

Audit Report

Operation Fast Start Audit: Office of the Provost

September 2023

Summary – Operation Fast Start Audit: Office of the Provost

We recently completed an Operation Fast Start audit for areas reporting to the Office of the Provost. The background, audit objective, scope, and ratings are detailed on page 31. Overall, the audit identified the following observations and recommendations which, if addressed, will improve the control environment and enhance efficiency and effectiveness among several areas under the Office of the Provost.

Recommendations	Rating	Count
	Priority	0
15	High	0
	Medium	15
	Low	0

Observations	Recommendations	Rating	Page
A. Admissions: Transparency, Training and Documentation	Improve transparency by publishing the freshman alternate admissions standard based on unweighted GPA.	Medium	5
	 Add oversight to help ensure Admissions Appeal Committee follows GPA standards, uses proper admissions classifications, and improves documentation and storage practices. 	Medium	
B. Admissions: Security for Personal Identifiable Information	3. Help ensure Personal Identifiable Information is kept secure in the Admissions area, rather than allowing carriers to leave application and other packages unattended outside the department.	Medium	9
C. Admissions: Customer Relationship Management (CRM)	4. Centralize UTA's various CRM initiatives and systems to help ensure consistent, efficient and effective messaging.	Medium	10
(Ortin)	 Prioritize CRM as a strategic initiative by developing a strategic roadmap, appropriate budget, as well as milestones, goals, and KPIs. 	Medium	
D. Admissions: Travel Expense Training Needed	6. Provide training to recruiters and enhance the review process to help ensure accuracy and procedural compliance for travel reimbursements made to UTA's admissions recruiters.	Medium	13

Summary – Operation Fast Start Audit: Office of the Provost

Observations	Recommendations	Rating	Page
E. Registrar's Office: Degree Maps are Difficult to Use	7. Develop a Degree Map that is user-friendly for advisors and students to replace the present-day system and/or manual PDFs currently used. Consider adding an efficient review process for course substitutions, waivers, and other edits made to the student Degree Maps.	Medium	15
F. Registrar's Office: Space Planning Automation	8. Further automate the classroom scheduling process to reduce and/or eliminate manual data entry by utilizing additional Ad Astra capabilities and functionality.	Medium	17
G. Student Affairs: Health Services, Pharmacy Procedures	 Review, update and approve Pharmacy procedures annually. Procedural additions including pricing for non-prescription items and changing pharmacy door codes should be considered. 	Medium	18
H. Student Affairs: Health Services, System Access/Vendor Oversight	10. To prevent unauthorized access to student health records, establish an effective system access maintenance and a review process for the Point and Click system. To improve vendor oversight, perform a SOC 2 Type 2 report review annually.	Medium	20
I. Student Affairs: Transition Programs, Cash Handling	11. Enhance compliance with cash handling procedures to help ensure timely deposits and accurate record keeping. Eliminate cash collections, where possible, by adopting card-only policies.	Medium	22
J. Student Affairs: Residence Hall Access	12. Improve security for residence halls by reducing the number of days needed to process paperwork for mid-semester move outs.	Medium	24
K. Financial: SAHARA Financials not Consistently Approved	13. Create awareness on the importance of reviewing/approving monthly financial statements. Have account owners take SAHARA training to improve understanding. Collaborate with Knowledge Services to create an exception report to know who is not completing monthly reconciliations.	Medium	26

Summary – Operation Fast Start Audit: Office of the Provost

Observations	Recommendations	Rating	Page
L. Financial: ProCard Transactions not Consistently Approved	14. Create awareness on the importance of reviewing/approving monthly ProCard transactions. Staff to take ProCard training to improve process understanding. Collaborate with Knowledge Services to create an exception report that lists those not completing monthly ProCard reconciliations.	Medium	28
M. Credential Validation for Newly Hired Faculty	15. Faculty Affairs and Academic Planning & Policy, and the Office of Talent, Culture and Inclusion should work together to help ensure a consistent understanding of faculty hiring and credential verification policies and procedures.	Medium	30

Further details can be found on the following pages. Other less significant opportunities were communicated to management separately.

We appreciate the outstanding courtesy and cooperation received from the many staff and faculty involved with this audit.

Observation A – Admissions: Transparency, Training and Documentation

Freshman Admissions Standards are not Fully Published

The UTA catalog provides admissions standards for situations where candidates have a class ranking and/or standardized test (ACT/SAT) scores. With that said, if candidates do not have a class ranking or standardized test scores, or if a candidate's class rank and/or standardized test scores are below the published standards, an alternate GPA-based admissions standard is utilized. In these situations, a candidate is provided automatic *unconditional* admission if their <u>unweighted</u> high school GPA is 3.25 or higher. This GPA-based standard was adopted to accommodate the removal of the requirement for candidates to submit standardized test scores. Currently, the unweighted GPA-based admissions standard (unweighted GPA of 3.25 or higher) is <u>not</u> published in the UTA catalog or on the website. Publishing the GPA-based standard would help ensure candidate and faculty awareness of the GPA-based standard.

