



September 23, 2021

**TO:** THE DISTRICT BOARD OF TRUSTEES  
OF VALENCIA COLLEGE

**FROM:** KATHLEEN PLINSKE  
President

**RE:** APPROVAL OF ANNUAL AUDIT PLAN – FY 2021-2022

The Office of Compliance and Audit supports and assists the District Board of Trustees and Senior Management in the accomplishment of college goals and objectives by providing:

- Independent, objective assurance and advisory services
- A centralized source of information and guidance on all compliance obligations

This report represents the Office of Compliance and Audit's 2021–2022 annual audit plan. The intent is to communicate the plan to the District Board of Trustees, obtain their approval of the plan and demonstrate compliance with applicable standards.

**RECOMMENDED ACTION:**

The President recommends that the District Board of Trustees of Valencia College approve the Annual Audit Plan for Fiscal Year 2021-2022, as presented.

A handwritten signature in black ink that reads "Kathleen Plinske". The signature is written in a cursive, flowing style.

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President

VALENCIA COLLEGE

# Office of Compliance and Audit Proposed 2021 – 2022 Work Plan



Cynthia Santiago-Guzman  
Compliance and Audit  
September 23, 2021

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## Executive Summary



The Office of Compliance and Audit supports and assists the District Board of Trustees and Senior Management in the accomplishment of College goals and objectives by providing

- Independent, objective assurance and advisory services
- A centralized source of information and guidance on all compliance obligations

The Office of Compliance and Audit reports functionally to the District Board of Trustees and administratively to the Office of the President. This reporting structure promotes independence and full consideration of audit recommendations and management action plans.

The Institute of Internal Auditors' (IIA) International Standards for the Professional Practice of Internal Auditing provides standards requiring the internal audit activity to:

- Develop a risk-based audit plan
- Communicate the plan and resource requirements to the Board
- Obtain Board approval of current year audit plan
- Provide the Board with periodic status updates
- Obtain Board approval of the internal audit charter

The audit plan was developed using a risk assessment process that was driven by our understanding of the College's mission and strategic priorities. A major component of the risk assessment included collaborative discussions with management and review of prior internal and external audit engagements to assist in the prioritization of key risks and controls.

A 1-year audit plan was developed based on the risk assessment process. The intent is to communicate the 2021-2022 audit plan to the District Board of Trustees and obtain their approval of the plan.

Notable goals for the upcoming year include the following items:

- Assist the College in evaluating and assessing the HEERF/CRRSSA funding and disbursement processes to ensure compliance with Federal guidelines and laws;
- Continue collaborative advisory and monitoring engagements aligned to the College's strategic mission and vision in areas of high risk, expansion and growth within the College; and
- Update the College's Office of Compliance and Audit website, training resources, and compliance information library.

## Purpose

The Office of Compliance and Audit was established within Valencia College ('College') by the District Board of Trustees to provide independent, objective assurance, education and advisory services designed to add value and improve the College's operations. The office serves as the College's internal auditor, providing internal audits and reviews, advisory services, investigations of improper activities, follow-up of audit recommendations, and evaluation of the processes of risk management and governance, and coordination with external auditors including the Florida Auditor General's office.

The Office of Compliance and Audit reports functionally to the District Board of Trustees and administratively to the Office of the President. This reporting structure promotes independence and full consideration of audit recommendations and management action plans.

## Internal Audit Disclosures

The Institute of Internal Auditors' (IIA) International Standards for the Professional Practice of Internal Auditing requires the reporting of specific items to an organization's Board and Senior Administration. The following is a list of required disclosures:

### Organizational Independence

The Director of the Office of Compliance and Audit performs the internal audits of the College and must confirm to the Board, at least annually, the organizational independence of the internal audit activity. In order to effectively fulfill its responsibilities, the Office of Compliance and Audit is organizationally independent from the College's operational activities and structurally reports at an appropriate level within the organization. The Office of Compliance and Audit reports functionally to the College's District Board of Trustees and administratively to the College President. This reporting relationship ensures responsibilities are carried out in a manner free from actual or perceived impairment.

### Impairments to Independence or Objectivity

If independence or objectivity is impaired in fact or appearance, the details of the impairment must be disclosed. There were no impairments to independence or objectivity for any engagements performed requiring disclosure.

