access even though their current job function does not require recruitment access due to a change in responsibility.</li> </ul>	<ol style="list-style-type: none"> <li>1. Develop a role-based plan for HR Recruiting users and implement user access to ensure functions are segregated accordingly in the new Oracle Taleo Cloud system, which will be implemented in three months.</li> <li>2. Implement procedures to perform at least a quarterly review of user access to the new Taleo Cloud system once that system has been implemented. As part of that review, identify and remove access granted to users that is not required for job duties.</li> </ol>	<p><b><u>Management Action Plans:</u></b></p> <ol style="list-style-type: none"> <li>1. The new Oracle Taleo Cloud system security model is role-based and a role-based plan will be developed for implementation in the new system.</li> <li>2. We agree and quarterly access reviews will be implemented with the new Oracle Taleo Cloud system. The new system will also have a control such that, if a hiring Recruiter does not access the system for a certain period of time, access will be deactivated.</li> </ol> <p><b><u>Action Plan Owners:</u></b></p> <p>Vice President, Office of Human Resources &amp; Chief Human Resources Officer</p> <p>Assistant Vice President, HR Administration</p> <p>Associate Vice President of Academic &amp; Administrative Information Systems</p> <p><b><u>Target Completion Dates:</u></b></p> <p>October 31, 2017</p>

## Detailed Observations and Action Plans Matrix

Observation	Recommendation	Management Response
Due to the sensitivity of the information in HCM, annual review of user access is not adequate to detect access related issues such as those noted above.		

## Detailed Observations and Action Plans Matrix

Observation	Recommendation	Management Response
<p><b>Risk Rating: Medium ●</b></p> <p><b>5. Define the Institution’s Strategic Workforce Needs</b></p> <p>A strategic workforce needs assessment has not been performed, resulting in a reactive response to open position requests, higher disruption impact on operations and can be a factor in lower than expected employee engagement results.</p> <ul style="list-style-type: none"> <li>• Clear understanding of the roles and responsibilities of recruiters and hiring managers is not consistently applied and can result in candidate dissatisfaction as well as non-compliance with laws and regulations. Currently, each department chooses the role they want recruitment to play.</li> <li>• Applicant close out procedures should be established to ensure a positive reputation for the Institution and the possibility that the candidate considers another position at a later date.</li> <li>• Maintain frequent communications with the hiring leaders during the applicant selection process so that the leader can plan for Day One activities.</li> </ul> <p>Lack of a well-defined and documented strategy can result in inefficient use of recruiter resources and extended time to fill open positions.</p>	<ol style="list-style-type: none"> <li>1. Define the strategic workforce needs assessment to include: <ul style="list-style-type: none"> <li>• Strategic identification of high priority positions in which a pipeline of potential candidates can be developed to more efficiently respond to approved job openings.</li> <li>• Key business area leader input on qualifications required within these positions</li> <li>• Identification of professional organizations, colleges, etc. for ongoing recruiting efforts to create brand awareness of UTSW</li> <li>• Ongoing monitoring of key strategy objectives</li> </ul> </li> <li>2. Determine standard roles and responsibilities for hiring managers and departments.</li> </ol>	<p><b><u>Management Action Plans:</u></b></p> <ol style="list-style-type: none"> <li>1. In conjunction with Senior Leaders, we will develop strategic workforce assessments including high priority positions, key criteria for qualified applicants and professional organization pipelines to fill these positions.</li> <li>2. We will define standard roles and responsibilities.</li> </ol> <p><b><u>Action Plan Owners:</u></b></p> <p>Vice President, Office of Human Resources &amp; Chief Human Resources Officer</p> <p>Designees from following offices:</p> <p>EVP of Business Affairs, EVP of Health Affairs, EVP of Academic Affairs, EVP of Institutional Advancement and Vice President of Information Resources</p> <p><b><u>Target Completion Dates:</u></b></p> <ol style="list-style-type: none"> <li>1. December 31, 2017</li> <li>2. January 31, 2018</li> </ol>

## Detailed Observations and Action Plans Matrix

Observation	Recommendation	Management Response
<p><b>Risk Rating: Medium</b> ●</p> <p><b>6. Confirm Consistent Verification of Completed Background Checks for Third Party Resources</b></p> <p>Completed background checks were not consistently available for third party resources utilized to provide temporary workforce coverage. The review identified the following observations:</p> <ul style="list-style-type: none"> <li>Confirmation is not obtained prior to a temporary resource coming in to the Hospital to support completion of key employment activities as outlined in the contract provisions. All employees, whether temporary or full-time, are required to have a completed background check prior to the first day of employment. If the position requires direct patient care then a drug screen is also required.</li> <li>The Hospital Recruitment Department is not always aware when temporary staff is on-site because departments routinely communicate directly with the vendor.</li> </ul> <p>A new vendor is in place and will be utilized going forward.</p> <p>Lack of confirmation that background checks or drug screens have been completed increases the risk that the Institution's minimum qualifications for hire are not met.</p>	<p>Validate that the vendor's background check processing criteria:</p> <ul style="list-style-type: none"> <li>aligns with the Institution's standards,</li> <li>requires documentation of a successful background check for each employee staffed by the vendor, and</li> <li>documentation is attached in the ATS</li> </ul>	<p><b><u>Management Action Plans:</u></b></p> <p>Effective June 19, 2017, a new vendor using a cloud-based Vendor Management System (SAP Fieldglass VMS) will go live at UT Southwestern to manage services procurement and external workforce programs.</p> <p>Human Resources, in collaboration with Information Resources, will ensure the recommendations noted will be addressed with the new VMS / ATS implementation.</p> <p><b><u>Action Plan Owners:</u></b></p> <p>Vice President, Office of Human Resources &amp; Chief Human Resources Officer</p> <p>Assistant Vice President, HR Administration</p> <p>Associate Vice President of Academic &amp; Administrative Information Systems</p> <p><b><u>Target Completion Dates:</u></b></p> <p>September 30, 2017</p>