Current GPA Guidance not Followed by Admissions Appeals Committee

Students may appeal UTA's admission decision of non-acceptance. The Admissions Appeals Committee within the Admissions Office is responsible for reviewing every candidate appeal. As shown below, the Admissions Appeals Committee admitted 81 percent of candidates who appealed in FY 2022-2023:

Admissions Appeals Committee Decision Analysis		
Description	Percentage Breakout of Appeals Decision	Number of Appeals Decisions
Admit - Freshman	83%	161
Deny - Freshman	17%	33
Admit - Transfers	78%	88
Deny - Transfers	22%	25
Admit - Overall	81%	249
Deny Overall	19%	58

In the Fall of 2022, Admissions established a minimum GPA for all incoming freshman and transfer candidates. Our review disclosed the Admissions Appeals Committee members were not aware of these minimum GPA thresholds. As a result, students were admitted with GPAs lower than the prescribed minimum thresholds. The minimum GPA was set at 2.25 for freshman and 2.00 for transfers. Instead of using these minimum standards, the Admission Appeals Committee used 2.00 for freshman and no minimum GPA for transfers. Additionally, if an applicant's personal statement indicated they had a difficult transition from classroom to a remote-learning environment (due to the pandemic), they received an offer of admission regardless of GPA. Our sample review disclosed 10 of 20 (50%) appeal candidates accepted by the Admissions Appeals Committee had GPAs below the 2022 minimum standard (Freshman 2.25, Transfers 2.0).

Medium

Admissions Appeal Committee Needs Guidance Related to Awarding Conditional Versus Unconditional Admittance

The Admissions Appeal Committee uses member discretion in determining the type of admittance to be awarded (conditional or unconditional). There are no policies or procedures to guide appeal decisions between *conditional* and *unconditional* admissions status. As a result, the Admissions Appeals Committee often granted *unconditional* admission to candidates that did not meet minimum GPA thresholds. The Admissions Appeals Committee granted *unconditional* admittance to 73% of freshman and 48% of transfers. Since the majority of these students did not meet the minimum admissions standards, awarding a *conditional* admissions status for these students would have been more appropriate.

Admissions Appeal Committee Decision Documentation Could Be Enhanced

- Our review of the Admissions Appeal Committee notes in MyMav disclosed that the committee was vague and did not
 consistently disclose clear reasoning of offering admission.
- Appeal documents are saved in a private Microsoft Teams channel that is accessible only to the three committee members and Admissions Director. This differs from other admissions documentation that is saved in Perceptive Content (Admissions Software). To help ensure appropriate access, transparency and retention, the Admissions Appeals Committee should use the same software used by Admissions to retain all application-related documents.

Recommendation 1:

All Freshman and Transfer admissions criteria should be appropriately approved and published.

Management Response:

We propose to include language in our catalog and on our website to the effect of,

If the candidate who does not meet the criteria for Guaranteed Admission, who has not submitted standardized exams (SAT or ACT) and whose high school does not supply class rank, but who does have a 3.25 unweighted GPA (or higher), that candidate will be offered unconditional admission.

If the candidate does not meet the above minimums, they still may be offered admission through our "Holistic Review" process (sometimes known as "Individual Review"). This process adds a greater emphasis on the individual courses the candidate has taken, in addition to the activities the candidate has engaged in outside of class (extra- and co-curricular activities, employment, special circumstances, etc.)."

Target Implementation Date:

3/1/2024

Responsible Party:

Interim Vice President for Enrollment Management

Recommendation 2:

The Admissions Appeal Committee should work with the Director, Systems, Enrollment Management to help ensure they are informed when changes are made to admissions criteria. The Appeals Committee should establish policies and procedures for making appeal decisions. These should be documented and reviewed on a regular basis to help ensure admission criteria are current. This policy should also include the requirement that students who are offered admission and do not meet minimum standards for automatic admission, are admitted as *conditional*. This will help ensure they are informed of academic resources and support services that will help them achieve academic success. The policy should also include the requirement to document the reason the committee elected to offer admission. Lastly, appeal records should be securely retained and accessible by all relevant admissions staff. This will allow appropriate supervisory review.

Management Response:

Our Enrollment Management Team, including Enrollment Management, Executive Director, Director of Admissions Operations, Senior Admissions Counselor, and an Appeals Committee representative met on August 22, 2023, to review the audit results, including the observation and the recommendation. At this meeting, we determined a plan of action to complete all the recommendations noted above. We will document the new policy and procedure and have already begun implementing the recommendations as of today, August 23, 2023. Post-implementation, we will include training and ongoing communication meetings between admissions staff, the Appeals Committee, and the admission processing team to continue monitoring and evaluating the findings' recommendations. Effective immediately, our Appeals Committee will, for all 2024 appeals, only use the following two decisions: Appeal Denied or Appeal Conditionally Admitted.

