

FY 2022 – 2023 Annual Report

The University of New Mexico Internal Audit Department

Submitted by:

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Mission and Vision

The University of New Mexico Internal Audit Department's (Department) mission is to assist personnel in effectively, efficiently, and economically fulfilling their assigned responsibilities by providing objective analyses of the activities reviewed. In doing so, we work together with University departments to develop, improve, and implement policies and procedures, streamline processes for most efficient use of time and resources, and enhance training.

Organizational Chart



* UNM Health System Internal Audit function has a reporting line to the Internal Audit Director. ** One out of three budgeted positions was filled as of June 30, 2023.

Executive Summary

In fiscal year (FY) 2023, the Department coordinated closely with the University stakeholders to identify high priority areas/audits. The Department focused its resources on complaint investigations as they were received, while conducting planned audits as needed, on the risk-based audit plan.

The FY23 adjusted budget was \$1,185,730, \$70,000 of which came from the departmental reserve, and total expenses for the year were \$1,072,716, resulting in I&G funding exceeding expenses by \$43,014. Departmental reserves increased from \$236,012 at the beginning of FY23 to \$279,026 at FY23 year end. Internal Audit's budget savings is due to a vacant senior auditor position during FY23.



Chart 1 illustrates the percentage of audit work hours performed, by audit type, for FY20 through FY23.

The Department adds projects to the work plan in the following ways:

- The Department includes risk-based (planned) audits based on a risk assessment performed by the Department, with input from the University leadership.
- Management request special requests made during the fiscal year by the President, Board of Regents, and University Management. Because of the source of the requests, these projects are also risk-based and high priority.
- Contractual requirements (information/language contained in a specific contract). Because of the source of the request, these audits are also risk-based and high priority.
- The Audit Director adds investigative audits resulting from complaints which after a preliminary investigation, may result in a significant risk to the University.

Management Advisory Services provided include investigating complaints of allegations, certain management requests, consulting, and department-oriented initiatives.

Fiscal Year 2023 Audit Plan

The FY23 audit plan included 12 projects. The projects consist of:

- 3 completed audits/reviews;
- 4 audits/reviews in progress at the end of FY23; and
- 5 deferred audits.

The Audit and Compliance Committee ("Committee") approved twelve (12) proposed audits on the FY23 audit plan, nine (9) of which rolled over from FY22.

See Chart 2 below for the status of the FY23 audit work plan. Contributing to the 25 percent completion rate and 33 percent in-process rate of FY23 audits (compared to 31 and 38 percent respectively in FY22), were a senior internal auditor separation, larger planned audits which required more resources, and 56 percent of 5,871 net hours available spent on investigations primarily stemming from EthicsPoint complaints.



Fiscal Year 2023 Audit Plan Detail, as of June 30, 2023:

Report No	Report Name	Audit Type	Status
2021-03	Audit of UNM Children's Campus	Risk-Based	Completed
2023-01	President's Travel and Entertainment Expense	Contractual	Completed
2022-04	UNM Valencia Branch Campus	Risk-Based	Completed - Follow Up
2022-03	Project Echo	Risk-Based	Report Writing
2023-02	2023 Risk Assessment	Risk-Based	Report Writing
2023-04	Office of Medical Investigator	Risk-Based	Fieldwork
2024-01	President's Travel and Entertainment Expense	Contractual	Planning
TBD	Information Security	Risk-Based	Planning
TBD	Anderson School of Management	Risk-Based	Assigned
TBD	Non-Standard Payment (NSP) Audit	Risk-Based	Deferred
TBD	Enrollment Management	Risk-Based	Deferred
TBD	Internal Medicine	Risk-Based	Deferred

Note: The hours spent on the reports above and on follow-up procedures are included in the "Audit Plan" in Chart 1, FY20 through FY23 – Percentage of Direct Audit Hours by Audit Type.