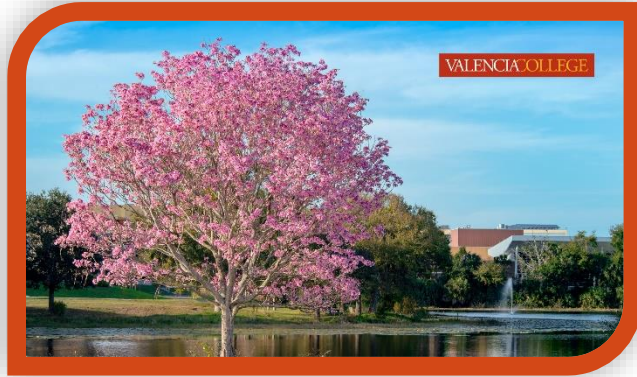
### Management's Acceptance of Risks

Each engagement can potentially identify activities that may present exposures to the College that could potentially impede the College from achieving its goals or expected outcomes. Such exposures are considered risks to College operations. Risks are a part of any business operation. The acceptance of some risk by management is understood due to cost/benefit constraints and progression of the institution.

When the Director of Compliance and Audit concludes that management has accepted a level of risk that may be unacceptable to the College, the Director must discuss the matter with Senior Administration. If the Director determines the matter has not been resolved, the Director must communicate the matter to the Board. There were no instances noted of unacceptable levels of risk during the work conducted requiring disclosure.

## Audit Strategic Goals

The Office of Compliance and Audit continues to work towards key strategic goals that will create a foundation for continued success and alignment with College objectives. As we continue to improve our operations, we need to focus on achieving specific goals both short-term and long-term. Our strategic objectives include:



1. Improve the effectiveness of the College governance, risk management and control processes.
2. Assist the College in the discharge of their oversight, management and operating responsibilities.
3. Support the College's efforts to identify, evaluate and mitigate risks.

## Risk Assessment

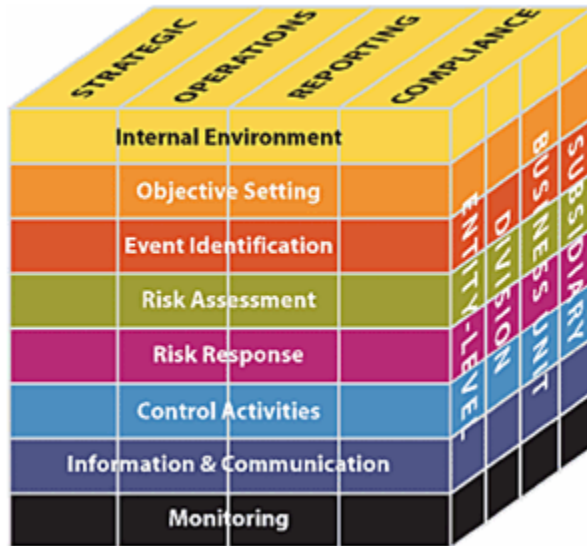
The Office of Compliance and Audit in collaboration with management developed a risk-based audit plan to focus audit priorities on areas where risk exposure is potentially the greatest. Assessing risk is an essential component of risk-based audit planning. The current risk assessment methodology is one that consistently applies qualitative and quantitative risk factors to a set of functions and processes. The result is a risk score that translates to a risk rating for identified business processes.

Areas are selected for audit based on an annual college-wide risk assessment. This risk assessment takes into consideration operational, compliance, financial, and reputational risks, as well as areas of management concern. The purpose of the risk assessment is to assess the likelihood and impact of the risks to the College, by measuring and prioritizing risks in order to focus management's attention on the most important threats and opportunities and to begin the work for risk responses.