Target Implementation Date:

11/1/2023

Responsible Party:

Executive Director, VP for Enrollment Management

Medium

Observation B – Admissions: Security for Personal Identifiable Information

Candidate Application Documents

Deliveries that include admission records containing Personal Identifiable Information were left by carriers (Fed Ex, UPS, etc.) on a table in the hall outside the Admissions mailroom – unattended. This procedure was put in place during the COVID-19 lockdown to reduce personal contact. Once the COVID-19 restrictions were lifted, the mailroom posted a sign requesting carriers ring the bell and obtain signatures from mailroom staff. Most carriers continued to leave packages on the table, however. During this review, the drop-off table was removed from the hall and placed inside the mailroom.

Recommendation 3:

Management should develop and implement policies and procedures and regularly monitor compliance of them to ensure Personal Identifiable Information is secure. A similar issue (unlocked cabinets within department) was disclosed in a past audit. As a result, a compliance procedure related to the security of Personal Identifiable Information would be helpful.

Management Response:

Upon observation during Audit's walk-through, Admissions immediately removed the above-referenced table. Management installed a doorbell for Admissions staff to meet carriers and collect deliveries. Signage is also in place to direct carriers to ring the doorbell.

Management will develop and document a policy and procedure, including compliance, as related to the security of Personal Identifiable Information of students applying to UTA.

Target Implementation Date:

2/1/2024

Responsible Party:

Director of Admissions Operations

Observation C – Admissions: Customer Relationship Management [CRM]

Customer Relationship Management (CRM) software is widely used in higher education. CRM software has the capability to manage <u>all</u> aspects of the relationship between an institution and its stakeholders. At UTA, the CRM software is currently limited to portions of undergraduate recruitment. As a result, UTA is at a competitive disadvantage. After more than four years of development, UTA's CRM progress has been challenging due to the following:

- Sponsorship has been minimal over the life of the project due to key executive turnover and focus.
- The initiative lacks a longer range definition, roadmap, milestones and appropriate budgeting (outside of the limited undergraduate recruitment efforts).
- Over half of the CRM team's time is spent maintaining the system (i.e., not on new initiatives).

CRM Efforts are Decentralized, Resulting in Inefficiencies and Potential Duplication

Slate is the CRM considered to be UTA's defined system of record; however, several CRM initiatives exist across campus. The colleges have adopted their own versions as the centralized CRM does not yet meet their needs.

The following are several examples of various UTA departments and colleges using stand-alone CRMs:

- The College of Education and the College of Architecture, Planning & Public Affairs (CAPPA) share a version of Slate, which is
 not entirely compatible with UTA's main license for Slate. The decentralized version of Slate does not share data with the
 centralized version of Slate.
- Development & Alumni Relations uses Blackbaud Raiser's Edge, which is not integrated with Slate.
- Several colleges and departments use HubSpot, including the College of Business, CAPPA, School of Social Work, Fort Worth, and the Career Center. HubSpot does not share data with Slate.
- Housing uses MailChimp for its CRM and email campaigns, which is not integrated with Slate.
- Fire Engine Red, Constant Contact and TextEmAll are used by various departments.

Having multiple and/or disconnected CRM systems results in lower efficiency and effectiveness. UTA is unable to track communications sent to prospective students when using a system outside the University's main license for Slate. Since each department/college/school is not required to use the same CRM, students may receive multiple messages that may be repetitive or even contradictory.

Recommendation 4 [Short Term]:

A number of CRMs have been used at the University, including HubSpot, Fire Engine Red, Constant Contact, and TextEmAll. Develop and execute a strategic plan to integrate and centralize CRMs used at the University to help ensure consistent, efficient and effective messaging is being sent to students.

Management Response:

For undergraduate admissions, Slate is currently capable of hosting the message strategy used in other CRMs. Though not all features present in other CRMs exist in Slate, email, texting, direct mail and call campaigns can currently be built in Slate for areas willing to adopt Slate. Transitioning message strategies to Slate, rather than integrating other CRMs puts the University in the best position to reach this goal.

For graduate admissions, a prerequisite to integrating message strategy is building the necessary structure to host graduate recruitment student data. Since integrating the short-term solution may not be possible until March and would delay graduate recruitment development, we recommend working toward accomplishing the long-term strategy by August 2024 instead.

Target Implementation Date:

8/1/2024

Responsible Party:

Interim Senior Vice Provost for Academic Affairs

Recommendation 5 [Long-Term]:

- Efforts should be made to establish an effective and efficient CRM. Continue to focus on centralizing the marketing and tracking for admissions. Set timelines and goals to track and measure this progress.
- To avoid duplication of marketing products, work to move the College of Education's and College of Architecture, Planning & Public Affairs' (CAPPA's) efforts into the central version of Slate to help ensure consistent alignment of data protocols.
- A number of CRMs have been used at the University, including HubSpot, Fire Engine Red, Constant Contact, and TextEmAll. In the long-term, once Slate expands to graduate recruitment, UTA should use the same CRM for undergraduate and graduate admissions for the University and for individual colleges.
- Other recommendations to consider: 1. Prioritize CRM as a strategic initiative. 2. Manage CRM centrally. 3. Develop a strategic roadmap, milestones, KPIs and governance. 4. Use best practices from other UT System institutions.

