



Office of Institutional Success and Decision Support

Audit Report No. 2615

June 15, 2026



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Executive Summary

Audit Objective

To assess the adequacy and effectiveness of the Office of Institutional Success and Decision Support's governance framework, risk management processes, and internal controls in supporting compliance, safeguarding resources, reliable and accurate information, the effective and efficient use of resources, and achieving strategic and operational objectives.

Primary Risk Type

Finance

Date of Last Audit

5/6/2013 (Office of Strategic Planning and Analysis)

Controls and Strengths

Effective controls are in place in the following areas:

- Additional and supplemental pay controls are in place to ensure that additional compensation is properly authorized and complies with university procedures.
- Data Warehouse access is protected by Single Sign-on and Multifactor Authentication, ensuring that the university's data is protected from unauthorized users.

Overall Conclusion

Overall, the Office of Institutional Success and Decision Support has good internal controls in place. Improvements in the areas of expense documentation and asset management will help enhance the effectiveness and efficiency of controls over the reliability and accuracy of financial information and safeguarding resources.

Observations by Risk Level

Management has reviewed the observations and has provided responses and expected implementation dates. Detailed information is included in the attached report.

Observation	Risk Level	Management's Implementation Date
1. Expense Documentation	Medium	9/1/2026
2. Asset Management	Low	9/1/2026

For details about the audit procedures, explanation of risk levels, and report distribution, please see Appendices A, B, and C, respectively, in the attached report.



Detailed Audit Results

The following reportable observations, presented in order of risk, identify opportunities to strengthen controls in the areas of cost center oversight and asset management. Minor recommendations related to cost center management and conflict of interest were shared verbally with management. See Appendix B on page 10 for definitions of observation risk rankings.

1. Expense Documentation

Medium Risk: Insufficient documentation to support the competitive award of scholarships, combined with the absence of formalized expense policies and procedures, increases the risk of noncompliance, inconsistent application of controls, and diminished oversight, which may result in improper expenditures or potential fraud, waste, or abuse.

Observation

The Office's non-salary expenses totaled approximately \$180,000 for FY25 through the second quarter of FY26. We tested a sample of expenses to evaluate the effectiveness of internal controls, including compliance with applicable policies, procedures, and regulations and the adequacy of supporting documentation. Our review identified the following issues:

- **Insufficient Supporting Documentation for Scholarship Awards**
Two expenditures related to a competitive scholarship awarded to a graduate assistant lacked adequate supporting documentation. Specifically, staff were unable to provide documentation or evidence demonstrating that the scholarship was awarded through a competitive selection process, as required by State law.
- **Lack of Departmental Expense Policies and Procedures**
The Office has not established formal, documented policies or procedures governing departmental procedures for expenses.

Criteria

Texas Education Code, Title 3, Section 54.213¹ - "An institution of higher education may charge a nonresident student who holds a competitive scholarship of at least \$1,000 for the academic year or summer term for which the student is enrolled resident tuition and fees without regard to the length of time the student has resided in Texas. The student must compete with other students, including Texas residents, for the scholarship and the scholarship must be awarded by a scholarship committee officially recognized by the administration and be approved by the Texas Higher Education Coordinating Board under criteria developed by the coordinating board."

Management's Action Plan

The student selected to receive the scholarship award was originally hired as a Graduate Assistant prior to the creation of the Office of Institutional Success and Decision Support. OISDS's inaugural Associate Vice President was responsible for awarding the scholarship and the student has since graduated.

¹ TEC, Title 3, Section 54.213



The office will no longer hire students in positions that include tuition and fee assistance. Beginning in fall 2026, student workers hired to the department are hourly employees and staff members follow established university procedures related to the employment of student workers.

The department will develop policies and procedures for expenses and financial transactions that align with the relevant university policies. The policies and procedures along with training will be provided to OISDS staff by 9/1/2026.

Action Plan Owners:

Raul Hinojosa Jr., Assistant VP of Policy and Process Improvement; Vy Trang, Assistant Director of ISDS

Due Date:

9/1/2026



2. Asset Management

Low Risk: The absence of effective monitoring, complete asset tracking, and appropriate segregation of duties increases the risk of asset misstatement, loss, or misuse, limits timely detection of discrepancies, and may result in financial loss, diminished stewardship of University resources, and noncompliance with State and institutional requirements.

Observation

At the time of our audit, the Office of Institutional Success and Decision Support was responsible for 70 assets totaling approximately \$235,000. We tested controls over assets for governance, completeness and accuracy, existence, compliance, and monitoring controls related to asset inventory and noted the following:

- Departmental staff do not perform periodic spot checks throughout the year. Implementing periodic spot-check reviews would help verify asset existence and condition.
- Locations of remote assets are not tracked. Maintaining a centralized log requiring employees to periodically confirm remote asset locations would help ensure proper tracking.
- One employee is responsible for managing the inventory process. Ensuring evidence exists that shows the department head is reviewing the annual and periodic inventories would help ensure a proper segregation of duties.
- One asset did not have the proper custodian listed in PeopleSoft or departmental records. The periodic checks could help alleviate this issue.