The risk assessment serves as a means to

- Identify programs and activities performed by the College
- Evaluate each program and activity based on indicators of risk exposure or risk factors
- Develop an audit plan based on an enterprise-wide approach focusing on risk and resource availability

The College has adopted the risk-based approach based on the framework developed by the Committee of Sponsoring Organizations (COSO). Integrating enterprise risk management in this framework to support the College's mission, strategies and related business objectives allows audit to consider risks and opportunities that influences all levels of the College. Utilizing the COSO framework for the risk assessment provides for:



1. Consideration of all aspects of risk – positive and negative
2. Identify and manage risks entity-wide – considering risks that originate in one area but impact a different area
3. Collaboration across all areas of the College in consideration of not only identifying risks, but also establishing appropriate responses
4. Allows for anticipation of risks to enable actions to minimize disruption and maximize student success
5. Assessment of resource needs and resource allocation to address current and potential risks
6. Focus on increased and changing complexities of the current environment with alignment to strategic goals of the College

[www.COSO.org](http://www.COSO.org), 2017 COSO Standard, Committee of Sponsoring Organizations of the Treadway Commission

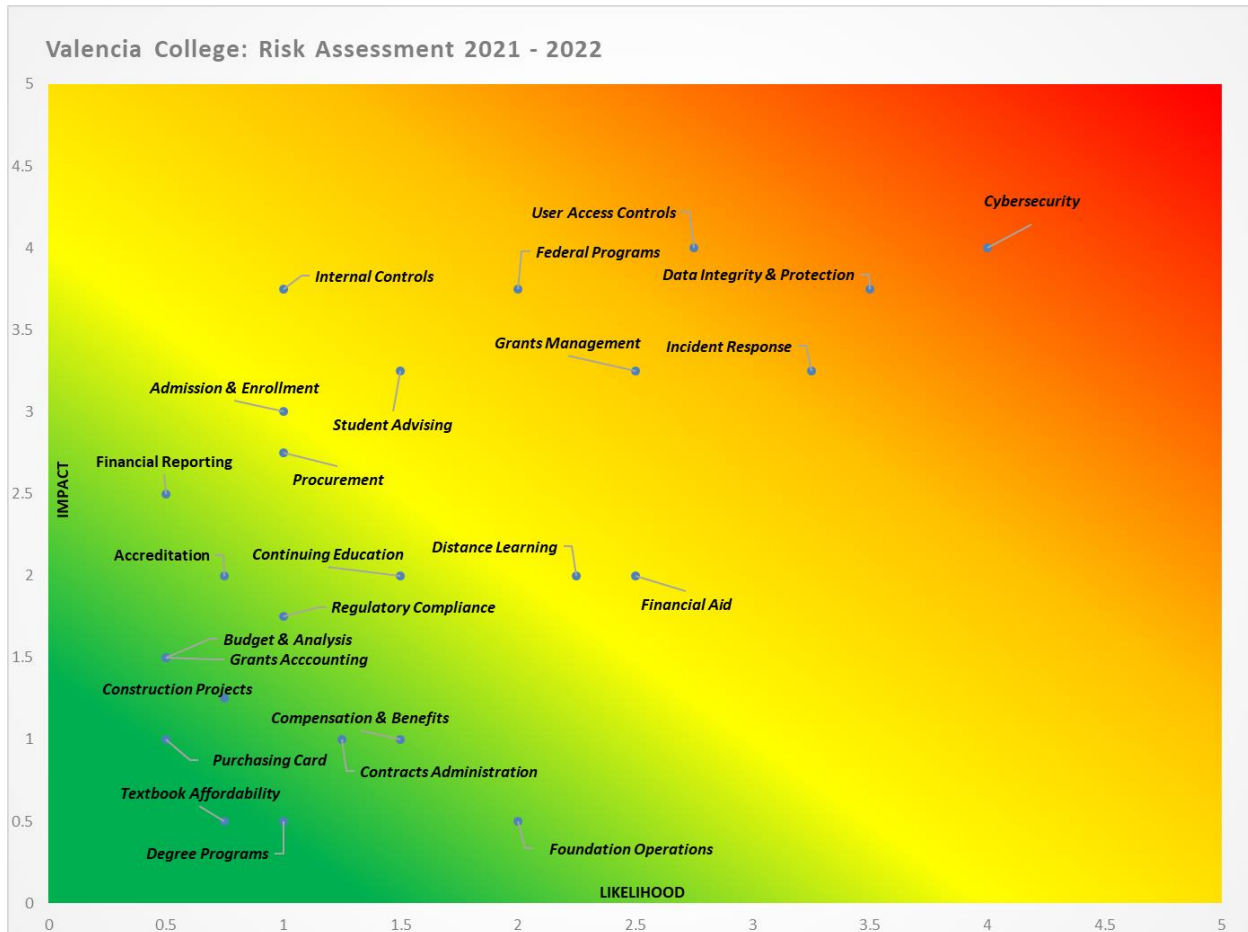
A risk heat map was developed to present the results of the risk assessment process. The evaluation of the likelihood and potential impact of the identified risks was conducted to represent the resulting qualitative and quantitative evaluations of the probability of risk occurrence and the impact on the College in the event that a particular risk is experienced. The development of the heat map includes consideration of the risk appetite of the College, the level of impact that would be material to the College, and a common language for assigning probabilities and potential impacts.