Management Response:

- The University has signed a contract with an implementation partner to expedite Slate's adoption and enhance its impact related to graduate and undergraduate recruitment. A timeline, with various milestones, has been created and shared with the Interim Senior Vice Provost for Academic Affairs.
- The Slate instance shared by the College of Education and College of Architecture, Planning & Public Affairs (CAPPA) will
 be integrated with the University's instance of Slate. Once complete, the temporary Slate instance will no longer be needed.
- Training will be provided to support transitioning various areas to Slate from other CRMs. At the same time, policies and
 procedures will be developed to strengthen student communication strategies. This includes applying consistent branding,
 mitigating over/under communicating with students, and eliminating conflicting and competing message strategies.
- The University's instance of Slate is already using some features of Slate.org. Once Slate is used to manage applicant checklist items, UTA will be able to enjoy all the benefits of Slate.org. This includes allowing high school counselors to upload application-related documents on behalf of students, expediting application decisions being released to students.

Target Implementation Date:

8/1/2024

Responsible Party:

Interim Senior Vice Provost for Academic Affairs

Observation D – Admissions: Travel Expense Training Needed

Travel for Admission Recruiters

We reviewed a sample of 15 expense reports to determine whether admission recruiters were consistently following UTA policies BF-T-PR-03 *Meals, Lodging, and Miscellaneous Travel Expenses for Contiguous US Travel - Local Funds Only* and BF-T-PR-13 *Travel Card Procedure.*

Our review disclosed 23 instances of noncompliance with UTA policy. These included:

- Expense log and UTShare expense report totals did not match.
- Travel Authorization approved after the travel dates.
- State sales tax at Texas hotels charged on the Travel Card.
- GSA rate schedule not included in backup.
- Transportation tips exceeded 20% of base fare.
- Food tips exceeded 20% of subtotal (pre-tax).
- Non legible food receipts; therefore, could not determine whether the tip amount was within allowable limits.
- An outdated mileage log listing old GSA reimbursement rate was used.
- Detailed mileage reports supporting origination and destination points not attached.
- No conference agenda attached.
- Disorganized backup documentation for mileage expenses making it difficult to efficiently reconcile each trip to the expense report.

Recommendation 6:

Admissions management should have recruiters take training and enhance review process. This will help ensure accuracy and procedural compliance for travel reimbursements. In addition, backup documentation should consistently be attached and orderly as to help ensure proper and efficient expense review.

Management Response:

Admissions management has recruiters training scheduled for this Friday, September 8, 2023, and we will have an enhanced review process. This will help ensure accuracy and procedural compliance for travel reimbursements. In addition, our backup documentation will consistently be attached and orderly as to help ensure proper and efficient expense review. The training will be recorded on Microsoft Teams, so as to be available for new admissions recruiters and for staff who needs review on the training.

Target Implementation Date:

1/1/2024

Responsible Party:

Executive Director, VP for Enrollment Management

Observation E – Registrar's Office: Degree Maps are Difficult to Use

Degree Maps are setup to help guide students in assuring that they are taking the right, required courses to graduate. Degree Maps provide a listing of required courses for each degree plan and, thus, giving a student a "semester-by-semester" track to use throughout his/her academic career.

Degree Mapping System Is not User Friendly, Resulting in Limited Usage

The UTA Degree Mapping system is not easily understood by students and is challenging for most academic advisors. The College of Nursing and Health Innovation (CoNHI) developed a customized version of UTA's Degree Mapping system to address this, yet even their customized version is not student-friendly. Due to the difficulty in using the Degree Mapping system, most academic advisors do not use or even refer students to it. Instead, advisors supplement or substitute the mapping with alternative advising tools, such as a customized PDF file. In these cases, however, grades, substitutions and updates must be keyed-in manually.

No Formal Review Process for Degree Mapping

There is no formal or standardized review process to verify the accuracy of degree plans. Developing, changing or adding a course to a degree map -- especially for transfers -- can be complicated and is prone to errors. Some colleges have a strong level of review over an advisor's edits and substitutions, while others have no formal review process in place.

Manual Processes Related to Course Substitutions Can Cause Delays

Edits or substitutions are sometimes made to a student's Degree Map, leading to manual efforts and time delays. Currently, a separate Transfer Evaluation System (TES) is used to determine whether a course from another institution can be used as a substitute. Additionally, if the institution's course is not listed in TES, the academic advisor must contact the appropriate college for course evaluation. Often the turnaround time for these course evaluations takes 2 to 3 weeks.

Recommendation 7:

The Degree Maps should be simplified in order to be easily understood by students and advisors. The process for reviewing edits made to the Degree Map should be standardized across all colleges and schools. This should include a required review of all directives (course substitutions) course waivers, and course hours. The Office of the Registrar should consider being the last review to help ensure edits have been made accurately and in accordance with the UTA Catalog.

Management Response:

A project to address the process(es) of course directives/substitutions is already underway. The updated process will provide efficiency and ease of advisor entry, and will also provide better service to students by allowing the substitution to carry with them throughout their career, regardless of major. For centralized review of course directives/substitutions, the addition of an approval workflow will be requested by the project team for evaluation and feasibility. Additionally, the Office of the Registrar and the Division of Student Success will work to devise policy and/or practice around standard degree audits at key milestones through the student career, to help ensure accuracy in degree progress and transparency to the students about their progress.