## Detailed Observations and Action Plans Matrix

Observation	Recommendation	Management Response
<p><b>Risk Rating: Medium</b> ●</p> <p><b>7. System Controls Are Not Available to Monitor Completion of Key Recruiting Activities</b></p> <p>System controls are not available in the HCM Recruiting Module to ensure key functions are completed including:</p> <ul style="list-style-type: none"> <li>• Jobs not posted until properly approved with HCM. HR Recruiting staff have the ability to add or remove jobs posted without approval by a department or Recruiting Manager.</li> <li>• Applicant disclosures for background checks are obtained prior to initiation of the check</li> <li>• Background check results are retained</li> <li>• I-9 Forms are completed and retained</li> <li>• A minimum number of candidates required to be interviewed and evaluated</li> <li>• Drug screening results are retained</li> <li>• Assessment results are retained</li> <li>• Salary amounts input on hire transactions match the job offer amount</li> </ul>	<ol style="list-style-type: none"> <li>1. Implement procedures to ensure appropriate approvals have been obtained prior to posting or removing a job from the open jobs listing.</li> <li>2. Where feasible within the new Oracle Taleo Cloud system, configure system controls to implement: <ul style="list-style-type: none"> <li>• An interface from HCM for approved job postings</li> <li>• Require candidates to complete disclosures for background checks and retain this data in the system</li> <li>• An interface to the Certiphi, the institution's background check system, to collect and retain background check reports</li> <li>• Require candidates to complete I-9 forms and retain this data in the system</li> <li>• Require a minimum number of candidates to be interviewed and evaluated</li> <li>• Retain drug screening results</li> <li>• Retain assessment results</li> <li>• Logic to ensure salary amounts input on hire transactions match the job offer amount</li> </ul> </li> </ol>	<p><b><u>Management Action Plans:</u></b></p> <ol style="list-style-type: none"> <li>1. We will implement system controls or manual procedures to ensure appropriate approvals have been obtained prior to posting or removing jobs from the open jobs listing.</li> <li>2. Where feasible, we will ensure the new Oracle Taleo Cloud system is configured with the system controls recommended.</li> </ol> <p><b><u>Action Plan Owners:</u></b></p> <p>Vice President, Office of Human Resources &amp; Chief Human Resources Officer Assistant Vice President, HR Administration Assistant Vice President of Academic &amp; Administrative Information Systems</p> <p><b><u>Target Completion Dates:</u></b></p> <p>September 30, 2017</p>



## Appendix A – Risk Classifications and Definitions

As you review each observation within the Detailed Observations and Action Plans Matrix of this report, please note that we have included a color-coded depiction as to the perceived degree of risk represented by each of the observations identified during our review. The following chart is intended to provide information with respect to the applicable definitions and terms utilized as part of our risk ranking process:

<b>Risk Definition - The degree of risk that exists based upon the identified deficiency combined with the subsequent priority of action to be undertaken by management.</b>	<b>Degree of Risk and Priority of Action</b>	
	<b>Priority</b>	An issue identified by internal audit that, if not addressed immediately, has a high probability to directly impact achievement of a strategic or important operational objective of a UT institution or the UT System as a whole.
	<b>High</b>	A finding identified by internal audit that is considered to have a high probability of adverse effects to the UT institution either as a whole or to a significant college/school/unit level. As such, immediate action is required by management in order to address the noted concern and reduce risks to the organization.
	<b>Medium</b>	A finding identified by internal audit that is considered to have a medium probability of adverse effects to the UT institution either as a whole or to a college/ school/unit level. As such, action is needed by management in order to address the noted concern and reduce risk to a more desirable level.
	<b>Low</b>	A finding identified by internal audit that is considered to have minimal probability of adverse effects to the UT institution either as a whole or to a college/ school/unit level. As such, action should be taken by management to address the noted concern and reduce risks to the organization.

It is important to note that considerable professional judgment is required in determining the overall ratings presented on the subsequent pages of this report. Accordingly, others could evaluate the results differently and draw different conclusions.

It is also important to note that this report provides management with information about the condition of risks and internal controls at one point in time. Future changes in environmental factors and actions by personnel may significantly and adversely impact these risks and controls in ways that this report did not and cannot anticipate.

## Appendix B – Opportunities Matrix

There are various facets in terms of people, processes, and technology that have an impact on the accuracy and completeness of the recruitment process. This illustration is to provide an overview of the key opportunities for areas impacting the recruitment issues identified in the report.