The risk assessment methodology involves a two stage process: An initial screening and qualitative ranking of risks followed by a more quantitative approach of the most important risks. The initial screening took a holistic approach with the support of the senior leadership team, participation and/or input from all key organizational levels that impact risk using a combination of interviews and discussions to perform an initial qualitative assessment of sub-processes across the College. The sub-processes were ranked from 1 (Low) to 10 (High) addressing five categories of risk: *compliance, reputational, financial, operational and strategic*, as well as the following criteria: *higher education industry hot topic, changes in operations and previous audit coverage*. There were 61 sub-processes ranked during the initial screening process of the risk assessment review.

The top 20 sub-processes ranked in the initial screening were then ranked based on impact and likelihood. Impact refers to the extent to which a risk event might affect the College. The considerations assessed in the ranking of impact were scaled on a 1 (Minor) to 5 (Critical) scale based on remediation of disruption and financial loss. Likelihood refers to the possibility that a given event will occur. The

considerations assessed in the ranking of likelihood were scaled on a 1 (Rare) to 5 (Almost Certain) scale based on number of occurrences and percentage chance of occurrence.

A heat map was created to view the portfolio of risks based on the impact and likelihood of the 25 sub-processes to allow for a direct comparison of the highest rated opportunities and risks for consideration and prioritization. This information is used to inform and design the audit plan. This risk matrix is a visual tool to focus management's attention on the most important threats and opportunities and lay the groundwork for risk responses.



## Resources

Cynthia Santiago-Guzman was appointed as the Director of Compliance and Audit in May 2016. Her responsibilities include administering the audit plan and all compliance and audit responsibilities set forth in the department charter.

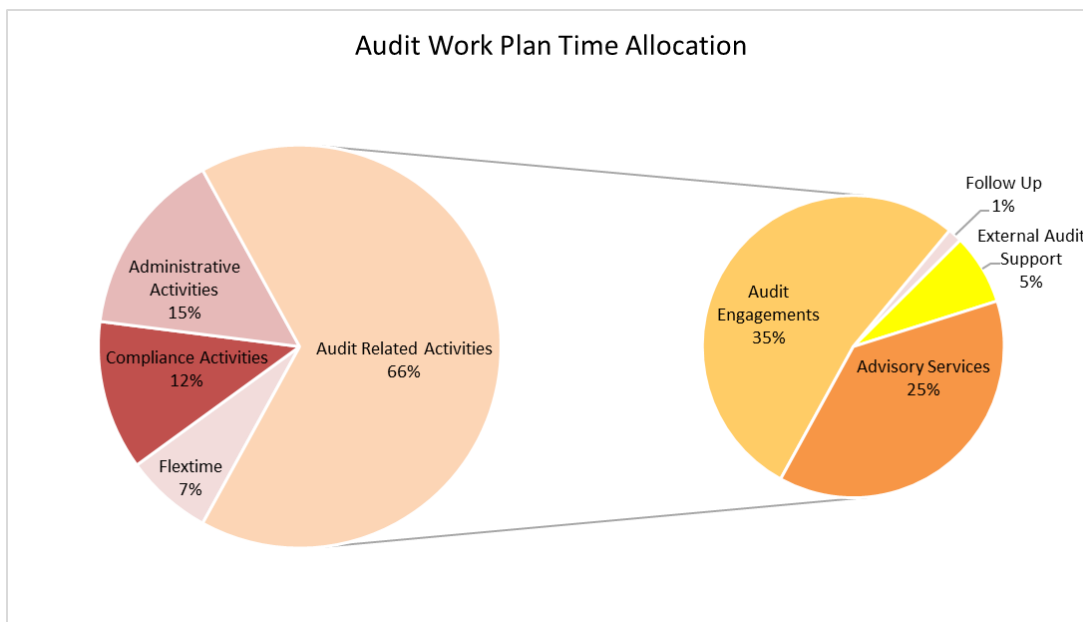
Cynthia has over 25 years of professional experience in the fields of compliance and audit, and currently holds the Certification in Risk Management Assurance from the Institute of Internal Auditors, and the designation of Certified Compliance and Ethics Professional with the Society of Corporate Compliance and Ethics.