Accomplishments

- Provided valuable on-the-job training to a student intern.
- Collaborated with the UNM Main Campus Compliance Office, HSC Privacy Office, HSC Compliance Office, and Health System Internal Audit on a regular basis. Also, worked together with the assistance of IT Support to complete FY23 Risk Assessment.
- Helped facilitate EthicsPoint hotline operations by serving as Administrator.
- Assisted UNM Health System in policy development and guidance for required reporting of dishonest and fraudulent activities.
- Continued coordination with external auditors to ensure appropriate coverage of audit risk and collectively reduce audit duplication on the University's annual external financial audit.
- Completed a migration of audit software from TeamMate AM to the TeamMate+ version. Attended various department-wide trainings for the new TeamMate+ platform.
- IA management and staff served as professional and community board members for the Albuquerque Chapter of Institute of Internal Auditors (IIA) and City of Albuquerque Accountability and Governance Oversight (AGO) Committee.

the Board of Regents' Audit and Compliance Committee.			
Measure	Target	Results for FY23	
Audits and reviews are	50% of completed audits and	3 of the 3 completed projects	
relevant and address risks.	reviews originate from the risk- based audit plan.	identified as risk-based (*) on the audit plan.	
Audits and	1	89% of recommendations	
recommendations add	implemented within specified dates.	implemented within specified dates.	
value.			
	After-audit surveys (**) rate value- added at 4 or above (on a 1-5 scale).	0	
Audits are timely.	Complete 75% of audits within 15%	Completed 75% of audits within 15%	
	of budgeted hours.	of budgeted hours.	
Performance Goal 2 - Audits result in more efficient and effective University operations.			
Measure	Target	Results for FY23	
Audits and reviews identify	Potential savings, cost avoidance,	None specifically identified.	
potential cost savings and	and increased revenues are greater		
increases to revenue.	than or equal to 100% of the		
	Department budget.		
Audit recommendations	50% of reports include University-	One (1) of two (2) reports included	
address University-wide	wide recommendation(s).	University-wide recommendations.	
issues.			

Performance Goals for Fiscal Year 2023

Performance Goal 1 - Provide quality audit reports that are useful to auditees, management, and the Board of Regents' Audit and Compliance Committee.

Performance Goal 3 - Reduce potential liability to the University by coordination of investigations of allegations of fraud and employee misconduct.

Measure	Target	Results for FY23
Coordinate investigations and report on allegations.	Work with Human Resources, University Police, University Counsel, State Auditor, and departments, as applicable, to conduct timely investigations.	23 cases closed in FY23.
Increase accountability by assisting University in documenting wrongdoing by employees.	All cases of potential fraud or potential violations of criminal statutes turned over to proper authorities for prosecution.	Three (3) letters to the State Auditor reporting potential criminal violations.
Provide follow-up information to individuals who allege misconduct at the University.	Notify individuals within 10 days of action taken. When investigation is complete, notify complainant within 10 days.	action taken and resolution of
Performance Goal 4 - Prev communication.	vent potential problems through pro	pactive consulting, training, and
Measure	Target	Results for FY23
Present training on various topics to University faculty and staff.	Continue participating in Grants management training.	The Department participated in updating the materials of the course in prior years; however, made no specific update in FY23.
	Revise and present fraud training.	Target not met because of other priorities.
Communicate corrective	University-wide communications	Target not met because of other

* As noted in the Introduction, Management Requests and Contractual Requirements are risk-based
because of the nature of the request.

priorities. However, Department

community by posting audit reports with recommendations and responses on the website for public viewing. IA will revisit the area to determine a practical communication protocol.

communicates with University

provide Audit Tip of the Month

through the list serve, or on

Department web page.

actions University-wide to

address systemic problems.

** The survey seeks feedback on a number of performance factors, including objectivity, professional proficiency, scope of work, audit purpose, feedback on findings, minimization of disruption of normal activities, timeliness of audit report, value-added results, etc.

The Internal Audit Department's Hours by Category

The Department's professional staff worked a combined total of 14,269 hours. The Department tracks hours worked on detailed time reports, showing the specific audit or other category where the professional employee spent his or her time. The auditors may work on multiple audit projects at any given time; therefore, auditors track time spent each day on various projects. The table below shows the total hours, with non-audit/investigation classifications of hours subtracted out, leaving a remainder of 5,871 net hours devoted to audit and investigatory work.

FY23	Hours
Total Available Hours	14,269
Less: IT Support and Application Admin	631
Training Attended/Provided	829
Leave and Holidays	2,544
Administrative and Other Duties	4,394
Net Audit and Investigative Hours Available	5,871

Chart 3 below breaks down the percentage distribution of the audit versus investigative hours.