Criteria

According to UTDBP3066 – Property Administration Policy, “Each department head acts as the custodial authority for the personal property within his/her allocated area and is responsible for the stewardship and maintenance of UTD property. It is important that accurate property control records be maintained, not only at the University level, but also at the departmental level....”²

Management’s Action Plan

The OISDS Assistant Director has primary responsibility for tracking department assets and completing the annual inventory for approval by the department head. The Assistant Director has a new direct report (Administrative Project Coordinator) who will be cross trained in asset tracking to enable segregation of duties and as a department backup. Training will occur in summer 2026.

Beginning fall 2026, the OISDS Assistant Director will complete a spot check of stationary and mobile assets at least once per semester and report any discrepancies to the department head. The tracking of assets used remotely will be added to department records.

Action Plan Owners:

Vy Trang, Assistant Director of ISDS; Jesslyn Palmer,
Administrative Project Coordinator

Due Date:

9/1/2026

² UTDBP3066 – Property Administration Policy: <https://policy.utdallas.edu/utdbp3066>



Overall Conclusion

Overall, the Office of Institutional Success and Decision Support has good internal controls in place. Improvements in the areas of expense documentation and asset management will help enhance the effectiveness and efficiency of controls over the reliability and accuracy of financial information and safeguarding resources.

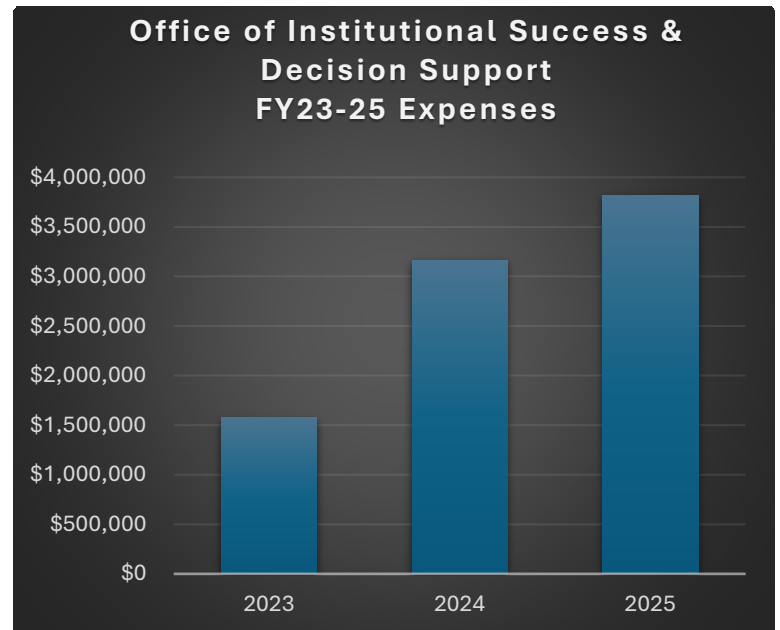


Appendix A: Information Related to the Audit

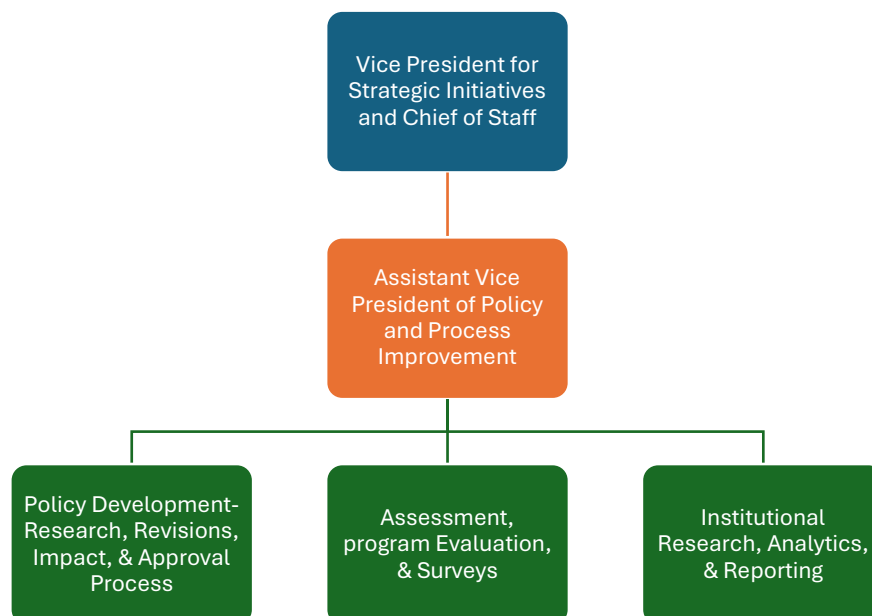
Background

The Office of Institutional Success and Decision Support's (OISDS) supports institutional success by providing the data, tools, governance, and evaluation frameworks needed for effective strategic planning and informed decision-making across the university³.