Target Implementation Date:

8/2/2024

Responsible Party:

University Registrar, Office of the Registrar Associate Vice Provost, Division of Student Success

Observation F – Registrar's Office: Space Planning Automation

Further Automation Needed to Promote Effective and Efficient Space Planning

All academic spaces (i.e. classrooms, meeting rooms, labs, etc.) and campus events are scheduled through Ad Astra, UTA's space planning software. The current software does not provide a complete automation of the process, therefore, a significant amount of scheduling is done manually. Spreadsheets with class schedules from the previous semester are rolled forward, and used to edit class times and create a final schedule for the upcoming semester.

Recommendation 8:

The Office of the Registrar should automate the classroom scheduling process to eliminate manual data entry. Automation will reduce the risk of human error and likely increase efficiency. This will help UTA retain its current placement in the Texas Higher Education Coordinating Board's Space Use Efficiency rankings that impacts the amount of state funding UTA receives.

Management Response:

The Office of the Registrar utilizes Ad Astra for academic and event scheduling in academic spaces, following the production of the course schedule created in the student information system (PeopleSoft/MyMav) each term. In planning space for academic use, the Ad Astra optimizer functionality is used after the team manually assigns the rooms that are necessary for pedagogical circumstances. The scheduling team plans to continue to evaluate the efficiency and accuracy of the optimizer functionality, as well as continuing to explore any additional Ad Astra functionality that may support additional operational efficiencies and automation. The course schedule creation process also continues to be evaluated, with plans to implement the CourseLeaf CLSS module in the coming year. CLSS would give the team the power to centralize and manage the course schedule across departments through the software workflow process with a direct feed to the class schedule in MyMav, eliminating the need for spreadsheets and manual data entry. It also allows for automation in terms of validating and configuring appropriate meeting patterns, streamlining schedule changes, and balancing prime time scheduling.

Target Implementation Date:

8/1/2024

Responsible Party:

University Registrar, Office of the Registrar

Observation G – Student Affairs: Health Services, Pharmacy Procedures

Policy & Procedure Needs to be Updated and Reviewed

In accordance with Pharmacy Policy & Procedure 745, evidence of an annual review by the Chief Pharmacist and Health Services Director is to be documented on policy documents. A policy review was recorded in the Advisory Committee Meeting minutes in 2020 and 2022 (no review in 2021). However, the last required annual review noted on the policy documents was in 2016.

Our review of the policy documents disclosed they were not current or complete. The following was noted:

- The policy discusses *Prescription Pick-Up After Hours* (Procedure 510). This practice was discontinued.
- The policy does not include procedures for how to price non-prescription medication and other items sold by the pharmacy (front of the counter).
- The policy does not include the requirement to change codes used to gain access to the pharmacy on a regular basis. Instead, codes are changed only when staffing changes occur (Procedure 760).

Recommendation 9:

Per Pharmacy policy, UTA's Health Services should review and update their Pharmacy Policies & Procedures on an annual basis. The policy update should include about pricing non-prescription medication and other non-prescription items sold in the pharmacy. The policy should also include the requirement to change pharmacy entry codes on a regular basis rather than only when an employee departs Health Services. Policies and procedures are an essential part of any organization and outdated polices could result in inconsistent practices.

Management Response:

Upon review of Health Services' policies and procedures as stored in SharePoint Library, it was discovered certain archived policies were still in the active policy file. When the UTA Audit team was provided the library in April 2023, archived policies were unknowingly given as well that included pharmacy policies 510 and 745. Despite an investigation, it is not clear what caused the errant duplication of archived policies. To guard against future inadvertent file duplication or migration, SharePoint access to these files has been changed to "read-only" for all users except for Health Services' department heads. In addition, a hard copy of current policies and procedures will be printed annually as a back-up to the digital copy. Health Services will consider purchasing an approved policy management software system.

Management Response (continued):

Administrative Policy and Procedure 301 was updated to include the procedure for pricing of non-prescription medications and other items that are sold in the pharmacy.

Pharmacy Policy and Procedure 760 was updated to include that pharmacy door and alarm codes will be updated once a semester as well as when a pharmacy staffing change occurs. The codes have now been changed for the fall 2023 semester.

Target Implementation Date:

5/1/2024

Responsible Party:

Director, Health Services

Observation H – Student Affairs: Health Services, System Access/Oversight

Pharmacy Software User Access Controls

A periodic review of users who have access to software and data used by Health Services was not performed on a regular basis. Additionally, the department did not have an appropriate protocol to remove systems access when Health Service employees leave or transfer. Point and Click is software that is used by Health Services for billing and maintaining health records for student patients. Our review of system's access to Point and Click disclosed that approximately 10% (8 of 77 users) had terminated employment with UTA or transferred out of UTA's Health Services.