Detailed explanation of each category follows.

<u>Audit</u> - The hours the professional audit staff spent on specific audits or projects, including significant work related to reporting misconduct. Hours spent on follow-up procedures are included in this category.

<u>Investigation and Consulting Work</u> - This category represents hours spent on reports of fraud and misconduct that do not usually result in extensive work by the Department, and hours spent on smaller management request tasks. The Department receives fraud and

misconduct complaint cases assigned by the UNM Compliance Office – Main Campus through its hotline, walk-ins, and concerns expressed by UNM leadership.

<u>IT Support and Application Admin</u> - The Department's resources mainly used to support the Department's general technology and TeamMate software.

<u>Training Attended/Provided</u> - Each professional staff member in the Department must attend a minimum of 40 hours of continuing professional education each year.

<u>Leave and Holidays</u> - This category captures sick, annual and holiday leave. Employees take leave in accordance with University policy.

<u>Administrative and Other Duties</u> - Administrative activities include attending Regents' meetings, attending high-level University meetings, reading professional literature, preparing monthly and quarterly reports, participate with UNM Hospital's internal audit function, preparing for Audit and Compliance Committee meetings, preparing correspondence to the State Auditor and other officials, attending Departmental meetings, reviewing internal payroll and other financial documents, and other varied duties.

The Internal Audit Department's Hours by Department/School/College

Chart 4 illustrates a breakdown of the Department's professional staff hours by category: Department/School/College. The percentage of time spent in these areas varies each year based on the audit plan, audit follow-up, management requests, committee and consulting work, and investigations of fraud or misconduct.



Chart 4 - Percentage of Hours by Department/School/College FY23

The Internal Audit Department's Hours for Fraud, Misconduct, and Consulting

The Department provides investigation and consulting. The amount of Department time spent in FY23 on providing guidance, reviewing reports of fraud and misconduct, and consulting totaled 3,312 hours. The contacts are through management requests, walk-ins, and the University hotline.

The misconduct and fraud process is as follows:

- Intake includes interviewing complainants, and reviewing e-mails, letters, and hotline reports for financial misconduct only.
- Review includes reviewing information provided by the complainant, interviewing other involved parties, reviewing University documents, and other evidence as necessary. The review process includes documenting interviews and analyses.
- Audits the Department will perform an audit, based on the information received from the complainant, if the information may result in significant risk to the University.
- Tracking the Department tracks referrals from intake through resolution.

Future Plans/Goals

The Department plans to improve their efficiency and image, assist employees, and enhance internal processes, by:

- Increasing number of University-wide recommendations.
- Expanding cost savings and/or revenue enhancements when appropriate, and if applicable.
- Continuing to work with the Anderson School of Management to hire student professional interns, thus providing these students with practical internal audit experience.
- Continued collaboration with UNM Compliance and HSC Compliance Offices to identify and address project level risks.

Personnel Appointments and Separations

Appointment of Staff None

Separations of Staff <u>Name</u> Kevin Enright	Job Title Internal Auditor, Senior	<u>Action</u> Separated	<u>Date</u> April 28, 2023
Courtney Hanan	Student	Separated	July 15, 2022

Service to the Profession and Public Service

Department personnel are dedicated University employees and active members in both their profession and the community. The audit staff members belonged to the following professional organizations during fiscal year 2023:

- Association of College and University Auditors
- Institute of Internal Auditors
- Information Systems Audit and Control Association
- Association of Certified Fraud Examiners
- American Institute of Certified Public Accountants

Director's Communication

Pursuant to The Institute of Internal Auditors' *Standards*, the chief audit executive (CAE) communicates the following part of a quality assurance and improvement program to senior management and the Committee:

Internal Assessments:

• Ongoing monitoring - The Department has established ongoing monitoring of the internal audit activity. A number of processes and tools have been used which include engagement planning and supervision, standardized audit practices and templates with detailed procedures, reviews of audit deliverables, and documented signoffs of work prepared and reviewed in paperless audit management software. Areas in need of improvement are identified, evaluated, and determined as needed.