OISDS reports to the Vice President of Strategic Initiatives and Chief of Staff. As shown in the chart below, their expenses totaled approximately \$3.8 million in FY25.⁴ As of June 1, 2026, the Institutional Success Technology & Data Warehouse function of OISDS was reorganized and moved under the Office of Information Technology. The Office of Institutional Support & Decision Success now includes the following areas listed in the organization chart.



OISDS Organization Chart



³ <https://oisds.utdallas.edu/>

⁴ UTD Reporting Console, Operating Fund Balance and Budget



Audit Objective

To assess the adequacy and effectiveness of the Office of Institutional Success and Decision Support's governance framework, risk management processes, and internal controls in supporting compliance, safeguarding resources, reliable and accurate information, the effective and efficient use of resources, and achieving strategic and operational objectives.

Scope

The scope of the audit was fiscal year 2025 and 2026, to April 2026. The audit began in February 2026, and the audit concluded on June 2, 2026.

Methodology

The audit was conducted in conformance with the Institute of Internal Auditors' Global Internal Audit Standards™. Additionally, we conducted the audit in conformance with generally accepted government auditing standards (GAGAS) as applicable. Both standards are required by the Texas Internal Auditing Act, and they require that we plan and perform the audit to obtain sufficient, proper 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 observations and conclusions based on our audit objectives.

Our procedures included interviews, observations of processes, reviews of documentation, and testing. The following table outlines our procedures and observations for each of the audit area objectives performed.

Audit Area	Procedures	Observations Related to the Audit Area
Gaining an Understanding	Conducted interviews with key personnel and reviewed relevant documents, including policies and procedures, to gain an understanding of the Office's operations and identify potential areas of risk. Utilized risk assessment techniques to determine audit priorities and focus areas.	N/A
Expenses	Determined if controls over expenses were adequate to ensure the efficiency and effectiveness of processes, the achievement of organizational objectives, the reliability of and integrity of financial information, and compliance with laws, regulations, policies, and procedures.	#1
Asset Management	Determined if controls over assets were adequate to ensure the efficiency and effectiveness of processes, the reliability of and integrity of financial information, the	#2



Audit Area	Procedures	Observations Related to the Audit Area
	safeguarding of assets, and compliance with laws, regulations, policies, and procedures.	
Additional/Supplemental Pay	Assessed whether controls over additional pay were adequately designed and operating effectively in compliance with UTD policies.	N/A
Cost Center Reconciliations	Tested controls over cost center reconciliation departmental procedures, segregation of duties, and reconciler/approver appropriateness.	N/A
Conflict of Interest and Commitment	Tested for compliance with UTD's Conflicts of Interest and Conflicts of Commitment policies.	N/A
Access Management	To determine if access management controls in the Data Warehouse are effective to ensure that unauthorized users do not gain access and perform malicious activities.	N/A

Follow-up Procedures

Though management is responsible for implementing the course of action outlined in the response, we will follow up on the status of implementation after the expected implementation dates. Requests for extension to the implementation dates may require approval from the UT Dallas Audit Committee. This process will help enhance accountability and ensure that prompt action is taken to address the observations.



Appendix B: Observation Risk Rankings

Audit observations are ranked according to the following definitions, consistent with UT System Audit Office guidance.

Risk Level	Definition
Priority	If not addressed immediately, a priority observation has a significant probability to directly affect the achievement of a strategic or important operational objective of UT Dallas or the UT System as a whole. These observations are reported to and tracked by the UT System Audit, Compliance, and Risk Management Committee (ACRMC).
High	High-risk observations are substantially undesirable and pose a high probability of adverse effects to UT Dallas either as a whole or to a division/school/department level.
Medium	Medium-risk observations are considered to have a moderate probability of adverse effects to UT Dallas either as a whole or to a division/school/department level.
Low	Low-risk observations are considered to have a low probability of adverse effects to UT Dallas either as a whole or to a division/school/department level.
Not Reportable	Some recommendations made during an audit are considered of minimal risk, and the observations are verbally shared with management during the audit or at the concluding meeting.



Appendix C: Report Submission and Distribution

We thank the Office of Institutional Success and Decision Support management and staff for their support, courtesy, and cooperation provided throughout this audit.

Respectfully Submitted,

DocuSigned by:

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Toni Stephens, CPA, CIA, CRMA, Chief Audit Executive

Distribution List

Members and ex-officio members of the UT Dallas Institutional Audit Committee

Responsible Vice President

Dr. Brian Ten Eyck, Vice President for Strategic Initiatives and Chief of Staff

Action Plan Owners and Key Stakeholders

- Dr. Raul Hinojosa Jr., Assistant VP of Policy and Process Improvement
- Ms. Vy Trang, Assistant Director of ISDS
- Jesslyn Palmer, Administrative Project Coordinator

External Parties

- The University of Texas System Audit Office
- Legislative Budget Board
- Governor's Office
- State Auditor's Office

Engagement Team

Project Manager: Ms. Toni Stephens, CPA, CIA, CRMA, Chief Audit Executive

Project Leader: Mr. Brian Seale, Internal Auditor II