The department allocation of one resource for the audit plan has been considered and outlined. The calculation of estimated audit hours is based on total annual hours minus total paid time off and scheduled professional development totaling 1,648 available resource hours. Outsourcing will be utilized in the audit plan, where needed, based on risk and subject matter expertise. The audit work plan provides for allocation of audit, administrative and compliance activities.

<b>Calculation of Estimated Audit Hours Available for Academic Year 2021-2022</b>	
<i>Director of Compliance and Audit (Full Time Employee)</i>	<i>Hours</i>
40 hours a week x 52 weeks a year = Total Annual Hours Available	2,080
Less: Paid Time Off (Vacation, Sick Leave, Holidays)	-352
Less: Professional Development and Training hours	-120
<b>Total Annual Compliance/Audit hours available</b>	<b>1,608</b>
Compliance Activities	200
Administrative Activities	250
Audit Related Activities:	
Audit Engagements	480
Advisory Services	438
External Support/Follow Up	120
Flex Time	120
<b>Total Work Plan Hours Allocated</b>	<b>1,608</b>

The audit work plan estimates the total work plan hours allocated by activity. The proposed audit plan for 2021-2022 has 65% of available hours allocated to direct audit related activities. The plan also includes 25% of available hours allocated to administrative and compliance activities, which includes work on investigations, compliance monitoring, the annual assessment and audit plan reports, website and resource information updates, management meetings, and board of trustees meetings. Flextime of 5% of total hours is budgeted for unplanned or additional support services. The breakdown of the direct audit related activities is depicted in the chart below and estimates that 918 hours will be allocated between audit and advisory engagements after the 7% planned allocation time for external audit support and audit follow up activities, which include corrective action monitoring.



The direct audit related activities for 2021-2022 includes four planned internal audit engagements. Advisory services are currently planned for areas within Finance, Information Technology, and HEERF/CRSSAA.

The Office of Compliance and Audit will assist with any external audit engagements including the four planned audit engagements by the Florida Auditor General's office: Financial Audit, Federal Awards Audit, Bright Futures Audit, and the CARES Act Audit. Follow-up activities include corrective action monitoring of all internal and external audit engagements from current and prior years. Corrective action monitoring provides for review and validation of all management action plans to ensure the root cause of the risk consideration is addressed timely and adequately.

## Proposed Audit Plan

The results derived from the risk assessment conducted, available resources and our professional judgment, formed the basis for the audit plan. Significant changes will be communicated to the District Board of Trustees as appropriate. The audit plan is subject to change as College priorities change and new risks are identified.

VALENCIA COLLEGE  
OFFICE OF COMPLIANCE AND AUDIT  
2021-2022 AUDIT PLAN PROPOSAL

### Audit Engagements

Bookstore Inventory and Operations  
Foundation: Business Operations  
Compensation and Benefits  
Procurement Operations: Internal Controls, PCard

### Florida Auditor General Planned Audit Engagements

Florida Auditor General - Financial Audit  
Florida Auditor General - Federal Awards Audit  
Florida Auditor General - Bright Futures Audit  
Florida Auditor General - CARES Act

### Advisory Projects

HEERF/CRSSAA - Compliance Team / Data Validation  
Information Technology: Projects/New Systems Review, Audit Follow-Up  
Internal Controls Monitoring: Financial Operations, Financial Aid, Information Technology  
Management Requests: TBD  
Special Reviews/Follow-Up: TBD