SOC 2 Type 2 Reporting Was Not Consistently Requested or Reviewed

A SOC 2 Type 2 report provides a summary of whether a vendor has adequate internal controls related to security, confidentiality, processing integrity, privacy and availability of customer data. The SOC 2 Type 2 report for the Point and Click software was not requested or reviewed by the Information Analyst, Health Services. Because the Point and Click software houses billing and health records, the SOC 2 Type 2 report should be reviewed annually to help ensure vendor controls are adequate.

Recommendation 10:

A review of users who have access to software used by Health Services should be performed on a regular basis by the Information Analyst, Health Services. Additionally, a protocol should be developed to remove access to the Point and Click software if a user leaves or transfers out of Health services. User access review is a key component of the access management process and can help reduce cybersecurity risks.

A review of the SOC 2 Type 2 report for Point and Click should be performed on an annual basis. Monitoring how a vendor safeguards data and understanding how well those controls are operating is a necessary component of software management and safeguarding patient information.

Management Response:

Administrative Policy and Procedure 600 was updated to reflect that the Information Analyst will audit the list of users for the electronic health record twice a year, removing any user that no longer should have access. In addition to this, the policy also outlines that direct supervisors should notify the Information Analyst when an employee no longer needs access to the electronic health record (upon resignation, termination or transfer, for example). The Information Analyst completed a review of current users on August 22, 2023. Moving forward he will review current users in between the fall and spring semesters and the spring and summer semesters.

Observation H – Student Affairs: Health Services, System Access/Oversight (cont.)

Medium

Management Response (continued):

The Information Analyst has obtained a copy of the SOC 2 document from the electronic health record vendor and reviewed it on August 22, 2023. The SOC 2 document will be obtained from the vendor and reviewed annually.

Target Implementation Date:

2/1/2024

Responsible Party:

Clinical Systems Information Analyst, Health Services

Observation I – Student Affairs: Transition Programs, Cash Handling

Cash and Check Handling

A \$275 working fund is used by Transition Programs and Services (TPS) which is a part of Student Affairs. The working fund is used to make change for parents who purchase Maverick Parent and Family Association Memberships and shirts during New Maverick Orientation, Parent & Family Weekend and Spring Family Day. The fees collected are also used to fund various TPS student programs offered throughout the year.

To help ensure proper cash handling, our test work included reviewing a sample of daily cash collections and deposits made by TPS. Our review of five deposits and supporting documentation disclosed the following:

- The majority of cash deposits (4 of 5) were not made on timely basis. One cash deposit in the amount of \$1,600 was made over 7 weeks after the receipt date. Three additional deposits (averaging over \$1,500) were not made until the last day of four-day student events. UTA Procedure BF-S-PR14 Cash and Check Handling requires deposits to be made daily if the amount collected exceeds \$500.
- Management review for deposit accuracy should be improved. For one deposit in our sample, we also noted that the Departmental Deposit receipt and the Cash Book receipt did not match. Additionally, there was a math error in totaling the cash total in the log book. The correct amount of \$2,170 was deposited; however, the total in the Cash Book was erroneously stated at \$2,100.

Recommendation 11:

Management should enhance monitoring of deposits to help ensure deposits are made timely in accordance with UTA Procedure BF-S-PR14 *Cash and Check Handling*. In addition, the monthly reconciliation process should include a verification that items recorded in the Cash Book agree to the amount recorded in UTShare. Lastly, management should consider an alternate method for collecting payment that does not include cash.

Management Response:

As a result of decreased cash revenue, cashless business trends and the Working Fund Audit, the Office of Parent & Family Services will no longer accept cash for membership, merchandise, or event purchases. Staff will work to return the \$275 and close the account associated with the Parent & Family Services Working Fund. Additionally, an update will be written on the current Cash Handling Policy for the department.

Target Implementation Date:

10/2/2023

Responsible Party:

Director, Transition Programs & Services

Observation J – Student Affairs: Residence Hall Access

Residence Hall Access Removal for Mid-Semester Move Outs Could Be More Timely

For various reasons, approximately 2% of residents move out of a residence hall in the middle of the semester. Our review disclosed that former residents retained access to a residence hall after their move-out date. Based upon a sample review of three residents who moved out mid-semester, the number of days between move-out and de-activation dates was an average of nine days. One student in the sample maintained electronic card access to their residence hall for 18 days after he moved out. Allowing unauthorized individuals access after they have moved out from the residence hall should be minimized.

Recommendation 12:

We discussed this observation with the Executive Director, Auxiliary Services. He quickly took the initiative to meet with other appropriate departments (i.e., Apartment & Residence Life, University Housing, and the Mav ID Office) to develop a long, medium and short-range plan to address this observation. The action plan was developed quickly and appropriately addresses the risk. As a result, we recommend moving forward with it.

Management Response:

Removal of card access privileges at the end of the semester is automated and timely. Removal of card access privileges for residents who check-out during the middle of the semester (a much smaller population) is currently a more manual and less timely process.

Apartment and Residence Life, University Housing, and Mav Express met and developed phased processes to improve the timely removal of access privileges for residents who check-out during the middle of the semester.

Phase 1:

Manual processes were developed to enhance the timely removal of residents' access privileges following a mid-semester move out. Effective September 15, 2023.

Phase 2:

University Housing is in the process of migrating its housing management system (StarRez) to a cloud-based platform (effective November 7, 2023). Processes were developed to enhance the timely removal of resident access privileges following a mid-semester move out once the migration to the cloud is complete. Effective December 1, 2023.

Observation J – Student Affairs: Residence Hall Access

Phase 3:

Once the migration is complete during the fall 2023 semester, University Housing plans to purchase and implement an online app-based check-in/check-out and room condition inventory module which will enhance and automate much of the workflow required by the current process. Effective June 1, 2024.

Housing management staff will ensure timely completion of the tasks above by providing oversight.

Target Implementation Date:

6/1/2024

Responsible Party:

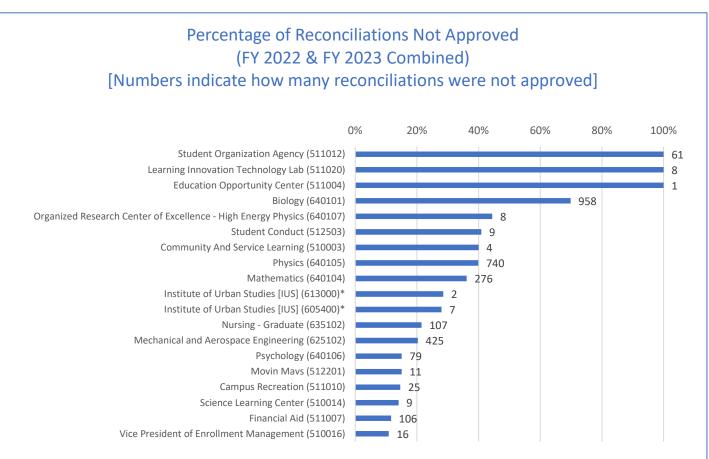
Associate Director, Auxiliary Services

Observation K – Financial: SAHARA Financials not Consistently Approved

Approximately 6.6% of SAHARA Monthly Statement of Accounts Were not Completed on a Monthly Basis

Each department is to maintain accurate financial records. A part of this requirement includes reconciling and approving the financials each month in SAHARA (UTA's accounting system) for their Cost Centers.

We reviewed SAHARA reconciliations for departments reporting to the Office of the Provost for the period September 2021 through May 2023. During this time frame, the average percentage of SAHARA reconciliations not approved was 6.6%. There were 19 departments with more than 10% of their monthly SAHARA reconciliations not approved.



^{*} Due to a reorganization, 613000 is the previous department number and 605400 is the current one.

Recommendation 13:

Collaborate with Knowledge Services to create a query or report to assist in reviewing monthly SAHARA reconciliation approvals.

All account owners should be on the Business Affairs Training email distribution list, in order to receive emails on each month's deadlines.

Training on SAHARA, the software used in account reconciliations, is required for reconcilers. A course on basic accounting, "Managing Department Funds", is a suggested prerequisite for the SAHARA training. Both courses are offered through Knowledge Services.

If an account owner needs assistance with SAHARA or basic accounting, it is highly recommended that the employee complete the related training (in the case of reconcilers, this may involve the SAHARA course being repeated). If an account owner fails to reconcile or approve accounts for two consecutive months, serious consideration should be given to completing both courses. If an account owner fails to reconcile/approve accounts for three consecutive months, both courses should be required.

Management Response:

Thank you for bringing this to my attention. I am asking the Assistant V.P. for Academic Resource and Planning and the Academic Resource Planning team to work with the unit heads and staff in the units that are not in compliance to determine why this has occurred and what steps they will take to ensure that the non-compliance does not continue. Those steps will including the above recommendations for training, receiving emails on deadlines, and creating a query to assist management.

Target Implementation Date:

3/1/2024

Responsible Party:

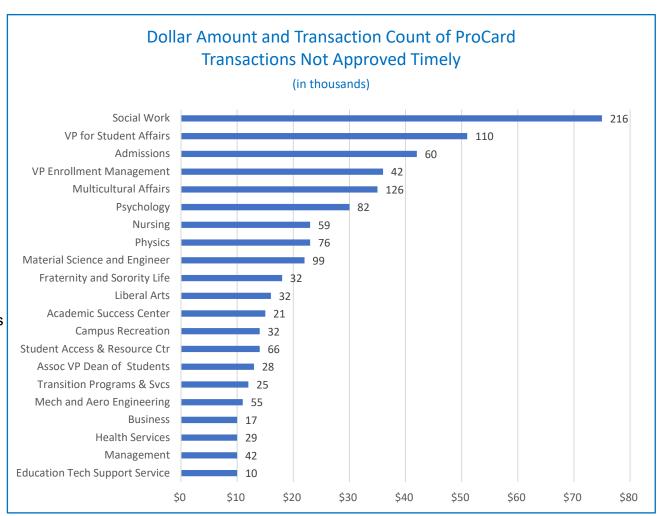
Provost, Office of the Provost

Observation L – Financial: ProCard Transactions not Consistently Approved

Approximately 4% of ProCard Transactions Were Not Approved Timely

We reviewed ProCard expenditures during the period January 2022 through September 2023 for each department reporting to the Office of the Provost to determine whether they were approved by monthly deadlines.