### Compliance Activities

Compliance Monitoring (New Legislation, Title IX, Clery Act, FERPA)  
Improper Activities/Ethical Conduct Investigations

## Office of Compliance and Audit Charter

### Valencia College Office of Compliance and Audit Charter

#### **Purpose**

The Office of Compliance and Audit is an independent, objective assurance and consulting activity designed to add value and compliance oversight to improve Valencia College's operations. It helps the College accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control, compliance and governance processes. The Compliance and Audit Department administers the College's internal audit program with the objective to assist members of the College and the District Board of Trustees in the effective discharge of their responsibilities as they relate to the College policies, processes, programs, information systems, internal controls and management reporting.

#### **Mission**

The mission of the Office of Compliance and Audit is to provide independent, objective assurance and consulting services, using a risk-based approach to add value and improve the operations of the College. The department provides a central point for coordination and an oversight of activities that promote accountability, integrity and efficiency and assists the College in maintaining a compliant culture.

#### **Organizational Structure and Independence**

The Director of Compliance and Audit reports functionally to the District Board of Trustees and administratively to the Vice President of Business Operations and Finance to ensure departmental independence, promote comprehensive audit coverage and ensure adequate consideration of audit and compliance recommendations.

To maintain independence, the Office of Compliance and Audit is not authorized to:

- Perform any operational duties for the College or its affiliated organizations;
- Initiate or approve accounting transactions external to the Office of Compliance and Audit;
- Direct the activities of any College employee not employed by the Office of Compliance and Audit, except to the extent such employees have been appropriately assigned to auditing teams or to otherwise assist the auditing team;
- Implement internal controls, develop procedures, install systems, prepare records or engage in any other activity that may impair their judgment, must have no personal and external impairments to their independence, and have no direct responsibility or authority for any of the activities or operations they review.

#### **Authority**

The Office of Compliance and Audit provides audit, investigative and compliance services to all entities of Valencia College. Accordingly, the Office of Compliance and Audit is authorized to:

- Have full and unrestricted access to all functions, activities, records, property, information systems and personnel, as needed to fulfill its responsibilities. Information provided to the department will be handled with prudence and confidentiality;
- Obtain the essential assistance and cooperation of personnel in areas of the College where services and activities are performed, as well as other specialized services from within or outside the College;
- Have free and unrestricted access to the President and District Board of Trustees.

### **Duties and Responsibilities**

The Office of Compliance and Audit, in the discharge of their duties, shall be accountable to the Board of Trustees and management to:

- Perform an annual risk assessment of the College's auditable areas to establish risk rankings relative to the adequacy and effectiveness of the processes and programs for controlling activities and managing risk;
- Develop and submit to the District Board of Trustees for approval an annual audit plan that utilizes an appropriate risk-based methodology;
- Perform audits and advisory activities in accordance with the audit plan, including any special tasks or projects requested by management and the District Board of Trustees;
- Periodically provide information to senior management and the District Board of Trustees summarizing the status and results of the audit plan, activities and goals;
- Report significant issues related to the processes for controlling the activities of the College, including potential improvements to those processes and provide information concerning such issues through resolution;
- Conduct special assignments and investigations at the request of the District Board of Trustees, the President, management or as required by College policy;
- Maintain a professional staff with sufficient knowledge, skills, experience and professional certifications to fulfill the department responsibilities;
- Monitor the disposition of planned corrective actions that result from observations or recommendations of internal and external audit engagements;
- Use third-party resources as appropriate to supplement the department's efforts;
- Ensure effective coordination and cooperation with external auditors and regulators, and consider the scope of their work for the purpose of providing optimal audit coverage and avoiding duplication;
- Monitor and promote College compliance with federal and state requirements, as well as all applicable policies, procedures, rules and regulations.

### **Professional Standards**

The Office of Compliance and Audit will conduct its activities in accordance with The Institute of Internal Auditors' *International Standards for the Professional Practice of Internal Auditing*. The IIA Practice Advisories, Practice Guides and Position Papers will also be adhered to as applicable to guide operations. In addition to College policies and standards of conduct, the Office of Compliance and Audit staff shall adhere to The Institute of Internal Auditors' Code of Ethics.

Approved by Board of Trustees  
November 2, 2016