Our review disclosed that were 21 departments where the *dollar amount* of ProCard transactions that were not approved on a timely basis was greater than \$10,000.



Observation L – Financial: ProCard Transactions not Consistently Approved (cont.)

Recommendation 14:

Management should help ensure that departments reporting to the Office of the Provost are in compliance with UTA Procedure BF-PGC-PR12 *Purchasing Card Program*. Relevant staff should be trained to help ensure all ProCard expenditures are reviewed and approved in accordance with UTA's monthly deadlines. In addition, collaborate with Knowledge Services to create a query to assist management in verifying that ProCard expenditures are being reviewed and approved on a monthly basis. Monthly review and approval may prevent unallowable expenditures from going unnoticed.

Management Response:

Thank you for bringing this to my attention. I am asking Assistant V.P. for Academic Resource and Planning and the Academic Resource Planning team to work with the unit heads and staff in the units that are not in compliance to determine why this has occurred and what steps they will take to ensure that they non-compliance does not continue. Those steps will including the above recommendations for training and creating a query to assist management.

Target Implementation Date:

3/1/2024

Responsible Party:

Provost, Office of the Provost

Observation M – Credential Validation for Newly Hired Faculty

Faculty Credential Process and Policy

The hiring process between Faculty Affairs and Academic Planning & Policy and the Office of Talent, Culture and Inclusion is not functioning efficiently and effectively. While there is a standardized process in place to verify faculty credentials, there is not a consistent understanding of policy and procedure.

Recommendation 15:

For an effective and efficient process in hiring and validating faculty credentials, Faculty Affairs, and the Office of Talent, Culture and Inclusion (Human Resources/Academic HR) should work together to help ensure a consistent understanding of faculty hiring and credential verification policy. Additionally, a consistent policy for storing process and policy materials in a centralized location should also be developed to allow appropriate access to all stakeholders, including academic staff, chairs, and deans.

Management Response:

Faculty Affairs, Office of Talent, Culture and Inclusion /Academic Office of Talent, Culture and Inclusion, and Institutional Effectiveness and Reporting will work together to help ensure a consistent understanding of faculty hiring and credential verification policies and procedures. Representatives from each of these three units will meet to evaluate current practices and design a stream-lined effective process for accomplishing the goal. With regards to storing the related documentation, SharePoint is the centralized repository for all credentials, with a flow process for approval from chair to Provost. All documentation related to faculty credentialing will continue to be stored in SharePoint.

Target Implementation Date:

1/1/2024

Responsible Party:

Vice Provost for Faculty Affairs

Background, Audit Objective, and Scope & Methodology

Background

UTA has a number of key leadership positions that have been filled in the last year - presenting unique challenges and risks. To help new management get an overview of the control environment of their respective department(s), the Office of Audit and Consulting Services is performing Operation Fast Start reviews.

The risk assessment and audit scope were developed after auditors met with key leadership reporting to the Office of the Provost to discuss areas of concern. The scope of the audit included Enrollment Management, Student Affairs, Registrar's Office, and certain Colleges.

Additional audit work was performed separately in an audit titled UTA23-14 Financial Aid. The audit report for that audit was issued in July 2023. Finally, supplemental Operation Fast Start audits will be performed with each of the newly appointed Deans in FY 2024. Additional full scope audits scheduled for FY 2024 in the Office of the Provost include Scholarships and Enrollment Management.

Audit Objective

The objective of the Operation Fast Start Audit was to assist the Provost and Senior Vice President for Academic Affairs in identifying administrative control opportunities, system security, unit-specific concerns, as well as opportunities to improve efficiency and effectiveness.

Audit Scope and Methodology

The scope of the audit was from January 2022 through May 2023.

The audit was conducted in conformance with the Institute of Internal Auditors' *International Standards for the Professional Practice of Internal Auditing*. Additionally, we conducted the audit in accordance with Generally Accepted Government Auditing Standards (GAGAS). Both standards are required by the Texas Internal Auditing Act, and they require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives. The Office of Audit and Consulting Services is independent in both standards for internal auditors.

Ranking Criteria – Operation Fast Start Audit – Office of the Provost

Ranking Criteria

All findings in this report are ranked based on an assessment of applicable qualitative, operational control and quantitative risk factors, as well as the probability of a negative outcome occurring if the risk is not adequately mitigated. The criteria for these rankings are as follows:

Priority	An issue identified by an internal audit that, if not addressed on a timely basis, could directly impact achievement of a strategic or important operational objective of UTA or the UT System as a whole.
High	A finding identified by an internal audit that is considered to have a medium to high probability of adverse effects to UTA either as a whole or to a significant college/school/unit level.
Medium	A finding identified by an internal audit that is considered to have a low to medium probability of adverse effects to UTA either as a whole or to a college/school/unit level.
Low	A finding identified by an internal audit that is considered to have minimal probability of adverse effects to UTA either as a whole or to a college/school/unit level.

None of the findings from this review are deemed as a "Priority" finding.

Distribution – Operation Fast Start Audit – Office of the Provost

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